1st Edition

LEARNER'S GUIDE

TECHNICAL COMPETENCY UNIT

ADM.TEC 003.1

Conduct Comprehensive Analysis

ASCEND

ASEAN Standards and Certification for Experts in Disaster Management

ASEAN Standards and Certification for Experts in Disaster Management

CONDUCT COMPREHENSIVE ANALYSIS

ADM.TEC.003.1

Learner's Guide

ONE ASEAN
ONE RESPONSE

Project Sponsors:

The Association of Southeast Asian Nations (ASEAN) was established on 8 August 1967. The Member States are Brunei Darussalam, Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand, and Viet Nam. The ASEAN Secretariat is based in Jakarta, Indonesia.

The "ASEAN Standards and Certification for Experts in Disaster Management (ASCEND)" is under Priority Programme 5: Global Leadership of the ASEAN Agreement on Disaster Management and Emergency Response (AADMER) Work Programme 2021-2025 that envisions ASEAN as a global leader in disaster management.

The ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre) implements the ASCEND project in collaboration with the Korean National Fire Agency (KNFA) and support from the ASEAN Secretariat and the Republic of Korea.

The publication of this document is part of the "ASEAN Standards and Certification for Experts in Disaster Management (ASCEND) Toolboxes Development for Five (5) Professions" project.

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1.1 The ASCEND Programme

Southeast Asian governments, through the ASEAN Committee on Disaster Management (ACDM), continue to invest in strengthening disaster management systems for a more secure and resilient region. However, the compounding risks and increasing uncertainty of disasters in our new climate reality threaten to set back the socioeconomic development gains of ASEAN societies. Widespread and recurring disaster damages and losses can overwhelm national capacities and worsen regional transboundary effects.

The Declaration on One ASEAN One Response (OAOR) at the 2016 ASEAN Summit in Vientiane, Lao PDR, reaffirms ASEAN's vision to move towards faster and more integrated collective responses to disasters inside and outside the region. However, ASEAN's past experiences responding to large-scale disasters showed that realising the OAOR can be challenging. Various responders from different countries, institutions, organisations, and companies seek to contribute to the overall response. Their goodwill is appreciated, and several provide much-needed assistance. But ASEAN and affected Member States sometimes found it challenging to determine what knowledge and skills responders have and how they can effectively contribute to national and regional efforts.

Learnings from past experiences and shared commitment to realising the OAOR vision increased the need to develop regionally recognised Competency Standards and a certification process for disaster management professionals. The increased support led to initiatives that eventually created the ASEAN Standards and Certification for Experts in Disaster Management (ASCEND) Programme. ASCEND is now part of Priority 5: Global Leadership of the ASEAN Agreement on Disaster Management and Emergency Response (AADMER) Work Programme 2021-2025, a programme that envisions ASEAN as a global leader in disaster management.

1.2 The objectives of ASCEND

- To enhance the capacity of the ASEAN countries in the implementation of ASCEND.

- To establish regionally recognised Competency Standards and assessment processes covering five professions in disaster management.
- To improve the capacity of the AHA Centre to serve as the ASCEND Secretariat.
- To promote understanding of the ASCEND Framework among the ASEAN Member States (AMS) and other ASEAN sectors in preparation for the inclusion of ASCEND into the ASEAN Mutual Recognition Arrangement (MRA).

1.3 Advantages and benefits of an ASCEND certification

For ASEAN
The ASCEND certification can assist Member States in ensuring that competent disaster management professionals handle emergency assistance and disaster relief across the region. It also supports mutual recognition of disaster management competencies to facilitate acceptance of external aid and faster response.

For AHA Centre
ASEAN, a rapidly developing and hazard-prone region, will need more competent disaster management professionals. The ASCEND certification can narrow current knowledge and skills gaps. It can also enable stronger cooperation and interoperability between disaster managers in their home countries and across regions.

For disaster management professionals
Disaster management professionals can use their ASCEND certification to promote themselves professionally and serve as evidence of their experience and qualifications. It can also make it easier for organisations to determine the ability of certificate holders to perform critical work functions of specific occupations in the disaster management sector.

These ASCEND toolbox documents support the ASEAN Member States in identifying, building the capacity of, and mobilising competent disaster managers across Southeast Asia that are highly capable of contributing to reducing disaster risks and disaster losses in the region through timely and effective response.

1.4 The ASCEND Toolbox

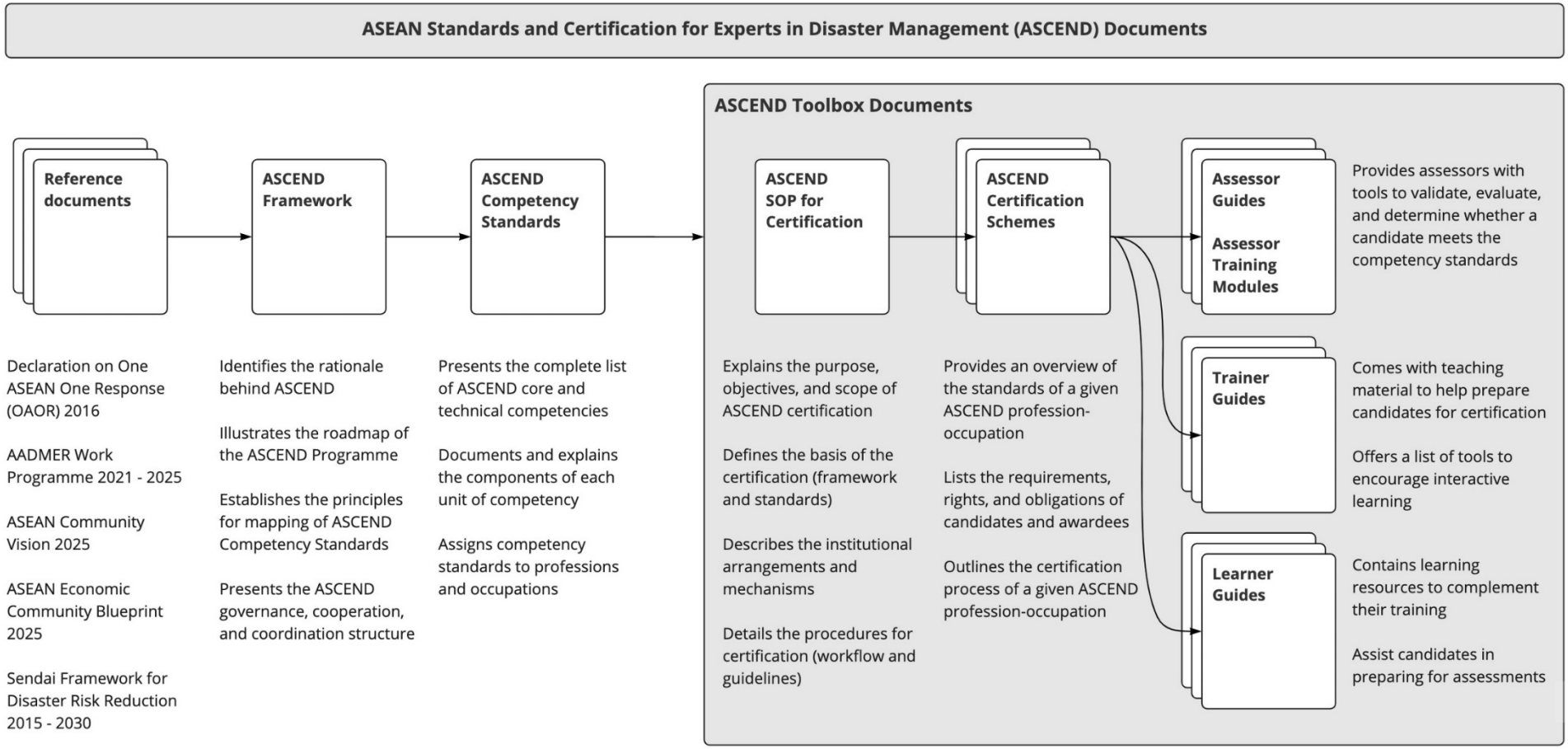
A set of technical requirements must exist before it is possible to implement the ASCEND programme in participating ASEAN Member States. The first requirement is the ASCEND Competency Standards, containing forty-three (43) regionally recognised core and technical competencies in selected disaster management professions. The Competency Standards outline the work elements and performance criteria that guide for certification of disaster management professionals across the region.

