



## Emergency Survey Support (ESS) SMART team at Action Against Hunger-Canada (ACF-CA)

### Key messages

1. The SMART team at ACF-CA responds to inter-agency survey needs by providing technical and human resources to support in-country organizations who wish to undertake a SMART nutritional assessment in areas of high priority. These include:
  - a. Humanitarian crises or;
  - b. High-risk nutrition situations with an absence of reliable data.
2. A unique Terms of Reference is developed for each ESS designating the division of responsibilities between the SMART team at ACF-CA and in-country partner(s).
3. Since 2014, the SMART team has provided Emergency Survey Support in the Philippines, South Sudan, Syria and Papua New Guinea.

During humanitarian crises, the response capacity of governments, UN agencies, and international NGOs may be compromised as they struggle to find adequate technical and human resources to meet urgent survey needs. In order to respond to these inter-agency survey challenges, the SMART team at ACF-CA provides partners with surge technical expertise and human resource support through ESS. A Memorandum of Understanding was signed in 2014 between the Global Nutrition Cluster and ACF-Canada as SMART Project Convenor, which outlines the criteria and activation processes for ESS. Under ESS, the SMART team contributes short-term technical expertise for demonstrated survey needs, during humanitarian crises or high-risk nutrition situations with an absence of reliable data.

Once a partner agency establishes initial contact, regular communications allow the SMART team to better understand the survey context, needs and goals. As common understanding is reached, a Terms of Reference (ToR) is drafted and negotiated between the SMART team at ACF-CA and the in-country partner(s), outlining responsibilities of the involved parties. The scope of responsibilities largely depends on the survey needs and resources available. **Table 1** details how responsibilities are typically divided between the SMART team at ACF-CA and the survey partner(s). However, ESS is a collaborative initiative between the SMART team and the in-country partner(s), and the division of responsibilities is subject to rearrangement depending on the specific survey context.

**Table 1: Typical division of responsibilities for an ESS deployment**

Partner	SMART team at ACF-CA
<ul style="list-style-type: none"> <li>• Financial resources to cover survey costs (staffing, training, transport, supplies etc.).</li> <li>• Administrative support for the survey, recruitment, training, standardisation test and demographic information.</li> <li>• Logistical and security support for SMART team ESS staff (i.e., transportation, accommodation if necessary).</li> <li>• Coordination with relevant local stakeholders (e.g., MoH, local organisations).</li> </ul>	<ul style="list-style-type: none"> <li>• Technical survey support either in-country or remotely with regards to planning and implementing a survey (survey protocol, sample size calculation, field visits, etc.).</li> <li>• Training of in-country staff to lead SMART survey.</li> <li>• Sensitisation events for local government staff &amp; partners on the importance of nutrition data for decision-making.</li> <li>• Assist partners with framework to build capacity and national data quality review.</li> </ul>

## Key anthropometric and plausibility check results

	Philippines	Syria	PNG*
<b>GAM (95% C.I.)</b>	4.1% (2.9%-5.9%)	1.2% (0.6%-2.3%)	9% (6.5%-12.3%)
<b>SAM (95% C.I.)</b>	0.3% (0.1%-1.3%)	0.3% (0.1%-1.3%)	1.3% (0.5%-3.0%)
<b>Stunting (95% C.I.)</b>	30.6% (25.6%-36.0%)	22.9% (19.1%-27.2%)	38.6% (33.1%-44.4%)
<b>Plausibility check</b>	Penalty Points: 4 (excellent) -2 age distribution (p=0.077) -1 skewness (0.22) -1 kurtosis (0.39)	Penalty Points: 12 (good) -4 age distribution (p=0.009) -4 height (DPS=14) -2 MUAC (DPS=11) -2 standard deviation (0.89)	Penalty Points: 11 (good) -4 sex ratio (p=0.010) -2 age distribution (p=0.065) -2 height (DPS=11) -2 MUAC (DPS=8) -1 Poisson distribution (p=0.040)
South Sudan ESS led to surveillance in 3 counties with Rapid SMART methodology, *based on initial results			

