

COMMUNITY DAMAGE ASSESSMENT AND DEMAND ANALYSIS

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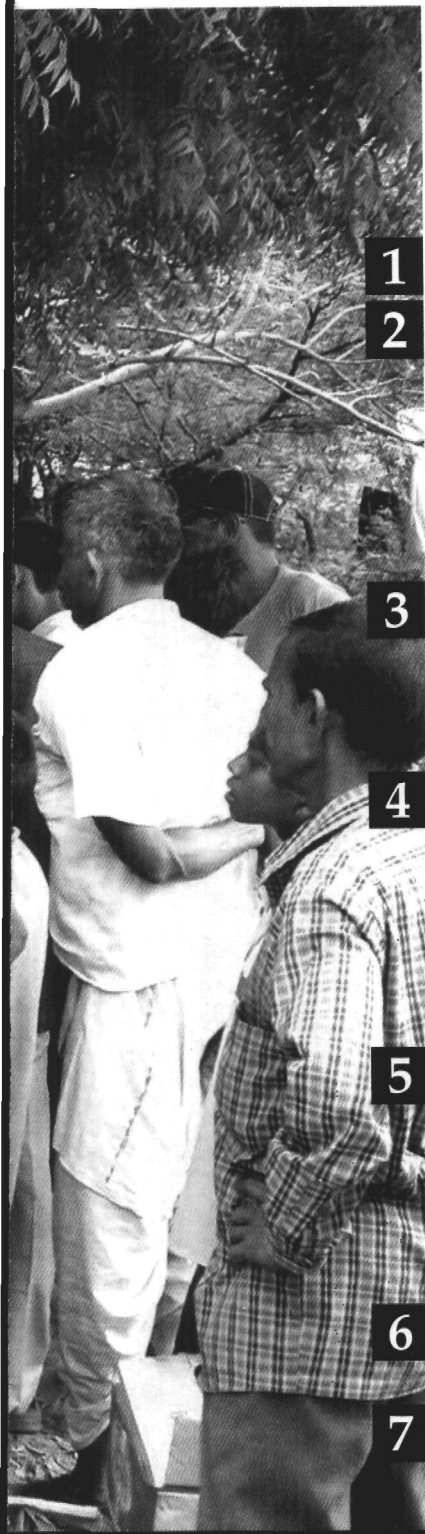
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FOREWORD

Disasters are making their presence felt across the world and also creating new challenges for the development sector as a whole. There is a feeling that when disasters happen the previous learnings are often forgotten. The process of intervention is started again from scratch. Assessing the need of a continuity and especially involving them in the process of learning is a very important tool to effectively combat future disaster situations.

Often the ground level reality is such that the intervening teams are not equipped with either appropriate or adequate skills and are compelled by the situation to respond. Often the assessment does not identify what the needs are. This is then reflected through the gaps in the impact areas. The scenario appears like abundant resources are flowing and yet not reaching the needy. One needs to question this scenario.

I would like to add a small anecdote from my work in Latur, Maharashtra after the earthquake. Forty eight hours after the disaster had struck. I was in a village where the milk cooperative had sent tankers containing milk. By the road there were survivors - women and children but they were not coming forward to collect the milk! On talking to them I was told that all their vessels were lost and now they had no vessels to collect the milk! The cooperative's gesture was very well meaning but if they had brought along simple plastic containers, the need of the community would have been met. I can run into several stories of similar nature which tell us that there is a need to use systematic methodology to do a need assessment.

All India Disaster Mitigation Institute, an Indian NGO from Ahmedabad, Gujarat, has been working in this sector for a decade and has taken it upon themselves to prepare some tools which can be very useful in assessing the damages and preparation of demand analysis. For this, much significance is given to community participation and use of the indigenous knowledge.

I am sure this tool that was put together by the AIDMI team will be of immense value for development practitioners and planners.

I thank the team for putting in this effort.

Mrs. Mini H. Bedi
Field Representative
Oxfam-Australia
Pune, India
July, 2005

PREFACE

Each year, disasters in India result in a loss of US\$1 billion, and this estimate does not fully include losses in the informal sector of the economy. For more timely and cost-effective responses to future disasters, an effective post-disaster damage assessment method must be introduced. However, assessments are challenging, as disaster situations may be turbulent and unpredictable.

The opportunity to learn from previous disasters is lost when the situation is not documented thoroughly, or at all. Unlike International Non-Governmental Organisations, local Non-Governmental Organisations and Community Based Organisations do not have detailed assessment methods, and so the most important lessons are frequently lost. When post-disaster damage assessments are documented, many are sector specific and so do not fully include the varied demands of the victim communities. This often leads to faulty estimates, inappropriate response interventions and blurred conclusions. A frequently encountered problem with post-disaster damage assessments is that they lack consistency and uniformity in collecting and presenting data. Hence, it becomes almost impossible to link relief with rehabilitation and the long-term recovery issues of victims. The All India Disaster Mitigation Institute has experienced and learnt that locally designed and conducted post-disaster damage assessments prove to be the most realistic and holistic. However, at times they lack appropriate technology and networking support that could be extended by outside experts and agencies.

In order to overcome some of these problems and challenges and to improve the assessment method, it is important to draw lessons from previous post-disaster damage assessment practices. AIDMI has attempted to do this through the Community Damage Assessment and Demand Analysis. The objective of this Community Damage Assessment and Demand Analysis is to provide an assessment method that can be used by local NGOs and CBOs as well as larger NGOs and government departments when they work alongside these smaller organisations. The assessment method is simple and so can be understood by all who undertake and read it.

AIDMI believes in placing communities at the focus of any assessment. Community response is the most authentic source of information and is readily available. Therefore, they must have primary importance in the assessment. Many communities have to deal with disasters annually and so relief work must focus on building the capacity of the community. This will make them less

vulnerable when faced with future disasters and capable of conducting primary damage assessments on their own. Similarly, relief workers should learn to practice conducting community-led assessments.

AIDMI works in conjunction with the European Union to reduce the vulnerability of communities in the earthquake affected areas of Gujarat, specifically focusing on women and children. The European Union responded to the Gujarat Earthquake in 2001 by rapidly distributing essential livelihood relief, such as building temporary shelters and building water harvesting structures, to the affected communities. The relief focused on both rural and urban areas. This assessment method aims to build the capacity of the disaster affected communities and post-disaster damage assessment workers so that the overall process of alleviating human suffering becomes more effective and meaningful.

Mihir R. Bhatt
All India Disaster Mitigation Institute
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EXECUTIVE SUMMARY

For relief organizations, recognizing beneficiary realities and needs is difficult in the turbulent time following a disaster. While providing essential and timely assistance, the needs of the victim community are sometimes overlooked in lieu of deadlines and protocols. Pre-packaged relief is rarely compatible with demand. This document suggests a process that should help relief agencies train their assistance to community realities. Based on All India Disaster Mitigation Institute's work with communities through dozens of disasters, this Damage Assessment is both relevant and specific to disaster victim needs.

The first chapter speaks to the appropriateness of community-based needs analysis. The second chapter addresses common challenges relevant to gathering correct and pertinent information for disaster relief and rehabilitation. It also gives recommendations for constituting an analysis team and details the Assessment Process. Chapter 3 suggests four different types of reports—as appropriate for the relief phase: Flash Reports, Initial Reports, Interim Reports, and Final Reports. Detailed formats for each type of report are provided in the Annexure.

Chapter 4 makes suggestions relevant to standardizing information systems for decision makers to be able to act quickly. Chapters 5 and 6 discuss the Sphere Project's Minimum Standards in Disaster Response and the Red Cross's Humanitarian Charter. Here a checklist is provided to guide community need analysis. These sections provide specific and useful guidelines organized meaningfully by categories of Water and Sanitation, Food Security and Food Aid, Shelter and Site Planning, and Health Services. The Annexure includes suggested formats for providing reports to authorities and the media, suggestions for taking community resource inventory, and a sheet of common needs in Indian disaster management.

ABBREVIATIONS

AIDMI	All India Disaster Mitigation Institute
AMA	Ahmedabad Management Association
ARRS	Action Review and Research Services
BPP	Building Peace and Protection
BRP	Bhuj Reconstruction Project
CBO	Community Based Organisation
CMR	Crude Mortality Rate
CSE	Centre for Science and Environment
EFSN	Emergency Food Security Network
EHU	Emergency Health Unit
EPI	Expanded Programme on Immunisation
FAO	Food and Agriculture Organisation
HIS	Health Information System
ICVA	International Council of Volunteer Agencies
IGNOU	Indira Gandhi National Open University
INGO	International Non-Governmental Organisation
ITDG	Intermediate Technology Development Group
JICRC	Japan International Centre for the Rights of the Child
LR	Learning Resources
LRF	Livelihood Relief Fund
NGHA	Non-Governmental Humanitarian Agencies
NGO	Non-Governmental Organisation
OR	Organisational Resources
PRI	<i>Panchayati Raj</i> Institution
SCHR	Steering Committee for Humanitarian Response
SEWA	Self Employed Women's Association
SHG	Self Help Group
SRC	Sphere Resource Centre
U5MR	Under - 5 Mortality Rate
UN	United Nations
UNDP	United Nations Development Programme
UPP	Urban Planning Partnership
VOICE	Volunteer Organisations In Cooperation in Emergencies
WSP	Water Security Programme

CONTEXT

The primary objective of any post-disaster damage assessment and need analysis is to provide a clear, concise picture of post disaster situation, to identify relief needs, and to develop strategies for recovery. Every disaster presents a unique set of problems for relief workers that must be overcome in order to disburse relief and deploy available manpower to the most needy survivors. Accurate post-disaster damage assessment and need analysis facilitates efficient and effective utilisation of existing logistics. When disaster occurs, in the rush to plan and execute a response, it is inevitable that the real needs and capacities of the victims to help themselves are overlooked. A deliberate or unconscious neglect of local coping capacities and stifling the voices of those affected by disaster are common even during assessments.

