Funded by
European Union
Humanitarian Aid

Basic Needs Assessment Guidance & Toolbox

Part 2: How-to Guide & Tools

Final version (unedited)

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Acronyms

BNA	Basic Needs Assessment
CGD	Community Group Discussion
ENA	Essential Needs Assessment
ERC	Enhanced Response Capacity
HEA	Household Economy Approach
HHI	Household Interview
MPG	Multipurpose Grant
ODK	Open Data Kit
ROAP	Response Options Analysis and Planning
SDA	Secondary Data Analysis
UNHCR	United Nations High Commissioner for Refugees
VAM	(WFP) Vulnerability Analysis and Mapping Unit
WFP	World Food Programme

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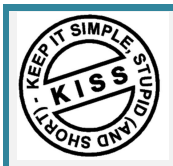
This How-to Guide is Part 2 of the BNA Guidance & Toolbox, with Part 1 describing the background and concepts underpinning the BNA approach.

The How-to Guide describes the sequence of practical steps necessary to ensure a successful BNA during emergencies, from initiation of the BNA up to reporting and dissemination of the final findings. The chapter details the main activities and refers to other manuals and guidance when appropriate. The section on analysis is more detailed and specific guidance, tools and templates can be found in the BNA toolbox available here.

Box 1: Recommendations to simplify, from ERC Consortium Symposium in Addis Ababa (26-27 April 2018)[1]



The BNA takes time to implement, a luxury not always available in emergency contexts. Sufficient lead time is necessary for: secondary data review, contextual adaptation of the questionnaires and their coded version when using tablets, translation of the questionnaires to local language as necessary, re-calculating sample sizes based on changing conditions, training enumerators, securing necessary approvals from local officials, piloting the questionnaire and making final changes prior to roll-out, data analysis, validation and interpretation of the findings with sector experts, and – finally - reporting.

However, there are several ways in which the tools and their sequencing can be streamlined to ensure that data is made available in a timely and less labour-intensive fashion. This can be achieved by modularising the questionnaires (as proposed in this improved version) and / or creating digital instruments that generate samples, collect data (already available), process and analyse data, and produce infographics. Use of tablets also saves significant time during the data analysis phase and lowers the incidence of errors, as learned in the Borno State (North-East Nigeria) and Fafan zone (Somali region, Ethiopia) pilots.

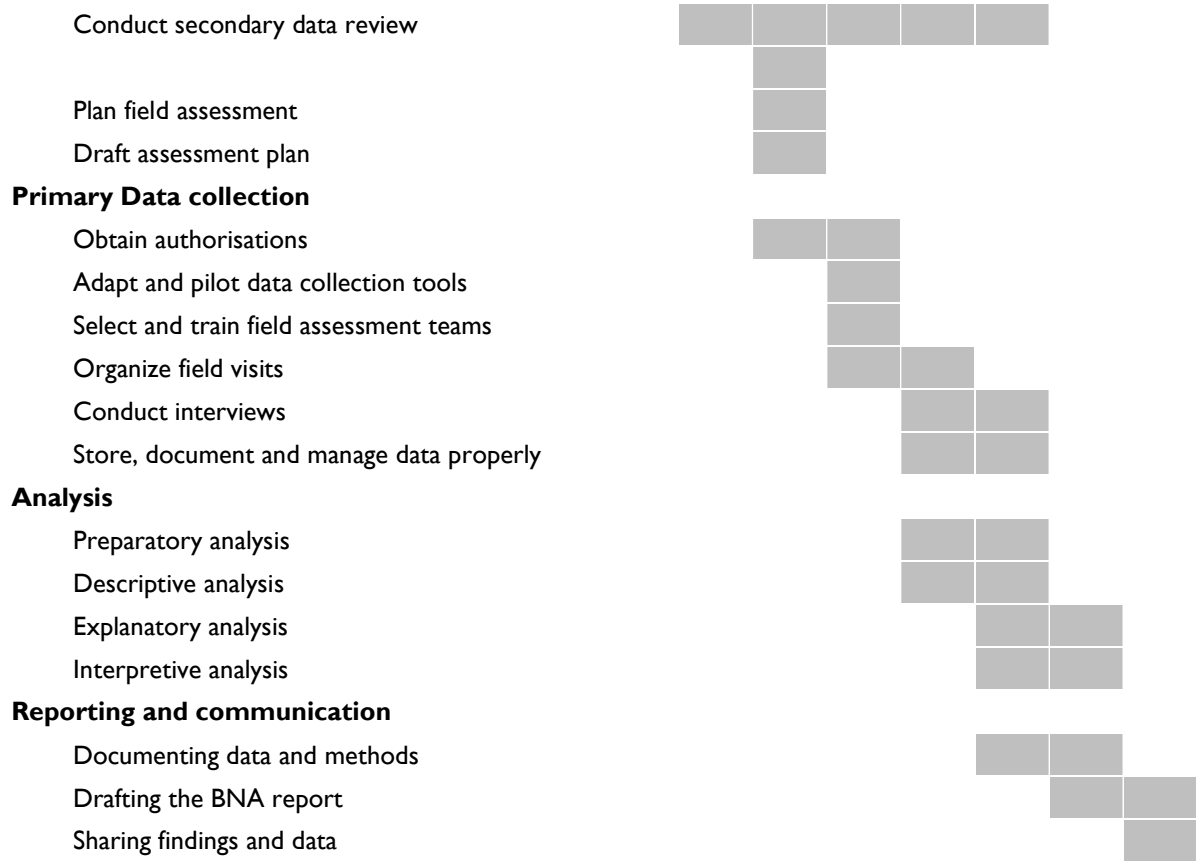
1 Overview of BNA activities

A quality and credible BNA is not created in a vacuum but requires careful planning and attention to context and capacities. The Gantt chart below provides with an overview of key activities required to complete a BNA during a protracted crisis, from initiation up to reporting and dissemination of the final findings. All steps are detailed in **Error! Reference source not found.**. The analysis section, particularly, summarizes the steps and activities required to approach, process and evaluate information in a structured and controlled way. It can be used as a guide by humanitarian staff to ensure their efforts in data collection and analysis will lead to quality outputs and help them in planning or anticipate issues.

Table 1: BNA plan of action

Activities	W1	W2	W3	W4	W5	W6	W7
Design and planning							
Define objectives and scope of the assessment							
Plan/revise coordination arrangements, identify core team							
Adapt analysis framework/ plan							

[1] Source: ERC Consortium for the Uptake of MPG (2018) *Learning and Way Forward from the Final Symposium. Available at: http://www.cashlearning.org/downloads/mpg-toolkit-pdfs/symposiumreport20180601.pdf*



2 Resource requirements

The BNA can be implemented by a single organisation but is better achieved through mobilisation of several humanitarian organisations, as findings of assessments are then endorsed, owned, and taken up through involvement of different partners and stakeholders.

The BNA should be planned and carried out through partnerships with government (where feasible), humanitarian actors, national civil society, and with the participation of the affected population. In addition to saving time and resources, a coordinated approach will ensure complementarity in data coverage and will avoid duplication of efforts.

Leading the BNA includes a spectrum of responsibilities: setting objectives, identifying necessary technical expertise, coordinating data collection and analysis activities, sharing findings to inform response planning and programming, and reporting back to the affected population. A core team will lead and coordinate the process, supported by sector experts and other relevant technical specialists with a good understanding of the local context.

The size of the team required will vary depending on the resources available and the speed and quality of results expected:

- The core team should include at a minimum one coordinator and one technical function to lead secondary data and primary data collection, analysis and reporting. Technical roles can be split between different people if resources are available.
- The core team should be supported in the implementation of specific functions at key moments of the process. Sector experts or focal points, identified by partners of key stakeholders, will provide inputs and feedback to the tool design, secondary data review and

analysis of the results. They will also participate to workshops to review the results and work on the response analysis. Field teams, supported by team leaders, will also be drawn from partners or key stakeholders and support field data collection. Field team leaders will provide useful inputs to the analysis and interpretation of the results and response analysis.

For small, sub-national level crisis contexts with good assessment preparedness, existing capacity and resources should be sufficient. In the case of a large-scale or national level crisis, additional human resources will likely be required, depending on the workload and volume of data available.

3 Roles and responsibilities

The table below details the functions and roles required to implement successfully a BNA for a medium scale emergency. Bigger emergencies will require additional resource or to split some of the core function described below.

Table 2: Stakeholders, activities, and tasks

Stakeholder	Main activities and tasks
Assessment coordinator	Oversees the process and decision making; leads core team; encourages and coordinates participation of key humanitarian actors; ensures permissions are obtained; oversees quality of BNA outputs; and ensures their dissemination through the appropriate channels.
Assessment expert	Conducts secondary data review; adapts field data collection tools and forms; selects areas and/or population groups to visit; trains and supervises field teams; validates and cleans primary data; analyses and interprets data with experts; and prepares report.
IM/GIS	In case of large scale emergency, consider support from an Information Management/Geographic Information Systems (IM/GIS) specialist, to be involved in the design and planning of the primary data collection (especially sampling); adaptation of assessment tool; digital data collection (if any); database, mapping, cleaning and charting of results.
Field teams	Representation of a cross section of BNA stakeholders should be considered: government, UN, NGOs, affected population and private sector. Gender balanced composition should be always ensure, bearing in mind that male and female interviewees may be available at different times of the day. Previous experience in field data collection are essential, and – possibly – also familiarity with digital data collection devices and applications. Speaking the local language is an essential pre-requisite, as well as familiarity with the local context. Gender sensitivity and do-no-harm approach are required.
Field team leaders	Appointed by the assessment coordinator, the field team leaders are trained to lead the field assessment teams. They liaise with local authorities and security personnel to ensure access to sites and safety of enumerators in their team; ensure that agreed data collection plans protocols are followed by enumerators in all select sites; conduct primary data collection and lead daily debriefing with their teams. They also ensure that findings and raw data are produced and sent to the assessment coordinator on a timely basis.
Enumerators	Collect primary data, under the supervision of the field team leaders and in compliance with agreed plans and protocols.

Sector experts	Participate as necessary to the planning, design, and implementation of the assessment; they contribute with resources for secondary data review; they interpret and validate findings. In addition to sector experts (including Protection), the BNA should also involve cash experts.
Government	Clears and authorizes primary data collection; may accompany the data collection effort to ensure access in (sensitive) field locations. Include government representatives in the field teams, if and when possible.

4 Design and planning of the BNA

The design phase precedes any data collection or analytical processes and is about selecting the best strategies for ensuring the basic needs and response analysis delivers quality outputs. It elaborates and refines the focus, approach, method, tools and activities necessary to provide relevant and credible conclusions. Careful attention to the design phase will help save time later. When properly executed, it ensures the broader context and considerations such as speed, cost, quality, ethics, analytical standards, consensus, participation, etc. are considered. In addition, good design breaks down a complex issue into something that can be managed in a limited time and with limited resources, and still produce useful and quality results. Careful planning and engagement with key stakeholders helps to ensure that all critical issues have been taken into consideration and all required resources are anticipated and provided.

Box 2: Expected outputs of the design stage

Terms of Reference: Overall aim of the BNA, specific objectives, focus (e.g., affected groups, geographical areas and basic needs) and timeframe.

Coordination modalities and arrangements: If multiple actors are involved, a detail of roles and responsibilities, commitments of material, human and financial resources, etc. Terms of reference of the BNA core team.

Analysis framework and analysis plan: This is the methodology that the assessment and analysis will be built on; giving an overall framework and detailing information needs, indicators, data collection techniques, sources, sampling approach, thresholds, and other indicators to compare against, etc.

A secondary Data Review (SDR): including an assessment registry, an organized repository of available reports and datasets stored in a shared and protected workspace and an SDR report with main findings, information gaps and recommendations.

Work plan: Activities, resources required, key milestones and budget.

Supporting documents: style guide, visual identity, security or data protection guidelines, cleaning and data processing procedures, job description, branding, etc.

A draft outline of the final product(s): report-template with headlines, description of visuals, requested maps, etc. as well as a strategy for dissemination, including release date, channels, recipients, groups, media, etc.

4.1 Define the objectives of the assessment and its scope

Following the decision and launch of the BNA, a meeting should immediately take place among decision makers (Inter-Clusters Coordination Group, Humanitarian Country Team, Government, etc.) to

establish the objectives of the assessment, the thematic focus, and its scope.[2] This decision should be driven by the main intended users (clients) of the assessment findings, i.e. those who are responsible for making strategic, programmatic, and operational decisions in the response and need a certain set of information to do so.

Objectives and scope to be validated among stakeholders would, as a minimum, include the following:

- The basic needs to be assessed
- Geographical areas of interest
- Affected groups of interest
- Decisions to be informed
- Information modules to be included in questionnaires
- Timeframe for delivering the outputs
- Type of outputs and dissemination channels

With regard to the information modules that should be included in questionnaires, that decision will depend on identified information gaps, in a way that the BNA scope will be complementary to other recent assessments or assessments that are planned to be conducted in parallel, if any (e.g. VAM, HEA). Refer to: **Error! Reference source not found.**; **Error! Reference source not found.**; **Error! Reference source not found.**.

4.2 Plan/revise coordination arrangements and identify core team and supporting sector experts

Once the objectives and scope are agreed upon, the key stakeholders will decide the coordination arrangements for the assessment and identify available and missing technical resources and capacities to support the process. If assessment-preparedness mechanisms and platforms exist already, they should be reviewed and activated as necessary.

The structure and size of the BNA core team will vary with the scope of the assessment undertaken, the volume of information to collect, the type of crisis and where the assessment takes place. Large, joint assessments will require a bigger core team with different skillsets including assessment coordination and planning, supported by more technical capacity (e.g. a geographic information system (GIS) officer, analyst, logistician, data entry clerk, etc.).

Sector expertise to support the BNA team and process should be identified and engaged to ensure early buy in and relevance.

In some situations, several hubs will need to be planned for and resourced. The BNA coordinator will need to plan and anticipate expertise for both secondary and primary data collection, drawing from partners' staff and in-kind participation.

The output of this step will be the appointment of the BNA core team, whose roles and responsibilities (and those of each member) will be defined and laid out in a terms of reference document. For guidance on core team composition and roles and responsibilities, refer to 3 Roles and responsibilities.

[2] For sudden onset, since the crisis impact is often uncertain during the first days, objectives need to be broad to allow for screening of a large range of issues or impact. Generic objectives for BN-ROA can be determined by basic facts and assumptions derived from the location, type of hazard, sectors affected and lessons learned.

4.3 Adapt the BNA framework/plan

The core team should always review and adapt the BNA framework to the local context, the type of crisis, choose the appropriate information modules, and add further modules if other information needs are necessary, e.g. a greater focus on displacement, humanitarian access, livelihoods, etc. Context-relevant categories of analysis should also be defined at this stage to help focus the secondary and primary data collation and the analysis strategy (i.e. decision to compare humanitarian outcome on urban vs. rural areas, or male vs. female, etc.). For the entire set of information needs agreed by partners, the team should develop an analysis plan, detailing:

The standard analysis plan should be revised accordingly to define the required information needs (i.e. choose the modules among those available) and accommodate for additional information needs (i.e. design additional modules, as required).

- What data to collect (following the adapted Framework);
- Where to access the information (secondary data review or primary data collection, sources, data collection technique);
- What types of analyses will be required to interpret it;
- Where this information will be reflected in the final report.

4.4 Conduct secondary data review

Secondary data plays a crucial role in BNA. It is reviewed and analysed to decide if further research is required and if a field assessment is necessary to fill critical information gaps. The core team is in charge of collating the secondary information. Experienced staff will always be required to analyse secondary data, and the assessment expert should liaise with sector specialists to gather the relevant information, analyse the data and formulate assumptions or recommendations.

