Module Eight

Crisis Management

Number of hours: 16   **Number of Days: 02**

Table of Content

Basics of Disaster Management

Objective : To make participants understand disaster management terminology.

Content:

Definitions

Hazard: A dangerous phenomenon, substance, human activity or condition that may cause loss of life, injury or other health impacts, property damage, loss of livelihoods and services, social and economic disruption, or environmental damage.
Example: Cyclone, Earthquake, Drought, etc.
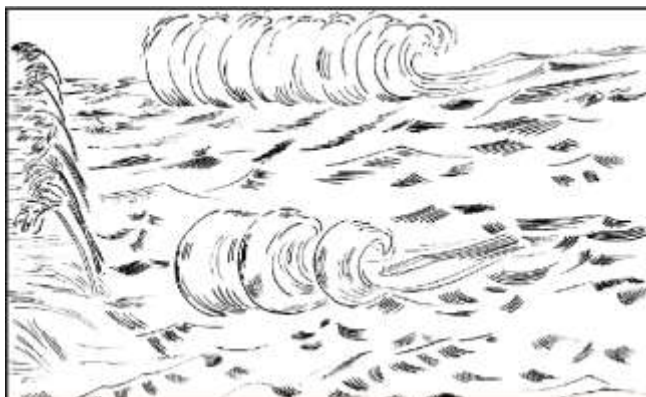
Vulnerability: The characteristics and circumstances of a community, system or asset that make it susceptible to the damaging effects of a hazard.
Example:
1. Houses on coast in cyclone prone area.
2. Villages situated in flood prone area.
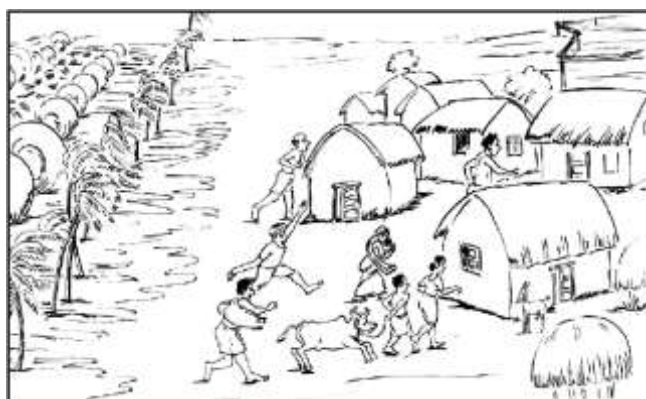
Disaster: A serious disruption of the functioning of a community or a society involving widespread human, material, economic or environmental losses and impacts, which exceeds the ability of the affected community or society to cope using its own resources.

Risk: The potential disaster losses, in lives, health status, livelihoods, assets and services, which could occur to a particular community or a society over some specified future time period.

Capacity: The combination of all the strengths, attributes and resources available within a community, society or organization that can be used to achieve agreed goals

Mitigation Measure: Measures aimed at reducing the risk, impact or effects of a disaster or threatening disaster situation.

Relationship between various terms:

Example:
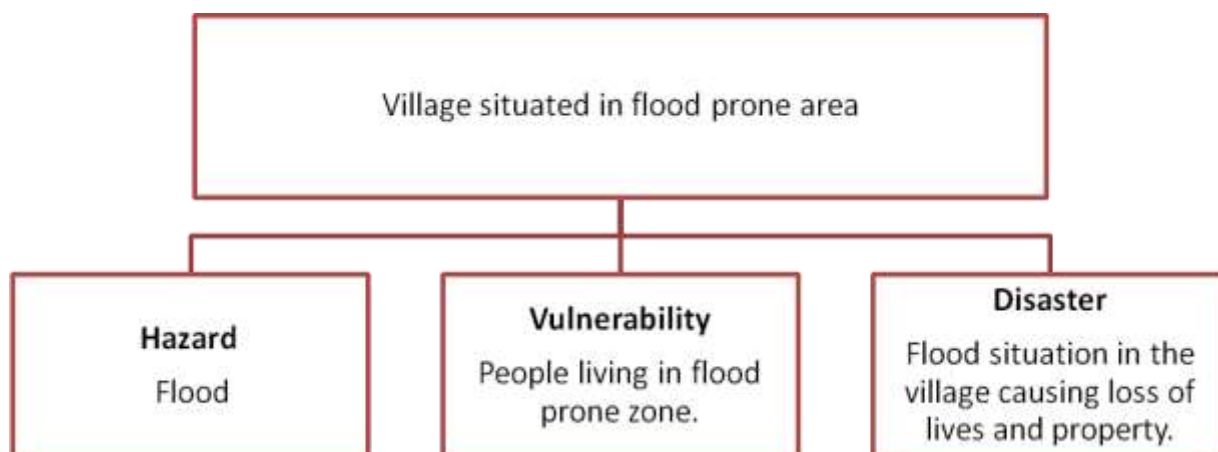
Session plan

Time	Topic	Methodology
20 min	Disaster management Terms and their relationship	Question and answers Discussion using Power point animation on flood and fire to understand hazard, vulnerability, disaster and mitigation.

Tools : LCD Projector, Flip charts, Markers, powerpoint presentation.

Key Messages :
Hazard, vulnerability, capacity and risk/disaster are interrelated terms. Elemination of hazard, reduction in vulnerability and increase in capacity of the communities can reduce the impact or even can prevent disaster.

Reference Materials:
1. PowerPoint presentation '1. Basics of Disaster Management'

Different disaster context and comparative study of these contexts to understand the needs of affected people

Objective : To make participants understand that each disaster context is peculiar in nature and requires tailor made response to address needs of the affected people.

> Facilitator should choose the relevant disasters from the content below for FMR training based on the hazard profile and vulnerability of a particular district/state.

Content :

Sub topic: Earthquake

What is Earthquake?
An earthquake is a series of vibrations on the earth's surface caused by the generation of elastic (seismic) waves due to sudden rupture within the earth during release of accumulated strain energy.

Tectonics plate's theory: North America and other continents seem to stay at the same location year after year. Actually however continents are moving slowly in relative to one another. In the past 200 million years the contents have moved. The theory of tectonic plates accounts for this move. According to this theory, the continents and ocean floors are part of around 30 plates. Each plate partly consists of crust (the outermost layer of the earth), partly of mantle (a thick layer of hard rocks), the plates slide on asthenosphere. The layer of mental is so hard that it floats even though it is solid. 200 million years ago continents were part of single land mass called Pangaea. Pangaea broke apart in two parts viz. Laurasia and Gondwanaland. Intern Lauracia and Gondwanaland broke apart. One piece of Gondwana land i.e. India joined Asia. [Play Video]
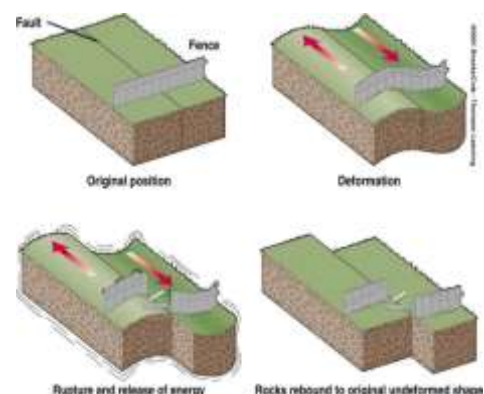
### How energy is stored in rocks and released?
- When plates moves, rock along the fault line bend until the strength of the rock is exceeded.
- Rupture occurs and the rocks quickly rebound to an un-deformed shape
- Energy is released in waves that radiate outward from the fault

What is focus?
The point within Earth where faulting begins is the focus, or hypocenter

What is epicentre?
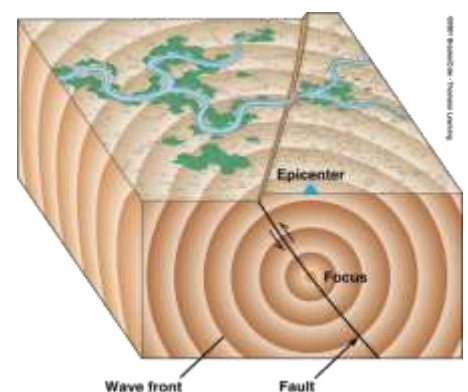
The point directly above the focus on the surface is the epicentre

What are Seismic waves?

Seismic waves are the waves of energy caused by the sudden breaking of rock within the earth or an explosion. They are the energy that travels through the earth and is recorded on seismographs.

Types of Seismic Waves:

The two main types of waves are **body waves** and **surface waves**. Body waves can travel through the earth's inner layers, but surface waves can only move along the surface of the planet like ripples on water. Earthquakes radiate seismic energy as both body and surface waves.

Body waves:

Travelling through the interior of the earth, body waves arrive before the surface waves emitted by an earthquake. These waves are of a higher frequency than surface waves.

P or Primary waves

- These are fastest waves.
- Travels through solids, liquids, or gases
- These are Compressional wave which moves material in the same direction as wave movement.
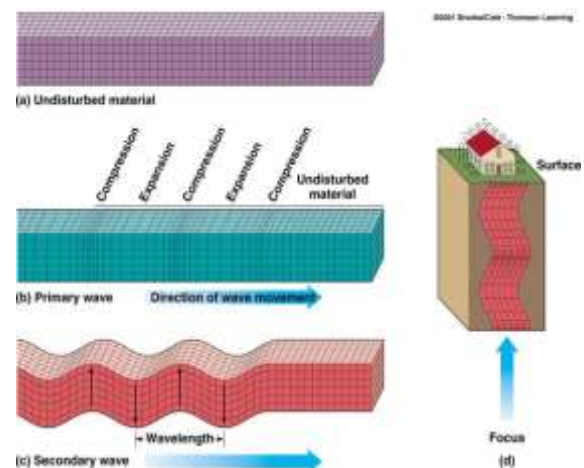
S or Secondary waves

- These waves are slower than P waves.
- S waves travels through solids only.
- These are shear waves which moves material perpendicular to wave movement.

(a) Undisturbed material
(b) Primary wave   Direction of wave movement
(c) Secondary wave
Surface
Focus
(d)

Surface waves

(a) Rayleigh wave
(b) Love wave
Rayleigh wave   Love wave
(c)
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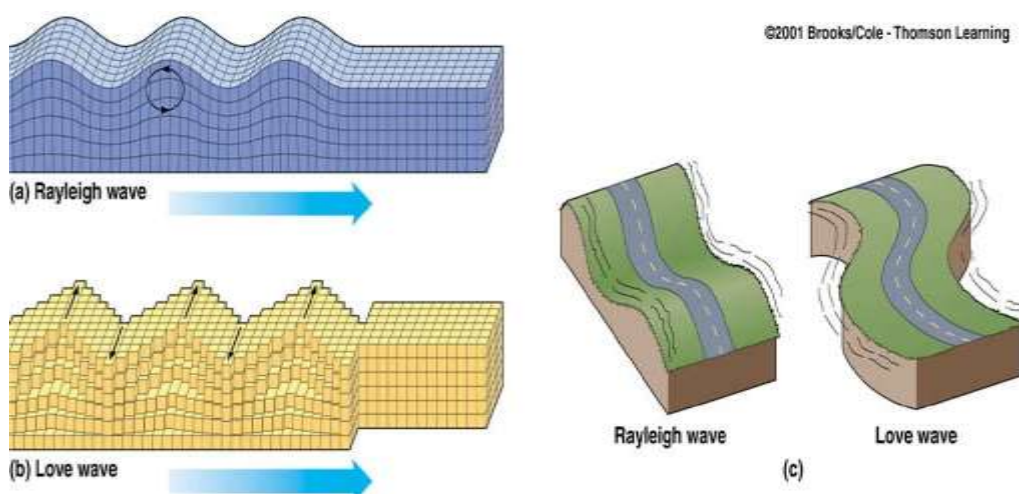
- Surface waves travels just below or along the ground surface.
- These are slower than body waves and as rolling and side to side movement.
- These waves especially damages buildings.

Earthquake Hazard zoning of India:
- Zone 5 covers the areas with the highest risks zone that suffers earthquakes of intensity MSK IX or greater. The state of Kashmir, Punjab, the western and central Himalayas, the North-East Indian region and the Rann of Kutch fall in this zone.
- Zone 4 is called the High Damage Risk Zone and covers areas liable to MSK VIII. The Indo-Gangetic basin and the capital of the country (Delhi), Jammu and Kashmir fall in Zone 4. In Maharashtra Patan area(Koyananager) also in zone 4. but East Delhi is an earthquake prone area.
- Zone 3 is classified as Moderate Damage Risk Zone which is liable to MSK VII. The Andaman and Nicobar Islands, parts of Kashmir, Western Himalayas fall under this zone.
- Zone 2 is liable to MSK VI or less and is classified as the Low Damage Risk Zone.

Group work:

Participants will be divided in four groups. Each group will be asked to discuss and answer the following questions. At the end of the exercise, each group will present their answers.

1. What is the impact of earthquake on the communities? (10 min)
2. What assistance earthquake affected people may need? (10 min)
3. As a First Medical Responder, how will you respond to such situation? (10 min) and 5 min for each group to present

Do's and Don'ts
1. If you are in your house then stay there without panicking and drop down under the strong table. Cover your head with one hand and hold on to the table with the other. DROP-COVER-HOLD
2. If you are on your bed or in the school then you can use pillow or school bag to cover your head.
3. If you are outside then stay away from the buildings, trees, electric pole and other such tall fixtures.
4. If you are in a vehicle then park your vehicle on the side of the road and go to an open place.
5. Never use an elevator during the earthquake. You may use the stairs. But be careful and do not panic.
6. During the earthquake things may fall or break but don't be afraid.
7. You must also check yourselves for scratches or wound after the earthquake.

Session plan   :

Time	Topic	Methodology
10 min	What is earthquake?	Question and answers,
2 min	Tectonic plate theory	Video (length: 1.2 min)
20 min	Understanding how earthquake	PowerPoint presentation

Time	Topic	Methodology
	happens and related terms. Understanding earthquake zone map of India	
4 min	Scenario building for group work	Video(length: 3.20 min) showing impact of disaster
60 min	Group work	Participants will be divided in four/five groups. Each group will discuss given three questions within their group and come up with answers. Each group will get 30 min for this exercise. Each group will write their answers on flip charts for presentation. Five minutes will be given to each group for presentation which will be followed by Q&A.
3 min	Do's and Don'ts	Video

Tools   :   LCD, Videos, Flip charts, Markers

Sub Topic: Floods

Facts:

Floods have been a recurrent phenomenon in India and cause huge losses to lives, proper ties, livelihood systems, infrastructure and public utilities.

India's high risk and vulnerability is highlighted by the fact that 40 million hectares out of a geographical area of 3290 lakh hectares is prone to floods.

On an average ever y year, 75 lakh hectares of land is affected, 1600 lives are lost and the damage caused to crops, houses and public utilities is Rs. 1805 crores due to floods.

The frequency of major floods is more than once in five years.

Floods have also occurred in areas, which were earlier not considered flood prone.

Causes of Flood:

Eighty per cent of the precipitation takes place in the monsoon months from June to September. The rivers bring heavy sediment load from the catchments. These, coupled with inadequate carrying capacity of the rivers are responsible for causing floods, drainage congestion and erosion of river-banks.

Cyclones, cyclonic circulations and cloud bursts cause flash floods and lead to huge losses.

The fact that some of the rivers causing damage in India originate in neighbouring countries, adds another complex dimension to the problem

Group work:

Participants will be divided in four groups. Each group will be asked to discuss and answer the following questions. At the end of the exercise, each group will present their answers.

1.   What is the impact of flood on the communities? (10 min)
2.   What assistance flood affected people may need? (10 min)
3.   As a First Medical Responder, how will you respond to such situation? (10 min)
5 min for each group to present

Do's and Don'ts
1. Try to get above the level of water.
2. If flood water enters inside the house, then be very careful and watch out for any insects or any dirt from the drains.
3. It is neither safe to play in that water nor to drink it. Play or drinking in that water could lead to infections or diseases.

