ASSESSMENT AND CLASSIFICATION OF EMERGENCIES (ACE) PROJECT

MAPPING OF KEY EMERGENCY NEEDS ASSESSMENT AND ANALYSIS INITIATIVES

FINAL REPORT

February 2009

OCHA appreciates the generous support of ECHO for conducting this review.

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EXECUTIVE SUMMARY

Within the humanitarian response field, there are increasingly strong calls for the improved assessment and analysis of needs at all phases of an emergency, including established indicators, definitions, and assessment methodologies, standardized information requirements, and accepted thresholds for humanitarian action. Improving assessment and analysis in this way would support the identification of acute humanitarian needs and create a solid evidence base for humanitarian decision making regarding the level and type of action required to respond to those needs. Central to meeting these challenges is improving coherence among the multiple tools and practices that exist to assess needs within the humanitarian community.

The IASC Working Group at its June 2007 meeting requested OCHA to conduct a mapping of the various humanitarian assessment initiatives in consultation with IASC members to explore opportunities for establishing synergies among them, and to facilitate the development of an overarching approach to assessment and analysis. OCHA established the Assessment and Classification of Emergencies (ACE) project to undertake this mapping exercise and other related tasks. The mapping began in early 2008, and included a series of consultations with IASC representatives at the global and regional levels. In addition, the 2008 CAP and Flash Appeal documents were reviewed to identify the key indicators and the prioritization criteria used to measure humanitarian needs. The draft report was shared with the global cluster leads and participants at the November 2008 meeting of the IASC Working Group for comment; this final version incorporates feedback and new materials received.[1]

This report covers the main assessment and analysis framework initiatives currently underway at the global level, including major humanitarian standards, multi-cluster assessments, cluster or sector-specific assessments, and analysis framework initiatives. The wide range of multi-sectoral and/or sector-specific tools that have been developed at the field level are not included, including those developed by donors. Also, long-established early warning or monitoring systems (e.g. for food security) are not covered, except for a few new initiatives which serve both monitoring and assessment functions.

The report organises the various assessment initiatives according to three levels:

1. Standards-related initiatives, which serve as a foundation for assessment tools and data collection;
2. Primary data collection, with a distinction between rapid and in-depth assessments; and
3. Analysis frameworks, where information and data generated by the two previous levels is integrated into a framework for analysis and in some cases, response planning.

A possible way of organizing needs assessments along a linear sequence according to the emergency timeline is also proposed (see Annex 1).

Key Findings and Recommendations

Overall, agencies/clusters are seriously engaged in efforts to standardize and improve their own assessment practice and build partnerships for joint assessments and information consolidation. All initiatives aim to address the need for better information for sectoral programming, as well as the need for more timely information at the onset of an emergency.

[1] This final version reflects all comments received as of 13 February 2009. All efforts were made to ensure accuracy regarding individual initiatives/tools, but OCHA takes full responsibility for any errors.

Coordination: With the large number of initiatives currently underway at all levels, following similar design processes and collecting similar information, there is greater scope for improved consultation and coordination among them, allowing for greater comparability and sharing of lessons learned.

Timeframe: Many tools as currently designed have not taken into account the type and depth of information that is required at different times throughout an emergency. This is particularly the case at the early on-set of a crisis, when only limited information may be available and must be collected in a timely manner. As a result, stronger linkages are required with contingency planning, in order to draw on pre-crisis baseline information in the initial phases of an emergency.

Standardisation: The review revealed a strong opportunity to increase standardization of indicators and definitions of key terms, to ensure that "similar levels of vulnerability in different settings do not trigger different levels of response".[2] In addition, greater focus on the ranking of severity within or across sectors would enable better prioritization of the response. Agreement on a core set of indicators to correspond with the emergency timeline could improve comparability in measuring needs and severity across sectors, and ultimately across emergencies.

The term 'rapid assessment' is used to cover a wide range of time frames, from a few days to several weeks, blurring the distinction between truly rapid assessments and more in-depth assessments. Many of the new initiatives are in-depth assessments, addressing specific cluster/sector programming needs in detail. However, a significant amount of data collected is common across all initiatives. Therefore, multi-sectoral needs assessment tool(s) could be used to collect this common data across all the different sectors, particularly after a sudden on-set crisis.

Skills and Capacity: Although some agencies/clusters have established strong capacity-building programmes, others need to strengthen substantive and technical capacity to develop and implement assessment tools, and conduct multi-sectoral analysis. Clusters/agencies should consider conducting a review of existing capacities for design and implementation of the various tools, and create materials/capacity-building strategies as necessary. The development of further training materials/capacity-building strategies should build upon work by agencies/initiatives which have made substantial investment in these topics.

It is recommended that individual agencies as well as sector/cluster leads ensure that assessment-related tools are reviewed and cleared by both substantive and technical experts, including in particular data management experts, prior to field-testing, finalization and deployment.

[2] ECHO, Terms of Reference: Humanitarian Needs- Building blocks toward a common approach to needs assessment and classification, October 2007.

I Introduction

As a result of the call for improved needs assessments in the Tsunami Evaluation Coalition, the UN Humanitarian Response Review and the UN Reform Process, a large number of assessment initiatives are currently underway. Based on the widely accepted humanitarian priorities of saving lives, alleviating suffering and maintaining dignity, it is essential for the humanitarian system to work collectively to define which set of information and indicators is required at the immediate onset of an emergency, in the medium and longer term and for which purpose.

At the 68th Inter-Agency Standing Committee (IASC) Working Group's meeting in June 2007, a discussion was held on the need to improve the linkages between recent initiatives on humanitarian needs assessments, many of which were begun in response to the Humanitarian Reform agenda. OCHA was requested to map these initiatives, in consultation with IASC members, to explore opportunities for harmonizing and establishing synergies among them, and to facilitate the development of an overarching assessment/analytical approach.

The mapping began in early 2008 and included two informal meetings with representatives of the IASC on cluster/agency assessment initiatives (30 January and 23 September, 2008), in addition to a stocktaking report and consultative workshop in Nairobi on major assessment and analysis initiatives being implemented in Central and East Africa (12 May 2008), and numerous bilateral consultations. Consultations focused on the objectives and status of the initiatives, the main indicators used to determine the scale and severity humanitarian needs, and the existing analytical frameworks for consolidating information from diverse sectors.

The following report covers the main assessment and analysis framework initiatives currently underway at the global level, based on information has been shared with OCHA as of February 2009 or is available on the web. It does not include the wide range of multi-sectoral and/or sector-specific tools that have been or are in development at the field level. Also, long-established early warning or monitoring systems (e.g. for food security) are not covered, except for a small number of new initiatives which serve both monitoring and assessment functions. Three major humanitarian standards, two multi-cluster assessments, ten cluster or sector-specific assessments, and five analysis framework initiatives are reviewed. Three major initiatives to improve collection of pre-crisis information and four additional relevant initiatives are also included. Also, 2008 CAP and Flash Appeal documents were reviewed to identify the indicators and the prioritization criteria used. The report includes an initial sequencing framework, which organizes the needs assessment initiatives according to the emergency timeline (Annex 1).

The findings presented below should be seen as indicative, since many of the global initiatives to develop assessments are still in the design stage and have not been field tested in actual emergencies. For example, approximately half of the multi-sectoral and cluster-specific initiatives are still being designed. (See table in Annex 2)

The fact that these initiatives are at different stages of development, and therefore can still be modified, underscores the importance of the OCHA's role in coordinating and harmonizing the ongoing development of the tools, including sharing of good practices and lessons. For example, as a result of mapping work, informal discussions have been held on linking food security severity classification work with initiatives on improving collection of health and mortality statistics.

Further investigation and analysis of the key information required by donors, decision-makers and field operations and its availability in a sudden onset crisis would support the refinement of the following findings and the proposed sequence of assessment activities.

1.1 Methodology

The assessment initiatives were screened against a set of systematic criteria (general information on the type of tool, level of funding, indicators and variables generated, needs analysis and severity ranking, methodology, development process including the level of completion, staffing requirements and level of consensus). However, information was not consistently available on all these criteria across all initiatives.

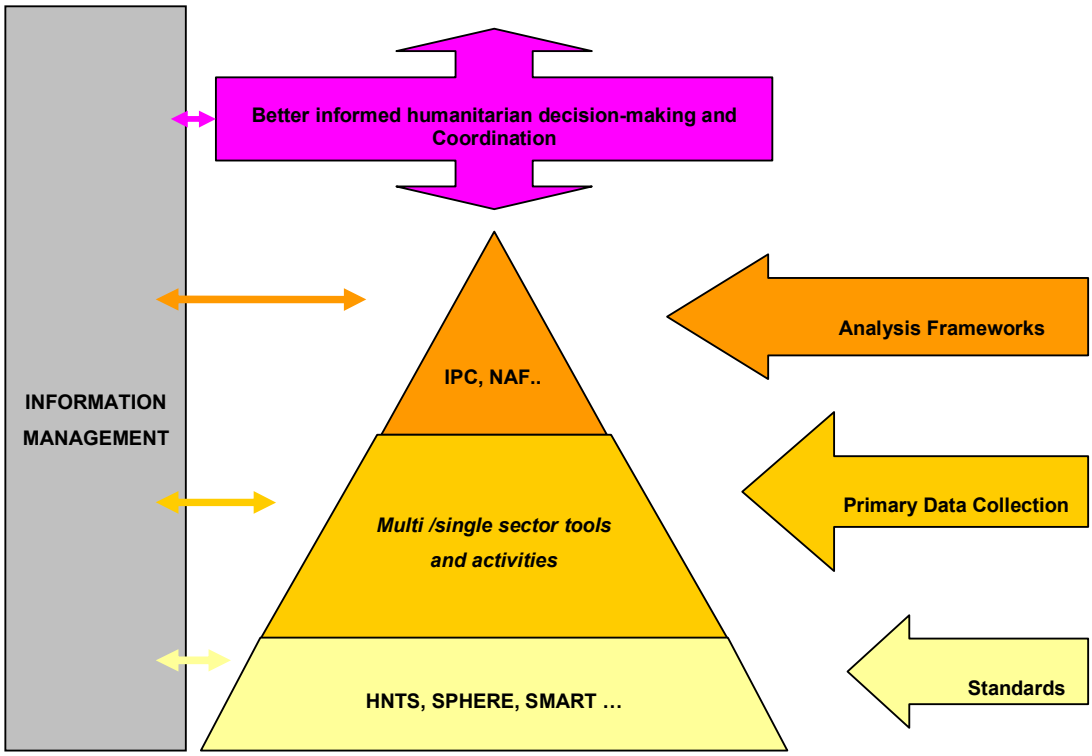
The review of 2008 CAP and Flash appeal documents also identified the indicators used in these appeals. The indicators were then classified by cluster/sectors and regrouped into four classes of frequency of utilization (indicators used in less than 30% of the documents, from 30 to 60%, from 60 to 90%, more than 90%).[3]

[3] This document is available upon request from OCHA.