The staff undertaking the secondary data review must have quantitative and qualitative research and analysis skills to ensure a comprehensive and accurate review and make the best of the available information. Both pre-crisis and in crisis secondary data should be reviewed to allow for time comparisons when relevant.

The collated assessment reports and data should be recorded in an assessment registry, which stores basic information about the data sources and methods used for collection. In addition, it is also important to establish a data repository and archive all data and make it accessible to the stakeholders involved.

- Pre-crisis secondary data can be used to provide background information about the affected areas and identify problems, vulnerabilities and risks that existed before the crisis and that may have been exacerbated by the current crisis. Pre-crisis information can also serve as the baseline for assessing the impact of the disaster, comparing the situations prior to the crisis and post-disaster. This is particularly useful when it comes to differentiating the direct impact of the crisis from pre-existing or chronic issues. Lessons learned from similar past events, in terms of priority needs and interventions, are also valuable. They can help developing assumptions as to how different age and gender groups--including persons from minority groups or with specific vulnerabilities--may have been differently affected, how the situation affected their social and economic roles and responsibilities within the family and the community, and whether certain groups were forgotten/excluded during relief efforts.
- In-crisis secondary data is information provided during the crisis. When a disaster occurs, NGOs, UN agencies, media and governments will start collecting and sharing data relating to

the disaster. Collating and analysing in-crisis information will provide an understanding of the effects of the current crisis and, when compared with pre-crisis information, help assess the impact of the disaster.

Table 3: Main information needs to gather from secondary data review

Pre-crisis data	In-crisis data
Population figures and demographics (e.g. population breakdown by sex, age, administrative areas, etc.)	Humanitarian profile[3] and affected groups location, types and numbers
Demography and average family size	Geographical scope and scale of the crisis
Minimum expenditure basket, poverty line	Unmet basic needs, e.g. from sector assessment reports
Market functionality and prices	Displacement drivers, trends, and patterns
Main livelihoods and income sources	Operational constraints and humanitarian access
Minimum emergency response package per sector	Stakeholder capacity and ongoing response, including national actors (i.e. government, civil society, and human rights organizations), international actors, and affected populations (i.e. their capacities, coping mechanisms, and community-based protection mechanisms).
Lessons learnt on use of cash-based intervention in the past	Crisis drivers and contributing/aggravating factors
Vulnerabilities and risks	General social, economic, security, and political context, as well as applicable legal and policy frameworks
Sector baseline information, e.g. shelter, health, WASH, food security, nutrition, education, etc.	Historical, political, and social dynamics within and between groups, including marginalized groups and relationships between displaced populations and host communities
Assistance being provided in the assessment locations by the Government and development community, to whom, from when to when, challenges encountered	Who-does-what in the humanitarian response and challenges encountered.
Contingency plans	New or aggravated vulnerabilities and risks
Seasonal calendar and upcoming events (election, winter, rainy season, etc.)	Market analysis and price monitoring
Findings from Household Economy Approach (HEA) baseline analysis, if any	Findings from Household Economy Approach (HEA) outcome analysis, if any

[3] See IASC note on the humanitarian profile at https://www.humanitarianresponse.info/system/files/documents/files/iasc_guidelines_on_the_humanitarian_profile_common_operational_dataset_2012-08-07_EN.pdf for more details on affected groups.

To know more on: Secondary Data Review

- ACAPS 2014 Technical Brief Secondary Data Review (sudden onset disasters)
- IASC 2015 Multi Sector Initial Rapid Assessment guidance (MIRA)
- Save the Children 2008 The Practitioner's Guide to the Household Economy Approach
- UNHCR 2017 Needs Assessment Handbook
- UNHCR 2018 Secondary Data Review Guidance
- The Data Entry and Exploration Platform is a software specially created for secondary data review in humanitarian emergencies

4.5 Plan field assessments

Careful appraisal of each context is necessary to ensure that appropriate and sound methodological approaches are selected for the field assessment. The secondary data review will provide valuable information on information gaps, existing opportunities and risks that might influence the design of field data collection. BNA core team should tailor their approach to the context and optimize the methodology for speed, cost and quality, based on a clear understanding of objectives and resources/time/expertise available.

- **Select sites and population groups to be visited**. Not all members of the affected population will experience an emergency in the same way. One of the key objectives of the BNA is to show how different population groups are affected and to compare the severity of conditions of each. For this reason, the recommended unit of reporting for BNA is the affected group, as described in the country humanitarian profile. The core team should refer to the BNA objectives to identify geographical locations and affected groups to assess.
- **Choose the most appropriate sampling strategy**. Sampling is the process of selecting a small number of elements from a larger, defined target group. In most assessments, a sample of population or sites will need to be created because time, resource, and other constraints make it impossible to assess all populations and sites. This selection may be carried out through probability or non-probability sampling, the choice of which will depend largely on the availability of resources to achieve the required sample size, expertise in statistical analysis and the degree of precision and accuracy required by the end users of BNA. Results from representative probability sampling can be extrapolated from the study population to a broader population. Any assessment findings from an exercise using non-probability sampling, on the other hand, cannot be extrapolated statistically and can describe only areas visited and individuals interviewed.

In general, rapid assessments after sudden onset crises will use non-probability sampling due to lack of time, while in-depth assessments will use probability sampling. In addition, probability sampling generally consumes more resources than non-probability sampling. As such, when choosing the methodology, there is often a trade-off between the representativeness and diversity of the sample, and the efficiency and timeliness with which data can be collected. For protracted crises, more time and resources are generally available, and the core team should seek to collect more representative information. In such situations, in order to allow for the generalization of results to the overall population of interest, the use of probability sampling is recommended. Determining and designing the most appropriate sampling strategy can be difficult and it is recommended to seek support from an assessment expert to choose the best sampling strategy. Factors commonly influencing the choice of sampling method include the following:

- Nature and quality of the sampling frame;
- Accuracy and precision requirements;
- Type and level of detail of analysis expected;
- Available resources (time, human, material, financial, technological); and
- Context and operational concerns (e.g. humanitarian access).

To know more on: Site selection and sampling methods

- ACAPS 2012 Technical Brief Purposive sampling and site selection
- ICRC 2017 Acquiring and analysing data in support of evidence based decisions
- UNHCR 2017 Needs Assessment Handbook
- UNHCR 2017 Annex 4: Sampling Guidance of the Needs Assessment Handbook

4.6 Draft the BNA plan

Before starting the field data collection, consolidate the outputs of all previous steps into an assessment plan or an updated ToR and share with partners. The following outlines may be used to summarize the plan:

Box 3: BNA plan outline

1. Objectives
   - Specific objectives
   - Geographical areas, groups, basic needs to be assessed
   - Decisions to be informed and timeframe
   - Frequency of reporting
2. Secondary data review
   - Summary of findings
   - Information gaps
3. Analysis framework and plan
   - Information needs and choice of modules (adapted BNA Framework)
   - Analysis plan, including sources and data collection techniques
4. Coordination arrangements
   - Coordinating agencies and partners list
   - Coordination structure and team's ToR
   - Data ownership and information sharing protocols
   - Resources required (human, financial, material) at different steps of the assessment
5. Interpretation and validation of findings
   - List of sector experts and other key informants to be consulted
   - Modality and timeframe of experts' consultation
   - Guiding questions, based on primary data analysis
6. Dissemination plan
   - Type of end products
   - Final report templates
   - Target audience
   - Dissemination timeline
   - Data sharing protocols

5 Primary data collection

After designing and preparing the assessment, and most importantly after having conducted a Secondary Data Review (SDR), relevant and accurate primary data is collected to populate the analysis framework. The BNA uses two primary data collection instruments to gather data from the affected population, namely the Community Groups Discussions (CGDs) and the Household Interviews (HHIs).

Box 4: Expected outputs of the primary data collection stage

Database of primary data: Excel-sheet or similar containing clean data from CGDs and HHIs, including common identifiers for comparisons across databases and a data dictionary providing with a description of each field.

Primary data should not be collected until an SDR is first conducted. The information needed is sometimes available through secondary data and valuable time and resources do not need to be spent collecting this information. Furthermore, SDR will highlight geographic and thematic information gaps and provide a better understanding of what information still needs to be collected (and from where), leading to better designed and more targeted primary data collection. SDR should also continue during primary data collection as to ensure in-crisis information is properly stored and available for comparison with the results of the primary data collection.

Since data comes in multiple formats, it must be organized, managed, documented and safely stored before it can become useful as a source and used as evidence for analysis. Data management precedes analysis and no proper analysis of the field data will be possible until measures for data organisation, categorisation, and storing are in place.

Lesson learned 1: Primary-data issues to be considered

While quantitative data is useful, in practice the accuracy of the data remains questionable due to difficulties in implementing a proper probability-based sampling including: outdated population data and non-existent sampling frames; inaccessibility of areas due to conflict; missing households and inability to conduct repeat visits due to time constraints.

Data accuracy can also be impacted by: questions that rely on long-term memory (e.g. requesting information on seasonal needs over a year or total expenditure over a month); incentives to over-report needs and under-report income in order to receive greater assistance; and the capacity and experience of enumerators and their understanding of the questionnaire, particularly when translating. In addition to sampling-related and accuracy shortcomings, quantitative data does not offer a comprehensive, deep understanding of the dynamics and pathways behind the figures. Qualitative data, including information from previous assessments, key informants, and experts, is useful and enriches BNA findings by interpreting and explaining them. While secondary data review and validation with experts are already part of the methodology, their importance should be emphasised.

Community group discussions provided useful verification and supplementary data to the household questionnaire and can be conducted in less time than a representative number of household assessments. However, group discussions are typically dominated by few individuals. One recommendation to improve (shorten and focus) the community group discussions is that they should focus on collecting data that households may not have but local leaders may be privy to (e.g. local government expenditure on providing public services).

5.1 Obtain authorisations from (local) authorities

There is no one fixed rule around the type of authorisation required from (local) authorities to carry out assessments, as that will depend on the context and the way the government operates. Nevertheless, as a bare minimum, the local authorities will have to be informed with sufficient notice about the purpose, timeframe, locations, and type of field activities; in addition, it is recommendable that each team member carries with them a letter of introduction at all times. In some cases, the government may require the signature of a Memorandum of Understanding testifying that endorsement from competent authorities has been granted. The area manager / head of office of the organisation leading the assessment should able to advise on the most appropriate course of action.

Lesson learned 2: Pay visit to local authorities before fieldwork

In sensitive contexts (e.g. active conflict, contended areas), one day should be allocated to pay visit to local authorities to inform them about the field work, demonstrate endorsement from competent authority, and discuss concerns and terms and conditions to be fulfilled (e.g. a representative of the local administration to accompany the field teams).

5.2 Adapt and pilot primary data collection tools

The core team in coordination with sector experts ensures that key information needs are reflected in the field data collection tools as per the objectives and focus of the assessment. The data collection tools should be closely aligned with the analysis framework and the analysis plan. As mentioned above, the two questionnaires proposed to collect primary data for the BNA are:

- The Community Group Discussion questionnaire, to be administered to a group of maximum 10 people disaggregated by sex and belonging to the same affected group in the targeted location (IDPs, resident, etc., depending on the targeting and the sampling strategy). The average implementation time is one hour.
- The household level questionnaire, to be administered to the Head of Household or spouse (mother, father or any person responsible to provide for their dependents). Average implementation time is one hour.

They are both structured questionnaires, with close-ended questions, which are also available in XLSForm, ready to be uploaded on digital data collection platforms, such as Open Data Kit (ODK) or KoBo Toolbox. Standards Word forms for paper-based data collection are proposed in annex 1, 2, 3, and 4. Annex 1 and 2 are, respectively, the Community Group Discussions and the Household Interviews tools as they were piloted in Ethiopia, whereas in annex 3 and 4 are the adjusted versions based on lessons learned throughout the pilot.

The two proposed questionnaires are made of information modules containing questions that are labelled as either core or optional (see Table 5 and Table 6). In all situations, the two questionnaires will need to be adapted, piloted and in some instance, translated. However, core questions should be kept in any BNA, whereas optional questions can be removed, especially if information is available from other sources. Such decision will be made at the design and planning stage, where additions can also be made. Additional modules and questions can be added to the standards forms to reflect unaddressed information needs, e.g. displacement, humanitarian access, etc. and comply with the information requirements outlined in the analysis plan.

In their full version, both the CGD and the HHI questionnaires can be implemented in one hour. If resources and time are sufficient, conduct and analyse first the community group discussions, then

adapt the household questionnaire based on the result of the Community Group Discussion, and conduct the interviews in the same locations.

The BNA can be applied either in sudden onset or protracted crisis. Depending on the context, the questionnaires need to be adapted to fit the purpose. The table below summarize the main adaptations required.

Table 4: Questionnaires adaptation for sudden onset and protracted crises

Sudden onset	Protracted
Insert "before" and "now" questions to measure change and impact. Define clearly date or event for the "Before"	Do not use "before" and "now" questions for time periods greater than one year, unless there is a specific event that clearly marks a divide between the situation before and the situation now. An example of such an event could be the presidential election in May 2018.
Set the forecast timeframe to 3-6 months	Set the forecast timeframe to 3-9 month depending on the level of volatility and expected changes in context Adapt displacement timeframes for displaced groups, e.g. less than 3 months, between 3 and 6 months, 6 and 12 months, over a year, etc.

Some variables of the BNA and the data collection tools need to be precisely defined and adapted in each situation:

- **The timeframe for the forecast of humanitarian outcomes**. The time for which forecast is requested need to be established in advance. It is recommended a period of 3 to 6 months, depending on how volatile and dynamic is the context. Alternatively, key events could also be used, such as the future lean or rainy season, the winter, etc.
- **Before and now:** Some questions in the data collection tools require to establish a before and an after. The approximate time/date dividing the "before" from the "now" need to be fixed so as to refer to a common baseline. It can be: Since the crisis started in March 2015; since the earthquake hit in November last month; since the last large-scale displacement of people, etc. Be as specific as possible to avoid confusion and misunderstanding.
- The **final list of goods and services** that will be used in both the CGDs and the HHIs needs to be validated. It can be done through secondary data review, using existing Minimum Expenditures Baskets, expert opinions or after the Community Groups Discussion if they are implemented first.
- The **definition of a household**. The definition proposed is from the Household Economy Approach, where a household refers to a group of people, each with different abilities and needs, who live together most of the time and contribute to a common economy, and share the food and other income from this. However, definitions of households might vary across contexts and if necessary will need to be adapted.
- The **definition of affected groups**. Refer to the humanitarian profile in country or existing definitions for affected groups (e.g. IDPs in public building, tents, etc.) and settings (e.g. rural, urban, peri urban, area of high conflict intensity, livelihood zone, etc.)
- The **average number of members in one household**. This number might vary per affected groups and location. Refer to baseline information, past surveys or registration lists,

etc. to establish the average size of households. Check also with enumerators during the training.

- **Recall timeframe**: Some questions require to adapt the recall period, such as "since the beginning of this crisis, since the last harvest, in the last seven days, in the last 30 days, etc. Be as specific as possible to avoid confusion and different interpretation from respondents.
- **School age** for primary, secondary, university. Provide enumerators with the normal age intervals for children going to primary or secondary school as well as university, so they can provide respondents with a reference value.
- **Main income generating activities**. Each country has different types of activities. Refer to existing surveys, e.g. Household economy approach, livelihood survey, etc. and liaise with specialists if necessary to identify the right response options. Validate during the training with the enumerators
- **Currency**. Specify in the questionnaire in which currency expenditures and income levels should be recorded.
- **Minor age limit**: Internationally, any person below 18 years old is considered a minor. However, this age limit (for engaging in some forms of work, for instance) differs in some countries. It is preferable to use the in country legal age limit, if available.
- **Retirement age**: The retirement age is used as reference age for elders, to calculate the number of dependants (i.e. children and elders) that are in a household. It varies by country.

