WHAT MAKES A COMMUNITY DISASTER READY?

A meta-evaluation of a decade of preparedness programming in the American Red Cross and across the humanitarian sector
ACRONYMS

ACF  Action contre la Faim (Action Against Hunger)
AmRC American Red Cross
BPI  Better Programming Initiative
CBO  community-based organization
CDA  CDA Collaborative Learning Projects
CEDRIG Climate, Environment and Disaster Risk Reduction Integration Guidance
CRS  Catholic Relief Services
DAC  Development Assistance Committee
DEPP Disaster Emergencies Preparedness Programme
DP  disaster preparedness
DRC Democratic Republic of the Congo
DRR  disaster risk reduction
DWM disaster waste management
EWEA early warning early action
EWS  early warning system
GAR  Global Assessment Report on Disaster Risk Reduction
GDPC Global Disaster Preparedness Center
GHG greenhouse gas
GNPD Gran Nô Pi Djamn (More resilient Greater North)
HFA  Hyogo Framework for Action
ECHO European Directorate-General for European Civil Protection and Humanitarian Aid Operations
ICRC International Committee of the Red Cross
IFRC International Federation of Red Cross and Red Crescent Societies
INGO international nongovernmental organization
IPA integrated participatory assessment
KAP knowledge, attitude and practice
LAC Latin America and the Caribbean
LPRR Linking Preparedness, Resilience and Response
MACP Margaret A. Cargill Philanthropies
ODI Overseas Development Institute
OECD Organisation for Economic Co-operation and Development
PMI Palang Merah Indonesia
PNS Partner National Societies
RC/RC Red Cross and Red Crescent Movement
SDC Swiss Agency for Development and Cooperation
SFDRR Sendai Framework for Disaster Risk Reduction
ToC theory of change
UNDRR United Nations Office for Disaster Risk Reduction
UNEP United Nations Environment Programme
VCA  Vulnerability and Capacity Assessment
WASH water, sanitation and hygiene
WHH Welthungerhilfe
ZRCS Zimbabwe Red Cross Society

COVER PHOTO:
Residents of a village in Myanmar discuss a community map hanging in the town center. Developed with the help of the Red Cross, the map can be used to mitigate disaster risks.
Photo by Brad Zerivitz/American Red Cross

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EXECUTIVE SUMMARY

INTRODUCTION

The American Red Cross International Services department recently developed a theory of change (ToC) focusing on disaster readiness, aiming to strengthen communities’ preparedness, risk reduction and response capacities.

The ToC’s underlying assumptions are that if the American Red Cross supports communities to develop four key components of disaster preparedness—knowledge and awareness, self-organization, connectivity, and the ability to take action—each comprised of specific action sets, they will become disaster ready within three to five years and inspire replication in neighboring communities.

To build an evidence base in relation to the theory of change, AmRC commissioned a meta-evaluation to explore what makes a community disaster ready. Specifically, the meta-evaluation addressed the following questions: 1) What makes communities disaster ready? 2) What makes outcomes sustainable and replicable? 3) When is a community disaster ready? 4) How do contextual factors affect success? 5) What other learning emerges from this study?

In order to examine the questions, 12 AmRC community preparedness program evaluations and 12 pertinent publicly available multi-country or meta-evaluations by peer organizations in the humanitarian community were mined systematically.

CONCLUSIONS

Eight key conclusions emerged to answer the meta-evaluation questions:

What makes communities disaster ready? What makes outcomes sustainable and replicable?

1. A systems approach is crucial for sustained success and increases replicability

In the context of disaster preparedness, a systems approach involves thinking and working vertically, across levels of government, and horizontally, across sectors and types of actors. Multilevel interventions were found to be more effective than single-level ones, particularly for embedding ownership of preparedness into government institutions. Programs that combined social and institutional preparedness with sectoral interventions—such as natural resource management, health, housing, and especially livelihoods—also demonstrated a high success rate and some evidence of sustainability. Furthermore, multisectoral programming that aided communities in complementary ways was noted as a key benefit of inter-agency coordination and partnerships.