### Philippines

On November 7<sup>th</sup> 2013, Typhoon Haiyan devastated the Philippines, destroying urban centres and ultimately affecting 14.1 million people, including 4.1 million internally displaced. Based on this demonstrated need, contact was established by ACF-Philippines through the Global Nutrition Cluster and within one month, the SMART team from ACF-CA was deployed in country (**Figure 1**). Surveys were planned within the Western, Central and Eastern Visayas Islands. While on the ground, the SMART team from ACF-CA led the recruitment of a local survey manager, developed the survey protocol, trained enumerators, and supported the initiation of data collection in the field. After returning to headquarters, the SMART team provided daily technical support remotely in data quality assurance, analysing results and assisting with report writing.

The large-scale of the disaster presented unique challenges in providing the ESS. While recovering from this disaster, numerous logistical challenges in procuring survey materials and finalizing the budget occurred. Furthermore, a three-stage sampling strategy had to be implemented (compared to commonly used two-stage) as large urban centers were affected and evacuation centers were still present. However, many of the surveyors involved were from the affected areas and were highly motivated and skilled despite minimal prior knowledge of the SMART methodology. Ultimately, it was the in-country staff involvement that allowed for a timely completion of this survey with its results disseminated to all partners within one week from the end of data collection.

### Emergency Survey Support Timeline

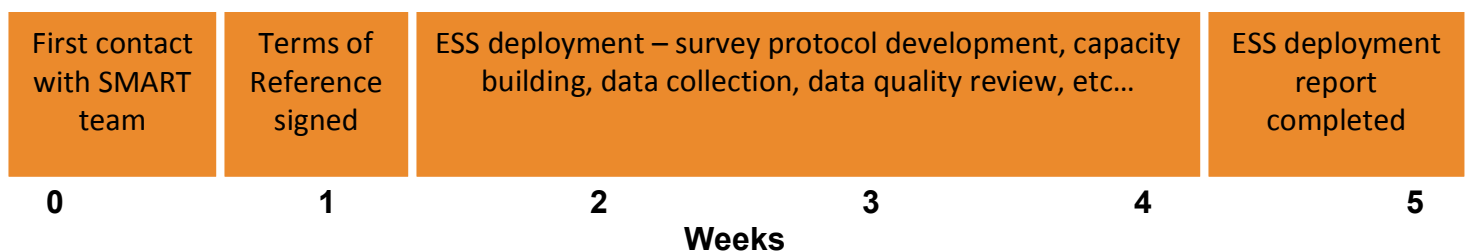
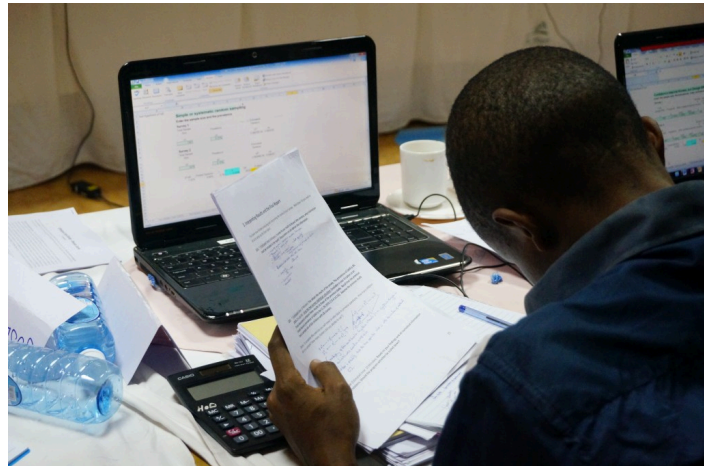


Figure 1: Approximate timeline of activities within a typical survey response.

