

INITIAL RAPID ASSESSMENT (IRA): AIDE MEMOIRE FOR FIELD TEAMS

Purpose of an IRA	-The purpose is to provide a rapid overview of the emergency situation in order to identify the impacts of the crisis, make initial estimates of needs, and define the priorities for humanitarian action in the early weeks of response. It should answer the following core questions: <ol style="list-style-type: none"> 1. What has happened? Is there an emergency situation and, if so, what are its key features? 2. How have the population and essential services been affected? Who are worst affected and likely to be most vulnerable? Why? How many people are affected? Where are they? 3. Are interventions required to prevent further harm or loss of life? If so, what are top priorities? 4. What continuing or emerging threats could escalate the emergency? 5. What resources and capacities are available? What are the most important, immediate capacity gaps? 6. What are the key information gaps that should be addressed in follow-up assessments?
When should an IRA be undertaken?	-An IRA should be initiated as soon as possible after the onset of a new sudden-onset crisis (within 72 hours, maximum 1 week). The whole process including analysis and preparation of a report should be completed within 1 to 3 weeks. -An IRA may also be undertaken when an area in an ongoing conflict/complex emergency becomes newly accessible, or in a protracted emergency affected by a sudden, additional shock or deterioration in conditions.
What is expected of IRA teams?	-Each team is expected to provide the best possible picture of the situation that it can develop in a few days for its assigned geographic area based on a review of secondary data and primary data collected at the sites visited. Data must be collected from a variety of sources, using different methods, and triangulated in a conscious effort to ensure accuracy and minimize bias. -Teams should visit relevant district/administrative headquarters before proceeding to individual sites, whenever feasible. Data collection at each site should take no more than 2-3 hours with a team of 3-4 members. Teams should use a standard IRA form to summarize the situation and priority needs for initial response at each site visited.
The IRA Form	-The form is divided into 2 parts: <ol style="list-style-type: none"> 1. Summary conclusion sheets: to be completed by the team leader at the end of each site visit, with input from all team members AFTER the rest of the form has been completed. 2. Data sheets: are divided into 6 sections, covering demographics; shelter & NFIs; water, sanitation & hygiene (WASH); food security & nutrition; and health <p>-It should be customized to the country situation while maintaining the basic structure, and be translated, if necessary. Ideally, this should be done in advance as part of inter-agency contingency planning.</p>
How the IRA Form should be used	-One form should be completed collectively by the team for each site visited. Team members may also use the form as a checklist and worksheet for recording observations and taking notes during interviews. -Each question has a code suggesting the source(s) from which to collect the data. These codes are explained on the front sheet of the form. Some questions have more than one code, indicating that multiple sources should be used and the data triangulated.
Who should do an IRA?	-The IRA form is designed for use by individuals without advanced training in the sectors covered. However, broad public health and/or food security training and experience, and familiarity with rapid appraisal methods and best practices in the major content areas, are advantageous.

Activities prior to site visits:

- *Before going to the field:* collect and rapidly review available secondary data on the areas to be visited (this include both data on the *pre-crisis* situation – see Annex C to the guidance note – and available data on the current, *in-crisis* situation); get a thorough briefing on how the IRA is to be undertaken, how reports are to be submitted, and an indicative list of the key informants that all teams should seek to interview; agree within the team on how you will proceed and organize yourselves during visits to district headquarters and individual sites.
- *At district level,* interview local government and line ministry officials, referral health-care facilities, national and international organizations already in the area, local businesses, etc. to find out more about: (i) conditions before the crisis including the way in which services are normally organized; (ii) the extent to which services have been affected, the most affected locations, the main impacts of the crisis; and (iii) any relief activities that are already underway or planned.

Selecting sites to visit:

In most cases it will be necessary to choose a small number of sites to visit in the time available. Choices must be made to include sites that will enable you to understand the situation in the affected area as a whole including but not limited to the worst-affected localities and population groups.