The AmRC evaluations highlight the value of partnerships, especially with government entities, because they enable communities to access additional resources for preparedness, such as small-scale mitigation projects and capacity building, during a project and after it ends. In the same vein, partnerships with government appear to contribute to making a project replicable. Several evaluations also attributed replication to deliberate or incidental contact between communities with successful investment in preparedness.

Community members in Colombia practice first aid during a simulated car accident in Risaralda, a town in the Andean foothills that is prone to earthquakes, floods and volcanic eruptions. American Red Cross staff mentor community members on their response to simulated emergencies. Photo by Jana Sweeny/American Red Cross
2. Risk knowledge is generated but not always linked to action

Risk knowledge includes building awareness of policies or practices generated through a variety of preparedness-related activities, risk mapping (e.g., IPA, VCA) and strengthening knowledge of context.

While less frequently cited than other preparedness components, at least two thirds of the evaluations reported one or more effective risk knowledge activities, demonstrating that this component has become a cornerstone of preparedness. Most internal projects in the meta-evaluation made positive change in preparedness behavior an explicit objective. Most evaluations that used pre/post measurement techniques focused on change in knowledge but not in behavior. Many others captured behavior change through self-reporting. All techniques combined, half of the internal reports described one positive behavior change. Although risk knowledge generation is frequent and increasing in its sophistication, programs that generate risk knowledge struggle to link it to measurable action or behavior change. One evaluation cited “too much awareness raising and not enough concrete change” (AmRC 2017). This and other evaluations point to an unsatiated appetite for evidence that generating risk knowledge effectively leads to protective action across communities.

3. Inclusion challenges persist

Inclusive community preparedness means that all people from all groups, especially those that are more vulnerable, can meaningfully participate in plans and actions. Inclusion is still a major challenge for community preparedness. Just less than half of the evaluations studied highlighted effective disaster preparedness programming that was also gender sensitive or promoting gender equity.

A similar situation was evident around age: few evaluations integrated age into their judgement of program quality, and most programs did not target specific age groups for either vulnerability or capacity reasons. Inclusion of people with disabilities in community preparedness was much less common across the board, and ethnicity and minority groups were practically invisible in the portfolio of 24 evaluations.

How do contextual factors affect success?

4. Context analysis is insufficient for the protection of people and programs

Across the sector generally, practitioners do not invest sufficiently in understanding local settings and interactions—how the local context influences a program and how the program, in turn, may change dynamics in the local context, potentially putting people at unexpected risk.

While context analysis was the least effective of the action sets in the internal evaluations, it was more frequent in external programs. Within AmRC, identified context analyses focused on climate influences or urban dynamics. Less than half of the external and only one of the internal evaluations cited consideration of Do No Harm (DNH) principles or the International Federation of Red Cross and Red Crescent Societies’ equivalent, the Better Programming Initiative (BPI). Conflict sensitivity—or how programs can avoid creating or exacerbating local power dynamics and tensions—was absent in project design. It appeared twice as an internal lesson learned, suggesting it is critical to consider contexts early and systematically.
While disaster risk assessment has become a regular feature of preparedness programming, context analysis is rarely a deliberate or routine effort guiding design and adaptive management, despite the increasing availability of context analysis tools to support the full project cycle.

5. Time required for disaster readiness is context-specific

There is growing interest among international nongovernmental organizations and donors in identifying what makes preparedness results sustainable, and when it is reasonable to plan to exit or transition.

Across the 24 evaluations, fewer than half mentioned exit or transition strategies. Even among those that did, threshold or outcome indicators were rarely used to signal that participating communities were ready for the scaling down of funding from international actors.

The evaluations revealed some conditions that could facilitate this process, such as cost-sharing of mitigation projects with government entities to build ownership over time; timelines that span multiple projects and even donors if necessary; understanding how to maintain and motivate volunteerism; establishing light-touch support mechanisms prior to handover; participatory planning with communities, including transparency on funding limitations; and focusing on the institutional strengthening of local organizations, complementary to strengthening community leadership.

6. Mixed results and missed opportunities for early warning systems (EWS)

Early warning systems are well-recognized as lifesaving tools for a range of rapid and slow-onset hazards. They are a critical component of preparedness, including at the community level. To be effective, they must include four components: be based on good risk knowledge, monitor changes in risk levels, connect with response capacities, and communicate risk information.

