Complex Emergency Database (CE-DAT)

Fourth Technical Advisory Group Meeting

Proceedings

January 24 & 25, 2008

Brussels, Belgium

Held at:

Fondation Universitaire
14 Rue d'Egmont
B-1000 Brussels
Belgium

Hosted by:
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CE-DAT

Introduction to the Complex Emergency Database (CE-DAT)

The Complex Emergency Database (CE-DAT) project is an international initiative to monitor and evaluate the health status of populations affected by complex emergencies.

Objectives

- Provide key mortality, nutritional and health indicators for rational humanitarian aid decision-making
- Promote the effectiveness of international policies on conflict prevention and response through evidence-based trend analyses and impact briefings
- Strengthen the capacity of national and international field operators in data collection and analysis.
- Improve standardization and help establish norms to enable the comparability of complex emergency data across time and space.

Indicators compiled:

- Crude Mortality, Under-5 Mortality, Infant Mortality, Maternal Mortality Rates
- Global, Moderate & Severe Acute Malnutrition
- Global, Moderate & Severe Chronic Malnutrition
- Odoema, MUAC, BMI
- Vaccination coverage for tuberculosis, measles, diphtheria, tetanus, and polio

Main Data Sources:

Non Governmental Organizations: Action Against Hunger, Action Contre la Faim, Save the Children, Médecins Sans Frontières, Goal, International Rescue Committee, Concern, Care, Tearfund, World Vision, International Medical Corps

International Organizations: United Nations Children's Fund, United Nations High Commissioner for Refugees, Food Security Analysis Unit Somalia, The World Food Programme, World Health Organization

Methods:

Specifying the populations - the status of the population, whether IDP, resident, refugee or returnee, is included for each indicator

Identifying the location - The data is broken down to the smallest administrative level boundary and is geo-referenced

Providing methodologies - information is provided on how the data was collected, including sampling methods and survey designs. The CE-DAT Survey Completeness Checklist is used to evaluate data-gaps in survey reports

Stating the sources - all data are references as to their original sources.

The Database is publicly-accessible through the CE-DAT website (www.cedat.be)

Summary of Recommended Actions

Addressing gaps in data reporting

- CRED will identify data gaps and identify geographical areas and time-periods where they occur

- Bilateral discussions with UNHCR will be held to discuss the gap in refugee data and to identify solutions

Consolidating and expanding the CE-DAT Network

- CRED will continue to develop existing collaborations with field agencies that carry out surveys and identify new partners to the CE-DAT Network

- Discussions on signing Memorandums of Understandings or less formal agreements will be initiated with Merlin, Action Contre la Faim, and Médecins Sans Frontières Belgium

- CRED will work with State/PRM and USAID to encourage their field partners to share relevant data with CE-DAT as stipulated in their contractual obligations

- The CE-DAT Team will work with DfID to encourage their field partners to collect and share data

Issues suggested for discussion at next Expert Group Meeting

- Finalizing the CE-DAT Survey Completeness Checklist and identifying rating systems for surveys

- Developing the modalities of using surveillance and registration data in CE-DAT

- Including contextual information in CE-DAT (scope, format, etc.)

- Identifying methodologies to survey refugees in urban settings

Need- and demand-based outputs identified:

- Discussions will be opened on the CE-DAT Network Zone's forum to identify need-based and demand-based outputs from CE-DAT website users, as well as identify technical support needs of field agencies.

- The CE-DAT team will expand its analytical capacity and products and continue to provide the international humanitarian community with country briefs, situational reports, trend-analyses, meta-analyses, etc.

- CRED will analyze the universe of conflict theatres from relevant sources, including ICRC, Uppsala and SIPRI, and identify those conflict theatres for which CE-DAT has data. Collaborations with these organizations will be expanded to identify common definitions, coverage, etc..

- CRED will use the CE-DAT Survey Completeness Checklist to perform analyses of recent surveys sent by NGOs and report back to them, in a confidential manner, on the results of these analyses.

- CRED will provide technical support to field agencies to further build their survey implementation and analysis capacities.

MEETING PROCEEDINGS

Thursday January 24th, 2008

Welcoming Remarks and Introduction

Debarati Guha-Sapir, Director of the Centre for Research on the Epidemiology of Disasters (CRED), welcomed the participants to the 4th Technical Advisory Group (TAG) meeting of the Complex Emergency Database (CE-DAT) and gave an overview of the meeting's agenda[1] and planned discussions.

Each participant[2] then quickly introduced himself, the organization he represents, and his line of work.

Accomplishments And Challenges of CE-DAT So Far

Ms. Chiara Altare of CRED presented an overview of the achievements so far of CE-DAT and indentified the challenges encountered.

The following objectives of the 3rd year of the CE-DAT Database project were presented:

- An increase in the quantity of data available to the international humanitarian community
- An improvement in the quality and timeliness of data in CE-DAT
- Development of decision support products and tools and the strengthening of capacities

Database expansion and management

Ms. Altare then developed each of these objectives and illustrated CE-DAT's achievements over the last year.

First, the CE-DAT database presently contains 12,583 indicators, of which there are 2,191 for mortality, 9,065 for nutrition, and 1,327 for vaccination coverage.

Secondly, Memoranda of Understanding have been signed with the following 5 Non Governmental Organizations (NGOs):

- International Rescue Committee (IRC)
- International Medical Corps (IMC)
- Concern
- Goal
- Tearfund

Thirdly, the CE-DAT Expert Group was established. The Expert Group was identified as necessary at the Second TAG meeting. It was foreseen as an informal but committed involvement of experts to advise the CE-DAT team on technical issues it encounters in its daily activities.

A first meeting of the group was held on May 2nd and 3rd at the Fondation Universitaire in Brussels, Belgium. The following persons were invited, in their personal capacity, to be members of the CE-DAT Expert Group:

[1] Please see Annex 1 for the agenda of the 4th TAG Meeting
[2] Please see Annex 2 for the list of participants to the 4th TAG Meeting

- Dr. Alessandro Colombo
  Medical officer
  Department of health Action in Crises
  World health Organization (WHO)

- Dr. Richard Garfield
  Manager, Health and Nutrition Tracking Service
  Department of health Action in Crises
  World health Organization (WHO)

- Dr. Jon Pedersen
  Managing Director
  Fafo Institute for Applied International Studies

- Dr. Paul Spiegel
  Chief, Public Health and HIV Section
  Division of Operational Services
  Office of the United Nations High Commissioner for refugees (UNHCR)

- Dr. Michel Van Herp
  Epidemiologist
  Médecins Sans Frontières – Belgium (MSF-B)

The first task of the Expert Group was to develop a definition of a “Complex Emergency”. The following definition was agreed upon by at the Expert Group Meeting:

CE-DAT includes all crises characterized by extreme vulnerability which display the following features:

- *The government is unwilling or incapable to effectively respond, resulting in a need for external assistance*
- *Political oppression or armed conflict*
- *Displacement*
- *Increased mortality*

Ms. Altare then presented the challenges that were identified by the CE-DAT team to compile CE-DAT data. The first challenge is the lack of systematic dissemination process of field surveys. The sharing of nutrition and mortality survey reports and data is not carried out in a systematic manner. This leads to a lack of recent data on known crises as well as a lack of data for analysis on unstable situations. The CRED Team presently needs to actively search for new surveys and data flow from the field to CE-DAT needs further streamlining.