4. If any of the electrical switches are wet, you may get a shock.
5. Keep food away form flood water too so that it doesn't get infected.
6. Be careful about the standing water even after the flood. Check TV or radio to know what places are safe to go after the floods and where we can get any help.

Session plan   :

Time	Topic	Methodology
10 min	Flood fact sheet and its causes	Power point presentation, Q&A
5 min	Setting the scene	Video film on floods (2.37 min)
60 min	Group work	Participants will be divided in four/five groups. Each group will discuss given three questions within their group and come up with answers. Each group will get 30 min for this exercise. Each group will write their answers on flip charts for presentation. Five minutes will be given to each group for presentation which will be followed by Q&A.
3 min	Do's and Don'ts	Video

Sub topic: Flash Floods

What is Cloud Burst?

It is highly concentrated rain fall over a small area lasting for a few hours. It can spark off flash floods and land slides leading to large scale deaths.

Why do cloud burst occur?

They grow from high winds that generate strong convection currents, which form clouds called 'cumulonimbus clouds' that bring down rain with great ferocity.

Why are hilly areas more prone to cloudbursts?

Steep hills favour the formation of these clouds.

Case Study

A case study on Leh flash floods will be discussed with the participants to develop their understanding on the impact of flash floods on communities, needs of the communities affected by flash floods, challenges in addressing those needs and the services that Red Cross can deliver in such context.

Session plan   :

| Time	Topic	Methodology
30 min	Flash Floods	Facilitator will narrate case study on Leh flash flood relief operation to the participants which will highlight the following: 1. Introduction to Leh flash flood 2. Impact of flash flood on communities. 3. Challenges faced by Red Cross volunteers/humanitarian aid workers, coordination mechanism, needs of the affected people, Red Cross services and overall impact of disaster on the economy of the area.

Sub topic: Landslides

What is landslide?
Landslides are downward and outward movement of slope materials such as rock debris and earth, under the influence of gravity.

Landslide Risk
Landslides are one of the natural hazards that affect at least 15 per cent of the land area of our country—an area which exceeds 0.49 million km2. Landslides of different types are frequent in geo dynamically active domains in the Himalayan and Arakan-Yoma belt of the North-Eastern parts of the country as well as in the relatively stable domains of the Meghalaya Plateau, Western Ghats and Nilgiri Hills. In all, 22 states and parts of the Union Territory of Pudducherry and Andaman & Nicobar Islands are affected by this hazard. The phenomenon of landslides is pronounced during the monsoon period.

Types of landslide movements
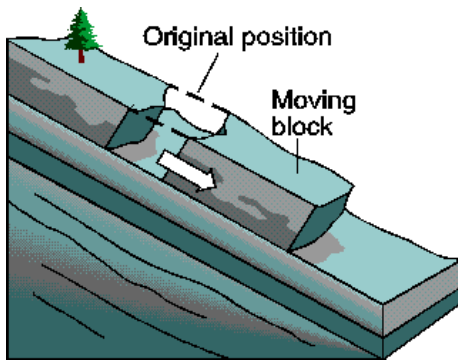
Slides: Slides are characterized by the downward movement of material along one or more failure surfaces. They occur parallel to planes of weakness and occasionally parallel to slope.
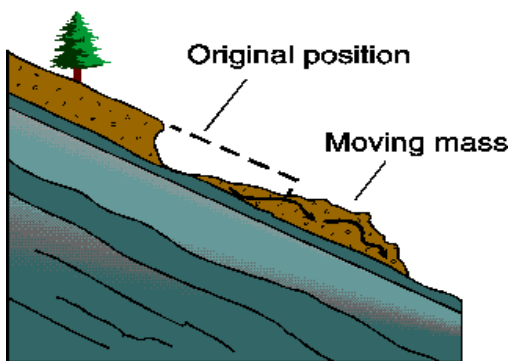
Flows: Flows are similar to slides but differ in the fact that they are characterized by high water content and move similar to viscous fluid.
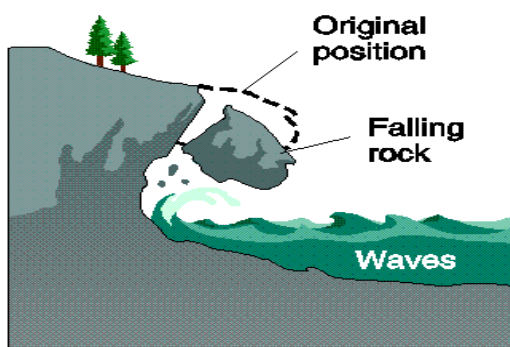
Falls: Falls are movements in which masses of rock or other material fall freely from cliff or steep slope through the air, and may bounce and roll. Earthquakes commonly trigger this final type of movement.
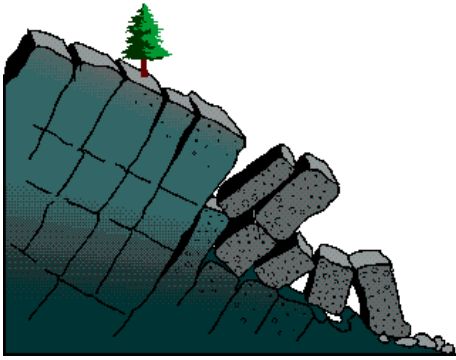
Topple: Topple is the end-over-end motion of rock down a slope. In this, mass rotates forward about some pivot point. If a toppling mass pivots far enough, a fall may result.
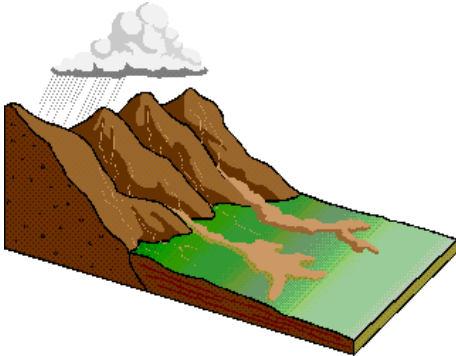
Torrent: In this type of movement there is a sporadic and sudden channelized discharge of water and debris

Creep: This is the gradual movement of slope materials down the slope.
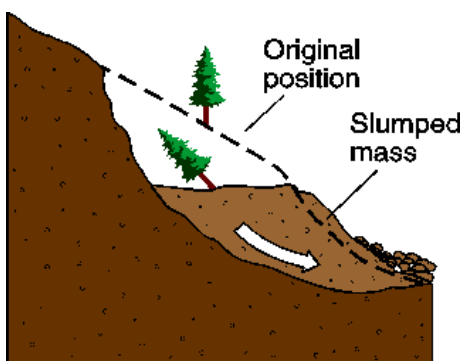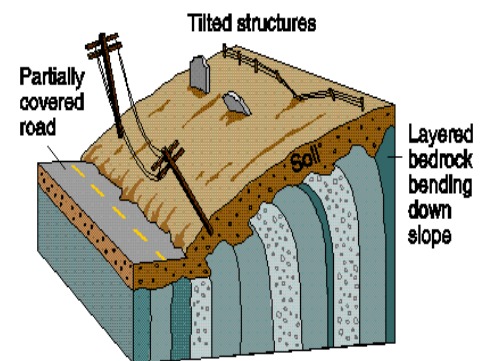
Slump: Slump is a complex movement of materials on a slope. The surface of rupture is concave upward, and the mass rotates along the concave shear surface.

Causes mass movement
1. Geometrical changes(undercutting, erosion, stream incision, artificial excavation leading to changes in slope height, length or steepness)
2. Unloading (erosion, incision, artificial excavation)
3. Loading (addition of material, increase in height, etc) including undrained loading.
4. Shocks and vibrations (artificial, earthquakes, etc). Associated processes:
   a. Liquefaction
   b. Remoulding

      c.   Fluidization

      d.   Air lubrication

      e.   Cohesion-less grain flow

5. Drawdown (lowering of water in lake or reservoir)
6. Changes in water regime (rainfall, increase in weight, pore pressure).

Internal changes in stability conditions
1. Progressive failure (following lateral expansion or fissuring and erosion)
2. Weathering (freeze-thaw, desiccation, reduction of cohesion, removal of cement)
3. Seepage erosion (Solution, piping etc.)

Group work

Participants will be divided in four groups. Each group will be asked to discuss and answer the following questions. At the end of the exercise, each group will present their answers.

1. What is the impact of landslides on the communities? (10 min)
2. What assistance landslide affected people may need? (10 min)
3. As a First Medical Responder, how will you respond to such situation? (10 min) and 5 min for each group to present

Do's and Don'ts
1. Be very causious and alert during intense cloud burst and continuous rain fall.
2. Make the adequake arrangements for drain and keep the drain clean and free from any kind of obstructions.
3. Your should be familiar with your neighbourhood. The appearance of buldgeing ground, tilted trees, cuts in the ground or sloping of the ground in one direction could be signs of landslide.
4. If landslide occurs then quickly call your municipality, police and fire brigade. And warn you neighbours quickly and evacuate the area.
5. During landslide, quickly move away from the path of the landslide and run to safer and higher ground.
6. If escape is not possible, turn into a tight ball and cover your head.
7. After the landslide with the help of local authorities or police try to assist people who might have trapped or injured in the area. But be careful there may be a danger of another landslide.

Session plan   :

Time	Topic	Methodology
10 min	Flood fact sheet and its causes	Power point presentation, Q&A
60 min	Group work	Participants will be divided in four/five groups. Each group will discuss given three questions within their group and come up with answers. Each group will get 30 min for this exercise. Each group will

Time	Topic	Methodology
		write their answers on flip charts for presentation. Five minutes will be given to each group for presentation which will be followed by Q&A.
3 min	Do's and Don'ts	Video

Sub topic: Fire Accidents

What is Fire?
Fire is a chemical reaction.

What does fire produce?
Fire produces:
1. Smoke
2. Toxic gases
3. Heat and light

Fire Triangle

Classification of Fire
- Class A – e.g. paper, wood and cloth
- Class B – Flammable liquid e.g. Petrol, diesel and Kerosene
- Class C – Flammable gases e.g. LPG, Hydrogen and Methane
- Class D – Metal Fires e.g. Aluminium and Magnesium
- Class E – Electrical Fires

Fire extiguishing methods
- Cooling - To lower down temperature.
- Smothering – To cut O2 supply.
- Segregation – To remove flammable material.

What are types of Fire Extinguishers?
- Sand
- Water CO2
- Foam
- Carbon Dioxide (CO2)
- Dry Chemical Powder (DCP)
- Halon

Group work

Participants will be divided in four groups. Each group will be asked to discuss and answer the following questions. At the end of the exercise, each group will present their answers.

1.   What is the impact of fire accidents on the communities? (10 min)
2.   What assistance fire accidents affected people may need? (10 min)
3.   As a First Medical Responder, how will you respond to such situation? (10 min)
5 min for each group to present

Do's and Don'ts
1. Crawl on the floor and get away form the smoke.
2. Don't play with fire.
3. Whenever you are going out, Switch off all the lights and take out plus of all the electrical appliances. Also switch off the regulator of the gas cylinder.
4. If house catches fire, you should be prepared to run out of the escape route calmly. Escape route should be known to all members of the house.
5. Crackers can also cause fire accidents. Childers should always burn crackers in presence of their parents.
6. If one ever catches fire, one must remember three things. Stop, drop and roll.
7. In case of fire, immediately contact fire brigade by dialling 101 on phone.

Session plan   :

Time	Topic	Methodology
20 min	Presentation	Power point presentation, Q&A
60 min	Group work	Participants will be divided in four/five groups. Each group will discuss given three questions within their group and come up with answers. Each group will get 30 min for this exercise. Each group will write their answers on flip charts for presentation. Five minutes will be given to each group for presentation which will be followed by Q&A.
3 min	Do's and Don'ts	Video

Sub topic: Tsunami

What is Tsunami?

Tsunami is a series of water waves caused by the displacement of a large volume of a body of water, typically an ocean or a large lake.

What causes tsunami?

Earthquakes, volcanic eruptions and other underwater explosions (including detonations of underwater nuclear devices), landslides, glacier calving, meteorite impacts and other disturbances above or below water all have the potential to generate a tsunami.

Reasons for increasing vulnerability to tsunami:

Length of coastline of India including the coastlines of Andaman and Nicobar Islands in the Bay of Bengal and Lakshadweep Islands in the Arabian Sea is 7517 km. The coastal population has been increasing steadily, mostly due to the expanding scope for exploitation of sea resources and economic activities propelled by increasing urbanization and industrialization in the coastal districts as well as increasing employment opportunities due to the unprecedented expansion in tourism-related activities.

E.g. The 2004 Indian Ocean earthquake was an undersea mega thrust earthquake that occurred on Sunday, 26 December 2004, with an epicentre off the west coast of Sumatra, Indonesia resulted in tsunami. The earthquake was caused by subduction and triggered a series of devastating tsunamis along the coasts of most landmasses bordering the Indian Ocean, killing over 230,000 people in fourteen countries, and inundating coastal communities with waves up to 30 meters (98 ft) high. It was one of the deadliest natural disasters in recorded history. Indonesia was the hardest-hit country, followed by Sri Lanka, India, and Thailand.

Group work

Participants will be divided in four groups. Each group will be asked to discuss and answer the following questions. At the end of the exercise, each group will present their answers.

1.   What is the impact of tsunami on the communities? (10 min)
2.   What assistance tsunami affected people may need? (10 min)
3.   As a First Medical Responder, how will you respond to such situation? (10 min)

5 min for each group to present

Do's and Don'ts
   1. You must be careful on the beach and move to higher and safer place.
   2. People living on the coast must remain alert for the tsunami warning signal.
   3. On the TV or radio if you hear a tsunami warning then tell to other people.
   4. Every one in the house must know about the safe exists.
   5. When earth shakes run far away from the beach.
   6. Don't sit around to watch the tsunami.
   7. Return to your house only when it is informed by authorities that it is safe to return.
   8. Try to help each other.
   9. If there is water in or around your house, then don't touch or eat that is wet.

Time	Topic	Methodology
20 min	Presentation	Power point presentation, Q&A
60 min	Group work	Participants will be divided in four/five groups. Each group will discuss given three questions within their group and come up with answers. Each group will get 30 min for this exercise. Each group will write their answers on flip charts for presentation. Five minutes will be given to each group for presentation which will be followed by Q&A.
3 min	Do's and Don'ts	Video

Key messages:

The needs of the affected people vary with the type of disaster. Accordingly the response of the First medical responders will have to be customised.

> Eg. In case of earthquake, FMRs will have to deal with more cases of injuries and fractures. While in case of flood FMRs will be dealing more with snake bites, skin infections and WatSan issues.

Sub topic: Mass casualties

Objective : To make participants understand the mass casualties scenarios and the behaviour of FMRs in such situations.

Content :

Understanding mass casualties' scenario

> **Trigger for discussion: Name the incidences which may lead to mass casualties?**

With the economic development many hazards are being induced in the communities and their surrounding environment. Also it is raising social pressures, intensifying struggle for the existence and further development and deepening cracks in social structure due to disagreements and differences. This has shown a spurt in incidences like road accidents, rail accidents, air crash, and conflicts (riots, terrorist and Naxal attacks) in last few decades. These incidences many times results in mass casualties in small geographical areas and needs immediate assistance to preserve lives of the injured **(refer module 2-First Aid)** and for the identification of dead bodies **(refer module 6-Managemnt of dead bodies)**.

Red Cross being non political, non religious, and neutral organisation **(refer module 1- Red Cross Movement)** has an important role to play in the incidences of riots, terrorist and Naxal attacks. In such situations, Red Cross emblem allows FMRs to work as a independent and neutral agency removing all the barriers in delivery of service from the parties to the conflict.

