



ASEAN-ERAT

EMERGENCY RESPONSE AND ASSESSMENT TEAM



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SEMINAR GUIDELINES

The ASEAN Co-ordinating Centre for Humanitarian Assistance on disaster management (AHA Centre) shall be established for the purpose of facilitating co-operation and co-ordination among the Parties, and with relevant United Nations and international organisations, in promoting regional collaboration

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LIST OF ACRONYMS & ABBREVIATIONS

AADMER	- ASEAN Agreement on Disaster Management and Emergency Response
ACAPS	- Assessment Capacities Project
ACDM	- ASEAN Committee on Disaster Management
AHA Centre	- ASEAN Coordinating Centre for Humanitarian Assistance on disaster management
APG	- ASEAN Partnership Group (<i>made up of six international NGOs, namely Child Fund International, Save the Children, Help Age International, World Vision, Mercy Malaysia, Plan International and Oxfam Great Britain</i>)
ARDEX	- ASEAN Regional Disaster Emergency Response Simulation Exercises
ASEAN	- Association of Southeast Asian Nations
BNPB	- Badan Nasional Penganggulangan Bencana (Indonesia's National Disaster Management Agency)
CA	- Competent Authorities
CIQ	- Customs, Immigration and Quarantine
EOC	- Emergency Operations Centre
ERAT	- Emergency Response and Assessment Team
FRP	- Field Response Plan
IASC	- Inter-Agency Standing Committee
ICCT	- In-Country Coordination Team
INSARAG	- International Search and Rescue Advisory Group
JOCCA	- Joint Operation & Coordinating Centre of ASEAN
LEMA	- Local Emergency Management Authority
NDMO	- National Disaster Management Office
NFP	- National Focal Point
NOC	- National Operation Centre
OCHA	- Office for the Coordination of Humanitarian Affairs
OSOCC	- On-site Operations and Coordination Centre
PoA	- Plan of Action
SAR	- Search and Rescue
SASOP	- Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response Operations
SOP	- Standard Operating Procedure
UN	- United Nations
UNDAC	- United Nations Disaster Assessment and Coordination
USAR	- Urban Search and Rescue

1. PREFACE

A. Introduction

- 1.1 The objective of the ASEAN Agreement on Disaster Management and Emergency Response (AADMER) as stated in Article 2 is to jointly respond to humanitarian emergencies through concerted national efforts and intensified regional and international cooperation. AADMER also stipulates a number of actions to be taken by ASEAN Member States in terms of preparedness and response to jointly respond to a disaster in the region. These are included in Article 8 up to Article 16 of Parts IV and V of the AADMER.
- 1.2 In line with these Articles, ASEAN has agreed on disaster preparedness and emergency response mechanisms and tools, including the Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response Operations (SASOP), ASEAN Regional Disaster Emergency Response Simulation Exercise (ARDEX), and the ASEAN-Emergency Response and Assessment Team (ERAT) to be used to ensure the overall preparedness, response, deployment, coordination and supervision of assistance when a disaster occurs within the region.

B. Background

- 1.3 The ASEAN disaster preparedness and emergency response tools and mechanisms were put in use when the Cyclone Nargis made a landfall in the Ayeyarwady and Yangon Divisions of Myanmar on 2 and 3 May 2008. Cyclone Nargis left almost 140,000 dead or missing and adversely affected up to 2.4 million people.
- 1.4 Following the disaster, ASEAN Secretariat as the acting Interim AHA Centre activated the SASOP and released daily situation updates to monitor the situation, gather updates and recommend on responses required. One of the recommendations made in the daily situation updates was mobilisation of the ACDM-coordinated ERAT to Myanmar to conduct joint assessment, and coordinate and gather information in the field.

- 1.5 The first batch of the ASEAN-ERAT began to operate in Yangon from 9 May 2008 and the mission lasted until 18 May 2008. The key objective of the first ASEAN-ERAT mission was to gather and analyse assessment findings through consultations with senior government officials and field assessments in order to provide recommendations on the way forward in addressing the support for the Government of Myanmar. In addition to ERAT members, United Nations Disaster Assessment and Coordination (UNDAC) members who were ASEAN nationals and were in the field at the same time were invited to join the ASEAN-ERAT as resource persons.
- 1.6 The mission report of ASEAN-ERAT was presented to the Special Foreign Ministers' Meeting in Singapore on 19 May 2008. It contains key findings covering issues such as access, logistics, shelters, water, health, food security, education and a set of recommendations, which include the immediate establishment of a humanitarian coalition for the victims of Cyclone Nargis to coordinate and facilitate the ongoing relief, recovery and future reconstruction efforts. The implementation of the above coalition commenced with the establishment of the ASEAN Humanitarian Task Force for the Victims of Cyclone Nargis, and its derivative, the tripartite mechanism comprising ASEAN, Government of Myanmar and United Nations, known as the Tripartite Core Group (TCG). The mission report of ASEAN-ERAT was crucial as it led to the establishment of the above ASEAN-led mechanism, which has proved successful in facilitating relief and recovery efforts for the cyclone-affected people.

C. Moving Forward

- 1.7 In March 2010, the ASEAN Committee on Disaster Management (ACDM) adopted the AADMER Work Programme that contains the strategies for implementing AADMER. One of the flagship projects identified by the ACDM Working Group on Preparedness and Response was the "Establishment of a Fully-functional Emergency Rapid Assessment Team (ERAT)". The need to strengthen ASEAN's preparedness and capacity to respond to disasters and ensure the rapid and collective deployment of ASEAN's assistance following a major disaster in one or more

Member States within the ASEAN region was the rationale behind this priority. The ACDM also agreed that Singapore as lead shepherd country for the Working Group on Preparedness and Response for the implementation of the AADMER Work Programme, would take the lead in finalising the Guidelines for the Deployment of ASEAN-ERAT and convene the ASEAN-ERAT training in 2010. By the end of October 2010, the ASEAN-ERAT Workshop and 1st ASEAN-ERAT Induction Course have been successfully conducted in Singapore.

- 1.8 It was adopted during the 23rd ACDM meeting in Danang, Vietnam that the role of the ASEAN-ERAT will be expanded to include support to emergency response operations. In addition to rapid assessment, ASEAN-ERAT roles will also include support to logistics, emergency communications, coordination, among others. Hence, the ASEAN-ERAT will be known henceforth as ASEAN Emergency Response and Assessment Team.

D. ASEAN-ERAT Guidelines

- 1.9 The ASEAN-ERAT Guidelines has been developed by the ACDM Working Group on Preparedness and Response in cooperation with numerous actors who have gained invaluable experience in developing and response capabilities and responding to major regional and international disasters.
- 1.10 The ASEAN-ERAT Guidelines is intended as an easily accessible reference tool for ASEAN-ERAT before and during a mission to a disaster or emergency. The information on personal preparedness and pre-deployment arrangements, mission equipment and alert, activation and mobilization procedures provides guidance to the ASEAN-ERAT on their basic responsibilities as a regional responder. The further details on deployment procedures, rapid assessment methodology, reporting, on- site coordination and demobilisation should be used by the ASEAN-ERAT as they deploy to disasters regionally. This also allows the ASEAN-ERAT Guidelines to be used as a primary source of reference for training of the ASEAN-ERAT.

- 1.11 The ASEAN-ERAT Guidelines is also closely linked to the SASOP as it makes use of the existing emergency response procedures in the SASOP to facilitate alert, activation, mobilization and deployment of the ASEAN- ERAT. This ensures the various institutions involved are constantly synchronised in their understanding of the procedures involved and actions required during an emergency.
- 1.12 Finally the ASEAN-ERAT Guidelines will continue to be improved and evolve with the experience gained by the ASEAN-ERAT from response to regional disasters and preparedness exercises.

2. USE OF TERMS

“AHA Centre” means the Centre that shall facilitate co-operation and coordination among the Parties, and with relevant United Nations and international organizations, in promoting regional collaboration. The AHA Centre shall work on the basis that the Party will act first to manage and respond to disasters. In the event that the Party requires assistance to cope with such a situation, in addition to direct request to any Assisting Entity, it may seek assistance from the AHA Centre to facilitate such request.

“Assisting Entity” means a State, international organisation, and any other entity or person that offers and/or renders assistance to a Receiving Party or a Requesting Party in the event of a disaster emergency.

“Competent Authorities” means one or more entities designated and authorised by each Party to act on its behalf in the implementation of the AADMER.

“Member State” means a Member Country of the ASEAN.

“National Focal Point” means an entity designated and authorized by each Party to receive and transmit information pursuant to the Provisions of the AADMER. The NFP therefore plays an important role in facilitating communication with other Parties and the AHA Centre, and serves as the single point of contact for the country. The NFP is also required to coordinate with the one or more Competent Authorities that the Party has designated.

“National Operation Centre” means a designated centre within the Member State that operates on 24/7 basis to help the National Focal Points receive or transmit reports/situation updates from/to AHA Centre or other Parties.

“NDMO” means the National Disaster Management Office within the Member State. Its term encourages an appreciation by the office that disasters is comprehensive and its work should include more than the work done during the first (life saving/emergency) phase of a disaster.

Extending this logic, local disaster management offices is referred to as local or sub-national DMOs.

“Party” means a Member State that has consented to be bound by the ADMER and for which the AADMER is in force “Receiving Party” means a Party that accepts assistance offered by an Assisting Entity or Entities in the event of a disaster emergency.

“Requesting Party” means a Party that requests from another Party or Parties assistance in the event of a disaster emergency.

“Virtual OSOCC (ASEAN)” means the online OSOCC platform, managed by the Office For Coordination of Humanitarian Affairs, that has been dedicated for use by the AHA Centre and ASEAN-ERAT.

“ASEAN WEbEOC” means the web-enabled crisis information management system managed by the AHA Centre to provide secure real-time information sharing for decision making process.

3. ASEAN-ERAT SYSTEM

A. Role and Function

- 3.1 The ASEAN – ERAT is designed to support National Government during the first phase of disaster or emergency. The system is designed to deploy an ASEAN – ERAT at very short notice (8 hours after activation anywhere in the ASEAN region).
- 3.2. The ASEAN-ERAT System is managed by the AHA Centre in Jakarta, Indonesia. The ASEAN-ERAT members are made available by ASEAN Member States as well as by ASEAN Secretariat, AHA Centre or other Civil Society Organization (CSO).

Role

- 3.3 The role of the ASEAN-ERAT is to respond quickly to a major sudden on-set disaster or man-made emergency in one or more Member States within the ASEAN region.

Function

- 3.4 The function of the ASEAN-ERAT is to support the National Focal Point/s and Competent Authorities of the disaster affected Member State/s in the initial phases¹ of the disaster to:
 - a. Conduct rapid assessments of the disaster affected areas.
 - b. Estimate the scale, severity and impact of the disaster.
 - c. Gather information and report on the immediate needs of the affected population.
 - d. Coordinate with the AHA Centre for the mobilization, response and deployment of regional disaster management assets, capacities and humanitarian goods and assistance to the disaster affected areas.