Another requirement is the development of an ASCEND Toolbox for five professions. These professions are Rapid Assessment, Humanitarian Logistics, Information Management, Water, Sanitation and Hygiene (WASH), and Shelter Management. The ASCEND Toolbox consists of an SOP, Certification Schemes, Assessor Guides, Trainer Guides, and Learner Guides. The ASCEND Competency Standards, approved by the ASEAN Committee on Disaster Management, are the primary basis of the Toolbox documents.

The SOP defines the basis of ASCEND, describes the institutional arrangements and mechanisms, and details the certification procedures. Certification Schemes present an overview of the standards of each profession-occupation and certification requirements, the rights and obligations of candidates and certificate holders, and general guidelines on the certification process. Assessor Guides provide assessors with tools to validate, evaluate, and determine whether a candidate meets the Competency Standards. Trainer Guides come with PowerPoint slides and presenter notes to help trainers prepare candidates for certification. It also offers a list of tools trainers may use to encourage interactive learning. Learner Guides assist candidates preparing for ASCEND certification in their chosen disaster management profession and occupation. It contains learning resources and complementary readings to help prepare them to undergo the required assessment.

The ASCEND Toolbox documents can assist the ASEAN Member States to identify, build the capacity of, and mobilise competent disaster managers across Southeast Asia to help reduce disaster risks and disaster losses in the region through timely and effective response.

Figure 1: *Overview of ASCEND Toolbox Documents*



The Learner Guide: Introduction for Candidates

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Learner's Guide

Welcome and thank you for your interest in pursuing an ASCEND certification. This Learner Guide is for you to read. It contains learning resources and helps you prepare for the required assessments: oral interviews, written tests, and observation checklists.

Competency-based learning and assessment

Competency is the attitude and ability to use or apply one's experience, knowledge, and skills-sets to perform critical job functions in a defined work setting.

Table 1: *Competency areas and descriptions*

Competency area	Description
Experience	Refers to the qualifications of the candidate that make them eligible to pursue certification. It includes the candidate's formal education, work experience, professional training, and job-relevant life experiences.
Knowledge	Refers to what the candidate needs to know to make informed decisions on how to perform the work effectively.
Skills	Refers to the ability of the candidate to apply knowledge to complete occupational tasks and produce work outcomes or results at the standard required.
Attitudes	Refers to associated beliefs, feelings, motivations, and values that influence a candidate to make decisions and act according to occupational standards and the professional work setting.

There is one Learner Guide for each unit of competency. The Competency Standards and Unit Descriptor section of this document outlines the content you will be studying – broken down into elements and performance criteria

that will be covered during training and assessed using competency-based methods. This guide contains a glossary of terms, a list of abbreviations, readings and activities, a self-assessment checklist, and information about the oral interviews and written tests.

Competency-based methods help ensure that the ASCEND certification process is relevant, valid, acceptable, flexible, and traceable – in alignment with the ASEAN Guiding Principles.

The relevance principle confirms that the ASCEND certification reflects the current professional needs in the disaster management sector. The validity principle relates to the consistency and equitability of the assessment process. The acceptability principle is about aligning the ASCEND certification to other disaster management professional standards and good practices. The flexibility principle refers to the responsiveness of the ASCEND certification to changes or differences in disaster management work settings and job requirements. The traceability principle ensures that evidence is sufficient to grant the ASCEND certification.

Competency-based assessment (CBA) is the process for evaluating whether a professional is qualified and competent to perform in a particular occupation. CBA is used to determine if the candidate's experience, knowledge, skills, and attitudes meet the standards and performance criteria defined in a unit of competency.

ASCEND Competency Standards and Unit Descriptor

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3.1 Competency standards

Competency standards are a set of industry-accepted benchmarks that defines the experience, knowledge, skills, and attitudes professionals need to perform well in an occupation. It also reflects the requirements of work settings and considers the developments in the disaster management profession.

3.2 ASCEND Competency Standards

The ASCEND Competency Standards identify the key features of work in selected disaster management professions and performance standards professionals need to meet to be deemed competent. It also provides the list of the forty-three (43) core and technical competencies that serve as the basis for defining the regionally recognised disaster management qualifications across the ASEAN Member States. The five (5) professions covered by the ASCEND Competency Standards include Rapid Assessment, Humanitarian Logistics, Information Management, WASH, and Shelter Management. Under these professions are five (5) categories of occupations: Manager, Coordinator, Officer, Promoter, and Engineer. Overall, there are fifteen (15) profession-occupation combinations (e.g., humanitarian logistics manager, information management coordinator, WASH promoter).

Each ASCEND Competency Standard has its dedicated Toolbox documents: an SOP, Certification Scheme, Assessor Guide, Trainer Guide, and Learner Guide. Only one SOP applies to all profession-occupation combinations covered by the ASCEND certification. The Certification Schemes, one for each of the profession-occupation combinations. Both these documents align with the AQRF Level Descriptors, Section 4: Guiding Principles and Protocols for Quality Assurance of the AGP, and ASEAN Disaster Management Occupations Map. The Certification Schemes also outline the ASCEND competencies under selected professions and occupations, eligibility criteria, basic requirements and rights of candidates, and obligations of certification holders. Assessor Guides describe the components of particular competency standards and offer tools to determine the candidate's qualifications. Trainer and Learner Guides expound on a given competency standard's elements and performance criteria for learning and assessment preparation purposes.

The Toolbox documents may also serve as a reference for ASEAN Member States' seeking to develop and implement national-level competency-based certification processes based on their respective capacities and needs. The ASCEND Competency Standards and its derivative Toolbox documents will be reviewed and updated every five (5) years to ensure it reflects changes in the disaster management profession and remains relevant. Table 2 describes its main components.

Table 2: *Components of the ASCEND Competency Standards*

Component	Description
Unit title	Describes the critical work function to be performed in an occupation
Unit number	A coding system to organise the units of competency. It also indicates the types of competency standards. ▪ ADM.**COR**.000.0 are core competencies. These are general professional knowledge and skills related to international humanitarian principles and disaster management standards, including ASEAN mechanisms and procedures. ▪ ADM.**TEC**.000.0 are technical competencies. These are specific knowledge and skills needed to perform effectively in work areas under their chosen disaster management profession and occupation.
Unit description	Provides information about the critical work function covered by the unit.
Elements	Presents the occupational tasks required to perform the critical work function in the unit.
Performance criteria	Lists the expected outcomes or results from the occupational tasks to perform and the standard required.

3.3 Unit descriptor

Unit title : **Conduct Comprehensive Analysis**
Unit number : ADM.TEC.003.1

Unit description : This unit covers the ability to classify, sort, and analyse available data from all relevant sectors in order to define the information of prioritised responses.