The two standard questionnaires include the information modules presented in Table 5 and Table 6. Some of the information modules and related questions are defined as *core* whereas others are *optional.* The former are somehow unique to the BNA; questions can be amended but they should not be removed. The latter, instead, relate to data points that may have been or may be collected through other assessments, such as the HEA and the VAM; if recent information for the targeted groups AND locations is already available from other reliable sources, then the related questions can be dismissed.

Depending on the context, a translation might be required for the questionnaires to adapt to local language. Finally, the data collection tools should always be piloted and refined as necessary before training and field data collection start.

To know more on: Questionnaire design

- ACAPS 2016 Technical Brief Questionnaire design
- ICRC 2017 Acquiring and analysing data in support of evidence based decisions
- IRC Obtaining meaningful informed consent
- UNHCR 2017 Needs Assessment Handbook

Table 5: Information modules in household questionnaire

Modules contained in standard forms	Topics	Core / Optional
Module A: General information	A1, A2: Location	Core
	A3, A4, A5: Sex, age, marital status of respondent	Core
	A6, A7: Household situation, type of group in sample	Core
Module B: Household demography and profile	B1: Additional dependents	Core
	B2: Household composition by age; household size	Core
	B3: School-aged members attending school	Core
	B4: Level of education of head of household	Core
	B5: Household members with special needs	Core
Module C: Money and livelihoods	C1: Sources of money (from work, external assistance)	All optional if alternative available (e.g. HEA outcome analysis; WFP's Essential Needs Assessment (ENA))
	C2: Main income generating activity	
	C3, C4: Income earners (and child labour)	
	C5, C6: Level of income	
	C7: Level of savings	
	C8, C9: Level of debts	
	C10: Three main ways to receive/transfer money	Core
Module D: Coping mechanisms	D1: Non-food "one-off" coping mechanisms (CM)	Core (specific CM not included in other assessments)
	D2: Non-food "reusable" coping mechanisms (CM)	Core (specific CM not included in other assessments)
	D3: Food coping mechanisms	Optional if alternative available (e.g. HEA outcome analysis, VAM)
Module E: Basic needs and their sourcing	E1: Basic needs basket: goods, services, facilities (*)	Core
	E2: Main source/provider of goods and services (*)	Core
	E3: Distance from sources/providers (*)	Core
	E4: Recurrence of expenditures (*)	Core
	E5: Current regular/frequent expenditures (*)	Optional if alternative available (e.g. HEA outcome)
	E6. Before the crisis, only if adopting before-now approach	Optional if alternative available (e.g. HEA baseline)
Module F: Priority needs and preferred assistance	F1: Ability to meet need (*)	Core
	F2: Barriers to meeting needs	Core
	F3: Worry about meeting the need	Core
	F4: Priorities for assistance (*)	Core
	F5: Preferred assistance options (*)	Core

Module G: Hypothetical expenditures	G1: Allocations of hypothetical cash grant into spending, saving, debt	Core
	G2: Expenditures if given a hypothetical cash grant	Core

* In both household questionnaire and community questionnaire. Information to be triangulated.

Table 6: Information modules in Community Group Discussion questionnaire

Modules contained in standard forms	Topics	Core / Optional
Module A: General information	A1, A2: Location	Core
	A3, A4, A5: number of participants, sex, type of group in sample	Core
Module B: Basic needs and their sourcing	B1: Basic needs basket: goods, services, facilities (*)	Core
	B2: Main source/provider of goods and services (*)	Core
	B3: Name of location from where goods/services are sourced	Core
	B4. Distance from sources/providers (*)	Core
Module C: Priority needs and preferred assistance	C1: Ability to meet need (*)	Core
	C2: Availability of goods, services, facilities	Core
	C3: Physical accessibility of goods, services, facilities	Core
	C4: Affordability of goods, services, facilities	Core
	C5: Quality of goods, services, facilities	Core
	C6: Priorities for assistance (*)	Core
	C7: Preferred assistance options (*)	Core
Module D: Expenditures and spending calendar	D1, D2: Recurrence of expenditures (*)	Core
	D3: Current regular/frequent expenditures (*)	Optional if alternative available (e.g. HEA outcome)
	D4, D5: Greater expenditures than usual	Core
	D6, D7: Lower expenditures than usual	Core
	D8, D9: Seasonal expenditures	Core

* In both household questionnaire and community questionnaire. Information to be triangulated.

5.3 Select and train field assessment teams

The field assessment team is the most important field assessment asset, and the quality of the data is directly related to the quality of the team collecting it. Staff involved in field data collection should be experienced in emergency programming and assessments and have country knowledge. When possible, field assessment teams should include staff from different agencies and NGOs. The involvement of local actors or authorities (if appropriate given the context) and representatives from the affected population in the assessment teams will strengthen the accuracy of the findings and interpretation of the situation. Provide all assessment team members (including drivers and translators) with adequate and timely instructions, briefings, clear reporting lines and up-to-date job descriptions to enable them to understand their responsibilities and work objectives, and what management support they may receive during the field data collection.

Field assessment teams will require appropriate training on objectives, sampling strategy, code of conduct, data collection forms, standard operating procedures, logistics, administrative planning and be given support to complete the field work properly and safely. An assessment package containing the essential information and documents should be distributed to all team members at the end of the training and may include:

Box 5: Field team package

- A **short overview of the emergency** and the location of the assessment and maps of the areas to be assessed
- **Data collection plans**: Instructions for site, group and head of household selection, protocols for site substitution if required
- **Sufficient hard copies** of questionnaires, guidelines on the data collection techniques that will be used and list of key terms used in the data collection tools and definitions
- **Communication procedures** and contact list (with emergency contacts and security procedures).
- **Instructions** on the use of any electronic devices being used in the assessment (tablets, GPS, smart phones)
- **Memorandum of Understanding** testifying that endorsement from local authorities has been granted (where advised by field offices/staff) and/or Letters of introduction for notice of arrival on site (e.g. from relevant ministries)
- Code of conduct
- **Informed consent forms** with instructions in case of photography

To know more on: Assessment team composition and training

- ACAPS 2012 Building an effective assessment team

5.4 Organize field visits

The site selection plan designed in the planning step needs to be communicated to the field teams. Every day in the field is different and must be planned accordingly. Teams should prepare each day carefully, deciding/confirming which locations will be visited, agreeing on how the information will be collected, deciding how to include local authorities, planning for team meetings during and after the visit and revising responsibilities within the teams. Team leaders should know the procedure to follow when one targeted site or group is not accessible. Ensure teams have the necessary logistical means and administrative framework to conduct field assessments, including standard operating procedures and safety checks/recommendations.

Changes in plans are to be expected, especially in highly volatile contexts, typically areas of active conflict. In these locations, security incidents, fighting, road blockages, or other type of restrictions, may affect access of field teams. It is important to liaise with security staff on a regular basis to get updates. Because plans can change even daily, it may be advisable to keep them relatively flexible, and aim for a good-enough plan as opposed to a plan that is "perfect" under current circumstances but that would become unsuitable should contextual factor (slightly) change.

5.5 Conduct interviews

Data collection should be undertaken using Community Group Discussions (CGD) and household interviews (HHI). These methods require adapted observation, facilitation and interviewing skills. They are best conducted by multi-disciplinary, gender-balanced teams where multiple opinions about what has been observed or heard can be shared and contrasted within the team during the field visit and afterwards, during debriefings.

In each site and for each group of interest, according to the stratification of the sample, the field team will conduct both household interviews and community group discussions. Hence, the number of community group discussions will be equivalent to the number of groups of interest. ***It is of crucial importance that community group discussions and Household refer to the same site or population***.

Community Group Discussions bring together small, manageable groups of individuals (typically 7-10) with some common characteristics (age, gender, socially distinguished group, etc.) to gather information about a specific or focused event. They are important to deepen the insight into a specific segment of the population. Reaching consensus is important in a CGD. Questions may allow one single response, multiple responses, or require a prioritization of responses. If there are vastly varied responses at first, achieving consensus will require skilled management of the discussion.

There may be times when noting 'no clear consensus' is the only option to capture the response and recording the range of opinions will be required. There may also be cases where one or two participants monopolise the discussion and others remain silent or participate significantly less; make sure that everyone has a voice.

Clarify in your assessment plan where and for whom the CGDs will be conducted and maintain this approach for all sites to allow appropriate comparison. CGDs should be conducted in each visited site and composed of male and female from each targeted affected group (i.e. IDPs in public buildings, affected residents, etc.) to better understand and compare priority needs and the impact and challenges related to the disruption of access to essential services and goods. In case a disaggregation male/female is desired, CGDs can be targeted specifically to each of those genders in each site. CGDs

should be conducted first in order to identify key priorities and followed by household interviews. Core team should ensure that the adapted form does not require more than one hour and a half of discussion.

Household interviews provide more granular information at the household level and to explore results based on other characteristics, such as the number of people in the family, the source of income, the date of arrival, etc. The Household interview for BNA should be conducted with head of households and all enumerators should be trained in their selection. The interview shouldn't last more than 60 minutes, including introduction and explanation about the objectives of the assessment

5.6 Store, document and manage data properly

Traditionally, data is collected with paper and pen and then entered into a database such as Excel for processing, storing, and analysis. Increasingly, primary data collection is conducted using mobile data-collection systems, e.g. using mobile phones, tablets, or Personal Digital Assistants (PDAs) that allow for real-time data collection, uploading, analysis, and sharing. These are considered more effective than paper-based forms, which take longer to process.

- Primary data collection using mobile technology: If mobile technology is used, data is most likely being directly uploaded to an online database, thus speeding up the data entry process. Numerous tools for mobile data collection exist. Most commonly used in humanitarian settings are the Open Data Kit (ODK) or customized versions such as KoBoToolbox. An ODK version of the CGD and HHI forms is available for adaptation in the toolbox. Data collected through mobile phones or tablets is no "more accurate" than data collected via paper forms. It will require the same amount of cleaning and validation than data collected through traditional ways, although some traditional data entry mistakes can be reduced by inserting conditionalities and rules in the electronic form.
- Paper-based data collection will require an electronic data entry tool. The assessment expert should develop the tool based on the data collection tools and may use Microsoft Excel or Access for offline data entry functionality or an online software4. Based on your selected method(s), a data entry team may have to be recruited to ensure data is managed and stored appropriately. If using the field teams, ensure at least one person in the team is proficient in data entry and the software chosen for the data entry. Otherwise, establish a data entry centre with an adequate number of data entry clerks and computers with required software. Select only people who have strong computer skills and preferably who already have data entry experience.

The core team should set procedures for collation, quality control, and management of the data. It should also ensure the protection and safeguarding of personal or confidential information, if any. This includes establishing protocols among partners for the storing of different types of information (e.g. raw vs. aggregated data vs. findings) and agreeing on how to share data or findings. Related protocols must define the following:

- Type of metadata to describe the dataset (date of collection, geographic coverage, methodology);
- Geographical units (use of country P-codes and/or agreed administrative place names, disaggregation levels, and other technical standards);
- Who owns the data and who has what rights to change or modify the data;

[4] Any software with a form functionality, such as Google Forms or SurveyMonkey, should work.

- Determination of whether datasets should be cleared or sanitized prior to sharing, and by whom;
- Who has what rights to access the data at each level of aggregation and sensitivity; and
- Details on data confidentiality and safeguarding of information.

During primary data collection, the assessment teams will need to ensure that collected data is stored and referenced properly, ready to be used for later analyses. Irrespective of the method used for collection and storage, all data should indicate:

- Location or geographical area to which the data is applicable, using agreed standards (i.e. CODs);
- Population segment or affected groups from which the observation is derived;
- Sector(s) or sub-sector(s) the observation represents or belongs to, or other themes of interest (e.g. humanitarian access, response capacity, etc.);
- Date on which the data was collected or the information to which it refers;
- Basic information about the enumerator, such as sex, phone number, etc.;
- Basic information about the respondent, such as age, sex, and other aspects of diversity; and
- A unique identifier for each questionnaire.

In addition, data storage, back up or archiving protocols need to be identified for safeguarding data.

To know more on: Storage and protection of data

- ACAPS 2013 How to approach a dataset part 1:Database design
- ACAPS 2013 How to approach a dataset part 2: Data preparation
- ACAPS 2016 Data cleaning
- European Commission 2018 Website on the 2018 reform of EU data protection rules
- UNHCR 2015 Policy on the protection of personal data of persons of concerns to UNHCR
- Example Code of conduct

6 BNA Analysis

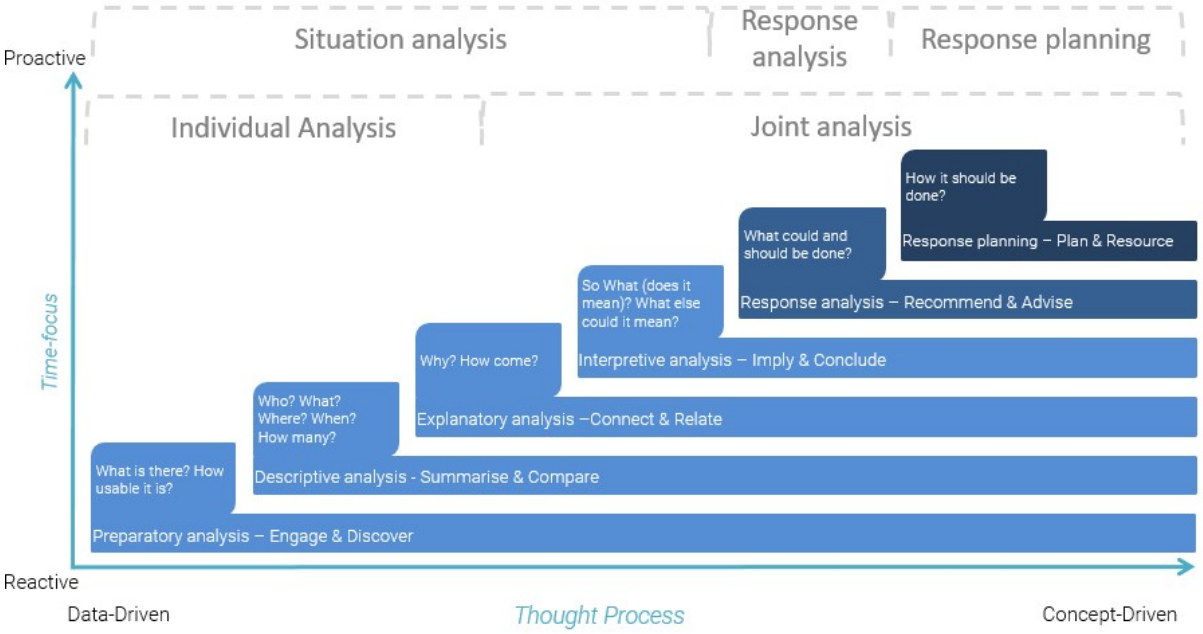
Analysis in humanitarian setting can be defined as the *organized, transparent and controlled process of transforming raw data into actionable insights for better decision making* (ACAPS, 2016). It is an iterative sense-making process which continues until it is possible to draw conclusions that answer the original questions.

When applied to humanitarian settings in general, and basic needs in particular, the goal of analysis is to estimate or provide informed opinions about deficiencies and their humanitarian consequences, from the affected people's perspective. This includes a systematic set of procedures undertaken for the purposes of setting priorities based on severity of conditions or consequences faced by the affected population as well as their preferences with regards to the decisions about response modalities, service improvement and allocation of resources.

Analysis is more of a process than an action, and there are procedures and steps humanitarian staff can rely on to take them from uncertainty to understanding, from results to findings. Most forms of

analysis can be described as levels, where one builds on another. The spectrum takes you from a basic reactive, description of the data to a more proactive, concept-driven conclusion, telling end users what the data means, what may happen next and what could or should be done about it.