1 See Table 1: Framework for Assessments

Table 1 : Framework for Assessments

	Phase 0	Phase 1	Phase 2	Phase 3	Phase 4
Goal	Preparedness	Saving Lives	Sustaining lives, protecting livelihoods	Restoring livelihoods & re-establishing essential services	
Indicative Timing (days)	Before disaster occurs	1-3	4 – 10/15	11/16 – 30/45	31/46+
Assessment Purpose	<ul style="list-style-type: none"> •Establish procedures & responsibilities for assessments •Prepare tools 	<ul style="list-style-type: none"> •Estimate scale, severity and impact of the disaster •Locate affected populations to gather information for initial response decisions •Plan for next assessment phase 	<ul style="list-style-type: none"> •Planning of humanitarian response •Define focus for follow-on assessments 	<ul style="list-style-type: none"> •Detailed situation & trend analysis •Detailed planning for humanitarian relief & early recovery 	<ul style="list-style-type: none"> •Programming for recovery
Methodologies	Joint contingency planning process	<ul style="list-style-type: none"> •Mainly quick field visits (sea/land) or flyovers for preliminary information •Satellite imagery 	<ul style="list-style-type: none"> •Joint assessments •Community level discussions •Key informants •Purposive sampling 	<ul style="list-style-type: none"> •Joint multi-sectoral assessments •Community and/or household survey 	<ul style="list-style-type: none"> •In-depth sectoral assessments

Common Needs Assessment Workshop, Bangkok, 21-23 Jan 2009

B. Concept

- 3.5 The broad concept of the ASEAN-ERAT system is based on the following:
- a. Deployed for regional response to sudden on-set disasters or man-made emergencies.
 - b. Mobilised within 8 hours.
 - c. Coordinated by the AHA Centre.
 - d. Support the National Focal Point and Competent Authorities of disaster affected Member States.
 - e. Conduct rapid assessments of disaster affected area to estimate scale, severity and impact of disaster; and gather information on the immediate needs of the affected population.
 - f. Coordinate with the AHA Centre for the mobilization, response and deployment of regional disaster management assets, capacities and humanitarian goods and assistance to the disaster affected areas.
 - g. Deployed up to maximum of 14 days.
- 3.6 This system consists of four components:
- a. Personnel
 - i. Suitably qualified and experienced responders from Member States with experience in disaster/emergency management and coordination. Trained and earmarked for regional missions by their respective NFPs.
 - ii. Experienced emergency managers with specific skill in information management, rapid assessment techniques, logistics and operational coordination in an emergency situation designated by the Member States, AHA Centre and/or ASEAN Secretariat.
 - iii. Individuals with strong teambuilding skills and cultural awareness, for working in a multi-disciplinary, multinational team, with ability to assume authority as and when needed; highly flexible, with an ability to respond effectively to rapidly- changing situations with minimum guidance and support; able to cope with extreme hardship living/working conditions in a disaster area and be psychologically prepared to witness extreme conditions.
 - iv. Available for deployment at short notice for up to 2 weeks.
 - b. Training
 - i. ASEAN-ERAT Induction Training to maintain a pool of

- personnel equipped with standardised methodology in rapid assessment, logistics, information management, reporting and on-site coordination.
 - ii. Specialised skills training and participation in the ASEAN Regional Disaster Emergency Response Simulation Exercises (ARDEX) or other regional exercises to test the methodology and update the skills of its personnel.
 - iii. Use of the ASEAN-ERAT Guidelines as a primary reference for such training activities.
- c. Deployment Procedures

Systems for AHA Centre to alert and coordinate mobilisation and deployment of ASEAN-ERAT personnel of a disaster thru the:

 - National Focal Point,
 - National Operation Centre, and/or
 - Directly by means of telephone/handphone, SMS, email alert and ASEAN WebEOC.
- d. Equipment

Adequate personal and mission equipment for the ASEAN-ERAT to be self sufficient in the field when deployed for regional disasters.

C. Mission Cycle

- 3.7 The typical mission cycle for the ASEAN-ERAT commence from preparations to the after action review as listed below. The outline below should provide ASEAN-ERAT personnel with a check-list that allows them to anticipate the next steps they may need to take during a mission. Not all the actions listed may be applicable at all times. Thus this list is not meant to be prescriptive but rather meant to be a guide for the ASEAN-ERAT.
- Personal Preparedness and Pre-deployment Arrangements
 - Alert
 - Activation
 - Mobilisation
 - Deployment
 - On-site Operations
 - Rapid Assessment
 - Information Management
 - Reporting
 - Coordination
 - Demobilisation
 - After Action Review

C. Structure

- 3.8 When deployed, The ASEAN-ERAT will report to the NDMO or its designated representative, in coordination (dotted line) with the In-country Coordination Team (ICCT) of AHA Centre. The ICCT is responsible for providing direct ERO interface with the National Disaster Management Office (NDMO) of the affected country. When an incident occurs or where there is a possibility that a major disaster emergency will occur such as typhoon or cyclone, the ICCT will deploy to the affected country's NDMO's EOC to begin this interface. The ICCT will normally consist of Team Leader and Emergency Response Support Specialist.
- 3.9 The ASEAN-ERAT will be divided with the following functions: Team Leader, Assessment and Information Management Specialist, Information and Communications Technology Specialist, Logistics Specialist, and Coordination Specialist.

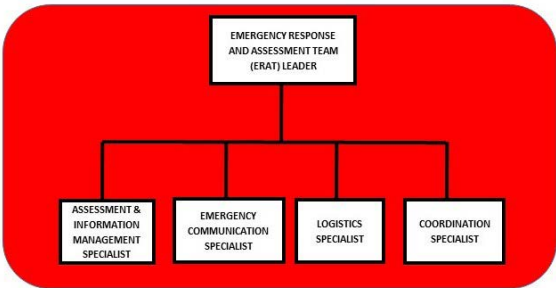


Figure 1. ASEAN-ERAT Structure

- 3.10 The Emergency Response and Assessment Team Leader – The Emergency Response and Assessment Team (ERAT) Leader reports to the NDMO and provide updates to the ICCT Team Leader and is responsible for:
- a. Managing and supervising the activities of the team;
 - b. Assessing the status of on-site disaster operations;
 - c. Providing on-site situation reports to the ICCT.
 - d. Assessing requirements from the field for additional assistance;
 - e. Providing on-site technical assistance when requested;
 - f. Participating in the ERO Coordinating Group conference calls;
 - g. Providing primary interface with the local disaster management organizations;
- 3.11 The Assessment Specialist – The Assessment Specialist (AS) reports to the ERAT Leader and is responsible for:
- a. Assisting the team leader in conducting rapid damage assessment of the area;
 - b. Collecting, analyzing and reporting damage impact information and data;
 - c. Assisting in the development of on-site situation reports;
 - d. Providing on-site technical assistance;
 - e. Assisting the ERAT Leader identify areas where additional assistance may be needed.
- 3.12 The Information Management Specialist – The Information Management Specialist (IMS) reports to the ERAT Leader and is responsible for:
- a. Act as focal point for the collection, analysis and provide the information to the ERAT Leader;
 - b. Determine the primary data and elements that are required;
 - c. Establish and maintain an information network;
 - d. Produce reports such as situation report, operational overview documents that may be needed at JOCCA (Joint Operations and Coordination Centre of ASEAN) when established.

- 3.13 The Information and Communications Technology Specialists – The Information and Communication Technology Specialist (ICTS) reports to the ERAT Leader and is responsible for:
- a. Install, activate and maintain information and communications system;
 - b. Assist in determining appropriate type and number of computers and computer application required to support the operations;
 - c. Maintain the operational readiness of all ICT equipment including satellite phone top-up, batteries, mobile phone top up.
- 3.14 The Logistics Specialist – The Logistics Specialist (Log Specialist) reports to the ERAT Leader and is responsible for:
- a. The deployment and maintenance all logistics equipment and supplies necessary to support the ERAT;
 - b. Supporting the on-site logistical requirements of the ERAT. This includes; billeting, transportation, food, etc;
 - c. Providing technical assistance to the local area;
 - d. Identifying additional logistical requirements necessary to support local operations.
 - e. Admin/Finance functions if required.
- 3.15 The Coordination Specialists – The Coordination Specialist (CS) reports to the ERAT Leader and is responsible for:
- a. Ensure appropriate and effective coordination and links with local authority and other relevant actors such as the UNDAC OSOCC, IFRC, RC, INGOs, APG;
 - b. Ensure appropriate distribution of responsibilities within ERAT members, with clearly defined specific issues where necessary;
 - c. Participate in the coordination meetings held by local authority and other relevant actors.
 - d. Manage JOCCA when established.

4. PERSONAL PREPAREDNESS & PRE-DEPLOYMENT ARRANGEMENTS

A. Personal Preparedness

4.1 It is the responsibility of the ASEAN-ERAT personnel sent to disaster sites to maintain a high level of readiness to allow them to leave for a mission at very short notice and to be fully independent and self sufficient throughout the mission with regards to clothing and personal effects. With the need to be individually mobile at all times, personnel should try to limit the personal belongings that they will carry. The lists of needed documents, equipment and supplies are shown below (with related tips). However ASEAN-ERAT personnel should use his/her judgement when packing for a mission.

a. Documents

- Passport with minimum 6-months validity (preferably machine readable, extra passport photos and photocopies of the passport)
- Visas, where required
- Letter of Deployment from AHA Centre
- Vaccination/Immunization Records (also called 'Yellow Book' with copies of records, indicating blood type, dates for various vaccinations – Tetanus, Polio, Hepatitis A & B, Typhoid)
- Prescription for eyeglasses or contact lenses, if applicable
- Adequate amount of US or local currency
- Credit card/s
- Personal Name Cards and Identification Card
- Notebook with writing materials
- SASOP
- ASEAN-ERAT Guidelines
- Maps (either printed from internet or obtained thru AHA Centre)

b. Personal Items

- Back Pack to carry all personal belongings
- Small bag (for use on-site during rapid assessment)
- Plastic packaging (to keep critical documents and equipment dry in wet conditions)
- Food and water for the first 72 hours of the mission (in case none is initially available)
- Sufficient clothing and appropriate footwear (suitable for the location, prevailing weather conditions and type of assignment; female ASEAN-ERAT member to have appropriate clothing including long-sleeves and headscarves, if local customs necessitate)
- ASEAN-ERAT identification (cap, t-shirt, vest, Certificate)
- Sleeping bag
- Rain gear
- Toiletries
- First aid kit (for personal use)
- Pocket knife
- Torch light with batteries
- Sunglasses (spare spectacles where necessary)
- Personal medication (includes water purification tablets, motion sickness tablets, various salts & vitamins for nutrition supplement; menstrual needs)
- Rubber gloves and health/dust masks
- Sunscreen lotion
- Insect repellent
- Water Purifier (tablets or filter)

c. Others

- Mobile phone and charger (smart phones with audio recording, camera, global positioning system, compass functions would serve well)
- Personal laptop (with USB memory stick)
- Video or still camera
- Power Bank

4.2 ASEAN-ERAT personnel who have indicated availability for mission should also have:

- a. Prepared their immediate family members for the sudden departure to a mission. This extends to ensuring all time

sensitive matters that require their attention are settled before they leave for the mission. Such anticipatory actions would enable the ASEAN-ERAT personnel on mission not be distracted or pre-occupied with his or her domestic issues whilst on mission.

- b. Make professional arrangements e.g rapid release from employment for ASEAN-ERAT mission, continuation of salary and benefits while on mission.
- c. Ensure the validity of access to WebEOC.
- d. Sufficient knowledge of the disaster management set-up and structures within the affected ASEAN Member States.
- e. Awareness of the cultural conditions, practices and sensitiveness in the affected country.

[The ASEAN-ERAT personnel must not expect the authorities, people and the victims of the affected country to change their ways of doing things to accommodate humanitarian relief personnel. Between arriving in-country, reaching the disaster site, and in the course of working with local officials, ASEAN-ERAT personnel may experience several conditions that may cause anxiety, frustration, confusion or disorientation e.g from the inability to communicate well with each other due to language differences. ASEAN-ERAT personnel should understand that this response is natural and often happens to others in similar situations. Patience, realistic expectations of an ability to make a difference, a sense of humor coupled with the extensive knowledge of cultural conditions, practices and sensitiveness are good coping strategies in these circumstances.]

B. Pre-Deployment Arrangements

4.3 Further to the personal preparedness issues, there are several other pre-deployment arrangements that should be undertaken to facilitate the deployment for the ASEAN-ERAT. These are mainly the tasks of the AHA Centre to facilitate the departure of the ASEAN-ERAT and that of the ASEAN-ERAT Team Leader. These tasks are listed below.

- Forming the ASEAN-ERAT and selecting the Team Leader for the mission.
- Ensuring the selected ASEAN-ERAT members to have travel insurance.