- From secondary data and information from key informants, determine whether the impact seems to be similar *throughout* the area and for all population groups. If so, randomly select a small number of areas. If not, map out the areas where impacts are believed to be different and establish itineraries that take in a number of the worst-affected localities but also some sites representing less-affected areas and population groups

Primary data collection:

On-site tasks should be clearly divided among team members according to skill sets and experience for maximum efficiency. Each team member should have a defined role and be ready to conduct his/her own enquiries related to particular sources of information for completing the IRA form while also being sensitive to the information needs of the team as a whole.

Identifying and interviewing key informants (KIs):

- At the start of the site visit, meet with local authorities and/or community leaders. (Where there are no such obvious starting points, contacts with people in the street or in/around the administrative centre can help identify people knowledgeable on the community situation or context with regard to each theme in the IRA form.)
- Other KIs at each site would normally include health workers, teachers, community development workers, relief workers, traders and NGO programme managers. All are likely to be sources of important information.
- Where a site includes both resident and displaced populations, some KIs may be able to provide perspectives on both groups for some issues – e.g. major health issues. However, be aware of potential bias and select KIs from each population, wherever possible.
- When an interview is clearly not yielding the kind of overview perspective needed, politely bring the discussion to an end and identify other KIs to talk with.

Holding group discussions:

- Select participants based on the issues to be discussed and look for convenient ways to get groups together on specific topics, e.g.: questions about water access and use can be discussed with a queue at a water point; questions about infant and young child feeding with mothers at an ante-natal clinic. But be aware of possible bias arising from the situation in which groups are found, e.g. people waiting to see a doctor are not representative of the whole population in terms of health issues.

Observing conditions:

- Walk across the site along a *transect* – not following existing lines such as roads or paths – to obtain a cross-section of points for observation and provide a balanced, representative view of conditions.
- Key sites for observation include water collection points, food distribution queues, latrines, communal showers, storage facilities, grave sites, and drug stocks in health facilities.
- Observe the site from above, if possible, to get a sense of the conditions and variations across the site.

Visiting households (HHs):

- Where impacts are differentiated by location or by group within a community, this will suggest where to go for HH visits. Within a specific area, choose HHs that have specific characteristics, e.g. the most poor-looking.
- Directly observe at least four HHs including one less affected HH and that of a community leader chosen as a KI. The more heterogeneous the population and the more uneven the impact of the crisis, the more careful the sampling approach needs to be and the greater the total sample size in order to be able to confidently draw conclusions.

Assessing health facilities and services:

Section 6 of the IRA form requires investigation of the status of the health facility (HF) and the services currently provided:

- Collect information through interviews with HF staff and direct observation of activities, supplies and equipment.
- If there is no HF at the site, complete only section A (green) of the form.
- When assessing a primary facility, complete section B (yellow) of the form.
- When assessing a *secondary or tertiary facility*, complete both sections B and C (yellow and red) of the form.

Synthesizing and recording your findings:

- Wrap up each visit by collectively discussing the data gathered at that site for each sector and consolidating them in a single IRA form. Reconcile, as much as possible, any inconsistencies among data collected by different team members or using different methods. Highlight any unresolved issues at the end of each section of the form.
- Transmit the completed form to the central analysis unit as soon as possible using the agreed communication channels.

Box 1: Some Do's and Don'ts for IRA fieldwork

- Do:**
- Divide tasks by according to expertise of team members, so each can collect information independently.
 - Choose a limited number of key topics to discuss with a particular KI or group, or during HH visits.
 - Once on-site, after introduction to local authorities/leaders, fan out to collect information individually (or in pairs)
 - Record observations and any information volunteered that may be related to topics other than your own.
 - Introduce yourself properly and give people time to talk about their priority issues or grievances, before asking more targeted questions.
 - Find the 'person who knows' – who has already gathered most of the data you're looking for – but beware of bias.

- Don't:**
- waste precious time talking as a whole team to one respondent (apart from initial introduction to authorities, etc.).
 - interrogate respondents as an extractive process; instead, let them talk while guiding the conversation.
 - keep any respondent busy for more than half an hour; especially in times of crisis, people have their own priorities.
 - limit yourself to one respondent's information with regard to any topic: triangulate by asking other persons.