Figure 1: The analysis spectrum (adapted from ACAPS 2014 and Pherson 2010)



Box 6: Expected outputs of the analysis stage

Preparatory analysis: Summarize and consolidate key variables and observations
Descriptive analysis: Comparison of results between each category of analysis, identify patterns, trends, anomalies, outliers, and stories.
Explanatory analysis: Look for connections and relationships between observations and measurement, identify main associations, correlation and underlying mechanisms/processes/factors, determine why particular conditions are observed, develop plausible and rival explanations.
Interpretive analysis: Establish most severe and priority issues (current and forecasted), evaluate the strengths and type of evidence supporting conclusions, identify the extent to which findings apply to other settings, geographical areas or population groups.

The BNA analysis is then followed by response analysis, which is not explained in this Guidance, but in the ROAP Facilitator's Guide.
Response analysis: Decide on a strategy and objectives to change the outcomes, a comparative analysis of different response options and their feasibility, likely outcome, opportunities and risks, a set of recommended response options.
Response planning: Details on the activities, sequencing, and resources required to achieve the objectives, using the response options selected in the previous step.

When analysing primary data, be sure to integrate secondary data analysis as much as possible. Secondary data is used not only to triangulate and validate primary data collection findings, but also to help comparing, explaining, interpreting, forecasting and recommending. When findings are presented in the assessment report, this should include both primary and secondary findings and highlight differences where relevant.

Analysis is a systematic and iterative sense-making process guided by the analytical framework and analysis plan defined during the design stage of the BNA. The more detailed the analysis plan, the more automatic and straightforward the analysis will be.

Analysis is an ongoing activity throughout the needs assessment. It should start with secondary data and continue as soon as primary data becomes available, rather than waiting until after all the data has been collected.

Data cleaning will happen both during field team debriefing and when reading and analysing the data in the database. Initial cleaning should focus on simple mistakes such as typographical errors (misspellings, extra zeros, etc.) and blank entries. These human errors can be significantly reduced by collecting data through digital devices and programming the appropriate commands in the data collection form (e.g. for admitted values). As analysis progresses, you may begin to see anomalies and outliers in the data which will need to be verified or cleaned. Outliers demand further investigation, and most of the time there will be an explanation to such anomalies; they can occur because of misunderstandings between respondents and data collectors or simply because the data was entered inaccurately. Often, these issues can be resolved through discussion with field assessments team leaders and checking entries. In some cases, the anomaly may be an indicator of problems being more severe in one area than others and in some cases, it can point to poor quality information which will need to be removed from the overall analysis. The analysts should document when the latter is the case.

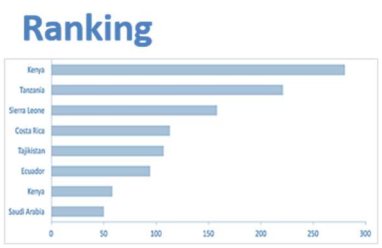
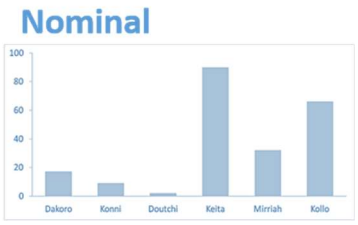
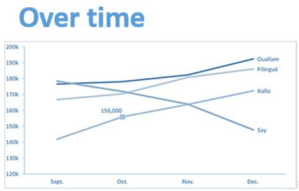
Some levels of analysis, especially the interpretive, anticipatory and the response levels, require the involvement of sector experts who have a sound knowledge about the context and programme design in the country. The core team should plan for joint analysis (i.e. in a workshop setting) in which the core team, the field team leaders, relevant ministries and sector representatives, wider Cluster members and relevant stakeholders come together to discuss and analyze the findings. The focus on individual sectors or themes allows to optimise experts' and stakeholders' time, as they may not be interested and/or capable to contribute on topics outside of their specialty area.

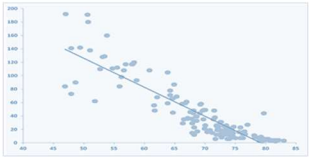
There are many advantages in adopting a participatory approach to analysis, which contributes to:

- Establishing a common understanding of the situation by agreeing on the findings
- Compensating lack of evidence with expert judgement
- Resolving inconsistencies in the data through discussion and information sharing
- Validating key findings (severity, priorities, underlying factors, etc.) and results
- Developing likely scenarios for how the situation may evolve
- Identifying most appropriate assistance modalities (response analysis)

Summarizing data into tables may be enough for analysts and decision makers to make relevant inferences and draw pertinent conclusions from the data. However, at times it may be difficult to make sense of the information if it is only presented as numbers in a table. Being able to clearly see the data in an organized way is key for meaningful analysis and will require the visualization of the data in effective ways. This entails using specialized tools, e.g. excel, Tableau, etc.). This is important for the information analyst(s) themselves and especially for the wider community who will help with the

analysis. In most cases, seven basic graphs are enough to show specific stories and relationships, detailed hereafter.

	When you want to compare one value to another as well as its quantitative order relationship. Use bars (vertical or horizontal), sorted in descending order to emphasize high values or sorted in ascending order to emphasize low values.
	When you want to compare values in no specific order. Use bars (vertical or horizontal).
	Also known as pie-charts, a part-to-whole graph shows how the values relate to the whole and to one another. A specific characteristic of a pie chart is the fact that everyone immediately knows that the individual slices combine to make up a whole pie. Very useful when presenting just a few values.
	When you want to compare measurements taken over a period of time. Lines show the flow of values across time, for example consecutive months of a year. The movement from one value to the next represents change, giving meaning to the slope of the line: the steeper the slope, the more dramatic the change.
	Shows how one or more sets of values differ from a reference set of values. Use a reference line to show how one or more values deviate from a point of reference. For example, to show the degree to which an indicator does not meet a standard.

Correlation 	When you want to compare two set of measures to determine if as one set goes up, the other set correspondingly goes up or down and how strongly. The line shows the trend and whether it goes up (positive), or down (negative), and the more tightly the values are grouped around the trend line, the stronger the correlation.
Spatial 	Spatial visualization shows how a situation may differ from one area to another using mapping. Very effective for showing geographical distribution of an issue.

6.1 Data preparation – Engage and discover

After cleaning the dataset, BNA analysts will prepare a set of key variables necessary to conduct the analysis. A few key variables are required to perform a basic analysis for BNA. The section details each and provide with the reference questions in the questionnaire, analytical outputs as well as visualization types when relevant.

Demographic and socio-economic profile. Some basic demographic and socio-economic information is required for each interviewed household, to better understand the composition and specific needs in each family, as well as their livelihood, sources of income and ways of accessing cash.

Reference question in the questionnaires		
	Community group discussion	**Household interview**
Sex, age, marital status of respondent	NA	Module A; questions A3, A4, A5
Displacement	NA	Module A; questions A6, A7
# family members by age and sex	NA	Module B; question B2
Additional dependents since crisis	NA	Module B; question B1
# of family members with special needs	NA	Module B; question B5
Education level of head of HH	NA	Module B; question B4
# of school-aged children attending school	NA	Module B; question B3
# of family members and children contributing HH income	NA	Module C; question C3 and C4
Main sources of money (from work and assistance others)	NA	Module C; question C1
Main income generating activities	NA	Module C; question C2
Total family income	NA	Module C; question C5 and C6

Ways of receiving and transferring money	NA	Module C; question C10
Debt level	NA	Module C; question C8 and C9
Savings	NA	Module C; question C7

Analytical output

All the indicators below can be disaggregated by sex of head of household

- Average household size
- Household size distribution and average size of small, medium, and large household
- % of households headed by women / men
- Dependency ratio
- % of households with at least one member with special needs (by special need)
- #/% of people with special needs (by special need)
- Highest education level per household
- % school aged children not attending school (school dropout)
- #/% of economically active family members
- % of households with child labour
- % of children engaged in child labour out of total
- Distribution and ranking of sources of money, from most to least common
- % of households relying on alternative source of money, other than income generating activities
- Distribution and ranking of main income generating activities, from most to least common
- Distribution and ranking of ways of receiving and transferring cash
- Average income level
- Average debt level
- Ratio of debt vs income
- Average # of days saving can sustain expenditure

Basket of basic needs. The first task is to contextualize and validate the list of basic needs. The question aims at producing a list of specific goods and services for each of the 15 proposed categories, and their minimum quantities, that households would need to consume in order to meet their monthly or seasonal requirements. This information is preferably gathered through household survey, in a way to get a sense of the different quantities required by households of different sizes. The proposed list of 15 categories should be adapted based on secondary data review and consultation with key BNA stakeholders. The category "others" allows the population to mention a basic need they consider essential and was not included in the initial list. It is likely that the category "others" will require recoding during the data preparation stage. Only validate a new category if at least one percent of the sample mentioned the new item.

Reference question in the questionnaires

	Community group discussion	**Household interview**
Basic needs basket: goods, services, facilities	Module B; question B1	Module E; question E1

Analytical output

- Final list of basic needs to use in the BNA report

Triangulate: Refer to existing HEA data, poverty or living standards survey in the country available and compare the list.

Services/goods/facility, sources and provider. BNA requires an understanding of the main sources for or providers of goods or services, as households use different strategies to meet their basic needs, from own production to the purchase of goods or hiring of services. Two metrics are used to better understand providers, namely the distance (in min) to the closest place where the good or service is commonly obtained, and the source or type of provider, e.g. nature, own production, purchase from markets or professional, NGO, authorities, etc.

Reference question in the questionnaires

	Community group discussion	Household interview
Main source/provider of goods and services	Module B; question B2	Module E; questions E2
Name of location from where goods/services are sourced	Module B; question B3	NA
Distance from sources/providers	Module B; question B4	Module E; questions E3

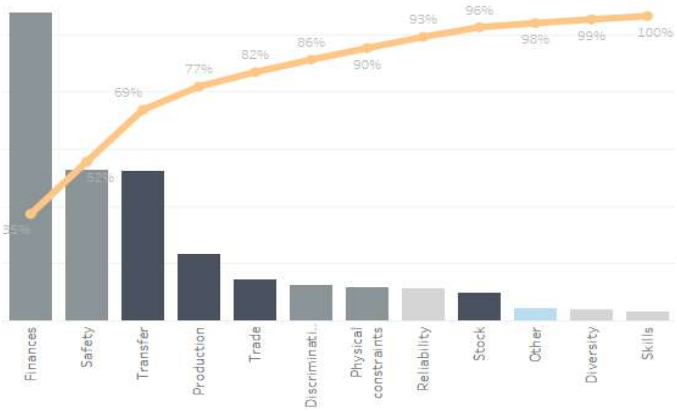
Analytical output

- % of households in sample (or community) who use a specific type of goods/service provider for each basic need category, with ranking based on popularity
- List and map of locations from where goods/services are sourced, for each category of basic need
- Distribution of the distance from source

Triangulate: Compare results with available secondary data, such as the Household Economy Approach results, Emergency Food Security Assessments, etc.

Barriers to meeting basic needs. The contribution of barriers to humanitarian outcomes is calculated using a frequency count (the number of times one underlying factor was mentioned as one of the main factors contributing to insufficient access to a particular basic need). The BNA is primarily interested in how much accessibility, availability and quality issues contribute to unmet priority needs, and a standard list of eleven potential causes is proposed in the household questionnaire. A pareto chart is used to display the results. This type of chart is used when analysing data about the frequency of problems or causes in a process, when there are many problems or causes and it is important to focus only on the most significant or when analysing broad causes by looking at their specific components. The bars indicate the number of times an underlying factor was mentioned by the head of household as contributing to priority unmet needs. The bars are placed on the graph in rank order that is the bar at the left has the highest contribution to priority needs. A cumulative orange line is used to add the percentages from each bar, starting at the left (highest contributor) bar. The colour of the bar encodes the category of underlying factors, i.e. access, availability of quality. The following graph reads as follows: *Head of households mentioned that priority needs originate in 77% of the cases from issues related to lack of financial power, safety, transfer (support from government, authorities or humanitarian actors) and domestic production. Issues are therefore mostly related to accessibility rather than availability of goods and services.*

Main barriers, Nigeria pilot, June 2017



Reference question in the questionnaires		
	Community group discussion	**Household interview**
Barriers to meeting needs	Module C; questions C2, C3, C4, C5	Module F; question F2

Analytical output

- Pareto analysis on main barriers experienced by households in meeting basic needs (access, availability, quality).

Severity score. This severity of humanitarian outcome is a score on a scale from 1 to 25 that is calculated multiplying two scores, ability to meet the basic needs (hereinafter referred to as "ability") and humanitarian outcome.[5] *Ability* refers to households' and communities' perception on their ability to meet basic needs without assistance from third parties (questions F1 and C1, respectively). *Humanitarian outcome* refers to the degree of concern regarding the consequences of shortages or disruptions in the next X months[6], if no additional assistance is provided to the family (question F3).

Inability to meet a specific need may not necessarily be associated with high levels of concern, according to households' perspective; on the other hand, high levels of concerns are expected to be associated to significant inability to meet a need. Triangulation of the answers collected through these two questions will grant more confidence when drawing conclusions. As discussed previously, not all basic needs hold the same importance or contribute in the same way to humanitarian outcomes, depending on locations and affected groups. For instance, access to energy for heating in high altitude might be of importance to ensure survival at night during the winter, while of much less importance in plains or coastal areas.

The combination of both metrics (ability and humanitarian outcome) provides with an understanding of current shortages as well as potential harmful consequences. However, the two scores can also be used and presented individually. In Ethiopia, the assessment lead opted for this solution.

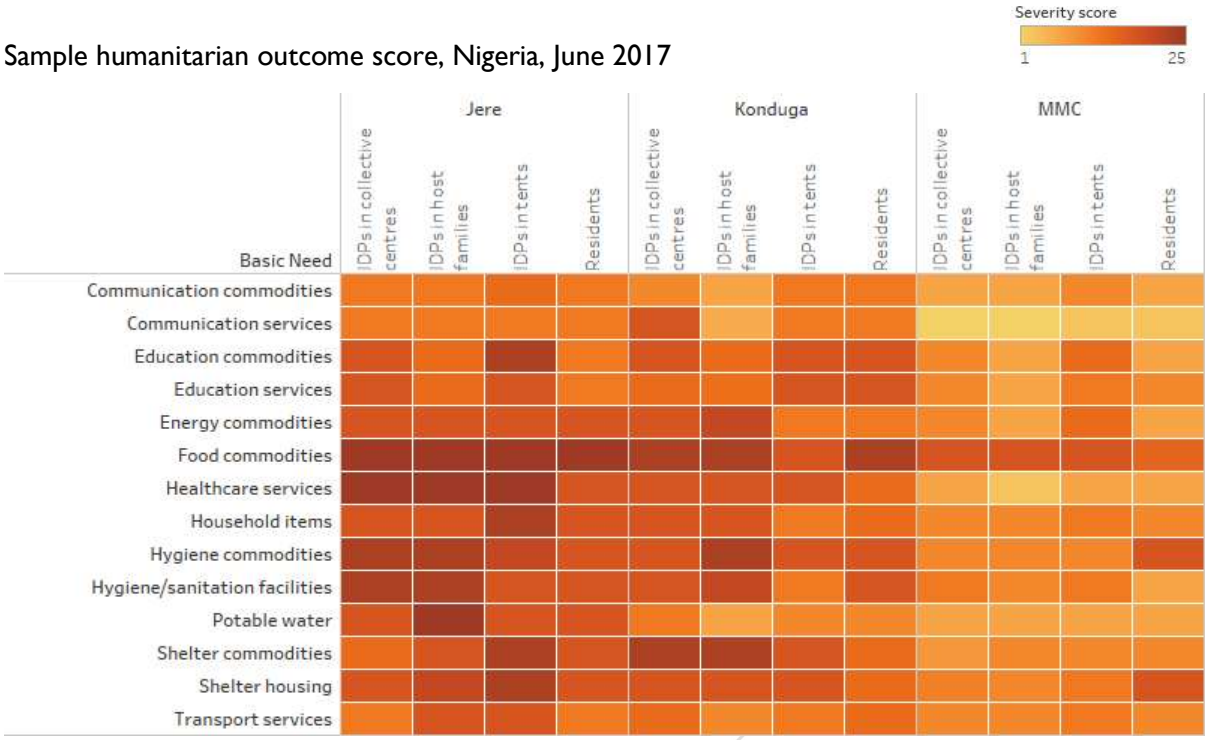
To determine a severity score for affected groups and geographical areas, the median score is recommended as an aggregation method. The median indicates the severity score for 50% of the population interviewed in a given group or geographical area. The 50% cut off can be adapted to a

[5] It is recommended to run and compare the severity score separately for each class of basic needs, i.e. for the set of basic needs considered as critical for health/survival, and for those critical to dignity and personal development. This will avoid favouring only the lifesaving sectors.