- Liaising with the ASEAN-ERAT member to make travel arrangements and issuance of e-tickets to effect their travel.
- Update the ASEAN-ERAT member on the meeting point upon arrival in the disaster affected country
- Update the ASEAN-ERAT member on the contact details of the NDMO focal point from the disaster affected country
- Arrange for the disbursement of mission funding of USD \$10,000 to the team leader from the ADMER fund.
- Arranged for the ASEAN-ERAT to be equipped with the ICT equipment.
- Provision of the briefing materials to the Team Leader. It should contain the following:
 - Situation update, latest reports and information of the disaster situation
 - Latest media reports
 - Update on safety and security
 - Mission ToR
 - Baseline data of disaster area
 - Maps (large scale maps of whole country & affected areas)
 - Updated contact lists of NFP, CA & Operational Focal Points
 - Letter for customs clearance for ICT equipment
 - Letter of support from AHA Centre to the NFP of the affected country

5. MISSION EQUIPMENT

A. Concept

- 5.1 The concept of deployment of the ASEAN-ERAT requires the initial assessment report to be transmitted to NFP of the affected country and AHA Centre within 24 hours upon arrival at the disaster site, and regular updating using reliable means.
- 5.2 In order to facilitate such linkages for regular and timely reporting of SitReps as well as to facilitate the work of ASEAN-ERAT, the mission equipment that the team carries will include the following category of equipment:
- Office & Photographic Equipment (*such as computers, printers, facsimiles, cameras with geo-tagged functions, etc.*)
 - Voice Communication Equipment (*Portable Radios, Fixed and Mobile Phones, Satellite Phones, etc.*)
 - Data Communication Equipment (*BGAN, 3G Wireless Routers etc.*)
 - Navigation Devices (*Handheld GPS devices, etc.*)
 - Miscellaneous Equipment (*DC to AC Inverter, Power Extension, Adapters, Surge Protector, SW Radio, Transport Cases etc.*)

B. Set up / Operation

- 5.3 The equipment in the mission kit allows scalable deployment to meet minimum requirement to establish communication linkages at 2 locations operating independently. The mission kit also carries power devices to operate out of a vehicle for full mobility, providing voice and data communications on the go.
- 5.4 The kit will be brought along by a staff member of the AHA Centre to the meeting point where it will be handed over to the ASEAN-ERAT member. ASEAN-ERAT members will be trained to operate ICT equipment. The ASEAN-ERAT ICT equipment should carry, but not limited to the following items:
- Mobile phone (1 nos.) with an Indonesian Telco's post-paid Voice SIM Card with Auto-roaming feature,
 - Mobile phones (3 nos.) with pre-paid Voice SIM Cards of

the Affected Country (with stored value top-up card), either purchased and store with the kit, or to be purchased upon arrival at the in-country airport,

- Mobile data device (3G Wireless Router) with pre-paid Data Sim Cards to be purchased in-country,
- BGAN (Broadband Global Area Network) Portable Satellite Terminal with subscription,
- Portable Satellite Phone,
- Lap-tops stored with ASEAN-ERAT mission templates/forms (from SASOP) and preloaded with commonly used software like MS Office, Google Earth, etc.
- Portable Printer,
- Handheld Global Positioning System (GPS) devices,
- Point to point Radio Transceivers.

C. Maintenance

- 5.5 The ASEAN-ERAT ICT equipment should be stored and maintained by the AHA Centre

6. ALERT, ACTIVATION & MOBILISATION PROCEDURES

6.1 The timely response of the ASEAN-ERAT on the early warning or occurrence of a sudden-onset disaster requires the following series of coordinated actions between the AHA Centre, NFPs and their respective NOCs of the Member States and the ASEAN-ERAT members.

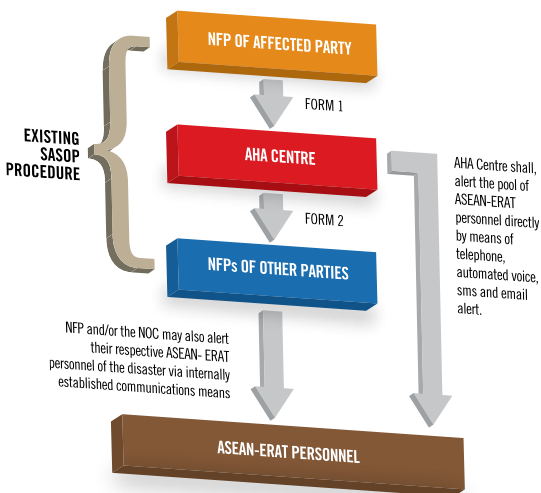
A. Alert

6.2 NFP of the party affected by a disaster shall immediately provide an initial report to the AHA Centre within 3 hours of the occurrence of the incident using FORM 1². AHA Centre shall analyse the initial report received from the NFP of the affected party and then prepare and notify the other ASEAN Member States of the disaster situation using FORM 2³. The NFP and/or the NOC of the other ASEAN Member States may also alert their respective ASEAN-ERAT of the disaster via internally established communications means.

6.3 Simultaneously, the AHA Centre shall, upon assessment of the scale and impact of the disaster, alert the pool of ASEAN-ERAT directly by means of telephone, automated voice, sms and email alert.

2 SASOP, Para 19.

3 SASOP, Para 120



Flowchart 1 : Alert of ASEAN-ERAT

Informative Message

6.4 There may be instances where the AHA Centre may also send the ASEAN-ERAT information message/s to update them of an impending disaster, for example, an approaching typhoon, increased volcanic activities or major flood alerts as a result of continuous wet weather. There is no specific format required for this information flow which serves as a means for the AHA Centre to update the ASEAN-ERAT of disaster developments within the region. The dissemination of an information message can be done by means of telephone, automated voice, sms and email alert. No confirmation or reply to the AHA Centre is required to be sent by the ASEAN-ERAT upon receipt of these disseminated messages.

B. Activation

6.5 NFP of the affected shall, if it needs assistance in the event of a disaster emergency within its territory, request such assistance from any other member states, directly or through the AHA Centre, or where appropriate, from other entities using

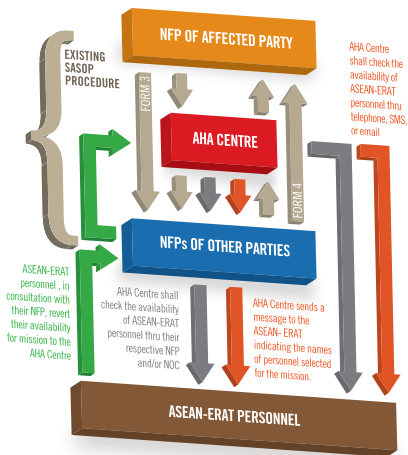
FORM 3⁴. NFP of an Assisting Entity may also initiate an offer of assistance to mobilize its earmarked assets and capacities and other resources not previously earmarked for disaster relief and emergency response but being made available by submitting FORM 4 directly to the affected country through the AHA Centre⁵.

- 6.6 Simultaneously, the AHA Centre shall check the availability of the ASEAN-ERAT thru their respective NFP and/or NOC, or directly via telephone, SMS, email automated voice, sms and email alert.
- 6.7 ASEAN-ERAT member who are available to be deployed for the mission shall update their status with the AHA Centre (after internal consultation with their respective NFPs). It is important to note that when an ASEAN-ERAT member notifies their availability, AHA Centre will assume that internal consultations regarding their availability have already been done. They should also furnish details of the airport closest to their location, and the earliest time they can be available at the airport for possible departure to the affected country.
- 6.8 Depending on the scale, magnitude and type of disaster, the AHA Centre selects an ASEAN-ERAT from amongst the personnel who have indicated their availability for the mission. AHA Centre then sends a message to the ASEAN-ERAT thru their NFP and/or the NOC, or directly via SMS, email or ASEAN WebEOC indicating the names of personnel selected for the mission and the Team Leader of the ASEAN-ERAT.
- 6.9 AHA Centre will take the final decision of team composition including the team leader and deployment based on the members who have indicated their availability for the mission. AHA Centre then sends a message to the NFP and/or the NOC and directly via voice, sms and email to the selected ASEAN-ERAT members.

Flowchart 2 : Activation of ASEAN-ERAT personnel

4 SASOP, Para 23.

5 SASOP, Para 24.



C. Mobilisation

- 6.10 The AHA Centre shall make travel arrangement for the ASEAN ERAT members. E-tickets will be sent to ASEAN-ERAT member through e-mail together with a letter of deployment which are to be printed and hand carried during the mission.
- 6.11 The AHA Centre shall facilitate the arrangements agreed and consented upon by the Parties concerned on the mobilization of the ASEAN-ERAT by accomplishing the signing of FORM 5⁶.
- 6.12 In Part 8 of FORM 5, AHA Centre shall state the Terms of Reference (TOR) for the ASEAN-ERAT mission. The standard TOR appended below establishes the overall framework for an ASEAN-ERAT deployment. The TOR can be modified by the Executive Director of AHA Centre, in consultation with the NFP of affected country and/or NDMO upon arrival in-country.

6 SASOP. Para 29.

Standard TOR for an ASEAN-ERAT Mission

When on mission, the ASEAN-ERAT shall:

1. Assists and works under the authority of the NFP of the affected country when responding to disasters and emergencies;
2. Supports and facilitates the work of the affected government in the initial response phase of an emergency, in particular, to carry out rapid assessment at the most affected areas, or areas designated by the NFP;
3. Reports to the NFP (and/or the NDMO/CAs as designated by the NFP) and update the entity on the developments in the emergency situation, while keeping AHA Centre updated via regular SitReps;
4. Provides and disseminate initial information on the material and human dimensions of an emergency to the AHA Centre, with the aim of providing ASEAN member states a broad understanding of the nature and magnitude of an emergency;
5. During earthquakes and other emergencies involving collapsed structures where regional and international urban search and rescue teams are deployed to the affected country, ASEAN-ERAT may, at the request of the NFP, establish some form of a coordination centre established by UNDAC team when they are deployed) with the view of having an oversight on the type of resources, expertises and assets that are at the disposal to the NDMO;
6. Maintains links with and regularly reports on the progress of its mission to the NFP of affected country and AHA Centre throughout the duration of its mission.

- 6.13 Concurrently AHA Centre shall liaise with the selected ASEAN-ERAT Team Leader and member to initiate the following critical activities/actions for the timely mobilization of the ASEAN-ERAT within 8 hours (from the time of the issuance of the alert message) to the disaster affected country:
 - a. Ensuring the selected ASEAN-ERAT to members have travel

- insurance.
- b. Liaising with the ASEAN-ERAT member to make travel arrangements and issuance of e-tickets to effect their travel.
 - c. Update the ASEAN-ERAT member on the meeting point upon arrival in the disaster affected country
 - d. Update the ASEAN-ERAT member on the contact details of the NDMO focal point from the disaster affected country
 - e. Arrange for the disbursement of mission funding of USD \$10,000 to the team leader from the ADMER fund.
 - f. Arranged for the ASEAN-ERAT to be equipped with the ICT equipment.
 - g. Provision of the briefing materials to the Team Leader. It should contain the following:
 - Situation update, latest reports and information of the disaster situation
 - Latest media reports
 - Update on safety and security
 - Mission ToR
 - Baseline data of disaster area
 - Maps (large scale maps of whole country & affected areas)
 - Updated contact lists of NFP, CA & Operational Focal Points
 - Letter for customs clearance for ICT equipment
 - Letter of support from AHA Centre to the NFP of the affected country
- 6.14 AHA Centre shall also liaise with the NFP and/or NOC of the Affected Country to ensure the ASEAN-ERAT arrival in-country is coordinated without delay.
- 6.15 AHA Centre shall continue to liaise and track the movement with the ASEAN-ERAT personnel henceforth through the use of telephone/handphone, SMS, email or WebEOC (ASEAN). The Virtual OSOCC (ASEAN) should also be updated by the AHA Centre and ASEAN-ERAT member on developments of the mission i.e details of team arrival, actions taken, contact details of persons met and coordinated with etc.

D. Mission Stand-down

- 6.16 In light of developments of the disaster situation, AHA Centre may, in consultation with the NFP of the Affected Country, make the decision to stand-down the ASEAN-ERAT.
- 6.17 In this situation, the AHA Centre shall send a 'STAND-DOWN MESSAGE' to the NFPs of all Parties and the ASEAN-ERAT that was activated. The WebEOC and V-OSOCC (ASEAN) shall also be updated with this latest information.

E. Readiness Tests

- 6.18 To ensure connectivity, readiness, responsiveness of the ASEAN-ERAT, the AHA Centre shall regularly test the alert procedures with the NFPs of all Parties and the ASEAN-ERAT personnel.