Element 1.
Analyse information on different sectors and from various sources

Performance Criteria

1.1 Analyse data from all sectors
1.2 Implement range of analysis

Element 2.
Prioritise urgent and crucial issues and needs to be addressed

Performance Criteria

2.1 Analyse acute and chronic issues
2.2 Develop prioritisation of humanitarian needs

3.4 Glossary of Terms and List of Abbreviations

Terms and abbreviations	Descriptions
AJDRP	ASEAN Joint Disaster Response Plan
ASB	Arbeiter-Samariter-Bund
CERF	The Central Emergency Response Fund
DAPS	Dignity Access Participation Safety
FAO	Food and Agriculture Organization
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
IFRC	International Federation of Red Cross and Red Crescent Societies
IOM	International Organization for Migration
LGBTIs	Lesbian, Gay, Bisexual, Transgender and Intersex
MDM	Médecins du Monde
MSF	Médecins Sans Frontières
NGOs	Non-Governmental Organisations
NFIs	Non-Food Items
NRC	TNorwegian Refugee Council
SAR	Search, and Rescue
UNDP	United Nations Development Programme
UNFPA	the United Nations Population Fund

UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund
UNMAS	United Nations Mine Action Service
WASH	Water Sanitation and Hygiene Services
WFP	World Food Programme
WHO	World Health Organisation

Unit Readings and Activities

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4.1

Element 1. Analyse information on different sectors and from various sources

A coordinated assessment is defined as a multi-sectoral and multi-stakeholder process of collecting, analysing and interpreting data undertaken during the initial days and weeks of a disaster to assess needs and inform decisions on humanitarian action. Its goal is to have a shared understanding of the humanitarian impact and key priorities for response

1.1 Analyse data from all sectors

A. Introduction

From data, information can be produced. Such data can be meaningful for decision-making. However, abundant data may get the assessor or analyst overwhelmed. A rapid assessment coordinator can improve his/her situational awareness by interacting with experts from different agencies who share their analysis from their points of view, especially on how to generate meanings from the data. Proper organisation and management of the data are key to quality information and decision-making.

Data analysis is commonly done within the intra-sectoral and inter-sectoral analyses in crisis and disaster settings. There is also a need to explore cross-cutting issues and the needs of specific groups in the population.

Coordinated assessments are increasingly being implemented and used alongside inter-sector and sector-specific assessments as an evidence base to guide response decisions at different levels: immediate response in sudden-onset crises or initial stages of conflict; strategic response planning in protracted crises or later stages of emergencies; funding allocations; and to lesser extent operational programming decisions.

- **Inter-sectoral data analysis**
  Despite the existence of guidance on estimating intra-sector needs and people in need, there is a need for more advice on how to conduct a more credible inter-sector situation analysis by highlighting relationships between the identified needs and the timeframes when the needs should be addressed, for instance, at the same time, immediately and in the medium and long term.

- **Cross-cutting issues**
  A coordinated assessment must incorporate issues such as gender and age dimensions; And communication strategy with survival communities.

- **The Sphere Handbook**
  It contains key elements to support coordinated assessment, particularly assessment checklists, Protection Principles, Core Standards, technical standards and indicators.

B. The Importance of Data Analysis

- **The analysis should be iterative and start immediately**
  Too much focus on the data collection gives little time for analysis. Preparing, before its collection, how data will be analysed is critical to ensure a coordinated assessment produces more than just descriptive information about what has happened as a result of disasters. Unless it is built into the assessment process, there is a risk where the findings will be presented without solid analysis and meaningful interpretation, and sense-making. This will affect the life of the disaster survivors in both the short and long term. Having a plan for data analysis will help the assessment team focus on the assessment objectives and begin mapping out what the final product, or the report, should look like as soon as possible.

  Analysis should start as soon as sufficient secondary and primary data is available to allow consolidation and feed into regular updates on what is known about the situation.

  An inductive approach often informs field assessment. Patterns, themes, and theories emerge from the data and should be tested, refined, and retested against new information from various sources until explanations become repetitive and prove accurate. Thus, iterative analysis is used to spark insights and develop meanings. Consider the following:

  - Ensure there is enough time to turn data into information. Prepare for it by developing an analysis plan at the outset and making data analysis an ongoing process.

  - Do not wait until all the data is available to begin looking at it and seeing what it means; start immediately, share findings, and

keep updating—always being clear about what the interpretation is based on at that point in time.

- The assessment should present an ongoing and developing analysis of the situation rather than a one-off, static, detailed analysis on a specific point in time

- **Analysis should consider how situations change over time**
  Rather than simply presenting the evidence, data, or information, a coordinated assessment should explore what the information indicates about the present impact of a crisis and how the situation is likely to unfold. This element of analysis is, in fact, the real value that a coordinated assessment should bring. It involves making assumptions about what might happen and building scenarios that can assist planning by answering questions such as:

  - How are pre-crisis vulnerabilities likely to be impacted by the disaster?
  - What are coping strategies in place that can be enhanced to mitigate the situation?
  - What factors or drivers could contribute to worsening conditions?
  - What is known about similar past disasters or crises in the region, and what does this tell us about the potential evolution of the disaster?

  Field level data collection presents a snapshot, a moment in time. Still, the skill of analysis is to combine it with existing knowledge, baselines, pre-crisis information and secondary sources to tell the story of the impact of the crisis.

  Coordinated assessment data analysis accepts and acknowledges the imperfection of data. Nevertheless, data must be understood in its context. The analysis involves what is known to build assumptions and scenarios that can assist in decision-making and planning. Analysis should be done by a multi-stakeholder group familiar with the context and expertise in multiple sectors and emergency programming. Data analysis should involve field assessment teams.

- **Analysis should identify information gaps**
  In addition to telling a story based on what is known, the analysis should also highlight what is not known about the impact of a crisis or about the situation itself. There has often been a tendency to over-emphasise what is known about a crisis and overlook what is missing. This focus

has obscured that sometimes what is unknown about the impact of a crisis is just as important as what is known.

A geographical area where no in-crisis information exists may indicate:

- An absence of problems in the given area;
- A lack of access to the area which may be affected
- An area that is of little concern to the authorities (for political, ethnic or other reasons) and/or had no pre-crisis humanitarian presence but may be affected and is being neglected

There is a difference between not knowing if there is a problem and knowing there is no problem. Too often, assessment reports fail to differentiate these situations. Identifying information gaps or known unknowns are important in guiding future assessments and helping users understand the constraints to the reliability of assumptions and scenarios,

- **Analysis should consider existing capacity**
  Ultimately, a humanitarian needs assessment is about identifying the gaps in the present capacity to respond to the impact of a crisis. By implication, the needs and priorities that an assessment identifies are in the sectors where present in-country capacity is insufficient to meet all the needs or identify the geographic areas that present interventions cannot reach. It is impossible for the assessment to identify gaps without considering the capacity in terms of human resources, materials and logistics that exist already at the country level or in disaster-affected area. A coordinated assessment should identify overall needs and priorities, the proportion existing resources can cover, and the proportion requiring additional resourcing.

- **Analysis builds on comparison and convergence of evidence**
  Comparison and the convergence of evidence are at the core of the analysis process. Differences or similarities provide important insights into how the situation differs from one element of interest to another and, accordingly, how different the type and level of response required might be. The following non-exhaustive kinds of comparisons are recommended.

  Coordinated Assessment analysis:

  - Between locations (e.g. rural and urban, province A and Province B);
  - Between sectors;
  - Between types of livelihoods (e.g. farmers, sellers, and fishers);
  - Between types of population (e.g. residents and IDPs);

- Between types of setting (e.g. camps, host families, spontaneous settlements, and collective centres);
- Between types of respondents (male and female, younger and older persons)
- Over time (pre and post-disaster)

The complex nature of humanitarian crises and the lack of predictability around the type, quality, and availability of secondary and primary data challenge the detail and accuracy of analysis and interpretation. Convergence of evidence can be used to overcome this difficulty by reconciling potentially contradictory information and the need to interpret the likely severity of the impact suggested by the available information.

Bringing together key stakeholders during the analysis process (joint analysis) will ensure relevant expertise in interpreting the results. The less available the data, the more expert knowledge can be used. A consensus-building approach among partners will be necessary to overcome the lack of evidence and ensure agreements around the findings.

Every assessment has limitations. Acknowledging and presenting them helps others better understand how conclusions were drawn.

The assessment methodology should clearly outline available data's type, accuracy, and limitations. A joint analysis requires involvement from all interested stakeholders. It may take more time but should result in better analysis and greater ownership of the results.