[6] The time frame for the forecast period should be decided upon during the adaptation of the questionnaire. It is recommended to use a period of 3-6 month, depending on the dynamics of the crises.

lower or higher point, depending on the context. Results can be displayed in a heatmap as in the example below.

Sample humanitarian outcome score, Nigeria, June 2017



Reference question in the questionnaires		
	Community group discussion	**Household interview**
Ability to meet need score	Module C; question C1 (ability to meet need)	Module F; questions F1
Concern score	NA	Module F; question F3

Analytical output

- Severity scores for each good or service contained in basic needs basket, and their ranking.
- Can be disaggregated by sex of head of household, group, location

Triangulate: Revise available secondary data, HEA, sector assessments or MIRA results to identify similarities and differences. Compare to priorities identified by the population. The level of concern reported by households is more important than their ability to meet the need when defining priorities for assistance; based on this principle, the latter is used to triangulate, verify, and discuss people's ranking of severe needs. However, humanitarian aid providers and governments may have different opinions from households with regard to what should be a matter of concern, and discrepancies should be highlighted and documented in the interpretative analysis stage.

People in need. It is possible to calculate the number of people in need in case the sampling strategy allows to generalize to a wider population of interest. To calculate the number or percentage of households/people with moderate or severe needs, the median scores are used to group the households in three response categories:

- # of HH with score 1-10: Able to cope
- # of HH with score 11-20: Population facing moderate needs
- # of HH with score 21-25: Population facing severe needs

The three response categories are calculated based on a breakdown of severity scores, as presented in the severity classification below. The severity classification can be reviewed and adapted to the context where necessary.

Severity scales and classification

Score	Description	Severity category	Response category
1-5	Half the population can meet and sustain their basic needs in the next XX months	Minor	Able to cope
6-10	Half the population faces shortages and unmet basic needs but consider they should be able to cope in the next XX months, even if no additional assistance is provided	Moderate	
11-15	Half the population faces shortages and unmet basic needs and fear not being able to cope in the next XX months, if no additional assistance is provided	Serious	Moderate needs
16-20	Half the population faces shortages and unmet basic needs with consequences on the health of the family members in the next XX months if no additional assistance is provided	Severe	
21-25	Half the population faces shortages and unmet basic needs with life threatening consequences in the next XX months if no additional assistance is provided	Critical	Severe needs

Percentage of people in need in visited sites, Nigeria pilot, June 2017

Reference question in the questionnaires		
	Community group discussion	**Household interview**
Household size	NA	Module B; question B2

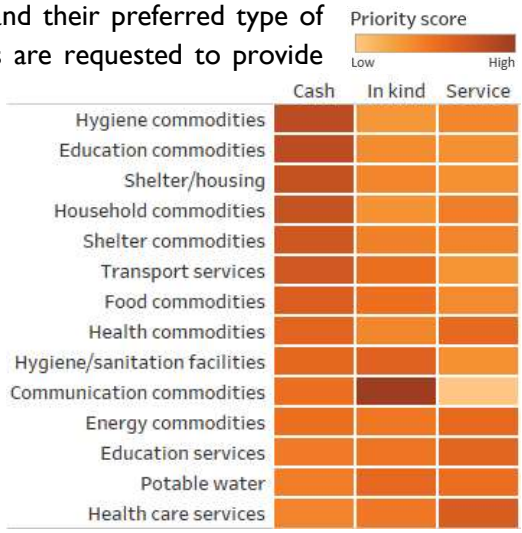
Ability to meet need score	Module C; question C1 (ability to meet need)	Module F; questions F1
Concern score	NA	Module F; question F3

Analytical output

- # and % of people able to cope, in moderate and severe needs
- Can be disaggregated by sex of head of household, group, location

Triangulate: Compare the number of people in need and the severity per group and geographical areas with the results of the livelihood coping strategy index.

Priority needs and preferred type of assistance. BNA seeks an understanding of the key priorities as expressed by the population interviewed, and their preferred type of assistance. Community groups and heads of households are requested to provide their preferences, using an ordinal scale (top 1, top 2, top 3 priority need or preferred assistance). The results are calculated using Borda count[7] and displayed using heatmaps. While there is a rank order in the numbers assigned to the categories of the variable, the "distance" between the preference levels is not equal or known. Note also that a "lower" ranking, demand, priority or preference does not imply an "absence of preference". It only means that other items or interventions are requested, preferred and given more importance and that the item does not qualify regularly in the top three preferences as expressed by the population. Therefore, the heat maps display only the most frequently mentioned "top three" items.



To understand better priority needs, head of households are also requested to indicate how they would allocate a fixed amount of cash to cover their current basic needs. This provide with an indication of which of the mentioned issues is solvable using cash, but also of the importance of the need based on the allocation amount.

Reference question in the questionnaires

	Community group discussion	**Household interview**
Priority for assistance	Module C; question C6	Module F; question F4
Preferred assistance options	Module C; question C7	Module F; questions F5
Hypothetical grant allocation	NA	Module G; questions G1 and G2

Analytical output

- Priority needs (Borda count)
- Preferred assistance (Borda count)

[7] The Borda count determines the most preferred items of an election by giving each response a certain number of points corresponding to the position in which it is ranked by each respondent. Once all preferences have been counted, the item with the most points is determined as the most preferred. See ACAPS Resources: http://www.acaps.org/resourcescats/downloader/heat_maps_as_tools_to_summarise_priorities/69

- Average hypothetical cash amount allocation to saving, debt repayment, expenditures
- Average hypothetical spending on pre-established categories of goods and services

Negative coping mechanisms. When under stress and insecurity, households react in different ways to cope with the present situation and continue meeting their needs despite the difficulties; they make choices that may affect their future lives, their survival, personal development, dignity, and productivity. Coping mechanisms could be classified into three major groups: food-related coping strategies, which are synthesised in the (reduced) Coping Strategy Index; coping strategies hindering household members' health status, protection, and personal development (e.g. neglecting health issues, child labour, child marriage, withdrawal from school); and coping strategies hampering household's livelihoods.

In turn, the latter are of three typologies: stress, crisis, and emergency strategies. Stress strategies, such as borrowing money or spending savings, are those which indicate a reduced ability to deal with future shocks due to a current reduction in resources or increase in debts. Crisis strategies, such as selling productive assets, directly reduce future productivity, including human capital formation. Emergency strategies, such as selling one's land, affect future productivity, but are more difficult to reverse or more dramatic in nature.

The household questionnaire contains three questions (D1, D2, and D3) covering a master list of coping mechanisms, each with a different recall or reference period. In D1, the coping mechanisms are such that can be adopted only once and produce irreversible consequences; in D2, the coping mechanisms are of a type that can be used multiple times and the recall period is of 30 days; D3 refers to food coping strategies that, in the previous week, could even be used on a daily basis.

Reference question in the questionnaires

	Community group discussion	Household interview
Non-food "one-off" coping mechanisms	NA	Module D; question D1
Non-food "reusable" coping mechanisms	NA	Module D; question D2
Food coping mechanisms	NA	Module D; question D3

Analytical output

- Food Coping Strategy Index (reduced)
- % of households having adopted one specific coping mechanism, ranked from the most to the least common; they can be organised in the three main categories (food; health/protection/development; livelihoods)
- % of households having adopted one or more food coping mechanism in the previous week
- % of households having ever adopted (or in the previous 30 days) one or more coping mechanisms affecting health, protection, personal development
- % of households having ever adopted (or in the previous 30 days) one or more coping mechanisms hampering their livelihoods. They can be organised in stress, crisis, and emergency coping mechanisms.

Past and current level expenditures for basic needs. Each basic need item is broken down per commodity and service, e.g. water as a commodity and maintenance and purification of public water as a service. Community groups and heads of households are requested for each basic item to report

the recurrence of the expenditure (e.g. monthly, quarterly) and provide the average expenditure for the recurrent and regular purchases. This estimation should be available for both normal times (before the crisis) and current times, so as to estimate the impact of the crisis on family's consumption.

In addition, head of households are requested to provide with an estimate of the current gap in expenditure, i.e. the difference between their current monthly expenditure for one item and the one that they estimate would suffice to fulfil their basic need. The difference can be positive (they can cover their basic need with the current expenditure) or negative (there is a negative difference between the amount requested and their current level of expenses).

Reference question in the questionnaires

	Community group discussion	Household interview
Expenditure recurrence	Module D; questions D1, D2	Module E; question E4
Current regular expenditures	Module D; questions D3	Module E; question E5
Expenditures before the crisis	NA	Module E; question E6

Analytical output

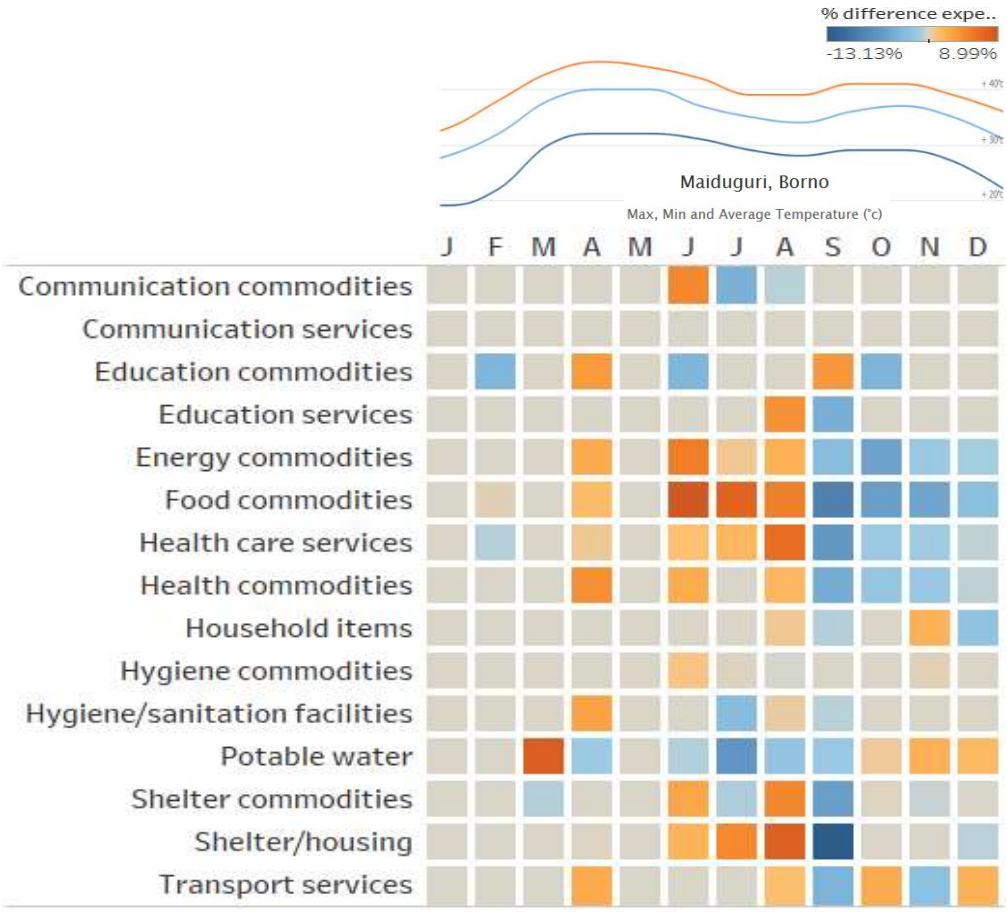
Expenditures can be classified by household size (small, medium, average)

- Current, average monthly total household expenditures (only regular/recurrent)
- Current, average monthly household expenditures on each basic need (only regular/recurrent)
- Past, average monthly total household expenditures (optional) (only regular/recurrent)
- Past, average monthly household expenditures on each basic need (only regular/recurrent)

Triangulate: Check consistency between the expenditures provided during CGDs and HHI for a same site, family size and affected group. They should match within a 20% range. In case of discrepancies, use existing market price monitoring system to randomly check the price of some of the items enunciated during CGD or Household interviews. Check the plausibility of the prices with market specialists, field assessment teams and field humanitarian staff.

Seasonality and variation of expenditures and consumption. The community groups are requested to provide for each good or service some information about the evolution of expenditures over time, as a proxy for consumption and variation of prices across a year. The results are represented using a calendar view of the year and showing percent difference from one month to another. This helps understanding expenditure variations both recurrent and seasonal expenditures over the year and allow to plan potential cash-based interventions (and transfer amounts) by accounting for variations at specific points in time. Exceptional or extraordinary expenditures, e.g. emergency medical intervention, tent purchase, etc. should be processed separately as they cannot always be linked to a specific time period.

Seasonal expenditure calendar, Nigeria pilot, June 2017



Reference question in the questionnaires		
	Community group discussion	Household interview
Expenditure recurrence	Module D; questions D1, D2	Module E; question E4
Periodic expenditure variations	Module D; questions D4, D5, D6, D7	NA
Seasonal expenditures	Module D; questions D8, D9	NA

Analytical output

- List of recurrent, one-off and extraordinary expenditures, e.g. emergency medical intervention, etc.
- Expenditure evolution for each month of the year (average percentage change compared to previous or normal month)
- Calendar of expenditure variations (increases and decreases)

Triangulate: Validate the calendar of expenditures produced through the BNA by comparing it against the seasonal calendar and list of key events obtained from secondary sources (temperature, precipitation, rainy season, harvest, school period, etc.). In case market price monitoring is available, compare also percentage changes over time.

Minimum Expenditure Basket. At analysis stage, the information on the basic needs basket, including list of items and the quantity in which they are consumed (see above), is used to estimate

the monthly Minimum Expenditure Basket and other seasonal costs. This is done by multiplying quantities by an average unit cost of each item. In some cases, it might be relevant to provide a minimum expenditure basket for different family sizes. An analysis of the distribution of the number of household members will provide insight as to the most appropriate and operational way of providing the information.

- In case of bimodal distribution of household size, provide a minimum expenditure basket for each category
- In case of normal distribution, chose the most appropriate family number interval (3-5, 7-9, etc.) and estimate average cost of the baskets accordingly.

Reference question in the questionnaires

	Community group discussion	Household interview
Average family size	NA	Module B; question B2 (number of household members by age groups; sum is household size)
Quantity of basic goods and services to be consumed as a minimum (basic needs basket) in reference period (month)	Module B; question B1	Module E; question E1
Unit price/cost of each good and service	NA (to be drawn from prices assessment)	NA (to be drawn from prices assessment)

Analytical output

- Through further data collection (of prices) and processing: Minimum expenditure basket for (different) average household sizes

Once all key BNA variables have been prepared, visualized and validated, analysts can move to the next level, descriptive analysis. Generally, BNA analysts will have already noticed some interesting patterns, messages or stories during the preparatory stage. It is important during this phase of data manipulation and transformation to suspend judgment and stand back from the results, so as to not influence future judgments and suffer later from selection and confirmation bias.