7. DEPLOYMENT PROCEDURES

A. Planning for Arrival

7.1 Before the ASEAN-ERAT begins to arrive at the air, land or sea entry checkpoints of the disaster affected country and assemble as a team, the Team Leader should plan for the team arrival. The plan should consider the following:

- a. Team Resources and Organization
 - Understanding the competencies and skills of the ASEAN-ERAT personnel e.g language, sectoral skills, etc.
 - Understanding the resources available e.g cash, ICT equipment etc.
 - Reporting lines and responsibilities.
 - Develop communications and security plans.
 - Assign tasks e.g Deputy Team Leader, Logistics, Communications, Reporting, Media etc
 - Prepare initial Field Response Plan (FRP).
- b. Assessment of the Situation
 - Going through briefing materials obtained from AHA Centre.
 - Situation update, latest reports and information of the disaster situation
 - Latest media reports
 - Update on safety and security
 - Mission ToR
 - Baseline data of disaster area
 - Maps (large scale maps of whole country & affected areas)
 - Updated contact lists of NFP, CA & Operational Focal Points
 - Monitor the developments of the disaster on the AHA Centre website, WebEOC, V-OSOCC and other relevant disaster information sites online.
 - Status of regional and international response.

B. Actions Upon Arrival

7.2 The first 12-24 hours upon arrival in-country are crucial for the ASEAN-ERAT to establishing its credibility and subsequent functioning. The following actions are some of the possible tasks required to be taken by the ASEAN-ERAT.

- a. Immigration and Customs
 - Proceed through the necessary immigration procedures and customs clearance upon arrival.
 - Use the SASOP Form 5 and the letter for custom clearance of ICT equipment, which should have been prepared by the AHA Centre, in consultation with the NFP at the time of mobilization, to facilitate any customs issues e.g the declaration of satellite communications equipment carried by the ASEAN-ERAT.
- b. Initial Contact (ASEAN-ERAT)
 - Immediately update the AHA Centre on the status of the ASEAN-ERAT once all personnel have arrived and met with the Team Leader.
 - Allow each personnel to quickly introduce themselves before being assigned tasks and responsibilities by the Team Leader.
- c. Initial Contact (NFP)
 - If the ASEAN-ERAT arrives in the capital, or at a point where the NFP is represented, the ASEAN-ERAT should be met by the Operational Focal Point delegated by the NFP.
 - Arrange for an immediate meeting with the NFP to discuss the ToR.
 - If the NFP or its representatives is not available, contact the AHA Centre to clarify the next course of action.
 - Similarly if the team arrives directly at the disaster site where the NFP is not available or represented, contact the AHA Centre to clarify the next course of action.
- d. Establish the ASEAN-ERAT Base
 - In the capital, the team base of operations will normally be at the office of the NFP.
 - If this proves impractical, in consultation with the NFP and the AHA Centre, the team may establish a base outside the office of the NFP. This could be at an office

of a CA, the UN OSOCC (if it is already established) or at the premises e.g hotel where the ASEAN-ERAT may be staying at.

- If the team arrives directly at the disaster site where the NFP is not available or represented, contact the AHA Centre to clarify the next course of action.
- e. First Report
- Update the AHA Centre of the location of the team base together with known information on the emergency situation. It is also expected that ASEAN-ERAT will provide AHA Centre with initial field response plan e.g situation, mission objective, in-country counterparts, team organisation, program of work , logistic and resources, mission support, communication, safety and security, and strategy for dealing with media. SASOP Form 6 should be used where possible.

C. Initial Briefing to the NFP

7.3 The initial briefing by the ASEAN-ERAT to the NFP is extremely important, as it is the initial opportunity provided for the ASEAN-ERAT to establish its role, usefulness and credibility. In preparation for the briefing, the following should be planned so that it can be done professionally:

- Decide who to give the briefing (normally the Team Leader).
- Decide who will answer specialized questions (normally based on individual personnel specialities, otherwise the Team Leader).
- Prepare an outline of the briefing (to maintain focus).
- Prepare sufficient copies of documents that may be required to be distributed e.g CV of ASEAN-ERAT personnel, ToR, recent missions undertaken by the ASEAN-ERAT, personal name cards.
- Prepare an outline of the ASEAN-ERAT Field Response Plan, if ready.
- Find out who are members of the NDMO or CA who will be attending the briefing and their respective roles.

7.4 At the initial briefing by the ASEAN-ERAT to the NFP, the following matters should be covered:

- A short introduction of the ASEAN-ERAT concept.
- A short brief of each members experience i.e it could be handout.
- The value-added tasks that the ASEAN-ERAT could undertake in support of the NFP (in this case rapid assessments)
- Make reference to the ToR that has been initially agreed between the NFPs and prepared by AHA Centre before dispatch of the ASEAN-ERAT.

7.5 In the course of the briefing, the Team Leader should emphasise to the NFP that the ASEAN-ERAT is there to support the NFP by enhancing its capacity to deal with the emergency. Further, it should be explained that the ASEAN-ERAT is self sufficient and will not divert resources from the NFP. Finally the briefing should cover the details of the response plan of the ASEAN-ERAT to assist the NFP.

D. Field Response Plan (FRP)

7.6 The FRP should contain information available on the emergency, the mission objectives (with reference to the ToR) and the planned activities of the ASEAN-ERAT given its resources. It should be kept short, simple and to the point. The final FRP for execution should also include the details/outcome of the initial discussion with the NFP. The following should be addressed in the FRP:

a. Situation

Brief background information on the emergency, risks, national and regional response.

b. Mission Objectives

Specify scope and type of assistance, desired outcome, estimated duration of mission

c. In-Country Counterparts

Primarily the NFP and CAs.

d. Team Organisation

Information on composition and skills set of the ASEAN-ERAT and assignment of duties and responsibilities amongst the personnel. It can also be differentiated geographically at office/capital or in the field, and versatile enough to carry out the rapid assessments at

- multiple affected sites.
- e. **Program of Work**
Details of planned activities in order to achieve mission objectives. Indicating desired start time and estimated end time for individual activities. Locations. Mode of transport.
 - f. **Logistics and Resources**
Information on any specific in-country needs by the ASEAN-ERAT to support the mission.
 - g. **Mission Support**
Information on the arrangements in place by AHA Centre to support the mission.
 - h. **Communications**
Information on the reporting channel between the ASEAN-ERAT, AHA Centre and the NFP. Timing for Situation Reports. Communications plans including primary and secondary means of communications; call signs for communications using radio frequencies, numbers of mobile and satellite phones. Emergency contact numbers.
 - i. **Safety and Security**
The precautionary measures observed by the ASEAN-ERAT to counter safety and security issues.
 - j. **Dealing with Media**
ASEAN-ERAT key communication strategy on dealing with local and international media that it may come across during the mission.

E. Team Meetings

- 7.7 The ASEAN-ERAT should, where possible, carry team meetings daily to update and review changes in the Field Response Plan. Where it affects coordination with the NFP, it is also important for the outcome of the meetings to be shared so that issues can be resolved and a suitable compromise can be achieved.

8. ON-SITE OPERATIONS (ASSESSMENT)⁷

A. Purpose and Objectives of Joint Emergency Rapid Assessment

- 8.1 The purpose of joint emergency rapid assessments conducted by ASEAN-ERAT is to provide decision makers with relevant information in order to improve the humanitarian response. The assessment should be able to assist the National Focal Point (NFP) of the Party affected by the disaster and the AHA Centre in deciding where and how immediate assistance should be directed so that the humanitarian response has the greatest impact in terms of reducing losses in lives and assets and alleviating the suffering of those affected by the disaster.
- 8.2 The principle objective of an ASEAN-ERAT assessment is to quickly provide a “snapshot” of the immediate disaster situation by concentrating on the following:
- Identifying the scale and severity of the disaster;
 - Identifying the most affected geographical areas;
 - Identifying the disaster’s impact on the most vulnerable populations; and
 - Identifying the immediate needs arising from the disaster

B. Principles

- 8.3 The ASEAN-ERAT rapid assessment methodology shall be guided by the principles of relevancy, timeliness, coordination, sharing of data and analysis, and objectivity.

C. Timing

- 8.4 The ASEAN-ERAT should be able to deploy as soon as possible following the onset of an emergency and the AHA Centre’s mobilisation of the ASEAN-ERAT⁸. Consequently, the ASEAN-

⁷ In line with SASOP and based on the discussions and outcomes of the rapid assessment simulation exercises during the 2nd ASEAN-ERAT Induction Course, 14-19 February 2011.

⁸ As provided in SASOP dated March 2008, Part V - Emergency Response, Section B - Joint Assessment of Required Assistance, Article 27.

ERAT will undertake a rapid assessment during Phase I, although it may also be involved in Phase II multi-sectoral assessments. Phase I assessments may be undertaken any time immediately following the onset of an emergency until the results of a Phase II assessment are available.

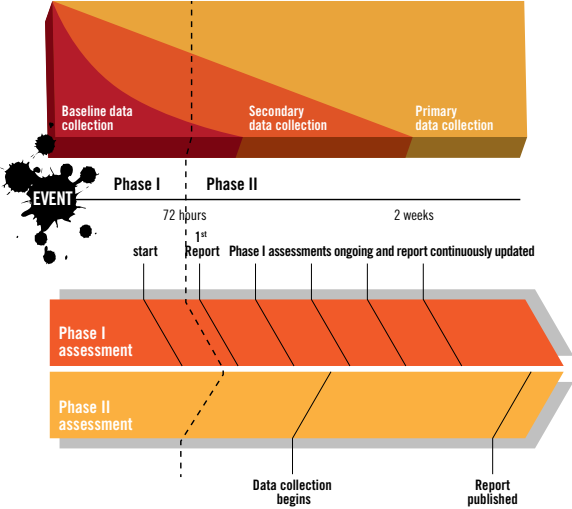


Illustration 1 : Assessment Timeline

D. ASEAN-ERAT Assessment Methodology

8.5 While it is understood that each disaster situation is unique and that there is no one formula for undertaking a rapid assessment during Phase 1, the ASEAN-ERAT shall be guided and adapt the assessment steps shown in the diagram below and explained in the succeeding sub-sections.



a. Planning

Even prior to the deployment and planning for the assessment, the ASEAN-ERAT, with the support of the AHA Centre and guidance from the NFP, shall conduct the following:

- i. **Secondary Data Review (SDR).** The AHA Centre shall analyse the data received through SASOP Form 1: Initial Report/Situation Update to the AHA Centre. In addition to the data contained in Form 1, the AHA Centre may also use other sources of information to gather other relevant secondary data on the developing disaster situation⁹ such as population figures and demographics; locations and capacities of key installations such as hospitals, schools, factories and communications networks (road, rail, river etc.); reports on previous disasters and responses; preparedness plans; latest media reports; situation reports from the Virtual OSOCC and humanitarian civil society actors (CSOs); and available satellite imagery.

In coordination with the NFP, the AHA Centre may organise a telephone conference with ASEAN-ERAT members to review the secondary data. The review of secondary data should enable the AHA Centre and

⁹ SASOP dated March 2008, Part IV-Assessment and Monitoring, Section A-Notification of Disaster, Article 20.

the ASEAN-ERAT to have an initial analysis of the disaster's impact and an initial selection of locations and target populations to be assessed. The locations and target populations shall be validated with the NFP upon arrival on-site.

The secondary data analysis may be contained in SASOP Form 2: Initial Report/Situation Update of the AHA Centre to NFPs¹⁰ 10, particularly in Section 3 (Assessment of Disaster Impact), Section 4 (Assessment of Needs) and Section 6 (Other sources of information) and Section 7 (Recommendations).

