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Beneficiary Satisfaction Surveys: Emergency operations 2012 Jamaica and Dominican Republic Pan-American Disaster Response Unit

 International Federation
of Red Cross and Red Crescent Societies



Beneficiary Satisfaction surveys 2012 emergency operations / Jamaica and the Dominican Republic

Report finalised 28 August 2013, Anna-Maija Beloff, Regional DM Coordinator for the Caribbean, PADRU

Executive summary

Measuring beneficiary satisfaction is an essential part of ensuring accountability and transparency whether it is in long-term development programs or short-term emergency. Beneficiary Satisfaction Surveys are a way of measuring the efficacy of our programmes and ensuring that said programmes reach the beneficiaries and address their needs, in the most efficient and transparent way possible. By establishing systems and tools to receive feedback from beneficiaries, we can improve our future operations and ensure that beneficiaries are not feeling excluded from the decision making process and are active participants in the planning of response and early-recovery operation.

The Indian Ocean Tsunami in 2004, the Bam Earthquake in 2003 and the Haiti Earthquake in 2010 – are some of the emergency response operations which raised the importance of beneficiary communication and accountability. The IFRC report on 'Beneficiary Communication and Accountability – A responsibility, not a choice' released in 2011, mentions two-way communication/dialogue system establishment and maintenance through community leader or groups, information boards or more technological channels (SMS, TV/radio spots etc.) and states

that a *'two-way communication should become a priority in the recovery phase of a disaster programme (post 3-months) if not before.'* In 2013 published 'Haiti – Beneficiary Communication Review' mentions that *'Without listening we cannot hope to establish what support people need, and importantly what they do not need, or better ensure communities get the right help, in the right place, at the right time.'* The creation of this system is to ensure: transparency, participation, monitoring programmes, inclusion of effective complaint and feedback mechanism consisting of two-way communication and information distribution approaches geared towards beneficiaries.

Survey methodologies to increase community participation have been included in many emergency operations with a view to improving the inclusion of disaster affected people in the decision making process for emergency operations. The feedback methodology of beneficiaries for emergency operations has included SMS messaging system and radio show (in Haiti), regular visits to affected communities with focus group discussions (several operations) and information/notice board in the village affected (i.e. Yogyakarta Earthquake 2006, Sumatra Earthquake 2009). To date, only 2 IFRC reports on beneficiary satisfaction measurements of emergency operations have been done in 2012 DREF operations in Kosovo and Azerbaijan. Most beneficiary satisfaction surveys are done in none-systemized way, making them ad-hoc reporting within mid-term or final reporting phase of emergency operations. The monitoring of global level lessons learned is difficult, as the information necessary for improving beneficiary accountability and two-way feedback system, is hidden in wider operational context of normal reporting format that includes sectoral information for relief, WATSAN, shelter and health, and in case of EAs, early-recovery aspects.

The specific surveys described below linked to Hurricane Sandy operations, are initial systematically designed beneficiary satisfaction surveys that were conducted to evaluate relief item and delivery satisfaction, and gender balance as well as reaching the targeted vulnerable population. This was done to improve operations in terms of beneficiary accountability in the Americas Zone. The next step after 2012 surveys is the development of easy to use, finalised systemised beneficiary satisfaction surveys for emergency operations that include Non-Food Items, Shelter, Cash transfer, Water and Sanitation and Emergency Health, but which also includes beneficiary feedback mechanism after the results of surveys have been finalised. Moving forward the plan is to develop these surveys into a mobile based survey by 2014.

Hurricane Sandy

Many of the Caribbean islands sustained the impact of Category 1 Hurricane Sandy torrential rains and winds during period of 24-25 October 2012. The countries that were impacted included Dominican Republic and Jamaica. In the Dominican Republic, response measure of the National Society was supported with DREF operational funds MDRDO007 and in Jamaica, the funds were supported through launching of an Emergency Appeal (EA) MDRJM003. Both operations planned beneficiary Non-Food Item (NFI) distribution based on needs of beneficiary family consultation that was performed during initial assessment phase. The beneficiary satisfaction template questionnaire format was first used in MDRJM003 operations in English and after positive feedback from Jamaica operations through the volunteers working with the communities, translated in Spanish to be used in MDRDO007 in the Dominican Republic. The formats can be found both in English and Spanish in Appendix 1a and 1b. The questionnaire was kept during this initial phase of development of format short as to interview time with large number of families affected as a test phase for feedback from field. The development of format would be ongoing 2013 to include more sector specific questions but keeping the questionnaire short and concise.

