

Report on Survey Implementation Process

Voices from the Margins and Inclusive Policy Responses to COVID-19 Pandemic

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Supported by the UK Foreign Commonwealth and Development Office (FCDO), the Covid Collective is based at the Institute of Development Studies (IDS). The Collective brings together the expertise of, UK and Southern based research partner organisations and offers a rapid social science research response to inform decision-making on some of the most pressing Covid-19 related development challenges.

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Table of Contents

1.0	Introduction	2
2.0	Methodology and Sampling Strategy	4
2.1	Sampling Strategy	4
2.2	Selection Procedure	6
3.0	Data Collection Tools	8
3.1	Survey Questionnaire and FGD Checklist Development.....	10
3.2	Translating Survey Questionnaire.....	11
3.3	Finalisation of Survey Questionnaire	12
4.0	Survey Implementation	12
4.1	Inception of Training	13
4.2	Selection of Survey Location	14
4.3	Field Plan.....	14
4.4	Survey Implementation.....	16
4.5	Implementer’s Field Visit	17
4.6	Challenges	17
4.7	Post Survey Enumerator’s Experience Sharing	17
5.0	Data Cleaning and Analysis	18
6.0	Way Forward	19

1.0 Introduction

The Centre for Peace and Justice (CPJ), Brac University is currently implementing a research project to create an information data-loop to inform and influence public policies and state responses on COVID-19 related relief, recovery and resilience measures. Based on a representative household panel of marginalised groups in Bangladesh, the project has been tracking their understanding of and demand for healthcare policies and responses. The proposed research aims at collecting citizen feedback through ICT tools, on a set of pre-defined indicators. In this regard, three rounds of surveys in panel setting would be undertaken using ICT devices (using an appropriate platform, example android) with a pre-loaded questionnaire. A tracking system (e.g. GIS) on the device would help indicate the location from where data is collected thereby enhancing the reliability of data collection and enabling a “granular” analysis at the disaggregated level.

The key output of the project is a validated and real-time public facing web-based portal which will provide a rapid feedback loop for systematic curation, analysis and reporting of public perception and feedback from five marginalised groups. Marginalisation is conceptualised in this project as both a process and a condition that prevents individuals or groups from full participation in social, economic, and political life. Marginalised population would mean those groups who have no influence over the ways in which the responses to mitigate the impacts of COVID-19 are crafted and implemented and hence, be ‘passive’ or ‘coerced’ receptors of policies and response measures.

These marginalised groups are defined through five factors (economic opportunities, gender, living in remote areas with low access to health services, ethnic and religious background, and disability) in Bangladesh to critical issues pertaining to awareness of mitigation measures (including the vaccine), access to critical infrastructure like health, education, and social safety nets, self-assessed economic condition, levels of trust in key institutions and awareness of and responses to public information campaigns related to COVID-19.

The empirical evidence for this research is being built through three rounds of household survey in the marginalised community along with focus group discussions. After successful completion of the first and second round of survey and subsequent data

analysis, CPJ, Brac University organised two Policy Clinics to validate the survey findings and identify policy gaps with an aim to formulate alternative policy recommendations on 15 September and 13th December 2021. Besides, the second round survey findings are going to be presented in a public facing [web-based dashboard](#) for citizen's feedback and suggestions. As a continuation of building empirical evidence under capturing dynamic features of the households' experience, perception, and expectations during the ongoing Covid-19 pandemic the third and final round survey was implemented in December 2021. The data collection tools and implementation strategies for the third round survey were refined in light of some of the lessons learned during the first and second round survey implementation during June and September 2021.

Figure 1: 3rd Round Survey implementation pathways



During the 3rd round survey we took Covid-19 situation into consideration while developed the implementation plan. We started our three days training from 7th to 9th December 2021 for conducting the third round survey.

