

Post Disaster Needs Assessment -PDNA- PAHO/WHO

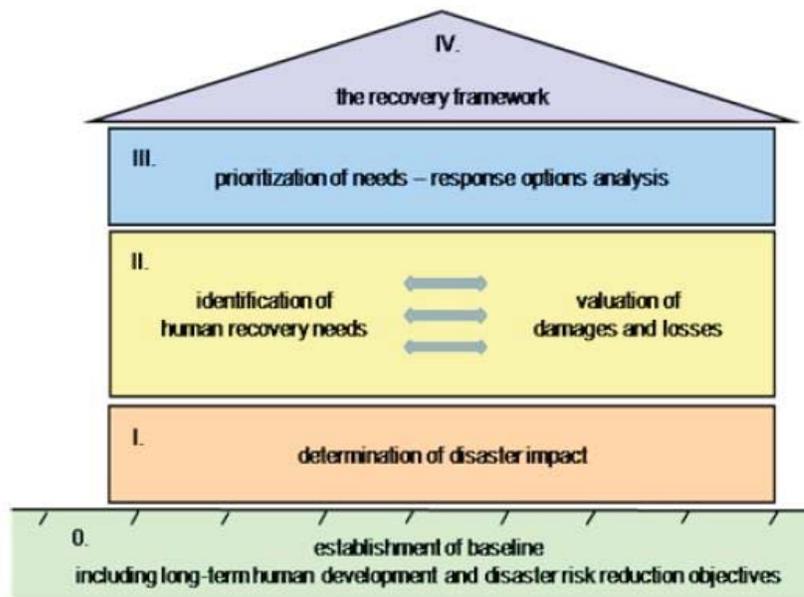
THE PDNA/RF¹ (Post Disaster Needs Assessment and Recovery Framework)

A PDNA/RF is a **government-led exercise** that pulls together information into a single, consolidated report detailing information on the physical impacts of a disaster, the economic value of the damages and losses, the human impacts as experienced by affected populations, and related **early and long-term recovery needs and priorities**

The tool was jointly developed by the UN System, the World Bank (WB), the European Commission (EC) and, for the special case of the Americas, the Inter American Development Bank (IADB).

PDNA process includes:

- Establishing a baseline that includes long-term policies for human development and risk reduction objectives.
- Determining the impact of the disaster
- Identifying needs for recovery rating damages and losses
- Prioritization of needs - analysis of response options.
- A framework for recovery.



The methodology is based on the DaLA (Damage and Losses Assessment)², and recovery methodologies.

¹ <http://www.preventionweb.net/english/professional/networks/private/PDNAandRF/>

² <http://www.eclac.org/cgi-bin/getprod.asp?xml=/noticias/paginas/4/35494/P35494.xml&xsl=/tpl/p18f.xsl&base=/tpl/top-bottom.xsl>

Specifically for the Health Sector, which is comprised in the Social Services, the methodology is also based on the TRIAMS³, the IRA⁴ and the HeRAMS⁵ and seeks to develop a real plan of action for reconstruction and development that includes development and humanitarian issues without international help replacing national responsibilities and authorities.

IRA (Initial Rapid Assessment)

The Initial Rapid Assessment's (IRA)⁶ **purpose** is to provide a rapid overview of the emergency situation, based on essential multi-sector data, in order to identify the immediate impacts of the crisis, estimate needs and ongoing vulnerabilities of the affected population and define the priorities for humanitarian action in the first three weeks.

There are four basic preconditions for the IRA and subsequent humanitarian response:

- 1) Unimpeded access to the affected population,
- 2) Adequate security for personnel to operate,
- 3) Availability of staff, and
- 4) Availability of funding for intervention.