Ideally, an assessment should take into consideration the direct and indirect losses, which have both short and long term effects on communities. Most assessments are specifically conducted to assess the physical damage resulting from the disaster. Socio-economic factors and individual needs of survivors are not incorporated into these assessment methods. This leads to an inappropriate and haphazard response, which does not account for the area-specific needs and latent capacities of the victims. This, in turn, wastes valuable resources without alleviating the victim's suffering. Therefore, in order to create a holistic picture and plan out a timely and appropriate response strategy, an assessment method must incorporate both the scale of destruction and the victim's needs.

Most assessment methods overlook the impact of a disaster impact on the livelihood security of the victims. Assessment must identify and review possible options to restore livelihood mechanisms as soon as possible. A livelihood relief intervention sits at the crossroads between disaster and development, which essentially reduces risk. Therefore, a post-disaster damage and need analysis must carefully assess livelihood needs in consultation with the affected victim on aspects which include: the type of livelihood activity affected, the severity of the damage,

1



When disaster occurs, in the rush to plan and execute a response, it is inevitable that real needs and capacities of the victims to help themselves are overlooked.

potential difficulties in livelihood restoration, livelihood options, and the type of support required.

In this context, and after a number of consultations with its coordinators, the victims of the earthquake in Bhuj and the victims of the riots in Ahmedabad, AIDMI has formulated an assessment method. The method, called the Community Damage Assessment and Demand Analysis, is consolidated in this document. Relief workers in this field are requested to review, adapt, test and modify the process and method so as to formulate a fully effective and comprehensive assessment method.

The assessment must identify and review possible options to restore livelihood mechanisms as soon as possible. A livelihood relief intervention sits at the crossroads between disaster and development, this essentially reduces risk.



COMMUNITY DAMAGE ASSESSMENT AND DEMAND ANALYSIS

2

2.1 ABOUT AIDMI

The All India Disaster Mitigation Institute is a community-based action research and action-planning organisation that aims to bridge the gaps between policy, practice and research from the local community level to the national level. Established after the 1987-89 droughts in Gujarat, AIDMI primarily focuses on four security programmes that address the basic human requirements of work, food, water and shelter. Initially conceived as a small project, AIDMI became a fully autonomous organisation in 1995, active from project to policy and grassroots to advocacy level.

To provide continuous support to the disaster-affected community, AIDMI's activities are separated into eleven different activity centres. These are:

- Action Review and Research Services
- Bhuj Reconstruction Programme
- Building Peach and Protection
- AIDMI-AMA Joint Centre for Disaster Risk Management
- Emergency Food Security Network
- Emergency Health Unit
- Learning Resources
- Livelihood Relief Fund
- Organisational Resources
- Sphere Resource Centre
- Water Security Programme

Each activity centre focuses on specific issues for disaster mitigation and reduce future risks.

2.2 THE ASSESSMENT METHOD

The Community Damage Assessment and Demand Analysis is a multi-disciplinary, multi-sectorial, multi-level, multi-cultural and multi-method process. It is a simple series of activities to be undertaken in phases. There is considerable emphasis on victim communities, local CBOs, and government authorities. In addition, experts' opinions and suggestions in related fields are incorporated into the assessment procedure. The specific features that make this method unique are discussed below.

(a) Identifying needs :

Until now, in developing countries like India, disaster responses are based on a 'fly-in fly-out' approach within a strict



AIDMI believes that providing livelihood, food, water and shelter is essential to permanently empower the victim. This also reduces future vulnerabilities.



The process of need assessment is often intended to find out the ideal recipient for the standard relief that each agency has brought with them.

time frame. The process of need assessment is often intended to find the recipient for the standard relief that each agency has brought with them. The victims' needs are always secondary. Thus, in spite of bountiful relief, it is rarely compatible with demand. For example, during the response to the 2001 earthquake in Gujarat, the government distributed hundreds of metal sheets. However, it was unusual to find a single one being used for the roofs. Similarly, a large amount of clothes that landed in Bhuj were not in accordance with the traditions of the people they were intended for.

If agencies responsible for organising post-disaster relief operations are to make effective decisions about the procurement and deployment of resources, it is essential that they are properly informed. The Community Damage Assessment and Demand Analysis can provide appropriate and timely information about the extent of the damage, what resources are available, and what must be done. It should be noted that a single assessment of the disaster situation cannot be conclusive. Various assessments in different phases are required to respond to the emerging needs of the survivors.

(b) Flexibility :

The design and execution of assessments are very different for sudden, unexpected disasters than for slow, expected ones. In the initial aftermath of a sudden disaster, there are typically many different needs from many locations. This involves supporting local rescue efforts, recovering lifeline services and managing capacities. During the initial days after the onset of an emergency, needs change hourly, requiring constant repositioning of priorities and often resulting in frustration and confusion. In fact, some activities need to be done so quickly that action has to precede a detailed assessment. Strategies planned on the basis of lessons learned from the response to previous emergencies may have to be used.

For emergencies where the onset is longer, as in the case of displacement and famine, donors may be unwilling to commit large amounts of assistance if information is ambiguous. These prolonged emergencies may last for months and often years. The initial priority needs that should be assessed might include immunisation (against epidemics), emergency water supply, food, nutrition, logistics and registration systems. This assessment method is flexible to changes in requirements, maintaining the genuineness of data, and information collected.

(c) Cohesion :

It is a challenge to find timely, clear, reliable and need-based information from a single source. Sharing and shouldering assessment responsibility could be the possible solution to this problem. As part of the disaster preparedness plan, it should be formally agreed that in times of emergencies, joint assessment will be conducted with grass roots level Non-Governmental Organisations (NGOs), Community Based Organisations (CBOs), *Panchayati Raj* Institutions (PRIs), Self Help Groups (SHGs) and local government officials. This can reduce duplication of efforts, promote a degree of consensus about damage and needs, and ensure that subsequent appeals have local, state, national and, when external aid is required, international endorsement.



As part of the disaster preparedness plan, it should be formally agreed that in times of emergencies, joint assessment will be conducted with grass roots level NGOs, CBOs, PRIs, SHGs and local government officials.

This assessment method not only helps agencies to link the phases of relief, rehabilitation and reconstruction, but also to enhance co-ordination between different stakeholders.

To correctly reflect the realities on the ground, it is important to bring the assessment process and method to the local level. This can be accomplished in many ways. Having established a broad framework, the assessment must be tested in the field. If field- testing involves all the relevant stakeholders, the most effective method of implementing the assessments can be found.

The assessment method that AIDMI has formulated seeks to assist grass root level NGOs, CBOs, PRIs and SHGs. The primary objective of the process and method of the Community Damage Assessment and Demand Analysis, is better co-ordination and co-operation from within and from outside the humanitarian sector. For efficient implementation of the assessment methods, a firm foundation should exist.

2.3 ASSESSMENT PLANNING

Good assessment and reporting requires forethought. Therefore, the assessment and reporting system should incorporate preparedness planning. During emergencies, information is needed at all levels of administration but the nature of the information required will vary from one level to another. Some of the data required will always be available in the form of baseline data (maps, population statistic etc.), which must be accessed and used. This baseline data must also be supplemented by real time information, mostly in the form of incoming reports from various sources after the disaster.

In disaster prone areas, even under the best of circumstances, baseline data and information systems may not be perfect. Gathering sensible data and approximate information is a far more realistic information goal. In such a situation, it is highly recommended to implement the following assessment method. There is a clearly defined sequence in the process of collecting and managing this information.

In order to obtain the full representation of the community affected, it is essential that the assessment team is a composite representation of all the different communities and groups in the area.

2.4 RELIABLE INFORMATION BASE

The more disaster prone a district, state or country is, the less reliable the information base is likely to be. Sometimes in disaster situations, lack of data is less often a problem than a plethora of conflicting data. NGOs, local CBOs, PRIs and SHGs often know more about a particular area than government officers. Some procedure should be established, in agreement with a government counterpart, to crosscheck information with other organisations.

2.5 TEAM COMPOSITION

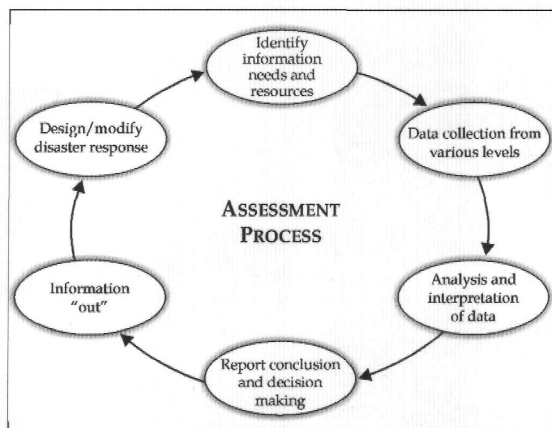
In order to obtain an accurate representation of the affected community, it is essential that the assessment team is a composite representation of all the different communities and groups in the area. An ideal team would include a representative from both the majority and minority communities, women as well as men, a teacher, a person from the Scheduled caste and tribes, a panchayat member or nagarpalika member, a small trader (or a marginal farmer in the rural context), an expert in the related field, and a government official.