II Linking Needs Assessments

As an attempt to organise the multiple initiatives, a generic grouping is suggested for all types of initiatives, and a possible way of organizing needs assessments along a linear sequence according to the emergency timeline is also proposed (see Sections II.1 and II.2, respectively).

2.1 Assessment and Analysis Process



The report proposes organizing the initiatives into three main levels as follows:

1. The base of the pyramid represents all standards-related initiatives, and serves as a foundation for the two following levels;
2. The second level concerns primary data collection, with a distinction between rapid and in-depth assessments (the ACE project particularly focused on the rapid assessments, as the area where the greatest gaps exist); pre-crisis data and/or desk reviews based on secondary sources are an important step in the data collection process and are covered in this second layer; and
3. The third level represents the integration of information and data generated by the two previous levels into a framework for analysis; more concise analysis at this level supports better humanitarian decision making and response design.

2.2 Sequence of Humanitarian Assessments

The sequence of humanitarian assessments proposed in Annex 1 aims to provide greater clarity on the type of information and appropriate assessment methods required at each phase of the

crisis. Each phase of the sequence corresponds to a different phase of the crisis. Five phases are proposed: phase 0 corresponding to preparedness prior to the crisis, phase 1 corresponding to the first days after on-set, phase 2 corresponding to the first two weeks, phase 3 corresponding to the second two weeks and phase 4 corresponding to the second month onwards.

For each phase, there are:

- Different assessment methods and tools; and
- A specific set of information required.

Information becomes progressively refined and increasingly thorough throughout the sequence, resulting in a comprehensive evidence base for humanitarian action from decision-making to programming. While time is a key factor, it is only one of many factors that will influence the content and scope of assessments, as well as the methodology used. Access, security on the ground, resources and logistics will be equally influential. This attempt to sequence assessment tools must remain flexible enough to reflect this complexity. The sequence will be further refined and developed into a comprehensive framework for assessments, linked to response planning, based on analysis of the information requirements and needs at field level and agreement on a core set of indicators and further consultation.

III Humanitarian Assessment Standards

3.1 Health and Nutrition Tracking Service (HNTS)

The Health and Nutrition Tracking Service (HNTS) is an independent interagency initiative launched in late 2007 by the members of the Health and Nutrition Clusters of the Inter-Agency Standing Committee (IASC) in response to the request made by the United Nations Emergency Relief Coordinator. The HNTS is overseen by a Steering Committee (SC).[4]

The three main HNTS goals are to:

- Contribute to the improvement of humanitarian operations and promote mutual accountability of the humanitarian community and beneficiaries;
- Detect and prevent, if possible, excess mortality and malnutrition in crises;
- Ensure that information relevant to humanitarian policy and evidence based reports on health and nutrition needs in humanitarian crises situations are available for high level decision making fora such as the UN and the European Union.

The purpose of the initiative is to establish systematic technical and field arrangements to provide impartial, credible and timely information, analysis and dissemination on a core of mortality and nutrition indicators related to populations affected by humanitarian emergencies and crises.

HNTS is organized around two functions:

1. An operational function, including help desk support to the field operations, as part of the roll out of the Health and Nutrition Clusters, in collaboration with already existing country initiatives, systems or local data repositories; standardization of data processing;
2. A normative function, such as data generation and analysis, technical consensus on data collection and measurement issues, data synthesis/independent peer review function, data dissemination, Expert Reference Group.

In the course of 2008, the "help desk" provided technical support upon request to six different countries and field projects, primarily focussing on the design of survey research instruments and monitoring systems.[5] HNTS also supported development of tools and information systems such as the Initial Rapid Assessment Tool (IRA), the SPHERE project, the Somalia Food Security Analysis Unit and the Integrated Food Security Phase Classification by providing technical input on health and nutrition issues.

Other products developed in 2008 include:

[4] HNTS is hosted by WHO; the SC comprises one representative each from the Health and Nutrition clusters (co-chairs), and representatives from ACF, CIDA, DFID, ECHO, EpiCentre, FAO, the International Red Cross, OCHA, SCF-UK, SIDA, UNHCR, UNICEF, WFP and WHO.

[5] (1) Uganda: review the MoH health facility services reporting and the Nutritional Guidelines for the Nutrition Cluster Uganda; (2) Pakistan: design survey research instruments, support the earthquake recovery monitoring and assess food price crisis research opportunities; (3) Kenya: advise various agencies on humanitarian assessment, monitoring the post-election conditions and recovery among displaced; (4) Myanmar: extensive assistance in producing the Post-Nargis Joint Assessment (PONJA) report; see http://www.asean.org/21765.pdf ; (5) Sudan: support to WHO Darfur program in improving the monitoring of government health institutional data; (6) Chad and Central African Republic: critical review of Communicable Disease Epidemiological Profile for Chad and CAR, and review of Chad Early Warning System Bulletin.

- A software application and guidelines, HINTS (Health Information and Nutrition Tracking System), for tracking health events and nutrition status in health facilities;
- "Priority indicators in complex emergencies: summary" summarizing efforts to advise HNTS regarding a very short priority list of health indicators to be promoted for use in all health crises settings. This included a brief review of the evidence base for the SPHERE Indicators. The document provided a ringing endorsement of the SMART Initiative. Malnutrition and mortality rates are priority measures for most agencies and scholars, and meet the criteria of a good health indicator; and
- "Mortality estimates in crisis affected populations: inference from multiple sources" reviewed how to combine different sources of information on mortality into single estimate of the death toll attributable to crises.[6] A proposed system for scoring the quality of surveys is presented, and suggestions are made on how to use surveillance and body count data. Outstanding issues, limitations and possible next steps are discussed.

In January 2009, the HNTS Steering Committee reaffirmed the HNTS' important normative and global function, with a strong emphasis on operations and tracking activities at country level. The SC also identified the Democratic Republic of Congo as a priority country for HNTS implementation in 2009. A first HNTS Expert Reference Group meeting took place in February.

<u>*Key Indicators:*</u> The "Priority indicators in complex emergencies: summary" paper suggested that HNTS advocates for collecting crude mortality rate (CMR) and under 5 mortality rate (<5MR) at a minimum, and in addition, include both maternal mortality (despite the fact that it is often difficult to measure), and water consumption as part of an expanded list of priority indicators.

3.2 Standardized Monitoring and Assessment of Relief and Transitions (SMART)

SMART began in the late 1990s to develop a basic integrated, standardized method to improve the estimates of nutritional status and mortality rates during emergencies. Two of its major objectives are: (a) to balance simplicity with technical soundness (data quality and reliability) so that rapid data analysis can occur in support of strategic decision-making and (b) standardize survey methods used by the humanitarian community for collecting and analyzing data, including sampling.

During 2002-2007, SMART developed and piloted (in several countries) Version 1 of a manual on conducting surveys and an accompanying software program that integrates the planning, collection and analysis of mortality rates and nutritional data. The manual is flexible; it allows other indicators to be added or adjustments to be made to adapt to specific situations (e.g. for population displacement or migration). Subsequently, a food security module based on the Household Economy Approach (HEA) was developed and implemented separately in 4 countries; the aim was to help clarify the context on whether the mortality and malnutrition levels were "normal" and identify possible causes and trends. This effort was funded by CIDA and involved numerous individuals and non-governmental and UN organizations and academic institutions, under the overall coordination of USAID and UNICEF.

[6] A four-step approach is outlined: (i) quality scoring of all available sources (surveys, surveillance, other studies); (ii) metadata collection from each source and reanalysis of important datasets, if needed; (iii) maximum likelihood estimation of the excess death toll for time and administrative unit strata within the total crisis person-time that are covered by data, based on weighted averages of the different sources; and (iv) extrapolation to person-time not covered by data, primarily based on statistical modelling of the under 5 years mortality rate informed by predictive variables easily collectible based on agency reports.

The IASC Global Nutrition Cluster held a meeting on SMART in April 2008 to resolve a number of technical issues arising from field experience on anthropometry, mortality statistics, sampling, and food security/context analysis, and discuss next steps. This included clarification of key terms (e.g. CMR, crude death rate (CDR); <5MR, mortality recall periods) and suggestions for best practice in assessing mortality, calculating age, and adjusting weight and height. The participants noted that further work is needed to ensure that the manual and software reflect best practices for estimating mortality. They also concluded that an additional "Context Analysis" module should be developed to guide the collection of secondary data and primary qualitative data on health, water and sanitation and other factors to help identify the main underlying causes of high malnutrition or mortality, e.g. whether nutritional outcomes are primarily related to illness care practices, or access to food. This would require the development, jointly with the other clusters, of a few key questions for possible inclusion in future nutrition or mortality questionnaires.

Two major recommendations were made concerning training and guidance. First, standard global training materials should be developed covering survey methods, data analysis and interpretation, and use of the software. Second, guidance should be developed for the wider humanitarian community on how to interpret and report on data quality, including a checklist on the minimum information to be included in every survey report (e.g. confidence intervals, design effect). These would indeed be useful for actors who conduct household surveys to inform humanitarian programming.

These and other outstanding technical questions will be identified through further consultations, including with the HNTS Expert Reference Group (see III.1). As recommended by the Global Nutrition Cluster, it may be useful to consider adapting their guidance on sampling for broader use, and seek their input on the checklist of minimum information to be included in all survey reports, and key questions for inclusion in mortality and nutrition surveys on contextual factors (health, water and sanitation).

Key Indicators:[7] Adoption of two key indicators widely considered as the most basic, vital public health indicators of the severity of the crisis and useful to identify needs:

- Crude mortality/death rates (CMR/CDR), including comparison of CDR with the age 0-5 death rate;
- Nutritional status of Under-five children based on height-for-age (HFA or stunting), weight-for-height (WFH or wasting), and weight-for-age (WFA reflecting both wasting or stunting or a combination of the two) compared to international reference standards and presence of oedema;[8]
- Middle-Upper Arm Circumference (MUAC) as an optional indicator, i.e. not to be used on its own to estimate prevalence of moderate or acute malnutrition, but to be combined with weight and height and
- Population size and demographics.

[7] SMART, 2006: "Measuring Mortality, Nutritional Status, and Food Security in Crisis Situations: SMART Methodology Version 1, April 2006." See: http://www.smartindicators.org/SMART_Methodology_08-07-2006.pdf

[8] Wasting among children aged 6–59 months is used as a proxy of the health and wellbeing of the entire community, because there are no internationally agreed indicators and related cut-off points to assess nutritional status in other age groups.

