

**TSUNAMI RECOVERY IMPACT ASSESSMENT  
&  
MONITORING SYSTEM (TRIAMS)**

**Joint WHO-IFRC Concept Paper, Final Draft**

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## I. Background

1. The Asian tsunami struck five countries in December 2004. It was one of the worst natural disasters in recent history, with more than 275,000 individuals believed to have perished as a result of the tsunami. The economic loss from the tsunami was also very large and overall cost of the recovery efforts are estimated at approximately US \$ 10 billion. Mortality due to the 2004 tsunami was concentrated in the first few days of the disaster, and crude mortality rates among the tsunami displaced populations were lower than expected in the eight weeks following the event. Pure relief activities were concentrated in the first weeks, and by January 2005 early recovery efforts started progressively to drive the overall response of the Governments and of the different international agencies.
2. There has been a massive outpouring of private and public relief and reconstruction assistance in the tsunami's aftermath. Official and private pledges reached US \$ 13.6 billion, well above the initial 10 US \$ billion estimated cost of the reconstruction. Little is known about the magnitude and nature of the tsunami's impact on livelihoods, economic activity, and individual well-being, particularly for the poorest and most vulnerable sections of the affected communities. However it seems to vary a lot even within the affected districts. Even less is known about the extent to which recovery efforts have addressed the human and socio-economic losses of the affected communities.
3. Governments and their partners are monitoring the progress of the implementation of the tsunami recovery projects. However, individual project level monitoring by itself cannot identify the rate of recovery for a country as a whole, nor a region, or a district.

## II. Rationale

4. At two meetings of the Global Consortium for Tsunami-Affected Countries (UN, NY June 3, 2005, and September 22, 2005) participants agreed on the importance of a common system for tracking the recovery efforts and assessing the impact of the overall response. Such a system would: 1) enable donors, governments, implementing agencies and beneficiaries to see results more clearly, and 2) help lessen the data collection burdens placed on implementing agencies, governments and recipients of aid. As members of the Global Consortium, the World Health Organization (WHO) and the International Federation of Red Cross and Red Crescent Societies (IFRC) with support from the Office of the Special Envoy (OSE) are leading the collective effort to put a common Tsunami Recovery Impact Assessment and Monitoring System (TRIAMS) in place.

5. Global Consortium members and other interested agencies are also involved in the Tsunami Evaluation Coalition (TEC). The TEC is a multi-sector learning and accountability initiative constituted in February 2005 to: 1) promote sector-wide learning through comprehensive evaluations in 5 key areas of the Tsunami response and 2) develop procedures for the future establishment of multi-sector, multi-agency mechanism to coordinate evaluation functions. To support sector-wide learning the TEC commissioned and recently completed five evaluations (coordination, needs assessment, capacities, linking relief, funding and rehabilitation and development). TEC and TRIAMS are complementary processes. Whereas TEC has examined lessons to-be-learned under these 5 key areas, TRIAMS will put in place a monitoring system of the tsunami on-going recovery efforts and will make periodic assessments of the impact of activities over the next five years. TEC and TRIAMS will continue to coordinate in the future as the TRIAMS system is rolled out. It is envisaged that future work of TEC will provide complementary qualitative input to TRIAMS, ensuring beneficiaries voices are heard and rationale for recovery progress examined.

### III. Key Questions, Aim and Objectives

6. TRIAMS will address the following **key questions**:
  - a) To what extent are base line data available for the 4 main areas in which tsunami recovery efforts can be grouped (vital needs, access to basic social services, livelihood, infrastructure)?
  - b) To what extent have the losses and disruption in those areas been restored?
  - c) Are the recovery interventions targeting the poorest populations/communities?
  - d) Are the recovery interventions effectively addressing some of the pre-existing inequalities (building back versus building back better)?
  - e) Have the recovery interventions generated new inequalities within the countries and within the affected districts?

The answers to these questions can provide the critical information necessary for the identification of the existing gaps, and provide the rationale for the readjustment of the on-going recovery efforts.

7. **The overall aim of the "Tsunami Recovery Impact Assessment and Monitoring System" process (TRIAMS) will be to ensure that governments, donors, NGOs, civil society and other stakeholders are adequately informed on the progress of the recovery efforts in the tsunami-affected areas, so that adjustments can be made to the assistance programs in order to address the un-met needs and the existing inequalities.**

This concept note proposes a framework for TRIAMS, with an initial implementation timeframe of 2006-10. The countries covered by the proposed process are: India, Indonesia, Maldives, Sri Lanka, and Thailand.