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## South Sudan

The violence that broke out in South Sudan mid-December 2013 led to a humanitarian crisis displacing approximately 740,400 individuals. The internal conflict resulted in a collapse of livelihoods and lack of access to health, food and other basic services for both internally displaced persons and host communities, thereby increasing vulnerability to malnutrition. In March 2014, the South Sudan Nutrition Cluster estimated that approximately 1.6 million people were in need of nutrition interventions but stakeholders would have capacity to target only half. Based



on this demonstrated need, the South Sudan Nutrition Cluster connected with the SMART team at ACF-Canada and within three weeks of initial contact, the SMART team was deployed in South Sudan. Unlike other ESS deployments, the purpose of this ESS was to provide technical support to the cluster at the height of the emergency rather than conduct a single survey. Thus, the main goals were to: 1) provide technical guidance and methodology required for nutrition assessments to complement the emergency nutrition response in South Sudan, and 2) conduct subsequent data quality audits on surveys to monitor the precarious situation in-country. The ESS resulted in several key outputs, including Rapid SMART nutrition assessment guidelines and a learning needs analysis, which provided a nutrition assessment capacity building plan for Nutrition Information Working Group members.

## Syria

The on-going civil war inside Syria has caused widespread unrest, with estimates of 12.2 million people in need and 7.6 million internally displaced persons. A nutritional assessment was deemed necessary to acquire representative data on nutritional status of the population in the northern governorates to inform programmatic decision-making. In April 2014, initial contact was made with the SMART team at ACF-CA



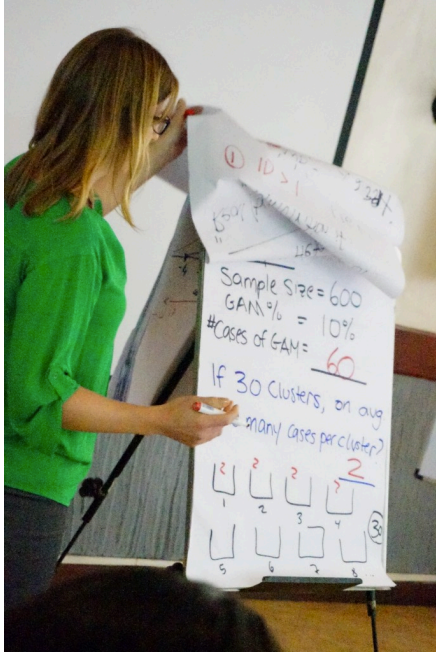
through the Centers for Disease Control and Prevention (CDC) and the Health and Nutrition Working Group (HNWG), communicating an urgent need for technical support in Syria. The security situation presented unique challenges for deploying this ESS. As a result, all ESS was based out of Gaziantep, Turkey, while the survey itself was conducted inside Syria in the north-western Idlib governorate.

The survey manager and field supervisors were already in place prior to deployment, comprised of staff from local partner Physicians Across Continents (PAC). The SMART team worked on the

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ground with PAC and other key HNWG members to develop the survey protocol (including sample size calculation, cluster selection and second stage sampling) and to facilitate survey trainings. Once inside Syria, daily field support was provided remotely by the SMART team. The survey team did not have prior experience with SMART, however they were all highly skilled and motivated professionals and who had each been affected by the conflict. Despite the extreme security constraints during this survey and no prior survey experience, very high quality field work and results were achieved.

## Papua New Guinea (PNG)



In October 2013, UNICEF PNG expressed interest in building nutritional survey capacity to collect high quality data using the SMART methodology. The most recent malnutrition data was from 2005 and reported 14.3% GAM, though the highest rate was reported as 26% in Western Highland and East Sepik provinces. Consequently, UNICEF PNG and the National Department of Health (NDOH), in collaboration with the ACF-CA SMART team, aimed to build nutrition capacity to conduct high quality SMART nutrition surveys. A 7-day SMART Enumerator training was held in Port Moresby, PNG, organized by ACF-CA in partnership with UNICEF PNG and the NDOH. The training included 25 staff from government departments that were selected based on the following criteria: availability to attend the training and data collection period, past survey experience, and level of fitness to take part in data collection.

One unique challenge for this deployment was the limited availability of nutrition information required for the survey protocol. However, the SMART team at ACF-CA worked with local partners to make informed survey planning decisions despite this limitation. This ultimately contributed to the high-quality results that were obtained, as can be seen not only in this deployment but for all three ESS in 2014 that directly supported a survey in the field (see **Table 3**).

For more information regarding the SMART Methodology, please visit the SMART Forum on the website: [smartmethodology.org](http://smartmethodology.org) or contact the SMART Team at ACF-Canada:

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