3.3 The SPHERE Project

The SPHERE project was launched in 1997 by a group of NGOs and the Red Cross and Red Crescent Movement. The aim is to improve the quality of humanitarian assistance provided to people affected by disasters and to enhance the accountability of the humanitarian system in disaster response by developing a set of universal minimum standards in core areas of humanitarian assistance. The guiding values and principles of the project are:

- International Humanitarian, Human Rights and Refugee Law; and
- The Code of Conduct (Principles of Conduct for International Red Cross and Red Crescent Movement and NGOs in Disaster Response Programmes).

The 2004 version of the Handbook provides standards and indicators for four sectors:

- Water and Sanitation, Hygiene promotion;
- Food Security, Nutrition and Food Aid;
- Settlement and non-Food items; and
- Health Services.

Based on a wide consultation process, a revision process of the SPHERE handbook is planned for 2009. SPHERE has not been formally endorsed by most agencies or by individual clusters; use of SPHERE Standards is voluntary. However, the SPHERE Project and associated standards have had one of the strongest influences on the collection of health information in emergencies. Also, some donors, including ECHO, require implementing partners to report against SPHERE Standards and indicators.

IV Humanitarian Assessment Tools

4.1 Pre-Crisis Vulnerability and Risks

A variety of pre-crisis data collection initiatives exist. A number of them have been widely implemented for many years in a large number of countries, have a long-established track record, and are essential references for secondary data review as input to the various assessment processes. Examples include the Comprehensive Food Security and Vulnerability Analysis (CFSVA), the Household Economy Approach (HEA, which includes both baseline and follow-up surveys; see section IV), and the Multiple Indicator Cluster Survey (MICS).

4.1.1 Comprehensive Food Security and Vulnerability Analyses (CFSVAs)

Between June 2004 and August 2008, WFP completed 22 and was currently implementing nine CFSVAs to obtain pre-crisis information on the scale, nature and causes of food insecurity and vulnerability in countries exposed to recurrent and protracted emergencies. These involve in-depth, large-scale household surveys (generally covering the entire country) and analyses of secondary data. Field work typically lasts 3-4 weeks and data analysis and report writing can take up to 3-4 months; the baseline is expected to be valid for 3-5 years unless major shocks occur.

Recent CFSVAs have identified what can be done to address food insecurity and vulnerability, and included an improved analysis of risks, which allows a projection to be made of the likely changes over the CFSVA timeframe. In 2008, WFP received a six-year grant from the Gates Foundation to conduct two CFSVAs per year, and plans to issue updated CFSVA guidelines in early 2009.

Key Indicators: CFSVAs typically analyze the same core set of indicators and information as used in WFP's Emergency Food Security Assessments (EFSAs) (see Section IV.3.3 on Emergency Food Security Assessment tools). However, it includes many more indicators.

4.1.2 Multiple Indicator Cluster Survey (MICS)

The MICS is a household survey programme developed by UNICEF to monitor the situation of children and women at approximately 5-year intervals. It produces statistically representative, internationally comparable estimates of nutrition, food security, health, mortality and WASH-related indicators, including 21 of the 48 Millennium Development Goal indicators. The analysis uses the nutrition framework. Initiated in 1995, the programme has implemented more than 200 MICS surveys, some of them already on the third round. MICS and a similar tool, the Demographic and Health Surveys (DHS) funded by USAID, represent the main sources of baseline data for many indicators of household welfare.

4.1.3 Risk Mapping and Shelter Response Planning

UN-HABITAT and GRIP have undertaken on behalf of the IASC Emergency Shelter Global Cluster, a "Risk Mapping and Shelter Response Planning" initiative as part of a disaster risk-reduction strategy, to systematically incorporate risk management into urban planning. The goal of this long-term activity is to improve capacities to predict causes, magnitude and geographic coverage of the damage, address future post-disaster shelter recovery needs and to manage information about on-going risk after a disaster and their implications for shelter planning. It is currently being pilot tested in selected big cities and is envisioned for large-scale deployment.

4.2 Multi-Cluster/ Multi-Sectoral Tools

4.2.1 ICRC and IFRC Emergency Assessments

The Federation distinguishes three types of assessments:

1. Rapid assessment, undertaken by IFRC after a major upheaval to gather information on the needs and existing capacities of the affected populations, possible areas of intervention and resource requirements; the time frame is normally one week maximum;
2. Detailed assessment, following a rapid assessment, takes normally about a month; and
3. Continual assessments undertaken after a detailed one to regularly updating the situation and seeking relevant feed back from the beneficiaries; it is equivalent to an M&E system and the information gathered can be used as secondary information during rapid and detailed assessments.

These assessments are all based on either the ICRC Household Economy framework or the International Federation's vulnerability and capacity framework, similar to the household economy framework, analysing the problems and people's capacity to address them. Seven priority sectors are considered:

- Relief;
- Health;
- Livelihoods;
- Water, sanitation and hygiene promotion;
- Food and nutrition;
- Safety, security and protection; and
- Shelter.

Although these assessments should follow a similar process, there is no standardisation and the quality of the assessment remains highly dependent on the team's skills. This lack of standardisation has been identified by the Federation itself as a gap to address. The sampling methodology varies depending on the situation. Random sampling is used when locations and households' livelihoods are similar. Otherwise a "purposive" sampling, i.e. stratified sampling, reflecting the different characteristics is used; this enables a statistical treatment of the information as long as a random sampling is used within each strata.

Country-specific questionnaires for rapid assessments are designed on the basis of pre-established checklists corresponding to three different time periods (24 hours, 72 hours, 1 week). These are simple yes-no or three-level ranking questionnaires. A specific assessment must be seen as part of an iterative process and constitutes a step to prepare the ground to continue the assessment process in a more detailed manner:

- The first step will collect information focusing on the changes of situation before and after the disaster;
- In early recovery assessment, the main purpose is to find how the disaster has impacted people's access to key services, livelihoods, vulnerability and coping strategies.

A ranking element is introduced in the problem analysis with an approximate order of severity. PRA techniques are extensively used to complement and understand globally the statistical analysis. The assessment report uses a standard format and states which are the needs and if/where gaps exist. The programme prioritisation is then based on a combination of criteria like the resources availability, the capacity of the National Societies, the geographic areas and sectors covered by other actors, including the Government, in addition to a sound judgment.

Two major points are worth highlighting in the case of the ICRC/IFRC Movement:

1. The Movement does not need government authorisation to undertake its assessment; and
2. By the time the FACT team arrives, a rapid assessment has already been undertaken by the National Society team, which is permanently present in the country.

4.2.2 Initial Rapid Assessment (IRA)

The IRA was developed as an action-oriented tool for assessing needs as soon as possible after the onset of a crisis. Field work and reporting should be completed within one to three weeks. It is a rapid assessment using qualitative methods and triangulation from a wide range of information sources to complement a pre-crisis review of secondary data. It is the product of a process initially involving the Nutrition, Health and WASH clusters, but was expanded to include shelter and food security, involving WFP, UNICEF, FAO, WHO, ACF, SCF, IFRC and others. The results of field tests in 6 countries of an initial version were positive, although the ability to obtain rapid results was identified as a remaining challenge. In February 2009, a version considered as final is available,

Designed to be rapidly conducted by non-specialised personnel, with the objective of answering essential questions for humanitarian response planning and programming, the tool includes:

- A guidance note for country and field levels to advise IRA teams on how to prepare for, organise and carry out an IRA and analyse the data;
- A two page "Aide mémoire" for field teams;
- A check list for pre-crisis secondary data and information, organised by cluster; and
- A set of four templates for data collection, which contain questions and specific data collection and recording notes. The unit of analysis is the site.

The IRA is meant to be flexible to enable its use across contexts and countries. This is the reason why the sampling methodology is not precisely pre-defined and will depend on the country context and prevailing situation regarding access, security, funding and time frame available for the assessment. Two main criteria are used for selecting the sites: focus on areas of greatest needs and coverage of a range of locations qualitatively representative of the affected population. Emphasis is place on establishing a categorisation according to geographical areas, ethnic groups and gender differences, which means the diversity of the situation is taken into consideration for the interview site selection, although it will not be statistically representative.

The IRA form is divided into two parts:

- Summary conclusion sheet reflecting the joint findings of the assessment team and completed at the end of each site visit; and
- Data sheets organised into six sections, covering demographics, nutrition, shelter and non-food items, water and sanitation and health. There are three different forms, A) for key informants' interviews, B) for focus group discussions and C) for observations and local secondary data.

The summary conclusion sheet captures the overall summary of the crisis as well as problems and priorities identified by the affected population and establishes a severity ranking of the needs for each of the six sections in three levels:

1. Severe situation: urgent intervention required;
2. Situation of concern or lack of data/unreliable data: further assessment/surveillance required; and
3. Normal situation or local population able to cope with the crisis: no further action required).

Although the needs are consistently ranked within each sector, a systematic ranking to prioritise across sectors is not included.

Lessons learned drawn from Bangladesh, Kenya and Myanmar have shown that despite the positive field tests and the clear need for an inter-sectoral rapid assessment tool, country teams were reluctant to use the initial version of the IRA questionnaire because of its length and specialized nature. This version has undergone a series of revisions and has been significantly shortened and re-structured. The final version will be field tested in the next emergency that will occur. However, it is worth noting that UN Country Teams (UNCTs) in Nepal and more recently in Georgia have been using the questionnaire as a basis to develop much shorter versions. Interviews were conducted at village level, using rapid assessment (RA) techniques with key informants and groups of villagers. One of the most appreciated characteristics of the tool most appreciated is its flexible approach.

4.3 Cluster / Sector Specific Tools

4.3.1 Camp Coordination and Camp Management (CCCM) Assessment Framework

Since January 2008, the CCCM Cluster[9] has been developing a needs assessment system for use in the initial humanitarian response for displaced people residing in camps and collective centres. The primary purposes of the needs assessment system are:

- To know how many camps there are, where they are located, how many people are living at each site;
- To know to what extent camps are covered by humanitarian actors and which camps lack services in particular sectors;
- To identify key actors responsible for each camp, including camp administrators, government officials, community leaders and humanitarian actors;
- To track changes in the number and composition of the camp population; and
- To be able to compare a camp to other camps, or regions to other regions.

It is a surveillance system for non-specialist primary data collection at the community level, with data organized according to camp (geographic location). The system will be comprised of guidance, data collection forms and a database in which to store and analyze the information.

[9] This comprises: CARE, International Organisation for Migration (IOM) – cluster lead in natural disasters, International Rescue Committee, Lutheran World Federation (LWF); Norwegian Refugee Council, UNOCHA, Shelter Centre, United Nations Environment Programme (UNEP) and United Nations High Commissioner for Refugees (UNHCR) – cluster lead in conflict situations.