C. Sphere Contribution to Assessment

The Humanitarian Charter is the basis of the Sphere Handbook and provides the ethical and legal backdrop for humanitarian action. The Protection Principles described in the handbook help ensure that the assessment considers protection issues and that the assessment process does not compromise the protection needs of the disaster-affected population. The Handbook has six Core Standards:

- People-centred humanitarian response
- Coordination and collaboration,
- Assessment,
- Design and response
- Performance, transparency and learning
- Responders' performance

Assessment teams should know as they ensure good practice during the entire programming cycle. In particular, Core Standard 3 on Assessment is explicitly associated with the assessment function. The four technical chapters (1. water supply, sanitation and hygiene promotion, 2. food security and nutrition, 3. shelter, settlement and non-food items, and 4. health action) cover a specific humanitarian sector and contain the minimum qualitative standards and a set of key indicators, which are usually a mixture of qualitative and quantitative.

Core Standard 3: The priority needs of the disaster-affected population are identified through a systematic assessment of the context, risks to life with dignity, the capacity of the affected people, and relevant authorities to respond.

The following 12 key actions of the Sphere Standards help us enhance our assessment analysis:

- Find and use pre-disaster information about local humanitarian capacity, the affected and wider population, context and other pre-existing factors that may increase people's susceptibility to the disaster
- Carry out an initial assessment immediately, building on pre-disaster information to assess changes in the context caused by the disaster, identifying any new factors that create or increase vulnerability
- Carry out a rapid assessment as soon as possible, following up with subsequent in-depth assessments as time and the situation allow
- Disaggregate population data by, at the very least, sex and age
- Listen to an inclusive range of people in the assessment – women and men of all ages, girls, boys and other vulnerable people affected by the disaster, as well as the wider population
- Participate in multi-sectoral, joint or inter-agency assessments wherever possible.
- Gather information systematically, using a variety of methods, triangulate with information gathered from a number of sources and agencies and document the data as they are collected

- Assess the coping capacity, skills, resources and recovery strategies of the affected people
- Assess the response plans and capabilities of the state.
- Assess the impact of the disaster on the psychosocial well-being of individuals and communities.
- Assess current and potential safety concerns for the disaster-affected population and aid workers, including the potential for the response to exacerbate a conflict or create tension between the affected and host populations
- Share assessment data in a timely manner and in a format that is accessible to other humanitarian agencies

The six key indicators of assessment are:

- Assessed needs have been linked to the capacity of affected people and the state to respond.
- Rapid and in-depth assessment reports contain views representing all affected people, including members of vulnerable groups and those of the surrounding population.
- Assessment reports contain data disaggregated by, at the very least, sex and age.
- In-depth assessment reports contain information and analysis of vulnerability, context and capacity.
- Where assessment formats have been agreed upon and widely supported, they can be used.
- Rapid assessments have been followed by in-depth assessments of the populations selected for intervention

The Sphere Handbook identifies needs assessment as a key element of humanitarian response and as the critical starting point of any programme implementation, with a strong focus on the rights of the affected people. Therefore, the Sphere Handbook can be a vital tool for coordinated assessment. It helps determine whether a minimum standard has been reached or not, identify humanitarian gaps and propose ways to overcome

them. For further reading on Sphere handbook – including its four technical sectors, please see: http://www.spherehandbook.org/

D. Common Sectors or Areas of Intervention

To better understand the overall humanitarian situation, rapid assessment should provide information on disaster-affected people, their demographic profile, and their location. The needs of the affected population are multi-sectoral, and thus our multi-sectoral analysis is crucially important.

The ASEAN Joint Disaster Response Plan (AJDRP) has identified nine areas of assets and capabilities to respond to humanitarian needs, which are:

- Search and rescue
- Water, Sanitation and Hygiene services
- Health and medical services
- Food assistance
- Non-food items
- Early Recovery
- Logistics
- Emergency Telecommunications
- Expertise

Each module has detailed assets and capacities that can be mobilised to respond to identified kinds of disasters. Therefore, analysis of needs must include the aforementioned areas to clarify the needs to mobilise the assets and capacities.

The following are general descriptions of some sectors that might be prioritised in the emergency phase of a disaster and their potential linkages with other sectors:

- **Search and Rescue**
  Search and Rescue (SAR) is a crucial response activity that local and national responders primarily do. If the situation requires international SAR resources, SAR organisations in the region are better positioned to respond considering their potential ability to arrive quickly to the disaster-affected area; thus, they have a better chance to save more lives. While the SAR teams perform technical SAR assessments, the humanitarian assessment team should inform the number of missing persons and estimate their latest physical location.

  SAR teams must be aware of potential secondary disasters to avoid increased casualties from the affected people or SAR team members.

Information about the secondary risks can be sourced from humanitarian assessments. The strongest link of SAR is with the medical sector and is supported by the logistics and transportation sectors.

- **Water Sanitation and Hygiene Services**
  Safe storage of water should be provided at the community and household levels. An adequate quantity of reasonably safe water is preferable to a smaller quantity of pure water. Minimum quantities of reasonably safe water should be provided as close to homes as possible. Availability will generally be the determining factor in organising a safe water supply.

  WASH specialists must assess available sources of water. If these sources are inadequate, new sources will have to be developed, or water will be delivered. Water sources such as wells may be contaminated and thus cause a drinking water problem that must be addressed immediately. The swift provision of a basic human waste disposal system is better than the delayed provision of an improved system. The most common technologies to the affected population should be applied.

  Things to analyse include:
  - Water supply before the disaster
  - Affectation of the quality, quantity, or continuity of the provision of water
  - Water storage at communal and household levels
  - Proportion of dwelling and shelters that do not have water
  - State of sources of water in the affected area compared with the prior situation
  - Functionality of sanitation systems; latrines, sewer systems and septic tanks.
  - Waste disposal systems; solid, discharge of wastewater, and rubbish.
  - Contamination levels
  - Risk of diseases produced by vectors
  - Knowledge Attitude and Practices survey and traditional behaviour information regarding excreta disposal, hygiene awareness and water use
  - Statistics on waterborne diseases

  Some common examples of inter-sectoral analysis related to water, sanitation and hygiene services:

- Defecation and handwashing practices that increase a threat to health
- Average time and/or distance to collect water from shelter/dwelling
- When livestock population is considerable, analyse the provision of drinking water for the livestock
- Legal issues or other obstacles to access water supplies
- Health-related behaviours that likely contribute to the public health risks

- **Health and Medical Services**
  Following a sudden-onset disaster, there may initially be a significant need for curative care, particularly trauma care within the population. There may also be a need for evacuating patients out of the area as health facilities cannot cope with the influx of cases or the seriousness of the injuries. A sudden breakdown of infrastructure in a community may lead to a greater risk of epidemical diseases. To prevent an outbreak, health services for displaced people should be established based on the concept of primary health care.

  Disasters themselves can catalyse new or exacerbate disparities in health and health care within the affected population. Following a disaster, continuity of care is often disrupted, leaving behind the vestige of a fragmented primary and mental health infrastructure. This situation is especially distressing for medically under-served areas struggling with persistent health and/or health care disparities. Within the first days, there is limited information on the impact of disasters on access to health care, use of health care services, and the exacerbation of health disparities in medically underserved areas.

  Things to analyse include:

  - **Health personnel**
    Number of doctors, nurses, technicians, services and others available, injured or dead

  - **Health of the people per affected zone:**
    - Number of injured according to severity; severe and light
    - Need treatment for evacuation
    - Number of injured in health centres
    - Caring for ill persons in hospitals or in charge of relatives (men or women)

- **Causes for attention per type of illness**:
  - Number of children under 5
  - Number of women and men
  - Tendency for a possible increase in cases per type of illness

- **Potential problems** for the disposal of human and animal corpses.

- **Availability of medicines, medical supplies and others**:
  - Type of provision of medicines and medical supplies; regular (normal) or extraordinary
  - Satisfaction of real needs for medicine and medical supplies
  - Number of ambulances available

- **Epidemiological profile**
  Increasing concern for illness: measles, malaria, diarrheal diseases, acute respiratory infections, etc.