The second challenge that was identified is the lack of recent data on Refugees. Potential reasons for this lack are changes in reporting systems, bottlenecks in the validation process, and a failure to identify all the partners working in refugee settings.

Finally, the increasing availability of morbidity data was identified as a challenge to CE-DAT. Surveys reporting on causes of death and on the occurrence of infectious diseases provide CE-DAT with a large quantity of potential useful data. However, the inclusion of this data in the database creates new challenges to the CE-DAT team that will need to be addressed independently.

Improving data quality

Ms. Altare subsequently presented recent work of the CE-DAT team on issues of data quality and timeliness. In the May 2007 Expert Group Meeting, matters related to evaluating the completeness and quality of surveys entered in CE-DAT were addressed. A completeness checklist was drawn-up (Click here to access the Checklist online), with the following details having to be included in a survey for it to be entered into the database:

- Location
- Period and recall period
- Sample size
- Sample design
- Final stage sampling design
- Appropriate indicators
- Enumerator and denominator
- Selection within the household
- Non response
- Comparison (time, space and groups)

Upon receiving a survey, the above completeness criteria are checked by the CE-DAT team. If information is missing, the agency that provided the data is contacted so they can provide the information that is lacking.

Regarding the timeliness component of CE-DAT data, Ms. Altare presented the objective that surveys must be entered into CE-DAT within 48 hour of receipt and she confirmed that this objective is currently being met.

Challenges related to data quality and timeliness were then identified. Firstly, certain survey data points may have extreme values and it is often difficult to identify if these values are high because of survey errors or if they indicate a serious condition of the conflict-affected populations. Further building the technical capacities of field agencies, as well as those of the CE-DAT team, was proposed as one way of addressing this issue. Further work on the internal validation mechanisms of the database was also identified as necessary.

Secondly, the time-lag between data collection and its dissemination was identified as a challenge. Though some improvements have taken place, with CE-DAT field partners quickly providing their data, further work is necessary to ensure that as many field agencies as possible provide CE-DAT related data as quickly as is feasible.

Outputs

Finally, CRED's work on the third objective, the development of decision support products and tools and the strengthening of capacities, was presented. The following accomplishments were identified:

- Online search engine now available 24/7
- Improvements of the website (ongoing) work with explanatory notes and documents made available
- The following types of CE-DAT Documents were prepared and disseminated:
  - Briefs (DRC, Iraq)
  - Reports (Palestinian Refugees, Rohinga Refugees)
  - Publication (Mortality and Nutrition Surveys by Non Governmental Organizations)
  - Quarterly newsletter (CE-DAT scene)
- Technical support provided by the CE-DAT Team to Medaire and Goal Ireland

Challenges to the objective of developing decision support products and tools and the strengthening of capacities were identified as a need to improve the CE-DAT website and search engine by making it more user-friendly and more comprehensible to a non-technical audience, and by ensuring that the data provides as complete a picture as possible of each crisis.

Furthermore, there is a need for the CE-DAT team to produce outputs that correspond better to the needs of the humanitarian community by making them more demand-oriented. Finally, the technical support that can be provided to CE-DAT partners needs to be better defined in the coverage (sample design, data collection, data analysis, report drafting) and in the modalities (mails, forums, visits, training sessions).

Discussions

Following the presentation by Ms. Chiara Altare, the floor was opened to questions and to discussion.

The following questions or points were brought forward by the participants regarding the definition of a Complex Emergency:

- Do all four criteria have to be met for a country to be entered in the database?
- How many countries are included in CE-DAT and how many of these follow the definition's criteria?
- The criteria can be an important tool for conflict research to compare situations that are similar.
- There is a lack of a time component in the list of criteria and the criteria are not mutually exclusive. Furthermore there is a time dimension to the issues of vulnerability and displacements.
- Do the criteria apply only at the national level or also at the sub-national level?
- Prevention can be a goal and hence there is a need to include in CE-DAT countries that do not yet meet the criteria.
- What do the criteria trigger?
- The work of the Expert Group should not be questioned, but rather how the definition and criteria work for CE-DAT
- Data on countries that do not yet meet the criteria should nevertheless be compiled and put in a "waiting stage" so that it is not yet made public. This is especially important in that it can provide baseline data for countries/regions where the situation subsequently degenerates.

Each of the above questions and points were addressed and answered by the CE-DAT team. It was pointed out that the CE-DAT Databases focuses on conflict-affected populations and the fact that 46 countries are included in the database does not entail that each one meets any of the four criteria. For example, this can be due to refugees from a conflict-affected country such as Burundi having settled in a neighboring 'peaceful' country such as Tanzania. Also, the definition of a Complex Emergency is ongoing work, and it and its application will be discussed again at the next Expert Group meeting.

Another point that was brought forward is the importance of clearly defining all the technical terms that are used in CE-DAT. For reasons of transparency, definitions of all technical terms and inclusion and exclusion criteria need to be made available to the users of the database. This was one of the reasons for developing the CE-DAT definition of a Complex Emergency. Also, as CRED has learnt from having run for over 20 years the EM-DAT International Disaster Database, the more standard the procedures of data collection and entry, the better the database will run and the more institutional and structural clarity it will have.

Regarding the inclusion into CE-DAT of data from regions or countries that do not meet the criteria, it was agreed that keeping the data, even if it is not made public, is beneficial and is currently being applied. Keeping a tab on regions and countries where the situation might degenerate is of utmost importance and the dissemination of "watching briefs" should be envisaged and discussed. Similarly, data on post-conflict countries or regions must also be compiled and included in CE-DAT.

As this in ongoing work, the points brought forth above and the issues raised during this TAG meeting will continue to be discussed with the Expert Group and with the members of the CE-DAT Network.

CE-DAT, The Way Forward

The CE-DAT Team

Following the presentation by Ms. Chiara Altare, Dr. Olivier Degomme of CRED made a short presentation of the three CE-DAT components and the recent additions to the CE-DAT Team. The staff at CRED (now known as huskies) responsible for each of the three components are:

<u>David Hargitt</u>

- Data collection, contacts with partners, organization of meetings

<u>Ruwan Ratnayake</u>

- Data analysis, publications (briefs, in-depth reports, newsletters, etc.)

<u>Antonio Zugaldia</u>

- Website, IT

The other members of the CE-DAT team are Jan Grauman, an intern who provides support to the team, and Ms. Chiara Altare who is an at-large member of the team. Last but not least, Dr. Olivier Degomme manages the team and supervises the entire CE-DAT Project.

CE-DAT website and data interface

Antonio Zugaldia, the CE-DAT Information Technology officer, gave a presentation on the CE-DAT objectives that apply to him, of the ongoing work on the CE-DAT website and the visualization tools, and on their future directions.