2.6 THE ASSESSMENT PROCESS AND PRODUCT

Assessments must be carefully planned and managed. There must be a sequence of activities, each planned in detail. The following activities typically constitute the assessment process.

1. Identify information needs and resources
2. Data collection from various levels (information "in")
3. Analysis and interpretation of data (grading, discarding and prioritising)
4. Report conclusion and decision making
5. Information "out" (dissemination)
6. Design/modify disaster response (action)

Decisions are taken on the basis of the initial assessment report. After the initial



response, a clearer picture starts to emerge with increased awareness of ground realities. Simultaneously, the situation may improve or worsen rapidly and, accordingly, the needs of the victims will change. The new data and information made available can be analysed once again to facilitate a continuous and simultaneous thought on the appropriateness of the response strategy. Thus, the assessment method provides initial information and also serves as a monitoring mechanism for continuously appraising the relief strategy.

The product of the assessment procedure will be data forms that give a comprehensive picture of the extent of the damage and the needs of the victims.

Types of Assessment

There are two types of assessments,

1. Situation assessment or damage assessment, which describes what has happened, and
2. Need assessment and analysis, which clarifies the basic question of what needs to be done.

Many agencies specifically conduct damage assessments that include quantified estimates of physical damage resulting from disaster, while some use a mixture of damage and need assessment to create a holistic picture. The latter approach is recommended here to plan a comprehensive disaster response strategy. A good assessment method should essentially incorporate the needs of the victims.

Documentation of the damage and the assessment process is as important as the result of assessment. Audio-visual recording of the damages and the procedure enforces the authenticity of the data collected and analysed.



Some of the data required will be available in the form of baseline data (maps, population statistic etc.). This should be accessed and used.



Documentation of the damage and the assessment process is as important as the result of the assessment.

ASSESSMENT REPORTS

Disaster response planning and decision making requires a series of assessments and report writing to be conducted in phases. Here, four types of suggested assessment reports that should be carried out in four different phases, are included to facilitate the post-disaster assessment process. These are:

1. Flash report
2. Initial report
3. Interim report
4. Final report

A format of the most common needs in an Indian disaster management context is also included to assist relief workers both within and outside the country in decision-making.

3.1 FLASH REPORT

A flash report must be prepared and submitted very quickly. Its purpose is to simply confirm that the disaster has actually occurred and that steps are being taken to cope with it. It should also indicate the type of damage and the required external assistance. If possible, it should priorities the external assistance required. A flash report should be able to guide other teams on how to access the affected communities. It should specify when the next reports will be prepared and sent. Flash reports need not give precise information, be descriptive or too long. A suggested format for a flash report is in Annexure 1.

3.2 INITIAL REPORT

An Initial Report should follow the Flash Report as soon as possible. Its purpose is to report the severity of the disaster with more accurate information. More importantly, it should relate the



Flash reports need not give precise information, be descriptive or too long.

An initial assessment should establish the system for subsequent reports for planning future steps.



severity of the disaster to local coping capacities. An initial report should carry important information that can assist agencies or practitioners in making decisions about resource mobilisation and deployment of personnel to help affected victims. The report should therefore briefly summarise the following:

- The severity of the disaster (providing precise figures)
- Actions being taken locally
- Local coping capacities (including locally available resources)
- The immediate priorities for external relief, where it is required and in approximately what quantities
- Suggest the best logistical means of delivering relief, and
- Forecast possible future developments including new risks.

A suggested format for an Initial Report is in Annexure 2. The situation, its needs and priorities will change over time. An assessment only describes the state of affairs at that time, therefore an initial assessment should also establish the system for subsequent reports called interim reports for planning future steps.

3.3 INTERIM REPORT

An interim report should build on earlier reports and provide additional and more precise information. To begin with, interim reports should be submitted every 24 hours. After some time, the emphasis of interim reports will shift from relief needs to rehabilitation and reconstruction needs (e.g. repairs to damaged structures, restoration of agriculture, animal husbandry, fisheries and industrial production). In interim reports, it is not necessary to repeat what has been written in previous reports unless the earlier details require updating. Interim reports should provide forecasts (with inputs from specialists and people who have experience of previous disasters) and highlight information

which may not otherwise be obvious to the recipients. For example:

- Potential problems;
- Changes, patterns, trends and indicators;
- Particulars of especially vulnerable groups, and any other special concerns.

3.4 FINAL REPORT

The final report would present a summary of what happened, how the response was managed and what lessons have been learned. "The format of the final report should be consistent with that of earlier reports". The objective and duration of activities will differ from agency to agency. In preparing a report, the writer should ask "what do the recipients of this document need to know in order to meet their responsibilities and to make the right decision?"

All the reports should be concise. They should include all the necessary data but not be delayed because of insufficient information. If there is not as much information as hoped, it is adequate to explain the situation in broad terms and estimate the needs from what is known. More detailed information should be provided as soon as possible. The details provided in reports should be consistent so as not to cause confusion and it is desirable that reports from one level of administration to another are consolidated.

The final report presents a summary of what happened, how the response was managed and what lessons were learned.





Throughout the assessment, formats should be kept as simple as possible and essential checklists and guideline notes should be attached so that they can be easily understood by everyone.

ASSESSMENT PLANNING GUIDELINES

4.1 FORMAT OF REPORTS

In an emergency, decision makers will receive reports from many sources. It is essential that all the formats are standardised, so as to facilitate the process of analysis and collation. Likewise, there should be common understanding of the terminology used. Therefore, the recipients and the assessment team should design the formats together. This will ensure that the information is collected and presented in the most helpful way to both those who collect it and those who act upon it. Reports should be a balance of narrative and tables and, if possible, should be in a format that can be transmitted electronically.

Formats should be kept as simple as possible and essential checklists and guideline notes should be attached so that they can be easily understood by everyone. This will minimise mistakes and misinterpretation. To keep the formats simple, it is proposed that each issue, such as rescue, food, water etc., is tackled separately. This will make it easier for the recipients to delegate duties to the data collection team-members. Most of the issues encountered in a disaster scenario are listed below:

- Search and rescue
- Evacuation
- Protection
- Medical and Health
- Shelter and Clothing
- Food and Nutrition (including cooking utensils and cooking fuel)
- Water
- Sanitation
- Livelihood
- Lifeline systems (communications, power supplies, transport etc.)

To make the assessment method more authentic and scientific, the Red Cross Code of Conduct and Sphere Standards and Indicators are incorporated. A more detailed description of these two concepts are in chapters 5 and 6. The securities listed above have been separated to facilitate easy comparison against international standards and indicators for humanitarian response.

The individual or group responsible for completing each part should be clearly designated and continuous training should be conducted to improve the quality

4

It is not necessary to give the total population of the towns/villages in the affected area since these figures will already be known with sufficient accuracy from the population census.



of assessment. Agency personnel should be in regular contact with local NGOs, CBOs, SHGs and concerned government officials. Each part should indicate the needs of relief workers, supplies and relevant logistical requirements. Unless otherwise stated, the provider should assume that the relief provided is sufficient (e.g. food and accommodation for relief workers, transport and drivers, fuel, storage, maintenance etc.).

4.2 QUANTIFYING NEEDS

At some stage it will be necessary to quantify needs. For example X items are required for Y families in Z area. In this situation, it is important not to assume that everybody is a "helpless victim" requiring every sort of assistance. Helping people to help themselves is an important part of rehabilitation. Initial assessments should concentrate on the effects of the disaster and not attempt to rectify chronic needs. Examples of need quantification are listed below:

- X items (plastic sheeting or cooking sets) per family
- Shelter for x% of homeless people (on the assumption that some of the victims may have found their own shelter with neighbors or family members further afield)
- X grams of staple food per person for Y days
- X grams of staple food per child per day for Y days (for supplementary feeding)
- X litres of water per person for Y days
- X tons/litres of water to create reserves

A suggested format for quantifying needs is in Annexure 3.

4.3 TERMINOLOGY

Imprecise terminology, or different interpretations of it, can cause confusion. After a disaster, terminology related primarily to the classification of the victims and the damage to structures and/or services must be clearly defined. What is an "affected" person? What does "damaged" mean?. Such commonly used terms must have unambiguous meanings.

For example, damage can best be described in terms of usability

% Damaged	Meaning
100	Structure is unusable. Cannot be repaired.
>75	Major structural damage. Unsafe for use. Repairable within 1 month.
>50	Significant structural damage. Unsafe for use. Repairs will take more than 1 week.
>25	Some structural damage but safe for limited use. Repairable within 1 week.
<25	Minor structural damage. Usable.

4.4 INVENTORY CONTROL

The tracking of resources is crucial for an effective response. A frequently encountered problem during assessment is the belief that all property losses or survival needs must be replaced or furnished from outside the disaster-affected area. Though it might seem easier, a valuable opportunity to revitalise the victim, micro-macro linkages and the area is lost.

To overcome this, the assessment must identify the local response capacity, including CBOs, PRIs, local support system, local government capacity etc. The assessment must help to decide how best to use existing resources for relief. It must also identify the priorities of the affected people themselves. A data sheet that provides information on the needs that can be satisfied locally and that which require external support can be helpful when understanding the damage at micro and macro levels.