- **Disruptions of medical services** for chronic diseases (hypertension, insulin-dependent diabetes, epilepsy, antiretroviral for HIV and AIDS, dialysis for kidney disease, etc.

- **Previous nutritional surveys**

- **Relevant statistics** including infant feeding practices, mortality and morbidity for the main diseases

- **Health Centres:**
  - State of operation (partial or total)
  - Number of available beds
  - Availability of water and electric energy services

In relation to the protection sector, assess the indications of sexual violence, psychosocial trauma, and hazardous substance use (drug injections, heavy alcohol use, etc.). Other linkages of analysis include shelter on mobile clinics, water and sanitation on drinking water quality, and education on vaccination and health campaign/education.

- **Food Assistance**
  Children, pregnant, breastfeeding women, and the sick and elderly are often most vulnerable to malnutrition and have special needs. Cereals should only be provided at the onset of an emergency. Do not include

dried/skimmed milk into general food distribution, as it should be provided through care centres or similar facilities to ensure clean and proper preparation.

Things to analyse include:

- **Calculate the loss of crops and animals**
  - Number of plots seeded that are partially or lost and the level of recoverability
  - Estimation of the loss in proportion to the next harvest
  - Quantity of animals lost and number of families affected
  - Quantity of productive goods lost and number of families affected

- **Impact on sources of income and food**
  - Affectation of the three main sources of income
  - Affectation of sources of food: own production, purchase, donation, exchange, collection
- **Food consumption**
  Normal, more or less consumption of food-related to the period before the disaster of the affected families

- **Facility for preparing food**
  Availability of; water, kitchens, fuel, and kitchen utensils for preparing food

- **Food reserve**
  Affectation of reserves, capacity for obtaining reserves and the estimated time of inaccessibility

- **Assistance present**
  Organisations that assist, distributed products, available inventory

- **Shelter and Essential Non-Food Items**
  Emergency shelter may be a priority in an early stage of the disaster. However, permanent reconstruction should be promoted as soon as possible. Cash contributions for local/regional purchase of traditional housing material for temporary shelter are often preferable to contributions in-kind, purchase of tents, or prefabricated housing material. Materials should be provided that may be reused later in permanent reconstruction when possible. Maximum use should also be made of materials that can be salvaged from damaged buildings. Highest priority should be given to ensuring roofing.

Survivors must be involved in the shelter assessment to ensure that it will meet their particular needs and be culturally acceptable. It will also help reduce their sense of dependency and cut costs considerably. Individual family initiatives should be encouraged to the greatest possible degree in meeting shelter needs, either through providing basic materials or guidance for self-help programmes.

Things to analyse include:

- Type of shelters and their needs
- Demand for shelters
- Basic services in shelters (mobile health services, access to nutritious food and clean water)
- Number of people in shelters (men, women and children under 5)
- Capacity of shelters
- Accessibility of shelter
- Temporary or permanent shelter
- Risk conditions of the shelter
- Community structures
- access to essential non-food items (NFIs), including clothing, blankets and bedding, cooking utensils, plastic sheeting, cooking fuel and equipment

Shelter is closely linked with the protection sector. Thus shelter for disaster-affected people must have the following considerations:

- protection from cold, heat, wind, rain, etc.
- privacy
- personal security and security of belongings
- protection from fire
- safety from natural hazards such as floods and landslides covered space for essential household activities

- **Protection**

  Situation of children orphaned or separated from their family, reports of mistreatment, rape and sexual abuse. Organisations responsible for monitoring mistreatment, psychosocial support, organisations that work to protect rights. Signs of discrimination.

  Things to analyse include:

  - Condition of disabled people
  - Condition of children; orphans and separated from their family with identification and documents
  - Mistreatment, rape and sexual abuse

- Monitoring the theme of protection
- Psychosocial support
- Protection of rights
- Main barriers to the compliance of basic principles and actions of protection
- Signs of discrimination
- Limited availability of resources

Agencies are keen to undertake their own assessments to inform their response plan and programming and attract donor funding. This often leaves them with no/limited financial and/or human resources to participate in a coordinated assessment.

- **Education**

  Children and youth are essential in any population affected by the crisis. This is not just because of the damaging impact disasters have on children and youth, but also because of the potential children and youth have to contribute to response and recovery efforts positively. This rapid assessment should focus on overall impact, while detailed assessment should come later.

  Things to analyse include:

  - **Access and learning environment**
    - Percentage of school-age children and youth attending schools'/learning spaces, if possible, by each grade (primary, secondary and higher) and disaggregated by gender
    - Percentage of the existing school that is usable or unusable
    - Percentage of schools/learning spaces that are operated with temporary facilities
    - Distance children must travel to attend school/learning space

  - **Teaching and learning**
    - Percentage of schools/learning spaces that lost learning materials due to the emergency
    - Percentage of schools/learning spaces offering psychosocial support

  - **Teachers and other education personnel**
    - Percentage of teachers unable to deliver classes

        - Percentage of other teaching personnel unable to perform their work

    - **Education policy**
        - Percentage of education officials unable to perform their work
        - **Percentage of education offices/facilities** that are unusable.

The condition of school latrines can exemplify the education sector's link with WASH; Education facilities can also be temporarily used as a shelter, and the WASH capacity of the school must be strengthened accordingly. Furthermore, school/education programmes can detect psychosocial and protection issues.

- **Livelihood**
  Impact of disasters on livelihoods can be exemplified by the situation of the local market and increase in prices, proper recovery strategies and organisation, affectation to dwellings. Livelihood assessment and appropriate interventions should be carried out timely to prevent further protection issues, among other arising issues.

  Things to analyse include:
    - Economic activity affected predominantly male and female sectors and families (agriculturalists, agro-pastoralists, pastoralists/livestock, small business, etc.)
    - Increase in prices of food, essential goods, land, and construction material
    - Effect on local markets
    - Affected areas or community groups with greater vulnerability in terms of livelihood
    - Availability and ownership of the land

- **Food Security**
  It exists when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life. Within this definition of food security, there are four components:

    - **Food availability** is the food [of appropriate quality] that is physically present in the disaster-affected area. Food availability is determined by:
        - production: food produced in the area;

- stocks: food held by traders, in government reserves [and at farm level] in the area;
- trade: food brought into (and taken out of) the area through market mechanisms;
- bulk transfers: food brought into the area by the government and/or aid agencies.

- **Food access** is the ability of households to regularly acquire adequate amounts of appropriate food for a nutritious diet. Means of access may include:
  - own production – of crops, livestock or farmed fish;
  - hunting, fishing or gathering wild foods;
  - purchases at markets, shops, etc.; 16
  - barter exchange – exchange of items for food;
  - gifts from friends, relatives, community,
  - transfers from government or aid agencies (relief or safety net programmes).

- **Food utilisation** refers to the use that households make of the food to which they have access and individuals' ability to absorb and metabolise the nutrients the conversion efficiency of the body. Food utilisation depends on:
  - how food is stored, processed and prepared (including the water and cooking fuel
  - available, and hygiene practices);
  - feeding practices, particularly for individuals with special needs such as young children, the
  - elderly, sick people, and pregnant and lactating women;
  - the sharing of food within the household and the extent to which this corresponds to individuals'
  - nutritional needs – growth, pregnancy, lactation, etc.;
  - the health status of each member of the household.

- **Stability** refers to consistency and reliability in food supplies/availability and access: households should not risk losing access to food due to sudden shocks or cyclical events. It is helpful to check the average days of food stock that will last at the household level during the rapid assessment.

E. Cross-sectoral issues

Disasters affect differently to different people. Some groups in the community may likely be worse affected by natural disasters than the general affected

population. We should think of the groups not merely as passive victims but as powerful agents of change who possess specific knowledge and skills to contribute to disaster response and recovery effectively. Common cross-sectoral issues are gender, age, equality, disability, HIV and AIDS, and environment. Comprehensive analysis should highlight and seek potential solutions to address these issues.