One of the major goals of the Sendai Framework for Disaster Risk Reduction is to “substantially increase the availability of and access to multi-hazard early warning systems.” Progress toward this goal was evidenced by the effective aspects of EWS cited in more than half the evaluations, although most of these systems were deficient in at least one aspect. In the other half of the evaluations, EWS were conspicuous by their absence, even in contexts with high seismic activity or food insecurity. One possible explanation for this—as noted across the sector—is that wider resilience goals led to the overlooking of a fundamental need for preparedness.

What other learning emerges from this study?

7. Red Cross mandate and presence is suited to developing local preparedness capacity

In the Red Cross and Red Crescent Movement (RC/RC), national capacity development is reinforced through the auxiliary role of National Societies, and local capacity focuses primarily on community volunteers and on staff in branch offices. The IFRC’s Strategy 2030 promotes “an urgent shift of leadership and decisionmaking to the most local level.”

1. The Sendai Framework for Disaster Risk Reduction (2015–2030) is an international document adopted by UN member states in 2015 at the World Conference on Disaster Risk Reduction held in Sendai, Japan, and endorsed by the United Nations General Assembly. It is managed by the United Nations Office for Disaster Risk Reduction (UNDRR).
Preparedness capacity development was a hallmark of the internal evaluations. Building local capacity in early warning, contingency planning and specific technical sectors was reportedly the most effective action. In contrast, such capacity development was reported as one of the least effective actions among the external evaluations. Evidence suggests that the RC/RC mandate already fills an important gap in international humanitarian action.

8. Lack of a shared model limits learning

A preparedness model or theory of change is a framework to guide design, monitoring and learning. Anchored at a portfolio level, it gains value when flexible enough to facilitate systematic contextualization and ownership.

No preparedness model was found to anchor all the evaluations studied. Surprisingly, less than half the external and only a quarter of the internal evaluations referred to or reported on Sendai (or Hyogo Framework for Action) priorities. Resilience as a related but broader model—and which almost always includes preparedness—is more common outside of than inside AmRC. In addition, the general lack of thorough studies on preparedness since 2010 is noteworthy. Multi-country compilations of preparedness lessons learned, both internal and external, were difficult to assemble. This points to a golden opportunity for AmRC to address the gap, starting with this study. AmRC’s community preparedness theory of change has not been given a full opportunity to guide internal evaluations. Analytical reviews of how program results align to a higher-level shared framework will enhance the ability to examine differences in content, context and coverage, and to promote learning both within AmRC and beyond.

RECOMMENDATIONS

To strengthen community preparedness, increase the sustainability and replicability of successful actions, and address current gaps, AmRC and other stakeholders should:

Foster a systems approach. Establish partnerships with governmental and nongovernmental actors whose mandate and resources enable them to address the community’s priority needs in risk reduction. In community preparedness theories of change, emphasize the importance of connections and partnerships for sustainability and potential replication.

Ensure risk knowledge leads to action.

Systematically assess and compare the value of risk-awareness trainings, campaigns and risk assessments to determine the strengths and weaknesses of each. Using simple metrics of “knowledge to action,” train volunteers in high-risk communities to identify and document protective behaviors following early warnings, hazard events and disasters. Communities should be engaged to answer questions related to behavior change, such as: what makes people take protective action, when are they most likely to do so, and how best can they be influenced?

Make inclusion a reality. Integrate inclusion into ToCs and program design, investing in context analysis, using knowledge of successful experiences of inclusion, and using disaggregation by demographic when monitoring. Scale up the education of staff, volunteers and leaders on specific needs, capacities and vulnerabilities of all groups, and provide budgets that enable them to engage widely, implement sensitively and monitor smartly.
Commit to context analysis. Actively embrace the concept of context analysis in all aid programs, as a conscious reflex at every juncture and for every service delivery. Decide what is required (i.e., a minimum process and format) for such a context analysis to be thoughtful and thorough, but easily assimilated. It must be more than a compliance mechanism. It is important to make context analysis a visible part of every proposal template, such as through the use of a checklist with concise questions. When context analysis is made an integral part of monitoring and evaluation, managers may benefit from incentives to adapt programs to match evolving risk and dynamics.