8. The TRIAMS process will have the following **main objectives**:
  - a. answer the five key questions enunciated in §6;
  - b. contribute to the setting up -at the national and sub-national levels- a systematic information base and tracking system that will enable the monitoring and evaluation (M&E) of the tsunami recovery (rehabilitation as well reconstruction) efforts in all of the affected countries, and the assessment of the impact of the overall recovery interventions from the tsunami disaster;
  - c. enhance the capacity of government, UN and non-government agencies in collecting, analyzing and using the monitoring data.

#### **IV. Data Collection, Monitoring, and Reporting**

9. The following are the four broad **areas of disruption** that were caused by the tsunami that comprise the framework of the TRIAMS:
  - a. Vital needs, such as water and sanitation, food and shelter;
  - b. Access to basic services, such as health care, education;
  - c. Livelihoods and economic security;
  - d. Infrastructure (such as roads, transport, and electricity).
10. Table 1 presents a matrix where outputs, and outcome recovery indicators are grouped by the four areas of disruption, as presented above. All the indicators presented in this matrix are divided between tables 2 and table 3, according to the methodology used for the collection of the related information. Table two presents the indicators that have to be collected through household surveys (the majority of these indicators have been identified as "**core indicators**" during the consultations with the five countries and agencies between June and September 2005); table three presents the indicators which would regularly be captured through the routine information systems of the different sectors. These indicators are not exhaustive, as each country will need to add the indicators linked to the peculiarity of the on-going recovery efforts in the affected areas.
11. The main challenge is to ensure that systematic and standardized data collection, management and analysis take place at peripheral level, and that the results are used to adjust and plan new recovery program activities. The break-down of data and indicators to the smallest administrative units within the affected districts is mandatory in order to address the key questions presented above, and in particular the ones on the inequalities.

TABLE 1: MATRIX PRESENTING SELECTED INDICATORS BY AREA OF RECOVERY & BY TYPE OF INDICATOR<sup>1</sup>

AREAS OF RECOVERY	RECOVERY <u>OUTPUT</u> INDICATORS	RECOVERY <u>OUTCOME</u> INDICATORS	
<b>Vital Needs</b>	<ul style="list-style-type: none"> <li>• % of population with access to water from an improved source by admin</li> <li>• % of population without basic sanitation facilities by admin</li> <li>• % tsunami affected population receiving food aid, by admin level</li> <li>• Household food consumption (24 hr recall)</li> <li>• % tsunami affected population with damaged house living in emergency shelter, by admin level</li> <li>• % tsunami affected population with damaged house living in temporary shelter, by admin level</li> <li>• % tsunami affected population with damaged house living in new or repaired permanent shelter, by admin level</li> </ul>	<ul style="list-style-type: none"> <li>• % of children below 5 who are wasting (moderate and severe)</li> <li>• % of children below 5 who are stunting (moderate and severe)</li> <li>• % of low birth weight newborns'</li> <li>• Quarter % of increase of tsunami affected population with damaged house living in permanent house, by admin</li> </ul>	<ul style="list-style-type: none"> <li>• % of population with worse functioning (WHO-DAS II)</li> <li>• % of population with poor quality life</li> <li>• % of population under stressed or with poor well being</li> </ul>
<b>Access to Basic Social Services</b>	<ul style="list-style-type: none"> <li>• # of hospital beds available at district level for acute mental illnesses</li> <li>• % of sub-district covered by outreach psychological support by Community Workers</li> <li>• # of health facilities with Emergency Obstetric Care by pop by admin</li> <li>• # outpatient consultations per person per year by admin</li> <li>• % of children 12-23 months who are fully immunized against all antigens by admin</li> <li>• Net primary school enrollment ratio</li> <li>• Primary school drop-out rate</li> <li>• Antenatal care coverage by admin</li> <li>• Measles immunization coverage by admin</li> </ul>	<ul style="list-style-type: none"> <li>• % of under 5 who experience diarrhea episode during past 2 weeks</li> <li>• % births attended by skilled health attendant</li> <li>• Literacy rate</li> </ul>	
<b>Rehabilitating &amp; Reconstructing the Infrastructure</b>	<ul style="list-style-type: none"> <li>• # km of roads and # bridges repaired by admin</li> <li>• # harbors rehabilitated by admin</li> <li>• % of destroyed/damaged schools rebuilt or rehabilitated by category by admin</li> <li>• % of destroyed/damaged health facilities rebuilt or rehabilitated by category by admin</li> </ul>	<ul style="list-style-type: none"> <li>• % of local administration offices fully functioning, by district</li> </ul>	<ul style="list-style-type: none"> <li>• Under five Mortality Rate</li> <li>• Life expectancy at birth</li> </ul>
<b>Livelihood</b>	<ul style="list-style-type: none"> <li>• # of damaged/destroyed fishing boats repaired/replaced by admin</li> <li>• # of sq km of land back to crops</li> <li>• Employment by economic activity (by gender and age; this will need to include self-employment and employment in the informal economy)</li> <li>• Labor force participation rate</li> </ul>	<ul style="list-style-type: none"> <li>• % of population earning below national poverty line</li> <li>• Average household income by admin</li> </ul>	<ul style="list-style-type: none"> <li>• CMR</li> <li>• Under five Mortality Rate</li> <li>• Life expectancy at birth</li> </ul>

