What Have We Learned? Needs Assessment

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Keywords: actions; capacity; coordination; data; disaster; effectiveness; knowledge; needs assessments; non-governmental organization (NGO); population; redundancy; standards; timeliness; Tsunami; United Nations; World Health Organization (WHO)

Abbreviations:
GIS = geographical information systems
HPG = Humanitarian Policy Group
NGO = non-governmental organization
UN = United Nations
UNDAC = UN Disaster Assessment and Coordination
WHO = World Health Organization

Web publication: 17 November 2005

Abstract

This is a synthesis of the presentations and discussions pertaining to Needs Assessments of the Conference, *Health Aspects of the Tsunami Disaster in Asia*, convened by the World Health Organization (WHO), in Phuket, Thailand, 04–06 May 2005. The topics discussed included: (1) Needs assessments; (2) Coordination; (3) Effectiveness of needs assessments; (4) Needs assessments change; (5) Qualifications for conducting needs assessments; (6) Dissemination; (7) Emergencies overlay background needs assessments; (8) Need for standards; and (9) Conclusions and recommendations.

Deitchman S: What Have We Learned?—Needs Assessment. *Prehosp Disast Med* 2005;20(6):468–470.

Introduction

This paper is a synthesis of the ideas raised concerning needs assessments during the panel discussions and plenary sessions of the World Health Organization's (WHO) Conference on the Health Aspects of the Tsunami Response, 04–06 May 2005, convened in Phuket, Thailand. Some of the observations and opinions represent the personal perspectives (and biases) of the author (synthesizing rapporteur). The remarks have been categorized into eight major areas: (1) needs assessments; (2) coordination; (3) effectiveness of needs assessments; (4) changes in needs assessments over time; (5) qualifications; (6) dissemination; (7) emergency needs overlay background needs; and (8) need for standards.

Needs Assessments

Needs assessments are one of the most important aspects of disaster responses and relief planning. Indeed, the term "needs assessment" was used by many of the participants at this Conference, and appeared in the presentations on a variety of topics. For this reason, it is helpful to begin by identifying some of the underlying concepts. The Humanitarian Policy Group (HPG) of the Overseas Development Institute suggests that: "The main reason for conducting a humanitarian needs assessment is to inform an organizational decision about what to do in relation to a given situation."[1] The HPG suggests that needs assessments are conducted to answer four main decision-making questions: (1) Should there be an intervention?; (2) What is the nature and scale of the intervention?; (3) What are the priorities for the allocation of resources?; and (4) What is the program design and what planning is required?.

These fundamental questions emphasize the requirement that needs assessments must be conducted in a variety of subject areas as part of the response to a disaster. While the subject of this Conference is health needs, these questions also apply to reconstruction needs, the needs for financial support, information needs, and a host of other considerations. Although many believe that the term implies only the needs of the indigenous peoples affected by the disaster, it also should include the needs of the emergency responders, relief workers, and reconstruction personnel.

There were several problems encountered in the conduct of needs assessments, including: (1) unnecessary repetition; (2) lack of coordination; (3) determination of effectiveness; (4) changes over time; (5) lack of qualifications; (6) inadequate dissemination; and (7) need for standards.

https://doi.org/10.1017/S1049023X00003149 Published online by Cambridge University Press

Coordination

The most frequently cited concern expressed during this Conference regarding needs assessments was the *lack of coordination* between different parties conducting needs assessments in a defined area affected by the Tsunami. Redundancy in needs assessments occurred, including site visits and surveys. One of the Conference participants reported that one physician in a hospital told a group of visitors that they were the 17th delegation to ask him the same questions. This repetition is extremely inefficient. Participants also mentioned that many of the needs assessors required housing, guides, and transportation. This logistical burden on the local responders diverted local personnel, resources, and vehicles from focusing on the actual responses, and could have been minimized by eliminating redundancy (Panel 1.4).

Redundancy of needs assessments also took a toll on the Tsunami survivors. Several participants suggested that when multiple assessors ask the same questions to survivors who have lost so much, it affects their ability to complete the grieving process.