The timing of beneficiary satisfaction survey was not decided before hand as each National Society based timing of the survey on their work plan with response activities. Jamaica Red Cross had the survey around 1,5months after delivery of relief items. In Dominican Republic the survey was done January 2013, 2,5 months after delivery of NFIs. In both operations, initial response actions by delivery of Non-Food Items was completed by the time of surveys. Shelter materials/shelter kits were delivered later than initial 2,5months period of initial relief distribution and were not included to the survey.

Jamaica

The emergency assessments revealed a total of 6,170 families with damaged houses (minor to severe) and more than 37,000 farmer families affected (total of 215,850 people) that were caused by the flooding and strong winds by category 1 Hurricane Sandy. The most severely hit parishes were Portland, St. Mary and St. Thomas on the northeastern part of Jamaica.

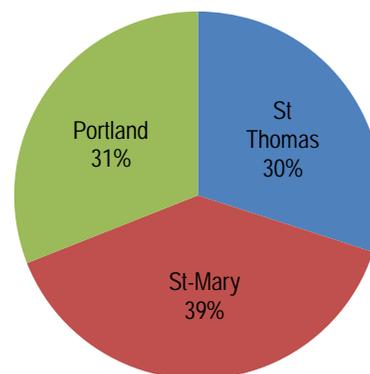


Photo 1. Affected family of Leroy Kennedy and Brenda Matthews in Portland parish after Hurricane Sandy.

Emergency Appeal was launched to reach the 3,400 most vulnerable families affected by Hurricane Sandy. The distribution of relief items were discussed with beneficiaries as which items they would need as priority

The initial questionnaire was developed to estimate the Non-Food Item distribution delivery time, gender balance, satisfaction and efficiency of relief distribution system for operations done for Hurricane Sandy in Jamaica, for MDRJM003. The format was kept short as to ensure that performing the survey would not take much time from emergency operation itself nor it would be too difficult to perform by the volunteers working with the affected communities.

The surveys of beneficiary satisfaction were done in all three affected parishes with division of interviewees split as below percentages:



The vulnerability level for interviewed families was based on selection criteria in the Emergency Appeal document: Families who have incurred severe damage to houses and livelihoods, and with large numbers of *children; disabled people; elderly people, single female-headed households and people living with HIV – who have no possibility of support from family or relatives and lack insurance*. The target was to deliver 1,000 food parcels to support food security and immediate needs of the affected people as well as to deliver targeted Non-Food Items (hygiene kits, cleaning kits, tarpaulins, blankets and jerry cans) for 1,000 families based on identified needs. Distribution of 1,000 mattresses was specifically targeted affected families with children, elderly people and/or disabled people. Through beneficiary interviews in the field, the 1,000 double-size mattresses in original EA document was changed to 500 queen-size mattresses. The reason for this was based on direct feedback from beneficiaries: normal setting for sleeping for a family in the countryside of Jamaica is sharing one large mattress.

Standard RCRC NFI kits were used for MDRJM003 and food parcel was a standard Jamaica Red Cross emergency food parcel that includes as per below locally preferred food items for a family for one week:

Soup 3 packs	Sugar 6lbs
Rice 6lbs	Syrup 1 bottle
Flour 6lbs	Cocoa 1 tin
Oats 2 packs	Sausages 3 tins
Cornmeal 6lbs	Baked beans 3 tins
Corn beef 3 tins	Mixed vegetables 3 tins
Sardine or tuna: 3 tins	Crackers 1 package
Mackerel 3tins	Lasco flavoured drink 3 packs
Cooking oil 2 bottle	Lasco whole milk 3 packs

Average number of family members for the families interviewed was 4.5, with largest families having 13 members and smallest one being one person's household.