The **objectives** of the IRA are to provide data to answer the following core questions:

- What has happened? Is there an emergency situation and, if so, what are its key features?
- How has the population been affected by the emergency? Who is likely to be most vulnerable and why? How many people were affected, and where are they?
- Are interventions required to prevent further harm, injury or loss of life? If so, what are top priorities for humanitarian assistance?
- What are continuing or emerging threats that may escalate the emergency?
- What resources and capacities are already present (e.g., infrastructure and institutions) that could assist in the response, and what are the immediate capacity gaps?
- What are the key information gaps, which should be addressed in follow up surveys and/or qualitative assessments?

The IRA Tool should represent the best picture of the situation, based upon all of the primary and secondary information collected. All the activities of the IRA should take from one to two weeks. After one or two weeks it is likely that there will be substantial capacity for more in-depth and sector-specific assessments and the IRA will become less relevant.

In Haiti's PDNA, this methodology could have been a greater help, if the compilation of data would have been more aligned to the needs of the process and could have permitted a better analysis of the information.

TRIAMS (Tsunami Recovery Impact Assessment and Monitoring System)

TRIAMS⁷ is a monitoring methodology, whose purpose is to assist governments, donors, partners and beneficiaries in identifying the impact of Tsunami response and in measuring recovery rates.

³ <http://www.preventionweb.net/english/professional/publications/v.php?id=2089>

⁴ www.undp.org/cpr/iasc/content/docs/CWGER_Tools/Doc12.doc

⁵ www.iawg.net/resources/Graph_RAM5_5aug09.pdf

⁶ Initial Rapid Assessment (IRA): Guidance Notes for Country Level, IASC Health Cluster, IASC Nutrition Cluster, IASC WASH Cluster, September 2007.

⁷ TRIAMS: Tsunami Recovery Impact Assessment & Monitoring System - Summary Presentation.
See: <http://www.ifrc.org/docs/pubs/updates/triams-presentation.pdf>

It proposes to assist stakeholders in assessing impact and monitoring recovery progress by focusing in four key areas: 1) Vital Needs, 2) Access to Basic Social Services, 3) Rehabilitating and Reconstructing Infrastructure, and 4) Livelihood

TRIAMS data analysis would be used to inform:

- All stakeholders of on-going planning of recovery efforts
- Beneficiaries of progress & impact to date and seek feedback
- Donors, partners and the public on the utilization of resources and the results
- Future disaster response and recovery efforts

Its two key questions are to 1) determine the availability of baseline data within key areas of recovery and 2) to examine the extent to which losses and disruption has been restored

Within the recovery process, it aims at examine if:

- Living conditions and standards have returned to pre-existing levels or have reach better standards
- The recovery interventions are targeting the poorest household and communities and they are addressing pre-existing inequalities, as well as avoiding that these interventions will create new inequalities.

The primary objectives of TRIAMS are to answer two key research questions by:

- Contributing to the development of a systematic monitoring & evaluation system that allows the recovery to be tracked and helps to assess the overall impact of the tsunami response
- Enhancing the capacity of government, UN and non-governmental agencies in collecting, analyzing and using monitoring & evaluation data

This methodology has four main components: 1) Impact Indicators 2) Monitoring Indicators 3) Beneficiary Perspectives 4) Other Qualitative Methods:

In the specific case of Haiti, until the actual stage of the process, this methodology hasn't been used. It might be applicable after funding and donations are received and there is a necessity for follow up.

HeRAMS (Health e Resources Availability Mapping System)

Through HeRAMS⁸, the Global Health Cluster aims at promoting and supporting good practice in mapping health resources and services availability in emergencies so as to strengthen informed based decision making by the Health Cluster.

HeRAMS is an IT Platform, centralized data collection methodology, which aims at ensuring that:

- Assessment and monitoring of health resources and services availability can be conducted systematically and quickly despite limited time, resources and accessibility.
- Assessment and monitoring is exhaustive and homogeneous over the area of concern.
- Data structure is a meaningful disaggregation of the information in its most granular form to allow flexible analysis
- Standards are discussed and agreed upon at the start of the process and adhered to throughout the information cycle (collection, management, analysis, dissemination).