The system focuses primarily on closed questions that can be quickly and automatically be compiled into statistical reports.

The CCCM tool organizes data collection into five layers, each of which is broken down according to the phase of the emergency and data collection frequency and sequenced in order to gradually build upon an initial core dataset:

1. Camp Geographic and Snapshot Data
    a. Data are collected once, at the onset of the emergency.
    b. Contents cover the following information topics: Core dataset; geographic location, physical characteristics of site, population estimation, mortality in the last seven days.
2. Population Tracking Form
    a. Data are collected shortly after onset (after snapshot data are collected) at high frequency (determined locally by field capacity and volume of population movement) to capture frequent changes.
    b. Contents cover the following sectors/information topics: Population figures; displacement information; government officials responsible for the camp.
3. Multi-Sectoral Needs Assessment
    a. Data are collected one or two months into the emergency, once humanitarian services are in place, and are collected infrequently (every 3 – 6 months) because the situation usually does not change substantially.
    b. Contents cover the following sectors/information topics: Community Participation, Protection, Food, WASH, Health and Shelter.
4. Camp Capacity Mapping
    a. This assessment is to be conducted for the first time once humanitarian services are in place, on an ad hoc basis as needed, depending on how frequently humanitarian actors servicing a camp change.
    b. This seeks to answer the following questions: Who is doing what projects inside the camp and when did they start? Have any needs assessments been conducted?
5. Urgent Action Report
    a. It is conducted at the onset of an emergency and continuing throughout on an ad hoc basis as needed.
    b. It is a qualitative report aiming at reporting the urgent need for life-saving interventions, with a different – and more direct – data path than other reports, because it goes to CCCM Coordinator and not a data entry clerk.

Key Indicators: Most of the indicators in the assessment relate primarily to availability of services and community governance structures. Other indicators tracked include land ownership, population figure accuracy, community participation, dispute resolution mechanisms, local capacity for food supply and shelter construction, and distance to the nearest primary school.

4.3.2 Rapid Assessment in the Education Sector

Developed for use in the first 72 hours of an emergency, UNICEF has developed an Integrated Rapid Assessment Field Data Checklist for the Education Sector. This checklist is ideally to be used as part of a cross-sectoral rapid needs assessment effort.

After conducting this initial, cross-sectoral rapid assessment, the education sector/cluster aims to assess the condition of learning spaces in greater detail, using the Rapid Education Assessment of Learning Spaces (RALS) tool. This tool is meant for use on a regular basis to monitor programme developments.

Both tools are available as part of the resource toolkit entitled "Education in Emergencies", which also includes guidelines for the contextualization and use of the tools.[10]

Key Indicators: Key indicators to be used in the initial, rapid cross-sectoral assessment relate to school attendance, education priorities, education infrastructure, education system capacity and education materials. Additional indicators included in the RALS include number, ages and gender of affected children and location, gender and qualification of teachers. All indicators reflect the Inter-agency Network for Education in Emergency (INEE)'s Minimum Standards for Education in Emergencies.

4.3.3 WFP's Emergency Food Security Assessment Tools

In late 2003, WFP launched a multi-year project to build capacity and enhance the quality, credibility, accountability and transparency of food security assessment practice in three areas: pre-crisis vulnerability baselines, assessment methods, and food security monitoring. This "Strengthening Emergency Needs Assessment Implementation Plan (SENAIP)[11] was jointly funded by donors including ECHO, DFID and the German Government, and was guided by an Advisory Group of experts from NGOs, other UN agencies and academia.

Improved guidance and tools were developed on a range of assessment topics, including how to analyze the role and potential of markets, integrate food security and nutrition analysis and estimate population numbers. Guidelines were produced for WFP-led and joint assessments, including the Emergency Food Security Assessment (EFSA) Handbook (2005) and the UNHCR/WFP Joint Assessment Guidelines (JAG) (2004). A major capacity-building effort was undertaken: over 1,700 persons - 900 WFP staff and nearly 800 staff from partner organizations - were given basic or advanced training between 2005 and end 2007. Partnerships on food security baselines, assessments and monitoring were strengthened with NGOs, FEWS NET, FAO and UNICEF, including efforts to pilot the Integrated Food Security Phase Classification (see section V.1).

Special emphasis was given to develop a standardized way to group households according to three levels of food (in)security, including the food consumption score (FCS), which uses a combination of dietary diversity and food frequency. The goal is to enable comparisons over time by using similar methods in the pre-crisis baselines (CFSVAs) and post-crisis assessments (EFSAs). Assessments determine the household food security situation and project their evolution over the next 6-12 months by combining the analysis of FCS, food access categories, context-specific indicators and thresholds, and risks to lives and livelihoods based on coping strategies. (See the revised EFSA Handbook, forthcoming.)

[10] www.ineesite.org/toolkit

[11] The Strengthening Emergency Needs Assessment Capacity or SENAC project was launched in 2005 to carry out major components of this implementation plan.

Although SENAIP officially ended in early 2008, the essential activities are continued by the newly re-organized Food Security Analysis Service (FSAS), which covers pre- and post-crisis activities. The priorities include continued capacity-building, development of improved methods to integrate nutrition and food security analysis and analyze response options including the use of cash transfers, and piloting the Integrated Food Security Classification system.

Key Indicators (standard categories of indicators to be analyzed):

1. Mortality: crude mortality rate, under-5 mortality rate;
2. Nutrition status: wasting, stunting and underweight in children, body mass index (BMI) in adults, Middle Upper Arm Circumference (MUAC) in children and adults;
3. Food consumption: Food Consumption Score (FCS) (still under development);
4. Food access, and
5. Coping strategies.

The recently activated Task Force on Assessment, Monitoring and Evaluation (TF-AME) of the UN Standing Committee on Nutrition (SCN), conducted an inventory of specific food security indicators which may contribute in future to assessment work. This Task Force is co-chaired by FAO and WFP.

4.3.4 Guidance on Profiling Internally Displaced Persons[12]

In June 2004, the IASC Working Group agreed to develop a framework and related guidance to help systematize information collected on internally displaced persons (IDPs). The resulting provisional guidance document, dated November 2007, proposes that core data on the number, age and sex (even if rough estimates) and location of IDPs in a country be collected through "profiling" exercises. These exercises mainly aim to obtain more consistent estimates of IDP numbers and thus are mainly demographic rather than needs assessment tools; however, they could also be used to collect information on urgent humanitarian and protection needs, as well as on the causes and patterns of displacement.

It is intended that IDP profiling should complement, rather than replace, sectoral needs assessments e.g. on food security and nutrition, shelter and protection. Indeed, although evidence suggests that in many situations displaced persons face increased vulnerability, it is understood that IDP status alone does not necessarily signify having unmet humanitarian needs.

The provisional guidance provides a listing of methods for obtaining reliable IDP population numbers and distinguishing between IDPs and members of the local (host) community (e.g. flow monitoring, household surveys, dwelling and head counts, and registration exercises). It also identifies common problems that may arise during profiling exercises, and proposes several 'indicators' to help determine when IDPs may no longer be considered to be displaced. The "minimum data requirements" for each assessment method outlined in the listed methods do not specify which key indicators should be collected to determine protection and humanitarian needs.

[12] Although assessing the needs of IDPs represents a cross cutting concern, the Guidance on Profiling IDPs is included under the cluster/sector-specific tools as it is primarily aimed at gathering population data, broken down by geographic factors. See the guidance document developed by the Norwegian Refugee Council's Internal Displacement Monitoring Centre and OCHA's Displacement and Protection Support Section at: www.unhcr.org/cgi-bin/texis/vtx/refworld/rwmain?docid=47b5ad3a2.

The selection of a particular profiling method is to be based on the actual circumstances (e.g. security and access levels) as well as the availability of resources. National authorities are expected to lead the profiling with the support of international organizations. When these authorities do not act, the UN Resident and/or Humanitarian Coordinator would undertake profiling in consultation with the wider humanitarian community. The guidance advises that a lead agency be identified, which will lead the exercise and with support of specialists, determine the best method to use. The guidance recommends that data sharing agreements should be worked out in advance of the exercise as well as how data will be analyzed. The guidance does not deal with how differing estimates will be handled as the fundamental starting point of the exercise is that it would take place as a joint activity with all parties concerned. Future field exercises should ensure that all actors who collect data agree on the final goal, to arrive at a "commonly agreed" number of IDPs.

Key Indicators: The core data set to be collected includes the total number of IDPs (disaggregated where possible by age and sex) and location of IDPs. When compared with the total population in a country or region, (i.e. used as the 'numerator' with total population as the denominator) this information is useful for comparing severity between geographic areas. However, for this number to be used as the 'denominator' of need, and for a more reliable indicator of severity, further information would need to be collected on the number of IDPs who actually require some type of humanitarian assistance. This remains a future challenge for data collection on IDPs, although IDP Profiling is sometimes done in conjunction with Needs Assessments. Reference is made to the IDP Protection Handbook being prepared to assist with analysis of protection gaps faced by IDPs.

4.3.5 Health Resources Availability and Mapping System (HeRAMS)

The Health Cluster is currently designing this new tool whose primary objective is to allow for better coordination of the health response in a humanitarian situation and support informed-based decision making in this sector.

It is designed to supplement weakened, disrupted or non-existent routine health information systems from the early phase of the crisis through the recovery and development stages. It has in addition been adapted to prepare the ground for the rehabilitation or upgrading (when/if needed) of pre-existing information systems and should be interrupted as soon as this is achieved. HeRAMS provides a comprehensive inventory of available health resources in an assessment mode or, when repeated over time, as an M&E tool.

HeRAMS has been extensively pilot tested in Darfur and will be further refined and implemented in other crisis situations.

Key Indicators: The tool generates indicators on health resources availability, in terms of services, human resources or infrastructures and allows for a detailed analysis of the situation to be made from various angles (geographical comparison of resource availability, identification of critical gaps, identification of trends, etc). It does not take into consideration the access dimension. It also allows predictions of the evolution of the situation as a result of important changes such as the arrival/withdrawal of key partners, and its effect on resource availability.

Depending on the context and the type of use, indicators can be simplified. For example, if the situation does not permit an exhaustive collection of the services provided, the tool may look at sub-sectors (e.g. Maternal & Newborn Health, General Clinical Services, etc.) covered by each partner, which may already permit the identification of response gaps.

4.3.6 Protection Monitoring/Assessment Systems

The global Protection Cluster Working Group (PCWG) undertook an extensive mapping and analysis of existing protection assessment and monitoring tools in 2007. The results confirm that there is an urgent need for greater standardization, coordination and, where possible, consolidation of assessment tools and practices.