Test and contextualize conditions for transition. Encourage donors to support budgets that build evidence on timeframes for sustainable community preparedness. Use theories of change to systematically monitor and report on the time required for projects to implement each element of the theory, and task evaluators to verify results and examine contextual variables. Share this information with others in the sector to develop an evidence base. At the start of new projects, convene community leaders and all relevant actors to share expectations, information about resources, and lessons learned from previous preparedness investments in the location, and make a transition strategy.

Invest in early warning and early action. Ensure community preparedness programs strengthen the basic components of early warning systems (EWS) and make a functioning, inclusive EWS one condition for exit or transition. As an incentive, consider incorporating funds for anticipatory action in response to early warnings within program budgets.

Capitalize and scale up Red Cross local preparedness capacity. (recommendation targeting Red Cross and Red Crescent Movement actors)
Strengthen partnerships with local RC/RC actors who can sustain work that enables local communities and individuals to be first preparers as often as first responders. Equip volunteers to transfer preparedness skills to their communities and use volunteer preparedness capacity as a scaled measure of community readiness. Set up a simple monitoring system to track the capacities and transition of volunteers as preparedness leaders and trainers of others.

Pilot a shared model for community preparedness. (recommendation targeting AmRC)
Disseminate the chosen preparedness model/ToC widely across the AmRC portfolio, requesting programs to build proposals around it and welcoming contextualization. Even when not explicitly used or mentioned, require project evaluations to report on the model as part of the terms of reference. Create opportunities to test the model fully in multiple contexts and use it as a learning instrument. Consider a “state of community preparedness” review (i.e., every two years) that could become a compendium of learning or even a flagship document published by the Global Disaster Preparedness Center (GDPC).

Develop a common evaluation framework for community preparedness programs. (recommendation targeting AmRC)
Develop an evaluation framework to enable common learning across country-level projects. The evaluation framework should identify evaluation questions grounded in the ToC and match them with priorities of multiple stakeholders, such as the questions generated for this study around sustainability, replicability and time to impact.
American Red Cross staff members look at information on their mobile devices during a GIS training in Port-au-Prince, Haiti. The American Red Cross uses phones and tablets to map the GPS coordinates of project locations and collect information about the people benefiting from its programs.

Photo by Vanessa Deering/American Red Cross
SYNTHESIS REPORT

INTRODUCTION

Background

The American Red Cross International Services department is guided by the vision to help vulnerable people and communities around the world prepare for, respond to, and recover from disasters and humanitarian crises. In alignment with the strategic guidance documents on community resilience that inform the work of the global Red Cross/Red Crescent network at the community level, and based on years of community-based programming built around that guidance, the American Red Cross (AmRC) recently developed a community preparedness theory of change that focuses on disaster readiness. With this theory of change, AmRC aims to strengthen the ability of communities to reduce their disaster risk.

The underlying assumptions of the theory of change are that if AmRC supports communities to develop four key components of disaster preparedness, each of which is comprised of specific sets of actions, they will become disaster ready in three to five years. The four components and thirteen action sets (in bold) are:

1. **Knowledge and awareness**: Communities are knowledgeable and aware of their local risks, capacities, and vulnerabilities. They are also aware of pertinent policies and practices and take due consideration of critical contextual factors.
2. **Self-organization**: Communities can self-organize to form and maintain preparedness committees, produce preparedness plans for households, schools, and businesses, and train and coordinate local response teams.
3. **Connectivity**: Communities are connected to other communities and to requisite services and resources offered by local government counterparts and the private sector, Red Cross, and other NGOs.
4. **Ability to take action**: Community organizations and institutions implement preparedness actions, such as evacuation routes, mitigation measures, and establish and test early warning systems. This ability is fostered by local leadership that is strongly invested, and with the promotion of an enabling environment through appropriate policies and access to funding.

The theory of change also seeks to catalyze replication of activities across multiple communities through engagement with the communities themselves, local government partners, the private sector, and civil society organizations.

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1. See, for example, *Road map to community resilience: Operationalizing the framework for community resilience* (IFRC 2016).
2. The AmRC theory of change largely aligns with the Disaster-Ready Communities model developed by Margaret A. Cargill Philanthropies (MACP), one of AmRC’s major donors for community preparedness, because they were developed simultaneously and using a similar evidence base. The MACP model separates the 13 actions implicit in the AmRC model and used for coding purposes in this meta-evaluation.
Meta-evaluation
This meta-evaluation examines 24 program or project evaluations, half of which were of American Red Cross community disaster preparedness programs, and half of programs implemented by external actors.