A table for unmet needs and those requiring external support is in Annexure 4.

Another related problem may occur if the assessment team is not from the disaster area. An outside team may have difficulty in distinguishing chronic existing needs from those created by the disaster. The knowledge of base line data is essential to identify the starting point to assess post- disaster damage and need.

A suggested format for an Inventory of Resources is in Annexure 5.

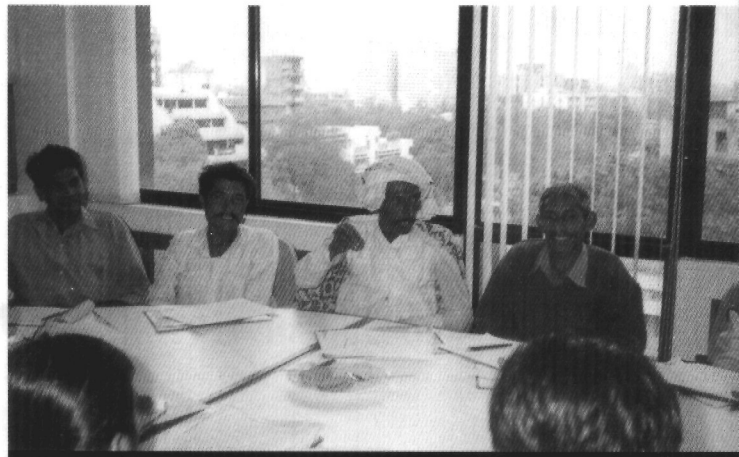
4.5 PRIORITIES

Experience has shown that there is a consistency of priorities for relief items after certain types of natural disasters in India. Each reviewer is requested to adapt and change priorities in accordance with their experiences. These are shown in Annexure 6.

An outside team may have difficulty in distinguishing chronic existing needs from those created by the disaster.

4.6 CAPACITY BUILDING AND TRAINING

Vulnerable communities face disaster in varying intensities throughout their lives. Different actors involved in the humanitarian sector conduct assessments in different ways, which present different results. In most cases the local communities or CBOs are the first to respond to a disaster. In spite of this, their assessment methods are not reviewed or systematised regularly. Therefore, no lessons are learnt by themselves or others. Their knowledge, even if primary, is unorganised and





Building the capacity of grass root communities, CBOs and PRIs is as important as building the capacity of field assessment teams.

their methods are unscientific. However, relief workers normally have to rely on this information when they conduct an assessment. In the event of a disaster, it is important to receive reliable information and genuine primary data. Building the capacity of grass root communities, CBOs and PRIs is as important as building the capacity of field assessment teams. Officials responsible for conducting assessments and acting upon them require regular training. The means of implementation

should include attention to resources for preparedness at the family and local levels. The community could be given the chance to rate the effectiveness of relief work of the agencies simultaneously. A proposed format of a community assessment form to be filled in by the assessment team in consultation with the affected community is in Annexure 7.

4.7 THE MEDIA

The media is an important factor in conveying the extent and severity of the damage caused by a disaster to the external world and more often than not, they are the first to reach the disaster-affected areas. Therefore, it becomes essential that the media are given a concise picture of the extent of the damage from the information collected by the assessment method. A summary of the data collected could be made available at the end of the assessment process that conveys all pertinent information. Two case studies, one depicting someone worst affected and another of a success story, could give the media a fair idea of the scale of the disaster and the rescue operation.

Interventions by NGOs are sometimes on the basis of the reports filed and the initial assessments made by the media. AIDMI has developed a media kit based on the Sphere Standards and Indicators that help the media to ask the right questions to disaster victims. A comparison of the present situation to that specified by Sphere Standards can give an accurate picture of the gaps in the relief work that need to be reduced urgently.

A tentative summary table has been included in Annexure 8 and a checklist for the media is in Annexure 9.

OPERATIONALISING THE SPHERE PROJECT IN DAMAGE ASSESSMENT

To make the Community Damage Assessment and Demand Analysis more scientific, authentic and sound, the Sphere Standards and Indicators along with the Red Cross Code of Conduct should be adhered to. The Community Damage Assessment and Demand Analysis provides an application of the Sphere Project and Red Cross Code of Conduct in an operational way. This chapter explains the Sphere Project in more detail.

The Sphere Project is a programme of the Steering Committee for Humanitarian Response (SCHR) and InterAction with VOICE and ICVA. The project was launched in 1997 to develop a set of universal minimum standards in core areas of humanitarian assistance. The aim of the project is to improve the quality of assistance provided to people affected by disasters, and to enhance the accountability of the humanitarian system in disaster response.

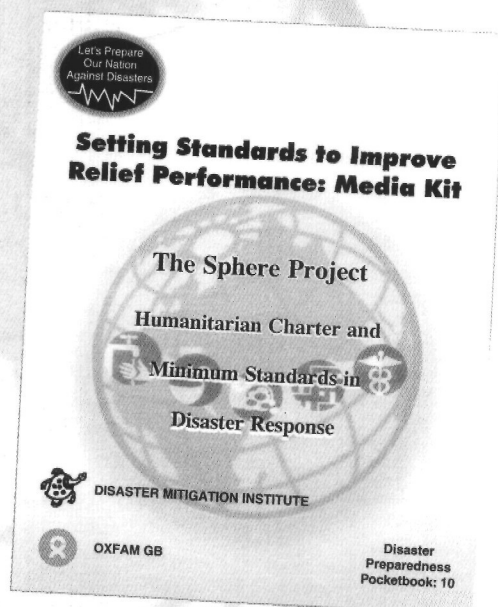
Sphere is based on two core beliefs. First, that all possible steps should be taken to alleviate human suffering arising out of calamity and conflict, and second, that those affected by disaster have a right to life with dignity and therefore a right to assistance.

The initiative was launched by a group of humanitarian NGOs and the Red Cross and Red Crescent movement, who framed a Humanitarian Charter and identified Minimum Standards to be attained in disaster assistance, in each of five key sectors (water supply and sanitation, nutrition, food aid, shelter and health services). Taken together, the Humanitarian Charter and the Minimum Standards contribute to an operational framework for accountability in disaster assistance efforts.

5.1 THE HUMANITARIAN CHARTER

The Humanitarian Charter describes the core principles that govern humanitarian action and reasserts the right of populations affected by disaster, whether natural or man-made (including armed conflict), to protection and assistance. It also reasserts the right of disaster-affected populations to life with dignity. The Charter points out the legal responsibilities of states and warring parties to guarantee the right to protection and assistance. When the relevant authorities are unable and/or unwilling to fulfil their responsibilities, they are obliged to allow humanitarian organizations to provide humanitarian assistance and protection.

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The Sphere Project is incorporated into the assessment method to make it more scientific and authentic.

The Humanitarian Charter affirms the fundamental importance of the following principles: the right to life with dignity, the distinction between combatants and non-combatants, and the principle of non-refoulement.

5.2 MINIMUM STANDARDS

The Minimum Standards are general statements that define the minimum level to be attained in a given context. The standards are based on the principle that populations affected by disaster have the right to life with dignity. They are qualitative in nature, and are meant to be universal and applicable in any operating environment.

5.3 KEY INDICATORS

The Key Indicators act as 'signals' that determine whether or not a standard has been attained. The indicators can be qualitative or quantitative in nature. They function as tools to measure the impact of processes used and programmes implemented. Without them, the standards would be little more than statements of good intent, difficult to put into practice.

5.4 GUIDANCE NOTES

The Guidance Notes provide additional information. The guidance notes relate to specific points that should be considered when applying the standards in different situations. They offer advice on priority issues and on tackling practical difficulties, and may also describe dilemmas, controversies or gaps in current knowledge.

5.5 ASSESSMENT CHECKLISTS

The Sphere Project has also provided assessment checklists that agencies can refer to during a disaster situation to ensure that their assessments do not overlook important information. The Sphere Assessment Checklist provides a ready to use set of frequently asked questions that have been used by many humanitarian agencies in the past. They are provided to ensure comprehensive coverage of issues and information pertaining to all sector securities, which are:

1. Water and Sanitation
2. Food Security and Food Aid
3. Shelter and Site Planning
4. Health Services

1. Water and Sanitation Initial Needs Assessment Checklist

This list of questions is primarily for use to assess needs, identify indigenous resources and describe local conditions. It does not include questions to determine external resources needed in addition to those immediately and locally available.



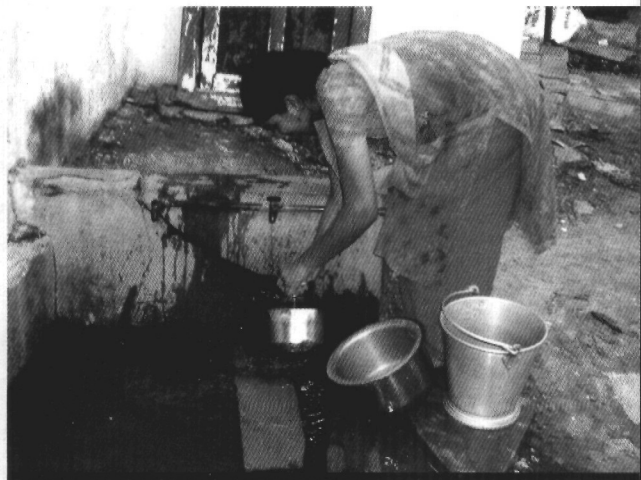
General

- How many people are affected and where are they? Disaggregate the data as far as possible by sex, age, disability etc.
- What are people's likely movements? What are the security factors for the people affected and for potential relief responses?
- What are the current or threatened water- and sanitation-related diseases? What are the extent and expected evolution of problems?
- Who are the key people to consult or contact?
- Who are the vulnerable people in the population and why?
- Is there equal access for all to existing facilities?
- What special security risks exist for women and girls?
- What water and sanitation practices were the population accustomed to before the emergency?