The PCWG, together with the Cluster Working Group on Early Recovery (CWGER), has already developed an analytical framework intended to facilitate analysis of protection gaps in situations of internal displacement (Assessment for Action, PCWG, 2008). At present the PCWG's strategy with regard to assessments has three aspects:

1. To work with partners to mainstream protection within other sectors/clusters, including as regards the development of assessment tools and practices. This includes, for example, CCCM and Early Recovery Clusters.
2. To support the development of standardized tools and guidance on multi-sectoral rapid needs assessments, with a strong protection component. The development of such guidance could facilitate the streamlining and coordination of rapid assessments at the field level, eliminate some of the existing overlaps and maximize the use of limited resources.
3. To develop standardized guidance on rapid protection assessments. This includes the identification of information requirements and development of guidance on methodology, tools (such as forms and Standard Operating Procedures), and possibly software support. This ongoing work will be closely coordinated with partners to avoid overlaps and ensure complementarities with other tools and processes. Separate tools and guidance also exist and/or may be developed for specific areas of responsibility within the PCWG, such as child protection, GBV, mine action, land, housing and property, and rule of law.

4.3.7 Shelter Assessment Tools

Since May 2008, the Emergency Shelter Cluster has been developing a post-disaster shelter needs assessment toolkit, the Local Estimate of Needs for Shelter and Settlement (LENSS) to be used since the onset of a disaster. The current draft is designed to collect information for decisions on shelter and settlement needs at local level[13] and to be used by non-technical specialists. LENSS assumes that a central information management function is available and scaleable from the local level to the national level.

This tool kit attempts to consolidate pre-existing data, like census, together with data immediately collected. The tool kit does not, however, prescribe or describe how to conduct those activities. It is intended "to generate data for both urgent shelter interventions that save lives and early recovery interventions that save settlements".

LENSS tool kit includes:

- A glossary;
- A framework and a comprehensive ten-pages data collection plan specifying possible data sources for each information topic;
- A quality control guide;

[13] Locality is the term used in the document and is defined as a distinct population cluster (also designated as inhabited place, populated centre, settlement), including fishing hamlets, mining camps, ranches, farms, market towns, villages, towns, cities... Large urban municipalities are often divided into units.

- A set of 11 data collection sheets (35 pages Q&A) for needs assessment during a disaster: Affected state, Who What Where, Census, First hand observation, Locality, Assisting actors, Story page template, Registration, Damage assessment, Hazard assessment, Focus group.

The end product is a summary for every affected locality covering the following:

- Geographic location of affected communities;
- Pre-disaster population and housing in those localities;
- The impact of the disaster on shelter and settlement in those localities;
- The initial response of affected households in/from those localities, for example where they moved;
- The preferences of those affected households in terms of whether they want to stay return or relocate.

Key Indicators: Using the SPHERE Minimum Standards, needs are assessed for the following outcomes:

1. Shelter;
2. Basic goods and supplies to meet personal hygiene needs, prepare and eat food, provide thermal comfort, build, maintain or repair shelters;
3. Distance or protection from security threats, threats from disease, or other natural hazards and safety hazards;
4. Access to livelihood support activities;
5. Return to country/settlement of origin where possible or dispersed settlements;
6. Access to water and sanitation services and social facilities;
7. Freedom of movement in/out of settlements;
8. Land and property ownership and/or user rights;
9. Access to information about and participation in shelter and settlement outputs;
10. Attention to the needs of persons most frequently, but not consistently at risk in disasters (female heads of households, persons with disabilities, refugees, single parents, unaccompanied children and elders).

4.3.8 WASH Cluster Survey Tool

Learning from recent attempts at country level to develop needs assessment surveys led the Global WASH Cluster to develop not prescriptive 'tools' for needs assessment, but a toolkit of indicators. The toolkit includes a range of indicators from which to develop a selected, county level, context specific set of indicators and associated needs assessment format. This approach aims to ensure ownership of specifically adapted and context specific formats, of the data collected and the results for more effective humanitarian response.

The WASH Cluster Survey Tool is a database of indicators which can be used to develop (i) a Rapid Assessment Tool (RAT); (ii) a Comprehensive Assessment Tool (CAT); or (iii) a Monitoring Tool. It is intended to help WASH Cluster agencies identify critical problems/risks faced by the populations in disaster situations. Using indicators selected from the WASH Survey Tool database by the WASH Cluster agencies in the field, data are collected from the

field in order to facilitate a rapid comparison of the severity of needs, by each WASH sub-sector.

The WASH Survey Tool is part of the Global WASH Information Management Project, which is being implemented by the International Rescue Committee (IRC) and OXFAM with support from UNICEF and the participation of WASH agencies in reviewing the overall structure of the tools and the indicators used for the WASH Survey database.

Data collection methods and timing: Data collection for the WASH Survey Tool uses a mix of quantitative and qualitative methods and does not include specific guidance on sampling. As some of the data on impact-type indicators is gathered through a household survey, it is likely to take some days to complete at larger sites or for a population scattered over several sites. The information is intended to be collected by WASH specialists working in their various agencies.

The data are captured either in Excel or into a simple version of Access, in order to generate various types of reports according to severity of need. A simple Excel template has been designed to facilitate rapid compilation of information on where individual WASH agencies are working, what they plan to do and the approximate schedule of planned actions. The data collation and analysis tool will automatically compile this data to produce a summary who-what-where-when report and an analysis of gaps (i.e. where there are high levels of need but no agency responding), in order to make critical programming and resource allocation decisions. These can then also be used to develop maps in order to more effectively communicate response and specific gaps identified.

The CAT is likely to be carried out some days/weeks after a rapid-onset disaster once priority locations for intervention have been defined through the IRA Tool (multi-sectoral in nature and aimed at generalists) and/or the RAT tool (aimed at WASH specialists). However, the Survey Tool is designed to be used at any phase of the emergency and includes templates for rapid and comprehensive assessments, as well as periodic and regular monitoring, all which can all be customized at the field level.

Key Indicators: The indicators are mainly based on SPHERE Standards and the ACF Handbook.[14] Two types of indicators are measured with the CAT:

1. Conditions at the location being assessed, in terms of the situation of the population and the status of WASH conditions (environmental sanitation and access, coverage and use of WASH facilities and services). These are referred to here as impact-type indicators and are used in the monitoring tool to track the impact of the response; and
2. Estimated needs/proposed interventions in terms of the delivery of WASH services and facilities required in order to meet defined targets and create acceptable levels of availability, access and use of WASH facilities and services.

Classification: Data for each impact-type indicator of the CAT form is scored against a scale that ranges from an acceptable situation at one end to a potentially life-threatening situation requiring urgent action at the other. These scales may be modified at national level to create a context-appropriate tool as a disaster-preparedness measure. The data collation and analysis tool can be configured to give higher weighting to selected indicators in any sub-sector and individual indicators can also be given an override capacity such that the final score for the sub-sector will not be less severe than indicated by the overriding indicator. In all cases, the 'automatic' analysis provided by the data collation and analysis tool would be verified and

[14] Action Contre la Faim (2005): Water, Sanitation and Hygiene Manual for Populations at Risk

interpreted through discussions of WASH staff at field and coordination levels to ensure it is appropriate.

Next Steps: The WASH Cluster information management tools were presented to WASH Cluster agencies in Geneva on 28th February 2009 for final feedback. A roster of Information Managers for deployment to emergencies is being organized and training for initially selected candidates will be delivered on 9-11 March 2009 in Geneva. The tools will be piloted in an (acute) emergency in the near future.

4.3.9 The Livelihood Assessment Tool-kit (LAT)

FAO and ILO issued a working draft of this tool-kit in October 2007 for use in assessing the impacts of disasters on people's livelihoods, and the capacities and opportunities for recovery. The draft identifies the following three technical elements:

1. Livelihood Baseline (LB) undertaken pre-disaster to provide background information for a range of response instruments, and lasting 2-6 weeks;
2. Initial Livelihood Impact Appraisal (ILIA) to be completed within the first 10 days after a disaster to support Flash Appeals; lasting 1-7 days; and
3. Detailed Livelihood Assessment (DLA), usually conduced within 90 days after a disaster to support revised Flash Appeals or donor recovery conferences DLA; lasting 30 days

The tool-kit is currently geared towards post natural-disaster situations, and parts of it were applied and adapted in 2007-2008 following natural disasters in the Philippines, Bangladesh and Bolivia and as input to disaster preparedness efforts in Pakistan. The lessons learned on the use of LAT and the potential for extending its application to conflict and post-conflict situations were discussed at an interagency meeting in February 2008. This will feed into the work of the Cluster Working Group on Early Recovery (CWGER) Technical Working Group on Livelihoods and Economic Recovery established in July 2007.

Key Indicators:

- % of households losing employment due to disaster;
- % of households undertaking various coping strategies (including looking for work) after disaster; and
- Assets lost at household and community levels (physical, human, financial, social and natural) after disaster.

4.3.10 Household Economy Approach (HEA)

The Household Economy Approach is a livelihoods-based framework for analysing the way people obtain food, non-food goods and services, and how they might respond to changes in their external environment, shock or hazard. It aims to capture the situation of different wealth groups in different livelihoods zones. This analytical framework can be used in a wide variety of different settings and in recent years, the approach has also been used in emergency situations (1999 drought in Pakistan, 2004 Tsunami in Asia, 2005 Kashmir earthquake in Pakistan and the 2006 conflict in Lebanon).

In a classic HEA assessment, the procedure is to build the baseline first, then conduct the outcome analysis to plan the response as a separate exercise. In rapid assessments, it is usually necessary to combine all the steps into one single assessment process. However, no single

"Rapid HEA" approach currently exists and, for the time being, only tips and issues for consideration based on a variety of lessons have been produced.

The Practitioners' Guide to HEA[15] recommends four major considerations for rapid HEA assessments:

1. The most important requirement is to use highly competent staff: "the more rapid the HEA-based assessment, the more experienced the assessment leader needs to be";
2. To make good use of existing secondary data in order to focus primary data collection on understanding the impact of the disaster; a check list is provided of possible sources of secondary information in emergencies and issues to consider when reviewing secondary data to understand the baseline/pre-disaster situation;
3. To use rapid rural appraisal methods rather than structured questionnaires, as time and access constraints typically limit one's ability to prepare an adequate questionnaire, to sample properly and to interview the large number of households usually needed for a representative sample; and
4. Considering the fluidity of the context, it is recommended that analysts provide scenario-based projections and recommendations, being very clear about what variables are being taken into account in the analysis and what their different values are under the different conditions.