The aim of the meta-evaluation was to generate learning related to AmRC’s community preparedness theory of change, and identify industry-wide good practice and challenges. Specifically, it aimed to answer the following questions: 1) What makes communities disaster ready? 2) What makes outcomes sustainable and replicable? 3) When is a community disaster ready? 4) How do contextual factors affect success? 5) What other learning emerges from this study?

Methods
This meta-evaluation entailed an in-depth analysis of 24 evaluation reports of operations implemented between 2010 and 2019. In selecting them, priority was given to meta-evaluations and multi-country reviews with “disaster risk reduction” (DRR) or “preparedness” in the title.

The 24 evaluation reports were parsed in Dedoose (a mixed methods research software) and coded in two passes. The first pass sought anything that an evaluation reported as “effective,” “successful” or generally working well, and their opposites (ineffective, unsuccessful, etc.). The same was done for “replicable” and “sustainable” and their opposites. These terms form part of the set of six normative criteria promoted by the Organisation for Economic Co-operation and Development’s Development Assistance Committee (DAC) for evaluation quality. Once all documents had been coded, excerpts already tagged with an evaluative criterion were given an additional code to reflect one or more of the 13 AmRC community preparedness model action sets. Where relevant, excerpts were also given codes to correspond with an approach such as multilevel or multisectoral, and/or an inclusion factor, such as age or disability.

Simultaneously, interviews were conducted with staff of two of AmRC’s closest peer organizations (Catholic Relief Services and Oxfam America) that had at least one DRR/preparedness-oriented donor in common, and several entities within the global Red Cross/Red Crescent network. In these, verifiable information was sought in relation to the same study questions and then coded in the same way.
In the analysis phase, the multiple layers of coding enabled the detection of trends in co-occurrence of the criteria, actions, approaches and inclusion factors. What surfaced was the frequency of reports (internal or external, but not of excerpts\(^5\)) that highlighted, for example, effective mitigation measures, sustainable mapping efforts, or connections that promoted replication. Comparison of this frequency and examination of the content of the coded excerpts in relation to good practice in the fields of DRR, community disaster preparedness and development programming in general led to the conclusions and recommendations presented in this report.

This study is subject to the same limitations of any meta-analysis i.e., quality of source material, heterogeneity and publication bias. Given that the main purpose of even weak evaluations is to report on standard criteria, tracking co-occurrence trends provides a compelling and readily replicable snapshot of the community preparedness landscape.

\(^5\) Frequency (or counting) of excerpts in a report can be easily swayed by source material that tends to be limited in thematic scope or to repeat main points. For this study, the only frequencies analyzed were of reports, not excerpts within them.

Following an earthquake in 2018, the Indonesian Red Cross worked around the clock to meet the needs of the most vulnerable residents of Lombok, Indonesia, including delivering wheelchairs to the elderly and people with disabilities.

Photo by Sydney Morton/American Red Cross
CONCLUSIONS

Eight key conclusions emerged to answer the meta-evaluation questions:

<table>
<thead>
<tr>
<th>What makes communities disaster ready?</th>
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<tbody>
<tr>
<td>What makes outcomes sustainable and replicable?</td>
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</table>

1. A systems approach is crucial for sustained success and increases replicability

**What it is**

Systems thinking considers the contributions of an entire system to achieve a shared objective. In the context of disaster preparedness, a systems approach involves understanding, seeking and facilitating the role of actors and actions at different levels, vertically (from local to municipal to national, etc.), from different types of organizations (civil society, government, international and others), and horizontally, across sectors, to achieve the desired outcomes.

**Trends**

Multilevel interventions were more frequently noted as effective than single-level ones. One such example from the European Directorate-General for European Civil Protection and Humanitarian Aid Operations evaluation (EU 2016) praised the “systematic and multi-scale involvement and ownership” achieved through coordination efforts by INGOs working on a variety of preparedness and resilience programs in Bolivia. By engaging with local, municipal, national and indigenous authorities and making them aware of the programs’ alignment with official policies and priorities, several INGOs achieved close cooperation on implementation.