Challenges

> **Trigger for discussion: What are the challenges while responding to such situation?**

The challenges in these situations can be access to the area or site of incidence due to geography or security risks. Dissemination of Red Cross services in peace time and strengthening coordination mechanism with various groups/parties to the parties may facilitate delivery of services in times of emergencies and will minimise security risk of the volunteers.

Association of any FMR with either party to the conflict may risk his/her as well as lives of other FMRs.

Precautions

> **Trigger for discussion: What are the precautions that FMRs should take while responding to such situation?**

All volunteers must carry their identity cards.
All volunteers and their belonging must possess Red Cross emblem for protection and identification.
All volunteers must adhere to the Red Cross Code of Conduct at all times.

Avoid association with any political, religious or any group which is party to the conflict.

Always remember that heroism may lead to closure of the operation.

Session plan :

Time	Topic	Methodology
30 min	Mass casualties	Power point presentation and Q&A

Sub topic: Disease Outbreak

Objective of this session:
After attending this session the CFMR will understand the concept of disease outbreak and epidemic, the symptoms of different diseases which may cause epidemic, the immediate response and management (including management of the environmental factors) of the same and precautions that a CFMR needs to take, working in the epidemic hit areas.

Session Plan

Time	Topic	Methodology
30 minutes	Concept of epidemic, infection and germ.	Presentation, Q&A and small game
50 minutes	Different disease groups and roles of CFMR in addressing issues around these disease groups in emergency	Presentation, Q&A and open session
40 minutes	Understanding the Epidemic Control for Volunteers – toolkit	Presentation, Q&A, group work and presentation

Tools and Resources required
Epidemic Control for Volunteers toolkit (IFRC), Flipcharts, Markers, Card pieces, computer and projector

Key Messages
- A CFMR is the key person to address the disease outbreak in his/ her community
- CFMR must respond to disease outbreak and epidemic as per the needs of the community and for each disease the action points are different
- The community tools are suggestive and may change with the situation and needs of the community
- It is important for the CFMR protect him/ herself fist in a disease outbreak

Content
An epidemic occurs when many people in the community have the same infection at the same time. More people become infected than in normal situations, exceeding the community's ability to cope. Thus, a few things together will make an epidemic:
- An infection
- Affecting the community
- Making many people sick
- At the same time

Question and Answer
Choose a word that describes what comes to mind when you hear the word "epidemic", what it is, how it happens and what causes it. Tell this word to your facilitator, who will write it on the flip chart, and write it down in this box. Then copy all the words suggested by your colleagues into this box as well.

The infection cycle

Germs

Vectors

Poor environment
(uncovered food, dirty water)

Well person
(carrier)

Sick person

Medical intervention

No medical intervention

Recovery

Death

An infection causes a disease that can be transmitted from one person to another. It is caused by different kinds of germs. It can be transmitted between people in several different ways.

A germ is a very small organism we cannot see with our eyes. Germs affect people and animals and can make them sick by infecting them with diseases. They travel from one person, animal or other vector to another person causing a disease to spread (which may result in an epidemic).

A vector is an insect or an animal that can carry germs and transmit them to people. A vector can be, for example, a mosquito, a fly, a rat, a bat, a chicken or a monkey.

Immunity is the ability to fight off an infection. Not all people who get the germs that cause a particular disease get sick. When this happens, the person is said to be "immune" to the disease. Immunity can be acquired either if a

person has already had the disease, has carried the germs before and become immune, or has been vaccinated against the disease.

An epidemic occurs when the number of people in a community sick with a particular disease increases. More people become infected than in normal situations, exceeding the community's ability to cope. In other words, more people in the community are getting sick (or dying) than those who are getting better or recovering from the disease.
An epidemic occurs for one of several reasons:

- The germs are stronger than usual (e.g. new kinds of germs).
- There are more vectors (e.g. an increase in mosquitoes during the rainy season).
- People are less able to resist the germs (e.g. owing to malnutrition) and very few people have immunity.
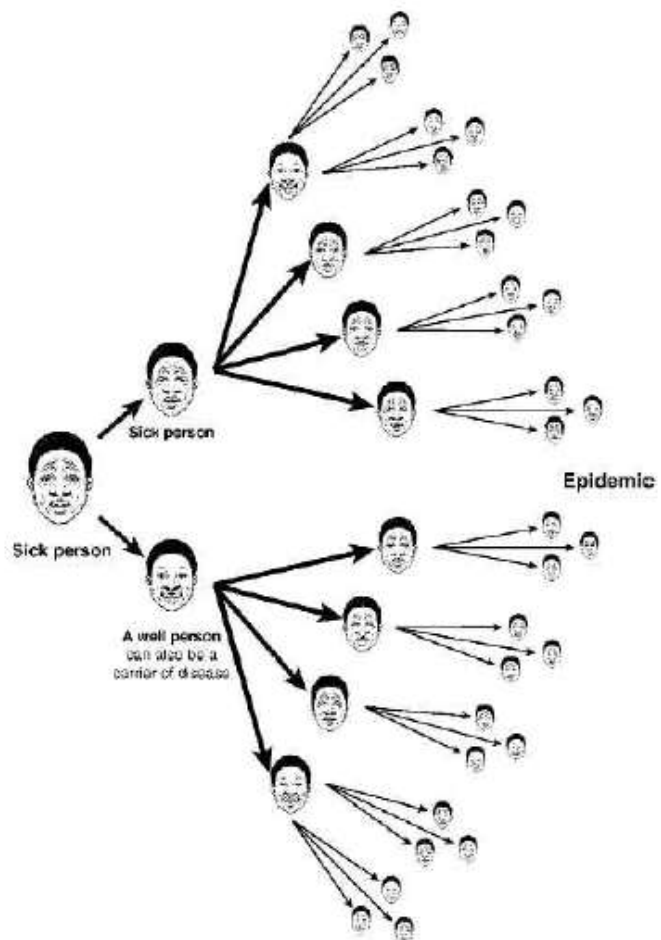
The spread of disease

Sick person

Sick person

A well person can also be a carrier of disease

Epidemic

- The surrounding environment has deteriorated (e.g. lack of clean water, poor hygiene, etc.).

Role-play

Your facilitator will choose one of you to play the part of the first person who catches an infection. This disease can spread from one person to another by shaking hands.

The "infected person" will go around and shake hands with other people. The people whom he or she shakes hands with will also get "sick". Do this for a minute, and see how many people get sick in the room.

This exercise will give you an idea how epidemics spread.

What are the disease groups?

There are many different kinds of diseases that cause epidemics. It is useful to put them in groups. This will help us to understand the nature of the diseases and to manage their epidemics better. There are different ways of grouping diseases. We can group them according to what kind of germs cause them, how they are transmitted, or what kind of symptoms they cause.

In this session, we will group diseases in such a way that it will be easier to understand how to prevent or manage the epidemics that they cause. Therefore, we have decided to use six different disease groups.

These are:
1. Diarrhoeas
2. Diseases prevented by vaccines
3. Diseases transmitted by vectors
4. Respiratory infections
5. Highly contagious diseases
6. Avian and pandemic influenza

Details of all the disease are available in the Epidemic control for Volunteers – Manual. In this session we will talk about the roles of CFMR in a disease/ epidemic hit area –

Role of CFMR in a Diarrhoea epidemic situation:
- Help detect diarrhoea cases in your local community.
- Refer children with severe dehydration to health facilities.
- In a major epidemic, put up posters and distribute leaflets with dos and don'ts.
- Conduct health promotion in the community.
- Show mothers and caregivers how to prepare ORS for dehydrated children.
- Alert the health authorities

Role of CFMR in Diseases prevented by vaccines epidemic situation:
- **Monitoring:** Ensuring that vaccination campaigns cover all the people who need them.
- **Social mobilization:** Educating the community in the importance of vaccinations and helping them catch up with vaccination campaigns. Social mobilization is one of the most valuable things volunteers can do because volunteers belong to the community and can make a big difference by encouraging families to get their children vaccinated.

- **Community-based surveillance:** Helping the community identify cases of infection and knowing how to deal with them.

Role of CFMR in Diseases transmitted by vectors epidemic situation:
- Distribution of malaria mosquito nets and education of the community in their use.
- Health promotion on the prevention and identification of the diseases.
- Surveillance through house-to-house visits.
- Referral of cases to health facilities.
- Clean-up campaigns.
- Mosquito control (spraying) after proper training, with the appropriate protection and under the supervision of water and sanitation specialists.

Role of CFMR in Respiratory infections epidemic situation:
- Surveillance, by carrying out house-to-house visits so that you can assess living conditions and detect people with fever, a cough and difficulty breathing.
- Referral of children with respiratory infections to health centres or hospitals.
- Ensuring access to healthy food and, if malnutrition is a problem, making sure that children receive good nutrition.
- Improving shelter, if possible, to increase fresh air and reduce overcrowding.
- In the recovery stage Health promotion to tell people about:
  - Good habits such as covering the mouth and nose when coughing or sneezing (respiratory etiquette)
  - The symptoms of respiratory infections
  - How to manage sick children
  - The need to take sick children to a health facility
  - Good nutrition
  - Giving fluids to sick children
  - Improving shelter and reducing overcrowding

Role of CFMR in Highly contagious diseases epidemic situation:
- Talking to community members and leaders to get their help in detecting new cases and asking for them to be referred to health facilities.
- Health promotion is the most important thing volunteers can do. You can help tell the community about the epidemic and teach people how to protect themselves, how to care for relatives who are sick and how to deal with dead bodies.
- Sometimes you can help the community to make strong cleaning products (disinfectants) and teach them how to use them and distribute them with the necessary cleaning implements.
- It is unusual for volunteers to help care for patients or deal with the burial of dead bodies, but if this happens because there is no one else to do it, it should be done under the strict supervision and instruction of specialists and with the use of full PPE at all times.

Role of CFMR in Avian and pandemic influenza epidemic/ pandemic situation:
- Managing sick people: hospitals and health facilities will have to be able to treat large numbers of people sick with influenza. If the numbers are too big, some sick people may need to be treated in the community.
- Reducing the spread of the disease through promotion of good health practices, such as social distancing and better hygiene habits.

- Supporting public infrastructure: When the pandemic occurs, many services such as water and sanitation, schools and others may be disrupted. Work will need to be done to keep such services in operation.
- Lastly, when health facilities are flooded with many people sick with influenza, they will have very little room for people suffering from other diseases. Instead, the care of those people will have to be managed either through other health services or in the community.

How to use the Epidemic Control for Volunteers toolkit
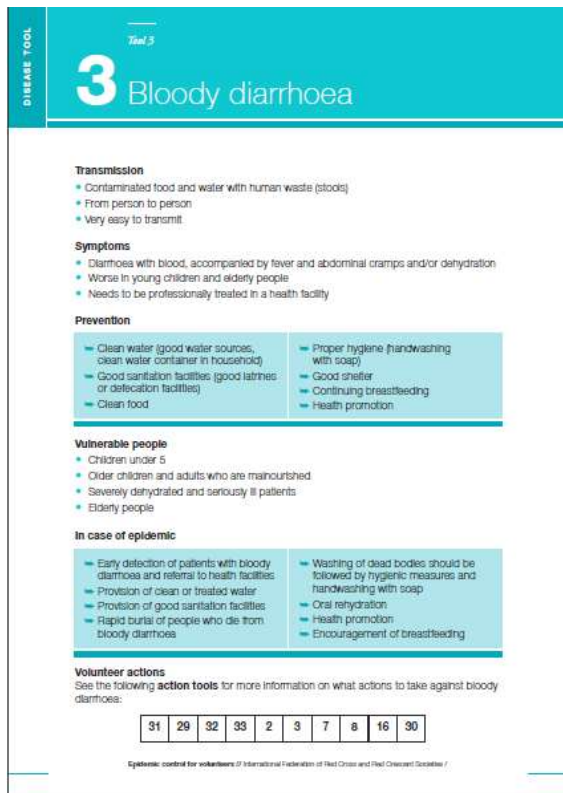
The toolkit consists of three major components:

1. **Disease tools:** describe the diseases that can cause epidemics.
2. **Action tools:** describe actions that need to be taken in epidemics.
3. **Community message tools:** provide important messages to tell your community. You will use them in your health promotion activities to deliver messages to the community about what they should and should not do to protect themselves.

Disease Tool: The disease tools give basic information on diseases that cause epidemics. Each disease tool tells us about a different disease that can cause an epidemic. Each sheet has the name of the disease, how it is transmitted and a few points about prevention and control of an epidemic. On the back of each sheet are some important questions we will need to ask when we are doing an assessment of an

epidemic caused by this disease. Each sheet also has a sequence of numbers on the front. This is to tell us what action tools to use when dealing with an epidemic of this disease. When we use this sequence, as described above, we will be able to pick the action tools that are suitable for a specific kind of epidemic. By putting all this information together, we will have a little working guide to follow for the specific epidemic we are dealing with.

Action tools: The action tools describe actions that need to be taken when dealing with epidemics. Each action tool tells us about one specific action that needs to be taken to help control an epidemic of a certain disease. Some of these actions are specific to one kind of disease, while others will need to be done in several or all kinds of epidemics. This is one of the main reasons they have been produced on separate sheets, so that

we can use the action tools for whatever disease we are dealing with. The action tools have numbers on them so we can find them easily.

In order to determine what actions need to be taken for a specific epidemic, look at the series of numbers on the front of the disease tools.

Community message tools: The community message tools have drawings and a message on each of them. Each one contains a different message that relates to a specific disease. You will need to deliver these messages to people in your community so that they are more aware of the epidemic they are dealing with. These sheets will help you to remember what is the most important thing to tell people in your community about the epidemic. For example, use them in your health promotion activities to tell others what they should and should not do in order to protect themselves from the disease. The community message tools have numbers on them so that you can find them easily. Look again at the action tools. You will find numbers on the front that will tell you which community message tools to use.

It is important to remember that community messages are always changing and sometimes different communities need different messages to deal with epidemics. The printed sheets in the toolkit are only examples of the various types of messages that are important to share with your community. Look and use the many images on the Drawing for Health DVD to make more messages for your community. Be creative and teach others!

You can create your own community message tools using the illustrations included on the CD that comes with this manual. Choose the illustration you need and print it with the appropriate message. Make copies and use them in your community to spread important messages.

> **Group Work:**
> Place a copy of the ECV module in each table and give a disease component to each table and instruct them to find out the disease tool, the action tools and the community messaging tools in relation to the disease.
> After the group work each group will get 3 – 5 minutes to present their findings and tools for different levels in front of the entire group and take feedback.

Reference Material –
2. PowerPoint Presentation '2. Crisis Management all disasters'
   a. PowerPoint Presentation '2a. EQ Dos and Don'ts'
   b. PowerPoint Presentation '2b. What is earthquake'

c. Movie clip '2c. The earth's plates'
d. Movie Clip '2d. Earthquake video'
     i. Movie Clip '2d. English Earthquake Dos and Don'ts video'
     ii. Movie Clip '2d. Hindi Earthquake Dos and Don'ts video'
e. Movie Clip 2f. Ganga floods towns of Uttarakhand'
     i. Movie Clip '2e. English floods Dos and Don'ts video'
     ii. Movie Clip '2e. Hindi floods Dos and Don'ts video'
f. PDF Case Study '2f. Case study Leh flash floods'
g. PowerPoint Presentation '2g. Landslide'
     i. Movie Clip '2g. English landslide Dos and Don'ts video'
     ii. Movie Clip '2g. Hindi landslide Dos and Don'ts video'
h. Tsunami
     i. Movie Clip '2h. English Tsunami Dos and Don'ts video'
     ii. Movie Clip '2h. Hindi Tsunami Dos and Don'ts video'
i. Cyclone
     i. Movie Clip '2i. English Cyclone Dos and Don'ts video'
     ii. Movie Clip '2i. Hindi Cyclone Dos and Don'ts video'
j. Fire Accident
     i. Movie Clip '2j. English Fire Dos and Don'ts video'
     ii. Movie Clip '2j. Hindi Fire Dos and Don'ts video'
k. PowerPoint Presentation '2k. Mass Casualties'

Objectives   :

[What the participants should understand, know or be able to do by the end of the session]

By the end of the session the participants will:

- ✓ Understand the importance of Emergency Needs Assessment
- ✓ Be clear on the types of assessments and assessment process
- ✓ Understand how to use participatory assessment tools

Session Plan   :

1. Understanding Needs Assessment: 60 min

    - What Is Needs Assessment?
    - When to Do Needs Assessment?
    - Planning for Needs Assessment?