- ii. **Coordinate the assessment with other national and international actors on the ground.** Upon arrival in the affected country and prior to undertaking an assessment on-site, meet with any other actors who may be undertaking assessments (e.g. UNDAC/OCHA; NGOs; FACT Teams; EU MIC, etc.) to ensure standardisation of methodology and avoid duplication of effort.
- iii. **Define the information need and the objectives of the assessment.** Upon arrival in the country, the ASEAN-ERAT Team Leader shall discuss with the NFP to validate the priority assessment request. The ASEAN-ERAT Team Leader should then discuss with the rest of the ASEAN-ERAT members to identify what assessment questions need to be answered and who has the information needed to answer these questions. The ASEAN-ERAT Team Leader shall ensure that the objectives are clearly understood by the ASEAN-ERAT members and agreed with the NFP and the AHA Centre. The NFP or LEMA may also request ASEAN-ERAT to conduct joint rapid assessment with local or other international assessment team(s).
- iv. **Select target locations (Catchment Areas - CAs) and populations to be visited.** Because time constraints will prohibit visiting the entire disaster area, Catchment Areas identified to target locations within the geographical area identified as requiring an assessment. The choice

10 SASOP dated March 2008, Part IV-Assessment and Monitoring, Section A-Notification of Disaster, Article 22.

of CA will depend on the objectives and accessibility. Ensure that the CAs identified are representative of the area requiring assessment and select CAs to provide a purposive sampling.

- v. **Obtain baseline data & maps on CA.** The AHA Centre and NFP or the LEMA should provide much of the baseline data and maps prior to or upon arrival, but the team should ensure that they request key data and liaise with the UN to see what data they have available. Baseline data should include: population figures; demographics; key infrastructure locations; disaster preparedness plans and details of previous disasters.
- vi. **Decide data collection methodology, tools, formats.** The type of data collection methodology will depend on the situation but will probably include observation and interviews (key informant; groups; etc.). The method of data capture must also be decided. The ASEAN-ERAT uses a standard Assessment form for recording data but this must be adapted to the situation. Check whether the LEMA or UN have developed a standard data collection template for rapid assessments. It is unlikely that general survey questionnaires will be used by the ASEAN-ERAT.
- vii. **Assign roles and responsibilities within the assessment team.** Leader, Interpreter(s), map-reader, time-keeper, and Sector-specific tasks; logistics; security etc. Also consider how the team will operate during the assessment (e.g. split into smaller groups at the same location or visit different locations). It is also essential to ensure there is a gender balance within the team and, if necessary, include local interlocutors to ensure gender balance and facilitate access to all sections of the population.
- viii. **Consider the logistical & security arrangements for the assessment**
 - Transport and movement plan Accommodation
 - Food and water
 - Equipment: GPS, satphones; cameras; etc.
 - Communications plan (mobile; satphone) and frequency of communication
 - Security

x. **Agree timings & deadlines for the data collection, analysis and reporting stages of the assessment.**

Plan when the field trip will end and ensure enough time is allowed for debrief following the visit, data analysis and report preparation. Remember that the report must be shared with the AHA before it is given to the LEMA and the NFP and published on the web.

b. **Data Collection**

Data collection should be planned carefully to cover areas including the need for international search and rescue teams, medical needs, drinking water, sanitation, food, shelter, protection and other areas identified during the priority assessment request. During the data collection phase, consider the following:

- Speed vs Quality
- Quantitative vs Qualitative information
- Collect only what can be used
- Consult the people affected
- Consider differing needs of marginalised groups
- Consider bias of information sources as well as of team members
- Look for changes to trends or the unexpected

Tools: Various data collection tools are available to support data collection and aggregation. The primary data collection tool that the ASEAN-ERAT will be using is the Initial Needs Assessment Checklist (INAC) and supplemented by the ASEAN-ERAT Assessment Checklist¹¹ but always check to see what tools are already in use in the country. The standardisation of tools is important in enabling ERAT's data to be comparable with other assessment data.

The INAC provides:

- The activities to be done prior to the assessment;
- The four collection means (observation, key informants, visits to physical facilities and visits to households) through suggested questions for the five main sectors

11 ASEAN ERAT Rapid Assessment Checklist is a sample questionnaire that includes medical and search and rescue (SAR) needs. This may later be modified depending on recommendations from Post-Implementation Reviews (PIR).

(Health, Food & Nutrition, WASH, Shelter & NFIs and Protection);

- Analysis, actions needed, thresholds and standards (in subsequent section);
- After the field visit actions (in subsequent section).

ERAT should always remember:

- Never allow the tool to take over.
- Adapt according to the situation.
- Be cautious with (over) complex questionnaires.

c. **Data Analysis (Estimation)**

Data analysis is the process and skill of interpreting 'raw' data to identify significant facts, trends and anomalies in order to inform decision making. Analysis is an on-going process that should start during the secondary data review (SDR) and continue during the data collection phase. The Vulnerability and Capacity flowchart below shows the questions to be answered during the analysis phase.

Data collected during the assessment should be analysed together with any secondary data collected. The INAC gives some guidance on the analysis process:

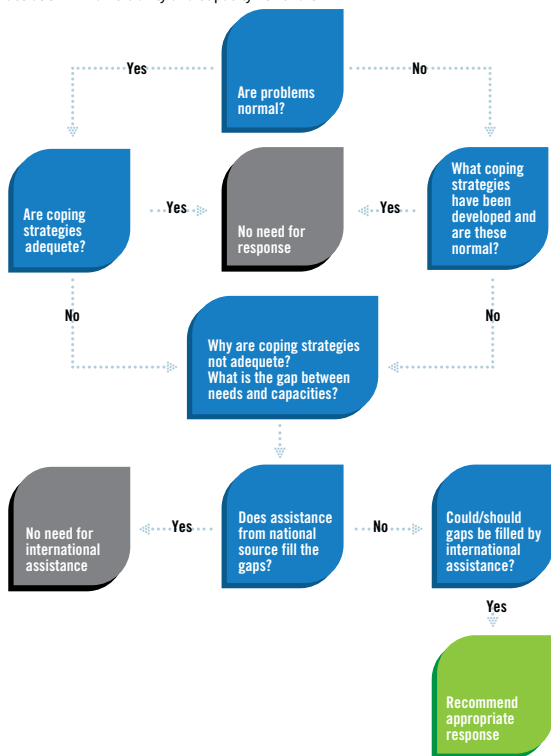
- Comparison of situational data before the event (baseline) and after the event;
- Identification of the impact and new risks resulting from the event;
- The most likely evolution of the situation in the immediate term;
- Being aware of the assumptions being made during the analysis;
- Thresholds and standards based on ASEAN norms.

During the analysis, think about the following:

- What are underlying issues and what are new?
- Where can the community not cope?
- What is urgent? What immediate steps can be taken?
- Think percentages as well as absolute numbers
- Look for the 'not obvious,' especially protection issues
- Ask: "So what?"
- What can/should be done within country and what needs to come from outside?

- What needs more investigation?
- Use sector thresholds and standards (Refer to Sphere and in-country standards)
- Consider reasons why different people may have given different answers to similar questions (bias, self-interest, etc.)

Illustration 2 : Vulnerability and capacity flowchart¹²



Scenario development is the final part of the data analysis process. It is used to understand the possible ways future events might unfold. Scenario development needs to be done by people who understand the context and have

¹² Taken from IFRC Guidelines for assessments in emergencies 2008 and UNDAC handbook.

relevant experience. In developing scenarios, the ASEAN-ERAT should involve humanitarian actors from the affected country as much as possible.

Develop ‘best case’ and ‘worse case’ scenarios by considering questions such as the following:

- What might the people do?
 - Stay near homes?
 - Stay in ‘camps’? Be willing to move into organised camps?
 - Return home?
- What is the likely speed and scale of the response? Will it be sufficient?
- Will certain social sectors or groups of people get missed?

Then, decide the ‘most likely case’—it may be the ‘best’ or ‘worst’ or somewhere in between.

Finally, do some gross error checks by asking the following questions:

- Does your information support or contradict the secondary information?
- Does the information gathered from one informant support or contradict information from another?
- Is the information collected by different members of the assessment team consistent?
- Does the information make sense?

d. Reporting

The ASEAN-ERAT should prepare a 5-page report on the rapid assessment immediately following completion of the field trip and analysis. Time is of the essence immediately following a disaster and it is essential that all information discovered by ASEAN-ERAT and any recommendations are made available as soon as possible. The report should be short and clear with explicit recommendations. It should also make clear the limitations of the assessment and any assumptions made during the analysis.

The ASEAN-ERAT rapid assessment report format shall be as follows:

- i. The objectives of the ASEAN-ERAT mission and areas visited (as agreed with the NFP/LEMA and the AHA Centre);
- ii. The limitations of the mission (i.e. geographical areas not accessed; specific sectoral information not assessed; etc.);
- iii. Key findings of the ASEAN-ERAT assessment;
- iv. Any new situational information (include a map or table if helpful);
- v. Scenarios (within the next 2 weeks): best / worst / most likely;
- vi. Recommendations / Proposed Actions for the NFP and the AHA Centre;
- vii. Information gaps and requirements for further assessment.

When writing the assessment report:

- Think about what the LEMA and/or the NFP needs to know—what will make your assessment most useful to them;
- Give a brief overall picture first, followed by the details;
- Use accepted terms and standards (refer to Sphere standards);
- Identify the most reliable/accessible information sources (in footnotes);
- Think about the affected population—what are their priority needs
- Highlight the constraints on the response; and
- Be clear about assumptions (factors that the ASEAN-ERAT did not really know but were assumed as facts or givens)

Note that the assessment report is not the same as the mission report.

e. Dissemination

The ASEAN-ERAT rapid assessment report shall be sent by the ASEAN-ERAT Team Leader to both the NFP of the Party affected and to the AHA Centre by email, fax or any other means within 72 hours upon arrival at the disaster.

Permission should also be sought from the NFP/LEMA and the AHA Centre to share the report with the wider humanitarian community (i.e. post the report on ReliefWeb; share with the Humanitarian Country Team (HCT), UNDAC, etc.)

f. Feedback

Any assessment available during the first days of an emergency is valuable to all responders, namely, the government, UN, NGOs and donors alike. Thus, the ASEAN-ERAT rapid assessment report will be widely read and will probably provoke many requests for clarifications and justification. Therefore, the ASEAN-ERAT should be prepared to answer such requests for information and to provide more detailed information as requested.

Within 24 hours after its receipt of the ASEAN-ERAT rapid assessment report, the NFP of the disaster-affected Party and the AHA Centre may seek clarifications on the assessment report. The NFP/LEMA may also make a request for further rapid assessments to be conducted at the disaster site by conferring with the AHA Centre. The AHA Centre shall then, in consultation with the NFP and the ERAT Team Leader, decide on further activities for the ASEAN-ERAT. The AHA Centre shall decide on the distribution of the ASEAN-ERAT assessment report to other Member States.

E. Support Required

- 8.6 The NFP of the Party affected by the disaster shall work with AHA Centre staff and/or ASEAN-ERAT to facilitate the rapid assessment. In line with the provisions of SASOP for the Mobilisation of Assets and Capacities¹³, the AHA Centre and NFP of the affected Party shall provide the following support to ERAT:
- a. The AHA Centre may deploy an on-site liaison officer to facilitate the coordination between ASEAN-ERAT and the NFP of the affected Party;
 - b. The AHA Centre shall, as appropriate, coordinate with the

¹³ SASOP dated March 2008, Part V-Emergency Response, Section C-Mobilisation of Assets and Capacities, Articles 38-40.

- on-site UN Disaster Assessment and Coordination (UNDAC) team to help
- c. The NFP in the and facilitation of the entry into, stay in and departure from its territory of personnel and equipment involved in the rapid assessment;
 - d. The NFP or a designated representative shall provide an initial briefing to ERAT at a staging point immediately after the completion of the CIQ process. Among others, the briefing shall:
 - Include a verification of the priority assessment request
 - Provide up-to-date information on the disaster situation
 - Provide coordinating instructions with regards to the deployment of ERAT
 - Provide Location maps
 - Provide communications equipment
 - Provide a liaison personnel and/or interpreter
 - Provide a security briefing and security escorts if possible
- 8.7 Upon the request of the NFP of the affected Party, the on-site liaison personnel deployed by the AHA Centre could help provide the initial briefing to ERAT, in coordination with the on-site UNDAC team as appropriate.

9. DEMOBILISATION

The decision to terminate ASEAN-ERAT mission will be made by AHA Centre in consultation with the NDMO of the affected country and ASEAN-ERAT Team Leader. After the decision is made, the team should brief the NDMO of the affected country.