To know more on: Data preparation

- ACAPS 2013 How to approach a dataset part 2: Data preparation
- ICRC 2017 Acquiring and analysing data in support of evidence-based decisions
- Save the Children 2008 The Practitioner's Guide to the Household Economy Approach
- WFP 2013 Consolidated approach for reporting indicators of food security (CARI)

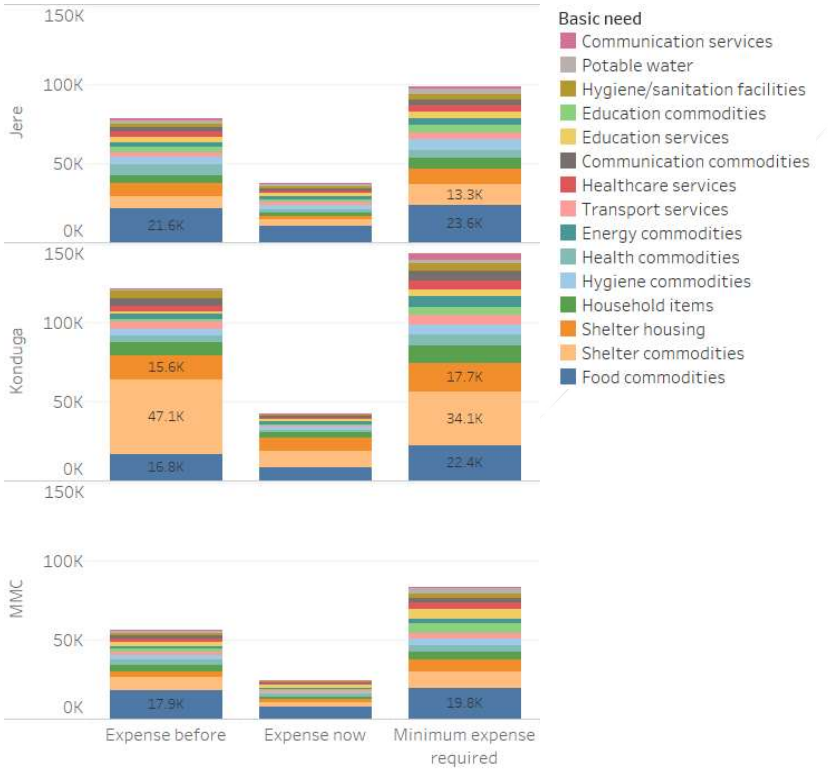
6.2 Descriptive analysis – Summarize and compare

Each of the variables presented in the previous section should be summarized using relevant descriptive statistics (mode, median, mean, %, frequency count, etc.) and disaggregated according to the pre-identified categories of analysis, e.g. by geographical area, affected group, etc. when and if the sample allows. Results within and between categories of analysis should be systematically screened and contrasted to identify similarities and differences, anomalies, patterns or trends. The core team

perception of patterns in qualitative or quantitative data is fundamental to the sense-making process. For example, certain severity conditions may cluster in particular geographical areas or people from a particular group may apply similar coping mechanisms. These patterns may not be specifically what was looked for or anticipated, but they may be important in themselves and deserve increased attention and further investigation, or they may shed light on new areas of interest or specific elements of the data. As results are compared, BNA analysts develop an understanding of what is known about assessed situations, people, places, or objects, and what is valid or worth noting about who, what, when, where, and how. Key dimensions to systematically compare for BNA are:

- Time comparisons: Before, current and future conditions
- Main categories of interest: Compare humanitarian outcomes, sufficiency, main underlying factors, expenditures, priorities, etc. across affected groups, basic needs and geographical areas

Sample graph comparing the distribution of expenditures per month across basic needs, before the crisis, currently and ideally (currency is NGN).



Box 10. What is worth of interest?

- <u>What repeats? What goes with what?</u> Look for patterns of repetition or resemblance. In virtually all subjects, repetition is a sign of emphasis. Once apparent similarities have been located, analysts can refine their thinking by pursuing significant distinctions among the similar things (looking at differences within the similarity or similarities despite the difference).
- <u>What is opposed to what?</u> Look for binary oppositions. Sometimes patterns of repetition are significant because they are part of a contrast around which the subject matter is structured. One advantage of detecting repetition is that it will lead analysts to discover opposites which are central to locating issues and concerns.
- <u>What doesn't fit?</u> Look for anomalies, outliers, and things that don't fit. An anomaly is literally something that cannot be named, a deviation from the normal order. Anomalies help us revise stereotypical assumptions, and noticing them often leads to new and better ideas. Observations can fall outside the norms for three reasons: errors, extraordinary events or extraordinary people / institutions / organizations.

To know more on: Descriptive analysis

- ACAPS 2013 How to approach a dataset part 2: Data preparation
- ACAPS 2013 How to approach a dataset part 3: Analysis
- ICRC 2017 Acquiring and analysing data in support of evidence-based decisions

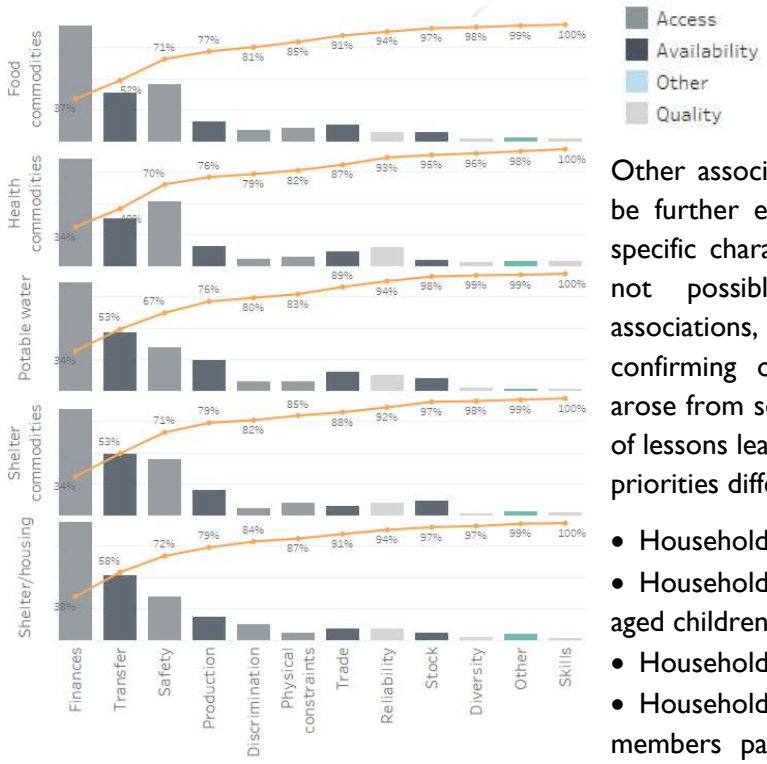
6.3 Explanatory analysis – Connect and relate

Explanatory analysis looks for associations and correlations between observations and measurements.

Identifying relationships is an important part of the analysis process, because it prepares for moving from a simple description of the population conditions and settings to explanations of why and how things happened as they did, and which underlying factors, processes and causal mechanisms are at play. This level of analysis implies carefully assessing whether two or more variables, conditions, or observations vary according to a pattern, if there is a strong or weak relationship linking them, and if one is a cause of or contributor to another.

The main underlying processes that impact access, availability and quality of essential goods and services should be carefully identified and verified, as they will constitute the basis for further programmatic recommendations. As an effect of small samples and complex interlinked and combined mechanisms, uncertainties regarding the most accurate explanation often arise, and several main factors might intervene together to account for the current conditions. As a result, it is always difficult to identify a single cause for a given consequence, and it is recommended to identify the most common underlying factors. Underlying factors under BNA are grouped under three main headings, Access, Availability and Quality of good and services.

Sample graph comparing the main underlying factors contributing to current deficiencies in goods and services, pareto analysis, Nigeria 2017



Other associations between observations can be further explored in BNA data, based on specific characteristics of the household. It is not possible to describe all possible associations, rather analysts should focus on confirming or validating assumptions which arose from secondary data review, experience of lessons learnt. For instance, are severity and priorities different for:

- Households with people with specific needs?
- Households with large proportion of school aged children not attending school?
- Households using crisis livelihood strategies?
- Households with a low number of family members participating in income generating activities?

Box 7: Association, correlation and causation (UNHCR 2017)

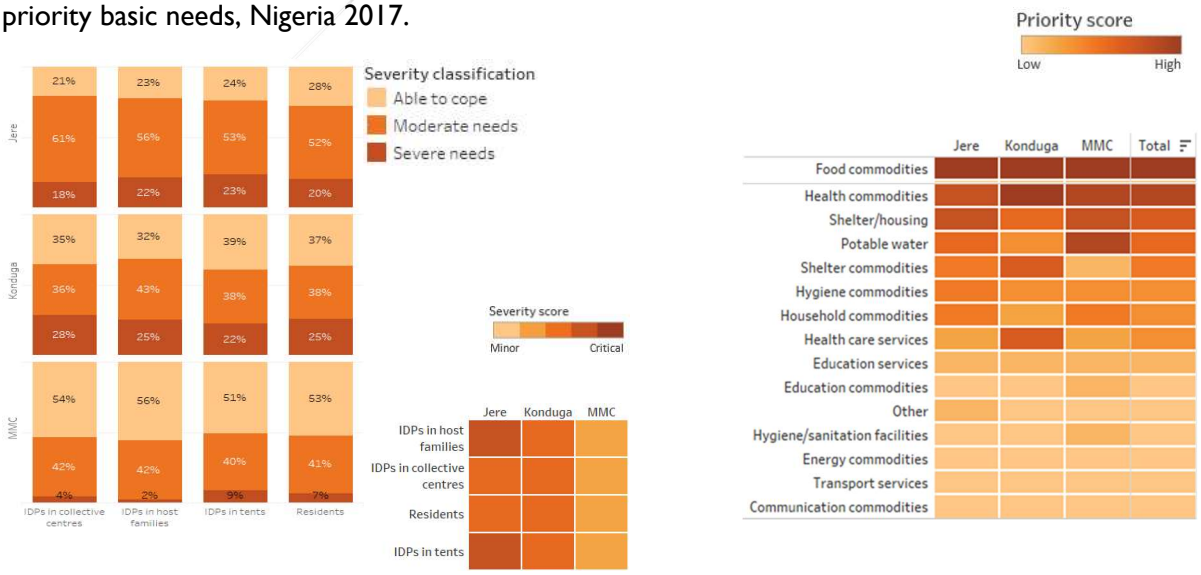
An association is any relationship, correspondence, connection, or link between two or more variables of interest. Simply put, there is association when two variables move together, but one does not influence or cause the other. The term association is closely related to the term correlation; however, correlation is primarily interested in measuring the degree to which the association of the variables tends to adhere to a certain pattern. Correlation is positive when the values increase together and is negative when one value decreases as the other increases. Remember that just because two variables have a statistical relationship with each other does not mean that one is responsible for or causes the other. Causation is the relationship between cause and effect, where one factor causes another. It implies identifying the start variables (baseline conditions that will have changed), the intermediate variables (events, states, processes, and/ or factors that initiate changes or action of some kind), and the outcomes (the consequent and final results, positive or negative, of start and mediating variables). Analysts should be cautious and should not treat simultaneity (or co-occurrence) as causation.

6.4 Interpretive analysis – Imply and conclude

Interpretation is the process of attaching meaning to data, from observations to implications, and ultimately to conclusions. The interpretation process involves careful arguments, evaluation of the strength of evidence, attention to plausibility in context and anticipation of future events or possible scenarios.

Not all observed insufficiencies, gaps or discrepancies have the same importance. Some contribute more than others to the deterioration of the physical, mental, or social well-being of an affected population, and thus need immediate attention. Establishing the degree of harmful consequences for each unmet basic need, as well as the number of people facing those conditions allows for issues to be prioritized based on their actual or expected negative outcomes and their prevalence among a given population. Establishing severity allows to identify unmet basic needs that are a priority for intervention, and to compare also with the preferences expressed by the population themselves, and also the feedback received from BNA field assessments teams. Beyond most severe and priority unmet basic needs, priority geographical areas or population groups that have been the most severely impacted should also be identified.

Sample graph comparing % of population by severity class, severity of conditions by affected group and priority basic needs, Nigeria 2017.



Interpreting current conditions, severity and priorities is not enough. Future developments should be considered to anticipate how these might impact current conditions and the nature and severity of needs for different groups in different areas. For each basic need, BNA requires head of households to indicate their degree of concern for the future as to provide indications on the evolution of humanitarian outcomes. If time is available, risk analysis and scenarios should be used to identify the likelihood of future events and trends in a specifically identified time frame (e.g. three to six months), based on current and historical data.

Strengths and limitations of the evidence that supports final conclusions and the reasoning behind analytical judgments must be assessed in order to detect possible flaws in arguments and establish the trustworthiness and credibility of conclusions. Conclusions derived from assumptions rather than the available data should be clearly flagged and communicated to avoid risk of misinterpretation. The number of observations supporting conclusions should be clearly displayed to avoid misinterpretation based on small samples.

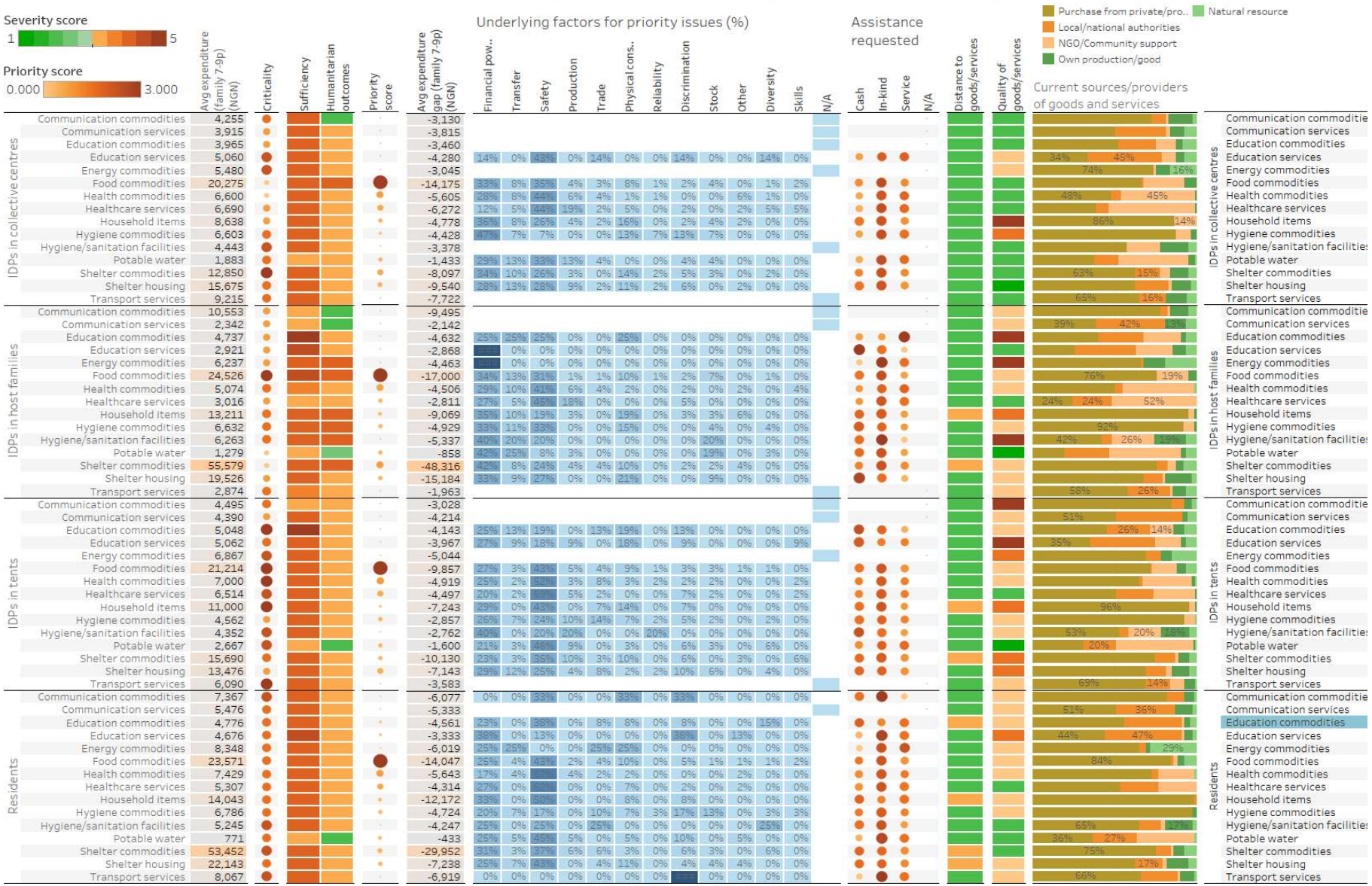
In cases where a random sample has been used, interpretation also implies determining the conditions and extent to which findings can apply to other places or population groups through careful generalization and inferences.