2. Types of Needs Assessment and Assessment Process: 60 min

    - Types of Assessments
    - Priority sectors for disaster needs assessment
    - Needs Assessment Cycle and Process

3. Assessment Information Collection Methods & Tools: 120 min
    - Observations
    - Interviews
    - Assessment Formats
    - Assessment Exercise

Methods
- ✓ Presentation
- ✓ Group Exercise

Session Duration

4 Hours

Reference Materials/Tools

[Any materials for distributing to the group during the session or to be added to a course reading list]

Materials to be distributed to participants:

- Presentation

- Needs Assessment Formats & Template
- IFRC Guidelines for assessment in emergencies

Key Messages

- Assessment is a vital element of program planning process

- The aim of an assessment is to understand a situation in order to identify the problem(s), the source of the problem(s) and the consequences of the problem(s)
- The purpose of an assessment is not to identify an intervention but to find out whether an intervention is needed or not
- There are three types of assessment: rapid assessment, detailed assessment and continual assessment

Session description/Content

[As much detail as you have on the nature of the session e.g. points to be discussed in plenary, description of a group exercise, presentation outline etc.] See attached

Duration: 60 minutes

Purpose: To ensure that participants are familiar with the terms and concepts of needs assessment

Learning Objectives: Participants recognize the importance of needs assessment
Participants are able to describe when to do needs assessment
Participants are able to describe the planning elements of a needs assessment

Suggested Activities: Activity 1: What Is Needs Assessment (20 min)
Activity 2: When to Do Needs Assessment? (20 min)
Activity 3: Planning elements of needs assessment? (20 min)

Suggested Methods: Individual reflection, brainstorming, question & answer, paired discussion, plenary discussion, power point presentation

Material: Flipcharts, markers, white boards, multimedia, strip cards

Before starting the session on Needs Assessment the facilitator has to inform the FMR participants that generally speaking the FM Responder will be responding to emergency situations but they may also be asked to assess situations in the ground as they have access or have already been to the disaster affected sites. Since they may already have a better knowledge of the area they may be requested to assist the Needs Assessment teams to support them with information collection. Hence the basic knowledge on Needs Assessment has been included in this course. It is also a good skill to have when responding to emergencies.

What is 'Needs Assessment'? (20 min)

- Check with participants if any of them have any experience of doing needs assessment
- If someone has any experience, please ask them to explain how it helped them in responding
- If there is no experience in the room, then let participants know that on a daily basis we all do needs assessment when we go for our daily or weekly grocery shopping. We assess what is still in the fridge or at home and then what we need and then go to the market and buy. **(5 min)**
- Ask participants to define in their own words what they mean by needs assessment. Write the key words in a flip chart. **(5 min)**

- Then show or explain them the below 3 points **(10 min)**

- Needs Assessment (NA) is an information-gathering and decision-making process
- It should be undertaken in any situation in which the life or well being of persons is being threatened by a disaster event
- It enables immediate needs to be identified and analyzed, and thereby facilitates an appropriate response

Purpose of Needs Assessment (20 min)
- Ask participants why and when do we have to do needs assessment
- The answer to this is hidden in the previous explanation.
- Then show and explain the below points
- NA is undertaken to produce an appropriate and timely assessment report in order to mount an effective and efficient response
- It is necessary in order to save lives, minimize injury, damage and loss, and prevent escalation and secondary hazards.

What should it cover?
- Situation (damage) Assessment: a description of what has happened;
- Needs Assessment: a statement of what needs to be done.

Key Questions
- Is it an emergency or not?
- What type of emergency is it?
- Who needs help?
- What is their situation now?
- What resources do they have?
- What resources do they need?

Principles of Needs Assessment
- The NA system should specify how data is to be collected, analyzed and presented
- Standard indicators, planning factors and formulae should be provided
- Reporting processes should be standard across the country
- NA is not just information collection
- Situations do not remain static
- NA may consume resources better used for other purposes
- Hard to obtain accurate information in the immediate post-disaster period
- NA may raise unrealistic expectations
- The need for quick results usually has to be traded off against the need for accuracy

Planning elements for Needs Assessment (20 Min)
Mini Exercise: Make small cut outs of the below 5 planning elements of a needs assessment for 4 groups and ask them to place them in logical order. Once it is done ask each table to view the others. **(10 min)**

Then show the below steps and explain the planning required. **(10 min)**

2. First set **objectives and the scope** of the assessment
    1. Geographical Areas
    2. Sectors & Sub sectors
    3. Target groups
    4. Links to decision making
3. Identify what is the **information need and what questions you** will use to answer these information needs?
    1. Information Requirement
    2. Sources & Methods
    3. End product outlines
4. Determine **where you will go** to collect information.
    1. Target Group
    2. Site selection
5. What **tool** you will use to collect the data
    1. Checklists and questionnaires design
    2. Pilot test and training
    3. Data entry tool
6. **Logistics plan** for doing the assessment.
    1. Field visit plan
    2. Logistics and Security SoPs
    3. Admin & budget

Types of Needs Assessment and the Assessment Process

Duration: 60 minutes

Purpose: To familiarize participants with the different types of needs assessments and the assessment process

Learning Objectives: Participants are able to describe the 3 different types of needs assessment

Participants are able to describe the priority sectors for needs assessment

Participants are able to describe the phases involved in the needs assessment process

Suggested Activities: Activity 1: Types of needs assessment and their focus (15 min)
Activity 2: Priority sectors for disaster needs assessment (15 min)
Activity 3: Needs Assessment Cycle and Process (30 min)

Suggested Methods: Brainstorm, group exercise, power point presentation

Material: Flipchart, audio visual

Types of needs assessment and their focus (15 min)

Rapid assessment
Undertaken after a major upheaval, such as an earthquake or sudden population displacement, a rapid assessment gathers information on the needs and existing capacities of the affected population, possible areas of intervention and resource requirements. A
rapid assessment normally takes one week or less. It should be followed by a detailed assessment.

Detailed assessment
A detailed assessment may be carried out for any of the following reasons:
- a rapid assessment has been done, and more detailed information is required to enable recommendations to be made;
- the organisation is considering starting operations in a new area and requires detailed information to inform the decision;
- the organisation suspects that the situation is changing gradually (e.g. a slowly developing drought) and needs more information.

Detailed assessments generally take about one month but could take more or less time depending on the size of the area, the complexity of the issues and the resources available.

Continual assessment

Continual assessment takes place when the organisation has carried out a detailed assessment and is now operational in an area. It involves regularly updating information on the situation and seeking relevant feedback from the beneficiaries in order to facilitate decision-making on long-term activities. Effective continual assessment helps to spot when changes occur and, when they do, to initiate a rapid or detailed assessment. Information gathered during continual assessment is used as secondary information during rapid and detailed assessments.

Figure 3. The assessment cycle

	RAPID	DETAILED	CONTINUAL
Time	One week	One month	Ongoing
Info Access	Limited	Visits	Full access
Info Source	Secondary	Population	Local
Assumptions	High	Low	Medium
Team Type	Generalist	Specialist	+Local

Differences between the three types of assessment

All assessments are based on the same principle (the identification of vulnerabilities and capacities) and follow the same process (observation, interviews and collection of information). However, the way in which information is collected depends upon the type of assessment.

- **Number of locations visited**. Fewer sites are visited in a rapid assessment than in a detailed assessment, so it is important to choose the sites carefully.
- **Number of people interviewed**. Fewer people are interviewed in a rapid assessment than in a detailed assessment; within this constraint, it is crucial to consult as broad a variety of people as possible.
- **Assumptions**. In a rapid assessment, time in the field is short. In some cases, therefore, you will have to rely on assumptions. Assumptions are based on previous experience of similar emergencies and knowledge of the affected area. In a detailed or continual assessment, there is more time in the field and less need to rely on assumptions.
- **Secondary information**. In a rapid assessment, there is less time to collect first-hand information, so more emphasis is placed on secondary information.

Priority Sectors for assessment (15 min)

- Ask each group to discuss and come out with at least 5 priority sectors for disaster needs assessment. (5 min)
- Then show and explain the figure below (10 min)

Needs Assessment Cycle (15 min)

- Ask Participants to identify the main steps of Project Management Cycle
- Comment that assessment and analysis is an essential part before any plan or implementation.
- Then compare the PM Cycle to a typical Disaster Response Cycle. There are common elements.
- Tell participants that this session focuses on Assessment and the process involved in doing assessments.
- Show the diagram with the 5 steps of assessment cycle

Figure 1   The project cycle

Identify information, needs and resources

Collect data

Analyze and interpret

Report conclusions

Design/modify disaster response
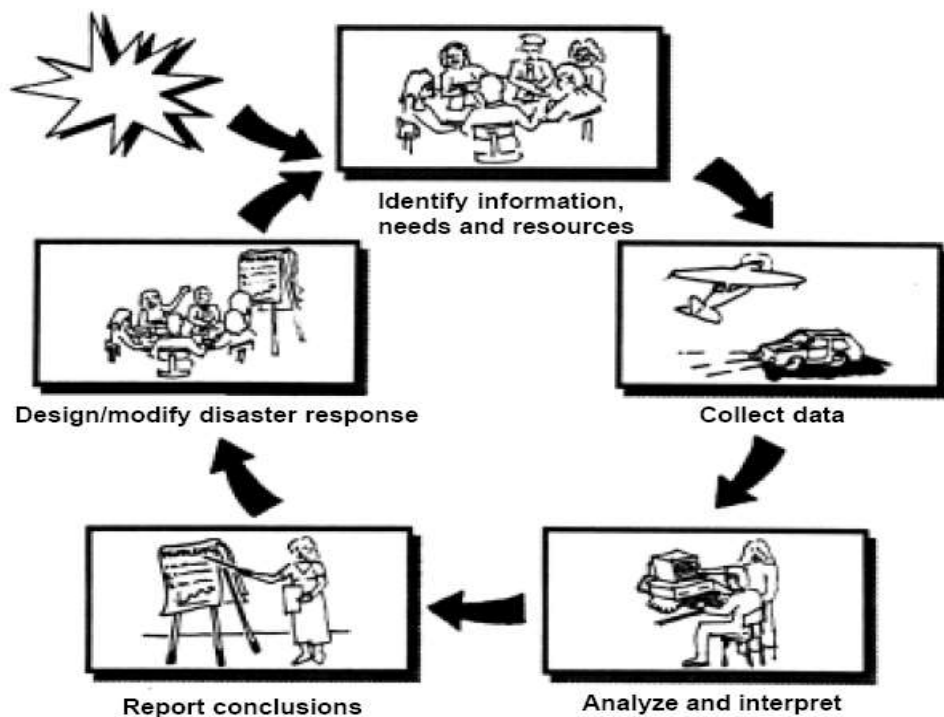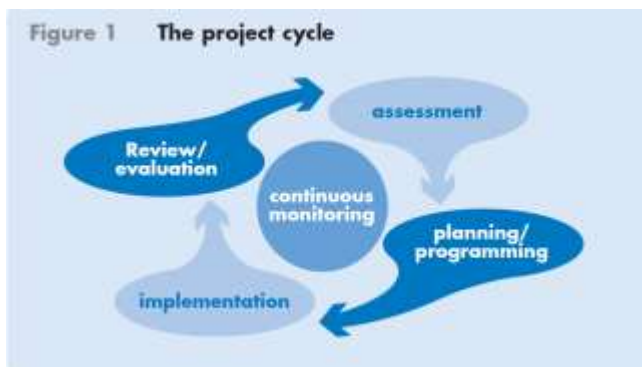
Needs Assessment Process (15 min)

Assessment should be looked at from two perspectives: the process and the content (see Figure 4).
The assessment process is the way in which an assessment is conducted.
It sets out the various steps or methods that should be applied in order to help the quality of the work and the outcome.

There are three major phases of an assessment process:
- Before the field visit;
- During the field visit;
- After the field visit.

Although the assessment per se is done in the field, the work carried out before and after the field visit is of equal importance and will have a clear impact on the overall quality of the assessment. Figure 5 illustrates the assessment process. Bear in mind that certain activities do not necessarily progress in a linear fashion. "Analysis" and "secondary information review", for example, should be done continuously throughout the process.

Figure 4   Process and content of an assessment

Figure 5   The assessment process
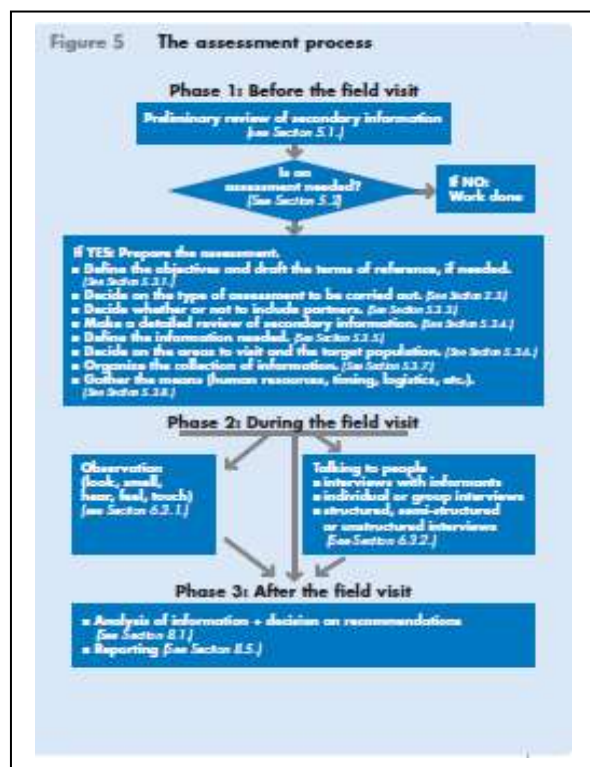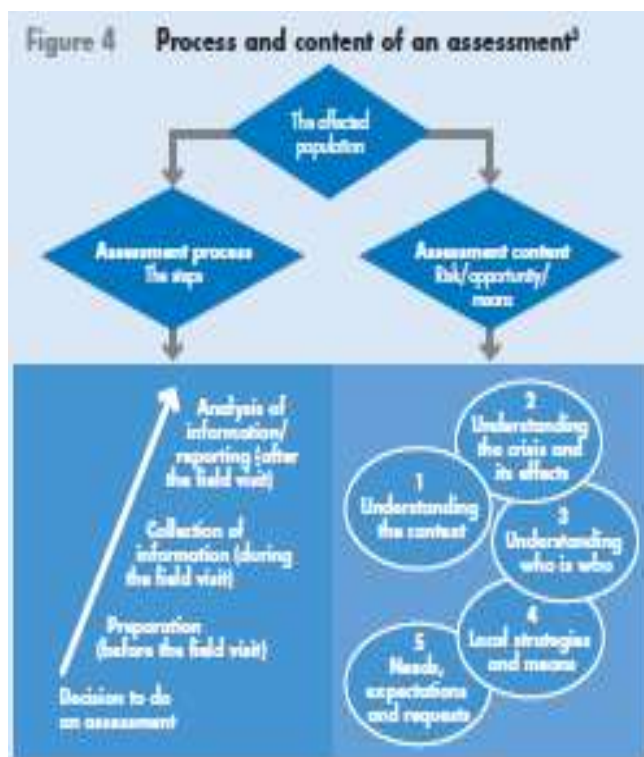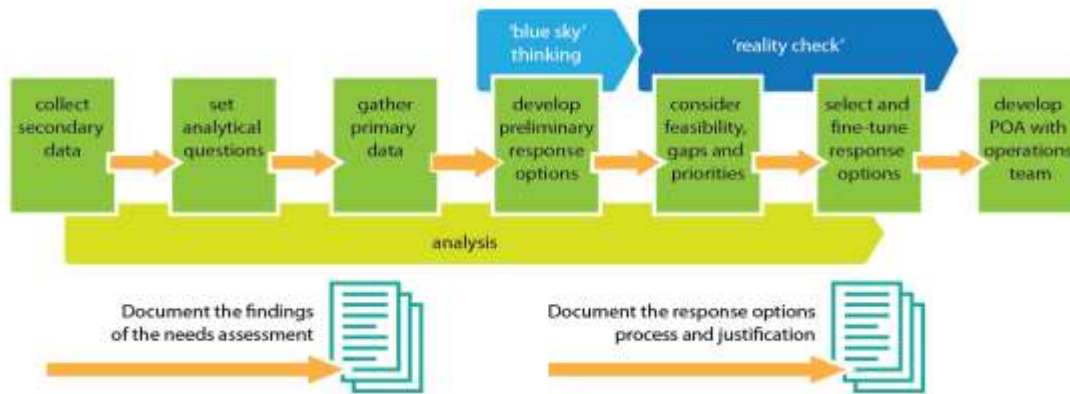
Another way of looking at the assessment process is the above 7 steps. As shown above there should be good documentation of the findings of the needs as well as the response process options so that while putting the Plan of Action (PoA) there is good justification why certain response options were prioritised over others. The blue sky thinking method is utilised in the 4th step of the process in order to cover as many response options as possible and the reality check is done in order to determine which interventions are within the capacity of the response agency and which are feasible.