<sup>1</sup> Two additional dimensions are critical, but country specific: these are the quality of specific interventions (e.g. housing), and beneficiaries' satisfaction (see paragraph §22) . The mix of these two, captured through both qualitative and quantitative methods, in addition to the quantitative indicators presented by the matrix, are necessary in order to have a comprehensive view of the recovery process and achievements. During the meeting these two dimensions will be discussed and common approaches betted and adopted. Cross cutting issues such as sustainability and gender have not be captured by individual indicators in the above matrix, but need to be addressed during the discussion at the BKK meeting.

**TABLE 2: Core indicators to be collected through government household surveys**

Indicator Number	CORE INDICATORS
1	% of children below 5 who are wasting (moderate and severe)
2	% of children below 5 who are stunting (moderate and severe)
3	% of population with access to water from an improved source by admin
4	% of population without basic sanitation facilities by admin
5	Household food consumption (24 hr recall)
6	% of under 5 who experience diarrhea episode during past 2 weeks
7	% of children 12-23 months who are fully immunized against all antigens by admin
8	% births attended by skilled health attendant
9	Net primary school enrollment ratio
10	Primary school drop-out rate
11	Average household income by admin
12	% of population earning below national poverty line
13	Labor force participation rate
14	Employment by economic activity (by gender and age; this will need to include self-employment and employment in the informal economy).
15	Degree of mental, physical and social functioning (WHO-DAS II: 12 questions version)
16	% of population with poor quality of life
17	% of population under stressed or with poor well being
18	Literacy Rate
19	Crude Mortality Rate
20	Under five mortality rate
21	Life expectancy at birth

**12.** The adoption of the core indicators should imply the adherence of the standardized definitions of numerators and denominators of all these indicators, in order to guarantee cross country comparability issues. Wherever variability occurs, it will be noted or adjusted when possible. Each indicator will be also

listed according to the source of data (routine information systems or HH survey) and periodicity of their collection in each country.

**TABLE 3: Core indicators to be monitored through routine information systems**

Indicator number	CORE INDICATORS
1	% of low birth weight newborn (< 2,500 gr)
2	# of hospital beds available at district level for acute mental illnesses
3	% of sub-district covered by outreach psychological support by Community Workers
4	# of health facilities with Emergency Obstetric Care by pop by admin
5	# outpatient consultations per person per year by admin
6	Antenatal care coverage by admin
7	Measles immunization coverage by admin
8	# harbors rehabilitated by admin
9	# km of roads and # bridges repaired by admin
10	% of health facilities rebuilt or rehabilitated by category by admin
11	% of schools rebuild or rehabilitated by category by admin
12	# of damaged/destroyed fishing boats repaired/replaced by admin
13	# of sq km of land back to crops
14	% of local administration offices fully functioning by district
15	% of tsunami affected pop. with damaged houses living in emergency shelter, by admin level
16	% of tsunami affected pop. with damaged houses living in temporary shelter, by admin level
17	% of tsunami affected pop. with damaged houses living in new or rebuilt permanent shelter, by admin level
18	% tsunami affected population receiving food aid, by admin level
19	Quarter % of increase of tsunami affected pop. with damaged house living in permanent house, by admin