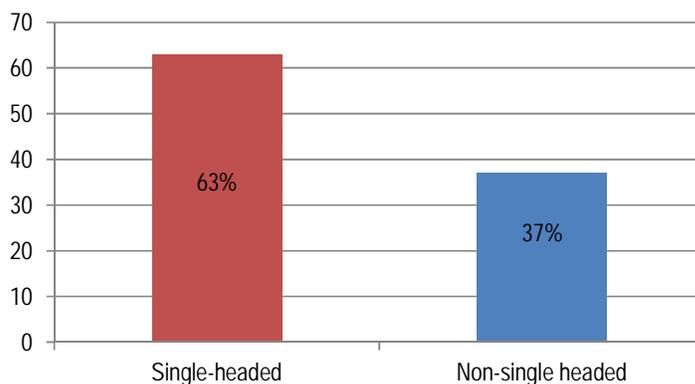


Figure 1. Single or non-single headed households from interviews in MDRJM003 (sample size 100 families – total of 450 people).

Average number of children from surveyed families was 2.9, with some families having 9 children and others 1. Children, elderly or disabled counted 86% of total number of beneficiary families interviewed (total of 100 families). This indicates that the distributions were done according to the beneficiary selection criteria mentioned earlier. See Figure 2 below for more information.

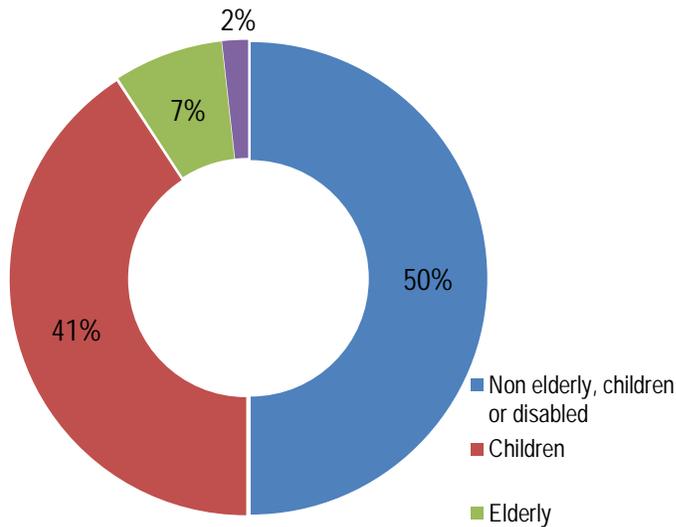


Figure 2. Non-Food Items reached for most vulnerable in MDRJM003.

From total of 100 beneficiary families (equivalent to 450 people) interviewed for MDRJM003 operations (2.94% of total number of 100 beneficiary families), 16 beneficiaries (16% of total number of beneficiaries) mentioned they were not satisfied for the NFIs and food parcel received. In this value included also NFIs that were not funded by EA but came from Jamaica Red Cross own stocks/donations, Figure 3.