His CE-DAT related objectives are the following:

- Database is available online 24/7
- User interface of the database search engine redesigned for ease of use
- Improvements of the readability of CE-DAT
    - Ensure user-friendliness
    - Create dynamic informative boxes
    - Create maps showing location and a brief summary of the surveys

Mr. Zugaldia then presented the new visualization tools that have been implemented on the CE-DAT website. The first component was moving the website from a static system to a dynamic one through the use of the following IT tool and characteristics:

- Drupal Content Management System (CMS)
    - FLOSS (Free Libre Open Source Software)
    - Content/design independence
    - Supports new-generation tools

The new features of the CE-DAT website, based on the CMS, include the following,

- A CE-DAT RSS option to inform members of the CE-DAT network of new surveys or outputs
- A Network Zone allowing for forums, uploads, discussions
- An external RSS syndicated content provider
- User interactive tools for polls and comments
- An embedded data-search system

- The integration of new visualization tools

Mr. Zugaldia then provided the URL of the new website (Should the reader of these proceedings wish to receive the URL, you can reach us at contact@cedat.be)

Mr. Zugaldia proceeded to show the following "under the hood" components of the website and visualization tools:

- Database synchronization system (with Sun MySQL)
- Standards compliant approach (HTML, KML, RSS) to enable maximum inter-operability
- Live statistics on the usage of the database
- Continued improvements to database quality through internal consistency checks and external reviews

The individual tools that were developed were then presented to the participants.

The Complex Emergency Monitor

This visualization tool (*see figure 1*) provides a new trademark feature of the CE-DAT Scene quarterly newsletter but is also available on the CE-DAT website. It is set up as a diagnostic tool using mortality data to illustrate the nature and severity of complex emergencies being reported in the field. The Monitor is available for every country-level entry in the CE-DAT database

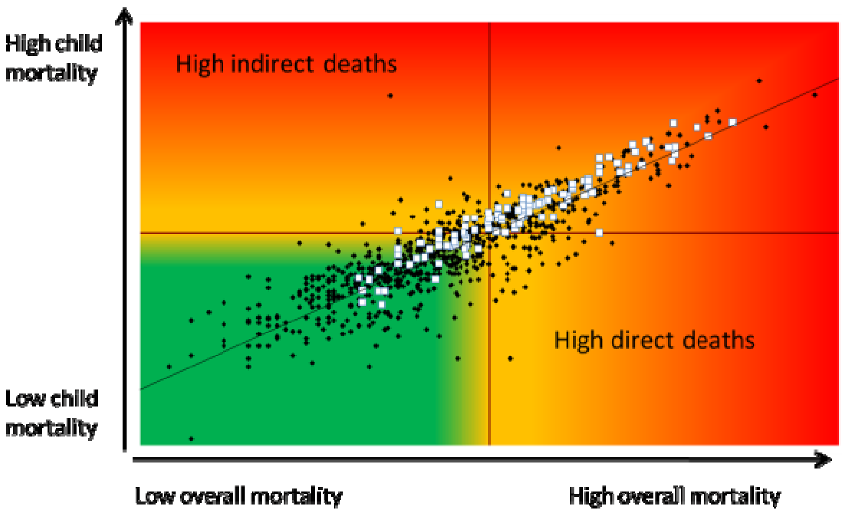

Figure 1

The horizontal and vertical lines represent emergency thresholds for under-five mortality and crude mortality, respectively. Crises increase in severity northeast along the diagonal axis. Crises that fall above the diagonal axis represent situations where the ratio of under-five mortality to crude mortality exceeds the level that is commonly expected (2 to 1) in a complex emergency. This suggests that in these situations either children or adults disproportionately bear the mortality effects of the crisis. The white points in figure 1 refer to the situation in the Democratic Republic of Congo since 2000. The black points represent data from all other countries within the CE-DAT database from the same time period.

CE-DAT Maps

Mr. Zugaldia then presented the new map tool (*see figure 2*) of the CE-DAT website, through which visualization of the surveys and indicators compiled in the database is available. The platform used for this visualization is that of Google Earth.

To arrive at such a visualization tool, every location where a survey was conducted was geo-referenced. Color coding for every survey is available representing the severity of the health status of the conflict-impacted population using the Sphere thresholds for crude and under-5 mortality rates indicators and the accepted thresholds for global and acute malnutrition.

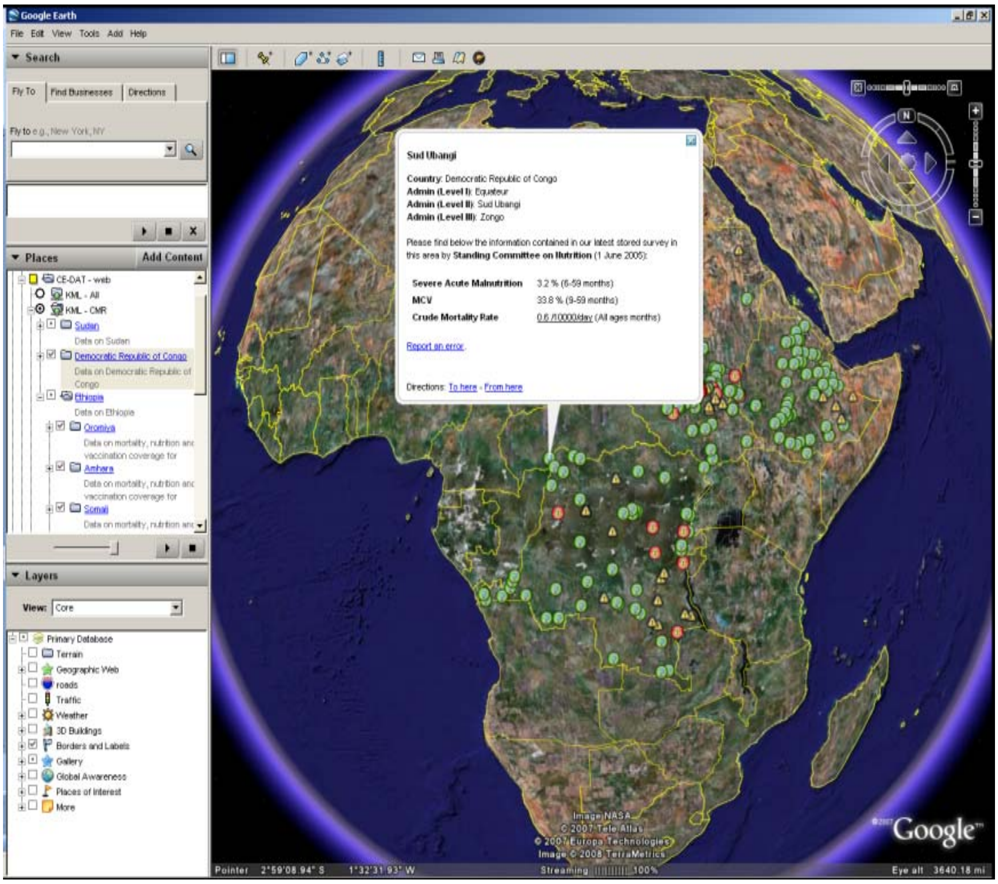

Figure 2

By clicking on a specific point on the map, a text box opens providing information on the latest survey conducted in that region. The author of the survey and the values of the mortality, malnutrition and vaccination coverage indicators are provided. Furthermore, a link is provided to the user to report an error and it is planned that other links will be provided for users to add data or comments.

The geo-referencing was done by identifying the smallest administrative level where the survey was conducted and, primarily through the use of shape files, identifying the geo-centric point of that administrative level.

The following comments or suggestions by participants were presented at this point in the presentation:

- Geo-referenced points could have different icons based on administrative levels
- Icon sizes could change according to the size of the population being surveyed
- Changes in the color, shape and size of icons can be used to provide more visual information
- Customized reports should be made available through the selection by the user of administrative levels, population types (refugees, IDPs, residents, returnees), indicator types and values, and time periods
- Further develop the text boxes linked to each point so that more information is available on each survey.