13. Collecting data on indicators targeting the assessment of the impact of the tsunami recovery efforts from multi-purpose household surveys allows to relate household receipt of public assistance or improvement in the household's living conditions to other aspects of household behavior. For instance, a multi-purpose survey that obtains information on child health and nutrition, adult and youth employment, household socioeconomic characteristics and living conditions, and household

receipt of tsunami assistance – all from the same households – would allow us to explore whether it is the poorest and most vulnerable sections of the affected population who are benefiting from tsunami recovery efforts; or whether it is the better-off affected households and those living closer to population centers and roads that are capturing most of the assistance.

14. The study design and the sampling methodology of the national household surveys need to be revisited to allow this level of analysis in the tsunami affected districts.
15. As already discussed with the five countries, implementation of TRIAMS envisages the use of existing routine information systems, complemented by data from already planned national or sub-national household surveys. The production of timely and quality information requires specific support for data collection and analysis at peripheral level and improving substantially the coordination among the agencies leading the recovery efforts and the line Ministries leading the specific recovery's sectors. In addition, data flows related to recovery interventions generated for time limited as well long term periods from international agencies and NGOs have to be included in the TRIAMS process. The needs of technical assistance, training, and additional limited funds for operating expenses in regards the TRIAMS implementation will need to be identified and quantified. All implementing partners of the TRIAMS will have to discuss and agree on a cost sharing approach.
16. Sample Size and Representativeness of Surveys. There is one problem that will need to be resolved with the use of existing household surveys – viz., the inability of the existing surveys to provide representative statistics for the tsunami affected population within the geographical/administrative areas that have been hit by the tsunami in each of the countries. Most of the socioeconomic and labor force surveys mentioned above are representative at the national and provincial/state levels, but not at lower levels (e.g., district or sub-districts). Since the tsunami affected relatively limited geographical regions in all of the countries (with the exception of the Maldives), there would not be enough survey observations from the existing surveys to calculate representative statistics for the affected regions. This would call for over-sampling of the affected regions and a consequent increase in the overall sample size of the surveys. The precise details of how the over-sampling will be conducted will depend, in part, on the overall study design and the sampling method adopted. This will need to be discussed and finalized with the survey organizations in the affected countries. In addition, the sampling methods used during the pre-tsunami household surveys (that may provide base line data for certain indicators), needs to be also taken into account in the new sampling design.

17. Household survey data in all the countries covered by this proposal are collected by the Department of Statistics, which is typically under the Ministry of Planning. The department is known by different names in each of the countries – e.g. National Statistical Office (NSO) in Thailand, Bureau of Public Statistics (BPS) in Indonesia, Department of Census and Statistics (DCS) in Sri Lanka, and the National Statistical Survey Organization (NSSO) in India. Again, these organizations will continue to be responsible for data collection under the TRIAMS process, with support from relevant UN, IO, non-governmental and local partners.
  
18. Frequency of Data Collection. Given the importance of monitoring to facilitate planning of tsunami recovery interventions, it is important for monitoring to be done on a regular basis. For most of the output indicators (unlike less sensitive outcome indicators requiring HH surveys), monitoring could technically be on annual basis, through routine service reporting or facility surveys. Yet many of the affected countries conduct their socioeconomic or demographic household surveys at much less frequent intervals. For instance, India's NSS rounds, which have a larger sample size and yield more reliable data, are conducted only once every five years. Sri Lanka's HIES is also typically fielded every 4-5 years (the last two were 1995-96 and 2002). Thailand's SES is conducted every two years. There is no regular schedule that has yet been established for the HIES in Maldives, since the 2003-03 HIES was the first nationwide household survey to be ever conducted in the Maldives. Of the five countries, only Indonesia conducts a socioeconomic survey (SUSENAS) every year.
  
19. All the five countries have a regular system for the administrative data collection. Data on school enrollments are collected and consolidated annually, while those on health outputs (e.g., immunizations) are collected from each health facility usually on a monthly basis, and consolidated at district level. The major problem with these data relates to timeliness. In many of the countries, administrative statistics are released publicly more than a year (sometimes, two or three years) after their reference date.
  