2.0 Methodology and Sampling Strategy

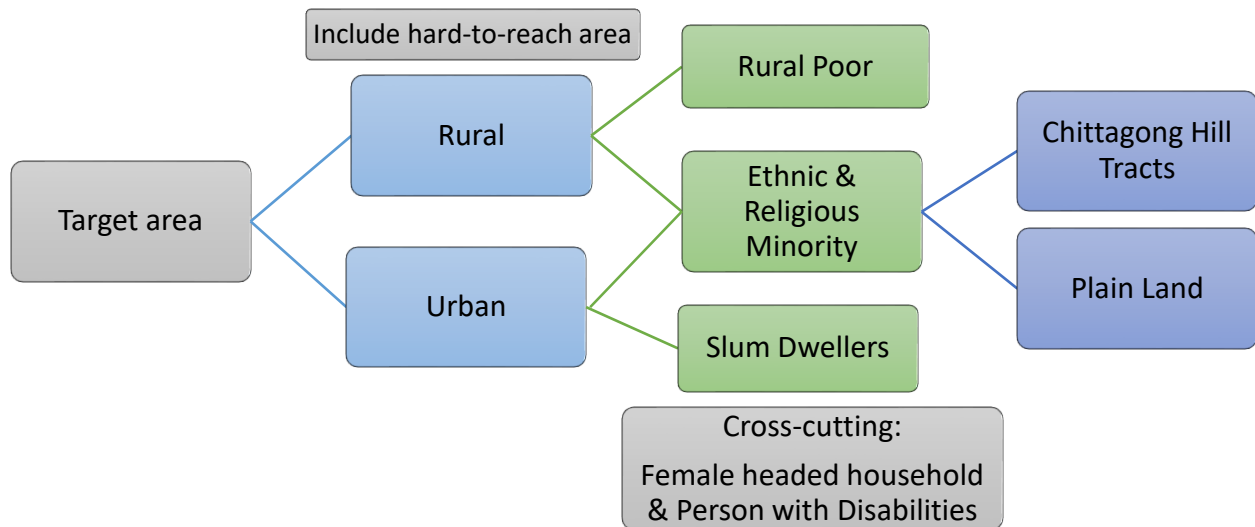
The study follows a mixed method approach to collect data related to the research objectives. A representative sample survey at the household level under panel setting (three surveys in three quarters in a year) is being conducted. Study design and devising the survey tools along with checklists for qualitative data collection through focus group discussions (FGDs) has been developed in the design phase of the project. The aim of the study is to be more exploratory rather than predictive. It served as the amplifier of the voice of the marginalised population for responsive and inclusive policy formulation. Geographical dispersion of the survey was maintained to capture the diversity of the sample. Under panel survey at household level, feedback/response has solicited over a digital platform using customised and user-friendly mobile phone apps.

A public facing frontend (web based dashboard) will report the findings and trends through data analytics and infographics. Descriptive and analytical statistics has been used in analysing quantitative data while qualitative data helped us explain and further clarify some of the significant trends, changes, perceptions and overall their experiences.

2.1 Sampling Strategy

A questionnaire survey has been conducted among the representative panel of households from selected marginalised population namely Rural Communities, Urban Slum Dwellers, Ethnic and Religious Minority groups, Female headed Households, and Households having Persons with Disability. The marginalised groups are selected based on five categories of marginalisation which are economic opportunities, living in remote areas with low access to health services, gender, ethnic and religious background, and disability. Considering all five categories of marginalisation we divide the target population into three strata namely rural Communities, urban slum dwellers, and ethnic and religious minority groups where we can find the other two groups as sub-categories of the marginalised population which are Female headed Household, and Persons with Disability in each stratum as cross cutting groups.

Figure 2: Sample population by group and area



As one of the objectives of the study is to find the estimate for each of these strata, we calculated sample size for each groups separately. For each stratum, prior to the first round survey we calculated sample size considering each of the indicators of the expected outcome for the respective marginalised target groups and the maximum sample size was reported for the indicator with 50% coverage. The sample size has been determined considering 95% confidence interval, 5.6% admissible error and design effect (1.5) using the following equation.

$$n = \left(\frac{Z_{\alpha}^2 p(1-p)}{d^2} \right) \times deff$$

where:

Z_{α} = the z-score corresponding to the 95% confidence interval of the true proportion

P = the expected proportion of the respective indicators

d = admissible error

deff = design effect

Using the above formula, the sample size for each stratum is 460, and with 10% non-response, it is 505. Altogether, for the 3 target strata, the total sample size is 1,515. Sampling has been done in two stages. A random sample of 30 clusters (a union/ward with approximately 500 HHs in rural setting and a slum-segment/block with approximately 100 HHs in urban slum setting) has been selected from each stratum in the first stage and a total of 17 HHs has been selected from each cluster following a systematic sampling

scheme in the 2nd stage (Table 1). Finally, one respondent from each HH has been interviewed. Details of the sample selection for each stratum are discussed below.