Timeline component

Mr. Zugaldia then represented a visualization tool that presents a timeline of surveys conducted in any one country (*figure 3*).

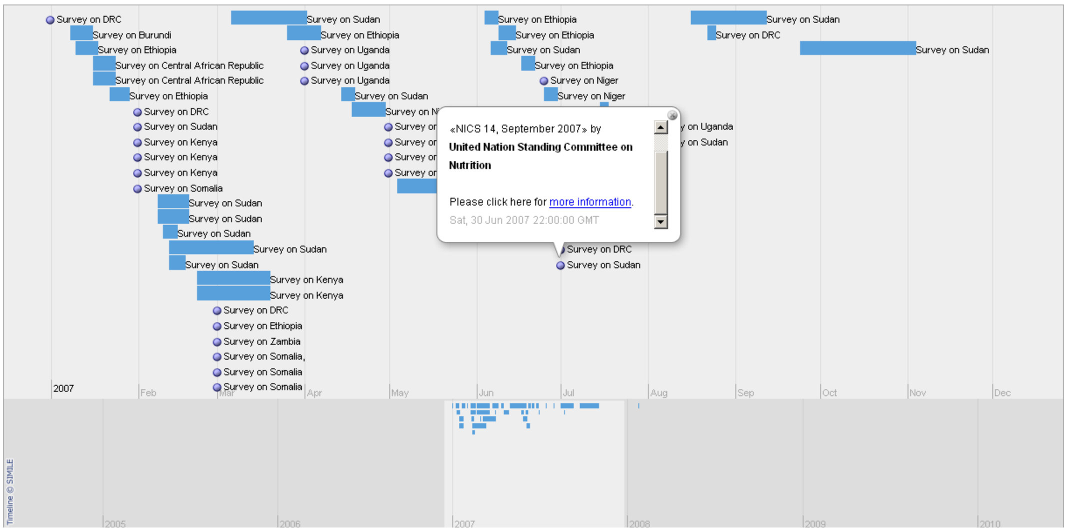

Figure 3

The lower component of the timeline visualization tool allows the user to quickly change the timeline and the upper component provides temporal information on the surveys conducted. Clicking on any individual survey opens a text box that provides additional information.

This timeline provides the length of a recall period in the case of mortality surveys and a point when cross-sectional surveys assessing malnutrition are conducted.

Future directions

The following elements were presented as the work that will be undertaken in the near future to further improve the CE-DAT website and database query functions:

- Integration and evolution of the tools
- Database engine migration, with greater internal quality evaluation checks
- Improvements in technical data collection
- Database connections – Linking CE-DAT, as a first step, to the EM-DAT International Disaster Database. This will include indentifying the points of linkage and creating a multi-database interface
- Study the compatibility of existing humanitarian databases by identifying the relevant databases and opening discussions with potential partners

Increasing the quantity of CE-DAT data

David Hargitt of CRED made a presentation on the future directions of the CE-DAT team to further increase the quantity of data that is available in the CE-DAT database. He identified three components to this work:

- Consolidating the CE-DAT Network
- Adding new partners to the CE-DAT Network
- Compiling additional data

Consolidating the CE-DAT Network

Mr. Hargitt first identified the Non-Governmental Organizations (NGOs) that are the most prolific survey providers to the CE-DAT Database. These are Action Against Hunger (AAH), Action Contre la Faim (ACF), Save the Children UK (SC-UK), Goal, the International Rescue Committee (IRC), Concern, Médecins Sans Frontières Belgium (MSF-B), Care, Médecins Sans Frontières Netherlands (MSF-H), Tearfund, Médecins Sans Frontières Switzerland (MSF-CH), World Vision, Save the Children US (SC-US), and International Medical Corps (IMC).

The first action to take to consolidate the CE-DAT Network will consist of being in regular contact with all of the organizations listed above to ensure that new surveys conducted by them are forwarded to the CE-DAT team in a timely fashion.

CRED had signed Memoranda of Understanding with five of the above NGOs. Contacts with these organizations will be regular, not only for the exchange of surveys, but also for the provision of technical assistance by CRED to these organizations. New MoUs will be signed within the year. Less formalized collaborations will also be developed, a wish that was expressed by some larger NGOs.

Furthermore, an internal list of contacts at CRED will be created identifying those persons responsible within an organization for surveys, nutrition, epidemiology or geographical responsibilities. A list of contacts at country offices will also be included, though CRED will contact headquarters before contacting local offices.

Another component of the CE-DAT Network are the international and governmental organizations that regularly provide data to CE-DAT. Relevant persons at organizations such as the United Nations Children's Fund (UNICEF), the Office of the United Nations High Commissioner for refugees (UNHCR), the Food Security Analysis Unit (FSAU), the World Food Programme (WFP), The European Commission's Humanitarian Aid Office (ECHO) and the World Health Organization (WHO) will be contacted regularly and encouraged to participate in the discussions in the CE-DAT website's Network Zone and to forward any surveys or relevant data to the CE-DAT team.

The CE-DAT Network will also include the Scientific Community and the Political Community. Academic centers that have been involved in CE-DAT, such as the Fafo Institute for Applied International Studies, the Karolinska Institute, the Harvard Humanitarian Initiative, the John Hopkins School of Public Health, and the International Peace Research Institute, will also be encouraged to participate in methodological discussions and provide feedback on CE-DAT related briefs, publications and other outputs.

Regular contacts will be made with relevant officers in national governments to highlight the benefits of using CE-DAT for needs-based resource allocation, evidence-based humanitarian decision-making, and health status evaluations. Furthermore the importance of building the technical capacities of field agencies and of developing of standards for field methodologies (such as SMART), data and data-exchange will be emphasized.

Finally, David Hargitt brought up the issue of the creation of an online form on the CE-DAT website through which field agencies could enter data directly into the database.

Adding new partners to the CE-DAT Network

CRED will actively identify new potential partners to the CE-DAT Network by attending NGO forums, international conferences, workshops and meetings on humanitarian issues and by encouraging potential partners in using the CE-DAT database and the CE-DAT Network zone to discuss technical issues.

A second aspect will be to identify those potential partners that have contractual obligations to submit mortality and nutrition data to CE-DAT. The US Department of States' Bureau of Population, Refugees and

Migration (State/PRM) and the United States Agency for International Development (USAID) have both integrated clauses in the Agreements that they sign with field agencies requiring them to submit relevant data to the CE-DAT database. An example of such a clause from a USAID Agreement is included below:

> *"If this agreement supports a nutrition or health program, representative data on wasting and crude mortality rates (age and gender-disaggregated) must be included. In addition, when health (including mortality) and nutrition surveys are conducted using funds provided under this Agreement, the Recipient shall submit electronically a copy of the data to the Complex Emergency Database (CE-DAT)..."*

Compiling additional data

The third aspect of increasing the quantity of CE-DAT data is the compilation of additional data into the database. Beyond the normal increase of survey data that will be accomplished through the consolidation of the CE-DAT Network and the identification of new partners, two data types have been identified as requiring discussions with partners during the TAG meeting. These are:

- Increasing the proportion of data on refugee populations
- Including morbidity data in CE-DAT

Increasing the proportion of data on refugee populations

The CE-DAT team experienced some difficulties in late 2006 and in 2007 with identifying sources of new data on refugees. This topic was brought up in discussions with partners prior to the TAG meeting and the four following reasons for this data decrease were proposed.