20. Data Analyzing, Reporting, and Release. Although the time lag between data collection and data processing has shortened over the years, it still takes inordinately long for survey data to be available for processing in virtually all of the five countries. By the time summary data tables are published and reported, it can often be as long as 2-3 years after the original date of data collection. It is useful to note that several countries in Africa as well as Asia (e.g., Pakistan), with technical assistance from the World Bank and other donors, have added Core Welfare Indicators Surveys (CWIQ) to their complement of household surveys to provide data on a number of MDG and poverty indicators. These are short surveys, with a fixed core and rotating modules (on different topics, such as

health, education, access to basic services, etc.), that are administered to a large sample (thereby providing representative statistics at the sub-national level) using simple data-collection protocols. Since these surveys employ new data collection and validation technologies, such as improved methods of field data entry and automatic data consistency checks during data entry, they often require significant software and hardware upgrades and staff training.

21. An important objective for the TRIAMS process would be to ensure that routine service reported data and household survey data in all the affected countries are released to the public soon. However, most important, is that the national and the sub-national levels produce and use the analysis and outcomes of the TRIAMS data in a timely fashion. This may facilitate and improve the decision making process in dynamic situations, in which the speed of the usual planning circle has been accelerated. The governments need to come up with a data-sharing policy that would be consistently applied across all government agencies. Key data tables could be posted to the Department of Statistics website shortly after data collection is complete, and unit record data could be made available to researchers and research organizations for a modest fee within a period of three months after the data are cleaned and available in machine-readable format.
  
22. Beneficiaries' perspective and satisfaction: During the consultations conducted in preparation of the TRIAMS Bangkok meeting, several stakeholders strongly acknowledged the need to more regularly and reliably obtain feedback from beneficiaries on their satisfaction with the results of the recovery interventions to obtain their inputs on the unmet needs and on future projects. The need to have the tsunami affected communities more informed on the recovery progress and more involved on the formulation or readjustment of the recovery plans, has also been highlighted. Beneficiary satisfaction and perceptions on key issues could be measured via both quantitative (i.e. household surveys) and qualitative (i.e. focus groups, key informant interviews etc.) annually or biannually across all countries. Qualitative Component: A research study similar to the UNDP Early Warning Reports could be conducted on a representative sample of households in tsunami-affected areas to capture a broader swath of opinions on the recovery process, detect changing perceptions of inequities and other emerging challenges. Typically, the UNDP Early Warning Reports examine constituent confidence in key institutions and humanitarian actors, measure opinions on the perceived prevalence of country specific challenges such as poverty, unemployment, corruption, potential for ethnic conflict, access to social services and quality of response of international actors. While some indicators on beneficiary opinions could be the same across the TRIAMS countries (i.e. overall beneficiary satisfaction using a mutually agreed upon scale), others would be developed based on the particular issues facing the country. The same instrument would then be applied regularly up through 2010 providing stakeholders (governments, beneficiaries, donors and implementing partners) with trend data on beneficiary perceptions.

Qualitative Component: While beneficiary satisfaction and perceptions will be measured in part through qualitative methods, it is recommended that a further qualitative component be included in the TRIAMS process. The indicators listed in the matrix are quantitative in nature and will provide values or numbers of things; they will tell stakeholders the 'what', but not the 'why'. To truly understand the impact of the tsunami response and to be able to adjust program plans per recovery data, stakeholders will need to have insight as to why things are progressing in a certain direction. For example, the TRIAMS matrix will tell stakeholders how many houses have built and the percentage of homes occupied. However it won't tell you why you might have a low occupancy rate. And indeed the reasons could vary considerably across districts or within the same districts. As the quantitative data is produced and unanticipated findings identified or problems noted, qualitative methods, such as focus groups (using various participatory tools) with beneficiaries should be employed to investigate the challenges. The results (i.e. analyzed data vetted with various stakeholders) would then be immediately fed back to program planners and implementers and changes in project design made as needed. The frequency and scope of the qualitative methods would depend on the scale and type of the challenges noted, and should be handled at sub-national level to address specific problems during the implementation of some recovery activities.