A. Personnel Rotation

If there is a requirement for a new batch of ASEAN-ERAT, the following should be prepared by the outgoing team:

- Outstanding tasks
- Situation reports, maps, contact details of key actors/partners
- Operational Information (safety, security, logistics, communications)
- Administration and Finance
- Asset/equipment settlement

It is essential that the outgoing ASEAN-ERAT conduct a face-to-face handover to the incoming ASEAN-ERAT to ensure continuity of the mission. AHA Centre will make sure that there is opportunity for this face-to-face handover by arranging the incoming team arrives two to three days before the outgoing team departs.

B. Mission Ending

The end of the mission date will be determined and agreed upon by the team leader, AHA Centre and the NFP. At mission end, the following should be covered:

1. The team leader has to coordinate demobilization plan with all team members and AHA Centre.
2. Team leader to ensures any outstanding tasks are assigned to appropriate team member
3. Coordinate the plan with the affected country NDMO and other cooperating organizations as necessary.
4. Account for all equipment and supplies including list and records of asset that are on loan or handed over. Update the condition of the equipment whether it is in a good condition

or needs maintenance. Prepare nonexpendable items such i.e ICT equipment for return shipment to AHA Centre including completion of customs documents.

5. Evaluate the team and individual function's performance, including:
 - Lessons learned
 - Individual performance and team performance
 - Concerns
 - Future training needs
 - Recommended changes
 - Measure and record mission achievement against ToR and field response plan.
6. Submit all reports, evaluations, logs, and time records to team leader.
7. Submit final mission report of the team using ASEAN-ERAT End Of Mission Report using SASOP form no 7
8. Collect all relevant papers and ensure that everyone in the team has an electronic copy of all the document related to the operation using a USB thumb drive.
9. Ensures proper permanent filing of all personnel invoices and incident related receipts
10. Prepare for and participate in debriefings as requested

C. Administrative Matters

All ASEAN-ERAT team members should complete the AHA Centre travel claim form which can be obtained from the Field Support Leader, who may also deploy as part of the deployed ASEAN-ERAT. The Field Support Leader whether at the AHA Centre in Jakarta or at the field will provide assistance to ensure quick settlement. The following documents will be required:

- A completed and signed AHA Centre travel claim form and expense report form
- Originals of all boarding passes and any air tickets issued;
- Originals of all receipts relevant to personal expenses incurred (e.g. excess baggage charges, airport taxes, receipt for taxis, official phones calls or internet usage, accommodations)

Please note that AHA Centre Financial Rules and Regulations are very strict. Expenses will not be reimbursed unless officially authorized and originals of official receipts provided. It is therefore important

to consult the ASEAN-ERAT Team Leader and/or Field Support Leader before incurring such expenses.

D. Debrief

Before the mission ends, the Team Leader should initiate an internal debrief with the following objectives:

- To bring a sense of closure before returning home (e.g. review of objectives versus what was accomplished, challenges, team performance, individual experiences, psychological impact)
- To draw out lessons to enhance ASEAN-ERAT system.

10. AFTER ACTION REVIEW

AHA Centre will organize an after action review (AAR) at the end of operation involving the ASEAN-ERAT team that was deployed. This is to draw out lessons learned to enhance the ASEAN-ERAT system.

In the case of a major deployment, a more formal AAR may also be organized by AHA Centre as part of the wider response evaluation. If time and resources permit, this will be done through Focus Group Discussions. In the absence of such, AHA Centre may use its teleconferencing facilities to connect with each member of the deployed ASEAN-ERAT.

ATTACHMENTS

- (a) ASEAN-ERAT RAPID ASSESSMENT TOOL *(draft)*
- (b) ASEAN-ERAT ASSESSMENT REPORT
- (c) CUSTOMS & CULTURES
- (d) INCIDENT MANAGEMENT STRUCTURE
- (e) INITIAL NEEDS ASSESSMENT CHECKLIST

ASEAN-ERAT RAPID ASSESSMENT TOOL

PRELIMINARY NOTES

- A. Not all questions or sections may be relevant to a particular emergency. If the question is not applicable to the situation being assessed, please mark 'Not Applicable' (NA).
- B. If the information being asked is applicable but not available, please mark 'Information Not Available' (INA).
- C. Please indicate source of information: government, IDPs, NGOs, etc.
- D. Please note and distinguish questions intended for Households (HH), Focus Groups (FG), Key Informants (KI) and Observation (O).

SECTION 1 — IDENTIFICATION INFORMATION

1.1. **Date of Assessment:** ___/___/___ up to ___/___/___
(DD/MM/YYYY)

1.2. **Assessment Team:**

Name _____ :
Position/Title _____ :
Organization _____ :

Name _____ :
Position/Title _____ :
Organization _____ :

Name _____ :
Position/Title _____ :
Organization _____ :

Add more names as appropriate.

1.3. Location of assessment (the area covered by this assessment/ form)

Province	District	Sub-district	Village

Interview taking place at (tick all that apply):

- Village Informal camp Mosque
 Urban area Formal camp Church
 Collective center School Other: _____
-

Person interviewed (tick all that apply):

- Male Female Religious Leader
 Village Leader Community Member Women's Focus
Groups
 Informal leader Formal camp School Teacher
 Police Health-care worker Child (< 18 yrs)

Accessibility of Disaster Location: Can be reached by:

- 2x4 car 4x4 car truck
 motorcycle boat walking only
 no access at all other

SECTION 2 — DEMOGRAPHICS

2.1. Size of affected population:

Estimated # of people who are affected by the emergency:

_____ individuals _____ HH

Total population of site visited:

_____ individuals _____ HH

What number or percentage of the affected population is:

Age	Male	Female
0-5		
6-12		
13-17		
18-25		
26-60		
60 yrs+		

2.2. How many people are dead, missing or injured due to the crisis?

	Women (18 yrs+)	Men (18 yrs+)	Girls (0-17 yrs)	Boys (0-17 yrs)
Dead				
Missing				
Injured				

2.3. General Information on Demographics:

Description	Number
Elderly person headed HH (>60 yrs):	HH
Female headed HH:	HH
Child headed HH (<18 yrs):	HH
Person with disability (physical):	individuals
Person with disability (mental):	individuals
Pregnant women:	individuals
Lactating women:	individuals
Migrants or ethnic minorities	individuals

2.4 Population Movements and Displacement:

How many people have left their houses? _____
(indicate if individuals or HH)

Where are the displaced currently living? _____

Where did the displaced come from? _____

How did the community move?

Communal/Organized Individual Chaotic

Did families generally move together as a group? Yes No

How many IDP centres/ camps (formal and informal)?

___ Formal evacuation centres

___ Informal evacuation centres

How many people are living in the IDP centres/camps? _____

Where the residents come from and their location:

Origins of IDPs: _____ No. of people in camp: _____

Origins of IDPs: _____ No. of people in camp: _____

Please add more as necessary.

2.5. Access to Information and Assistance (interview with IDPs)

Have you been informed of the relief and recovery efforts in a language or manner that you understand? Yes No

In your community, do the following groups of persons have food, water, shelter and protection from violence, abuse and exploitation?

Older people Yes No

People with disabilities Yes No

Children living on their own, without adults Yes No

Female-headed households Yes No

Is there an effective way that you or your community can resolve problems with regards to your current situation, including any threats to your security and ensuring everyone receives aid equitably?

Yes No

SECTION 3 - SHELTER AND ESSENTIAL NON-FOOD ITEMS (NFIs)

3.1 Access to shelter:

Total number of houses in the disaster-affected area: _____ unit

How many houses are uninhabitable? _____ unit
(Uninhabitable = foundation and structure destroyed)

How many houses suffered damage but remain usable? _____ unit
(Usable = windows broken, cracks in walls, roof slightly damaged)

What type of salvage materials can be used from destroyed houses?

- | | | |
|---------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Wooden plank | <input type="checkbox"/> Zinc roof | <input type="checkbox"/> Bricks |
| <input type="checkbox"/> Wooden poles | <input type="checkbox"/> Door frame | <input type="checkbox"/> Window Frame |
| <input type="checkbox"/> Roof Tile | | |

3.2 Access to essential NFIs:

Do households have at least 2 containers (10-20 litres each) to hold water? Yes No

Do HH have household water storage containers? Yes No

If yes, what type of household water storage is available? (Please tick relevant box/es)

- | | | |
|--|---------------------------------|---------------------------------------|
| <input type="checkbox"/> Jerry can | <input type="checkbox"/> Bucket | <input type="checkbox"/> Water gallon |
| <input type="checkbox"/> Other, please specify _____ | | |

Do households have appropriate equipment and materials to cook their food (stove, pots, dishes, plates, and a mug/drinking vessel, etc)? Yes No

Do women and girls have easy access to sanitary materials? Yes No

Do people have reliable access to sufficient sanitation/ hygiene items (bathing soap, laundry soap, shampoo, toothpaste and toothbrush)? Yes No

Do households have bedding materials available (tarps, plastic mats, blanket)? Yes No

Do people have at least 2 full sets of clothing (shirt, pants/sarong, underwear)? Yes No

Have they received or expecting to receive any shelter/ NFI assistance in the coming days? Yes No

If so, list what and by whom?

Hygiene kits Source _____

Household kits Source _____

Family tarpaulin Source _____

Other _____ Source _____

SECTION 4 - WATER AND SANITATION

4.1. Water supply:

What are the major sources of drinking water?

PDAM Dug Well Spring River
 Faucet/Piped Water Other, please specify _____

How long will this water resource last? _____

What are your major sources of clean water for daily use (ex: washing, cooking, bathing)?

PDAM Dug Well Spring River
 Faucet/Piped Water Other, please specify _____

How long will this water resource last? _____

From where did you access water for daily use before the disaster?

PDAM Dug Well Spring River
 Faucet/Piped Water Other, please specify _____

4.2. Access to water:

How long does it take you to reach the available water resources?
(Specify the time required to go there and back, including queuing time, by foot)

- 0-15 minutes 15-30 minutes
 30-60 minutes over one hour

Is it safe to collect the water? Yes No

If not, why? _____

Who usually collects water for the family?

- Child Adult male Adult female
 Older person (>60 yrs)

Sanitation

Where do the majority of people defecate? (Please tick relevant box/es)

- Open defecation Pit Latrines River
 Other, please specify _____

Distance (estimate) between latrines/defecation areas and water source: _____

Where do animals defecate?

- Enclosed area Within human habitat

Is there any industrial or agro-chemical production close to the affected area/village? Yes No

Where is solid waste disposed of in the village?

4.4. Access to sanitation

How many latrines are available in the village/IDP centre/Camp? _____

What types of latrines are available in the village / IDP centre / camp

- Flush latrine with septic tank Pit latrine

Are there separate latrines for men and women available?

- Yes No

Distance (estimate) between latrines and temporary shelter: _____

SECTION 5 - HEALTH

5.1. Availability and type of health services

Were there health services functioning for the community prior to the disaster? Yes No

If yes, did they have basic medical supplies? Yes No

Are there health services functioning for the community since the disaster?

If yes, are basic medical supplies available? Yes No

How many days will the supplies last? _____

What type of health services are still functioning in the affected area?

PusTu Puskesmas Hospital

How many doctors/ nurses/ midwives in the health centres are still actively working?

Doctors _____ Nurses _____ Midwives _____

How long does it take you to walk to the health service? (in minutes)

0-15 minutes 15-30 minutes 30-45 minutes

45-60 minutes over one hour

5.2. Health conditions of disaster-affected people

What type of health problems do people have?

Respiratory infections Diarrhea Dehydration

Other (specify) _____ None of the above

What type of health problems do children have? (Tick relevant box/es)

Respiratory infections Diarrhea Dehydration

Other (specify) _____ None of the above

Are there people in your community with chronic illnesses?

Yes, children Yes, older people

Yes, other No

Are they receiving sufficient care and assistance?

- Yes No

Were there cases of malnutrition in this area before the emergency?

- Yes No

Were there reports or evidence of outbreaks of any micronutrient deficiency disorders before the emergency?

- Yes No

Were breast milk substitutes being used prior to the disaster?