1. The first aspect was to ensure that there was not a flaw to the entire CE-DAT data collection system. Through an analysis of reports submitted to the Nutrition in Crisis Situations (NICS) of the United Nations Standing Committee on Nutrition, we were reassured that this decrease was not primarily due to a CE-DAT data compilation flaw as the same trend was observed in the NICS reports.

2. The second potential reason that was identified was the development of the new UNHCR registration system, ProGres. It is thought that mortality surveys might have become less necessary as the registration system now compiles such information at a much lower cost. The CE-DAT team believes that this evolution is one of the factors explaining the decrease in mortality surveys reported from refugee settings. This view was also shared by a UNHCR officer from the Field Information and Coordination Support Service Unit. However, the development of ProGres does not explain the decrease of nutrition surveys since nutritional data is not included in it.

3. It is thought that a similar development might be the cause of the decreasing trend of nutritional surveys available. The growing importance of statistics and indicators might have reduced the number of surveys that are carried out by NGOs as they are now required to provide monthly figures to their headquarters or to the funders of their relief programs. As this cannot be done on such a regular basis using surveys, surveillance techniques have been implemented. As a consequence, the available information is no longer a survey-based indicator such as Global Acute Malnutrition, but a surveillance figure such as the number of monthly admission of children to therapeutic feeding center.

4. Finally, through discussions with health officer of two of our main data providers another rationale was identified. Both officers have confirmed to the CE-DAT team that their organizations are less active in refugee settings.

Compiling additional data – Morbidity

At several previous meetings, CE-DAT Network partners identified the following morbidity data-types that they thought would be valued additions to the database:

- Women's health
- Disability
- Mental health
- HIV prevalence
- Infectious disease outbreaks

The addition of data entails identifying relevant indicators to mortality and malnutrition in complex emergencies. These topics will be discussed at the next Expert Group Meeting. However, the CRED Team was interested in getting feedback at the TAG meeting on potential sources of infectious disease outbreaks.

The floor was then open to discussions on the three topics identified for feedback by participants to the TAG meeting in David Hargitt's presentation, namely the inclusion of an online form, the issue of data on refugees, and the inclusion of infectious disease morbidity data in CE-DAT.

Comments provided by participants on the creation of a CE-DAT online form:

- Experience at OCHA showed that the use of a form created problems with data quality. It was found that having import routines to feed data directly into the database worked better. This means that users have to be fully aware of the database's formats to ensure that the right data is entered in the correct way. The use of data quality flags and routine checks for data imports were also identified as necessary.
- It was suggested that an evaluation through focus groups or interviews be carried out amongst regular users of the CE-DAT website to assess improvements of the database.

Comments provided by participants on the issue of morbidity data:

- The question of how the CRED team would add value to what is already out there needs to be addressed.
- Adding such data would increase the team's workload considerably and would consume much of the centre's resources.
- A feasibility study could be performed to identify the sources of data and the quantity of data available.
- Questions on how to report an infectious disease outbreak will need to be addressed, including issues such as its start date and end date, the type of outbreak and the impact. Morbidity data would be good for context and in explaining, for example, some high mortality values. But to enter it in the same way as mortality data is already entered will be something completely different.
- Food security could be usefully bound to CE-DAT data, though it would be complicated. WFP also collects much health information and would be willing to share it.
- Identifying contextual information that is included in the survey reports should be researched, including ways of standardizing this information.
- It was suggested that the main need of users and decision makers is not for more data but for better interpretation of data and more analyses. As such, the CE-DAT Team should focus on a good set of data, work on collecting it well and then devote the rest of the resources to analysis.

Comments provided by participants on the issue of data on refugees:

- Several participants from NGOs confirmed that their organizations are less involved in refugee settings. The IRC, for example, confirmed that less than 10% of their work is taking place in refugee camps. Furthermore, IRC confirmed that surveys were previously used as band-aid solution when there was a lack of data on the health status of conflict-affected populations. As stronger surveillance systems have been put into place by UNHCR, fewer surveys are being carried out by them.

- It was also noted by UNHCR staff that there are fewer refugee camps today and many more urban refugees living amongst resident populations.

A point that was not discussed during the presentation but was brought up by the participants was the usefulness of large surveys covering entire regions that report only one figure over a meta-analysis of various different and more regular surveys with less geographic coverage. Comments by participants on this issue are included below:

- There are different information needs and, as such, both types of surveys are necessary. Sampling frames and needs are very different and surveying at the macro-level can cover areas that are not included in smaller surveys done in camps. Similarly, surveys on specific camps might not be useful to large organizations but only to those NGOs working in that camp.
- The purpose of data-collection is important and there are various needs that have to be addressed. Sometimes information is needed on entire regions, such as mortality trends in the whole of Darfur. Having an overall picture in the three state of Darfur is an entirely different dimension and exercise than just having information in one or more specific camps.
- There is a need to pool resources and to identify mechanisms to keep track of, for example, mortality data from vital registration systems and not have small samples with different methodologies, without being able to compare data.
- The issue of evaluating and identifying missing information in surveys is crucial to these discussions.

Increasing the quality of data and its availability

Discussion Topic 1: What are the barriers for field agencies in producing high quality survey data that is of increased use to decision-makers?

Mr. Ruwan Ratnayake of CRED presented ongoing research on the issues of data quality that was shared with participants in the Background document (Click here to access this document online).

While the literature on data quality for nutrition and retrospective mortality surveys in complex emergencies is not extensive, several key trends do emerge.

Beyond problems related to security and access to conflict-affected populations, which fall outside the scope of CRED's work, the primary issue is that common errors in survey methodology persist and there are difficulties in producing comparable data. These include common errors in survey design, collection, interpretation and reporting, as well as mixed consensus on thresholds, baselines, standardization, and mortality assessment methods. Furthermore, there is a lack of technical expertise and weak organization of data resources.

To address these shortcomings, four themes were elaborated upon in the Background Document and in Mr. Ratnayake's presentation. These were also identified as topics for group discussions.

1. Human and organizational resources for health information are inadequate
- Technical staff are expensive. Investments into training can be difficult for NGOs
- Donors should increase budgets for training NGO personnel for data collection
- Bridging technical expertise through
    - Technical support units within NGOs
    - Independent technical groups to conduct surveys
    - External collaborations with technical centers such as CRED and Epicentre
- Organization issues: central bodies needed to coordinate surveys in crisis situations

2. Data needs to be comparable and representative to be useable by decision-makers
- What are the features of an essential dataset for good decision-making?

- Need for refinement and uptake of:
    - International guidelines/best practices (SMART, Sphere)
    - Valuable methodological findings such as use of design effects & sampling approaches
    - Common scales for thresholds and baselines
    - Standardization of mortality survey methodologies to the level of malnutrition survey methodology
    - Different options for standardization of methods across agencies

3. Demographic information in emergencies is unreliable or unavailable

- Challenges
    - Refugees mixing with resident populations
    - Refugees dispersing geographically can be difficult to track
    - IDPs cover large population areas
    - Little knowledge on age structures of populations at risk
- What mechanisms can be investigated to gather demographic data in emergencies?
- What further information on populations at risk is needed for decision-makers? How can field agencies respond to these needs?