Considering the process and content of a typical needs assessment, below are some of the activities that will be needed to carried out for needs assessment

1. Review existing information
2. Coordinate with others
3. Identify stakeholders and vulnerable groups
4. Decide what information to collect
5. Prepare for fieldwork
6. Select the areas to visit
7. Choose tools and methods
8. Gather the information
9. Analyse the information
10. Consolidate and validate the findings
11. Conclude and make recommendations

Exercise: The above 11 activities can be cut into individual pieces and given to each group. Each group has to arrange the activities into a logical order for them to understand the flow of activities. Time: **5 min.**

Assessment Information Collection Methods & Tools

Duration: 120 minutes

Purpose: To increase participant's knowledge and skills in information collection methods and assessment tools.

Learning Objectives: Participants are familiar with different approaches and methods to collect information
Participants are able to identify typical assistance needs for different hazards

Suggested Activities: Activity 1: familiarisation with different approaches and methods to collect information and tools (45 min)
Activity 2: Exercise to identify typical assistance needs for different hazards (85 min)

Suggested Methods: Power Point Presentation, Group Work

Material: Case study, Audio Visual

How to collect information: 20 min

Information is collected through observation and interviews. It can also be done through sampling and secondary sources.

Observation
Observation is often underrated as an information source. An enormous amount of information can be gathered very quickly through observation. Crucially, it gives a "feel" for the situation – sounds, smells and visual impressions. This is, after all, the point of going to the field. Guiding principles of observation include:

- Start the assessment with a walk around the location. During the assessment take the opportunity to observe as much as you can. If you are discussing water, ask to see the water source. If people describe a foodstuff that you do not know, ask to see (and taste) it. You can learn a lot by spending time in communal meeting places (cafés, tea shops, etc.). Look around and talk to people.
- Observation is useful for cross-checking information. For example, you are told that all the livestock has been lost in the recent drought. Soon afterwards you see a large herd of goats. This does not necessarily contradict what you have been told – many explanations are

possible – but it does provide the basis for the next line of questioning: "Who do these animals belong to?", "How did they survive the drought?", and so on.

- Walking through the area with local people facilitates discussion. The atmosphere is informal, and questions are prompted by the things you see. This is more natural than referring to a prepared checklist. Very importantly, walking and observing are excellent ways to come upon unexpected information.
- Observation is the most straightforward approach to assessing infrastructure and logistics. Driving along a road is a sure way of finding out if it is passable (but be careful in conflict areas: both landmines and explosive remnants of war may represent security problems).
- Ultimately, one piece of advice covers all situations: Be curious!

On-Site Visual Inspection Tasks
- Observe people's physical condition and activities; ask questions
- Visit homes or shelters, water sources, clinics, distribution centres
- Observe children, the elderly and the sick
- Observe the daily lives of women (use women as interviewers)
- Observe the services, vehicles, sanitation systems
- Make sketches, take photographs or use videos. Photos, video footage and even hand sketches are extremely useful in communicating to others the reality of the situation.

Interviews
Interviews are the backbone of a field assessment. Each piece of information sought should be looked at from three perspectives:

- Who is (are) the best person(s) to talk to regarding this particular information?
- Is it better to talk to the person(s) individually or in a group?
- Which type and technique of interview should be used?

Choose whom to talk to.
Key informants are people who have specific knowledge about certain aspects of the community. They are useful sources of information in rapid onset emergencies where time is limited. Typical examples include farmers, health workers, government officials, members of women's groups, children and young people, local NGO staff, and traders. But anyone who has an interesting perspective and is able to express it well can be included. Look out for such people throughout the assessment. Key informant interviews are based on the specific knowledge and experience of the informant. If the interviewee is a doctor, the discussion will probably focus on health issues. However, keep in mind that:

- The fact that the informant is a doctor (or an engineer or any other profession) does not mean that he or she is knowledgeable about all aspects of a topic; a hospital surgeon may know little about primary health care issues in rural areas.
- Professional people, because of their social position and contacts with other professional people, may have a good knowledge of the political and social environment and may be able to provide information that goes beyond their field of work.

You will need to use your judgement in order to decide what sort of information the informant can usefully provide. Start the interview with general topics, and then move on to specific areas of interest.

Decide whether to conduct group or individual interviews.
Interviews may be conducted with groups or individuals.

Group interviews allow interaction between people. By encouraging an atmosphere of constructive debate, you can cross-check information and probe issues. For example, one person may say that the most serious problems relate to the quality of health services, but others may not agree. A debate, even if it is inconclusive, can give you an impression of the diversity of problems that affect the community. Group interviews are useful for two purposes:

- To gather information about a wide range of topics. Assemble a group of people with different backgrounds who, together, can provide a overview of the situation.
- To gain a deeper understanding of particular issues (cash-crops harvest results, functioning of health services for livestock, etc.). In this case, a group of people with similar backgrounds is useful. This type of interview is called a "focus group interview".

When carrying out group interviews, be aware that:

- Some people are naturally more outgoing than others.
- Some people are confident within a group because of their status in local society. Conversely, people from marginalized groups may be reluctant to speak openly, particularly if their views are controversial.

Encourage a relaxed, informal atmosphere; seek the opinions of those who are reluctant to speak. "Manage" the more confident people so that they do not dominate the discussion.

Individual interviews are useful for three purposes:

- To obtain technical information from people representing specific professions, such as health workers or employees of the water board.
- To gain specific knowledge about a household's livelihoods.
- To delve into sensitive issues that are not appropriate for group discussion (e.g. sexual abuse among refugee populations).
- To save time, when there is not enough time to organize a group interview.

Select the type of interview to conduct.
An interview can be semi-structured (checklist), structured (questionnaire) and unstructured (no points prepared in advance). Semi-structured interviews are advised as they are the best way to get good information. With the help of the checklist, you will be able to cover all the points that you want to raise, while remaining flexible to allow the discussion to take a different direction if need be.

Semi-structured interview
A semi-structured interview is one in which the interviewer selects a few key topics to be addressed and remains open to other possibly relevant topics arising in the course of the discussion.

Structured interviews
Structured interviews or questionnaires are not included in these guidelines because they are not very useful in general assessments. Situations are often highly uncertain, and a flexible process of assessment is required. Questionnaires are based on a fixed set of questions, defined before fieldwork begins. Moreover:

- Using questionnaires to examine complex and/or sensitive information can produce misleading information.
- The design of a good questionnaire demands technical expertise, experience and a good understanding of the context.

Questionnaires can supplement information obtained through semi-structured interviews and observation (particularly in technical fields such as water and sanitation). If a questionnaire is to be

used, it should be designed by a specialist in the relevant sector who has a good understanding of the specific emergency context.

Choose an appropriate interview technique.
Most interviews (both group and individual) are based on the vulnerability and capacity framework. Your aim is to understand the problems that people face and the ways in which they cope with them. Some problems are easy to identify, for example houses destroyed by floods; for others, such as the abuse of civilians during war, you may need to dig deeper. Even seemingly straightforward issues may turn out to be more complicated when examined closely.

When conducting a semi-structured interview, try to make the interviewee(s) feel relaxed. Refer to your checklist and look out for new information. Raise topics in different ways in order to crosscheck the information you receive.

Start with a general conversation about life in the area, things you see around you, etc. Do not lead straight into direct questions about problems because:
- This sets the wrong tone. You want to hear about positive as well as negative aspects of life in the community.
- Concentrating on problems gives the impression that your objective is to find out "what the Red Cross can give". This encourages people to present "shopping lists" of material requirements. People will inevitably bring up problems without being prompted.

When this happens, encourage them to explain their concerns and how they deal with them. It is normal for people to be reluctant or to find it difficult to explain every aspect of their coping strategies because:
- Some components are so integrated into their lifestyles that they do not see them as specific "strategies". For example, sharing resources between households.
- Individual components of their coping strategies may contribute very little and people do not think it important to discuss them. When all the "small" components are added together, however, they often make a significant contribution to livelihoods.
- Activities may be illegal, for example small-scale trading without a licence or scrap metal collection involving unexploded ordnance, and people are reluctant to divulge details to strangers. Nor are they likely to go into detail about activities such as prostitution, theft and sale of illicit items.
- People may deliberately withhold information in order to make their situation seem worse than it actually is in the hope that this will encourage the Red Cross to help them.

The above constraints emphasize the need for a subtle approach. Direct questions are not appropriate. Instead, probe the issues carefully by asking questions in different ways and looking for complementarities and contradictions in the information you receive. Be sensitive; if people are uncomfortable with your questions, do not insist.

Sampling
Sampling is a method by which a generalisation about an entire population is made based on the characteristics of a subset (or sample) of the population. Attributes or proportions of a population are estimated through interviews or surveys with a representative section or sample of the population. Information collected through sampling methods includes written questionnaires and interviews.
There are two types of sampling techniques: **probability and non-probability**. Probability sampling is based on rigorous statistical methods. It is expensive and time-consuming to implement and requires special training to be used correctly. **Non-probability** methods are commonly used and rely

on interviews with those who are most accessible (convenience sampling) or with individuals that are believed to be representative of the population of interest (purposive sampling).

Relying on secondary sources

National Societies will sometimes depend on government agencies, non-governmental organisations or community groups for their information. When relying on information provided by another organisation, it is important to carefully consider its accuracy and whether information from one source contradicts information from another. Especially, when using secondary data, check for consistency between multiple sources of similar data if possible. When evaluating assessment information, consider:

- Who did the assessment? What experience/expertise do they have in this area?
- How much time did the assessment team spend on-site? Did they visit the site?
- Whom did the assessment team interview? What important beneficiary groups did they fail to consider?
- If the assessment report contains statistical data, are they primary or secondary data? If they are secondary data, what is the original source? Does the team have the expertise to judge the validity of statistical information? If not, which experts should they consult?
- What is the possibility of a segment of the population (e.g. an ethnic, class, national, geographic, religious, or vulnerable group) being inadequately assessed?
- Considering the source of information, what biases may be reflected in the assessment findings?
- Does the NGO or government have an interest in presenting biased information?
- What are the government's interests in presenting biased information? Does the government's information appear misleading?

Minimising assessment bias

All data collection methods are subject to the problem of bias. Bias leads to misinterpretation of answers or mistaken analysis that draws conclusions from information which is not representative of the affected population. In the worst cases, programs based on biased information have caused harm to the populations they were meant to help and negatively affected agencies' reputations. Bias can result from leading questions (those which propose an answer), poorly worded or poorly understood questions, poor sampling techniques, or the particular bias of the assessors or reviewers. Specific forms of bias include:

Spatial bias

Issues of comfort and ease for the assessors determine the assessment site. Rather than travel into an area, the assessors conduct a "windshield" survey, never leaving the comfort or straying far from their truck.

Project bias

The assessor is drawn toward sites where contacts and information are readily available and may have been assessed before by many others.

Person bias

Key informants tend to be those who are in a high position and have the ability to communicate in a language known to the assessor. They may or may not be conscientious, insightful or respected by those they are purporting to represent.

Season bias

Assessments are conducted during periods of pleasant weather or areas cut off by bad weather go un-assessed. Thus, many typical problems go unnoticed.

Mandate or specialty bias

The specialty or mandate of the assessor blinds them to needs outside of his/her specialty. For example, a shelter specialist may primarily only assess shelter needs, neglecting nutrition and water needs.

Political bias

Informants present information that is skewed toward their political agenda. Assessors look for information that fits their political or personal agenda.

Cultural bias

Incorrect assumptions are made based on one's own cultural norms. Assessors do not understand the cultural practices of the affected populations.

Class/ethnic bias

Needs and resources of different classes of people or different ethnic groups are not included in the assessment. Local assessors may have this ethnic bias, or the key informants may only represent one social class or ethnic group.

Interviewer or investigator

Assessors may have a tendency to concentrate on information that confirms preconceived notions and hypotheses, causing them to seek consistency too early and overlook evidence inconsistent with earlier findings. Assessors may also exhibit partiality to the opinions of elite key informants.

Key informant bias

Biases of key informants are carried into assessment results.

Gender bias

Assessors only speak to men or male interviewers survey women, or vice versa.

Time of day or schedule

The assessment is conducted at a time of day when certain segments of the population may be over- or under represented

Sampling bias

Respondents are not representative of the population.

Being aware of different types of bias is the first step in minimising its impact on your assessment.

Triangulation

Triangulation is one method for minimising bias that requires the assessors to seek out, compare and correlate several sources of information. Triangulation is based on the principle that data must be obtained from at least two other known points (see picture below). Information for emergency assessments must come from different sources to provide a relatively accurate assessment of the situation.

Principle of Triangulation

Triangulation may be achieved through the use of different assessment techniques or approaches or by using different indicators of the same phenomenon and consulting different sources. The key to using different approaches is to find dissimilar methods or techniques that will not be subject to the same type of bias. Do not rely on a single method or a single measure of a problem. Triangulation can be applied to almost all aspects of the preparation and implementation of an emergency assessment.

Assessment tools: 25 min (5 min on theory; 10 min on mini exercise; 10 min on formats discussions)

Checklists, gap-identification tables, and questionnaires are assessment tools that can assist in conducting systematic emergency situation and needs assessments.

Checklists

Checklists are perhaps the easiest and most complete tools for a rapid initial assessment. A checklist is an abbreviated list that prompts assessors to remember key points and ask certain questions; they

can also be useful for documenting responses. (For examples of checklists, see attached "Rapid Needs Assessment Checklist" or the attached Sphere Sample Checklist for Initial Health Assessment)

Gap identification charts

Gap identification charts, illustrated in the following diagram, are used to organise information and highlight "gaps" between needs and resources in an emergency response.

Emergency response gap identification chart								
Emergency response needs	Affected Populations	Local Government	National Government	Civil Defence	Red Cross/ Red Crescent	Ministry of Health	United Nations Agencies	Other International organisations
Medical								
Public health								
Food								
Shelter								
Water								
Sanitation								
Clothing								

The emergency response needs are listed in the first column and the various emergencies response actors, including local populations, are listed in the top row. The table is completed by identifying the resources provided by the affected population and by governments and organisations responding to the emergency. Using this chart for analysis will help emergency responders ensure that emergency needs are met most efficiently and effectively.