Water supply

- What is the current water source and who are the present users?
- How much water is available per person per day?
- What is the daily/weekly frequency of the water supply?
- Is the water available at the source sufficient for short-term and longer-term needs for all groups in the population?
- Are water collection points close enough to where people live? Are they safe?
- Is the current water supply reliable? How long will it last?
- Do people have enough water containers of the appropriate size and type?
- Is the water source contaminated or at risk of contamination (microbiological or chemical/radiological)?
- Is treatment necessary? Is treatment possible? What treatment is necessary?
- Is disinfection necessary, even if the supply is not contaminated?
- Are there alternative sources nearby?
- What traditional beliefs and practices relate to the collection, storage and use of water?

Ensuring adequate water and sanitation is of prime importance throughout a disaster.



- Are there any obstacles to using available supplies?
- Is it possible to move the population if water sources are inadequate?
- Is it possible to tanker water if water sources are inadequate?
- What are the key hygiene issues related to water supply?
- Do people have the means to use water hygienically?

Excreta disposal

- What is the current defecation practice? If it is open defecation, is there a designated area? Is the area secure?
- What are current beliefs and practices, including gender-specific practices, concerning excreta disposal?
- Are there any existing facilities? If so, are they used, are they sufficient and are they operating successfully? Can they be extended or adapted?
- Is the current defecation practice a threat to water supplies (surface or ground water) or living areas?
- Do people wash their hands after defecation and before food preparation and eating? Are soap or other cleansing materials available?
- Are people familiar with the construction and use of toilets?
- What local materials are available for constructing toilets?
- Are people prepared to use pit latrines, defecation fields, trenches, etc.?
- Is there sufficient space for defecation fields, pit latrines, toilets, etc.?
- What is the slope of the terrain?

If water sources are inadequate, is it possible to tanker water?

- What is the level of the groundwater table?
- Are soil conditions suitable for on-site excreta disposal?
- Do current excreta disposal arrangements encourage vectors?
- Are there materials or water available for anal cleansing? How do people normally dispose of these materials?
- How do women manage issues related to menstruation? Are there appropriate materials or facilities available for this?



Vector-borne disease

- What are the vector-borne disease risks and how serious are these risks?
- What traditional beliefs and practices relate to vectors and vector-borne disease? Are any of these either useful or harmful?
- If vector-borne disease risks are high, do people at risk have access to individual protection?
- Is it possible to make changes to the local environment (by drainage, scrub clearance, excreta disposal, refuse disposal, etc.) to discourage vector breeding?
- Is it necessary to control vectors by chemical means? What programmes, regulations and resources exist for vector control and the use of chemicals?
- What information and safety precautions need to be provided to households?

Solid waste disposal

- Is solid waste a problem?
- How do people dispose of their waste? What type and quantity of solid waste is produced?
- Can solid waste be disposed of on-site, or does it need to be collected and disposed of off-site?
- What is the normal practice of solid waste disposal for the affected population? (compost/refuse pits? collection system? bins?)
- Are there medical facilities and activities producing waste? How is this being disposed of? Who is responsible?

Drainage

- Is there a drainage problem (e.g. flooding of dwellings or toilets, vector breeding sites, polluted water contaminating living areas or water supplies)?
- Is the soil prone to waterlogging?
- Do people have the means to protect their dwellings and toilets from local flooding?

2. Food Security and Food Aid Assessment Checklist

Food security assessments often broadly categorise the affected population into livelihood groupings, according to their sources of, and strategies for obtaining, income or food. This may also include a breakdown of the population according to wealth groups or strata. It is important to compare the prevailing situation with the history of food security pre-disaster.





The food security and food aid assessment checklist must be adapted to suit the local context and the objectives of the assessment.

possibly in relation to other relevant sectors (nutrition, health, water and shelter). The checklist must be adapted to suit the local context and the objectives of the assessment.

So-called 'average years' may be considered as a baseline. The specific roles and vulnerabilities of women and men, and the implications for household food security should be considered. Consideration of intrahousehold food security differences may also be important. This checklist covers the broad areas that are usually considered in a food security assessment. Additional information must also be collected on the wider context of the disaster (e.g. its political context, population numbers and movements, etc.) and

Food security of livelihood groups

- Are there groups in the community who share the same livelihood strategies? How can these be categorised according to their main sources of food or income?

Food security pre-disaster (baseline)

- How did the different livelihood groups acquire food or income before the disaster? For an average year in the recent past, what were their sources of food and income?
- How did these different sources of food and income vary between seasons in a normal year? (Constructing a seasonal calendar may be useful.)
- Looking back over the past 5 or 10 years, how has food security varied from year to year? (Constructing a timeline or history of good and bad years may be useful.)
- What kind of assets, savings or other reserves are owned by the different livelihood groups (e.g. food stocks, cash savings, livestock holdings, investments, credit, unclaimed debt, etc.)?
- Over a period of a week or a month, what do household expenditures include, and what proportion is spent on each item?
- Who is responsible for management of cash in the household, and on what is cash spent?
- How accessible is the nearest market for obtaining basic goods? (Consider distance, security, ease of mobility, availability of market information, etc.)

- What is the availability and price of essential goods, including food?
- Prior to the disaster, what were the average terms of trade between essential sources of income and food, e.g. wages to food, livestock to food, etc.?

Food security during disaster

- How has the disaster affected the different sources of food and income for each of the livelihood groups identified?
- How has it affected the usual seasonal patterns of food security for the different groups?
- How has it affected access to markets, market availability and prices of essential goods?
- For different livelihood groups, what are the different coping strategies and what proportion of people are engaged in them?
- How has this changed as compared with the pre-disaster situation?
- Which group or population is most affected?
- What are the short- and medium-term effects of coping strategies on people's financial and other assets?
- For all livelihood groups, and all vulnerable groups, what are the effects of coping strategies on their health, general well-being and dignity? Are there risks associated with coping strategies?

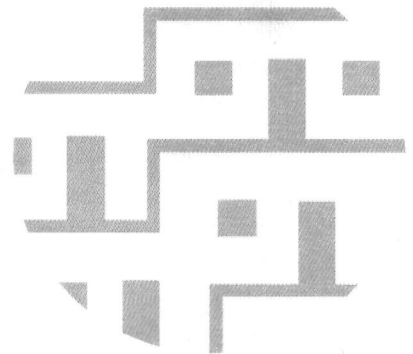
3. Shelter and Site Planning Assessment Checklist

This list of questions serves as a guide and checklist to ensure that appropriate information is obtained that should influence post-disaster shelter response. The list of questions is not mandatory, and should be used and adapted as appropriate. It is assumed that information on the underlying causes of the disaster, the security situation, the basic demographics of the displaced and any host population and the key people to consult and contact, is separately obtained.

(a) Shelter and Settlement

Demographics

- How many people comprise a typical household?
- Does the affected community comprise groups of individuals who do not form typical households, such as unaccompanied children, or particular minority groups with household sizes that are not typical?
- How many households are without any or with inadequate shelter and where are they?

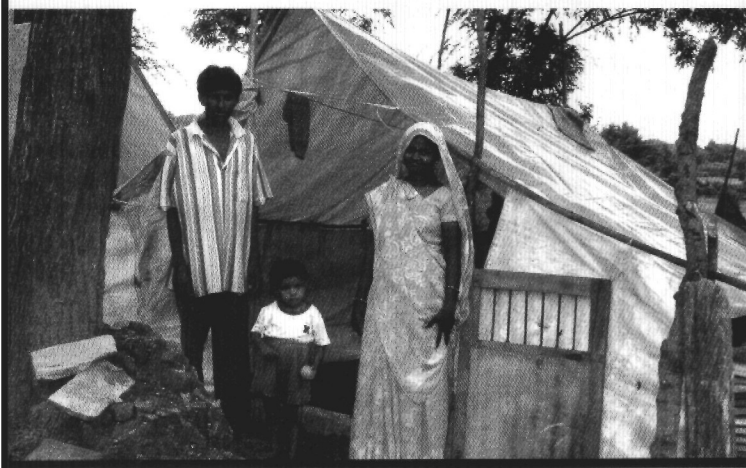


What are the potential risks to the lives, health and security of the affected population through the need for shelter?

- How many people who are not members of individual households are without any or with inadequate shelter and where are they?

Risks

- What is the immediate risk to life of the lack of shelter and inadequate shelter, and how many people are at risk?
- What are the potential risks to the lives, health and security of the affected population through the need for shelter?



- What are the potential risks to and impact on any host populations due to the presence of displaced households?
- What are the potential further risks to lives, health and security of the affected population as a result of the ongoing effects of the disaster on the provision of shelter?
- Who are the vulnerable people in the population, also considering those affected by HIV/AIDS?
- What are the particular risks for the vulnerable people and why?

Household activities

- What household and livelihood support activities typically take place in the shelters of the affected population, and how does the resulting space provision and design reflect these activities?
- What household and livelihood support activities typically take place in the external areas around the shelters of the affected population, and how does the resulting space provision and design reflect these activities?