4. Challenges to presenting and disseminating findings

- Quality of data can be obscured in reports through the exclusion of key information, irregular formats and poor presentations
- Alongside common errors in survey methodologies, reports often lack a structured methodology and a clear level of description that can subsequently be used to evaluate surveys.
- Lack of timeliness of data flow from field to the humanitarian community
- It can challenging for NGOs and academic centers to present data that can influence decision-making

This last theme, the challenges to presenting and reporting findings, was further elaborated upon by Mr. Ruwan Ratnayake as it was addressed at the Expert Group meeting in May 2007 and a completeness checklist was drawn-up to evaluate the surveys that are received by the CE-DAT Team.

For calibration purposes and as a preliminary test, a shortened version of the checklist was used to assess the last 20 surveys entered into CE-DAT. The results showed the following:

- The 20 surveys were missing 0 to 9 of the 10 key elements assessed
- 4 surveys reported all 10 key elements
- Numbers of clusters were not reported in 8 out of 20 surveys (40%)

For each of the 10 key elements below, the number of surveys (out of the 20 tested) that were missing the relevant information is highlighted in red:

1. Location **= 0**
2. Time period when survey conducted and recall period **= 11**
3. Sample sizes (children, households) **= 7**
4. Sample design and no. of clusters **= 7**
5. Sampling design at final stage (household selection) **= 10**
6. Types of Indicators **= 1**
7. Reporting of demographic data **= 13**
8. Methods for selection of children within household **= 9**
9. Reporting of non-responses (refusal, absence) **= 16**
10. Comparison of results with past surveys, groups etc. **= 7**

It was pointed out by CRED staff that this completeness checklist is ongoing work and that the purpose of presenting it at the TAG is to receive feedback and to answer the following questions: Should a completeness score be included? What mechanisms are necessary to ensure feedback to agencies so that they can increase the completeness and reliability of their surveys? If the NGO cannot provide the information that is missing, should the survey be excluded?

Following the presentation on the CE-DAT Survey Completeness Checklist, the floor was open for comments and feedback. The following input was received from the participants:

- The completeness checklist is a great initiative and there is an interest in knowing the process that is going to develop between CE-DAT and NGOs to address data reliability. The back and forth process between the two will be crucial.
- The issue is not just how many criteria are met, but which are met because without certain key information you cannot use the surveys. Not all the criteria are equal.
- Several participants were surprised that confidence intervals were not included in the completeness checklist. The inclusion of design effect in the list was also suggested.
- The completeness checklist should be shared widely for feedback.
- The results of applying the checklist against surveys absolutely need to be shared with the data-gathering agency so that they may improve their own data compilation and reporting.
- End-users of a survey should be made aware of the survey's quality and completeness evaluation, even if the name of the NGO responsible for it is withheld.
- Issuing a survey score can be a problematic political issue between the NGOs and the CE-DAT team and be difficult to interpret. Having a checklist identifying the missing criteria might be a better approach.
- It can be difficult to evaluate a survey report without access to the raw data.
- In order for an NGO to cite a survey from CE-DAT in a proposal, it would need to identify the source.
- For an NGO to receive a low score on their surveys by the CE-DAT team is an internal problem to the NGO and shows that they need to improve. The technical feedback by CRED would guide them on how best to improve their data reliability.

CRED staff pointed out that the CE-DAT database allows for data to be entered but not to be made public. Surveys that provide a large majority of the key information will not be automatically excluded, but rather will be classified as "pending" while the agency is contacted so that they may provide the missing information. It is also understood that certain agencies do not have the time or resources to dig through their surveys to identify missing information or do not have access to the raw data, and that the CE-DAT team does not have the resources to go through raw data for every survey.

The CE-DAT team also pointed out that this completeness and reliability validation is only the formalization of work that was already undertaken previously in a more ad-hoc manner, but will now be applied systemically to all of the surveys that are received.

Finally, it was agreed in the discussions that the CE-DAT team would provide the data-gathering agency with feedback on the evaluation of their survey reports in a confidential manner. On the other hand, the reliability of surveys will be provided to CE-DAT end-users, but without providing the sources of the data.

Data reliability group discussions

For each of the four themes that Mr. Ruwan Ratnayake presented, questions were drawn up for the participants to address in small group discussions. Below the questions are the issues that were identified in group discussions and the conclusions that were reached.

1. Human and organizational resources for health information are inadequate

   a) What are the key collaborative steps that NGOs and donors can take to improve the standards for human resources for health information?

b) What are the advantages and disadvantages for collaborations between field agencies and external groups of technical staff for surveys?

- Out of the discussions on human resources involved in generating routine surveillance data and survey-based data, the group concluded that the key determinant of the quality of human resources was the proposal phase for funding requests. To that end, access to CE-DAT can be a solution for improving the proposal phase and thus improving the technical capacities for monitoring and surveying conflict-affected populations. Field agencies need funding, and continuous sources of it, in order to build the capacities of their human resources and keep them within the organization.
- In terms of human capacities, there is a distinction between surveillance data and survey data.
- It is difficult to get funding for formal training and courses on survey methodologies. Access to it would allow the building of a pool of qualified human resources to be called upon for surveys.
- It was pointed out that it is difficult for NGOs to afford qualified staff and even harder to keep them on staff. NGOs experience a high staff turnover.
- There is a need to integrate survey methodology modules in standard university public health, epidemiology, medicine and nursing programs.
- Need to use global clusters as a forum to push forward the development of clear guidelines and rules for standard human resource practices for information management
- Technical expertise on surveys may exist outside NGOs, but the NGOs have the means and expertise to carry out surveys. The external use of technical staff would be a best practice, though it can mean that you do not build capacities within organizations.
- Communications, both internally and externally, should be better developed in agencies and organizations.
- Producers of information own it and there is reluctance to share it. When it is shared, it done in a limited way and often only between trusted individuals. There needs to be incentives for sharing information, as well as obligations. Visibility can be a good incentive.
- People mainly share reports and aggregated data, but not the raw data.
- Agreeing on what the data needs are would be an important step towards establishing the mechanisms & standard operating procedures for sharing it.

2. Data needs to be comparable and representative to be useable by decision-makers

a) How can technical centers like CRED assist field agencies in the integration of standardized methodologies and best practices? Do field agencies desire this type of assistance?

- CRED can be involved in the provision of resources such as providing the consensus on best practices for methodologies and identifying methods to triangulate and compare different surveys across time and space.
- CRED can provide technical assistance to NGOs, specifically to those with whom it already has signed MoUs, for support on surveys, for designing questionnaires and forms, for performing surveys in the field, and for training.
- CRED can create a forum where discussions on specific technical issues can take place. For example, issues on the relationship between MUAC and weight for height and on how the new WHO nutrition curves compare to the NCHS curves can be discussed there. Joint support mechanisms by CRED and NGOs can be also be provided.

b) Donors rely on data from field agencies to plan evidence-based humanitarian assistance. In a scientific area that constantly evolves, how can donors collaborate with NGOs to integrate and maintain international guidelines and best practices?

- If donors are going to ask for specific evidence-based information, then they will need to provide a specific line item budget for it, as well as agreements over the use of the information.

- Accountability is necessary on how the evidenced-based information is used, so that the evidence is not used by decision makers to justify a political decision that has already been taken.
- CRED can provide normative judgment on whether survey reports have followed accepted methodologies and formats and have met the CE-DAT Survey Completeness Checklist
- Need to educate donors to look at the context and not just at the indicator values. On the other hand, NGOs need to provide this contextual information.
- The use of standard and robust survey methods does not mean that the results should be used in decision-making without an analysis of the context.
- Research groups such as CRED have a very important role to play in that they are independent and can provide impartial feedback on evidence-based data, associated methods and the context.
- The key aspect is to identify the information that donors need to allocate resources and carry out negotiations on these. Entities like CRED can provide assistance in helping donors identify their information needs, and existing data gaps, for decision-making.