Programs that combined social and institutional preparedness with sectoral interventions—such as in water, sanitation and hygiene (WASH), and health and shelter—demonstrated a high success rate. Effective combinations of sectors included disaster preparedness and natural resource management in the Democratic Republic of the Congo (UNEP 2015), Red Cross resilience and health programming in Zimbabwe (ZRCS 2017), and DRR and housing in Jamaica (USAID 2018). The latter’s evaluation states: “This initiative helps communities exposed to disaster risk acquire a registered title. Empirically, there is a positive link between land registration and access to credit, housing improvement, and risk reduction.” INGOs such as Oxfam, Catholic Relief Services and Mercy Corps also use multisectoral approaches to community preparedness, particularly DRR and livelihoods, because community participants find them doubly beneficial and are motivated to continue the activities after funding ceases.
The relationship between inter-agency coordination and multisectoral programming was also highlighted in the external evaluations, as summarized by Action contre la Faim’s Linking Preparedness, Resilience and Response (ACF 2011): “The most beneficial aspects of working in a consortium are the diversity and the wealth of sectoral and thematic experience and expertise of all partners.”

American Red Cross evaluations highlighted the value of partnerships, especially those with government entities, because they give access to additional resources such as small-scale mitigation projects, public health campaigns and capacity-building opportunities.

In the internal evaluations, there was some evidence that partnerships, especially those with government, contributed to replication. One Indonesia evaluation (AmRC and PMI 2017) attributed replication of project activities in other areas to the good relationship between the Indonesian Red Cross (PMI) and the government, both of which have nationwide coverage. Similarly, the PEER evaluation (AmRC 2014) highlighted how the Government of the Philippines intended to adopt Red Cross courses into the national training program for health mobilizers, thereby enabling them to be replicated in other areas with a sustainable source of funding.

Connections between communities, by design or coincidence, can also lead to replication. For example, the internal Zimbabwe evaluation (ZRCS 2017) credited contact made through church conferences with the spread of Disaster Waste Management (DWM) practices from one community to another. The RITA Americas evaluation (AmRC 2016) noted that when leaders of one community lacked funding to improve their WASH infrastructure, they used the achievements of a neighboring community to encourage their members to contribute funds to achieve the same.

**Why this conclusion matters**

Sustaining successful outcomes is a goal of most social development investments, and community preparedness is no exception. Governments, nongovernmental actors and private companies are increasingly seeking value for money and want to direct their resources to where they can affect the deepest and longest-lasting changes. For organizations like AmRC that focus on community preparedness rather than a wide range of sectors, partnerships hold the key to developing a systems approach that spans multiple sectors (and levels). Partnerships and other types of connections are also key to replication, enabling other at-risk communities to participate and benefit from initial investments in preparedness. Thus, for organizations like AmRC, a systems approach should be the basis for program design.
2. Risk knowledge is generated but not always linked to action

**What it is**

Risk knowledge, as the first priority of the Sendai Framework for Disaster Risk Reduction (2015–2030), is one of four components in the AmRC community preparedness theory of change and also the MACP Disaster-Ready Communities model. Risk knowledge is generated through copious and often unplanned or unstructured ways; experience is often the best teacher. When planned, this knowledge is produced through a range of preparedness-related activities. The AmRC model features three specific activities: building awareness of policies/practices (i.e., through awareness campaigns and training); participatory risk mapping (e.g. IPA, VCA and similar assessments); and consolidating knowledge of the context. Risk knowledge has been a huge focus of investment across the sector since at least the Hyogo Framework for Action (2005). It has regularly been a starting point for preparedness work at the community level, both inside and beyond AmRC.

**Trends**

While at least two thirds of the evaluations reported that one or more of these activities was effective, this is fewer than those that cited the other three preparedness components as effective. Within the component, the most effective knowledge-producing activity set cited for AmRC projects was risk mapping (i.e., VCA, IPA and all variants). For the external evaluations, the activity set cited as most effective was building context knowledge (see Conclusion 3).