To know more on: Interpretative analysis

- ACAPS 2016 How to build scenario in preparation for or during humanitarian crises
- ACAPS 2013 How sure are you?
- UNHCR 2018 Joint Analysis Practical Guidance

To facilitate the interpretation of findings and access to details, all results can be summarized in a dashboard, using excel power BI or Tableau software.

Figure 2: Sample summary dashboard, Konduga LGA (Borno State, Nigeria) 2017



7 Communication and dissemination

The impact of BNA analysis is largely determined by the organization, clarity and credibility of arguments and the reasoning behind it. However, this is not enough. Findings are only useful if the core team succeed in communicating and conveying clearly and effectively the key message(s). This requires understanding how messages are being retained by an audience, balancing respect for the data, honesty about the limitations and uncertainties of the analysis and an understanding of the end users, their expertise, data literacy and their main concerns, as well as the decisions they might have to take based on the analysis. The more tailored the final product is to the end users, the more impact it will have.

In order for BNA to serve its purpose and have operational impact for the benefit of affected populations, analysis results must be communicated in a timely and effective manner and disseminated to appropriate audiences. A dissemination plan should be established at the planning phase of the exercise, since each end user of the findings may require them to be presented via different products and platforms.

Box 8: Expected outputs of the communication and dissemination stage

The BNA Report: Word or power point presentation, containing a methodology section, an executive summary.

Data and documentation: Primary data in an excel format, anonymized and protected, graphs and maps.

Folder for secondary data documents: Shared workspace with an agreed folder structure and naming convention for storage of key documents from primary and secondary data review.

7.1 Documenting data and methods

Limitations in analysis will emerge from the interpretation phase and should be reported honestly and explicitly in written form in the final report. All aspects of the assessment methodology need to be clearly articulated and openly shared. This includes the way the assessment was carried out, the information sources used, sites selected, timeframe, personnel involved, and decisions made about the processing of the collected information, e.g. thresholds, missing data, etc. It also includes the assumptions made in developing scenarios and how conclusions were reached. Information is required both on the data and on the methods by which they were collected and analysed.

Table 7: Required documentation on data and methods for BNA

Data documentation	Method documentation
• Cases: size and location of samples, maps of covered sites or locations • Content: details about type and sources of data used, calculations, transformation, etc. • Values: details or remarks on missing values or outliers and processing decisions.	• Design: description of the assessment design, number and training of enumerators, team composition, data collection methods, instrument pre-testing. Attach the questionnaire. • Sample: describe the sampling process and list the sites visited, include P-Codes if and when available. • Data processing: coding, data entry, error checking, cleaning procedures. • Joint analysis: description, participants, documents, decisions and disagreements.

- Credits: credits to participants and logos of contributing agencies, donors, etc.

7.2 Drafting the BNA report

The report is the main output of the assessment. It documents the methods, findings, and conclusions. It is produced at the end of the assessment process and – if necessary - can be adjusted to suit a number of audiences. It must be structured in line with the defined purpose and objective(s), at all times. The report should be as succinct as possible, and the outline should be developed at the outset of the needs assessment initiative, in order for stakeholders to agree on expectations and anticipated results. For relatively long reports, an executive summary of the assessment findings should appear at in the opening section.

The BNA report should be released as soon as possible, i.e. as soon as validated and approved by the core team and the relevant stakeholders. Data on needs becomes stale very quickly, particularly as more assessments are conducted and the situation on the ground changes. Consider sharing preliminary findings with relevant stakeholders prior to the final report, especially if approval is required before publication. Keep the validation and consultation process as short as possible without compromising quality, consensus, and buy-in.

See Annex 3 for a suggested outline of the BNA report.

7.3 Sharing findings and data

Once data has been collected and analysed, findings and data should be shared and made easily accessible to support decision making. Protocols for data sharing should be negotiated among partners to regulate the sharing of aggregated findings and/ or raw data. It is important to share this information both internally and externally as appropriate, based on agreed dissemination plans and data-sharing protocols, and after having identified and mitigated any potential protection concerns. For instance, in insecure environments, BNA might contain sensitive information potentially endangering the affected population or respondents and the data cannot always be shared publicly, calling for specific measures to be adopted for protecting and sharing data.

Aside from traditional hard-copy dissemination, there are many ways to distribute assessment findings electronically, including the following:

- UNHCR operational web portals, Refworld; HumanitarianResponse.info and ReliefWeb;
- Shared data repository such as HDX;
- Cluster-specific websites (i.e. sheltercluster.org, globalprotectioncluster.org, globalcccmcluster.org, etc.);
- Social media such as LinkedIn, Facebook, Twitter, Google Plus, Yammer; and
- File synchronization services such as Sharepoint, Dropbox, and the Humanitarian Kiosk.

Box 9: Recommendations for reporting and dissemination

- Be clear and transparent on the limitations of your analysis, the methods used to reach conclusions, and your degree of uncertainty or confidence on the findings. Present results accordingly.
- Make the assessment questionnaires, tools, checklists, and other documentation publicly available, explaining how they were used during the assessment.

- Key terms should be clearly defined to avoid misunderstanding and different interpretations. For example, what does 'affected' mean? What does 'damage' mean? What is meant by 'site'? Use accepted terms and standards, e.g. SPHERE, etc. Avoid jargon and technical language.
- In case the information is available, ensure that the report captures how the female and male population from different diversity and age groups has been affected. Clearly spell out throughout the report how the situation distinctly affects different groups.
- When using affected population figures estimates, explain the methodology used to reach the final number or range. Be explicit, precise and double-check figures. Record source and other metadata.
- Include maps and use data visualization to ease the understanding process.
- Articulate results. Translate conclusions into easily understandable results and focus on value added. Summarize the main findings briefly and clearly in an executive summary. This section should draw together the various findings from the needs assessment into a few coherent messages. Also include a 'key messages' section in the report.
- Share findings with affected communities and national authorities to ensure accountability.
- Clearly identify information gaps, or the known unknowns, and needs for further assessment phases.
- Give credit to participating stakeholders.

To know more on: Communication and dissemination

- ICRC 2017 Acquiring and analysing data in support of evidence-based decisions
- ACAPS 2012 Documenting data and method in rapid assessments

Tools

Tool 1 CGD questionnaire revised after pilot in Ethiopia

Basic needs assessment - Household Interview (after Ethiopia pilot)			
Date of interview		**Enumerator ID**	

Hi, how are you? Let me introduce myself: I am _____ from (enter your agency) and I am responsible for collecting information that will help us better understand your basic needs, on behalf of the humanitarian community. It is anonymous and confidential and will take roughly 1 hour. We will be talking first about what you consider to be basic needs and how you are meeting them, before the current crisis and now. We will then try to understand how much it costs for one family to meet those basic needs. But first let me make sure of the following.

Pre-screening questions: (tick boxes) <u>If one of these boxes is not ticked, stop interview.</u>

☐ Participants all belong to a same affected group (e.g. IDPs, returnees, Non IDPs, etc.) ☐ Group participants are all head of households (or spouses of HoHH) ☐ Group participants all have the same sex (e.g. Male or Female) ☐ Participants participate voluntarily and are informed that the interview is completely anonymous

A. General information					
A1. Province / District		**A2. Site name**			
A3. # of participants		**A4. Sex of participants**	☐ Male ☐ Female	**A5. Type of group** *Residents, displaced in spontaneous camp/site, displaced in planned camp/site, or displaced in host community/families*	

B. Basic needs and their sourcing

B1. List <u>all the things</u> you need AS A MINIMUM (could be goods or services for instance) for your household members to satisfy their needs in one [*reference period: week/month/year*]? *Write a list*		**B2. Where or who do you get these [category of good or service or facility] mostly from?** *Choose one among these:* *1: From nature/natural resource* *2: From own production/effort/means* *3: Buy from shops /traders /professionals* *4: Charity from NGO/UN/community* *5: Local/national authorities/government*	**B3a. [If you answered shops and traders] state the name of the main market place and the location where you buy the [good or service]** **B3b. [If you answered NGOs / UN] state the name of the main location where you collect / receive [good or service] they offer you** **B3c. [If you answered local or national authorities] state the name of the main location where you collect / receive [good or service] they offer you**	**B4. How long does it take (in minutes) from here to get there?** *A: In house (0-5min)* *B: Local (5 minutes -1H)* *C: Distant (1H – 2H)* *D: Remote (2H – 5H)* *E: Very remote (>5H)*
List of basic needs				
School supplies (uniforms, shoes, stationary, books, etc.)				
Education services (use of canteen, school fees, etc.)				
Energy commodities for cooking, lightening, heating?				
Food (staple food, fresh vegetables and fruit, meat, etc.)				
Health commodities (drugs, devices, etc.)				

Healthcare services (health centers, doctors, nurses, services such as laboratory tests, emergency services, hospitalization)				
Household items (utensils, mats, blankets, mosquito nets, cooking sets, etc.)				
Hygiene items (clothing, cleaning products, soap, toothbrush, pads, diapers, etc.)				
Hygiene/Sanitation facilities and services (toilet, bath, showers, repair and construction services, etc.)				
Productive assets and inputs for agricultural and non-agricultural activities (livestock, items to trade, machines)				
Potable water (water, treatment, water points, etc.)				
Shelter commodities (furniture, construction materials, etc.)				
Shelter/housing (rent, purchase, construction services, etc.)				
Transportation services (all except transport to school or healthcare facility; only transport to work, markets, or other)				
Communication services and supplies				
Other basic services or good (e.g. Legal support, special needs, etc.)				

C. Priority needs and preferred assistance

C1. In the current situation, how would you rate your ability meet/satisfy the [category of basic good or service] needs of your family members? *Read out loud and rank on a scale of 1-5, with 1 meaning "we can meet our needs without worry," 3 meaning "we can just barely meet our needs" and 5 meaning "we are completely unable to cover all our family needs."* *1: In the community, this need is fully met* *2: In the community, this need is largely met* *3: We can just barely meet this need* *4: We are not able to meet this need* *5: We are absolutely unable to meet this need*		**C2. We would like to know if your community experience shortages of essential goods or services. In the last 30 days, how frequently were [good or service] available locally?** *Read each out loud, then rate from 1-5* *1: Always available* *2: Most of the time available* *3: Sometimes available* *4: Rarely available* *5: Never available*	**C3. Sometimes goods or services are available locally, but their providers or the sources are difficult to access, because they are too far, people's movement is restricted, or it is dangerous to move around. We would like to know if your community faced difficulties in the last 30 days in physically accessing [goods or services] from markets. Are [goods or services]:** *Read each out loud, then rate from 1-5* *1: Very easy to physically access* *2: Easy to physically access*	**C4. Sometimes goods or services are available locally and also accessible, but they are too expensive, or their price is increasing, and people cannot afford them. We would like to know if, in the last 30 days, your community faced difficulties in obtaining/purchasing [goods or services] because they were too costly. Are [goods or services]:** *Read each out loud, then rate from 1-5* *1: Free / very affordable to buy* *2: Affordable to buy* *3: Sometimes expensive to buy*	**C5. Sometimes goods or services are available, accessible, and affordable, but their quality is not good. Are you always satisfied with the quality of [goods or services] you have locally or are you sometimes unsatisfied?** *Read each out loud, then rate 1-5* *1: Always satisfied with quality* *2: Most of the time satisfied with quality* *3: Not always satisfied with quality* *4: Rarely satisfied with quality* *5: Never satisfied with quality*	**C6. In this community, what are the three priorities for assistance in the next three/six months?** *Select maximum three categories of needs*	**C7. For each good or service that you mentioned as a priority, which type of assistance would you favour to help you meeting this basic need? You can choose between cash, in-kind aid or service provision.** *Rank 1st, 2nd , 3rd preferred option*			
Basic needs	**C1**						**In kind**	**Service provision**	**Cash**	**Voucher**

			3: Sometimes difficult to physically access *4: Very difficult to physically access* *5: Impossible to physically access*	*4: Very expensive to buy* *5: Unaffordable*						
Food supplies (staple food, fresh vegetables and fruit, meat, etc.)										
Medicines and other healthcare products										
Healthcare services (Health staff, facilities, etc.)										
Water for drinking purposes (including treatment, etc.)										
Shelter commodities (furniture, building material, etc.)										
Shelter/housing (rent, purchase, construction, etc.)										
Household items (kitchen utensils, mats, mosquito nets, blankets, etc.)										
Hygiene commodities (Clothing, washing, soap, toothbrush, pads, diapers, etc.)										
Hygiene/sanitation facilities (toilets, shower, bath, etc.)										
Energy commodities for heating, cooking, lightning and heating)										
Transport services (All except education, to work, health centre, markets, etc.)										
Education commodities (uniforms, shoes, stationaries, books, etc.)										
Education services (transport, fees, teachers, etc.)										
Communication commodities (Phone, credit, etc.)										
Communication services (providers, towers, network, etc.)										
Other (Legal support, special needs, etc.)										

D. Expenditures and spending calendar

D1. How regularly do you spend money, or you procure goods or services for this need? *Select one option from the following:* *1: daily* *2: weekly* *3: monthly* *4: seasonal (e.g. three/twice year)* *5: once a year* *6: occasionally / exceptionally*		**D2. In this column, provide details and explanations for regular (food, water, electricity), seasonal (lean season) or one-off expenditures (e.g. annual school fee).** *In case occasional/exceptional expenditures are required (e.g. new shelter construction), indicate also in this column the required expenditure.*	**D3. If you spend money on this [good or service] on a [daily / weekly / monthly] how much do you spend?** *In [local currency]* *Write "0" if the respondent this expenditure does not recur monthly, meaning that it is occasional.*	**D4. In which months are the expenditures in [good or service] <u>greater</u> than usual, if at any point in time?** *Select months from the list (multiple choices allowed)*	**D5. How much are the expenditures, in those months when they are <u>greater</u> than usual?** *Write amount in local currency*	**D6. In which months are the expenditures in [good or service] <u>lower</u> than usual, if at any point in time?** *Select months from the list (multiple choices allowed)*	**D7. How much are the expenditures, in those months when they are <u>lower</u> than usual?** *Write amount in local currency*	**D8. [If seasonal] in which specific months do you have expenditures in [good or service]?** *Select months from the list (multiple choices allowed)*	**D9. How much are these "seasonal" expenditures, at each time?** *Write amount in local currency*
School supplies (uniforms, shoes, stationary, books, etc.)									
Education services (use of canteen, school fees, etc.)									
Transportation to school									
Energy commodities for cooking, lightening, heating?									
Food (staple food, fresh vegetables and fruit, meat, etc.)									
Health commodities (drugs, devices, etc.)									
Healthcare services (health centers, doctors, nurses, services such as laboratory tests, emergency services, hospitalization)									
Transportation to healthcare facility / medicine provider									
Household items (utensils, mats, blankets, mosquito nets, cooking sets, etc.)									
Hygiene items (clothing, cleaning products, soap, toothbrush, pads, diapers, etc.)									