Materials and design

- What initial shelter solutions or materials have been provided to date by the affected households or other actors?
- What existing materials can be salvaged from the damaged site (if applicable) for use in the reconstruction of shelters?
- What are the typical building practices of the displaced and host populations, and what are the different materials that are used to provide the structural frame and roof and external wall enclosures?

- What alternative design or materials solutions are potentially available and familiar or acceptable to the affected population?
- How can the potential shelter solutions identified accommodate appropriate single and multiple disaster prevention and mitigation concerns?
- How are shelters typically built and by whom?
- How are construction materials typically obtained and by whom?
- How can women, youths and older people be trained or assisted to participate in the building of their own shelters, and what are the constraints?

Local resources and constraints

- What are the current material, financial and human resources of the affected households and the community, and the constraints to meeting some or all of their urgent shelter needs?
- What are the opportunities and constraints of current patterns of land ownership, land usage and the availability of vacant land, in helping to meet urgent shelter needs?
- What are the opportunities and constraints of the host population in accommodating displaced households within their own dwellings or on adjacent land?
- What are the opportunities and constraints of utilising existing, available and unaffected buildings or structures to temporarily accommodate displaced households?
- What is the topographical and environmental suitability of using accessible vacant land to accommodate temporary settlements?
- What are the requirements and constraints of local authority regulations in developing shelter solutions?

How are shelters typically built and by whom?

Essential services and facilities

- What is the current availability of water for drinking and personal hygiene, and what are the possibilities and constraints in meeting the anticipated sanitation needs?
- What is the current provision of social facilities (health clinics, schools, places of worship, etc.) and what are the constraints and opportunities of accessing these facilities?



Host community and environmental impact

- What are the issues of concern for the host community?
- What are the organisational and planning issues of accommodating the displaced households within the host community or within temporary settlements?
- What are the environmental concerns in providing the necessary shelter assistance (construction materials and access) and in supporting the displaced households (fuel, sanitation, waste disposal, grazing for animals if appropriate)?
- What opportunities are present for building local shelter and settlement provision and management capacities?
- What livelihood support opportunities can be provided through the sourcing of materials and the construction of shelter and settlement solutions?

(b) Non-Food Items: Clothing, Bedding and Household Items Clothing and bedding

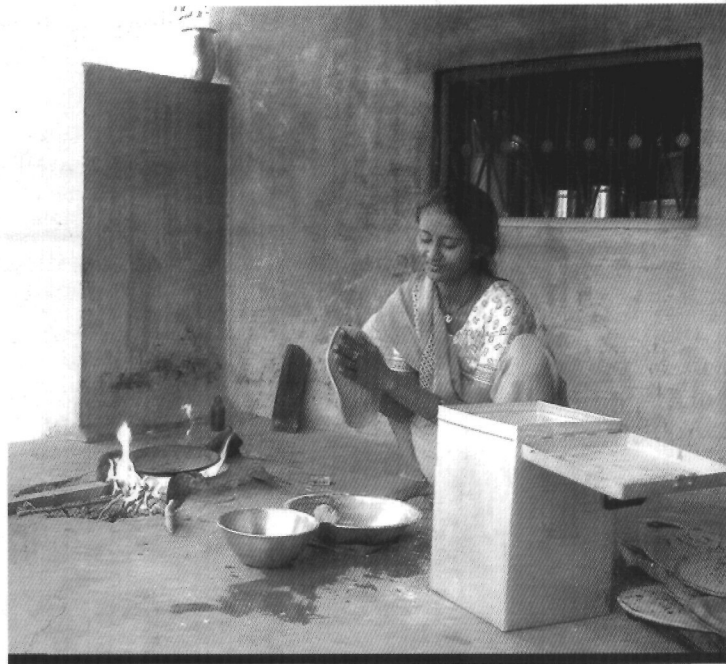
- What is the customary provision of clothing, blankets and bedding for women, men, children and infants, pregnant and lactating women and older people, and what are the particular social and cultural considerations?
- How many women and men of all ages, children and infants have inadequate or insufficient clothing, blankets or bedding to provide protection from the adverse effects of the climate and to maintain their health, dignity and well-being, and why?
- What is the immediate risk to life of the lack of adequate clothing, blankets or bedding, and how many people are at risk?
- What are the potential risks to the lives, health and personal safety of the affected population through the need for adequate clothing, blankets or bedding?
- Which social groups are most at risk, and why? How can these groups be best supported to empower themselves?

Personal hygiene

- What essential items to address personal hygiene issues did a typical household have access to before the disaster?
- What essential items do affected households no longer have access to?
- What are the particular needs of women, girls, children and infants?
- What additional items are considered socially or culturally important to maintain the health and dignity of the affected people?

Cooking and eating, stoves and fuel

- What cooking and eating utensils did a typical household have access to before the disaster?
- How many households do not have access to sufficient cooking and eating utensils, and why?
- What form of stove for cooking and heating did a typical household have access to, where did the cooking take place in relation to the existing shelter and the surrounding area, and what fuel was typically used?
- How many households do not have access to a stove for cooking and heating, and why?
- How many households do not have access to adequate supplies of fuel for cooking and heating, and why?
- What are the opportunities and constraints, in particular the environmental concerns, of sourcing adequate supplies of fuel for the displaced households and the host community as appropriate?
- What is the impact on the women in the displaced community of sourcing adequate supplies of fuel?
- What cultural and customary use and safe practice considerations should be taken into account?



What cooking and eating utensils did a typical household have access to before the disaster?

Tools and equipment

- What basic tools to construct, maintain or repair a shelter do the households have access to?
- What livelihood support activities can also utilise the basic tools for shelter construction, maintenance and repair?
- Does the climate or natural environment require a ground covering to maintain appropriate standards of health and dignity, and what appropriate material solutions can be provided?
- What vector control measures, particularly the provision of mosquito nets, are required to ensure the health and well-being of households?



4. Health Services Assessment Checklist Preparation

- Obtain available information on the disaster-affected population and resources from host country and international sources.
- Obtain available maps and aerial photographs.
- Obtain demographic and health data from host country and international sources.

Security and access

- Determine the existence of ongoing natural or human-generated hazards.
- Determine the overall security situation, including the presence of armed forces or militias.
- Determine the access that humanitarian agencies have to the affected population.

Demographics and social structure

- Determine the total disaster-affected population and proportion of children under five years old.
- Determine age and sex breakdown of the population.
- Identify groups at increased risk, e.g. women, children, older people, disabled people, people living with HIV/AIDS, members of certain ethnic or social groups.
- Determine the average household size and estimates of female- and child-headed households.
- Determine the existing social structure, including positions of authority/influence and the role of women.

Background health information

- Identify pre-existing health problems and priorities in the disaster affected area prior to the disaster. Ascertain local disease epidemiology.
- Identify pre-existing health problems and priorities in the country of origin if refugees are involved. Ascertain disease epidemiology in the country of origin.
- Identify existing risks to health, e.g. potential epidemic diseases.
- Identify previous sources of health care.
- Determine the strengths and coverage of local public health programmes in refugees' country of origin.

Mortality rates

- Calculate the crude mortality rate (CMR).
- Calculate the under-5 mortality rate (U5MR: age-specific mortality rate for children under 5 years of age).

- Calculate cause-specific mortality rates.

Morbidity rates

- Determine incidence rates of major diseases that have public health importance.
- Determine age- and sex-specific incidence rates of major diseases where possible.

Available resources

- Determine the capacity of and the response by the Ministry of Health of the country or countries affected by the disaster.
- Determine the status of national health facilities, including total number, classification and levels of care provided, physical status, functional status and access.
- Determine the numbers and skills of available health staff.
- Determine the capacity and functional status of existing public health programmes, e.g. Expanded Programme on Immunisation (EPI), maternal and child health services.
- Determine the availability of standardised protocols, essential drugs, supplies and equipment.
- Determine the status of existing referral systems.
- Determine the status of the existing health information system (HIS).
- Determine the capacity of existing logistics systems, especially as they relate to procurement, distribution and storage of essential drugs, vaccines and medical supplies.

Consider data from other relevant sectors

- Nutritional status
- Environmental conditions
- Food and food security.



During a disaster period, it is important to determine the numbers and skills of available health staff.



Whatever a damage assessment professional's personal opinions are, she/he must be guided by the Red Cross Code of Conduct in all humanitarian relief situations.

APPLYING THE RED CROSS CODE OF CONDUCT DURING DAMAGE ASSESSMENT

The Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organisations in Disaster Relief

The Red Cross Code of Conduct could be effectively used to overcome individuals' thoughts, beliefs and judgemental attitude that may affect the quality or authenticity of assessments. Whatever a damage assessment professional's personal opinions are, she/he must be guided by this Code of Conduct in all humanitarian relief situations. Whilst conducting the Community Damage Assessment and Demand Analysis, this Code must be followed to provide just and appropriate information and relief.