We selected the respondents in two stages. In the first stage, we selected randomly 30 clusters from each stratum. These selected 30 clusters are then proportionately distributed to the respective districts and upazilas of the study areas under each stratum. In the 2nd stage, we selected 17 HHs (one respondent from each HH), systematically from each cluster. We selected the sub-category of the marginalised population such as women or female headed households and persons with disability across the three main strata, we considered to interview 10% HHs for each case from all HHs in each selected cluster.

Table 1: Stratum specific sample size

Strata	Areas	Respondents	Clusters	Number of HHs
Slum-dwellers	City Corporation areas	505	30	17
Ethnic/religious minority	Both hilly and plain land areas where the majority of the indigenous and religious minority people live	505	30	17
Rural poor	Districts with extreme poverty	505	30	17
Total		1,515	90	1,515

2.2 Selection Procedure

For each study area (e.g., districts/upazilas) of the respective stratum, we divided the area/region into different small clusters. A cluster is a union/ward in a rural setting consisting of approximately 500 HHs (it could be a ward of the union or a portion of the union with approximately 500 HHs in a rural setting and a slum-segment/portion with approximately 100 HHs in urban slum setting). For rural cluster, there is approximately 25-45% poor HHs (according to the national poverty rate in HIES 2016: poor if per capita expenditure belong to the upper poverty line of 2,268 BDT) in each cluster and hence approximately 125 poor HHs in each cluster.

As discussed, we selected the respondents in two stages. In the first stage, we selected randomly 30 clusters from each stratum. Subsequently, these selected 30 clusters were proportionately distributed to the respective districts and upazilas of the study areas under each stratum. In the 2nd stage, we selected 17 HHs (one respondent from each HH) systematically from each cluster.

Households satisfying more than five selection criteria among the following criteria were selected for interviewing:

1. Floor of the household is Katcha or semi-pacca
2. Ownership of land less than 10 decimal
3. An adult HH member is day labourer
4. There is no adult member in the household
5. At least one child involved in works
6. No Television in the household
7. No Refrigerator in the household
8. No motorcycle in the household
9. No livestock in the household (not more than 2 cows/buffalos or 5 goats/sheep)
10. There is no poultry farm or equivalent farm (not more than 10 hen/ducks)

To select the sub-category of the marginalised population such as women or female-headed households and persons with disability across the three main strata, we considered interviewing 10% HHs for each case from all HHs in each selected cluster.

In this procedure, we selected approximately 2 HHs with person with disability and 2 female-headed HHs in each selected clusters and then a total of approximately $2 \times 90 = 180$ respondents for persons with disability, and 180 respondents for female-headed HHs. That is, with this procedure, sub-categories: female-headed HHs and person with disability were selected across the 3 main strata (urban slum, ethnic minority and rural poor). Due to field reality the third round survey finally interviewed 1,477 HHs (2.4% attrition) instead of 1,533 (number of interviews conducted in the first round) and the sample distribution is given below.

Table 2: Number of interviews conducted

Category of sample	Number of interviews conducted in 3rd round	Number of interviews conducted in 2nd round	Number of interviews conducted in 1st round
Ethnic and religious minorities	491	492	492
Rural Communities	516	524	531
Urban slum dwellers	470	480	510
Total	1,477	1,496	1,533
HH having Persons with Disabilities*	175	179	184
Female headed HH*	206	206	211

*These two groups are cross cutting of the main three stratum and therefore not additive to the total sample

The sample area was well distributed geographically to capture the selected marginalised groups under this survey. It covered all the administrative divisions (8), where 20 districts and 40 upazilas were brought under the survey. Under these 40 upazilas a total of 90 Mauzas/ Clusters were covered where we got 50 unions, and 16 wards, and 329 villages/ mohallas. The survey areas are shown in the Bangladesh Map (Figure 4).

A total of 56 households (3.7%) dropped out from the survey. Data could not be collected from these dropped households further due to several reasons. The following Table provides the reasons for the dropout. The attrition rate is 3.7% in the third survey where as our assumption of attrition in sample design was 10%. During the first round of survey, we conducted 10% extra household interview to overcome the attrition problem as well as non-response issue. It is also observed that there is a small change in the composition of the gender of household head and person with disability due to demographic and natural reasons.

