

INDIA – RAPID Needs Assessment Format
Phase 1 – Initial Days
 (1-25 days in the immediate aftermath of a disaster)
Village Level Assessment Format
 An India Humanitarian Collective Action

To be Used by the
Humanitarian Agency/ NGO
 To be used at the
Village/ Hamlet Level

A. SPECIFIC LOCATION OF AFFECTED POPULATION

| | | | | | | | |
|--|--|--|---|--|-------------------------|-----------------------------------|----|
| 1. Nature of disaster | 2. State | 3. District | 4. Block | 5. GP | 6. Village/ Hamlet/Ward | 7. Total number of HH in village? | |
| 7. GPS | | North | | East | | | |
| 8. Total number of Hamlets/ Area? | | | 9. Number of affected Hamlets/ Area? | | | | |
| 10. Estimated HH affected? | | | | | | | |
| 11. Approximate no. of people dead? | 12. Approximate no. of people missing? | 13. Approximate no. of people injured? | 14. Approximate no. of people displaced? | 15. Location of displaced people | | | |
| | | | | <input type="checkbox"/> Public building <input type="checkbox"/> Formal camps <input type="checkbox"/> Other..... | | | |
| 16. Please provide the disaggregated data in numbers for the affected population (if possible- based on Secondary data etc) ensuring disaggregated data on gender, age caste which you need for policy advocacy etc) | | | | | | | |
| Children upto 14 years | Women | Men | P/Cwd ¹ | Women Pregnant and nursing (0-6 months) | Minorities | SC | ST |
| | | | | | | | |
| 17. How high is the water logging (current situation) | | | <input type="checkbox"/> 1-3 ft <input type="checkbox"/> above 3 ft <input type="checkbox"/> No water logging | | | | |
| 18. Accessibility to village | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |

Comments/ Suggestions/ Additional Information:

B. WASH

| | | | | | | | |
|--|---|---|---|---|--|--|--|
| 19. Approximate number of HH in the Village without access to safe drinking water due to disaster? | | | | | | | |
| 20. Access to water for all people including disabilities/ST/SC/Minorities (Post disaster)? | PWD | SC | ST | Minorities | | | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. unavailable | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. unavailable | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. unavailable | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. unavailable | | | |
| 21. Is the water available at the source enough for short-term and longer-term needs for all groups in the population? | <input type="checkbox"/> Sufficient for Short term (for 1 weeks) <input type="checkbox"/> Long term sufficiency (beyond 3 weeks) | | | <input type="checkbox"/> Partly (for 2 weeks) <input type="checkbox"/> Inf. unavailable | | | |
| 22. Do people have enough water containers for storage? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | |
| 23. What are the excreta disposal practices? | Pre disaster | | | Post disaster | | | |
| | <input type="checkbox"/> Open Areas <input type="checkbox"/> Household/ Community Latrines | | | <input type="checkbox"/> Open Areas <input type="checkbox"/> Household/ Community Latrines | | | |
| 24. Is the water source contaminated or at risk of contamination | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

¹ People / Children with disabilities

| | |
|---|--|
| 25. What was the practice on menstrual hygiene pre disaster? and do they still have access to them (ask women and girls/ANM/AWW/ASHA worker)? | <input type="checkbox"/> Cloth <input type="checkbox"/> Sanitary Napkins <input type="checkbox"/> Any other <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Any Other |
|---|--|

Pls give your suggestion/ recommendation or additional information

C. SHELTER

| | | | |
|--|-------|-----------|-----------|
| 26. Total number of Shelter Damage (approx.) | Fully | Partially | No Damage |
| | | | |

| | |
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| 27. Are the relief camps accessible to Person with Disability, Transgenders, SC and STs? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. unavailable |
|--|--|