To appropriately include perspectives across age groups, gender, and other aspects of diversity in assessment, we should encourage the participation of community-based organisations and the representation of women, men, girls, and boys and people with diverse cultural, religious, or language backgrounds. Some practical ways include:

- Ensure involvement of all segments of a population. Outreach to more isolated and less mobile persons might be required, including those with health issues or disabilities, women with babies, and older persons.

- Use key informants from different social strata in structured interviews and community structures (e.g. committees for youth, women, and persons with disabilities).

- Triangulate data from many social strata to obtain information on the various experiences different groups face in the affected population.

- Include questions and themes that might be relevant to marginalised groups or less-vocal segments of communities.

- Collaborate with specialised organisations that work with more isolated groups (such as older persons, persons with disabilities, minorities, and children) to enhance participation by these groups.

- Ensure that the affected communities and humanitarian actors jointly identify a community's protection risks, existing capacities, and the community members' own priorities for intervention

F. IFRC's DAPS (Dignity Access Participation Safety)

The IFRC Strategic Framework on Gender and Diversity Issues (and its Explanatory Note) provides direction to IFRC Secretariat and all Red Cross and Red Crescent National Societies to ensure that all of its actions promote gender equality and respect for diversity and are non-discriminatory towards

people of all ages and backgrounds. Dignity Access Participation Safety (DAPS) framework explains the following:

Figure 2: *Dignity Access Participation Safety (DAPS) framework*

For further information, please visit the IFRC website.

G. Capability in various organisations

Understanding various organisations capabilities may help us seek the right support for analysis if needed. With their vast experience from crises in different parts of the world, they can strengthen our analysis.

At the global level, there are various organisations with different capabilities. In UN-initiated Cluster Approach, cluster leads have been selected based on their expertise. Each cluster has general guidance and principles that ensure the quality of analysis and interventions, which can be helpful to adopt or adapt to a particular disaster context. The following are the cluster lead agencies at the global level and their crucial learning sources:

Table 3: *Cluster lead agencies at the global level*

Technical Clusters	Cluster Leads	Guidance, tools, and resources for learning
Nutrition	UNICEF	http://nutritioncluster.net/
Water Sanitation and Hygiene (WASH)	UNICEF	http://washcluster.net/
Health	WHO	http://www.who.int/health-cluster/en/
Shelter (conflict, IDPs)	UNHCR	https://www.sheltercluster.org/
Shelter (natural disasters)	IFRC – as convener	
Education	UNICED and Save the Children	http://educationcluster.net/
Food security	WFP and FAO	http://fscluster.org/
Cross-cutting clusters		
Camp Coordination & Management (conflict, IDPs)	UNHCR	http://www.globalcccmcluster.org/
Camp Coordination and Management (natural disasters)	IOM	
Protection Thematic: ▪ Child Protection ▪ Gender-Based Violence ▪ Land, Housing and Property	UNHCR UNICEF UNFPA NRC	http://www.globalprotectioncluster.org/

- Mine Action UNMAS

Early Recovery	UNDP	http://earlyrecovery.global/
Common service clusters		
Logistics	WFP	http://www.logcluster.org/
Telecommunications	WFP	https://www.etcluster.org/

Different NGOs may focus their work on several sectors. To give you a few examples, Médecins Sans Frontières (MSF) or Médecins du Monde (MDM) focus on the medical and health sector MDM, Plan International, whose focus is on education, and Oxfam on shelter. Likewise, in the South East Asia region, some NGOs have a specific focus, such as Mercy Malaysia and Muhammadyah Disaster Management Centre (Indonesia), with their expertise on health. It does not mean that they have no involvement in other relevant sectors.

Rather than a specific sector, some NGOs address particular groups within the community, such as the elderly (such as Help Age) or people with different abilities (such as Arbeiter-Samariter-Bund - ASB). Many other NGOs tend to spread their expertise out in several sectors. Their approaches imply the necessity to address multiple sector issues that disaster-affected populations need assistance.

1.2 Implement range of analysis

A. Introduction

The term ‘range of analysis’ connotes various activities. In the humanitarian context, some everyday activities will be explained in this part, enriching our analytical skills.

B. Range of Analysis

A rapid assessment coordinator must be mindful of a variety of analyses. Having a variety of analytical options could help the team better in identifying needs, resources and priorities

- **Explore – engage and discover**
  Become familiar with your data and identify potential patterns, signals, and stories to be confirmed. Exploration helps understand what the data covers and how it got there, what it represents, what seems wrong, and what is missing. The assessment team must familiarise themselves with the data and check its characteristics to gain an understanding of its relevance, completeness, and reliability

    - Diagnose, clean and enrich your data to ensure it is as accurate and complete as can be
    - Notice possible signals or stories in your data
    - Code and refine your data as you reflect growing understanding
    - Develop assertions and assess how well-founded your assumptions are

  At the end of the exploration phase, the rapid assessment coordinator should have:
    - Clean, reviewed databases, including confidence levels for critical information
    - List of codes used for refining data
    - List of critical information gaps. Strategies to redirect or adapt the analysis in light of the gaps should be established, and any significant changes communicated to the end-users.
    - Main assertions and propositions about main patterns, trends, theories, explanations, messages and stories to be explored, confirmed, or invalidated

- **Descriptive analysis - summarise and compare**
  Grouped and summarised data to help identify similarities and differences, consistent patterns, trends or anomalies and confirm main points or exciting stories in the data.

    - The main activities are:
    - Observe similarities and differences; create categories
    - Summarise your observations and aggregate them at a different level of detail

- Compare and contrast between and within groups of data to find patterns, trends, and anomalies

At the end of the descriptive phase, the rapid assessment coordinator should have:

- Summary of basic descriptive statistics, including statements for each category of analysis (geographical area, affected group, sector, etc.)
- Key patterns, trends, theories, explanations, messages and stories.
- Key assumptions checklist to challenge assertions and identify faulty logic, weak evidence or flawed analysis

- **Explain - Connect and relate**
  Explanatory analysis identifies associations/correlation, scatterplots and other connections between observations. It is based on careful investigation of underlying processes or causal mechanisms and the strength of their relationships.

  The main activities are:
  - Connect the dots and look for association and correlation
  - Link effects back to causes
  - Review main underlying processes, drivers and factors
  - Develop plausible explanations and entertain rival explanations

  At the end of the explanatory phase, the rapid assessment coordinator should have:
  - Theory, best hunches, guesses and conjectures about what is related or leading to what.
  - Problem tree or fishbone diagram representing causal mechanisms and which ones contribute the most to the current outcomes.
  - A list of rival or alternative hypotheses

- **Interpret - Find the implications and conclude**
  Interpretive analysis aims at moving beyond findings to drawing and evaluating conclusions through argumentation, evaluation of the strength of evidence, and contextualisation of your findings.

  The main activities are:
  - Rate severity and prioritise issues
  - Evaluate evidence and assess the plausibility
  - Draw conclusions, find key messages and build your case

- Generalise and transfer results where appropriate

At the end of the interpretation phase, the rapid assessment coordinator should have:

- A list of the most severe and/or priority issues to be addressed, as well as the main underlying factors.
- A conclusion is supported by plausible explanations, evidence, and logical reasoning.
- An evaluation of the amount, strength and type of evidence supporting your claims and the potential impact on the accuracy of your results.
- An evaluation of the likelihood and conditions under which your findings would apply to other settings or groups
- An updated key assumption list

- **Predictive analysis - Predict and forecast**
  A predictive analysis or anticipatory analysis identifies the likelihood of future outcomes and trends at a specific time based on current and historical data. It combines predictions (one-off estimates of a particular event in the future) and forecasts (sets of possible futures that include probability estimates of occurring)

  The main activities include:
  - Extend current conditions to forecast future outcomes
  - Examine and develop alternative futures – this can be done by using scatter plot and linear regression analysis
  - Amid lack of data, scenario analysis can offer alternative possibilities.
  - Identify triggers and track new developments

  At the end of the anticipatory phase, the rapid assessment coordinator should have:
  - An outline of the impact of continuing the current developments or trends.
  - A set of scenarios that offer likely alternative futures, their likelihood and their impact.
  - A list of indicators to monitor whether these alternative futures are unfolding.
  - A revised conclusion and a list of key messages in the light of potential new developments

- **Prescribe - Suggest and advise**
  Prescriptive analysis is about providing advice and suggesting policy or response options. It investigates the potential effect of future decisions and considers their refinement to align with more desired outcomes. It translates a situation analysis into a feasible plan, informs about opportunities and risks, and shows the implications of decisions.