Table 3: List of households could not be reached and the reasons

SL	HHID (created by HDRC)	Reason for dropout	Phase of dropout
1.	671	Household members were not at home and went to attend a wedding	2 nd round
2.	672	Household members went to Sirajganj to attend a program	2 nd round
3.	713	Household members were not present; they were in Dhaka	2 nd round
4.	747	Household members migrated to Khulna	2 nd round
5.	792	Household members were not present in the household	2 nd round
6.	775	Household members migrated to Dhaka	2 nd round
7.	857	Household members migrated to another union	2 nd round

SL	HHID (created by HDRC)	Reason for dropout	Phase of dropout
8.	1026	Household members migrated to a rural area	2 nd round
9.	1030	Nobody knows where the whereabouts of the household members	2 nd round
10.	1049	Household members migrated to Comilla	2 nd round
11.	1067	Household members migrated to Comilla	2 nd round
12.	1080	Household members migrated to Tangail	2 nd round
13.	1121	Household members left the area	2 nd round
14.	1125	Household members left the area	2 nd round
15.	1151	Household members migrated to Sherpur	2 nd round
16.	1155	Household members migrated to Kurigram	2 nd round
17.	1174	Household members migrated (location not known)	2 nd round
18.	1198	Household members migrated to Bhola	2 nd round
19.	1212	Household members migrated to Jamalpur	2 nd round
20.	1222	Household members migrated to Bhola.	2 nd round
21.	1235	Household members migrated to Bagerhat	2 nd round
22.	1246	Household members migrated to Netrokona	2 nd round
23.	1250	Household members migrated to Netrokona	2 nd round
24.	1254	Household members migrated to Barisal	2 nd round
25.	1268	Household members migrated to the village	2 nd round
26.	1270	Household members migrated to Comilla	2 nd round
27.	1313	Household members migrated to Gazipur	2 nd round
28.	1321	Household members migrated to Gazipur	2 nd round
29.	1348	Household members migrated to a rural area	2 nd round
30.	1362	Household members migrated to Bhola	2 nd round
31.	1364	Household members migrated (location not known)	2 nd round
32.	1365	Household members migrated to Bogra	2 nd round
33.	1379	Household members could not be reached over the phone, and nobody knew their whereabouts.	2 nd round
34.	1402	Household members migrated to Bogra	2 nd round
35.	1442	Household members migrated to Khulna	2 nd round
36.	1447	Household members migrated to Rupnagar	2 nd round
37.	1482	Household members were visiting Keraniganj (not found in the location)	2 nd round
38.	410	Household members migrated to Dhaka	3 rd round
39.	558	Household members migrated to the village	3 rd round
40.	603	Household members migrated to Dhaka	3 rd round
41.	607	Household members migrated to Dhaka	3 rd round
42.	704	Household members migrated to Dhaka	3 rd round
43.	748	Household members migrated to Khulna	3 rd round
44.	911	Household members migrated to Dhaka	3 rd round
45.	961	Household members migrated to the village	3 rd round
46.	979	Household members migrated to Dhaka	3 rd round

SL	HHID (created by HDRC)	Reason for dropout	Phase of dropout
47.	1133	Household members migrated to Dhaka	3 rd round
48.	1209	Household members migrated to the village	3 rd round
49.	1231	Household members migrated to the village	3 rd round
50.	1238	Household members migrated to the village	3 rd round
51.	1260	Household members migrated to Bhola	3 rd round
52.	1263	Household members migrated to Cumilla	3 rd round
53.	1281	Household members migrated to Netrokona	3 rd round
54.	1339	Household members migrated to Bogura	3 rd round
55.	1373	Household members migrated to Noakhali	3 rd round
56.	1490	Household members migrated to the village	3 rd round

3.0 Data Collection Tools

3.1 Survey Questionnaire and FGD Checklist Development

As a first step of developing data collection tools we collected and reviewed the existing literatures, concurrent other survey tools, discussions on the virtual group meetings and reviewing with team members and advisors of the study. Before developing the survey instrument we conducted a formative research and grasped the idea for generating a basic structure of the data collection tools. This formative research guided us to develop the questions under multiple themes. At first we didn't come in one single decisions about naming of the themes but when we put all the required questions to ask under one tentative themes, it helped us to finalise the name of the themes under a set of questions. After developing the final draft of the questionnaire we focused to prepare the FGD checklists for this study. Primarily checklists were developed on the basis of several interactive sessions among the researchers and later updated in this second round. A couple of researchers shared their updates individually and later these were compiled into a one single document where all required issues were addressed for qualitative exploration which helped to understand the perceptions and experiences marginalised communities have been facing. It is worth mentioning that we developed the questionnaire by English at first.