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| 28. Number of HH in need of immediate shelter? | |
|--|--|

| | |
|--|--|
| 29. What is the immediate exposure elements weather wise that concern you? | <input type="checkbox"/> Rains/Snow <input type="checkbox"/> Cold <input type="checkbox"/> Mosquitos <input type="checkbox"/> Darkness <input type="checkbox"/> Heat <input type="checkbox"/> Snakebites <input type="checkbox"/> Wild Animals <input type="checkbox"/> Any other (specify) |
|--|--|

| | |
|--|---|
| 30. Availability of Non Food Items with families | <input type="checkbox"/> Kitchen Utensils <input type="checkbox"/> hygiene materials <input type="checkbox"/> Sanitary Napkin <input type="checkbox"/> Cloths <input type="checkbox"/> ORS/Zinc Tablets/Basic Medicines <input type="checkbox"/> Stove <input type="checkbox"/> Fuel, <input type="checkbox"/> Blankets <input type="checkbox"/> Bedsheets <input type="checkbox"/> Torch Lights and lighting solutions <input type="checkbox"/> Any other(specify) |
|--|---|

Comments/ Suggestions/ Additional Information:

D. FOOD, NUTRITION AND LIVELIHOODS

| | |
|--|---|
| 31. What is the food availability at HHs in the affected area? | <input type="checkbox"/> less than a week <input type="checkbox"/> 1-3 weeks <input type="checkbox"/> 1 month <input type="checkbox"/> more than a month |
|--|---|

| | | | |
|--|--|--|--|
| 32. Are there significant changes in the total amount of food that people are eating since the disaster, on average? | Female | Male | Children |
| | <input type="checkbox"/> Amount decreased <input type="checkbox"/> Amount same <input type="checkbox"/> Inf. unavailable | <input type="checkbox"/> Amount decreased <input type="checkbox"/> Amount same <input type="checkbox"/> Inf. unavailable | <input type="checkbox"/> Amount decreased <input type="checkbox"/> Amount same <input type="checkbox"/> Inf. unavailable |

| | |
|---|---|
| 33. What are the govt. programs on food and nutrition available to the communities in post disaster scenario? | <input type="checkbox"/> AWC <input type="checkbox"/> PDS <input type="checkbox"/> MDM <input type="checkbox"/> Community Kitchen <input type="checkbox"/> Any other |
|---|---|

| | |
|---|---|
| 34. Are markets in the affected area functioning? | <input type="checkbox"/> Fully <input type="checkbox"/> Partly <input type="checkbox"/> Not functioning <input type="checkbox"/> Inf. Unavailable |
|---|---|

| | |
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| 35. Are markets in the affected area accessible? | <input type="checkbox"/> Fully <input type="checkbox"/> Partly <input type="checkbox"/> Not accessible <input type="checkbox"/> Inf. Unavailable |
|--|--|

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| 36. Approximate number of HH whose livestock are affected | |
|---|--|

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|--|---|
| 37. What is the availability of fodder in the affected area? | <input type="checkbox"/> less than a week <input type="checkbox"/> 1-3 weeks <input type="checkbox"/> 1 month <input type="checkbox"/> more than a month |
|--|---|

| | | |
|---|------------|----------|
| 38. Which livelihoods are likely to be most affected? | For female | Foe male |
| | | |

Comments/ Suggestions/ Additional Information:

E. EDUCATION

| | | |
|--|--|--|
| 39. Are children going to school/ educational institutional post disaster? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 40. If No pls specify the reason (tick all that apply) | <input type="checkbox"/> No teachers <input type="checkbox"/> Infrastructure damage <input type="checkbox"/> Study materials damaged <input type="checkbox"/> Schools used as shelter <input type="checkbox"/> Any other | <input type="checkbox"/> No students <input type="checkbox"/> No Midday Meal <input type="checkbox"/> School not accessible <input type="checkbox"/> Inf. Unavailable |
| 41. How soon will the schools become functional? | <input type="checkbox"/> within 15 days <input type="checkbox"/> within 30 days <input type="checkbox"/> Beyond 30 days | |

Comments/ Suggestions/ Additional Information:

F. HEALTH

| | | | |
|--|---|--|--|
| 42. Medical/ health facilities/ service providers in the Village are functional? | | Pre disaster | Post disaster |
| | Health Sub-Centers (HSC) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Primary Health Centers (PHC) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Health camps | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Doctors/Medical In-charge | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | VHND | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | ANM | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | ASHA | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Anganwadi Centres | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Informal providers | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 43. What are the main reasons for health facilities not functioning post disaster? (If other, please specify) | <input type="checkbox"/> Shortage of staffs <input type="checkbox"/> Lack of Supplies/medicine <input type="checkbox"/> Medical equipment/ instruments <input type="checkbox"/> Others (please specify)..... | | |
| 44. Are there any health concerns as a result of the disaster? (If other, please specify) | <input type="checkbox"/> People injured <input type="checkbox"/> Communicable disease <input type="checkbox"/> Psycho social <input type="checkbox"/> Damage to building <input type="checkbox"/> Fully functional <input type="checkbox"/> Location if not accessible <input type="checkbox"/> Dead bodies (people/animals) <input type="checkbox"/> Ante-natal Care <input type="checkbox"/> Measles <input type="checkbox"/> Malaria <input type="checkbox"/> Diarrhoea <input type="checkbox"/> Other..... | | |
| 45. Do people have access to the following health services post disaster? | <input type="checkbox"/> Outpatient consultations <input type="checkbox"/> Routine Immunization <input type="checkbox"/> Emergency essential obstetric care/ Institutional delivery <input type="checkbox"/> Antenatal /post natal check ups <input type="checkbox"/> Basic essential obstetric care <input type="checkbox"/> Don't know | | |
| 46. No of pregnant women in 7- 8 th month of pregnancy? | | | |

Comments/ Suggestions/ Additional Information:

G. PROTECTION

47. Are there major protection concerns (post disaster) (select all that apply)- Note: (Inf. NA)

| | |
|---|---|
| <ul style="list-style-type: none"> What are the risks? | <input type="checkbox"/> Sexual abuse <input type="checkbox"/> Harmful traditional practices <input type="checkbox"/> Child abuse and exploitation <input type="checkbox"/> Discrimination (Caste based, related to HIV, gender etc.) <input type="checkbox"/> Inf. NA <input type="checkbox"/> domestic violence <input type="checkbox"/> Trafficking of women and children |
| <ul style="list-style-type: none"> Breakdown of law and order (looting crime, theft) | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Presence of armed non-state actors | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Violence(s) between members of displaced community and/or host community | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Threat from host community | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Forced return or relocation to your own location | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Loss of legal documents(s)² | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Do you have threat from other community group in your previous location, in case you return back? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <ul style="list-style-type: none"> Are there functional institutions/children homes in this area that provide care for orphans or separated children? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <ul style="list-style-type: none"> Are there any children in this community who are involved in types of work that are harsh and dangerous for them | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> If yes what kind of services do they provide | <input type="checkbox"/> Day care <input type="checkbox"/> Residential care <input type="checkbox"/> Recreational activities <input type="checkbox"/> Child labour <input type="checkbox"/> Other (specify |
| <ul style="list-style-type: none"> Where do you think the risks of abuse are high/highest for children | <input type="checkbox"/> At home <input type="checkbox"/> in camp <input type="checkbox"/> in school <input type="checkbox"/> on the way to market <input type="checkbox"/> on the way to school |
| <ul style="list-style-type: none"> Presence/ increase of risk of human trafficking | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Split families (family members separated from others) | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Unaccompanied children (registration, family tracing?) | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Are the persons with special needs more at risk. (i.e. disabilities, elderly, single-headed household, single women) | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Discrimination against ethnicity (indigenous peoples) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <ul style="list-style-type: none"> Discrimination against caste | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <ul style="list-style-type: none"> Arrangements for the disposal of remains of the deceased/ carcasses | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Are Safe and private facilities available for women and girls | <input type="checkbox"/> Latrines <input type="checkbox"/> Bathing <input type="checkbox"/> Living spaces <input type="checkbox"/> Inf. NA |
| <ul style="list-style-type: none"> Whether people have freedom of movement or are forced to stay in danger zones | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inf. NA |

Comments/ Suggestions/ Additional Information:

2 Ration card, voter id, land documents, insurance, immunization cards, ANC cards, health cards (birth registration, marriage, etc.)