Therefore, Conference participants identified the requirement of diverse needs assessments on topics including health, food and nutrition, water, shelter, and gender- and age-specific needs be integrated into the future disaster response efforts (Panels 2.3, 2.8, 2.11). The goal of this integration would be to reduce the number of times survivors are approached by the needs assessors. However, if this strategy is to succeed, *someone* must coordinate the conduct of the surveys, and collate, interpret, and disseminate the resulting data and information. Some participants suggested that the WHO should take on this role, while others did not identify a specific entity to provide the coordination.

Effectiveness

Participants stated that the needs assessments conducted must be effective (Table 2), and suggested several criteria to this end: (1) timeliness; (2) usefulness; and (3) linked to action.

1. *Timeliness*—Assessments must be timely. Therefore, the entire needs assessment process, including the: (1) design and administration of the data collection process; (2) processing and interpretation of the data; and (3) production of results, must be completed in as short a time as possible. This will ensure that the results are available in time to make a difference in the decision-making processes and in the interventions selected and implemented (Panel 2.1).
2. *Usefulness*—Those planning the assessments should differentiate between collecting information central to planning any intervention as opposed to collecting information that could be "interesting", but has no value for response planning. Time and resources should not be wasted collecting the latter (Panel 2.1).
3. *Linked to action*—Needs assessments are effective only when they are *linked to action*. One participant described how survivors in his country reported having been asked about their material and financial needs in multiple surveys, but received no assistance (Panel 2.1). From the perspective of those survivors, who should be the focal point of relief efforts, these assessments were ineffective.

Needs Assessments Change

The information required and the assessment strategies used for collecting this information will change over the duration of a disaster response effort. In the period immediately following the event (sudden-onset), responders require only the most basic information about the event and its possible impact. Some of this information may be inferred from knowledge of the pre-event status of the affected area, the hazard involved, and the characteristics of the event. For example, one presentation described a novel approach that combined pre-existing geographical information systems (GIS) data on population location and density in the Tsunami-affected area with satellite imagery that showed the extent of the water incursion on the land in order to estimate the size and location of the population affected (Panel 2.1). Information like this could be used to plan the initial relief efforts, while strategies for collecting more detailed information are being devised.

However, during the Conference, there was tension between those who advised launching interventions as soon as possible and those who advised waiting for information to guide interventions. In one panel, it was stated that rapid, life-saving interventions should take precedence over needs assessments "even at the risk of delivering unnecessary services and supplies" (Panel 1.4). Advocates of this latter strategy recommended launching the response task force immediately, and then, defining needs assessments *en route* and upon arrival. This approach was opposed by some who had seen the delivery of inappropriate supplies to the Tsunami-affected areas. These representatives suggested that, upon hearing about the disaster, potential responders should wait in order to confirm that relief supplies being loaded on aircraft will be beneficial to the population in the affected area (Panel 2.1). Humanitarian relief workers will be challenged to find the middle ground between these two extremes.

As a disaster response moves from the initial emergency phase into the relief and recovery phases, more detailed information is required to plan appropriate interventions. Participants specifically mentioned the requirement for assessors to consult with local colleagues and members of the local, affected population when designing needs assessments. These individuals are more likely to understand local customs and practices, and can help define the areas in which the conduct of needs assessment will be most relevant (Panel 2.1). The corollary to this observation is that there is a need to invest in the local capacity for conducting its needs assessments as part of pre-disaster planning. This should include bolstering the technical skills of local workers (Panel 2.1), and building local, routine, health surveillance systems to include a capacity to expand as needed to address a disaster situation (Panel 2.2). Unfortunately, an event causing severe devastation may disable the local needs assessment capacity, so expectations in this area must be realistic. In some of the Tsunami-affected areas, local assessment efforts were possible, but in others, external assistance was required for weeks for virtually all of the assessment functions. For example, in Aceh, military resources (especially transportation resources) were used to conduct needs assessments successfully, thus showing how

https://doi.org/10.1017/S1049023X00003149 Published online by Cambridge University Press

novel collaborations can facilitate the conduct of needs assessments (Panel 2.1).