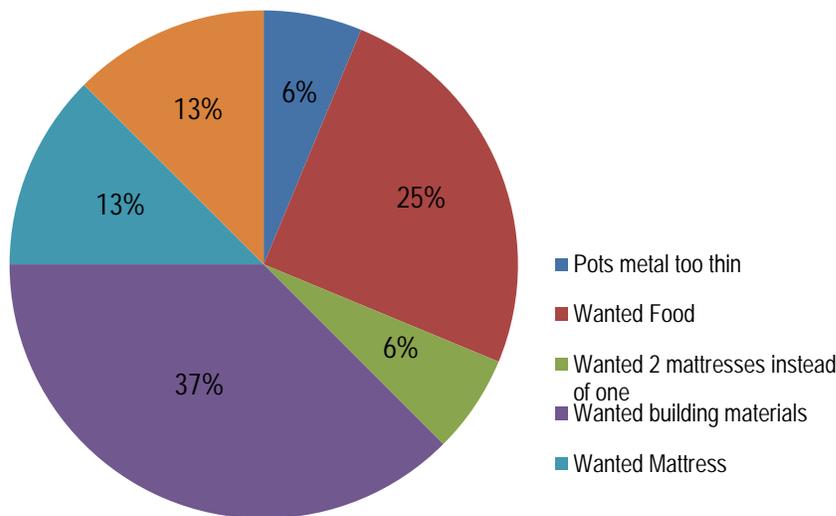


Figure 3. Explanations for dissatisfaction for Non-Food Items in MDRJM003 (total number of families 16).

The impact of Hurricane Sandy was especially heavy on structures (see Photo 2.) so it is understandable, that affected families wanted more construction materials directly after disaster. The operation provided tarpolins for initial response phase as the enforcement of structures and building safer houses was planned later for the recovery phase. This was to ensure proper planning of implementation of activities and with this, to ensure correct measures are used to create safer structures that would be holding better future storms and floods. The shelter aspects of MDRJM003 were later agreed to be implemented bilaterally between French Red Cross together with Jamaica Red Cross, and the activities for construction were implemented during 2013.



Photo 2. House with large damage by Hurricane Sandy in White Horse, Jamaica. Anna-Maija Beloff, IFRC.

The indication that the need for enforcement of houses demanded based on feedback more support directly after the initial impact with more materials than just providing tarps, indicates a need for more construction materials (i.e. zinc sheeting, nails) for beneficiaries during response phase. This could be in the future, with similar damage level to houses, be avoided as by providing RCRC standard shelter tool kits directly within NFI distributions. These stocks are repositioned in Panama regional warehouse of IFRC Global Logistics Services.

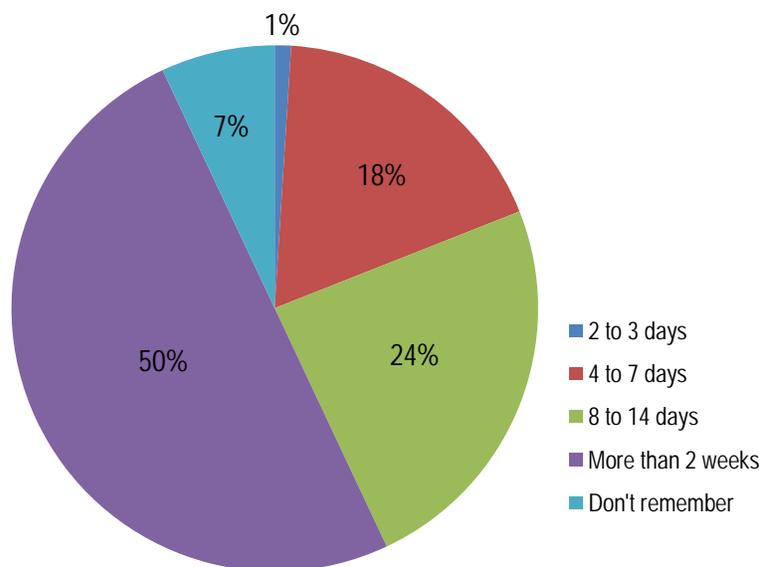


Figure 4. Delivery time of relief items in MDRJM003.

In Figure 4. above it can be noticed that 49% of 100 beneficiary families interviewed had received their Non-Food Items in 2 weeks time after the impact of Hurricane Sandy but 50% of interviewed, NFIs arrived more than 2 weeks after disaster. This results indicates that there is a room for improvement for the distribution system (registrations of beneficiaries, efficiency of assessment and delivery of items). Currently, National Society is already investigating the possibility to use a

mobile based assessment and beneficiary registration system that would make registrations and distributions much faster and increase the accountability to affected population in new operations.