- Yes No

Are breast milk substitutes being used here since the disaster?

- Yes No

For babies who are not being breastfed, what are they being fed on?

- Porridge Banana Instant porridge Air tajin

Other (specify) _____

- None of the above

Are there cases of diarrhea among children under 5?

- Yes No

If yes, approximately how many children had diarrhea in the past 48 hours? _____ children

SECTION 6 - NUTRITION / FOOD SECURITY

6.1. Food Availability

What food stocks exist? (Tick relevant box/es)

Main Dishes:

- Rice Noodles Biscuits Corn
 Cassava cooking oil

Side Dishes:

- Salted fish Canned fish Chicken Eggs
 Other (specify) _____

6.2 Food Sources

How long will the food last? (tick relevant boxes)

- 1-3days 4-7 days 8-14 days

What are people's normal ways of obtaining food? (tick relevant box/es)

- Local market Field cultivation Food stall
 Animal husbandry Raising poultry
 Other (specify) _____

Have normal food sources been disrupted?

- Yes No

If yes, specify _____

Have you received or expecting to receive any medical or food assistance in the coming days?

- Yes No

If so, list what and by whom?

- Mobile clinic Source _____
 Rice/ noodles/ biscuits Source _____
 Cooking oil Source _____
 Other Source _____

SECTION 7 - LIVELIHOOD

7.1. Sources of Income (interview with IDPs)

What are your main sources of income now?

- Agriculture Fishing Poultry
 Casual Labor Small Trade Other

What do you spend most of your income on now?

- Education Health Food
 Hygiene Shelter Clothing
 Funeral Alcohol
 Other, specify _____

What were your main sources of income before the disaster?

- Agriculture Fishing Poultry
 Casual Labor Small Trade Other

7.2. Access to Cash

Do you have access to cash to restart your business?

Yes No Business not damaged

If yes, where?

Family friends Government
 Bank/micro finance Humanitarian NGO
 Other, specify _____

7.3. Community Priorities for Early Recovery

What support do you think is most essential right now? (Rank)

_____ Assistance for immediate repair/reconstruction of houses
_____ Farmland/fishing material assistance
_____ Re-stocking of poultry
_____ Assistance for health care
_____ Transportation assistance
Other, specify _____

SECTION 8 - EDUCATION

8.1. Access to education services

Total number of schools in affected area: _____ schools

Number of Public schools _____

Number of Private schools _____

Number of Religious schools _____

How many schools are uninhabitable/destroyed? _____ schools
(Uninhabitable = foundation and structure destroyed)

How many schools are damaged but remain usable _____ schools
(Windows broken, cracks in walls, roof slightly damaged)

What type of salvage material can be used from destroyed schools?
(Specify)

Wooden plank Zinc roof Bricks Wooden poles
 Door frame Table Chairs Books
 Black/ Whiteboard

Are there any alternative places for studying?

Yes No

If yes, how many are available _____

Where are those places? (Tick relevant box/es)

Community centre Mosque Government building

Church Open area

Other (specify) _____

8.2. School activities

How many primary/secondary schools were opening prior to the disaster?

How many of the primary/ secondary schools are now open and running a regular schedule of class? _____

How many teachers worked in the schools prior to the emergency?

_____ people

How many teachers have been affected by the emergency? _____ people
(Affected = unable to work)

How many primary school age children (6-12) are in the affected area?
_____ girls _____ boys

How many are not attending school? _____ girls _____ boys

How many secondary school age children (13-18 yrs old) are in the affected area? _____ girls _____ boys

How many are not attending school? _____ girls _____ boys

What are the factors affecting school attendance? (please tick relevant box/es)

School is used for other purpose

School heavily damaged

School destroyed

Desire to remain with family

Lack of school uniform

Lack of supplies at school

Lack of transport to school

Displaced

Children not enrolled in new school

Other (specify) _____

Have schools received or expecting to receive any assistance?

Yes No

If so list what and by whom?

School tents Source _____

Educational material Source _____

Other Source _____

SECTION 9 - PROTECTION

9.1 Physical Safety

Are the areas that children, older people, and people with disabilities live in, play in and walk through on a daily basis physically safe?

Yes No

Has the safety and security of women and children in your community changed since the emergency?

Yes No

Without mentioning any names or indicating anyone, do you know of incidents of violence against women or girls occurring since the disaster?

Yes No

Do you know of any other incidents of violence?

Yes No

What should be done to reduce women and children's vulnerability to violence?

9.2. Separated Children, Caregiving Arrangements and Persons in Institutions

Do you know of:

Children separated from their parents or caregivers?

No Many Some Few

If yes, where are the children originally from?

Do you know of:	No	Many	Some	Few
Parents or caregivers missing children?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children who have been orphaned by the disaster?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children that have been sent away to a safe place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If yes, to where? _____

Children living on their own (without adults)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children that have disappeared without explanation in the period since the disaster?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Older people who are the primary caregivers of children?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are there people living in any of the following types of institutions in this area?

Homes for disabled children	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Orphanages (child)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Children in pesantren or dyah	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Children in juvenile detention	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Children in adult prisons	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adults in prisons	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Older people in pantis (panti lanjut usia)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other _____		

What is the total estimated number of people in these institutions?

1-10 11-50 51-100 100+

Are there staff present and caring for the residents? Yes No
Do they have adequate food and water? Yes No

9.3. Psychosocial support

How did girls and boys spend most of their time prior to the disaster?

	Girls (12 yrs)	Boys (<12 yrs)	Girls (13-17 yrs)	Boys (13-17 yrs)
Playing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic chores	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School / studying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doing nothing (no structured activities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working or other to provide money, food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____				

How do girls and boys currently spend most of their time?

	Girls (12 yrs)	Boys (<12 yrs)	Girls 13-17 yrs)	Boys (13-17 yrs)
Playing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic chores	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disaster clean-up/repairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School / studying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doing nothing (no structured activities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working or other to provide money, food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____				

Are older people, women, people with disabilities or adolescents participating in activities that help them cope with the disaster? (ex: meeting with other older people or women, participating in religious activities, volunteer in community clean-up, etc)

Older people	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Women	<input type="checkbox"/> Yes	<input type="checkbox"/> No
People with disabilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Migrants or ethnic minorities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Adolescents and youth	<input type="checkbox"/> Yes	<input type="checkbox"/> No

In general, what are the greatest needs of:

Older people in your community? _____

People with disabilities? _____

Children and youth? _____

Female-headed households? _____

ASEAN-ERAT ASSESSMENT REPORT

(Phase 1)

The ASEAN-ERAT should prepare a 5-page report on the rapid assessment immediately following completion of the field trip and analysis (Approximately within 48-72 hours). Time is of the essence immediately following a disaster and it is essential that all information discovered by ASEAN-ERAT and any recommendations are made available as soon as possible. The report should be short and clear with explicit recommendations. It should also make clear the limitations of the assessment and any assumptions made during the analysis.

-ASEAN-ERAT Assessment Methodology Guideline

Mission Objective/s	
---------------------	--

<p>1. General Description of Disaster Impact on Population (State briefly the immediate impact of the disaster on the population and specific community groups affected; number of people affected, estimated number of people evacuated and evacuation sites, reported number of dead, injured and missing persons, as appropriate. Consider population age, sex, ethnicity characteristics, population movements/ displacements)</p>

2. Status of Populations Living in Affected Areas (State the situation that requires urgent attention and assistance under each sector. Provide as much detail as possible on the estimate number of people/households affected or needing assistance, culturally-appropriate requirements, etc.)	
Access to information and assistance	
Shelter and essential non-food items	
Water, Sanitation and Hygiene (WASH)	
Health	
Food and Nutrition	
Livelihoods	
Access to education	
Safety, Security and Protection	

3. National capacities and response

4. International capacities and response

5. Coordination Overview (Overall coordination mechanisms in place, both national and international; constraints in coordination)

6. Immediate Unmet Needs

(List in order of priority the specific needs to manage or cope with the current emergency. This may include emergency response teams or expertise, emergency logistics, equipment and supplies, and water and sanitation facilities, among others.)

7. Operational Considerations (Relief Entry Points, Logistical constraints in relief delivery (access, communication, power, transport, local market conditions, etc.), Relief delivery issues (Customs information), Security Issues

8. Recommendations / Proposed Actions for the ASEAN and the AHA Centre

9. Information Gaps and requirements for further assessment

10. Others

CUSTOMS & CULTURES

COUNTRY	(a) GESTURES	(b) TABOOS	(c) LAW & ORDER
Brunei Darussalam	Pointing is done by using the thumb. Always present and receive items with your right hand.	Clapping during religious functions is considered a big faux pas. Avoid extreme physical contact and public displays of affection between male and female in public.	Alcohol is not sold anywhere. Penalties for the possession of illegal drugs are harsh. Royalties have right on way on roads.
Cambodia	To beckon someone, hold your hand palm downwards with the fingers pointing towards the ground and waggle them loosely in a scratching motion. Remove shoes when entering somebody's home.	It is rude to point directly at a person and avoid touching people's head.	No legal drinking age. Penalties for possession, acquisition, and trafficking of drugs are severe.
Indonesia	Pointing is done using the open palm or thumb. Use right hand to pass or receive objects.	Avoid touching or passing object over the top of anyone's head. Avoid public displays of affection between men and women.	Legal age drinking and smoking is 18. Penalties for possession, acquisition, and trafficking of drugs are severe. Sales of alcohol to Muslims are illegal.
Lao PDR	To beckon someone, hold your hand palm downwards with the fingers pointing towards the ground and waggle them loosely. Avoid pointing directly.	Hide feet from view while seating and keep body, arms and legs covered when entering temples.	No legal drinking age. Penalties for possession, acquisition, and trafficking of drugs are severe.

COUNTRY	(a) GESTURES	(b) TABOOS	(c) LAW & ORDER
Malaysia	Beckon one another by extending an arm and making a scratching motion with their fingers. Use right hand to pass and receive items.	Avoid touching or passing object over the top of anyone's head.	Legal age drinking and smoking is 18. Penalties for possession, acquisition, and trafficking of drugs are severe. Sales of alcohol to Muslims are illegal.
Myanmar	Avoid pointing directly.	Dress conservatively and always receive items with right hand or both hands.	Legal age for drinking is 18. Penalties for possession, acquisition, and trafficking of drugs are severe.
Philippines	Beckon one another by extending an arm and making a scratching motion with their fingers. Avoid putting one's feet on furniture.	Avoid pointing or wagging a finger at people. Loud voices, public drunkenness and rude behavior are frowned upon.	Legal age for drinking and smoking is 18. Penalties for possession, acquisition, and trafficking of drugs are severe.
Singapore	Point using an open palm or the thumb with the hand closed. Avoid moving objects with feet.	Avoid touching or passing object over the top of anyone's head.	Legal age for drinking and smoking is 18. All laws are strictly enforced. Penalties for possession, acquisition, and trafficking of drugs are severe.
Thailand	Take your shoes off when entering a Thai home and be sure to step over all thresholds. Beckon one another by extending an arm and making a scratching motion with their fingers. Use whole hand or palm flat to point.	Use right hand to pass or receive items. Avoid touching or passing object over the top of anyone's head. Do not touch anyone's head.	Legal age for drinking is 20 and smoking is 18. Penalties for possession, acquisition, and trafficking of drugs are severe.

COUNTRY	(a) GESTURES	(b) TABOOS	(c) LAW & ORDER
Vietnam	Using your whole hand or palm flat to point. Receive items with both hands.	Avoid touching or passing object over the top of anyone's head. Crossing the index and middle fingers is a rude gesture.	No legal age for drinking. Legal age for smoking is 18. Penalties for possession, acquisition, and trafficking of drugs are severe.

COUNTRY	(d) GREETINGS	e) COMMUNICATION STYLES	(f) PERSONAL SPACE AND TOUCHING
Brunei Darussalam	Brief firm handshakes with the right hand are the most common form of greeting. Wait for females to initiate handshake. It is taboo for religiously observant men to touch women and vice-versa.	Be non-confrontational and indirect.	Approximately at arms' length, avoid touching between members of the opposite sex while conversing.
Cambodia	Smile and place their both palms together, slightly bow the head and say "ChhumReap Suo". Handshakes are also possible especially to friends.	Be non-confrontational and indirect.	Slightly more than arms length distance.
Indonesia	Handshakes using right hand are the most common form of greeting. Wait for females to initiate handshake.	Saving face is a big part of the culture. Face-to-face meetings tend to get more attention rather than fax/email/phone calls.	At least arms lengths is common.