Qualifications for Conducting Needs Assessments

There was no explicit discussion of specific training or experience required for those who conduct different types of needs assessments, but relevant experiences were cited. Organizational affiliations did not guarantee competence, as some individuals representing the WHO or UN agencies lacked appropriate training to conduct their needs assessments (Panel 2.1). Conversely, some who might not have been expected to possess the required skills, in fact, did so. A specific example occurred in the Singaporean military, in which healthcare workers previously had received UN Disaster Assessment Coordination (UNDAC) training for conducting needs assessments, and performed the task well (Panel 1.4). These experiences indicate that relevant training is essential and enabling.

Dissemination

All aspects of the data/information obtained from needs assessments must be made public and disseminated to all of the stakeholders. Otherwise, redundant needs assessments are carried out that, in turn, render responses inefficient and place a variety of additional burdens on the affected community. In addition, it must be stated that nobody "owns" the data they collect during needs assessment. Access to the affected area and its inhabitants is a privilege granted with the understanding that the information collected will be used to help the affected inhabitants. Populations are helped best when the information obtained is available freely to the affected populations, their governments, and internal and external responders. An example was presented of a non-governmental organization (NGO) that had conducted a survey and considered that it "owned" the results; at the time of this Conference (almost two months after the survey was completed), the NGO still had not made the information obtained available to the government of the affected region. This is unacceptable and should not be tolerated in future disaster responses.

Emergency Needs Overlay Background Needs

Participants noted that disasters occur in the context of a pre-event setting and that the pre-existing situation significantly affects the post-event needs. Needs assessments must take into account these pre-event aspects. The pre-event epidemiology of diseases in the area identifies those diseases that were endemic before the event. These endemic diseases likely will become potential problems after the event. Assessors also must understand pre-existing, local disease-control programs, so that relief efforts can supplement rather than displace them. Similarly, knowledge about the pre-existing population health and nutritional status (Panel 2.1), water and sanitation capacities (Panel 2.8), and healthcare system capacity (Panel 2.9) helps to indicate what has been lost, what must be rebuilt or replaced, and what must be developed anew. Additionally, some participants indicated that areas under their jurisdiction received sophisticated equipment that local users had no capacity to use or maintain. Local capacities for equipment maintenance must be considered when planning deliveries of aid (Panel 2.1).

Need for Standards

Standards in the area of needs assessments are required. When standards do exist, disparate users of information understand how the data were collected and how reliable the data are. Standardized indicators of population requirements, such as those developed in the Sphere Project, helped unify perspectives on the type and amount of relief needed in a given situation (Panel 2.1). Standardized sampling methods and analytical methods will facilitate better understanding of the results of the assessment (Panel 2.1).

Participants indicated that new indicators and analytical methods are required to better assess the needs of sensitive sub-groups, particularly women and children (Panel 2.3), and to assess psychosocial and mental health needs (Panel 2.6). Finally, standardized reporting formats will allow users to extract relevant information quickly from shared needs assessment reports. Despite the similarities of different disaster situations, however, new and unusual issues arise frequently. The response community will be challenged to retain the flexibility required to meet novel situations even while efforts toward reaching better standardized needs assessments continue.

Conclusions and Recommendations

The following conclusions and recommendations were developed:

1. Needs assessments are essential for decision-making and for the development of plans to meet the needs and priorities for allocation of resources;
2. There was an absence of coordination between different partners;
3. Needs assessments must be timely;
4. Results must be made available to all of the stakeholders;
5. Identification of needs must be followed by actions directed at meeting the identified needs;
6. Needs assessments depend on the pre-event status of the affected population, and this information must be available to the assessors;
7. Assessments must be appropriate culturally for the local population;
8. Competence is required to conduct needs assessments; and
9. Standards for needs assessments are required.

Summary

Perhaps the most frequently mentioned problem with the Tsunami responses was the conduct of needs assessments. Substantial requirements exist for improvements in the processes used for the conduct of needs assessments, their design and application, the qualifications of the assessors, and for the development of standards.

Reference

1. Darcy J, Hofmann C: According to Need? Needs Assessment and Decision-Making in the Humanitarian Sector. London: Overseas Development Institute, 2003. p 26.

https://doi.org/10.1017/S1049023X00003149 Published online by Cambridge University Press