The main activities are:

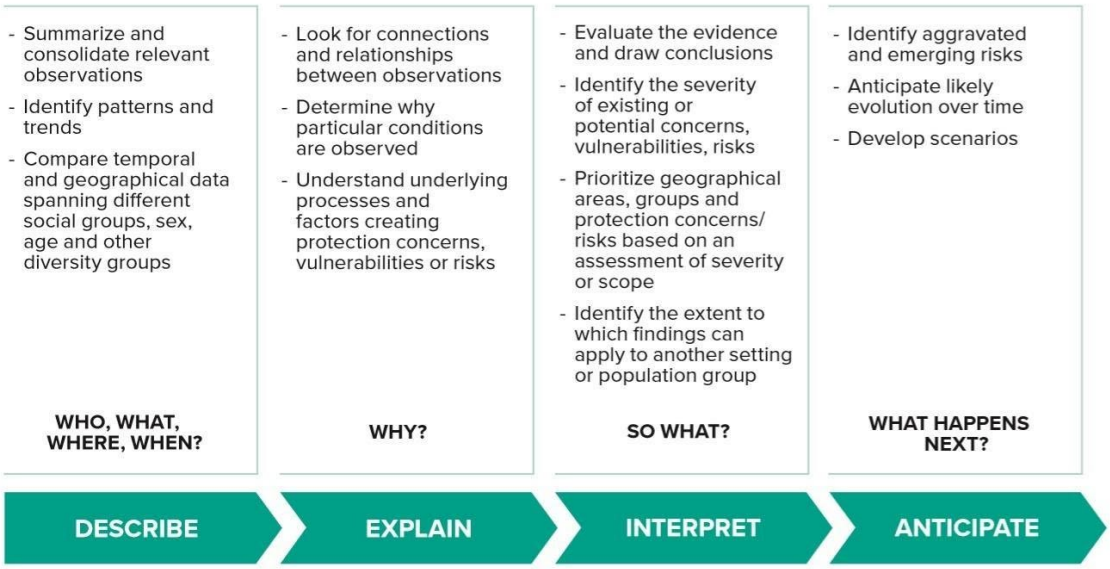
- Link problem, strategy and response
- Examine and weigh the impact of response options
- Suggest and advise on response

At the end of the prescriptive phase, the rapid assessment coordinator may have:

- A strategy and objectives to change the crisis outcome.
- A comparative analysis of different interventions, their likely outcomes, opportunities and risks.
- For each objective, a set of recommended interventions and sequence of action.

In a slightly different way, the analysis steps are described as follow:

Figure 3: *Analysis steps*



C. Dealing with inconsistent information

In any assessment, one will be faced with the problem of inconsistent or conflicting information. Conflicting information occurs when informants provide different answers to the same questions. For example, one person tells you that the water source runs dry for two months of the year, whilst another tells you that it never runs dry. One person tells you that all the animals from the village are dead. At the same time, another one tells you that half the animals are alive and grazing far away.

Consider the reasons for inconsistencies. These are three common possibilities:

- Perception. There is not always a “correct” answer. People’s interpretation of events depends upon their own circumstances and point of view.
- Access to information. Some people are better informed than others.
- Misrepresentation. Sometimes people purposefully provide misleading information

There are some steps to follow in order to minimise and resolve inconsistencies. The following questions help us to identify inconsistencies:

- Does the new information contradict secondary or baseline information?
- Does information collected by one informant support or contradict information from another?
- Does the information collected by different members of the assessment add up? Is it logical and consistent? Does the info “make sense”?

Asking these questions leads you to think of new questions or look for alternative information sources to clarify the situation. Triangulation is critical. Generally, verify important information by comparing inputs from at least three different sources. These sources should be as diverse as possible. If several various sources provide the same information, it is probably correct.

Discuss findings regularly with other members of the team. Take a step back from time to time during the assessment mission to compare information, discuss inconsistencies, and agree to modifications to the schedule of interviews. At the end of the fieldwork, the team meets to draw conclusions. Decide whether the inconsistency will affect the assessment conclusions. If the discrepancy is not critical, try to resolve it but do not spend much time on this. If you cannot resolve it, make a judgement and include a note explaining this in the assessment report

4.2

Element 2. Prioritise urgent and crucial issues and needs to be addressed

2.1 Analyse acute and chronic issues

A. Introduction

Prior to disaster occurrence, some existing issues remain in the population. They can be poverty, illegal or unregistered people, under-nutrition, environmental degradation, low literacy, etc. We should be able to identify and differentiate them from new and arising issues directly caused by a disaster.

It is important to mention that we do not aim to make humanitarian activities exclusive and independent by development or other works. On the contrary, humanitarian action should manage chronic issues whenever possible and appropriate. But we need to bear in mind that most chronic issues should not be handled through humanitarian programmes.

B. Distinguish between emerging and chronic needs

Almost all developing countries have long-standing lingering needs in most, if not all, sectors. It is important to design an assessment that will distinguish between chronic and emergency needs. The assessors must differentiate between what is 'normal' for the location and what is occurring because of the disaster to provide emergency assistance at the appropriate level. Thus, baseline information, i.e., the situation before a disaster, is essential to compare vulnerability before and after the disaster, identify the impact disasters might have and differentiate between chronic and emergency needs.

In the medium or longer-term, risk involving vulnerability to potential threats may demand prevention or mitigation measures, vulnerability reduction strategies, and social welfare provision within a broader development strategy. It will also demand a high level of emergency preparedness. Of course, the distinction between acute and medium-term risk is not absolute. Still, it is clear enough to allow some boundaries to be set on humanitarian action and establish priorities.

C. Chronic social issues

Issues such as poverty and crime exist before a disaster event, and the disaster likely exacerbates them. These issues are to be managed through development, social, economic programs, or alike. Humanitarian programs cannot be the right channel to address these issues. When possible and appropriate, see if we can prepare the ground or share relevant information.

Table 4: *Examples of chronic issues:*

Issue	Population Groups example
Discrimination and marginalisation	Women and girls
Social exclusion	Minority groups, including LGBTIs groups
Social isolation	Older people and persons with disabilities
Environmental degradation	People on marginal land
Climate variability	People living in coastal areas
Poverty	Low-income groups
Lack of land tenure	Displaced communities, slum residents
Ethnicity, class or caste	Minority groups
Religious or political affiliation	Minority groups

2.2 Develop and justify prioritisation of humanitarian needs

A. Introduction

It is necessary to ensure that our humanitarian action is based on needs. However, often there are too many needs with competing priorities, while

resources are inadequate. Thus, prioritisation of humanitarian action must be done transparently and accountable.

Prioritisation is made so that resources can be maximally utilised for the ultimate purpose of saving lives. Prioritisation must be done objectively and not driven by our preferences, experiences, or background knowledge. It has to be done with sound argumentation and factual information. Identification of people in need and sectoral needs is based on clear and objective criteria. This approach will lead to more credible and timely responses supporting those affected people.

The rapid assessment coordinator and the team members should be aware that the prioritisation of needs may change as the situation changes.