[15] Document: www.eldis.org/assets/Docs/35732.html

V Analytical Frameworks for Consolidation of Information

The frameworks detailed in the following paragraphs are not the only existing frameworks. Some go further into response planning than others, e.g. the Recovery Framework associated with the PDNA project and Transition Results Framework associated with the PCNA. IPC has a very generic element of Response Analysis. The Recovery framework intends to cover early recovery requirements in its first iteration and be ready before the revision of a flash appeal. Also, the guidance on Profiling IDPs developed a framework for durable solutions aiming at enabling humanitarian organisations to assist the relevant authorities and non state actors to take on the responsibility to provide solutions to IDPs, to ensure their protection and assistance.

5.1 Integrated Food Security Phase Classification (IPC)[16]

The IPC was developed by the FAO Food Security Analysis Unit (FSAU) in Somalia in 2004 to organize and present information on food security, nutrition and livelihoods collected through different assessment methods. The IPC maps countries and the regions within according to five phases of food security based on the "convergence of evidence" from a range of "reference characteristics" which include outcome and process indicators. The approach does not impose any specific data collection methods, but uses information from all methods, taking into account the reliability of the method or data sources. A key differentiating feature is that every piece of evidence used to determine the phase classification is assigned a reliability score from 1-3 with 1 rated as "very reliable". This is used to include a statement on the overall confidence of the situation analysis.

The IPC is currently being implemented in a number of different countries, under the guidance of a Steering Committee.[17] This group submitted a proposal to donors to conduct iterative development and lessons-learning activities for a common food security classification system in 25-30 countries over a multi-year period. In 2008, with funding by CIDA, DFID and ECHO, pilots are underway in 5 East African countries, as well Nepal and Tajikistan. In addition, awareness raising or training activities have been conducted in nearly 30 countries.

The IPC primarily focuses on situation analysis, but provides a "strategic response framework" which identifies broad categories of the types of assistance that may be applicable to mitigate immediate problems, support livelihoods and address underlying causes.[18]

Key Indicators: Multiple indicators of outcomes, processes, welfare and livelihoods are drawn together under the heading of "Key Reference Outcomes", which are assigned absolute (quantitative) and relative reference thresholds depending on the 5 phases. Also, different reference outcomes are included in each phase. The key indicators for the "Acute Food and Livelihood Crisis" are:

- Crude Mortality Rate
- Nutritional status: Wasting & Stunting
- Acute Malnutrition (w/h <-2 z-score)

[16] The IPC was previously called the Integrated Food Security and Humanitarian Phase Classification; a technical advisory group recommended deleting the reference to "humanitarian", in recognition that the expertise applied is mainly in the food security or nutrition field.

[17] The IPC SC currently comprises: CARE International, the EC Joint Research Centre (JRC), FAO, FEWS NET, Oxfam GB, Save the Children US and UK and WFP. In 2008, this group may be expanded to include representatives from regional organizations.

[18] For further information, see http://www.ipcinfo.org/ipc_ecard_04.htm#1

- Food Access/Availability (Kcal ppp day)
- Dietary Diversity
- Water Access/Availability (liters ppp day)
- Destitution/Displacement
- Civil Security Coping strategies
- Livelihood Assets

Classification: The IPC classifies the overall severity of food (in)security in five main phases, ranging from Phase 1 A and B (generally food secure) to Phase 5 (famine/humanitarian catastrophe).

5.2 Nutritional Information in Crisis Situations (NICS)

The UN Standing Committee on Nutrition issues the NICS report quarterly, based on consolidated information from nutrition and mortality surveys submitted (voluntarily) by UN agencies and NGOs. These reports are aimed to cover populations affected by a crisis, such as refugees, internally displaced populations and resident populations. They are designed to provide information over time on key outcome indicators from emergency- affected populations, play an advocacy role in bringing the plight of emergency affected populations to the attention of donors and humanitarian agencies, and to identify recurrent problems in international response capacity.

Key Indicators and Classification: NICS includes a nutritional risk classification system, which compares information in five areas: nutritional risk, food security, the public health environment, the social and care environment, and delivery of assistance.

Nutritional risk is divided into four main categories of severity: critical/very high; high, moderate and not elevated. A fifth 'category' is assigned when the risk is not known. The classification is based on either the analysis of the risk of malnutrition (as indicated by underlying factors and trend analysis), the prevalence of malnutrition, and/or high mortality rates. The NICS reports also analyze the underlying causes of malnutrition and the constraints limiting humanitarian response classified in three levels of adequacy (adequate, mixed, inadequate and recommend appropriate actions.

	Crisis Area A	**Crisis Area B**	**Crisis Area C**
Nutritional Risk Category			
Food Security			
Households' Livelihoods			
External Assistance			
Public Health Environment			

	Crisis Area A	Crisis Area B	Crisis Area C
Availability of Water and Access to Potable Drinking Water			
Health Care			
Sanitation			
Social and Care Environment			
Social Environment			
Child Feeding Practices			
Delivery of Assistance			
Accessibility to the Population			
Resources for Humanitarian Intervention			
Availability of Information			

5.3 Needs Analysis Framework (NAF, 2007 version)

The Needs Analysis Framework is a tool introduced to help UN Country Teams "organise and present existing information on humanitarian needs in a coherent and consistent manner". The aim is to ensure that the responses proposed in Consolidated Appeals (CAPs) are underpinned by a strong needs analysis, using existing assessment data from multiple sources and covering all sectors. The NAF uses a sector-specific approach, and presents a basic analytical framework. However, the current version does not allow for comparison of available information and agreement on a common analysis of the situation. The NAF advises that such prioritisation be prepared at the country level.

The original (2005) version of the NAF was piloted in several countries in 2005-6, and was subsequently meant to be widely applied in 75% of CAPs. Implementation has varied widely since its creation and few NAF documents have been published. However, it proved to be an efficient framework when implemented. OCHA is currently reviewing the NAF approach, which remains an important first attempt in improving multi-sectoral analysis and the evidence base for CAPs.

Key Indicators: The NAF contains a large number of outcome indicators, including on mortality, morbidity and malnutrition.

- Mortality: Under five mortality rate (per 10,000/day, and/or per 1,000/month); infant mortality rate; maternal mortality ratio (per 100,000 live births)

- Morbidity patterns: prevalence of the most common diseases in order of importance; HIV/AIDS prevalence;
- Malnutrition: prevalence of underweight children under five years of age; Weight/age; rates of acute, severe and chronic malnutrition and oedema; proportion of population below minimum level of dietary energy consumption.

Classification: The NAF does not provide any method for classifying overall or sectoral severity, although this was originally proposed when it was developed in 2003. However, country teams are now required to prioritize projects in CAPs, although guidance is currently limited (see box for examples, including DRC's severity classification approach). The 2008 CAP document highlights the following basic statistics, which can be used to compare the relative severity of the CAP countries in terms of their underlying vulnerability:

- Infant, Children under 5 and maternal mortality ratios;
- % of population undernourished;
- Number and % of population displaced;
- Number of refugees in country and abroad; and
- ECHO Global Needs Analysis score and UNDP Human Development Index (HDI) score and rank.

Prioritization Methods Used in the 2008 CAP Documents:

The 2008 CAP for DRC is widely recognized as a best practice example of prioritization of acute humanitarian needs as the basis for the country's humanitarian strategy and subsequent funding appeal. Needs assessment information was compiled from all districts of concern and each district was ranked according to the severity of needs in 6 priority sectors: IDPs, returnees, protection, sexual and gender-based violence (SGBV), malnutrition and health. The final product is a consolidated map of all districts, clearly displaying the geographical areas with the most urgent needs.

Other 2008 CAPs (e.g. CAR, Iraq) have used different prioritization methods, assigning points to various prioritization criteria established by the humanitarian country team. Projects are then classified as high, medium or low priority based on the number of prioritization criteria they meet.

5.4 Post-Disaster Needs Assessment (PDNA)

The PDNA project is a cooperative effort between United Nations Agencies – led by UNDP as the Chair of the Cluster Working Group on Early Recovery (CWGER), the World Bank and the European Commission to develop a Practical Guide to a Multi-Stakeholder Post-Disaster Needs Assessment (PDNA) and the Recovery Framework (RF). The main aim of the project is to "support effective transition from relief to development by improved capacity and coordination at national and international levels for the conduct of recovery-oriented needs assessment and recovery planning." The project aims to address not only the need for effective recovery assessment and planning at the national level, but also the how-to of connecting national plans with effective means of delivering recovery programs at the local level.

The PDNA guide and Recovery Framework seek to integrate two of the main strands of recovery-oriented needs assessment, i.e. the determination of programmatic needs in support of human recovery with the evaluation of damages and losses caused by the disaster, to ensure that recovery planners have a picture as complete as possible when designing recovery interventions and prioritizing between sectors and programs. The PDNA seeks to integrate the use of the Damage and Loss Assessment (DaLA) methodology developed by UN ECLAC with the use of sectorally comparable tools designed and used by UN sector leads, IASC humanitarian clusters, the World Bank and other recovery actors for the identification of human recovery needs, thus enhancing compatibility and avoiding duplication.

A PDNA is foreseen to commence as soon as possible after the disaster onset, ideally within the first weeks and following the more immediate, relief-oriented, assessments. A first objective for the PDNA is to support the elaboration of an initial iteration of the Recovery Framework, i.e. in the shape of an Early Recovery Strategic Framework, in time for the revision of a humanitarian flash appeal - normally within five to six weeks following the onset of a disaster.

The project reviewed a representative set of existing assessment methods and information management tools used to determine recovery needs by different stakeholders across the recovery timeline (including humanitarian and early recovery, recovery and developmental elements) and produced two pilot software tools to support the assessment process together with a conceptual guide to recovery-oriented needs assessment. One finding was that because of the varying scope, timing and rigor of assessments (many of which are country-specific and have been endorsed by the respective governments), the development of the recovery framework will not be based on a single integrated assessment method. However, the need was recognized to build complementarity between the assessment methods used by the International Financial Institutions, which focus mainly on macro-economic issues (primarily the ECLAC Damage and Loss Assessment), and those used by UN agencies and NGOs, which are human-development oriented in order to develop a shared understanding of the overall impact of natural disasters.

Following major consultative meetings held in May 2008 in Brussels and in January 2009 in Geneva, the next project outputs include development of (a) agreement on protocols of cooperation between the United Nations, the World Bank and the European Commission (e.g. covering joint missions and capacity building); (b) a practical guide to multi-stakeholder post-disaster needs assessment and the recovery framework; and (c) applying, field-testing and conducting training on this framework in high-risk countries with national and international recovery partners. In addition, work would be undertaken to adapt sectoral assessment methods that are relevant to PDNA to enable them to better determine early recovery needs in each sector.