Questionnaires

When conducting individual key informant or group interviews, the assessor may want to develop or use questionnaires. A questionnaire is simply a list of questions for an individual or group of people to answer orally or in writing. The recorded results are later tabulated and analysed. (See attached, "Sample Questions for a Survey of Family Needs.")

Assessment Formats

Different agencies utilise different ways of collecting and capturing information collected during an assessment process. A number of agencies including the Red Cross utilises formats or templates rapid assessments as well as detailed assessments. Some of the sample formats are attached.

Other Participatory Tools

There are many participatory tools that are commonly used by agencies when doing detailed and long term assessments. Some of the names of these tools are:
- Daily calendar
- Historical timeline
- Proportional piling
- Seasonal calendar
- Pair-wise ranking
- Stakeholder analysis
- Why-why tree

Participants who are interested in more information about these tools should look up the Needs Assessment Guide of the Red Cross.

Mini Exercise: Split the group into 5 groups
- General Information
- WASH
- Food
- Health
- Shelter

Ask each group to come up with top 5 questions that they would ask in each of the sectors they are given. After listening to the questions then share with the groups the assessment formats and have a discussion on the variety of questions that are there on the 24hr and 72hr formats.

Rapid Needs Assessment Checklist

Number of affected people requiring assistance – This figure will determine all other estimates and calculations, and therefore, needs to be established as precisely as possible.

Water needs. Ideally each person should be provided with 15 litres of potable water per day to cover drinking, cooking and personal hygiene needs. For hospitals the target is 100 litres per person per day for patients and staff. There should be one water point per 250 people and the maximum distance from any shelter to the nearest water point should be 500 metres. Each family should have two water collecting vessels of 10-20 litres, plus water storage vessels of 20 litres.

Shelter needs. If using tents, calculate one tent for 4-6 people—ideally of the same family. Decide whether you need summer or winter tents. Do they have to be waterproofed or coated? Can locally made emergency shelter be used instead? Is an extra roof for protection against heat or rain needed? Should a canvas floor be included? Are plastic sheets needed for roofing? If using public buildings, calculate 3.5 m2 of floor space for every person. Is shelter heating planned? If yes, with kerosene or diesel stoves?

Nutritional needs. A food ration ideally should provide a minimum of 2,100 kilocalories per person per day. The survival energy level for an adult is a minimum of 1,000 kilocalories per day. For supplementary feedings add what is needed to reach the total of 2,100 kilocalories per day, as well as special food to treat severely malnourished individuals. Monitor malnutrition using international standards (e.g. Sphere minimum standards) and methods such as weight-for-height, etc.

Sanitation needs – Maximum of 20 people per toilet. Use of toilets is arranged by household and/or segregated by sex. Toilets should be no more than 50 metres from dwellings or no more than a one minute walk. Toilets should be at least 30 metres away from any groundwater sources and the bottom of the latrine should be at least 1.5 metres above the water table. Containers or a system must exist for disposing of solid waste. One 100-litre refuse container should be available per 10 families where domestic refuse is not buried on site. Identify the need and methods for vector control (flies, rats, etc.)

Fuel needs. Access of people to firewood, coal or other fuel is often overlooked in needs assessments. There is no general rule for calculating the needs, since climate, traditions and quality of fuel vary considerably. Assessments should specify what type of fuel is appropriate, where to get it, how to transport and distribute it and an estimate of the need.

Health care needs. There should be approximately one small clinic per 10,000-35,000 people and there should be one referral hospital facility with surgical capacity for every 250,000-500,000 people. Mortality and morbidity should be monitored using generally accepted international standards and methods (e.g. Sphere minimum standards).

Sample Checklist for Initial Health Assessment

Sphere Project, adapted from CDC, 1992, "Famine-Affected, Refugee, and Displaced Populations: Recommendations for Public Health Issues."

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

Field assessment
- Determine the total disaster-affected population and proportion of children <5 years old.
- Determine the age and sex breakdown of population.
- Identify groups at increased risk.
- Determine the average household size and estimates of female- and child-headed households.

Health information
- Identify primary health problems in country of origin if refugees are involved.
- Identify primary health problems in the disaster-affected area if no refugees are involved.
- Identify previous sources of health care.
- Ascertain important health beliefs, traditions and practices.
- Determine the existing social structure and the psycho-social dimensions of the situation.
- Determine the strengths and coverage of local public health programmes in people's country of origin.

Nutritional status
- Determine the prevalence of protein-energy malnutrition (PEM) in population <5 years of age.
- Ascertain prior nutritional status.
- Determine hierarchical food allocation practices as they affect the nutritional status of women and different social and age groups.
- Determine the prevalence of micronutrient deficiencies in the population <5 years of age.

Mortality rates
- Calculate the overall mortality rate (crude mortality rate - CRM).
- Calculate the under-5 mortality rate (age specific mortality rate for children under five years old).
- Calculate cause-specific mortality rates.

Morbidity

Determine age and sex-specific incidence rates of major health problems and diseases that have public health importance, including sexual violence/rape.

Environmental conditions
- Determine climatic conditions; identify geographic features; ascertain local disease epidemiology; assess access to affected population; assess the level of insecurity and violence.
- Assess local, regional and national food supplies (quantity, quality, types), distribution systems, coordination and services of existing organisations, logistics of food transport and storage, feeding programmes and access to local supplies.
- Assess existing shelters and availability of local materials for shelter, access, amount of land and building sites, topography and drainage, blankets, clothing, domestic utensils, fuel, livestock, money.
- Identify and assess water sources, quantity, quality, transport and storage.

- Assess sanitation including excreta practices, soap, vectors and rats, burial sites.

Resources available

Identify and assess local health services including: access to facilities, health personnel, interpreters, types of facilities/structures, water, refrigeration, generators at facilities, drug and vaccine supplies.

Logistics

Assess transport, fuel, storage of food, vaccines and other supplies, communication.

Annex 3: Sample Questions for a Survey of Family Needs

These questions may be used to prepare surveys of post-disaster family needs. Responses to some questions should be referred to public health authorities or to the public works (or appropriate utility) department.

Survey Data

Name of respondent:

Pre-disaster address:

Post-disaster address:

Demographic Data

1. Family composition (indicate number)

        a. Head of household ____ _____

        b. Spouse ____ _____

        c. Number of teenagers (ages 13-18) living at home ____ _____

        d. Number of children (ages 1-12) living at home ____ _____

        e. Others living at pre-disaster address ____ _____

        f. Total people living at pre-disaster address ___ _____

2. Casualties (write in number)

        a. Number with minor injuries (first aid required?) _____

        b. Number with broken bones or seen by doctor (un-hospitalized) _____

        c. Number hospitalized _____

        d. Number killed _____

3. Have all survivors been located? Yes No

4. If no, how many are missing?

Water

5. Prior to the disaster, where did households obtain drinking water (circle all that apply)?

        a. Water line to house

        b. Well on property

        c. Public water faucets

        d. Public well

        e. River or stream

        f. Lake or reservoir

        g. Other

6. Where do you get your water now?

        a. Same place as noted in question 5

        b. Water tank truck provided by

        c. Temporary water tank serviced by

        d. Other

7. Does this water appear to be dirty? Yes ___ No __

8. Is your normal water supply working now?

        a. Yes, full-time

        b. Intermittently

        c. No, not at all

9. If paying for emergency water supply, how much are you paying and to whom?

        a. Amount per litre

        b. Paid to

10. Since, the disaster, has anyone in the family had

        a. Severe diarrhoea? Yes _____ No_____

        b. Vomiting? Yes _____ No_____

Food

11. Was the family able to recover food from their house? Yes _____ No ____

12. If yes, how long will it last?

        a. 1-2 days

        b. 3-7 days

        c. more than one week

13. Can you purchase adequate food from local markets? Yes ____ No __ __

14. If no, how much food do you estimate that you will need?

        a. 1-week ration

        b. 2-week ration

        c. more than 2-week ration

15. Was any member of the family receiving food from any of the following before the disaster?

        a. Government

        b. Church or Church Agency

        c. Red Cross/Red Crescent National Society

        d. Other?

Family goods

16. Remembering that many people need help, does the family require any of the following?

Type of goods Quantity

        a. Blankets

        b. Bedding

        c. Plastic Tarp

        d. Flashlights/lanterns

        e. Storage boxes

        f. Clothing for adult males

        g. Clothing for adult females

        h. Clothing for teens

        i. Clothing for children

Fuel

17. What type of cooking and heating fuel did you use before the disaster (circle all that apply)?

        a. Gas supplied by gas line

        b. Bottled gas

        c. Kerosene

        d. Firewood

        e. Other

18. If (a) or (b), is any gas leaking now? Yes No

19. If (a), has gas service been restored to your line? Yes No

Sanitation

20. What type of sanitary facilities did you have before the disaster (circle all that apply)?

        a. Flush toilet in dwelling

        b. Communal flush toilet in building

        c. Access to public toilets

        d. Bucket latrine

        e. Pit latrine (earthen)

        f. Other

        g. None

21. If (a) or (b), is the toilet working now? Yes No

Shelter needs

22. Will the family require assistance for any of the following (circle all that apply):

        a. Temporary shelter

        b. Building materials/tools for shelter

        c. Building materials/tools for housing repair

First 24 hours
Rapid field assessment form (B)

| Type of disaster: |
| GPS coordinates: |

1 Geographic area		Approximate number of inhabitants	
2 Community assessed		Approximate number of inhabitants	
3 Name of assessment team leader:		4 Name of contact person in the community and contact info:	
5 Date		6 Time	
7 Persons	# Injured	# Dead	# Missing
8 Homes affected	# Minor damage	# Moderate damage	# Destroyed
9 # of families (provide % if number is not possible within 4 hours)	Currently known displaced evacuated		Projected displaced evacuated
10 How are people being sheltered? Shelter/host families/ camps/other	Describe shelter situation		

Describe damage and access

| 11 Status of roads/ best way to access affected area | | |
| 12 Conditions/access of (as applicable): • Rail • Bridges • Water facilities • Sewage systems • Schools • Health facilities • Electricity • Telephones • Airport • Seaport | | Concerns for: Hazardous materials Toxic spills Oil spills Mines/ERW Other: |

(Observation) Describe livelihood losses

3 Effect on urban settings (if applicable):	Commercial buildings	Businesses/ factories	Government buildings
4 Brief description of livelihood groups and how they are affected (secondary information)			
5 What are the specific physical losses in agriculture? (if applicable)	Crops/gardens	Animals (e.g. livestock, poultry, etc.)	Tools
6 What are the specific physical losses in fishing? (if applicable)	Boats	Nets	Tools

7 Answer the following questions

Is the local government active in the disaster response? ☐ Yes ☐ No ☐ Don't know

Is the community responding to the disaster? ☐ Yes ☐ No ☐ Don't know

Are NGOs responding in the disaster area? ☐ Yes ☐ No ☐ Don't know Who?

Minor damage: Building can be safely occupied but needs minor repairs.
Moderate damage: Building cannot be safely occupied and requires major repairs.
Destroyed: Obviously destroyed and requires rebuilding.
Note: If necessary, sketch a map to show location.

First 72 hours
Field assessment form (B)

| Type of disaster: |
| GPS coordinates: |

1 Geographic area		Approximate number of inhabitants	
2 Community assessed		Approximate number of inhabitants	
3 Name of assessment team leader:		4 Name of contact person in the community and contact info:	
5 Date		6 Time	
7 Persons (Update)	# Injured	# Dead	# Missing
8 Homes affected (Update)	# Minor damage	# Moderate damage	# Destroyed
9 # of families (Update) (provide percentage if number is not possible within 4 hours)	Currently known displaced evacuated		Projected displaced evacuated

(Observation) Describe conditions

10 How are the means of communication functioning?
Land line, mobile phone, VHF, HF, etc.

11 Relief

What are the climatic factors?	Is the current shelter resistant to rain, wind, sun, cold?
What is the physical status of existing structures?	How many people lack adequate shelter?

What is the immediate risk to life?	What is the customary provision of clothing, blankets and bedding for women, men, children and infants, pregnant and lactating women, and older people?
How many are at risk?	
Which social groups are most at risk and why?	

What did a typical household used to have?

12 Food and nutrition

Is food available in the disaster area? ☐ Yes ☐ No What kind?	Is there enough food for the potential number of people potentially affected? ☐ Yes ☐ No Explain:
Is this food accessible to all the affected people, or do only a few have access?	Explain:
Do people have access to cooking facilities? Utensils: ☐ None ☐ Few ☐ Many Fuel: ☐ None ☐ Few ☐ Many Pots: ☐ None ☐ Few ☐ Many Other:	Do people have access to a safe place to prepare food and eat it? ☐ Yes ☐ No Describe:

What are people's dietary habits (main food products they normally consume)?

Are there specific groups that face difficulties in obtaining food in this site? If so, who and why?

13 Health

What was the health and nutritional situation of the people before the disaster? Explain:	Is there a health emergency? What is its nature? How is it likely to evolve?

How many people have been experiencing serious trauma or other psychological effects since the disaster?	Describe access and conditions to health facilities:

Is any disaster-related problem affecting health facilities?
Equipment:
Medicines:
Consumables:
Vaccines:
Number of staff:

What health activities should the Red Cross Red Crescent engage in to supply needs/resources?	Number and kind of specific health target/vulnerable population

14 Safety, security and protection

Have families been separated? threats? ❏ Yes ❏ No Approximate number: Has registration of affected people been undertaken? ❏ Yes ❏ No	Are there any potential security
Have families been separated? Numbers: Locations: Details of registration process: Are there unaccompanied minors?	Explain:
Restoring family links Is there any need for restoring family links? ❏ Yes ❏ No	Explain:
Are people subject to: Physical abuse: Sexual abuse: Gender-based or psychological intimidation: Insecurity: Discrimination: Are people taking risks or is access to basic needs blocked by weapon contamination (mines/ERW)?	Explain:

15 Water and sanitation

Is the incidence of diarrhoeal diseases above normal? Is it increasing or decreasing?			
Water supply Are people getting enough water for: Drinking ❏ Yes ❏ No Bathing ❏ Yes ❏ No Cleaning ❏ Yes ❏ No	Are people using unsafe water source as alternatives? Why?	How is water carried and stored in household?	Do people treat water at home by: Filtering ❏ Yes ❏ No Boiling ❏ Yes ❏ No Chlorinating ❏ Yes ❏ No
Excretal disposal Where do people defecate/urinate at present?			
Hand washing Are there adequate hand washing/bathing facilities at key points and are they used? Is soap or an alternative available?			

16 Sheltering

Impact on people's homes and key services: Houses: ❏ low ❏ medium ❏ high Water: ❏ low ❏ medium ❏ high Sanitation: ❏ low ❏ medium ❏ high Electricity: ❏ low ❏ medium ❏ high Health: ❏ low ❏ medium ❏ high Community centres: ❏ low ❏ medium ❏ high	**If homes have been severely damaged or destroyed, where are people living?** On the site of their former homes? ❏ Yes ❏ No Approximate numbers: With friends or family? ❏ Yes ❏ No Approximate numbers: In camps? ❏ Yes ❏ No Approximate numbers:

Do people use their homes for productive activities? ❏ Yes ❏ No Have they lost access to this space to produce goods? ❏ Yes ❏ No Are they unable to run small businesses? ❏ Yes ❏ No Has the disaster affected their productive activities? ❏ Yes ❏ No	**Did people use their homes to store:** Tools or equipment? ❏ Yes ❏ No Provide shelter or food for animals? ❏ Yes ❏ No How has the disaster affected this use? Explain:
Shelter requirements – factors: Need to resist heavy rain: ❏ Yes ❏ No Need to resist heavy wind: ❏ Yes ❏ No Need to resist hot weather: ❏ Yes ❏ No Need to resist cold weather: ❏ Yes ❏ No	**Describe the physical status climatic of shelters:**

17 Livelihoods

What are the main types of activities households use to make a living? (e.g. farmer with smallholding, office worker, wage labourer, remittances, a combination of activities, etc.)	What were the main sources of income and food prior to the disaster?
What are the main agricultural activities?	What has happened to households that run shops?
Who does what on the land and who owns it?	What were the main sources of income and food prior to the disaster?