Prioritisation is commonly taken through two-step analysis:

- **Leaders redefine and ensure** a common understanding of the scope of the analysis among all assessment participants. In order to identify the strategic humanitarian priorities, the discussion first focuses on the following questions: where does the humanitarian community need to respond in priority? Who should be protected and/or assisted in priority, and which are the priority cluster/sector response domains?

- **The leader then directs the discussion along the following themes listed in the Framework:**

    - Drivers of the crisis and underlying factors
    - Scope of the crisis and humanitarian profile
    - Status of populations living in affected areas
    - National capacities and response
    - International capacities and response
    - Humanitarian access
    - Coverage and gaps
    - Strategic humanitarian priorities

    The discussion may use the related key questions and sub-questions

    - **Each theme** is discussed in the order in which it appears in the Framework and according to three dimensions: status and impact, vulnerabilities and risks, and trends.
    - **Trends require participants** to anticipate each theme's “worst” and “most likely” evolutions in the short-, medium- and long term. The compilation of anticipated trends will form the basis of scenario building.

- **Participants** are also asked to key out information gaps for each question, which are critical pieces of information when identifying strategic humanitarian priorities

B. CERF Life-Saving Criteria

The Central Emergency Response Fund (CERF) is a stand-by fund established by the United Nations to enable more timely and reliable humanitarian assistance to crisis-affected people. Life-saving and/or core emergency humanitarian programmes are those actions that within a short time span remedy, mitigate or avert direct loss of life, physical and psychological harm or threats to a population or significant portion thereof and/or protect their dignity. The programmes include standard humanitarian services necessary to enable life-saving activities and multiagency assessments in the instance of sudden-onset disasters.

The life-saving criteria have been developed with a range of crises but must be interpreted in relation to disaster specific context. The life-saving criteria document elaborates prioritised humanitarian activities by sectors, namely: agriculture in emergencies, camp coordination and camp management, education in emergencies, emergency shelter including non-food relief items, food, health in emergencies, logistics, nutrition, protection and human rights, gender-based violence, child protection, mine action, support services, water and sanitation, multi-sector, coordination, and multiagency assessments. Although it is not meant to be exhausting, the list of criteria can be a good reference when developing the priorities of needs based on our assessment analysis.

Self-assessment Checklist

ASCEND

ADM.TEC.003.1

Learner's Guide

Self-assessment Checklist

Please use the checklist below to help you determine whether you are prepared to be assessed in this unit of competency. The boxes without tick mark indicate that there may be some areas you need to work on to become ready for assessment.

Instructions Please tick (✔) the box if your answer is yes	**Questions**
☐	Have I read the Learner Guide and understood its contents?
☐	Have I attended, participated in, and completed all training sessions and activities?
☐	Have I reviewed the learning resources to reinforce what I've learned in training?
☐	Am I able to demonstrate my understanding of each element and performance criteria of this unit of competency by writing a summary in my own words?
☐	Am I able to communicate how my experience, knowledge, skills-sets, and attitudes make me qualified and competent enough to perform the job related to this unit of competency?

Oral Interview and Written Test Guide

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ADM.TEC.003.1

Learner's Guide

Oral interview and written test guide

This section guides candidates on how to communicate, demonstrate, or present evidence, responses, and their work in a professional manner. There are three primary ways the candidates will be assessed: through observation, oral interview, and written test. The assessor will determine the final assessment methods and tools depending on several factors like the local context, professional needs, and the like.

On observations

Assessors will observe the candidate over a period of time to collect evidence of their capability to meet the required standards and performance criteria. Assessors may attend selected learning sessions, if any, to witness how candidates complete their activities and participate in exercises. In doing so, assessors can get a sense of the candidate's key strengths and areas for improvement concerning the unit of competency. It will benefit candidates to ensure that their work is always complete and presentable.

On oral interview

Assessors will conduct oral interviews to confirm and evaluate the candidate's experience, knowledge, skills, and attitudes regarding the unit of competency under assessment.

It may include verification questions about what you learned from the training content and material. Please review the Unit Readings and complete the Self-assessment Checklist in this document. It may also include competency questions about your knowledge and skills. Assessors may ask you what knowledge or skill you will use or apply to address a specific occupational issue or problem. Candidates need to think about how they will carry out their critical job functions in a defined work setting.

Finally, the interview may also include behavioural questions that focus on attitudes. Assessors may ask for examples of what you will do when a particular situation happens or when circumstances change. Candidates will need to support their answers with reflections on their own or other's experiences and the lessons learned from those.

On written tests

Assessors will also present a written test to candidates to confirm whether candidates learned and understood the training content and material concerning the unit of competency under assessment.

Accuracy, brevity, and clarity are the ABCs of good writing. The first thing candidates are suggested to do is answer the questions as accurately as possible. It helps structure your response and sharpen your main points in an outline before writing them down. Candidates are advised to use short and simple sentences and paragraphs. Your answers need to be easy to read and understand. It includes removing and leaving out irrelevant material. Candidates are also expected to write coherently and logically so that readers can follow their thought. The key messages and transitions between your sentences and paragraphs must be clear.

Proofread and correct errors in your work before submitting it. How you format your work also matters. If you are using a computer, please check whether your indentions, margins, spacing, listings (bullets, numerical sequencing), and page numbers are in order.

Recommended Readings

ASCEND

Recommended Readings

ACAPS. (2011). *Questionnaire Design for Needs Assessments in Humanitarian Emergencies, Switzerland*. Accessible here

ACAPS. (2011). *Technical Brief – Direct Observation and Key Informant Interview Techniques, Switzerland.* Accessible here

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ACAPS. (2016). *Meeting Information Needs? A Review of Ten Years of Multi-sector Coordinated Needs Assessment Reports, Switzerland.* Accessible here

AHA Centre. (2015). *ASEAN-ERAT Guidelines. Indonesia*. Accessible here

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Benini, A., P. Chataigner, N. Noumri, N. Parham, J. Sweeney and L. Tax. (2017). *The Use of Expert Judgment in Humanitarian Analysis – Theory, Methods, Applications. Switzerland: Assessment Capacities Project - ACAPS*. Accessible here

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IFRC. (2008). *Guidelines for Assessment in Emergencies. Switzerland.* Accessible here

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ODI-Humanitarian Policy Group Report 15. (2003). *According to need? Needs assessment and decision-making in the humanitarian sector. United Kingdom.* Accessible here

The Sphere Project. (2014). *Sphere for Assessments. Switzerland.* Accessible here

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UN WFP Office for Evaluation. (2008). *How to consolidate, process and analyse Qualitative and Quantitative Data. Italy.* Accessible here

Training Evaluation Sheet

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Training evaluation sheet

Name of Training			
Competency unit title and number	**ADM.TEC.003.1** Conduct Comprehensive Analysis		
Location of training		**Date of training**	

Instructions Please tick (✔) your level of agreement with the statements below	**Strongly Agree**	**Agree**	**Neither Agree or Disagree**	**Disagree**	**Strongly Disagree**
Training content and facility					
The training objectives were clearly defined and met.	☐	☐	☐	☐	☐
The training content was organised and easy to follow.	☐	☐	☐	☐	☐
The training material was relevant and useful to me.	☐	☐	☐	☐	☐
The training facility is adequate and comfortable.	☐	☐	☐	☐	☐

Training delivery and activities

The trainers/presenters were knowledgeable and well prepared.	☐	☐	☐	☐	☐
The trainers/presenters were engaging and helpful.	☐	☐	☐	☐	☐
The length of the training was sufficient for learning.	☐	☐	☐	☐	☐
The pace of the training was appropriate to the content and attendees.	☐	☐	☐	☐	☐
The activities and exercises encouraged participation and interaction.	☐	☐	☐	☐	☐

What did you like most about this training?

What parts of the training could be improved?

Other comments and feedback:

Thank you for completing this training evaluation form.
Your response is appreciated.

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ASEAN Standards and Certification for Experts in Disaster Management

THE AHA CENTRE

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