⁸ HeRAMS - Health Resources Availability Mapping System - Approach & Roles and Responsibilities of the Cluster, Global Health Cluster / Health Actions in Crisis / World Health Organization, 2009.
See: http://www.who.int/hac/network/global_health_cluster/herams_users_guide.pdf

Efficiently mapping health resources and services availability requires that 5 key areas of information are tackled. These constitute the backbone of the IT Platform:

1) *Metadata*: is usually described as "data about data". It is a description of the data collected. HeRAMS considers 2 sets of Metadata:

The first set describes the data collection process itself by defining:

- "Time Stamp"
- "Interviewer/Data Collector"
- "Interviewee/Information Source"

The second set - the "Data Dictionary" - is a compilation of the definitions of the various data items collected, as discussed and agreed by the Cluster.

2) *Point of Delivery*: The Point of Delivery is the location at which health resources and services are being made available. Points of Delivery are defined both geographically and thematically. They are characterized both by the name of the given location and its' type.

3) *Modality of Delivery*: The "Modality of Delivery" is the way through which resources and services are made available.

It therefore generally consists in describing health facilities but was developed so as to accommodate for modalities that require a more specific approach, such as Field Hospitals, Mobile Clinics or Community Based Workers

4) *Health Personnel*: The Health Personnel section gathers the number, by type, of health personnel operating through a given modality of service delivery.

5) *Health Services*

HeRAMS intends to strike a balance by focusing only on the information that will be crucial for coordination and decision-making.

This methodology was not used in the case of Haiti.

EWARS (Early Warning and Response System)

EWARS⁹ is a hospital-based sentinel surveillance system. It was designed to provide more timely information to the decision makers to facilitate early response.¹⁰

The objectives of the system are:

- To detect outbreaks
- To trigger immediate response to control outbreak
- To provide health indicators to other partners for monitoring public health intervention
- To monitor trends of specific diseases under surveillance
- To assess health structure workload in order to optimize resource allocation

This methodology was also not applicable to Haiti, due to the nation's preconditions: the difficulty to establish a sentinel surveillance system in the country.

⁹ Assessment of Early Warning and Reporting Systems (EWARS) in NEPAL. See: http://www.ehproject.org/PDF/Activity_Reports/AR-126%20EWARS-ASSESSMENT.pdf

¹⁰ Early Warning and Response System – EWAR: A critical component of health information system in complex emergency situation, Presentation.

DaLA Methodology by ECLAC

ECLAC¹¹ has developed a methodology that assesses the social, economic and environmental effects of disasters, breaking them down into direct damages and indirect losses and into overall and macroeconomic effects. The DaLA is not aimed at identifying the origins of disasters or defining the actions to be undertaken during the emergency or humanitarian assistance stage.

DaLA focuses on the conceptual and methodological aspects of measuring or estimating the damage caused by disasters to capital stocks and losses in the production flows of goods and services, as well as any temporary effects on the main macroeconomic variables. It also contemplates both damage to and effects on living conditions, economic performance and the environment.

In general, the assessment should not begin until the humanitarian assistance stage is completed or well underway, so as not to interfere with search and rescue activities and to ensure the availability of sufficient quantitative information on direct, indirect and macroeconomic damage and losses. On the other hand, the assessment should not be unnecessarily delayed as there is an urgent need to elicit support from the international community, whose attention may quickly be diverted by disasters in other parts of the world.

This methodology was the base of the PDNA process in Haiti.

Three elements are required for the assessment of health sector.

- Data on the health status and risks of the affected population;
- Availability and functionality of resources and health services;
- Data on the level of health system.

One of the steps that should be taken in order to ease the work (like in the case of Haiti) is to divide the subgroup of Health after the first introductory meetings into several working groups, for the better evaluation and analysis of the data. The working groups could be the following (after the health system building blocks plus the DaLA sub team):

- Damage and Losses
- HR
- Access to Health Services
- Governance
- Supply chain management
- Technologies and medications
- Financing

¹¹ ECLAC Handbook For Estimating The Socio - Economic And Environmental Effects Of Disasters, ECLAC, 2003.