COUNTRY	(d) GREETINGS	e) COMMUNICATION STYLES	(f) PERSONAL SPACE AND TOUCHING
Lao PDR	Smile, put both hands pressed together in a prayer in front of your body and accompanied by a slight bow or nod, say "Sabaideebor" which means "how are you?" Light handshakes are permissible.	Keep verbal communication non-confrontational and indirect.	One arm's length of personal space is the norm. Avoid touching during conversation and avoid touching anybody's head as it is considered very disrespectful.
Malaysia	Gentle and non- prolonged handshakes are the most common form of greeting.	Keep verbal communication non-confrontational and indirect.	At least arms lengths is common.
Myanmar	Smile and say, "Mingalarbar" which means an auspicious occasion. Handshakes between men are permissible. Avoid touching females.	Face is a part of the culture and do not lose temper in public. Keep verbal communication non-onfrontational.	At least arms length. Avoid touching monks, nun and women. When sitting, do not point feet at Buddha image, monk or an older person.
Philippines	Gentle and non- prolonged handshakes are the most common form of greeting.	Keep verbal communication non-confrontational and indirect. Avoid hurting other people's feelings.	At least arms lengths is common.
Singapore	Gentle and non- prolonged handshakes are the most common form of greeting.	Keep verbal communication non-confrontational and indirect.	At least arms lengths is common.

COUNTRY	(d) GREETINGS	e) COMMUNICATION STYLES	(f) PERSONAL SPACE AND TOUCHING
Thailand	Place both hands in a prayer position and then touched to somewhere between the chest and top of the head, and say “wai” .	Keep verbal communication non-confrontational and indirect.	At least arms lengths is common.
Vietnam	Gentle and non- prolonged handshakes are the most common form of greeting.	Be non-confrontational and indirect.	At least arms lengths is common.

INCIDENT MANAGEMENT STRUCTURE

Brunei Darussalam

English	Melayu Brunei	Example (of location)	Incident Manager	Disaster Management Authority
National	Kebangsaan	-	Prime Minister	National Disaster Management Centre (NDMC)
District	Daerah	Temburong	District Officer / Related Agencies	District Office
Sub-district	Mukim	Kota Batu	Penghulu (Head of Country) / Related Agencies	Related Agencies such as Royal Brunei, Armed Forces, Royal Brunei Police Force, Brunei Fire Rescue Dept, Minister of Health
Village	Kampong	Kampong Kota Batu	Ketua Kampong (Head of Village) / Related Agencies	(Depending on the type of Disaster)

Cambodia

English	Khmer	Example (of location)	Incident Manager	Disaster Management Authority
National			Prime Minister	National Committee for Disaster Management (NCDM)
a) Province	Khaet	Battambang	Governor	Provincial Committee for Disaster Management (PCDM)
b) Capital	ReachTheany	Phnom Penh		

English	Khmer	Example (of location)	Incident Manager	Disaster Management Authority
District	Sròk	Banan	District Chief	District Committee For Disaster Management (DCDM)
	Krong	Bavet		
	Khan	Russeykeo		District Committee for Disaster Management
Commune	Khum	Kantueu Muoy	Commune Chief	Commune Committee for Disaster Management (CCDM)
	Sangkat	Bavet		
Village	Phum	Thmei	Village Chief	Village Chief Disaster Management Group (VDGM)

Indonesia

English	Bahasa Indonesia	Example (of location)	Incident Manager	Disaster Management Authority
National	Nasional		President	BNPB
Province	Provinsi / Propinsi	Sumatera Barat	Gubernur	BPBD Provinsi
Regency/City	Kabupaten / Kota	Nias / Padang	Bupati / Walikota	BPBD Kabupaten / Kota
Sub-District	Kecamatan	Pagai Selatan	Camat	-
Village	Desa / Kelurahan	Pahonjean	Kepala Desa / Lurah	-
Neighbourhood	Rukun Warga (RW)	-	Ketua RW	-
Neighbourhood	Rukun Tetangga (RT)	-	Ketua RT	-

Lao PDR

English	Laotian	Example (of location)	Incident Manager	Disaster Management Authority
National			President	National Disaster Management Committee (NDMC)
Province Prefecture	Qwang Kampheng Nakhon	Luang Prabang Vientiane Prefecture		Provincial Disaster Management Committee (PDMC)
District	Muang	Chomphet District		District Disaster Management Committee (DDMC)
Village	Baan	Hmong Village		Village Disaster Protection Unit Disaster (VDPU)

Malaysia

English	Bahasa Melayu	Example (of location)	Incident Manager	Disaster Management Authority
National	Kebangsaan		Minister Appointed by Prime Minister (currently Minister in Prime Minister's Dept),	National Security Council, Prime Minister's Dept
State	Negeri	Johor	State Secretary	National Security Council, Prime Minister's Dept

English	Bahasa Melayu	Example (of location)	Incident Manager	Disaster Management Authority
District	Daerah	Kota Tinggi	District Officer	National Security Council, Prime Minister's Dept

Myanmar

English	Burmese	Example (of location)	Incident Manager	Disaster Management Authority
National	-	-	Prime Minister, Chairman of National Disaster Preparedness Central Committee (NDPCC)	National Disaster Preparedness Central Committee (NDPCC)
State / Division / District	-	Ayeyarwady Division	National Disaster Preparedness Management Working Committee (NDPMWC)	National Disaster Preparedness Management Working Committee (NDPMWC)
Township	-	Da Ni Seik (Pyinsalu Sub-Township)	MSWRR	-
Village Tract	-	Tha Pya Kone Village Tract	MSWRR	-
Village	-	Mya Yar Kone Village	MSWRR	-

Philippines

English	Filipino	Example (of location)	Incident Manager	Disaster Management Authority
National	Pambansa	(entire Philippines)	President / Chairman NDRRMC	National Disaster Risk Reduction Management Council (NDRRMC)
Regional	Rehiyon	Region III – Central Luzon	Regional Director NDRRMC	Regional Disaster Risk Reduction Management Council
Provincial	Probinsiya	Zambales	Governor	Provincial Disaster Risk Reduction Management Council
City / Municipality	Bayan	Olongapo City	Mayor	City Disaster Risk Reduction Management Council
Barangay	Baranggay	Sta. Rita	Barangay Captain	Barangay Disaster Risk Reduction Management Council

Singapore

English	Example (of location)	Incident Manager	Disaster Management Authority
National	-	President	Singapore Civil Defence Force (SCDF)
Community Development Council District	Central Singapore	Mayor	SCDF
Constituency	Hong Kah Group Representative Constituency	-	SCDF
Division	Keat Hong Division	-	SCDF

Thailand

English	Thai	Example (of location)	Incident Manager	Disaster Management Authority
National	Pratet		Prime Minister	Department of Disaster Prevention and Mitigation (DDPM)
A) Province	Changwat	Chiang Mai	Governor	Disaster prevention and Mitigation Provincial Office
B) Municipality	Krung Thep Maha Nakhon	Bangkok	Governor	Governor
a) District	Amphoe	Chom Thong	District Chief Officer	Disaster prevention and Mitigation Provincial Office
b) District (Bangkok only)	Khet	Chatuchak	District Chief Officer	DDPM
a) Sub-district	Tambon	Ban Luang	Chief of SAO	Sub- district administrative organization(SAO)
b) Sub-district (Bangkok only)	Khwaeng	Wong Sawang	-	DDPM
Village	Muban	Ban Na	Chief of Village	Sub- district administrative organization(SAO)

Vietnam

English	Vietnamese	Example (of location)	Incident Manager	Disaster Management Authority
National	Quốc gia		Prime Minister/ Vice Prime Minister/ Minister of MARD *	Centre Committee for Flood and Storm Control (CCFSC)

* Minister of MARD – Minister of Agriculture and Rural Development – Chairman of CCFSC

English	Vietnamese	Example (of location)	Incident Manager	Disaster Management Authority
Province/City	Tỉnh/Thành phố	An Giang/Cần Thơ	President/ Vice President	Provincial Committee for Flood and Storm Control, Search and Rescue (PCFSCAR)
District / Country	Quận/Huyện	Ba Đình	President/ Vice President	District Committee for Flood and Storm Control, Search and Rescue (DCFSCAR)
Commune/ Ward	Phường / Xã	Kim Mã	Chairman of Ward/ Chairman of Commune	Ward Committee for Flood and Storm Control, Search and Rescue (WCFSCAR)

EMERGENCY INDICATORS AND MINIMUM STANDARDS

MALNUTRITION EMERGENCY DEFINITIONS

Global Acute Malnutrition (GEM) = Severe Acute Malnutrition (SAM) + Moderate Acute Malnutrition (MAM)

GAM for <5 age group

Z-Score < -2 MUAC < 13.5 cm WFH/WFL < 80 %

SAM for <5 age group

Z-Score < -2 MUAC < 11.0 cm WFH/WFL < 70 %

MAM for <5 age group

Z-Score > -3 and < -2 MUAC > 11.0 & < 13.5 cm WFH/WFL > 70% & 80%

See section D of chapter III, Interpretation of Malnutrition Rates and Corresponding Action, for malnutrition indicators.

MORTALITY RATE EMERGENCY INDICATORS

Crude Mortality Rate (CMR): single most important indicator of serious stress in affected populations

CMR = deaths/10,000/day: emergency phase

<1 = Under control

>1 = Serious condition

>2 = Out of control

>4 = Major catastrophe

Mortality rate for <5 age group

1 = Normal In a developing country

< 2 = Emergency phase: under control

> 2 = Emergency phase: in serious trouble

> 3 = Emergency phase: out of control

MINIMUM WATER REQUIREMENTS

Minimum maintenance = 15 liters/person/day

Feeding centers = 30 liters/inpatient/day

Health centers and hospitals = 40-60 liters/inpatient/day

1 tap stand/250 people not > 100m from users

A large quantity of reasonably safe water is preferable to a small amount of pure water

MINIMUM FOOD REQUIREMENTS

Minimum maintenance = 2.100 Kcal/person/day

MINIMUM SHELTER/SPACE REQUIREMENTS

Minimum shelter space = 3.5 m² / person

Minimum total area = 45 m² / person for temporary planned or self-settled camps

MINIMUM SANITATION REQUIREMENTS

At least 1 toilet for every 20 persons

Maximum of 1 minute walk from dwelling to toilet (≥6 and ≤50m)

ENGLISH TO METRIC

To convert	Into	Multiply by
Lengths		
Inches	millimeter	25,4
Inches	centimeters	2,54
Inches	meters	0,0254
Feet	meters	0,3048
Yards	kilometers	0,0009
Yards	meters	0,9144
Miles	kilometers	1,6093
Surfaces		
Square inches	square centimeters	6,4516
Square feet	square meters	0,0929
Square yard	square meters	0,8361
Square miles	square kilometers	2,5900
Acres	hectameters	0,4047
Volumes		
Cubic inches	cubic centimeters	16,387064
Cubic inches	liters	0,016387
Cubic feet	cubic meters	0,028317
Cubic feet	liters	26,316847
Cubic yards	cubic meters	0,764555
Liquid ounces	cubic centimeters	29,573530
Gallons (USA)	cubic meters	0,003785
Gallons (USA)	liters	3,785412
Teaspoon	millimeters	4,928922
Tablespoon	millimeters	14,78676
Fluid ounces	millimeters	29,573530
Cups	liters	0,236589
Pints	liters	0,473176
Pints	liters	0,473176
Quarts	liters	0,946353
Weights		
Grants	grams	0,064799
Ounces	grams	28,349523
Ounces	kilograms	0,028350
pounds	kilograms	0,453592
pounds	tons (metric)	0,000454
tons (USA)	kilograms	907,184740
tons (USA)	tons (metric)	0,907185
tons (long)	kilograms	016,046909
tons (longs)	tons (metric)	1,016047