Have communities lost key items (assets) that they need for their work (e.g. fishing or farming equipment, means of transport, tools or equipment, etc.)? Explain:

Have important environmental assets been damaged or destroyed which may affect people's future ability to make a living?	Briefly explain:

Update damage and access

11 Status of roads. Best way to access affected area		
12 Conditions/access of (as applicable): • Rail • Bridges • Water facilities • Sewage systems • Schools • Health facilities • Electricity • Telephones • Airport • Seaport		**Concerns for:** Hazardous materials Toxic spills Oil spills Mines/ERW Other:

17 Answer the following questions

a Is the local government active in the disaster response? ❏ Yes ❏ No ❏ Don't know

b Is the community responding to the disaster? ❏ Yes ❏ No ❏ Don't know

c Are NGOs responding in the disaster area? ❏ Yes ❏ No ❏ Don't know
Who?

Minor damage: Building can be safely occupied but needs minor repairs.
Moderate damage: Building cannot be safely occupied and requires major repairs.
Destroyed: Obviously destroyed and requires rebuilding.
Note: If necessary, sketch a map to show location.

Identify disaster needs for different types of hazards: 85 min (30 min for each exercise and 15 minutes to wrap up and questions)

Exercise # 1:
Make 7 small chits of paper with each one having a hazard written on them. Put them in a bowl and ask each table group to pick one.

- Earthquakes
- Volcanic eruptions
- Land instabilities
- Flood and water hazards
- Storms (typhoons, hurricanes, tropical storms and tornadoes)
- Chemical and industrial accidents
- Conflict related Displaced Population

Whatever hazards the group has chosen they will need to do the following:

List the typical assistance needs for that hazard. If any assumptions of a place/country are made then their solution should reflect that context.

Each group presents its findings.

Total time for Exercise: 30 min

Exercise # 2: "Planning Disaster Needs Assessments."
- Pass out the illustrated map of the **Town of Algansk** (before the earthquake)
- Give each person 3 minutes to read the Early Notification and to study the plan for the town of Algansk. Remind participants that this plan shows the town **prior** to the earthquake.
- At this point in time, this is all of the information that their Emergency Response Committee has on the earthquake and on the town of Algansk. Their job is to determine what additional information they need in order to plan and organise an effective response.
- Divide participants into two groups—Group A and Group B. Each group should appoint a chairperson. Tell them that they have 20 minutes to complete this exercise. They are also to prepare a 5-minute report which they will present to the larger group. Provide the groups with flip-chart paper on which to prepare their report.
- Work in small groups (20 minutes)
- Report back to the larger group (5 minutes each small group)
- Ask if there are any comments
- Summarise the main points, conclusions and lessons learned from this session

Total Time for Exercise: 30 min

Exercise 2: Planning Disaster Needs Assessment after an Earthquake

GROUP A

Earthquake Disaster in Algansk: Early Notification Report (issued 10 hours after the first major earthquake shock)
On February 12th, at 3:13 A.M. in the morning a major earthquake rocked the western part of the country primarily affecting the medium-sized town of **Algansk** with a population of 500,000. Authorities estimate that over 3,000 people have died and another 9,000 have been injured. Over 1,000 buildings and dwellings were completely destroyed and over 20,000 people are homeless.

PLEASE SEND RELIEF AID AS SOON AS POSSIBLE

Your Role
You are part of the national emergency response committee, which is responsible for planning emergency response measures from 72 hours up to ten days after a disaster. Please refer to the attached map of the town of Algansk that shows the city prior to the earthquake.

Before organising a response, your committee has decided to send a five-person Rapid Emergency Assessment Team to Algansk to collect information about the disaster situation and the specific emergency needs. Your committee is meeting to determine the specific information that the Rapid Assessment Team should collect and the methods they should use to collect it.

Group A is to:
A. Read the Early Notification Report and study the map of Algansk. Imagine all of the adverse effects and damage that the earthquake MAY have caused. (The first exercise and discussion, the illustrated map of the town of Algansk and section 7.1 of the module will assist you in completing this exercise.)
B. Make a list of the specific data and information that the Rapid Emergency Assessment Team must collect. To generate this list, your group might brainstorm answers to the question, "What exactly do we need to know about the disaster situation, the damage, and the emergency needs in order to plan and organise an efficient and effective response?"
C. Explain how this information will be collected.
D. Explain how each piece of information will assist your committee with planning its emergency response.

Specific Information Needs	**Why required for planning and organising an emergency response?**	**How will the assessment team collect this information? (Be specific)**

On flip-chart paper organise your list as follows:

E. Based on your knowledge of the typical adverse effects and potential emergency needs, who and what expertise should be on the five persons' Rapid Assessment Team? Write your team composition on flip chart paper.

Exercise 2: Planning Disaster Needs Assessment after an Earthquake

GROUP B

Earthquake Disaster in Algansk: Early Notification Report (issued 10 hours after the first major earthquake shock)
On February 12th, at 3:13 A.M. in the morning a major earthquake rocked the western part of the country primarily affecting the medium-sized town of **Algansk** with a population of 500,000. Authorities estimate that over 3,000 people have died and another 9,000 have been injured. Over 1,000 buildings and dwellings were completely destroyed and over 20,000 people are homeless.
PLEASE SEND RELIEF AID AS SOON AS POSSIBLE

Your Role
You are part of the national emergency response committee, which is responsible for planning emergency response measures from 72 hours up to ten days after a disaster. Please refer to the attached map of the town of Algansk that shows the city prior to the earthquake.

Before organising a response, your committee has decided to send a five-person Rapid Emergency Assessment Team to Algansk to collect information about the disaster situation and the specific emergency needs. Your committee is meeting to determine the specific information that the Rapid Assessment Team should collect and the methods they should use to collect it.

Group B is to:
A. Read the Early Notification Report and study the map of Algansk. Imagine all of the adverse effects and damage that the earthquake MAY have caused. (The first exercise and discussion, the illustrated map of the town of Algansk
B. Using the following categories, brainstorm a list of adverse effects and potential emergency needs that you might expect to find in Algansk following this earthquake. Use flip-chart paper to organise your presentation as follows:

Category	Possible Adverse Effects — Be specific	Potential Emergency Needs	Why? Cause?
Water supply			
Sanitation system			
Shelter			
Power and heating supply			
Food			
Roads, communication, bridges, infrastructure, schools			
Others			

C. Based on your knowledge of the typical adverse effects and potential emergency needs, who and what expertise should be on the five person Rapid Assessment Team? Write your team composition on flip chart paper.
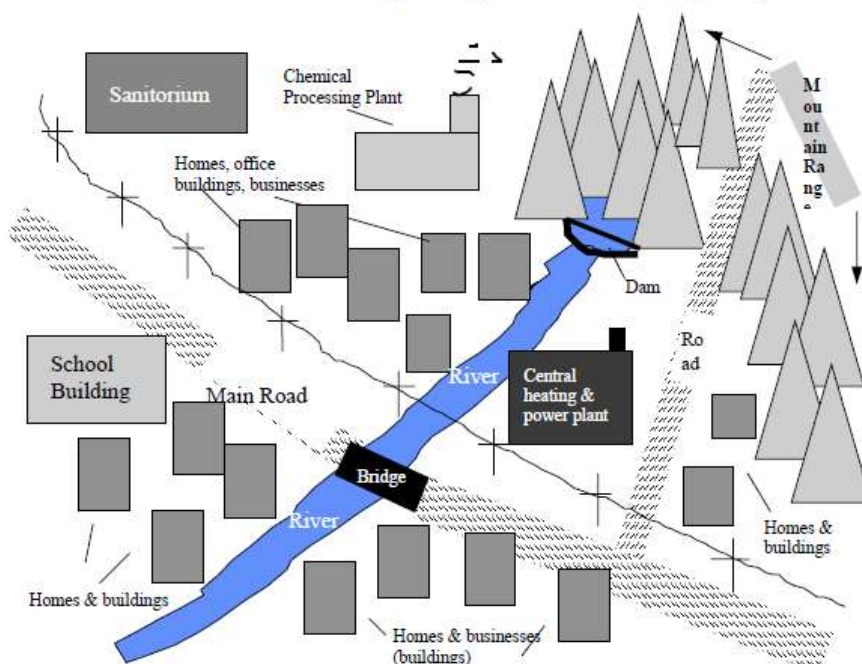
Some solutions for Exercise 1

Earthquakes

General characteristics
Shaking of earth caused by waves on or below the earth's surface causing: surface faulting; aftershocks; tsunamis; tremors, vibrations; liquefaction; and landslides

Typical adverse effects
- Physical damage—Damage or loss of structures or infrastructure.
- Fires, dam failures, landslides, flooding may occur.
- Casualties—Often high, particularly near epicentre, in highly populated areas or where buildings are not resistant.
- Public health—Fracture injuries most widespread problem.
- Water supply—Severe problems likely due to damage to water systems, pollution of open wells and changes in water table.
- Secondary threats due to flooding, contaminated water supply, or breakdown in sanitary conditions.

Typical disaster assistance needs
The immediate impact of an earthquake affects all sectors of a community. Local authorities should initially emphasise **search and rescue** assistance. Emergency medical assistance must be provided, especially during the first 72 hours. An **emergency situation and needs assessment** should be conducted during the first 36-72 hours. Finally, the survivors will require relief assistance such as food, water, and emergency shelter. Attention should be given to re-opening roads, re-establishing communications, contacting remote areas and conducting disaster assessments. At the end of the emergency period, long-term recovery needs to take priority. The post earthquake period presents an opportunity to minimise future risks through enactment or strengthening of land use and building codes as rebuilding takes place. The focus should be on:

- Repair and reconstruction of water, sewer, electrical services and roads
- Technical, material and financial assistance for repair and reconstruction of houses and public buildings (preferably by incorporating earthquake resistant techniques)
- Programs to rejuvenate the economy
- Financial assistance for loans to individuals and businesses for economic recovery

Mud and debris flows

General characteristics

Mud and debris flows can arise as a result of heavy storms, abundant rains, breaks of mountain (usually glacial) lakes, or in hot weather as a result of intensive glacier melting. This is a process whereby considerable mud flows are carried out along the bottom of mountain valleys. Very often debris flows cut off rivers. When this occurs, a dam may form resulting in flooding upstream. A break in this dam, however, may cause flooding down the river stream.

Typical adverse effects

- Physical damage—Everything in the path of debris flows is usually destroyed, including roads, bridges, electric lines, and constructions. Often irrigation nets are destroyed and agricultural areas are covered with silt.
- Casualties—People in the path of a mud flow may perish. In addition, people may be lost and injured as a result of secondary floods.

Typical disaster assistance needs

In the direct impact area of mudslides, there may be a need for search and rescue of victims. In isolated locations there may be a need to use special equipment. Emergency shelter may be required for those whose homes have been lost or damaged. Secondary effects of mud flows, such as flooding, may require additional assistance measures.

Landslides
General characteristics

Landslides vary in types of movement (falls, slides, topples, lateral spreads, flows), and may be secondary effects of heavy storms and earthquakes. Landslides are more widespread than any other geological event.

Typical adverse effects

- Physical damage—Anything on top or in the path of a landslide will suffer damage. Rubble may block roads, lines of communication or waterways. Indirect effects may include loss of agricultural or forest land productivity, flooding, reduced property values.
- Casualties—Fatalities have occurred due to slope failures. Catastrophic debris flows and mudflows have killed many thousands.

Typical disaster assistance needs

Needs for the direct impact area of a landslide include search and rescue equipment and personnel, and possibly use of earth removal equipment. Emergency shelter may be required for those whose homes have been lost or damaged. Experts trained in landslide hazard evaluation should be consulted to determine whether slide conditions pose an additional threat to rescuers or residents. If the landslide is related to an earthquake or flood, assistance to the landslide-affected area will be part of the total disaster assistance effort.

Volcanic eruptions
General characteristics
Types of volcanoes are cindercones, shield volcanoes, composite volcanoes and lava domes. Magma flowing out to the surface is lava and all solid particles ejected are tephra. Damage results from the type of material ejected such as ash, pyroclastic flows (blasts of gas containing ash and fragments), mud, debris, and lava flows.

Typical adverse effects
- Settlements, infrastructure and agriculture—Complete destruction of everything in the path of pyroclastic, mud or lava flows, including vegetation, agricultural land, human settlements, structures, bridges, roads and other infrastructure. Structures may collapse under the weight of wet ash. Transportation by land, sea and air may be affected.
- Crops and food supplies—Destruction of crops in path of flows, livestock may inhale toxic gases or ash, grazing lands may be contaminated.
- Casualties and health—Deaths from pyroclastic flows, mud flows and possibly lava flows and toxic gases. Injuries from falling rock and burns, respiratory difficulties from gas and ash. Fracture injuries are the most widespread problem.

Typical disaster assistance needs
Response to a volcanic eruption must be swift and efficient. Effective warning systems must be in place. Initially, local authorities must ensure that the area is evacuated and medical care is provided to victims. Search and rescue will also be important. Feeding and shelter is normally required and may be assisted by donations or personnel from foreign sources. The secondary response by local authorities involves relocating victims and providing financial assistance for replacement housing, agriculture and small businesses. Volcano disasters occasionally require temporary shelters, but more often, large volcanoes such as Ruiz, Pinatubo, and Mt. St. Helens, continue to erupt in a manner that threatens large populations for months to years. This may necessitate permanent resettlement of residents or long-term emergency settlements. Emphasis should also be placed on re-establishing infrastructure and communications that have been damaged or disrupted. Cleanup of ash is an important step in the recovery process. Volcanic ash makes excellent foundation material for roads, runways and building sites.

Tsunamis
General characteristics
Tsunami waves are barely perceptible in deep water and may measure 160 km between wave crests. They may consist of ten or more wave crests and can move up to 800 km per hour in deep ocean water, diminishing in speed as they approach the shore. They may strike shore in crashing waves or may inundate the land. Whether or not there is severe flooding will depend on the shape of the shoreline and tides.

Typical adverse effects
- Physical damage—The force of water can raze everything in its path but the majority of damage to structures and infrastructure results from flooding. Withdrawal of the wave from shore scours out sediment and can collapse ports and buildings and batter boats.
- Crops and food supplies—Harvests, food stocks, livestock, farm implements and fishing boats may be lost. Land may be rendered infertile due to salt water incursion.
- Casualties and public health—Deaths occur primarily by drowning and injuries from battering by debris.

Typical disaster assistance needs

Initial local responses include:

- o Implement warning and evacuation procedures (before the event)
- o Perform search and rescue in the disaster area
- o Provide medical assistance
- o Conduct disaster assessment and epidemiological surveillance
- o Provide short-term food, water and shelter

Secondary responses include:

- Repair and reconstruct buildings and homes
- Provide assistance to agricultural areas.

Floods

General characteristics

There are several types of floods:

Flash floods—accelerated runoff, dam failure, breakup of ice jam

River floods—Slow buildup, usually seasonal

Coastal floods—Associated with storm surges, tsunami waves, tropical cyclones

Typical adverse effects

- Physical damage—Structures damaged by washing away, becoming inundated, collapsing, and impact of floating debris.
- Casualties and public health—Deaths from drowning but few serious injuries. Possible outbreaks of malaria, diarrhoea and viral infections.
- Water supplies—Possible contamination of wells and groundwater. Clean water may be unavailable.
- Crops and food supplies—Harvests and food stocks may be lost due to inundation. Animals, farm tools and seeds may be lost.
- Secondary threats due to landslides from saturated soils and debris flows. Damage greater in valleys than open areas.

