Rapid secondary data review

The detail and amount of secondary data should be balanced with the urgency of the situation and the immediate needs of the population. This is document is to guide the review and remains indicative only.

Emergency and location:		Date of completion:	

1. Pre-emergency

- Demographics
  - Disaggregated population figures (where possible, include information on migrant or refugee populations)
  - Languages spoken
  - Religions
  - Ethnic groups
- Health care system
  - Level of functioning of health services prior to the disaster (in order to compare to post-disaster levels)
  - Financing of health care
- Health situation
  - Host country health data specific to emergency zone and from the affected population originated (if displaced / refugees)
  - Mortality and morbidity rates
  - Major morbidities contributing to burden of disease
  - Major endemic and epidemic disease patterns
  - Nutritional status and food security
  - Water and sanitation statistics
  - Basic epidemiology of mental illness; common beliefs about mental illness; availability of mental health services
  - If available, research any reviews/studies on structural issues around access to health care for different populations

2. Emergency

- **Type of emergency:** armed conflict, population movement, natural disaster, epidemic, etc.
- **General contributors to the emergency:** control over natural resources; pre-existing epidemics or endemic diseases; climatic influences; ethnicity and religion; political situation in country; socio-economic contributors, etc.
- **Known impact of emergency on the population:** including information on location, groups and how they may have been particularly impacted, humanitarian access, and basic health needs

3. Response capacity

- **Local authorities response capacity -** What is the local, regional and national capacity to respond to a crisis? Which actors / groups are present and in what sector are they active; including governmental bodies, local NGOs / grassroots organisations, private business, etc? What are the emergency or contingency preparedness plans (including pandemic and epidemic preparedness, if relevant)? Have the authorities made an official request for assistance?
- **International organizations in country -** Which *international agencies* (UN agencies, ICRC, INGOs) are present in the country / region, which are responding or planning to respond to the emergency, with which capacity (e.g. field hospitals) and within what approximate timeframe? What is the *co-ordination mechanism*: overall authority, distribution of tasks and responsibilities.
- **RCRC National Society (in country) capacity –** Follow template "First 72 hours: National Society response capacity self-assessment form (A)" on IFRC Guidelines for assessments in emergency (page 116).[1]

Useful sources of information:
- ➢ Relief web
- ➢ ACAPS
- ➢ Previous IFRC or National Society emergency appeals /plans of action (IFRC Go)
- ➢ Websites of national institutions (ministries, research institutes, universities, etc.)
- ➢ Large survey (demographic health surveys, multiple indicator cluster surveys, population census, etc.)
- ➢ Websites of international institutions (i.e. World Bank; Gates Foundation; Global Fund; GAVI Alliance) or international Non-Governmental organizations (e.g. Amnesty International, MSF, International Rescue Committee, etc.)
- ➢ WHO country epidemiological profile
- ➢ UN (UNICEF, UNHCR) global data sets or country portals

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[1] IFRC and ICRC. 2008. *Guidelines for assessments in emergency*.
https://www.ifrc.org/Global/Publications/disasters/guidelines/guidelines-for-emergency-en.pdf