#### **IV. Capacity Enhancement in M&E**

23. There is the need to strengthen data collection, analysis and reporting in the selected countries, particularly at the peripheral levels of administration, in order to have reliable and complete monitoring and evaluation system in place in tsunami affected areas.
24. An important element of TRIAMS process will be the enhancement of local capacity in data collection and analysis, in order to identify individuals, households and communities that need to be reached with specific recovery interventions, and adjust the utilization of available resources accordingly.
25. The effort to enhance local capacity in data analysis and utilization of the related key indicators should be influenced by the following questions: A) How to improve the reliability of key monitoring indicators from routine information systems? B) How to strengthen the peripheral capacity to make use of key indicators to identify gaps/inequalities, improve priority setting and the consequent allocation of resources within the district/province? C) How can the national level facilitate this process?
26. A good M&E system will provide useful guidance to policy makers on targeting and priority setting. In view of competing demands for limited resources, governments need to target interventions to the most underserved communities

and villages in a country and to the neediest population groups within these communities. Analysis of M&E data can help identify the poorest regions and groups that are receiving inadequate assistance from rehabilitation efforts. Geographic Information Systems (GIS) is a powerful tool for mapping such under-served populations. Strengthening the **peripheral** capacity in targeting analysis and GIS-based mapping would be an important element of the TRIAMS process.

## V. Activities for Support

27. The following are areas of possible institutional support that may be considered within the TRIAMS framework by the selected countries:

- (i) In-country awareness-building workshops to further awareness of M&E among central, provincial, and district officials in each of the selected countries.
- (ii) Launch workshop that produces a detailed inventory of the various data sources for all the sectors involved in the tsunami recovery in each of the five countries – viz., household surveys being undertaken by the Department of Statistics, the MIS systems of the various line ministries, and the Census – in order to determine how information from these sources could be shared in a timely way across the different sectors and used to monitor tsunami recovery efforts on an ongoing basis. Agencies in charge of producing and collecting statistics and data, such as the planning departments of the various line ministries, the Planning Commission, and the Department of Census and Statistics, as well as data-users – viz., academic researchers, NGOs, and external donors – would attend this workshop. In addition, international experts on M&E would be invited to discuss gaps in current data sources as well as ways in which current data sets in the country could be improved. The discussion would address specifically issues such as: which data sets are most appropriate for monitoring the progress of tsunami rehabilitation efforts? How reliable are these data sources? Could the existing household surveys and management information systems be expanded to include additional tsunami-related content? How can the sampling design and sampling frame of existing household surveys be amended, so that they can yield representative statistics for the tsunami-affected communities? How can the timeliness of data be improved, so that the lag between data collection on the one hand and data reporting and data release on the other is significantly reduced?
- (iii) The above workshop would merely initiate the partnership between TRIAMS process and local governments to improve monitoring mechanisms on a sustained basis. Much additional work will need to be accomplished over the remaining term of the process. The workshop will identify gaps in data as well as in

analytical capacity in the countries. These gaps will then need to be filled with a variety of inputs and technical assistance, which need to be defined in national plans of action. A second step will be to see among the national authorities and the international agencies, how the needs can be covered.

- (iv) The following are possible areas of support:
- Consultancies from national and/or international experts in statistical survey methods, questionnaire design, and M&E analysis.
  - Short-term in-countries training courses for staff of the central, provincial, and district statistical offices, Office of the Census, and other data-collection agencies within line Ministries (e.g., Health, Education, Forestry, Agriculture, etc.). The training would cover topics such as sampling methodology, new field-based data entry and validation methods, M&E analysis, statistical analysis, and GIS mapping techniques. Such courses are routinely offered by multilateral agencies such as the World Bank Institute (the training wing of the World Bank), but they can be customized for the individual countries.

## **VI. Implementation and Coordinating Arrangements**

28. Government Leadership. Because of the cross-sectoral nature of the tsunami recovery efforts at country level, and of the TRIAMS process as well, the leading Governmental agency of the recovery should also lead and coordinate all the TRIAMS related activities, within the Government and with the international agencies and local and international NGOs. Each country should organize itself to manage the TRIAMS process as it sees fit.
29. Management of the TRIAMS could be governed by one or two committees in each country as described below. Again, it is up to each country to decide on the most effective arrangements:
- a. an inter-ministerial steering committee on Tsunami M&E, which will be a policy-level group, and
  - b. a technical taskforce, which will be the technical working group in charge of the process.
30. An inter-ministerial steering committee could be composed of senior officials – either Ministers or Secretaries – from different sectoral ministries as well as from the Ministry of Planning, Ministry of Finance, and the central statistical office. A steering committee would help ensure that the findings of the process feed into the government’s planning process, its annual budget, and its investment program.