Typical disaster assistance needs

The initial response to flooding by local authorities should include:

- Search and rescue
- Medical assistance
- Disaster assessment
- Short term food and water provision
- Water purification
- Epidemiological surveillance
- Temporary shelter

Tropical cyclones
General characteristics

When the cyclone strikes land, high winds, exceptional rainfall and storm surges cause damage with secondary flooding and landslides.

Typical adverse effects

- Physical damage—Structures lost and damaged by wind force, flooding, storm surge and landslides. Erosion could occur from flooding and storm surges.

- Casualties and public health—Generally there are relatively few fatalities but there may be numerous casualties requiring hospital treatment. Storm surges usually cause many deaths but few injuries among the survivors. Injuries that do occur may be caused by flying debris or flooding. Contamination of water supplies may lead to viral outbreaks and malaria.
- Water supply—Open wells and ground water may be contaminated by flood waters and storm surges. Normal water sources may be unavailable for several days.
- Crops and food supplies—High winds and rain can ruin standing crops, tree plantations and food stocks. Plantation crops such as bananas and coconuts are extremely vulnerable.
- Communication and logistics—Severe disruption is possible as wind brings down telephone lines, antennae and satellite disks. Transport may be curtailed.

Typical disaster assistance needs
The initial response by local authorities, organisations and population will include:
- evacuation and emergency shelter
- search and rescue
- medical assistance
- provision of short term food and water
- water purification
- epidemiological surveillance
- reestablishment of logistical and communications networks
- disaster assessment
- brush and debris clearance
- provision of seeds for planting

Chemical and industrial accidents
General characteristics
Chemical and industrial accidents release hazardous (toxic) substances into the environment. These accidents may occur when trains carrying chemicals derail, when trucks overturn, when pipelines rupture releasing dangerous chemicals and gases into the environment, and when chemical or nuclear power plants develop accidental leaks and releases. Hazardous substances released into the air or water can travel long distances.

Typical adverse effects
- Physical damage—Damage or destruction may occur to structures and infrastructure. Transportation accidents damage vehicles and other objects on impact. Industrial fires may reach high temperatures and affect large areas.
- Casualties—Many people may be killed or injured and require medical treatment
- Crop, livestock and food supplies—May contaminate crops, food supplies and livestock.
- Environmental—Contamination of air, water supply, and land may occur. Areas may become uninhabitable. Ecological systems may be disrupted even on a global scale.

Typical disaster assistance needs
In the event of a chemical disaster, medical and emergency teams should remove all injured persons from the scene of the emergency. All persons should leave the area unless protected by special equipment. They should stay away until safe return to the area has been determined and announced to the public. In the case of water contamination, alternate sources have to be provided. Clean up of the effects of the disaster may require more resources than are locally available; international emergency assistance may be required. The affected areas should be monitored continually following the disaster. Thorough investigation and documentation of the emergency must occur.

Displaced populations
General characteristics
Displaced populations may include people settling in temporary settlements or camps after a mass population movement; non-combatant individuals and families forced to leave their homes due to consequences of conflict but who remain inside their country; people expelled or fleeing a country, especially as an ethnic or national group, forced out for economic or political reasons; and people forced to leave their homes as a result of drought, famine, or other disaster, usually in search of food.

Typical adverse effects
Loss of means of livelihood, loss of normal sources of food, lack of fuel for cooking, lack of potable water, communicable diseases and overcrowding, possibly large numbers of unaccompanied children, lack of shelter and household necessities

Typical emergency needs
While needs will vary according to the situation, in general they will include:
- Water supply and sanitation
- Short-term and long-term food distributions
- Nutritional and epidemiological surveillance
- Emergency shelter
- Blankets, household fuel, and other household goods Medical supplies, immunisation, public health
- Community social services, especially for unaccompanied children
- Tracing, protection and security

Reference Material –
    3.   PowerPoint Presentation '3. Assessment in Emergencies'

Roles, Responsibilities and Management of CFMR

Objective   :   To make aware FMRs about their role, responsibilities and FMR management mechanism.

Content   :

Role and responsibilities of First medical responders in the Disaster Response
Always be prepared to respond to any incidence posing threat to life of people using FMR skills imparted by RC.
- Do your best to preserve life of individuals before the medical assistance has reached.
- Keep your knowledge updated
- Participate in refresher courses and mock drills
- Get familiar with the Disaster response/contingency plan of the IRCS District/Sub District branch
- Ensure that your contact details are updated in IRCS database
- Keep your response kit always ready

Maintenance of the First medical responders
- District branches will organise refresher course for FMRs. FMRs should ensure that they participate in these trainings to refresh their knowledge.
- FMRs will be (and should be) deployed Regular deployment for emergency response/involved in regular RC activities.

Communication
- In times of disasters information sharing is a challenge. The First Medical responders should gather information from all the available secondary resources about the occurrence of disaster /incidence and act immediately.
- The gathered information should be shared with the fellow FMRs through the available means as well as with the district/sub district branch.
- District/sub district branch should disseminate the information about the incident to all FMRs in the district.

Linkages between IRCS District/sub District branch, FMRs and District level DM Structure with district administration
In order to respond to the emergencies without any delay and to avoid hindrance in the service delivery at site of incidence, strong linkages are required to be built between FMRs, IRCS District/Sub District branch and district administration. This will facilitate quick information sharing and response by FMRs. The database FMRs should be shared with the district administration and advocacy may be done at the district level to link FMRs the District administration's contingency plan.

First medical Responder Service component
Following are the service components of First Medical Responders
    - First Aid

- Psychosocial support
- Emergency WATSAN

First Medical Responders Tools

FMRs will be using following tools to deliver services as a first responder and at the later phase of the operation:
- First Aid kit
- WATSAN KIT 2

Standard operating procedures of FMR

Each District branch should have standard operating procedures for the first medical responders for the following phases of operation:
- Pre deployment
- During Deployment
- Post Deployment

Group work on Role, Responsibilities and Management of First Medical Responders:

Participants will be divided in four groups. Each group will be asked to discuss and answer the following questions. At the end of the exercise, each group wil present their answers.

1. As a first medical responder how do you define your role in Disaster Response? (10 min)
2. Following emergencies how will you initiate your work as first medical responder? (10 min)
3. As a first medical responder what are the service you will deliver to the people affected by disaster? (10 min)
4. What tools do you need to respond to the disasters? (10 min)
5. What activities you will carry out pre and post disasters? (10 min)

10 min for each group to present

Session plan   :

Time	Topic	Methodology
90 min	Group Work	Participants will be divided in four/five groups. Each group will discuss given five questions within their group and come up with answers. Each group will get 50 min for this exercise. Each group will write their answers on flip charts for presentation. 5 minutes will be given to each group for presentation which will be followed by Q&A.

Key Message: It is not just about one time training, FMRs are required to update their knowledge and be ready all the time with their tools to respond to emergencies in coordination with the district authorities.

Reference Material –

    4.   **PowerPoint Presentation '4. Roles Responsibilities and Management of CFMR'**

Coordination Mechanisms

Objectives : What the participants should understand, know or be able to do by the end of the session]

By the end of the session the participants will:

- ✓ Understand what Coordination means and its importance
- ✓ Be clear on the different options to set up coordination mechanism
- ✓ Understand how to use a stakeholder mapping and a gap analysis to improve coordination

Session Plan

1. What is coordination and why is it important: 15 min
2. Different options to set up coordination mechanism: 10 min
3. Stakeholder Mapping Exercise and Gap Analysis: 35 min

Methods

- ✓ Presentation
- ✓ Group Exercise

Session Duration

1 Hour

Reference Materials/Tools

Materials to be distributed to participants:

Presentation; Handout Tips on Coordination

Key Messages

- Good Coordination among humanitarian actors or responders is essential for a coherent response to emergencies

- Humanitarian coordination seeks to improve the effectiveness of humanitarian response by ensuring greater predictability, accountability and partnership.

- Operational coordination in crisis situations such as assessing situations and needs; agreeing common priorities; developing common strategies to address issues such as negotiating access, mobilizing funding and other resources; clarifying consistent public messaging; and monitoring progress leads to better impact

- There are several mechanism by which coordination can be improved such as pre-disaster meetings, preparedness/contingency planning, training on response tools and assessments, information sharing on early warning, hazard mapping and best practices

- It is important to be inclusive of all stakeholders while responding to needs and be aware of gaps in the response

Session description/Content

[As much detail as you have on the nature of the session e.g. points to be discussed in plenary, description of a group exercise, presentation outline etc.] – see attached

What is coordination and why is it important: 15 min

- **Ask participants what they understand by the term coordination. Then show them the definition being used below:**

  - **Co-ordination** is a process through which actors involved in humanitarian response, work together in a logical and concerted effort towards an agreed common end (namely to protect those affected, save lives and help resume normal activities), and in order to ensure maximum efficiency with the resources available

  Source: Interagency Standing Committee quoted in, Handbook for coordination: Working together in international disaster response (updated March 2010)

- **Ask Participants to "shout out" who they think they should coordinate with. Once a number of answers have been given display the slide as a summary**

  > External
  > - National government
  > - local authorities
  > - United Nations
  > - International and National non government organisations
  > - others
  > Internal
  > - RC/RC Movement partners

- **What can Coordination achieve or why is coordination important?**

  > Strong coordination will ensure:
  > - Greater impact through a focus on a common goal
  > - Avoiding duplication through sharing information and coming to agreement on who is doing what where.
  > - Savings in time and money through more efficient ways of using resources.
  > - Ensuring consistency between organisations working with the same communities.

- **Aim of coordination**

  - **Internally:** this should involve planning together to be IRCS wide in policy and approach, whilst the Branch is at the centre bringing these efforts together.
  - **Externally:** this should lead to joint planning, joint assessments and the sharing of data in order to avoid duplication and maximise use of resources.

- **Coordination Principles**
    - IRCS – at both local & national levels – should endeavour to take into account assistance being provided by other national and international organizations.
    - IRCS may have to respond to disaster that are beyond their capacities and should therefore make preparations for receiving and managing international assistance provided by International Federation.
    - IRCS should endeavour to conclude agreements on future mutual assistance in the event of disaster, with sister societies from neighbouring countries.
    - The IRCS NHQ shall endeavour to negotiate pre-disaster arrangements with the Branches from the most disaster-prone states, aimed at enhancing branch disaster preparedness activities.

Different options to set up coordination mechanism: 10 min

- **Build Capacity for Coordination**
    - Create FMR Teams in all states where not already in existence for preparedness and response activities, recognising that State Governments need to be brought on board.
    - Strengthen coordination at national, state and district levels in at-risk areas. Approach NGO partners and local government for partnerships to share coordination load. Identify and explore Standby Partner Agreements (SBAs) for emergency stand-by or surge coordination capacity
    - Ensure up-dated CPs with clear and agreed coordination arrangements in all states, approved by the SDMA. Use the contingency plan to review and reallocate resources for coordination of FMR activities as appropriate.
    - Set up info sharing portal to allow FMR Coordinators/Leaders to share info/gaps/strategies between states
    - Promote use of the 'One FMR Approach' or standardised approach with SDMA as part of preparedness and response.

- **Build Good Information Management Platform**
    - Have in place common assessment formats
    - Have in place baseline information of high risk areas
    - Have regular meetings and trainings for FMR volunteers
    - Have in place contact lists and information of FMR volunteers

- **Promote a culture of joint planning and collaborative initiatives**
   - Be open to learn and share from other agencies experience
    - Collaborate where possible through joint activities (eg. Training)
    - Establish relationship with private and public sector services and infrastructure agencies (eg. Railways, Airlines, Telecoms, Postal, Freight, etc)

Stakeholder Mapping & Gap Analysis: 35 min

Exercise:
➢ In groups…prepare a diagram with post-its and poster paper identifying key stakeholders during an emergency - draw links between the stakeholders, affecting humanitarian

response. Each group can have a different disaster (eg. Earthquake, Floods, Tsunami, Conflict). Time **25 min**.
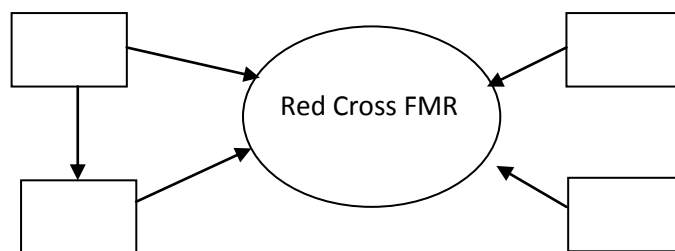
Some examples of stakeholders or actors
- Host Government/Local Govt
- INGO
- Local NGO
- UN
- Donor
- Civil Military (CIMIC)/Civil Defence
- Media
- Private Agencies
- Beneficiaries or Affected People?

The stakeholders or actors can also be divided into the following categories
- o Internal Actors on the ground
- o External Actors on the ground
- o External Actors not permanently present but which influence humanitarian response

Main points:
Always remember the host population or the affected people/community are the first to respond. There are different response actors, its important to coordinate so that outcomes are efficient and effective

A good way to analyse of who is doing what and where and find gaps is the use of Gap Chart (5min)
If your scenario is detailed enough and you have external partners involved in preparation for a major event that will require significant coordination between organizations, the following reading and exercises can be a useful tool for coordinating multiple organizations in a multi-sectoral response.

The GAP ID sheet or matrix is a useful tool for matching organizations to tasks. For analysis of task distribution based on your response, list the organizations to be involved in the response along one axis of the grid and list the activities or actions to be done as part of the response along the other. Mark the boxes where organizations and the tasks they will perform intersect on the table. Analysis of the resulting pattern can explain who will do what, who may be overburdened, and who may be able to provide additional assistance. A simplified example below is typical.

Operations Plan Matrix

Responsibility by Sector by Organization	Provincial and Local Affairs	Dept. of Works	Dept. of Health	Civil Defence	Police	Church/Temple	Red Cross NS	UN	Local NGO	WFP
Coordination	xx							xx		
Protection**	xx			xx				xx		
Reception	xx				xx			xx		
Registration	xx				xx			xx		
Community Services			xx			xx				
Logistics/Transport		xx				xx	xx			
Infrastructure		xx				xx				
Site Planning**								xx		
Shelter	xx					xx				
Domestic Needs	xx					xx				
Water		xx								
Sanitation		xx								
Health			xx			xx	xx			
Food	xx					xx				
Education										
Security	xx				xx					
Telecommunications	xx				xx	xx		xx		
Operational Support	xx							xx		

Use the prepared matrix that follows for your own GAP ID planning for response to your planning scenario. Be sure to include all key organizations involved and establish an appropriate level of detail in the tasks column, so that the activities are not ambiguous.

Handout: Tips for Coordination (5 min)

	DOs	DONT
Working with Government	Indentify relevant plans and strategies for FMR and emergency response and ensure key policies that are relevant to the Red Cross operation are identified Start meetings with key stakeholders to share information	Forget to identify the procedure for programme approval early on to avoid delays in implementation Do not wait for a formal coordination structure to be in place if they are not established immediately
Developing the response framework or operational strategy/plan of action	Involve stakeholders or partners in objective setting and selection of geographic areas	Delay decision making
Establishing internal coordination	Ensure that the tasks of each level of coordination is clear and meetings briefly documented	Create an over complicated structure that delays decision making and progress on FMR planning and implementation
Partnership modalities	Provide an umbrella framework that all partners can work within	Take on more activity than can be reasonably completed
Deciding which external meetings to attend	Participate in external coordination mechanisms regularly exchanging information in a timely and transparent way	Attend sub meetings that are not productive

Reference Material –
5. PowerPoint Presentation '5. Coordination Mechanism'