

## Accountability Mechanisms (cont.)

17. Have you ever given/ provided any feedback to the government and other organizations because the aid/support/help was not what you needed?

Yes (please indicate if it is from national or local government , UN  INGOs  CSOs , Private sector  Church/Faith-based groups  volunteer networks , other )

No

18. Was your feedback given necessary action by the government?

Yes (indicate if it is from national , regional , provincial , municipal  barangay )

No

19. Was your feedback given necessary action by other organizations?

Yes (please indicate if it is from UN  INGOs  CSOs , Private sector  Church/-Faith-based groups  volunteer networks , other )

No

20. Do you have a question(s) or comments for us? Please provide details.

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Community of Practice (COP) on Community Engagement

## Rapid Information, Communication, and Accountability Assessment (RICAA)

I am \_\_\_\_\_ (required) from \_\_\_\_\_ (required), a member of the CoP on Community Engagement under the Philippines Humanitarian Country Team (please explain briefly about the CoP).

We are conducting a RICAA<sup>1</sup> community survey and consultation to better understand and validate information needs, preferred communication channels and available accountability mechanisms in your community days after the disaster/emergency.

These are information, communications and accountability questions that are designed to be integrated into rapid needs assessments conducted by the Community of Practice (CoP) on Community Engagement members and partners as part of after 72-hour assessment in an affected area.

We are working on this with \_\_\_\_\_ (required, please state if it is from local government, humanitarian, development, church-based and volunteer agencies, etc.) so we can facilitate getting the right information to the right people at the right time through the right channel.

### General Information

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: M / F

Marital status: Single / Married / Separated / Divorced / Widowed

Address: \_\_\_\_\_

Religious affiliation: Roman Catholic / Islam / Christian / Other \_\_\_\_\_

Type of work: Skilled worker / Office related work / Business related work / Other \_\_\_\_\_

### Respondents' category<sup>2</sup>

Children (under 18 years old)  Youth (18 - 25 years old)

Women (pregnant  lactating  single parent  other \_\_\_\_\_)

Elderly (living with family  with close relatives  other \_\_\_\_\_)

Persons with disability (physical  sensory  mentally/intellectual )

Internally displaced population (camp  outside camp  transitory site  evacuation center  with host family/community  rented/subsidized center  other \_\_\_\_\_)

Geographically isolated and displaced area (GIDA) population (coastal/island  mountainous area  MILF/MNLF/NPA controlled area  other \_\_\_\_\_)

Indigenous people (please specify \_\_\_\_\_)

Sexual orientation (lesbian  gay  bisexual  transgender  intersex  other \_\_\_\_\_)

Membership in community (community-based organizations  clubs  committees  other \_\_\_\_\_)

<sup>1</sup>CoP members/partners should be aware that while all questions are focused on interviewing or consulting a household, these can be adjusted to focus group discussion or key informant interview formats, as needed and as the situation requires.

<sup>2</sup>This will be useful in prioritizing the most vulnerable, marginalized, less vocal and visible in the community.

## Information needs

1. What is your preferred language of information?  
 Filipino  Tagalog  English  Bicol  Cebuano  Ilocano  Ilongo  
 Pampaguano  Waray  Other (specify \_\_\_\_\_)
2. Do you have necessary information about aid, support or any form of help being provided?  
 Yes (please indicate if it is enough or not enough)  
 No
3. Did the aid, support or any form of help come from the government?  
 Yes (please indicate if it is national regional provincial municipal or barangay)  
 No
4. How about aid, support and any form of help from other organizations?  
 Yes (UN agencies INGOs CSOs private sector business groups church/faith-based groups volunteer groups other \_\_\_\_\_)  
 No
5. Were you informed of what you should receive?  
 Yes (information comes from local government other organizations family/relatives neighbors other \_\_\_\_\_)  
 No
6. Do you have the necessary information on how to address your current need?  
 Yes (proceed to Communications channels section)  
 No

## Communication Channels

7. If Yes, what are the main sources of your information?  
 Friends, neighbors, and family  Community leader  Religious leader  
 Government official  Military official  TV (national/local)  
 Newspaper (national/local)  AM radio  FM radio  
 SMS  Aid worker  Community group  
 Other \_\_\_\_\_
8. If No, what type of information you think you need?  
 Food  Shelter  Water  Information on relatives  
 Information on assistance  Other \_\_\_\_\_
9. What are the community's main sources of information before the disaster?  
 Friends, neighbors, and family  Community leader  Religious leader  
 Government official  Military official  TV (national/local)  
 Newspaper (national/local)  AM radio  FM radio  
 SMS  Aid worker  Community group  
 Other \_\_\_\_\_

## Communication Channels (cont.)

10. What communication channels do you prefer to communicate with your loved ones, friends, government and other organizations from neighboring province, barangay, Metro Manila or other country?  
 SMS text and calls  
 Internet social media (if not all communication/power lines are down)  
 AM/FM radio (national and local)  
 TV (national and local)  
 Other \_\_\_\_\_

## Accountability Mechanisms

11. Do you have any questions about the aid you received?  
 Yes (please specify: person to contact about the aid, next schedule of the aid, if there are any, where to go for me to provide feedback about the aid I received, other \_\_\_\_\_, then proceed to questions 14-19)  
 No (please proceed to questions 12 and 13)
12. If no, then what do you think are the reasons you are not given any form of aid/assistance?  
 No information about the aid provided  
 Not on the identified beneficiary list  
 Was out of the camp/evacuation center when the aid was distributed  
 Other (please specify \_\_\_\_\_)
13. Did you inform camp manager, local government, neighbors, relatives and other agencies about your situation?  
 Yes (please proceed to questions 17-19)  
 No (please proceed to question 16)
14. Are you satisfied with the assistance delivered?  
 Yes (please specify, the type of assistance received, if feedback were established or considered, other \_\_\_\_\_)  
 No
15. Were you consulted on what you needed?  
 Yes (In what way: face to face consultation/dialogue, house visit, general assembly, other \_\_\_\_\_)  
 No
16. Do you have suggestions on how to improve the assistance?  
 Yes (please specify: mode of delivery, speed, quality and volume of aid, feedback mechanism and closing the communication loop platform, other \_\_\_\_\_)  
 No