The Dominican Republic

After the eye of Hurricane Sandy had made landfall in Jamaica, the strong winds and torrential rains hit the island of Hispaniola next night, replacing total of 22,000 people and affecting 1,957 houses in the Dominican Republic. Operations in the Dominican Republic targeted 900 families that were affected by rains in the provinces of Barahona, Azua and San Cristobal. The operation of MDRDO007 targeted through the beneficiary selection families who have incurred *severe damage to houses and livelihoods and with large numbers of children; disabled people; elderly people, single female-headed households and people living with HIV – families who have no possibility of support from family or relatives and lack insurance.*

Non-Food Items distributed included: bucket, mosquito nets (2 per family), and hygiene kit. 100 shelter kits were not distributed in time for beneficiary satisfaction survey (delivered later at end of January) and are not included to this report.

Distributions included as Table 1 below.

Table 1. Distribution of Non-Food Items in operations MDRDO007.

Province	Municipality or Community	No of beneficiary families	Total no of beneficiaries	Non-Food Items distributed during MDRDO007		
				Bucket with tap	Treated mosquitonet	Hygiene kit
Barahona	Peñón	150	750	150	300	150
	Solares de Milton	58	290	58	116	58
SUBTOTAL		208	1,040	208	416	208
Azua	El Rosario	596	2,980	596	1,192	596
San Cristobal	Barrio Nuevo	96	480	96	192	96
TOTAL		900	4,500	900	1,800	900

The initial satisfaction survey (see Appendix 1b) was performed by the Dominican Red Cross volunteers in the target communities in Azua and Barahona to receive information of delivery time, family numbers and gender division, and satisfaction for items delivered.

The beneficiary satisfaction survey was done in January 2013, 2 months after closure of field operations (see Photo 3). The total sample size was 259 families (28.78% of total number of families of overall operation) with an average number for family 4.9 (~5). Only 21 of the 259 families interviewed had 8-10 members in their family. The total number of beneficiaries reached with the satisfaction survey was 1,273 people.



Photo 3. The Dominican Red Cross volunteer interviewing the beneficiaries of MDRDO007. Dominican Red Cross.

The data received revealed that 53% of interviewees were single-headed households and 47% non-single headed (Figure 3.). Further feedback from beneficiaries revealed that the question for this was understood wrongly as some heads of family in the Dominican Republic are considered single but they are living with partner in non-marital status which is not told publicly. This question was further modified accordingly with lesson learned from cultural aspects of the Dominican Republic.

Average number of family members for the families interviewed was 4.9, with largest families having 10 members and smallest one being two persons household, see Figure 5 below.

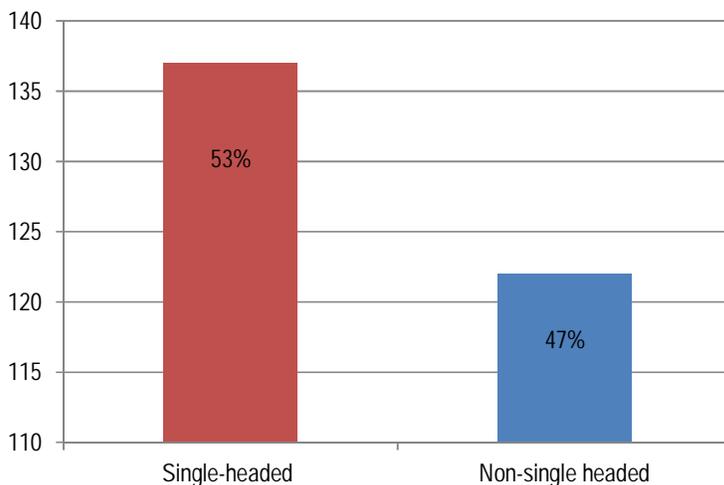


Figure 5. Single or non-single headed households from interviews in MDRDO007 (sample size 259 families – total of 1,273 people).

All 259 families interviewed received treated mosquitonets (2 per family), bucket with tap and chloro droplets. From 259 families interviewed, only one family had not received hygiene kit. This

means that 99,6% of affected population was given same amount NFIs.

For prevention of vector-borne diseases, total of 534 children benefitted from mosquitonet distribution. With the sample size of 259, total 222 families were with children. This would indicate for the overall operation (target 900 families) that 85,7% of families were with children, and sum up as a total of 1,866 children reached with treated mosquito net distribution and with vectoral disease prevention measures.