31. A technical taskforce could be responsible for all technical matters, such as the redesign of existing surveys, deployment of new surveys as needed, content and nature of staff training programs, and terms of reference for international consultants and experts. The taskforce would liaise with NGOs, universities, independent researchers, and international and non-governmental agencies in all the countries to understand and address their information needs.
32. The inter-sectoral and inter-ministerial nature of TRIAMS process cannot be overemphasized. Unless the line ministries are fully involved in the collection and redesign of the information base, it is unlikely that they will use this information meaningfully to formulate and adjust their policies and programs. It will, therefore, be imperative to work out a mechanism for integrating solidly the line ministries in this important activity (the composition of the task force can be a way to address this concern).
33. An International Senior Policy Adviser, co-funded by IFRC and WHO, will be appointed to advise and support the TRIAMS implementation in the five countries. The Senior Policy Adviser will be based in a central location that is in close proximity to all five countries, and will be expected to travel frequently to all the countries. He or she will have overall responsibility for liaising with each of the governments as well as the Global Consortium partners. In addition, he/she will have specific responsibility to set up the institutional coordination arrangements for the inter-ministerial steering committees and the technical taskforces in all five countries.
34. National ownership of the TRIAMS process is key. Full time dedicated staff from the leading governmental agency are needed, as secretariat members of the TRIAMS national task forces, in order to coordinate and support the work of the multiplicity of actors that are forming the backbone skeleton of the TRIAMS.
35. Each government will have the prime responsibility for ensuring that appropriate inter-agency coordination takes place at the national level.

## **VII. Timetable**

36. The TRIAMS process will be implemented during the period 2006 - 2010. An extension of this period in some countries can be envisaged, but at a later stage, accordingly to the speed and coverage of the tsunami recovery process.

## Glossary

OCDE 2002

### **Impacts**

Positive and negative, primary and secondary long-term effects produced by a development intervention, directly or indirectly, intended or unintended.

### **Outcome**

The likely or achieved short-term and medium-term effects of an intervention's outputs.  
Related terms: result, outputs, impacts, effect.

### **Outputs**

The products, capital goods and services, which result from a development intervention; may also include changes resulting from the intervention which are relevant to the achievement of outcomes.

### **Effectiveness**

The extent to which the development intervention's objectives were achieved, or are expected to be achieved, taking into account their relative importance.

Note: Also used as an aggregate measure of (or judgment about) the merit or worth of an activity, i.e. the extent to which an intervention has attained, or is expected to attain, its major relevant objectives efficiently in a sustainable fashion and with a positive institutional development impact.

Related term: efficacy.

### **Efficiency**

A measure of how economically resources/inputs (funds, expertise, time, etc.) are converted to results.

### **Indicator**

Quantitative or qualitative factor or variable that provides a simple and reliable means to measure achievement, to reflect the changes connected to an intervention, or to help assess the performance of a development actor.

### **Monitoring**

A continuing function that uses systematic collection of data on specified indicators to provide management and the main stakeholders of an ongoing development intervention with indications of the extent of progress and achievement of objectives and progress in the use of allocated funds.

Related term: performance monitoring, indicator.

### **Performance**

The degree to which a development intervention or a development partner operates according to specific criteria/standards/guidelines or achieves results in accordance with stated goals or plans.

### **Performance indicator**

A variable that allows the verification of changes in the development intervention, or shows results relative to what was planned.

Related terms: performance monitoring, performance measurement.

### **Recovery**

"...focuses on how best to restore the capacity of the government and communities to rebuild and recover from crisis and to prevent relapses. In so doing, recovery seeks not only to catalyze sustainable development activities but also to build upon earlier humanitarian programs to ensure that their inputs become assets for development" (UNDP, 2001)

### **Results**

The output, outcome or impact (intended or unintended, positive and/or negative) of a development intervention.

Related terms: outcome, effect, impacts.