3) Demographic information in emergencies is unreliable or unavailable

   a) How can mechanisms for gathering essential demographic data before emergencies be improved by NGOs, UN agencies and national governments?

- The first step is to differentiate between non-failed and failed states.
- In non-failed states, MICS, DHS and census data can be used.
- The governments of these states are the primary target groups for advocacy on the value of compiling these types of data, as well as for using conditionality of funding on reliable data compilation.
- In failed states, indirect methods need to be used. At sub-national levels, vaccination coverage data and WFP data can be used for sources of demographic data. At local levels, need to involve local actors such as NGOs and key informants. An option used by ACF to gather demographic data was to send one person to speak to key informants in every village to conduct a basic census, though this delayed the survey by a month.

   b) What further information on the composition of the population at-risk (i.e., population status [refugee, IDP etc.] age groups etc.) is needed in order to improve data for humanitarian aid decision-making? How can field agencies best respond to these needs?

- The key phrase in this question is to identify vulnerable groups, such as the under-5 age group, pregnant women, the elderly, people with HIV or other diseases and then using a process of reiteration using baseline data and making best guess estimates. Surveys can then be carried out to collect the data, and the data can later be tweaked as new information comes in.

4) Challenges to presenting and disseminating findings

   a) Is there a need for a common presentation format to better highlight essential information for external evaluation and analysis?

- Providing more contextual information on indicators is important. In mortality surveys, providing baselines and comparing survey results to these is necessary.
- Need to compare across a wider variety of surveys results and other available information.
- There is a need to create norms on how data is reported.
- One key issue to provide is the coverage of data in relation to the target population.
- Need to create more commonalities in reporting and not just focus on standardization and methodologies. Need to create a culture of norms in reporting, which could mean focusing on other contextual information and what other surveys have done.

b) How can NGOs and academics use database resources like CE-DAT and NICS to increase the impact of their reports on decision-makers?

- It's good for donors to have systems of validation from many sides. NICS and CE-DAT can provide one of the points of validation.
- The CE-DAT Survey Completeness Checklist has generated a lot of discussion at the meeting. NGOs have voiced their opinion that the checklist can be valuable for improving their own practices and to push forward quality-control mechanisms within their own institutions.

The inputs by participants included below addressed topics related to the CE-DAT Survey Completeness Checklist.

- The Survey Completeness Checklist was initially a very long list that was whittled down to 10 key criteria. The long list should also be shared with NGOs.
- The Completeness Criteria need to be incorporated not just in the reports, but rather in the entire survey-design process.
- There are two issues that have to be considered. The first is that NGOs do not report all the necessary information. The second is that the quality of survey design is often lacking. There should be two checklists, one that analyses the completeness, and the second that analyzes quality of survey methods.
- To analyze the quality of survey methods requires field agencies to provide more information, often including the raw data.
- There is a wish within the CE-DAT team to move forward and provide more feedback on survey quality. The creation of the Survey Completeness Checklist was just a first step in that direction.
- CRED cannot by itself set norms but can be a conduit for them. If several independent academic groups, including CRED, can post the same normative values, then it can mean a lot to the entire humanitarian community.
- The Checklist was primarily an internal quality control for surveys entered into CE-DAT. However, if it can be a useful tool for the humanitarian community than that is a step in the right direction.

Friday January 24th, 2008

Discussion Topic 2: How do we move towards a unifying framework for the transfer of data from field agencies to decision makers?

The goal of this discussion topic was to better understand how data flows within field agencies and ultimately to the entire humanitarian community. Each NGO was asked to discuss the five questions included below related to their organization's processes of data collection, analysis, reporting and dissemination.

Who is collecting the data? (Field offices, specialized teams from HQ, external consultants, etc)
How is the raw data handled? (Does it remain at field level, is it sent to country HQ, international HQ?)
Where is data analyzed and by whom?
Is a draft of the report sent to peers?
Who receives the final report?

Responses to the above questions varied from one NGO to another. In some organizations, the field office is responsible for data collection, sometimes with the help of nutritionists or epidemiologists from the organizations' headquarters. In others, teams of surveyors are dispatched from the headquarters to design and carry out the surveys. Only one of the five organizations present at the meeting confirmed using the SMART standardized methods for carrying out most surveys.

Similarly, in certain organizations data analysis and report-writing are performed at the field office, while in others they are done at headquarters. Furthermore, survey reports are often distributed to the funders. Certain organizations have been working to implement clear data collection, flow and storage procedures. With the help of information technology, they are in the process of developing systems to manage and analyze data collected in the field. It is important to point out that to most of the NGOs, surveillance data, as opposed to survey data, represents the largest share of all field data.

Among the NGOs present, the percentage of field surveys reports sent to headquarters ranged from 10% to 100%. The conclusions of these discussions highlighted the challenges for the CE-DAT team to streamline its survey-collection methods. Nevertheless, There was a clear wish by all NGOs at the meeting to improve their data flow mechanisms so that data collected in the field is systematically made available to staff at headquarters and to the larger humanitarian community.

Discussion topic 3: Switching to need- and demand-based outputs

The participants were asked to identify ways that CRED can meet their needs and demands in the work carried out and the outputs produced by the CE-DAT team. The discussions are summarized below by types of organizations.

NGOs

NGOs emphasized the usefulness of CE-DAT outputs such as **country profiles** and **regional analyses of nutrition and mortality trends**.

Furthermore, they saw CRED as having an important role to play to **build the capacities for survey design and field methodologies**, and to **disseminate survey findings**.

The Completeness Checklist was identified as a valuable tool. Receiving **feedback from CRED on the completeness of NGO survey reports** would allow them to improve their survey design and reporting capacities.

International Organizations

The World Food Programme annually reports on their outputs and outcomes. As some field partners do not have the technical expertise to report on certain outcomes, WFP's headquarters are faced with issues of quality control. **CRED can provide analyses of surveys** and **identify those that are comparable** over time and those that are not.

UNICEF: CRED fills an important gap in **providing quality data from complex emergencies**. Surveys have been the mainstay of CE-DAT and its team should, over the coming years, continue to **provide analyses** of these.

UNHCR: CRED should focus on the data driven aspects of surveys and **provide technical assistance**, **disseminate methodologies**, and **build capacities of field partners**. Also, methods to survey refugees in urban settings need to be better developed evaluated, and this could be discussed at the next Expert Group meeting

WHO: CRED can provide useful input by performing more analyses on the existing CE-DAT data. The Survey Completeness Checklist is good tool and should be further used to **assess the quality of surveys** and to **build capacities in field agencies**. Some regions have many surveys and CRED can **provide feedback on the necessity of surveys**.

Funders

The funders present at the meeting identified the following services that CE-DAT can provide:

Resource-allocation: CE-DAT can provide key indicators and **identify priority areas for allocation of resources**. Furthermore, CE-DAT can be used as a **tool to cross-check funding requests** from field offices or partners.

Reporting: As funders need to report in results-based systems to parliament, congress or the treasury, CE-DAT can **provide evidence-based input on the impact of financing relief projects** by providing trends and data on evolving situations.