As currently envisioned, the recovery framework involves a joint analysis of information from assessments of human recovery needs and economic damages and losses and related response options, based on agreed recovery sectors and expected outcomes. It would evolve over time; the first version would be prepared drawing on information from rapid humanitarian assessments and other sources in the immediate days post-disaster. More detailed recovery-oriented assessments should begin as soon as possible after the disaster to elaborate a first iteration of the Recovery Framework - the Early Recovery Strategic Framework - for inclusion in the revised Flash Appeal. The Framework would establish and help prioritize activities required to return to the pre-disaster development plans for the affected area, including disaster risk reduction measure to mitigate future vulnerability.

The details of the framework, including reliance (if any) upon core indicators of need, are being further elaborated and will be discussed at a multi-stakeholder consultation within the coming year.

5.5 Post Conflict Needs Assessments (PCNAS)

PCNAs (also sometimes called Joint Needs Assessment or JNA) are typically coordinated by the World Bank and UNDG with multiple stakeholders (UN agencies, national government, donor countries and regional institutions) in countries emerging from conflict. They represent a planning process for "conceptualizing, negotiating and financing a common shared strategy for recovery and development in fragile, post-conflict setting[s]" rather than a single assessment method. The PCNA process currently involves three main steps:

First, a 'pre-assessment' or shared situation and context analysis is conducted to develop the PCNA concept note. Depending on the available time, this involves consultations among key stakeholders, review of pre-existing information, and in some cases the development of a database containing an inventory and bibliography of baseline data and essential documents. The aim is to identify the main causes and characteristics of the conflict; risks and trends e.g. in access and insecurity; key population groups, institutions or regions that may need to be prioritized, e.g. in terms of receipt of benefits or reconstruction efforts; and the capacity of national (state and non-state) actors and institutions.

Second, sectoral field and desk assessments are conducted by national and international technical experts (including from the UN and the World Bank) for each priority area (called 'clusters'). The identified needs are prioritized according to criteria agreed beforehand by the stakeholders, which should reflect how the activity contributes to stabilization of peace and how it links with the government's priorities. No specific guidance is currently provided on how to conduct these assessments.

Finally, the resulting information from all the "clusters" is consolidated and used to produce a prioritized and costed overview of the needs, which is encapsulated in a 3-5 year recovery action plan - the Transitional Results Framework (TRF). A PCNA tool kit has recently been developed after a year-long process to consolidate the lessons learned from PCNAs conducted between 2002 and 2006.[19]

[19] As of December 2008, PCNAs had been undertaken in Iraq, Liberia, Haiti, Sudan (North and South), Darfur, Somalia and Georgia. For further information see http://www.undg.org/index.cfm?P=148

VI Other relevant Initiatives

6.1 Global Risk Identification Program (GRI-P)

This seeks to develop an improved evidence base for natural disaster risk management by developing common tools and standards for damage and loss assessments. Activities will be undertaken to standardize terminology used (e.g. missing, affected, disaster) and analyze historical loss/damage data to help predict future risks and assess vulnerability.

GRIP was launched in June 2007 as a 5 year, US$ 20 million, multi-partner/donor activity, including EU, DFID, USAID, ISDR, the World Bank, IFRC and the Inter-American Development Bank. The funds will be used to establish Disaster Loss Observatories in 30 countries, which will be involved in real-time data collection as well as historical analysis, e.g. to compile a National Risk Atlas.

A key product will be the development, by mid 2009, of a "Global Update" or Risk Index which ranks countries according to their combined risks of 6-10 hazards: volcanic eruptions, earthquakes, floods, tsunamis, drought, landslides and tropical storms. This will link and update previous work on the Risk Index, including by Columbia University on Global Hotspots.

This effort is closely linked to the Post-Disaster Needs Assessment (PDNA) work, as it contributes to the improved understanding of the disaster impact, from which agencies develop their estimates of macro-economic and human/social losses and related needs.

6.2 Protection of Conflict-Induced IDPs: Assessment for Action

The Protection Cluster Working Group (PCWG), together with the Early Recovery Cluster Working Group, published a provisional version of an analytical framework entitled "Protection of Conflict-Induced IPS: Assessment for Action" in February 2008. The framework is the result of a collaborative effort involving among others UNHCR (coordinator), OCHA, WFP, UNICEF, UNDP, OHCHR, UNMAS, IOM, ICVA, NRC and others. The framework is currently being field-tested and a final version will be published in 2009.

The framework is composed of two parts. The first contains a framework for analysis, which includes a comprehensive checklist covering 11 key protection areas, while the second provides guidance on participatory methodologies, aimed at facilitating dialogue and gathering of information from individuals and communities. The framework is not intended as a primary data collection tool but rather as a framework for analysis and the identification of protection gaps following other assessment or profiling exercises.

6.3 DevInfo in Emergencies

EmergencyInfo is a decision support system, based on DevInfo database technology that seeks improve the response of humanitarian actors to emergency situations. It combines the advanced data access and presentation features of DevInfo with new data capture technologies. EmergencyInfo aims to bridge information gaps within the first 72 hours of an emergency and provide support for rapid data collection, situation assessment, standard monitoring reports and disaster preparedness.

6.4 UNHCR's Global Needs Assessment (GNA)

In 2008, as part of a Result-Based Management and integrated change initiative, UNHCR began a process of identifying unmet needs of people of concern to the agency, and how much it would cost to fulfil all these needs. This Global Needs Assessment is not a new assessment tool or method, but draws on the results of the Strengthening Protection Capacity Project's approach to identify unmet needs through consultation with all stakeholders, as well as statistics compiled through UNHCR's monitoring system (Standards and Indicators system). The GNA was piloted in eight countries in 2008 and will be applied worldwide in 2009 to inform the agency's 2010-2011 biennial planning process. The goal is to develop a comprehensive, prioritized plan and related budget for UNHCR or its partners to meet their responsibilities.[20]

[20] For more information, see www.unhcr.org/gna.

VII Major Findings and Recommendations

7.1 Major Findings

The following findings are primarily based on a review of the methods and the scope of information that the various needs assessment initiatives aim to capture. Additional information came from interagency consultations.

Coordination

- There are a large number of initiatives currently underway, not only to design assessments, but also repository data bases, reporting mechanisms etc.
- Many of the new assessment initiatives are undergoing a similar design process, often with a limited analysis of the underlying information collection requirements and linkages with Information Management considered afterwards. Subsequently, some questionnaires are being shortened and re-structured, contributing to higher costs and longer development processes.
- In addition, a number of parallel initiatives are also underway at the regional and country levels, which could benefit from greater coordination with global level initiatives.
- Limited consultation among these recent initiatives could result in possible duplication, higher costs, and increased assessment fatigue, both among populations of concern as well as humanitarian actors.

Timeframe

- Despite an abundance of detailed information collected, further agreement is needed on the type and depth of information required at each phase of the crisis. At the initial phase, when only limited information may be available, maximizing the use of pre-crisis information and baselines is highly important.
- Effective contingency planning and preparedness measures identify and map key vulnerabilities and risks. However, this information does not systematically feed into rapid initial needs assessments once a crisis has occurred.

Standardisation

- Most of the initiatives and related guidelines do not include definitions of key terms, such as 'affected', 'homeless' etc. This makes it difficult to differentiate between all people living in affected areas versus those who are in need of specific types of humanitarian assistance.
- Key indicators used by the various tools are indicated throughout the mapping paper; however, there is limited standardization across sectoral indicators, as also found in the CAP and Flash Appeal review. The large number and variety of indicators generated by needs assessments and used in CAPS/Flash Appeals, hamper enhanced aggregation of data, the prioritization of needs across sectors, and comparability of severity between different crises.
- Core sets of indicators per cluster/sector have not yet been agreed upon.
- Some of the tools being developed are incorporating a severity ranking approach within a given sector, although currently no cross-sectoral severity ranking approach with a well defined methodology exists.

- The term 'rapid assessment' covers a wide range of time frames, from a few days to several weeks, blurring the distinction between 'real' rapid assessments and more in-depth assessments. The majority of new initiatives currently being designed are addressing cluster/sector specific programming needs and fall into a 2-5 weeks time frame – beyond the strictly 'rapid assessment' timeline.
- A significant amount of the information collected is common across all the different tools.

Capacity

- The development of assessment tools, as well as their implementation and analysis, requires substantive and technical capacity and expertise, including data management expertise. While some agencies/clusters have invested in capacity building for assessments over a long period of time, others currently have more limited capacity.

Key Findings from a Review of 2008 CAP and Flash Appeal Documents

1. CAP and Flash Appeal documents do not consistently reflect all needs assessment work carried out at country level, although they are often used as primary decision-making tools by donors and the broader humanitarian community.

2. Appeal documents refer to a limited number of assessments, and do not always report on their results. Among the 11 2008 CAPs, DRC and West Africa referenced the highest number of needs assessments, although many were of a generic 'food security/nutrition' description, as opposed to recognised assessments, such as MICS, EFSAs etc. However, due to the timeframe of the Flash Appeals, it is often the case that only a small number of assessments have been implemented at the time of writing.

3. The information collected/indicators used across CAPs and Flash Appeals were highly variable, with 3-4 indicators consistently used in 90% or over of CAPs and Flash Appeals. The sectors with the highest concentration of information/indicators varied, from Health and Demographics/Economics in the CAPs, and Protection and Agriculture in the Flash Appeals. There were a total of 48 indicators that were common to both CAPs and Flash Appeals.

4. Three of the four Flash Appeal revisions, Georgia, Myanmar and Kenya, increased the number of indicators used in the revised appeal document. This is in line with expectations for more accurate and detailed information on needs of the affected population in the Flash Appeal revision, usually completed 4-6 weeks after the original Flash Appeal. The Myanmar Revision showed a significant rise in indicators used, going from 29 indicators in the original appeal to 52 indicators in the revision.

5. There is limited standardization across sectoral indicators in both CAPs and Flash Appeals. Different wording was used to describe some of the same indicators or data, making it difficult to compare the type and level of data collected across appeals.

6. While CAPs provide figures for total number of people in need of sectoral assistance, they do not commonly provide a consolidated planning figure for the total number of people affected by the crisis or total number of beneficiaries of the appeal.

7.2 Recommendations

Coordination

- OCHA should continue discussions with cluster/sectors and other actors on ways to harmonize and share lessons learned from the various initiatives.
- As appropriate, OCHA should liaise with the IASC Information Management (IM) Task Force to discuss how to improve links between needs assessments and IM, particularly regarding data collection formats, sampling, and secondary data review standards and analysis approaches.
- There is a need for consolidated needs assessment 'tool box', including guidance on assessments, lessons learned from various initiatives, and standardized tools (e.g. forms/questionnaires) that can be adapted for specific contexts. See recommendation from the Global Nutrition Cluster.[21]

Timeframe

- The mapping paper proposes a sequence to organize needs assessments according to the emergency timelines, as a means of clarifying what type and depth of information is required at each phase of the crisis. (See Annex 1).
- The linkages between contingency planning/preparedness and needs assessment processes need to be strengthened to ensure ready availability of consolidated core pre-crisis data. This data should feed into initial rapid needs assessments to avoid unnecessary collection of similar information at the onset of a crisis, and ensure time- and resource-effective assessment. Systematic implementation of the IASC Guidelines on Interagency Contingency Planning provides an opportunity to improve the complementarity between contingency plans and needs assessments.