Given the Covid-19 situation and related changes in government policies and intervention along with our learning from the findings for the first round survey necessary deletion, modification and inclusion were done to streamline the survey questionnaire and FGD checklist. As we designed at the beginning there are two parts in the data collection tools; (1) core part, and (2) dynamic part. For the first part, we are collecting data over time while for the second part we have done necessary deletion, modification of the existing questions and inclusion of new question(s).

The broad sections of the questionnaire is given below.

Table 4: Sections in the survey questionnaire

Section	Title of the Section	Total no. of Questions
A	Interview Type and Location	5
B	Respondent's Information	8
C	Head of the Household and Household Information	15
1	Socio-economic Profile of the Household	10
2	Understanding of and Practices Related to COVID-19	23
3	Impact of COVID-19 and Vulnerabilities	19
4	Coping with COVID-19 Pandemic	6
5	Experience and Perception about COVID-19, Vaccine and other Health Care Services	34
6	Government Responses and Regulations to COVID-19 Pandemic	14
7	Community Solidarity and Support from other Sources	10
8	Expectations from the Government to address COVID-19 induced Impact	15
Total		159

3.2 Translating Survey Questionnaire

We translated it into Bangla as translation is necessary for effective and empathetic communication in the local cultures. Moreover, as almost all the respondents understands the Bangla language whether it is speaking or listening so we developed a translated version before the pre-test. When we were working for the translation from English to Bangla, we were very much concerned to keep the same meanings of the English questionnaire and making it understandable in their cultural vocabulary as well e.g. Corona instead of COVID. This process helped us to determine the pros and cons of our survey in relating question format, its sequences, wording and sentences for transmitting appropriately for reaching its ultimate objective.

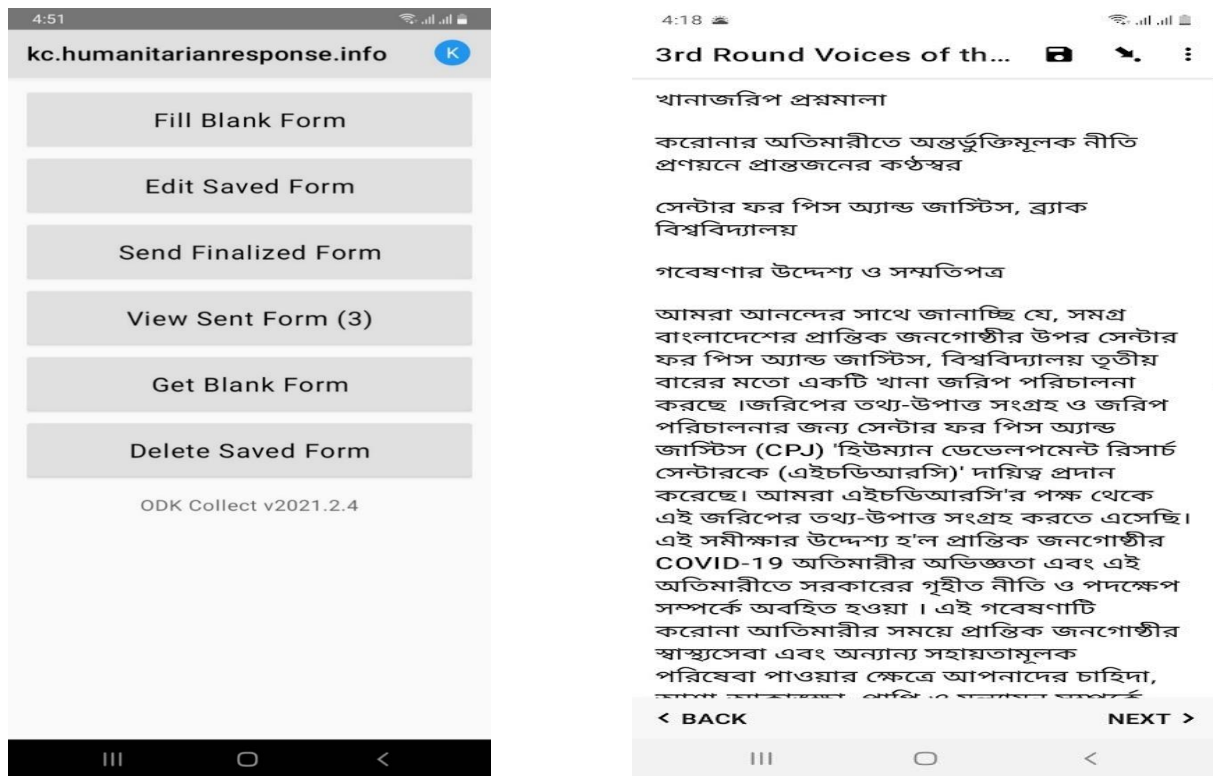
3.3 Finalisation of Survey Questionnaire