Principles of Conduct for The International Red Cross and Red Crescent Movement and NGOs in Disaster Response Programmes

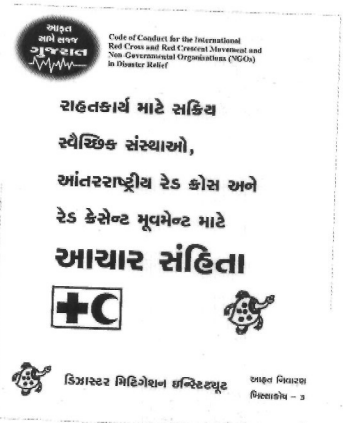
1. The humanitarian imperative comes first

The right to receive humanitarian assistance, and to offer it, is a fundamental humanitarian principle which should be enjoyed by all citizens of all countries. As members of the international community, we recognise our obligation to provide humanitarian assistance wherever it is needed. Hence the need for unimpeded access to affected populations is of fundamental importance in exercising that responsibility. The prime motivation of our response to disaster is to alleviate human suffering amongst those least able to withstand the stress caused by disaster. When we give humanitarian aid it is not a partisan or political act and should not be viewed as such.

2. Aid is given regardless of the race, creed or nationality of the recipients and without adverse distinction of any kind. Aid priorities are calculated on the basis of need alone

Wherever possible, we will base the provision of relief aid upon a thorough assessment of the needs of the disaster victims and the local capacities already in place to meet those needs. Within the entirety of our programmes, we will reflect considerations of proportionality. Human suffering must be alleviated whenever it is found; life is as precious in one part of a country as another. Thus, our provision of aid will reflect the degree of suffering it seeks to alleviate. In implementing this approach, we recognise the crucial role played by women in disaster-prone communities and will ensure that this role is supported, not diminished, by our aid programmes. The implementation of such a universal, impartial and independent

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The Red Cross Code of Conduct must be followed to provide just and appropriate information and relief.

policy, can only be effective if we and our partners have access to the necessary resources to provide for such equitable relief, and have equal access to all disaster victims.

3. Aid will not be used to further a particular political or religious standpoint

Humanitarian aid will be given according to the need of individuals, families and communities. Notwithstanding the right of Non-Governmental Humanitarian Agencies (NGHAs) to espouse particular political or religious opinions, we affirm that assistance will not be dependent on the adherence of the recipients to those opinions. We will not tie the promise, delivery or distribution of assistance to the embracing or acceptance of a particular political or religious creed.

4. We shall endeavour not to act as instruments of government foreign policy


NGHAs are agencies which act independently from governments. We therefore formulate our own policies and implementation strategies and do not seek to implement the policy of any government, except in so far as it coincides with our own independent policy. We will never knowingly - or through negligence - allow ourselves, or our employees, to be used to gather information of a political, military or economically sensitive nature for governments or other bodies that may serve purposes other than those which are strictly humanitarian, nor will we act as instruments of foreign policy of donor governments. We will use the assistance we receive to respond to needs and this assistance shouldn't be driven by the need to dispose of donor commodity surpluses, nor by the political interest of any particular donor. We value and promote the voluntary giving of labour and finances by concerned individuals to support our work and recognise the independence of action promoted by such voluntary motivation. In order to protect our independence we will seek to avoid dependence upon a single funding source.

5. We shall respect culture and custom

We will endeavour to respect the culture, structures and customs of the communities and countries we are working in.

6. We shall attempt to build disaster response on local capacities

All people and communities - even in disaster - possess capacities as well as vulnerabilities. Where possible, we will



Humanitarian aid will be given according to the need of individuals, families and communities.

strengthen these capacities by employing local staff, purchasing local materials and trading with local companies. Where possible, we will work through local NGHAs as partners in planning and implementation, and cooperate with local government structures where appropriate. We will place a high priority on the proper co-ordination of our emergency responses. This is best done within the countries concerned by those most directly involved in the relief operations, and should include representatives of the relevant UN bodies.

7. Ways shall be found to involve programme beneficiaries in the management of relief aid

Disaster response assistance should never be imposed upon the beneficiaries. Effective relief and lasting rehabilitation can best be achieved where the intended beneficiaries are involved in the design, management and implementation of the assistance programme. We will strive to achieve full community participation in our relief and rehabilitation programmes.

8. Relief aid must strive to reduce future vulnerabilities to disaster as well as meeting basic needs

All relief actions affect the prospects for long-term development, either in a positive or a negative fashion. Recognising this, we will strive to implement relief programmes which actively reduce the beneficiaries' vulnerability to future disasters and help create sustainable lifestyles. We will pay particular attention to environmental concerns in the design and management of relief programmes. We will also endeavour to minimise the negative impact of humanitarian assistance, seeking to avoid long-term beneficiary dependence upon external aid.

9. We hold ourselves accountable to both those we seek to assist and those from whom we accept resources

We often act as an institutional link in the partnership between those who wish to assist and those who need assistance during disasters. We therefore hold ourselves accountable to both constituencies. All our dealings with donors and beneficiaries shall reflect an attitude of openness and transparency. We recognise the need to report on our activities, both from a financial perspective and the perspective of effectiveness. We recognise the obligation to ensure appropriate

Relief aid must strive to reduce future vulnerabilities to disaster as well as meeting basic needs.



monitoring of aid distributions and to carry out regular assessments of the impact of disaster assistance. We will also seek to report, in an open fashion, upon the impact of our work, and the factors limiting or enhancing that impact. Our programmes will be based upon high standards of professionalism and expertise in order to minimise the wasting of valuable resources.

10. In our information, publicity and advertising activities, we shall recognise disaster victims as dignified humans, not hopeless objects

Respect for the disaster victim as an equal partner in action should never be lost. In our public information we shall portray an objective image of the disaster situation where the capacities and aspirations of disaster victims are highlighted, and not just their vulnerabilities and fears. While we will cooperate with the media in order to enhance public response, we will not allow external or internal demands for publicity to take precedence over the principle of maximising overall relief assistance. We will avoid competing with other disaster response agencies for media coverage in situations where such coverage may be to the detriment of the service provided to the beneficiaries or to the security of our staff or the beneficiaries.

Respect for the disaster victim as an equal partner in action should never be lost.



CONCLUSION

Any post-disaster damage assessment and need analysis must provide a clear, concise picture of the post-disaster situation, identify relief needs and develop strategies for recovery. The needs and capacities of the victims to help themselves must not be overlooked and livelihood securities of the victims must be considered. This is why this assessment method is community-led. It aims to provide a more authentic report that has roots into the reality on the ground.

The Community Damage Assessment and Demand Analysis is a multi-disciplinary, multi-sectoral, multi-level, multi-cultural and multi-method process. It is kept to a simple series of activities to be undertaken in phases, placing considerable emphasis on victim communities, local CBOs and government authorities. This assessment method is also flexible, realising the uniqueness of every disaster, so that it can be applied in all situations. The assessment not only helps agencies to link the phases of relief, rehabilitation and construction, but also to enhance co-ordination between different stakeholders.

Community Demand Assessment and Demand Analysis can provide appropriate and timely information about the extent of the damage, what resources are available, and what must be done, which can be understood by everyone involved. Local NGOs and CBOs do not have assessment methods for post-disaster situations and so lessons are not learned from one disaster to the next. Large NGOs and governmental organisations do have disaster assessment methods, but these are often complicated and technical, and so cannot be used when working alongside local NGOs and CBOs. This Community Damage Assessment and Demand Analysis is kept simple to ensure that it can be used by all relief workers in any disaster. Therefore, efforts can be co-ordinated in an organised, quick and effective manner. Documenting all disaster situations and responses means that lessons can be learned from past disaster situations, and therefore in the future, relief, rehabilitation and reconstruction can occur in the most appropriate, effective and timely way.

Through the four different types of reports that this assessment consists of, an up-to-date, accurate and detailed account is always available. Relief

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This assessment method is community-led to provide a more authentic report that has roots into the reality on the ground.



workers are therefore always fully informed about the current situation, the activities that are being undertaken, and the gaps in the relief work. The reports can also be used by the media to inform the public about the present situation.

To ensure that basic humanitarian standards are always met, even in the most devastating disaster, the Community Damage Assessment and Demand Analysis incorporates the Sphere Standards and Indicators as well as the Red Cross Code of Conduct. This makes the assessment method more accurate and scientific.

This assessment not only helps agencies to link the phases of relief, rehabilitation and construction, but also to enhance co-ordination between different stakeholders.

Relief workers in this field are requested to review, adapt, test and modify this process and method so as to formulate a fully effective and comprehensive assessment method that can be used by all in any disaster situation.



ANNEXURES

1. SUGGESTED FORMAT FOR A FLASH REPORT
2. SUGGESTED FORMAT FOR AN INITIAL REPORT
3. SUGGESTED FORMAT FOR QUANTIFYING NEEDS
4. HOW TO IDENTIFY UNMET NEEDS AND REQUIRED INTERVENTION?
5. INVENTORY OF RESOURCES (PERSONNEL, MATERIALS, FINANCIAL)
6. MOST COMMON NEEDS IN INDIAN DISASTER MANAGEMENT CONTEXT
7. COMMUNITIES' RESPONSE ON HUMANITARIAN AGENCIES PERFORMANCE
8. SUMMARY TABLE FOR MEDIA
9. MEDIA CHECK LIST



The Community Damage Assessment and Demand Analysis tools may be used by relief practitioners, the media, and affected community members themselves.