Standardisation

- Clusters/sectors should agree on common definitions for selected key terms, such as 'affected', 'homeless', 'vulnerable groups' etc. to ensure a common understanding of a particular crisis setting.
- The development of an agreed core set of indicators per cluster/sector, which would be consistently collected, would improve data aggregation, prioritization of needs across sectors, and equitable response according to vulnerability across crises. It is suggested that a set of minimum information be agreed for priority collection in the first days following on-set of a crisis, and then gradually expanded as time progresses.
- A multi-sectoral needs assessment tool(s) to collect core common data on the initial phase of a sudden on-set crisis, would support more timely and coordinated information collection for decision making and immediate life-saving interventions.

Skills and Capacity

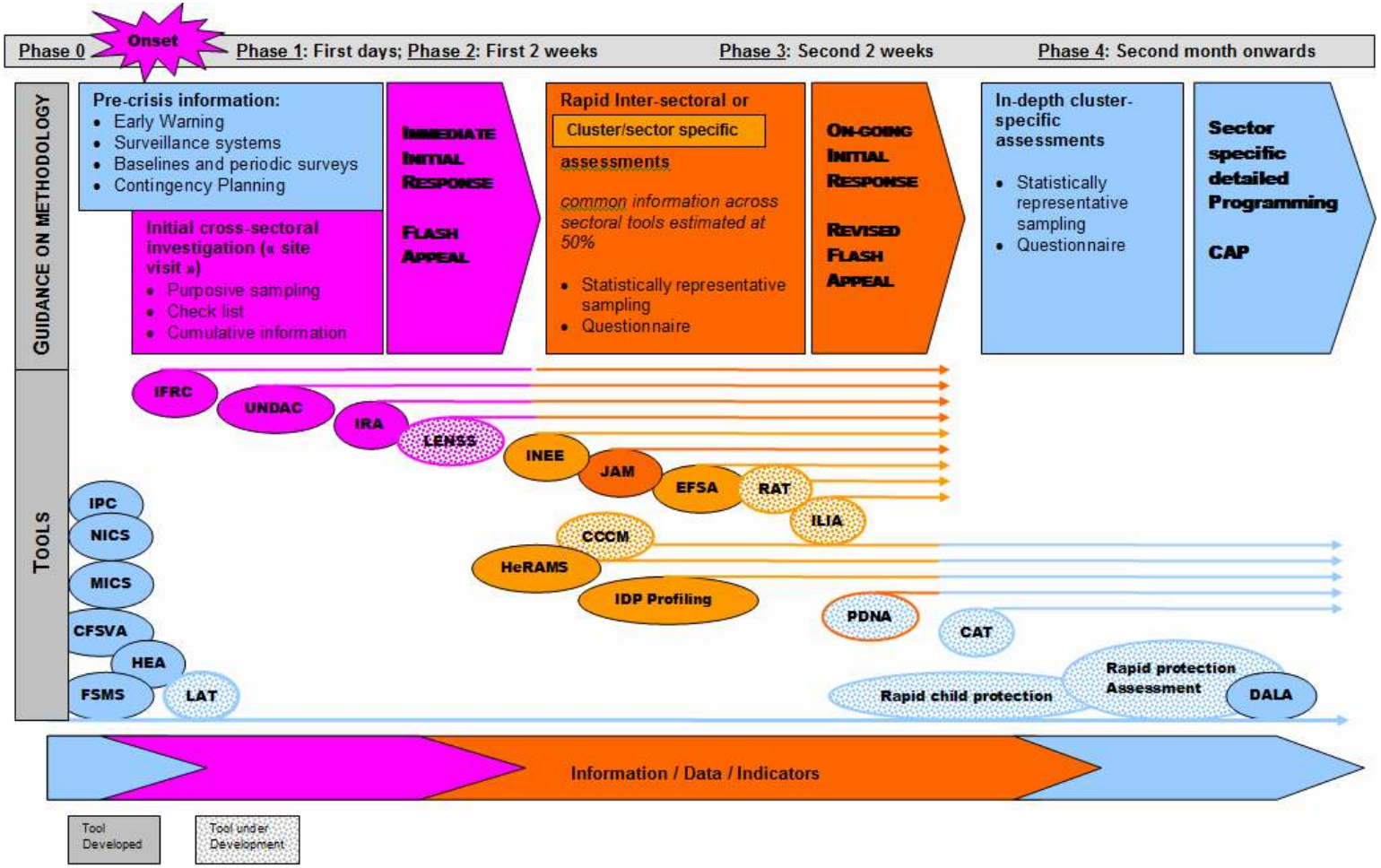
- Clusters/agencies should consider conducting a review of existing capacities for design and implementation of the various tools, and create materials/capacity-building strategies as necessary. The development of further training materials/capacity-building strategies

[21] "Guidance should be developed for the wider humanitarian community on how to interpret and report on data quality, including a checklist on the minimum information to be included in every survey report (e.g. confidence intervals, design effect)", SMART.

should build upon work by agencies/initiatives which have made substantial investment in these topics.

- Prior any field-testing, it is recommended that sector/cluster leads ensure assessment tools are designed along information management requirements.

Annex I: Sequence of Humanitarian Assessments in Sudden Onset Crisis



Annex II: Assessment Initiatives

	Tools	Processes			Human Resources
		Stage of development	**Implemented**	**Time frame for results delivery**	**Assessment Experts Database**
Multi Cluster / Multi Sectoral					
Health, Nutrition & WASH	IRA : Initial Rapid Assessment	Developed	7 countries	Phase 2: 1st week	NA
IFRC-Fact Team	Rapid Assessment	Developed	> 100 countries	Phase 1 & 2: 24 hours, 72 hours, 1st week	Yes
UNHCR - WFP	JAM : Joint Assessment Mission	Developed	> 100 countries	Phase 3: 2-3 weeks	Yes
Cluster / Sector Specific					
CCCM	CCCM Assessment Framework;	Under development	No	Phase 3: 3-5 weeks	NA
Education	Integrated Rapid Assessment Field Data Checklist	Developed	Yes	Phase 1: 72 h	NA
	RALS: Rapid Education Assessment of Learning Spaces	Developed	Yes	Phase 3: 2-3 weeks	NA
Emergency Shelter	LENSS: Local Estimate of Needs for Shelter and Settlement	Under development	No	Phase 2: 1st week	NA
	Risk Mapping and Shelter Response Planning	Under Development	Yes	Phase 0: Preparedness	NA

	Tools	Processes			Human Resources
Health	HeRAMS	Developed	5 country	Phase 3: 3-5 weeks	NA
Nutrition & Food Security	EFSA: Emergency Food Security Assessment	Developed	80-100 assessments/ year	Phase 3: 3-5 weeks	Yes
	CFSVA: Comprehensive Food Security and Vulnerability Analysis	Developed	27 WFP priority countries	Phase 4: 2 months	Yes
	HEA: rapid Household Economy Assessment;	Developed	6 countries	Phase 2: 10 days	Yes
	MICS: Multiple Indicator Cluster Survey	Developed	> 100 countries Rounds 1,2, 3	Phase 4: ≥ 6 months	Yes
Protection	UNHCR's Global Assessment of Needs	Developed	Yes	Phase 4: ≥ 5 weeks	NA
	Rapid Protection Assessment	Under development	No	Phase 4: ≥ 5 weeks	NA
	Rapid child protection assessment	Under Development	No	Phase 4: ≥ 5 weeks	NA
	IDP profiling	Developed	Yes	Phase 4: ≥ 5 weeks	NA
WASH	RAT: Rapid Assessment Tool	Under development	Yes	Phase 3: 3-5 weeks	NA
	CAT: Comprehensive Assessment Tool	Under development	Yes	Phase 4: 3-5 weeks	NA

Annex III: List of Acronyms

>5 MR	Under 5 Mortality Rate
ACE	Assessment and Classification of Emergencies
BMI	Body Mass Index
CAP	Consolidated Appeal Process
CAT	Comprehensive Assessment Tool
CCCM	Camp Coordination and Camp Management
CDR	Crude Death Rate
CFSVA	Comprehensive Food Security and Vulnerability Analysis
CIDA	Canadian International Development Agency
CMR	Crude Mortality Rate
CWGER	Cluster Working Group on Early Recovery
DFID	Department for International Development (UK)
DLA	Detailed Livelihood Assessment
ECHO	European Commission Humanitarian Aid Office
EFSA	Emergency Food Security Assessment
FACT	Field Assessment and Coordination Team
FCS	Food Consumption Score
FSAS	Food Security Analysis Service
FSAU	Food Security Analysis Unit
GRI-P	Global Risk Identification Programme
HDI	Human Development Index
HEA	Household Economy Approach
HeRAMS	Health Resources Availability and Mapping System
HFA	Height-for-age
HNTS	Health and Nutrition Tracking Service
IASC	Inter-agency Standing Committee Working Group
IDP	internally displaced person
IFIs	International Financial Institutions

ILIA	Initial Livelihood Impact Appraisal
IM	Information Management
INEE	Inter-agency Network for Education in Emergencies
IRA	Initial Rapid Assessment
IPC	Integrated Food Security Phase Classification
LAT	Livelihoods Assessment Tool
LB	Livelihood Baseline
LENSS	Local Estimate of Needs for Shelter and Settlement
M&E	Monitoring and Evaluation
MDGs	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MUAC	Mid-Upper Arm Circumference
NAF	Needs Analysis Framework (IASC)
NICS	Nutritional Information in Crisis Situations
OCHA	Office for the Coordination of Humanitarian Affairs
PCNA	Post Conflict Needs Assessment
PCWG	Protection Cluster Working Group
PDNA	Post Disaster Needs Assessment
PRA	Participatory Rapid Assessment
RA	Rapid Assessment
RALS	Rapid Education Assessment of Learning Spaces
SC	Steering Committee
SENAIP	Strengthening Emergency Needs Assessment Implementation Plan
SGBV	Sexual and Gender-Based Violence
SMART	Standardized Monitoring and Assessment of Relief and Transitions
TF-AME	Task Force on Assessment, Monitoring and Evaluation
TRF	Transitional Results Framework
WASH	Water Sanitation and Hygiene Cluster
WFA	Weight-for-age
WFH	Weight-for-height