We reviewed each question, the words used in the questions, and the probable variations of the answers. We tried to understand whether there is any difference between urban and rural in understanding the questions and the possible answers we used. Researchers used these as tools and explored the peoples' perception and experience on COVID, test, vaccine programme, and government support. In the third round survey, we incorporated a couple of questions on mental health status, and vaccine preference.

4.0 Survey Implementation

There are a few more steps directly linked to the survey implementation. After the completion of the survey instrument we took some time for preparing the android based application. The android-based application was prepared for tab-based data collection. The app required to go through the necessary checks on its functionality and accuracy. The process required almost a couple of days in this second round before the inception of training.

Figure 3: Screen Shots of data collection application in android device



The implementing firm selected the 24 enumerators on the basis of their previous data collection experience. In order to recruit enumerators for collecting data and the formation of the team, gender and ethnicities were highly prioritised.

4.1 Inception of Training

We were able to start a three-days training (7th to 9th December 2021) when we had full survey instruments in hand, android-based application was prepared and the trainees were ready. We prepared the training schedule and conducted the training accordingly. We took all the COVID measures and maintained distance from each of the trainee during the total duration of the training. A large training venue was selected for ensuring physical distancing among the trainees and the trainers during training sessions.



Training session for field personnel at HDRC conference room

First two days, we discussed with the trainees about the research topics, including the purpose of the research and in detail of the survey instrument using a participatory approach. On day three, the training team along with the enumerators went to the field for testing the instrument and the application of the app. Later, we collected feedbacks, comments and information from the field test and incorporated with the necessary changes in the questionnaire and the application has been updated accordingly. On the same day, we conducted two sessions with the qualitative team and made them understand how they would perform FGDs in different marginalised groups. Finally, a data analyst and IT expert provided necessary troubleshooting session for the android based application.

4.2 Selection of Survey Location

In the third round, we repeated those areas/ districts/ upazilas (sub-districts) as the first and second round survey from all administrative divisions for allowing geographical variation where a certain proportion of people belong to extreme poverty line (according to national poverty map by the world bank). The areas/ regions were already divided into different small clusters. The survey areas are shown in the Bangladesh Map.