For elderly people, the total amount reached through the distribution of NFIs was 238 people, which indicates for the overall 900 family operations that 827 elderly people was reached through MDRDO007 NFI distributions.

Total of 15 disabled people (6 of them recorded as head of household) were counted from total of 259 families interviewed and all of them were reached with NFIs. This would indicate that around total of 52 disabled people was reached through operations targeting 900 families. The above reflects in overall, that the most vulnerable people (children, elderly and disabled) were reached from total target population of 900 families (4,500 people) as below Figure 6:

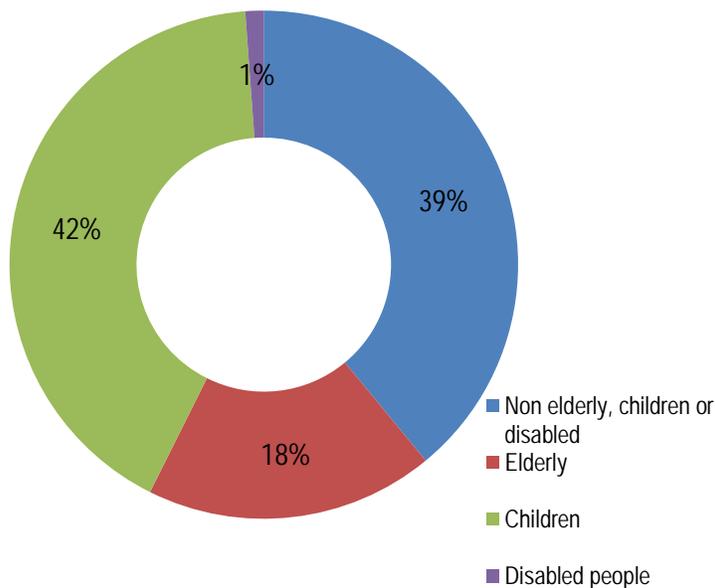


Figure 6. Non-Food Items reached for most vulnerable in MDRDO007.

Through the satisfaction survey, the overall beneficiary family data revealed the delivery time for all NFIs distributed. 42% of 259 interviewed beneficiaries received the Non-Food Items in one week time of impact of Hurricane Sandy but most (57%), received in within 8-14 days after initial impact. The delivery time of NFIs was based on assessment with families that needed more time due to large number of families and areas affected by Hurricane Sandy that were needed to be covered by the volunteers and the National Intervention Team (NIT) members from the branches of the Dominican Red Cross. Below Figure 7 shows division of delivery time for MDRDO007:

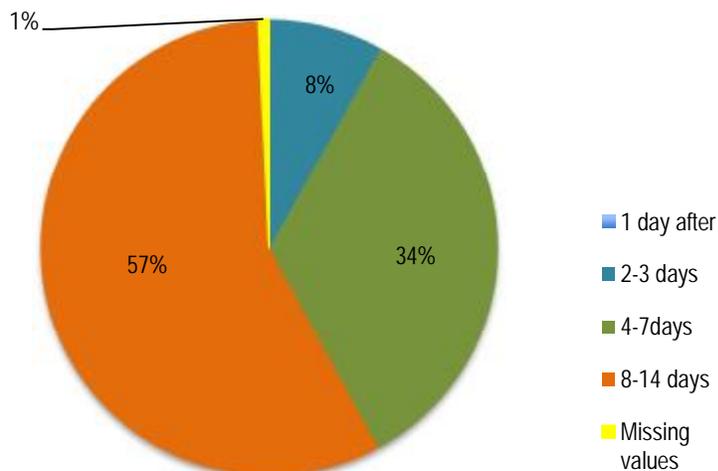


Figure 7. Delivery time for Non-Food Items (NFIs) in MDRDO007.