SUGGESTED FORMAT FOR A FLASH REPORT

Part 1 Situation		Specific Information	
1.1	Type of disaster		
1.2	Date and time		
1.3	Affected area		
1.4	Possibility of after effects		
Part 2 Initial Estimate of Effects		Very Approximate Numbers	Source of Information
2.1	Dead		
2.2	Injured		
2.3	Missing		
2.4	In need of food		
2.5	In need of water		
2.6	In need of shelter and clothing		
2.7	Damage to lifeline systems		
2.8	Damage to livelihood activities		
2.9	In need of sanitation		
Part 3 Possible Needs for External Assistance		Circle	Priorities
3.1	Search and rescue	Yes/No	
3.2	Evacuation	Yes/No	
3.3	Protection	Yes/No	
3.4	Medical and health	Yes/No	
3.5	Shelter and clothing	Yes/No	
3.6	Food	Yes/No	
3.7	Water	Yes/No	
3.8	Sanitation	Yes/No	
3.9	Repair of lifeline system	Yes/No	
Part 4 Transportation means		Specify	
4.1	What types of vehicles are available		
4.2	Which routes should be followed		
Part 5 Next Report		Specify	
5.1	Date/time		
5.2	Will be Sent at		
	1. Preparation date/time		
	2. Prepared by		

Note: A Flash Report should be prepared and submitted immediately (within 1 – 3 hours) after a hazard strikes.

SUGGESTED FORMAT FOR AN INITIAL REPORT

1. The affect

No.	Particulars	Please Specify
1.1	Type of disaster	
1.2	Date and time	
1.3	Affected area (approx)	
1.4	Number of dead (approx)	
1.5	Next report will be sent at (date/time)	

2. Search and Rescue

No.	Location (district, town, village)	Total No. of People Missing (approx)	Response Status (local S & R resources deployed)	Required Additional S&R Resources (S&R teams, ambulances, special expertise, heavy equipment etc.)	Priority
2.1					
2.2					
2.3					
Total					

3. Evaluation

No.	Location (District, town, village)	Total No. of people to be evacuated (Approx)	Response Status (No. of people being evacuated under local arrangements)	Required Additional Evacuation Assistance	Priority
3.1					
3.2					
3.3					
Total					

4. Protection (if applicable)

No.	Location (district, town, village)	Total No. of people needing protection	Response status (No. of people being protected under local arrangements)	Required additional resources for protection	Priority
4.1					
4.2					
4.3					
Total					

5. Medical and Health

No.	Location (district, town, village)	Total No. of injured people (approx)	Response status (condition of medical facilities, hospital wards, casualty, equipment)	Required medical resources from external sources (ambulances, special expertise, equipment etc.)	Priority
5.1					
5.2					
5.3					
Total					

6. Shelter and Clothing

No.	Location (district, town, village)	Total No. of people requiring shelter or clothing (approx)	Response Status (number of people being provided with shelter or clothing under local arrangements)	Required additional assistance (specify type of assistance required e.g. tents, plastic sheeting, blankets, clothing)	Priority
6.1					
6.2					
6.3					
Total					

7. Food

No.	Location (district, town, village)	Total No. of people requiring food (approx)	Response status (number of people being protected with food under local arrangements)	Required additional resources for meeting food requirements (food grains, cooking fuel and equipment etc.)	Priority
7.1					
7.2					
7.3					
Total					

8. Water

No.	Location (district, town, village)	Total No. of people without adequate clean usable/ drinking water (approx)	Response status (number of people supplied with safe usable/drinking water under local arrangements; condition of water supply system; availability of surface water required)	Required additional resources of sufficient, safe usable/drinking water (ask if treatment supplies, containers or trucks are needed)	Priority
8.1					
8.2					
8.3					
Total					

9. Sanitation

No.	Location (district, town, village)	Total No. of people without adequate sanitation (approx)	Response status (number of people being provided with adequate sanitation under local arrangements)	Required additional resources for sanitation facilities (ask if latrines, soap, detergents, chlorine powder, insecticides, sprayers etc. required)	Priority
9.1					
9.2					
9.3					
Total					

10. Lifeline Systems

No.	Location (district, town or village, or place to place)	Response Status				Required external support (list supplies and equipments requested from external sources)	Priority
		Roads and Bridges	Railways	Power Supplies	Communi- cation Systems		
10.1							
10.2							
10.3							
Total							

HOW TO IDENTIFY UNMET NEEDS AND REQUIRED INTERVENTION?

Area/village/district/place:

Date/time:

Prepared by:

No.	Sectors/ needs	Work being done by								
		Local comm's	NGO	Local Govt.	Local CBO	PRI	Civil defence	INGO	Local SHG	Religious group
1.	Search and rescue									
2.	Health and hygiene									
3.	Food and nutrition									
4.	Water and sanitation									
5.	Shelter									
6.	Livelihood									
7.	Household items and clothing									
8.	Information and capacity Building									

Note: Based on consultations with the community, the boxes that remain blank indicate that no one has started working in that particular area. Outside intervention is needed in these areas.

MOST COMMON NEEDS IN INDIAN DISASTER MANAGEMENT CONTEXT

No.	Sectors/ securities	Sudden onset disasters			Long term continuing emergencies		
		Earthquake	Cyclone	Flood	Drought	Conflict	Displaced people
A. Food and Nutrition							
1.	Ration distribution	○	○	□	○	○	○
2.	Agricultural production	—	○	○	○	□	○
3.	Long term provision for food	□◆	—	○■	○	○	○
4.	Nutrition Surveillance	—	□	□	○	○	○
5.	Special feeding	—	—	□	○	□	□
B. Water and Sanitation							
1.	Distribution, supply and storage	○	□	○	○	□	○
2.	Water structure implementation	○	□	□	○	□	○
3.	Vector control	□	—	○	—	○	○
4.	Excreta disposal	○	—	□◆	—	○	○
C. Shelter							
1.	Temporary	○	○	○	—	○	○
2.	Semi-permanent	○	○	○	—	□	○
3.	Permanent	○	□	□	—	□	○
4.	Technical support	○	□	□	—	□	□
5.	Material distribution	○	○	□	—	□	□
D. Livelihood							
1.	Working capital	○	○	○	○■	○	○
2.	Material support	○	○	○	○■	○	○
3.	Work place	○	○	□	—	○◆	○
4.	Technical support	□	□	□	□■	—	○
5.	Market linkages	□	□	□	□■	□	○

SUMMARY TABLE FOR MEDIA

1. The effect

No.	Particulars	Please Specify
1.1	Type of disaster	
1.2	Date and time	
1.3	Affected area (approx)	
1.4	Number of dead (approx)	

2. Fact sheet

No.	Victims' needs/ demands	Approximate no. of people in need of assistance	Current response status (deployed resources)	Required additional support and resources	Priority
1.	Search and rescue				
2.	Evacuation				
3.	Protection				
4.	Medical and Health				
5.	Shelter and Clothing				
6.	Food Aid				
7.	Water				
8.	Sanitation				
9.	Lifeline System				
10.	Livelihood				

MEDIA CHECK LIST

No.	Sectors	Assessment question	Assessment indicator	Existing situation/ comment
1.	Water Supply and Sanitation	1. What is the maximum distance between people's homes and water points?	The maximum distance from each shelter to a water point is 500 meters	
		2. How many people use one water point?	There must be at least one water point for 250 people	
		3. How many people share a toilet?	There is a maximum of twenty people per toilet	
		4. How far are the toilets from shelters?	Toilets are no more than fifty meters or one minute from shelters	
		5. How far are the refuse pits from the shelter?	No shelter is more than 15 meters from a refuse container/ household refuse pit or 100 meters from a communal pit	
2.	Nutrition	1. How are the nutritional needs of the people being met?	There is access to vitamin A and C rich or fortified foods or appropriate supplements. Infants under six months have access to breast milk (or appropriate substitute)	
		2. Is the food aid fit for human consumption? Have there been any outbreaks of food-borne diseases through distribution?	There are no outbreaks of food-borne disease through distribution	
		3. How are local capacities and skills being used to enhance emergency nutrition programs?	Women and men from disaster affected populations are included in the planning, implementation, monitoring and evaluation of nutrition programs	

No.	Sectors	Assessment question	Assessment indicator	Existing situation/ comment
3.	Food Aid	1. How are rations being designed to bridge the gap between the population requirements and their own food sources?	Estimates of people's food and incomes sources include consideration of market and income opportunities, foraging and wild food potential, agricultural seasons and access to productive assets, sources of income of coping strategies.	
		2. How long does it take for relief material to reach victims?	Delays in distribution arising from a commodity shortfall are no longer than two weeks	
4.	Shelter and Site Planning	1. How much living space is provided to each person?	Covered area averages between 3.5 to 4.5 meters square per person	
		2. How are fuel-economic cooking implements, stoves and their use being promoted?	People are aware of the benefits of using economic devices	
		3. How has site planning minimised the environmental impact?	Housing plans are set so there is a spread of trees and vegetation in the location and areas of natural contours are used to minimise the effect of flooding and erosion	
5.	Health Services	1. How is the occurrence of communicable diseases monitored?	Surveillance is maintained at all times to rapidly detect communicable diseases and to trigger outbreak response	
		2. Who has been involved in the initial health assessment?	The initial assessment is conducted in cooperation with a multi-sector team (water and sanitation, nutrition, food, shelter, health), national authorities affected men and women and local humanitarian agencies	

Though India has the widest range and most valuable depth of experience in mitigation disaster risks, the lessons are seldom available from one community or one organisation to another, from one relief effort to the next or one disaster to another. The Experience Learning Series, published in Hindi, Gujarati and English, values grassroot experience and tries to capture it for practice, policy and research purposes.

1. The June 1998 Cyclone and the Government of Gujarat: *A Report Card by Corporate Gujarat (in Gujarati)*. DMI
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