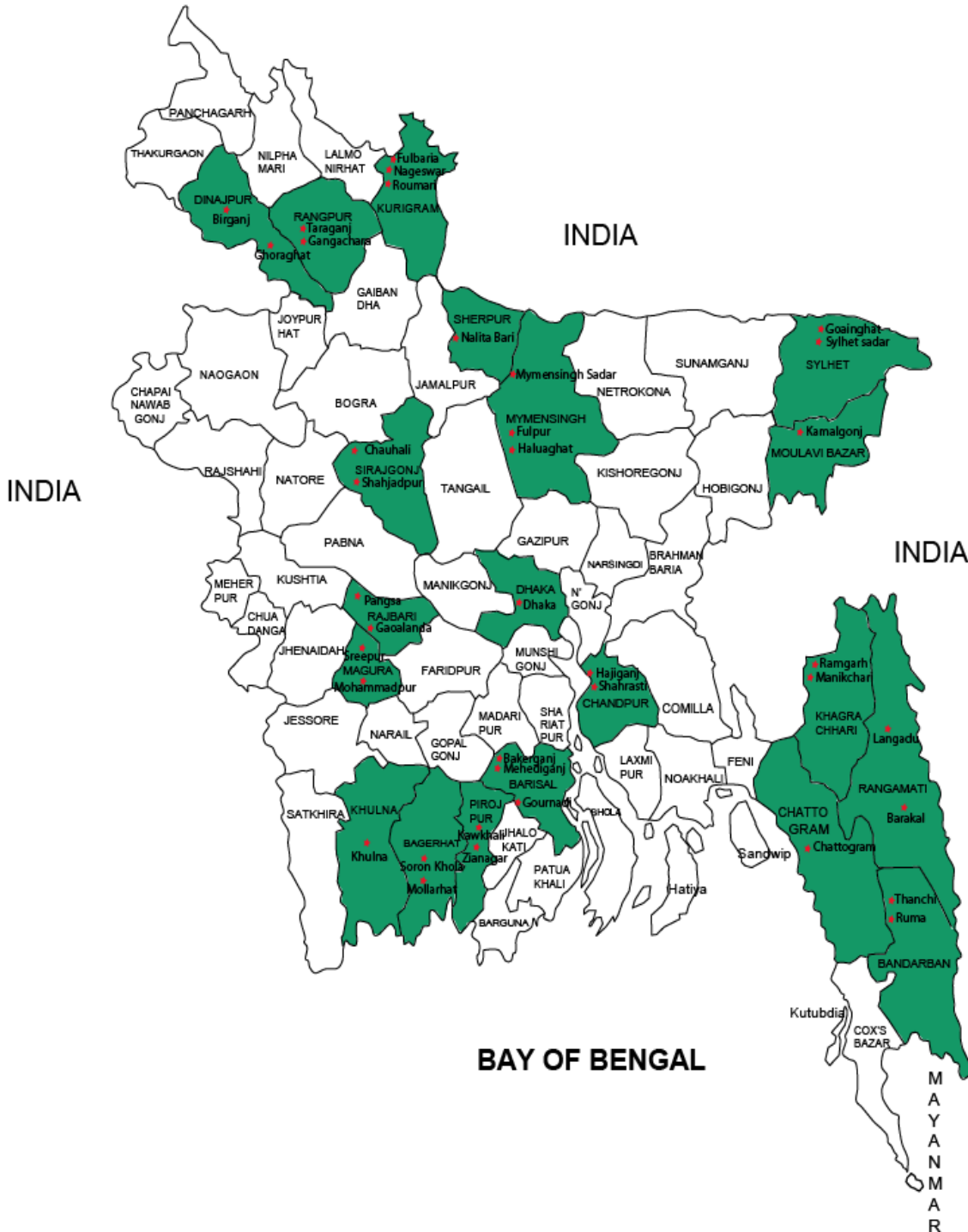
4.3 Field Plan

For the household survey, a field plan was produced by the implementers with all of the required instructions and explanations for the field team. The purpose of the field plan was to minimise recording errors by ensuring uniform understanding.

A couple of changes of the field plan compared to the first round survey are as follows:

- The team was provided a separate day for scripting the FGD discussion
- A plan of field visits of the HDRC personnel with schedule of travel to maintain data quality was provided.
- The tentative dates for the FGDs for each team were mentioned in the plan

Figure 4: District and Upazila under the survey (green) in the Map of Bangladesh



4.4 Survey Implementation

Field implementation started with seven separate teams consisting of 24 Field enumerators. Every team had a leader who was responsible to guide and supervise the team and complete the survey successfully. The seven separate teams were distributed for covering all the given locations in time. Fieldwork was completed within 15 days (11-25 December 2021), including long travels for each survey team. This third round survey also covered 13 ethnic communities living in both plain and hilly land of Bangladesh.

Ethnic communities covered under household survey

- | | |
|-------------|-------------|
| 1. Bawm | 8. Munda |
| 2. Chakma | 9. Oraon |
| 3. Garo | 10. Patro |
| 4. Khasia | 11. Santal |
| 5. Khumi | 12. Shing |
| 6. Marma | 13. Tripura |
| 7. Monipuri | |



Snapshots of data collection activities

We ensured the fullest possible health safety and security of all the enumerators as well as the respondents during this COVID-19 time. A web-based monitoring tool built-in with the application has been developed and used for data monitoring. Data were inspected and monitored by the data analyst in total survey duration.

4.5 Implementer's Field Visit

A team from the survey implementation agency; Human Development Research Centre (HDRC) visited the selected locations and spent some days with field teams to oversee/ follow the fieldwork.

Table 5: Field movement of the survey implementers

District/ Location	Date of Observation
Dinajpur	11-12 December 2021
Magura	14 December 2021
Chattogram	19 December 2021
Dhaka	22 December 2021
Sherpur/ Mymensingh	19 December 2021

4.6 Challenges

Field teams faced some challenges during the third round and overall data collection as follows:

- Due to the unfavourable weather in different seasons, the teams faced difficulties during the data collection times.
- As roads were flooded due to heavy rain for several days, and enumerators had to travel by boat in some areas
- Communication was challenging because of the muddy roads around hill areas
- During the winter, the communication was challenging in hard-to-reach.
- Internet connectivity was poor in several remote areas, so the data storage was delayed in some instances;
- In some areas, interviewing the respondents in three consecutive quarters of 2021 was challenging without promising any direct benefit.