All 259 families interviewed, mentioned that the NFIs received were appropriate for their needs, giving 100% satisfaction for NFIs received. 100% satisfaction is excellent result. One possibility that need to be investigated is as to make sure that beneficiaries understood the questions correctly. Also, the linkage with overall complaint mechanism need to be informed with this questionnaire. Most of families understood why they were given certain NFIs and only 2 beneficiaries mentioned not knowing why specific items were received. To ensure correct decision making process during assessment, selection of relief items and initial registration of beneficiaries question “what do you need” should be asked as well as ensure that if complaints arise, the information for complaint mechanism exist for beneficiaries.

After evaluation of beneficiary NFI satisfaction questionnaire used, it was modified according to recommendations from the Dominican Red Cross and developed further towards phase 2.

Steps forward – 2013

Recommendation, based on above surveys done, is to perform the beneficiary satisfaction surveys after 3 months period of operation (timeline of closure for DREF operations). This would ensure that all NFIs will be evaluated during the final satisfaction survey with beneficiaries. The sample size recommendation would be that a minimum of 10% of target families should be interviewed. Also, based on the comments and suggestions for improvement of form from the field as well as to include other sector aspects, the attached beneficiary satisfaction sheet has been modified this year. This format will include the information for complaint mechanism for operations. The new format is been finalised as mid September 2013 with inclusion of Cash transfer, Water and Sanitation, Shelter and Emergency Health.

In 2013, PADRU has further dedicated for investement to newest information management technology. This includes combining new beneficiary satisfaction sheet that will be used as a paper format in 2013 hurricane season in the Caribbean, for a ODK mobile-based survey. This is done as to make transfer of information from branches to HQ level more efficient and timely, and minimise manual data inputs. The ODK mobile-based assessment has already been trained in Continental Pre-hurricane and pre-disaster meeting 2013 in Bogota for all 32 National Societies and 3 Overseas Branches of Caribbean, and implementation of further trainings are ongoing in countries currently.

Appendices

1a. Jamaica Sandy MDRJM003

Beneficiary ID: _____



Evaluation form for Emergency Non-Food Items
(tarpaulin, hygiene kit, shelter tool kit, mattress, mosquito net) distributed

1. How many members are included to your family? _____

children; how many _____

elderly; how many _____

people with disabilities; how many _____

2. Are you single-headed household? Yes No

3. Which items did you receive from Red Cross for emergency?

4. Were these items appropriate and adequate for your family?

Yes No

5. If not, why?

6. How short after the emergency did you receive these items?

1 day 2-3days 4-7 days 8-14 days

7. Do you understand why you received these emergency items and not other items?

Yes No

1b. Dominican Republic Sandy MDRD007

ID del beneficiario: _____



**Formato de evaluación para artículos de emergencia no alimentarios
(Goteros con cloro, cubeta con grifo, kit de higiene, kit de albergues,
colchones, mosquiteros impregnados) distribuidos**

1. Cuántos miembros están incluidos en su familia? _____

- niños; cuantos? _____
- adultos mayor; cuántos? _____
- personas con discapacidad; cuántos? _____

2. Es usted jefe de hogar soltero-a? Si No

3. Que artículos recibió usted de la Cruz Roja para la emergencia ?

4. Estos artículos fueron apropiados y adecuados para su familia?

Si No

5. Si no fueron apropiados, indique por que?

6. Que tiempo después de la emergencia usted recibió éstos artículos?

1 día 2-3días 4-7 días 8-14 días

7. Usted comprendió porque recibio estos artículos de emergencia y no otros artículos?

Si No

How we work

Strategy 2020 voices the collective determination of the International Federation of Red Cross and Red Crescent Societies (IFRC) to move forward in tackling the major challenges that confront humanity in the next decade. Informed by the needs and vulnerabilities of the diverse communities with whom we work, as well as the basic rights and freedoms to which all are entitled, this strategy seeks to benefit all who look to Red Cross Red Crescent to help to build a more humane, dignified, and peaceful world.

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Over the next ten years, the collective focus of the IFRC will be on achieving the following strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disasters and crises
2. Enable healthy and safe living
3. Promote social inclusion and a culture of non-violence and peace

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