Hygiene/Sanitation facilities and services (toilet, bath, showers, repair and construction services, etc.)									
Productive assets and inputs for agricultural and non-agricultural activities (livestock, items to trade, machines)									
Potable water (water, treatment, water points, etc.)									
Shelter commodities (furniture, construction materials, etc.)									
Shelter/housing (rent, purchase, construction services, etc.)									
Transportation services (all except transport to school or healthcare facility; only transport to work, markets, or other)									
Communication services and supplies									
Other basic services or good (e.g. Legal support, special needs, etc.)									

Tool 2 Household questionnaire revised after Ethiopia pilot

Basic needs assessment - Household Interview (after Ethiopia pilot)			
Date of interview		**Enumerator ID**	

Pre-screening questions: (tick boxes) All must be ticked.

☐ Interviewee is **Head of household OR the spouse** (He/She is the main responsible to provide for the household members, or the spouse)
☐ Interviewee is currently residing in this province/district
☐ If displaced, the interviewee arrived less than **[number]** months ago
☐ Interviewee participates voluntarily and is informed that the interview is completely anonymous
☐ Interviewee is informed he/she is selected randomly and that [no assistance will be provided after the interviews are processed] OR [assistance is not guaranteed]

A. General Information

A1. Province/district name		**A2. Site name**	
A3. Sex of Respondent	☐ Male ☐ Female	**A4. How old are you?**	
A5. What is your marital status?	☐ Married and living with husband or wife ☐ Married and not living with husband or wife ☐ Widowed ☐ Single (not married) ☐ Divorced or separated ☐ Refuse to answer		
A6. What describes best your household situation now?	☐ Resident (never left) ☐ Returnee (left and returned) ☐ Displaced > [number] months ☐ Displaced < [number] months ☐ Other (Specify and stop the interview if >[number] months)		
A7. Type of group	☐ Residents ☐ Displaced in spontaneous camp/site ☐ Displaced in planned camp/site ☐ Displaced in host community/families		

B. Household demography and profile

B1. Since the beginning of the crisis, do you have additional people dependent on you (now)?	☐ Yes ☐ No	**B1a. How many?**	

B2. # of household members currently living and sleeping under "one roof"	
	Members 0-12 months
	Members 1-6 years old
	Members 7 - 14 years old
	Members 15-17 years old
	Total number of children (SUM)
	Members 18-59 years old
	Members 60+
	Total number of adults (SUM)
	Total Household members (SUM)

B3. How many of your school aged household members are REGULARLY attending school NOW?

Mark "0" if none	**Total attending regularly school**
# of school-aged household members in primary school	
# of school-aged household members in secondary school	
# household members in technical and vocational	

B4. What is the highest education level of the head of household? *(Tick 1 only)*

☐ No schooling ☐ Primary school ☐ Secondary school
☐ Technical / Vocational ☐ University or higher ☐ I don't know

B5. Number of household members living under the same roof with special needs? *(mark "0" if none)*	
	With physical, permanent disability
	With mental disability
	With visual, hearing or speech impairment
	Chronically ill people/critical medical conditions
	Separated minors (related or not related to the household)
	Pregnant or lactating women
	Total household members with special needs (SUM)

C. Money and livelihoods

C1. Three main sources of money	*(Rank 1st, 2nd, 3rd)*
Income generating activities (casual work, sales, employment)	
Your savings	
Safety nets (pension, insurance)	
Loans from bank, government or microfinance	
Loans from family, friends, and remittances	
NGO/community support (cash, vouchers)	
Sale of humanitarian aid	
No cash sources available	

C2. What is the MAIN ACTIVITY for income generation in your household?

☐ Casual labour (agriculture, construction, domestic work)
☐ Salaried employment with the government, in private company (for profit or not for profit)
☐ Self-employment (petty trade, firewood sales, agriculture and livestock product sales, etc.)
☐ No regular income generating activities
☐ Other (Specify)
☐ Refuse to answer

C3. Do you agree to tell us the number of household members that contribute to generating your household income NOW?	☐ Yes ☐ Refuse to answer			
C4. How many members of your household are contributing to the household income NOW (INCLUDING YOU)?	**>18 years old**		**<18 years old**	
C5. Do you agree to tell us the total household income per month NOW?	☐ Yes ☐ Refuse to answer			
C6. What is the total household monthly income NOW (on average)? *(In ETB or 0 if no Income)*				

C7. Do you have any savings?	☐ Yes ☐ No

C7a. For how long can your current savings sustain expenditures without external assistance or income?	☐ Up to one week (max. 1 week) ☐ Up to two weeks (max. 2 weeks) ☐ Up to one month (max. 1 month) ☐ Between one and two months ☐ Between two and three months ☐ Three months or more ☐ I don't know ☐ Refuse to answer
C8. Do you agree to tell us an estimate of the total debts now?	☐ Yes ☐ Refuse to answer
C9. What is the current level of debts that you have to pay back? *(in ETB or "0" if there is no debt)*	

C10. Ways to receive and transfer money	*(Rank 1st, 2nd, 3rd)*
ATM withdrawal	
Bank withdrawal (from the counter)	
Microfinance institution	
Formal/institutionalised money transfer operator (Western union, money agent, etc.)	
Informal money transfer operator (informal transfer networks)	
Mobile phone money transfer	
Hand to hand	

D. Coping mechanisms	
D1. In the past three months, have you ever relied on one of the following actions because you did not have enough money to meet your household's needs? *Respond with yes or no*	
Sold household assets and property (house, jewellery, phone, furniture)	
Sold productive assets (land, shop, livestock, etc.) / means of transport	
Slaughtered livestock for household consumption	
Sent one or more of your children to live elsewhere	
One or more of your children got married or have been promised in marriage	

D2. How often in the PAST 30 DAYS have members of your household relied on any of the following actions to meet basic needs? *(1=Never, 2=Once in the month, 3=Occasionally (a few times but not regularly), 4=Regularly on a weekly basis, 5=Frequently (more than once per week))*	
Using savings	
Buying goods or services on credit	
Borrowing money from family or friends	
Spending less than you need on healthcare and/or medicines	
Children (anyone below 18) in your household had to go to work	
Asking for money from people in your community	
Sending one or more children in your household to ask for money	
Not sending children to school	
Using savings	

D3. How many days in the PAST 7 DAYS have members of your household relied on any of the following actions to meet food needs? *(1=1 day, 2=2 days, 3=3 days, etc.)*	
Rely on less preferred and less expensive foods	
Gather wild food, hunt, or harvest immature crops	
Borrow food, or rely on help from a friend or relative	
Limit portion size at mealtimes	
Restrict consumption of adults in order for small children to eat	
Reduce number of meals eaten in a day	
You went without eating for a whole day	
Rely on less preferred and less expensive foods	
Gather wild food, hunt, or harvest immature crops	

E. Basic needs and their sourcing

E1. List <u>all the things</u> you need AS A MINIMUM (could be goods or services for instance) for your household members to satisfy their needs in one [*reference period: week/month/year*]? *Write a list*		**E2. Where or who do you get these [category of good or service or facility] mostly from?** *Choose one among these:* *1: From nature/natural resource* *2: From own production / effort / means* *3: Buy from shops /traders /professionals* *4: Charity from NGO/UN/community* *5: Local/national authorities/government*	**E2. How long does it take (in minutes) to get to the place where you can acquire [basic goods or services]?** *A: In house (0-5min)* *B: Local (5 minutes -1H)* *C: Distant (1H – 2H)* *D: Remote (2H – 5H)* *E: Very remote (>5H)*	**E4. How regularly do you spend money, or you procure goods or services for this need?** *Select one option from the following:* *1: daily* *2: weekly* *3: monthly* *4: seasonal (e.g. three/twice year)* *5: once a year* *6: occasionally / exceptionally*	**E5. If you spend money on this [good or service] on a [daily / weekly / monthly] how much do you spend?** *In [local currency]* *Write "0" if the respondent this expenditure does not recur monthly, meaning that it is occasional.*
List of basic needs					
School supplies (uniforms, shoes, stationary, books, etc.)					
Education services (use of canteen, school fees, etc.)					
Transportation to school					
Energy commodities for cooking, lightening, heating?					
Food (staple food, fresh vegetables and fruit, meat, etc.)					
Health commodities (drugs, devices, etc.)					
Healthcare services (health centers, doctors, nurses, services such as laboratory tests, emergency services, hospitalization)					
Transportation to healthcare facility / medicine provider					
Household items (utensils, mats, blankets, mosquito nets, cooking sets, etc.)					
Hygiene items (clothing, cleaning products, soap, toothbrush, pads, diapers, etc.)					
Hygiene/Sanitation facilities and services (toilet, bath, showers, repair and construction services, etc.)					
Productive assets and inputs for agricultural and non-agricultural activities (livestock, items to trade, machines)					
Potable water (water, treatment, water points, etc.)					
Shelter commodities (furniture, construction materials, etc.)					
Shelter/housing (rent, purchase, construction services, etc.)					
Transportation services (all except transport to school or healthcare facility; only transport to work, markets, or other)					
Communication services and supplies					
Other basic services or good (e.g. Legal support, special needs, etc.)					

F. Priority needs and preferred assistance

F1. In the current situation, how would you rate your ability meet/satisfy the [category of basic good or service] needs of your family members?	**F2. What are the three main barriers you face in meeting this basic need?**	**F3. If you DON'T receive additional assistance for/in [category of basic need], how worried are you about**	**F4. *<u>Among the needs that you rated 3 or 4 or 5 in the previous question</u>*, what are the**	**F5. For each good or service that you mentioned as a priority, which type of assistance would you favour to help you meeting this basic need? You can**

Read out loud and rank on a scale of 1-5, with 1 meaning "we can meet our needs without worry," 3 meaning "we can just barely meet our needs" and 5 meaning "we are completely unable to cover all our family needs." *1: In my household, this need is fully met* *2: In my household, this need is largely met* *3: We can just barely meet this need* *4: We are not able to meet this need* *5: We are absolutely unable to meet this need*		*(do not read out loud; select the best fit. Can select more than one answer)* *A. Terrain and logistical constraints to access markets/service providers* *B. Insecurity hindering access to markets/service providers/goods* *C. Social discrimination hindering access to markets/service providers* *D. Insufficient money to buy goods or services* *E. Insufficient or unreliable quantity of goods / services available locally / produced in house* *F. Insufficient number of facilities / providers / shops supplying the area* *G. Insufficient variety of goods and services* *H. Insufficient skills and competencies of service providers* *I. Insufficient safety or reliability of provided goods or services* *J. Other. Specify*	**the implications for your household in the next three months?** *Read each out loud, then rate them from 1-5* *1: I am not at all worried* *2: I am slightly worried, but we should be able to cope* *3: I am somewhat worried and I'm not sure we will be able to cope* *4: I am very/moderately worried and fear serious consequences for our inability to cope* *5: I am extremely worried and fear catastrophic consequences for our inability to cope*	**three you consider a priority for assistance in the next three/six months?** *Select maximum three categories of needs*	**choose between cash, in-kind aid or service provision.** *Rank 1st, 2nd , 3rd preferred option*			
Basic needs	**F1**				**In kind**	**Service provision**	**Cash**	**Voucher**
Food supplies (staple food, fresh vegetables and fruit, meat, etc.)								
Medicines and other healthcare products								
Healthcare services (Health staff, facilities, etc.)								
Water for drinking purposes (including treatment, etc.)								
Shelter commodities (furniture, building material, etc.)								
Shelter/housing (rent, purchase, construction, etc.)								
Household items (kitchen utensils, mats, mosquito nets, blankets, etc.)								
Hygiene commodities (Clothing, washing, soap, toothbrush, pads, diapers, etc.)								
Hygiene/sanitation facilities (toilets, shower, bath, etc.)								
Energy commodities for heating, cooking, lightning and heating)								
Transport services (All except education, to work, health centre, markets, etc.)								
Education commodities (uniforms, shoes, stationaries, books, etc.)								
Education services (transport, fees, teachers, etc.)								
Communication commodities (Phone, credit, etc.)								
Communication services (providers, towers, network, etc.)								
Other (Legal support, special needs, etc.)								

G. Hypothetical expenditures

G1. If you received [amount of hypothetical transfer] this month, how would you spend it across the following: *Split the amount of hypothetical transfer across the categories; total must be equivalent to the total transfer*	**G1a. Cover basic needs**
	G1b. Pay back debts
	G1c. Saving

G2. If you received [amount of transfer in local currency] this month only to cover your basic needs, how would you spend it across the following goods and services? *Split the amount of hypothetical transfer across the basic needs; total must be equivalent to the total transfer*	
School supplies (uniforms, shoes, stationary, books, etc.)	
Education services (transport to school, fees, canteen, etc.)	
Energy commodities and utilities for heating, cooking, lightning and charging	
Food (staple, fresh vegetables and fruit, meat, etc.)	
Healthcare services (health staff, facilities, etc.)	
Health commodities (medicines, etc.)	
Households items (utensils, pots, mats, blanket, mosquito net, cooking set, etc.)	
Hygiene items (Clothing, washing, soap, toothbrush, pads, diapers, etc.)	
Hygiene/sanitation facilities (toilets, shower, bath, etc.)	
Potable water (including containers, treatment, etc.)	
Shelter commodities (furniture, household appliances, etc.)	
Shelter/housing (rent, purchase, building material, construction services, etc.)	
Transport services (All except education, to work, health centre, markets, etc.)	
Communication commodities and services (phone devices, phone credit, providers, towers, networks, repair shops, etc.)	

Tool 3 Suggested BNA report outline

1. Executive summary
   - Priority geographic areas and affected groups
   - Assistance required
   - Preferred assistance modalities
   - Expenditures, gaps, and calendar
   - Income, savings, and livelihoods
   - Transactions: mechanisms to transfer and receive money
   - Inter-sectoral matters: coping strategies and special needs
   - Critical markets and systems of service provision
   - Key recommendations for emergency response
   - Further assessments and analysis to be conducted

2. Assessment methodology and its limitations
   - Objective and scope
   - Sampling strategy
   - Methods of data collection and timeframe
   - Methods of data analysis
   - How to read charts
   - Limitations of the methodology

3. Key concepts and definitions

4. Key findings
   - Priority areas and population groups
   - Overview of needs and priority ranking
   - Income and livelihoods
   - Transactions: methods to transfer and receive money
   - Current and minimum expenditures and their seasonality
   - Barriers of unmet needs
   - Preferred assistance options
   - Demographic data
   - Summary dashboard

5. Sector specific findings (same structure for each category of basic needs; e.g. The need for education; The need for health)
   - Overview of current humanitarian assistance for the specific need
   - Basket of basic commodities, services, and facilities to satisfy the need
   - Severity of unmet needs
   - Coping mechanisms affecting this need category
   - Why this need is unmet?
   - Markets and/or systems of service provision for the specific need
   - Preferred assistance options
   - Expenditures and their recurrence

6. Conclusions and recommendations
   - Summary of findings and conclusions by sector
   - Further assessments and analysis to be conducted
   - Limitations of the assessment

7. Annexes
   - Secondary Data Review
   - Detailed sampling plan
   - Questionnaires
   - Debriefing and lessons learned