4.7 Post Survey Enumerator's Experience Sharing

The post survey enumerators' experience sharing was conducted on 3rd January 2022, just after the completion of the third round of survey. It was a two hours long session with all the team leaders and few of the enumerators. We conducted it for evaluating the results of the survey which was helpful for taking policy, and for planning purpose as well. Also we did it to examine the quality and limitations of the survey and to understand the

types and extent of inaccuracies that occur. It helped us to understand the individual observations and their experiences of different marginalised group in different places which was not possible to collect in the boundary of survey questionnaires.

At first, the team leaders were asked about all the issues of the questionnaire in relation to the three main categories – urban, rural and ethnic and religious community; and later they shared their different experiences on the practice of COVID measures, perception on COVID test, lockdown sufferings, and livelihood strategies.

5.0 Data Cleaning and Analysis

We constantly monitored the data collection process during the field work. The computerised data is being cleaned in two phases similar to the first round. The first phase of data cleaning took place right after the submission of data to the server.

Figure 5: Screenshot of the data collection, and monitoring platform

Validation s...	start	end	যানা কি পুরা...	যানার বর্ত...	যানার হট
–	September 16, 2...	September 21, 2...	হ্যাঁ	পূর্বের অবস্থান	224
–	September 16, 2...	September 21, 2...	হ্যাঁ	পূর্বের অবস্থান	135
–	September 16, 2...	September 21, 2...	হ্যাঁ	পূর্বের অবস্থান	219
–	September 16, 2...	September 21, 2...	হ্যাঁ	পূর্বের অবস্থান	183
–	September 16, 2...	September 21, 2...	হ্যাঁ	পূর্বের অবস্থান	184
–	September 16, 2...	September 21, 2...	হ্যাঁ	পূর্বের অবস্থান	118
–	September 19, 2...	September 19, 2...	হ্যাঁ	পূর্বের অবস্থান	682
–	September 19, 2...	September 19, 2...	হ্যাঁ	পূর্বের অবস্থান	624
–	September 19, 2...	September 19, 2...	হ্যাঁ	পূর্বের অবস্থান	981
–	September 19, 2...	September 19, 2...	হ্যাঁ	পূর্বের অবস্থান	630
–	September 19, 2...	September 19, 2...	হ্যাঁ	পূর্বের অবস্থান	620
–	September 19, 2...	September 19, 2...	হ্যাঁ	পূর্বের অবস্থান	582
–	September 19, 2...	September 19, 2...	হ্যাঁ	পূর্বের অবস্থান	520

The second phase of data cleaning will take place upon identifying the inconsistencies while thoroughly checking the data variable by variable. To minimize the inconsistencies, the dataset will be checked through computing basic statistics of the variables.

Data analysis will also be done in third phases similar to the first and second round survey. The first and second phase was prepared the summary statistics of the complete dataset. In the third phase, the questions will be organised according to different themes and community with a view to have a proper understanding of the story. Making sense out of data comparing to qualitative analysis will also be done in this phase. The core team will be performing the data analysis following a pre-designed tabulation format.

6.0 Way Forward

This third round survey being completed very recently is expected to be eye-opening with interesting outcomes both proving and disproving important preconceptions, similar to the previous rounds. This will make the research team understand better how the marginalised communities' COVID days had been.

According to the researchers' primary understanding from this round, specific issue based qualitative exploration through field visits in different locations are being conducted. The researchers have been carrying out these explorations by themselves and will continue in future.

Finally, we must acknowledge all the enumerators/ facilitators who gave their best effort for collecting data in pandemic time and providing valuable support all through the surveys and qualitative explorations. Also they gave time after completing each of the survey, and shared their personal observations and experiences which they encountered during the field implementation.



Centre for Peace and Justice

[Centre for Peace and Justice \(CPJ\)](#) is a multi-disciplinary academic institute, which promotes global peace and social justice through quality education, research, training and advocacy. CPJ is committed to identifying and promoting sustainable and inclusive solutions to a wide range of global concerns and issues, including fragility, conflict and violence.