Requests: CE-DAT **can respond to specific requests** by members of the government for precise information, such as malnutrition trends in a country or region.

Identify data-gaps: the CE-DAT team can **highlight where there is a lack data** and what situations require further investigation.

Coordination with other health information initiatives

Introduction to the Health and Nutrition Tracking Service

Dr. Richard Garfield, Manager of the Health and Nutrition Tracking Service, gave an introduction of this initiative to the participants of the meeting.

The humanitarian community is collecting more and better information than ever before on people affected by wars, disasters, and protracted crises. Too much of this information, however, does not get used well.

- Information may be collected but not effectively shared
- If it is shared, its definitions and methods of collection may not be clear, so it is difficult to interpret
- It can be correctly interpreted, but the interpretation may be made in isolation from the context and other sources of relevant information such as rapid assessments, service statistics from providers or censuses
- A well developed, contextually embedded analysis may be made, but the results may be poorly communicated to policy makers and the public

Many non-governmental organizations (NGOs) are improving the collection of data in the areas where they work. The SMART initiative, among other efforts, has helped improve how data on nutrition, mortality, and livelihoods is collected. CRED has, among other activities, improved the availability of data from the surveys that reach them. Health and nutrition clusters in countries have improved coordination and local availability of information. However, what is still needed is a more robust approach to collect, analyze, and communicate the results of analyses to policy makers, the wider humanitarian community and the public. The Health and Nutrition Tracking Service (HNTS) is designed for specifically for this purpose.

The HNTS was constituted in October 2007. It is developing various mechanisms for the review, analysis, interpretation and validation of critical health and nutrition information in selected humanitarian emergencies. This includes the review of existing data from a wide variety of on the ground sources as well as more formal surveys. It will advise on the use of the resulting analyses for advocacy and programming with funders, UN organizations, and NGOs.

At a global level, the HNTS is focusing on gaps and limitations in existing methodologies for collection of data relevant to humanitarian assessment and how to improve them through its Expert Reference Group and its engagement with existing initiatives including SMART. HNTS will identify data gaps in selected priority countries and engage with relevant groups to address these gaps.

At the country level, the opportunities presented by engagement in various countries through the health and nutrition clusters will be used to improve the skills and abilities of in-country partners (e.g. Governments, NGOs, community-based organizations) to improve the quality data collection, their analysis and their interpretation.

Following the above presentation, Debarati Guha-Sapir, Director of CRED, and Olivier Degomme, the CE-DAT project coordinator, presented a summary of follow-up actions that were identified during the meeting.

Summary of Recommended Actions

Addressing gaps in data reporting

- CRED will identify data gaps and identify geographical areas and time-periods where they occur

- Bilateral discussions with UNHCR will be held to discuss the gap in refugee data and to identify solutions

Consolidating and expanding the CE-DAT Network

- CRED will continue to develop existing collaborations with field agencies that carry out surveys and identify new partners to the CE-DAT Network

- Discussions on signing Memorandums of Understandings or less formal agreements will be initiated with Merlin, Action Contre la Faim, and Médecins Sans Frontières Belgium

- CRED will work with State/PRM and USAID to encourage their field partners to share relevant data with CE-DAT as stipulated in their contractual obligations

- The CE-DAT Team will work with DfID to encourage their field partners to collect and share data

Issues suggested for discussion at next Expert Group Meeting

- Finalizing the CE-DAT Survey Completeness Checklist and identifying rating systems for surveys

- Developing the modalities of using surveillance and registration data in CE-DAT

- Including contextual information in CE-DAT (scope, format, etc.)

- Identifying methodologies to survey refugees in urban settings

Need- and demand-based outputs identified:

- The CE-DAT team will expand its analytical capacity and products and continue to provide the international humanitarian community with country briefs, situational reports, trend-analyses, meta-analyses, etc.

- CRED will analyze the universe of conflict theatres from relevant sources, including ICRC, Uppsala and SIPRI, and identify those conflict theatres for which CE-DAT has data. Collaborations with these organizations will be expanded to identify common definitions, coverage, etc.

- CRED will use the CE-DAT Survey Completeness Checklist to perform analyses of recent surveys sent by NGOs and report back to them, in a confidential manner, on the results of these analyses.

- CRED will provide technical support to the field agencies for them to further build their survey conduction and analysis capacities.

Closing Remarks

Professor Debarati Guha-Sapir thanked all the participants for having attended the meeting and for having provided valuable feedback to the CE-DAT team.

Annex 1

Complex Emergency Database (CE-DAT)

Technical Advisory Group meeting

Agenda

January 24th & 25th, 2008 - Fondation Universitaire, Brussels, Belgium

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Day 1: January 24, 2008

9:00-9:15	**Registration**
9:15-9:30	**Welcome and overview of meeting** – Debarati Guha-Sapir
9:30-10:45	**Accomplishments and challenges of CE-DAT so far** Chair: Debarati Guha-Sapir Presenters: Chiara Altare Olivier Degomme - Database expansion and management o # of surveys, indicators, sources o Memorandums of Understanding o Creation of Expert Group and first meeting in May 2007 o Results of 1st Expert Group Meeting (EGM): Definition of a complex emergency - Improving data quality o Survey checklist from EGM and completeness requirements: Initial results from use of the checklist - Outputs o Newsletter, Explanatory Notes, Publication, maps
10:45-11:00	*Coffee break*
11:00-12:30	**CE-DAT, the way forward:** Chair: Debarati Guha-Sapir Presenters: Antonio Zugaldia David Hargitt - Presentation of the new CE-DAT team **Outputs** - Redesigned website, geo-referenced survey sites, CE-DAT Network Zone - Inter-operability among existing databases: linking CE-DAT to EM-DAT, Uppsala, Standards & Indicators Report **Improving the quantity of CE-DAT data** - Consolidation of the CE-DAT Network - Group Discussions o Usefulness of a CE-DAT online form for survey and data entry o Inclusion of additional data in CE-DAT: morbidity
12:30-13:45	*Lunch break*
13:45-15:15	**What are the barriers for field agencies in producing high quality survey data that is of increased use to decision-makers?** Chair: Scott Gardiner Presenter: Ruwan Ratnayake - Group discussions
15:15-15:30	*Coffee break*
15:30-17:00	**Plenary session**

	- Complex emergency situational visualization and analysis - Presentation of conclusions of group discussions
17:00	*End of day 1*
19:00	*Dinner organized by CRED*

Day 2: January 25, 2008

9:00-11:00	**How do we move towards a unifying framework for the transfer of data from field agencies to decision-makers?** Chair: Paul Spiegel Presenter: Olivier Degomme - Conceptual framework of data flow - Testing the conceptual framework to reality - NGO Data flow structures – Practical considerations from the field: o IMC o IRC o Merlin o ACF o MSF *Coffee available (*10:30-11:00)
11:00-12:30	**Shifting to need- and demand-based outputs** Chair: Paul Spiegel Presenters: Olivier Degomme Chiara Altare - Needs identified by the CE-DAT team - Demands o From NGOs o From Donors
12:30-13:00	*Lunch break*
13:00-15:00	**CE-DAT work plan for 2008 - Coordination with other health information initiatives** Chair: Hoa Tran - Health & Nutrition Tracking System - Standardized Monitoring of Relief and Transitions (SMART) initiative
15:00-15:30	Wrap-up and end of meeting – Debarati Guha-Sapir

Annex 2

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