Upon closer examination, the evidence revealed an interesting dynamic: most reports that highlighted an effective risk knowledge action also identified a less effective aspect of the same action. Engaged in risk knowledge generation more and more frequently and often with growing success, the field is now mature enough to regularly report where or how these same actions could be stronger. In other words, one evaluation often reported both effective and ineffective aspects of knowledge production. For example, RCRC in Haiti (AmRC 2017) was lauded for wide-scale awareness-building, but reported low assimilation of training messages by teachers and regional committees, which threatened sustainability. A risk assessment process in Indonesia (AmRC and PMI 2017) was found to effectively focus on multiple hazards and vulnerability, but was faulted for lacking gender- and age-disaggregated data. IFRC reported a strong capacity for damage and impact assessment but ineffective awareness raised around early warning practice. The Overseas Development Institute (ODI 2017) highlighted programs that promoted trans-boundary risk assessment techniques and the Swiss Agency for Development and Cooperation boosted inclusion of political and economic risk in assessment efforts (SDC 2019).
A common goal of producing risk knowledge is behavior change i.e., communities and households effectively act on the new awareness or knowledge and take protective actions to prepare for shocks and stresses. Most internal evaluations set positive change in preparedness behaviors as an explicit objective. In Haiti, for example, “behavior change was at the root of the Gran Nô Pi Djanm Program (Stronger Greater North) program.”

The ways in which evaluations set out to measure preparedness behavior change were compared. While only one explicitly mentioned the use of knowledge, attitude and practice (KAP) measures, most attempted to measure change across baseline and endline (or pre/post) data points. In Zimbabwe (ZRSC 2017), KAP-linked improvements featured in the objectives, but no statistical KAP survey was organized to measure knowledge or behavior change. Baseline–endline comparisons were very uncommon in the external evaluations.

Half of the evaluations that used pre/post techniques, however, focused on change in knowledge or understanding (i.e., linked to a training), not behavior change. In Tanzania, for example, pre- and post-survey data reported advances in an understanding of malaria and diarrhea transmission linked to flooding (Tanzania Red Cross 2017). While knowledge is recognized as a first step toward behavior change, ACF (2011) noted that the “process of behavioral change is measured through four progressive but not exclusive stages: understanding, use, adoption and promotion of the project outputs and learning.”

There is no gold standard, and all behavior measurement techniques are imperfect or partial. Many evaluations measured knowledge of appropriate action to take; this cannot equate with behavior change. For example, one Indonesia evaluation (AmRC and PMI 2017) measured percentage of respondents who know what actions could be done to reduce impact of climate change. Another measurement challenge lies in the use of self-reporting of behavior rather than empirical observational data. While often the only feasible measure, self-reporting comes with a host of challenges linked to response bias.
Examples of some of the few cases of behavior change found are featured in the side bar, with positive examples on the left and the less successful on the right.

<table>
<thead>
<tr>
<th>Positive behavior change</th>
<th>Less successful or unsuccessful behavior change</th>
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<tbody>
<tr>
<td>Vietnam (AmRC 2018): While many concrete actions (i.e., what to do before/during/after a</td>
<td>Haiti (2017): Households practicing appropriate hand-washing behavior at all critical times rose from 6%</td>
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<td>disaster) that respondents reported taking were not new, they suggested that the actions</td>
<td>to 15%, and households that reported having taken at least three key preparedness actions against</td>
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<td>were now conducted in a more proactive and organized manner.</td>
<td>disasters rose from 18% to 25% (target for each was 50%). Also, there was a decline in the proportion of</td>
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<td>Indonesia (AmRC and PMI 2017): For percentage of respondents who have completed actions</td>
<td>households practicing safe drinking water management, from 32% to 22%.</td>
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<td>to conserve the coastal area, there were significant improvements between baseline and</td>
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<td>endline (34% to 83%).</td>
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<td>Zimbabwe (ZRCS 2017): At least nine community action plans resulted in new toilets,</td>
<td>Indonesia (Aceh) (2014): An increase in community awareness and knowledge of WASH system operation and</td>
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<td>cooking stoves, and cleared and rehabilitated roads and bridges. Pot racks and rubbish</td>
<td>management did not translate into improved practices, such as immediate repairs.</td>
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<td>pits and, to a lesser extent, self-made toilets promoted by program’s DRR messaging,</td>
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<td>were found in some non-intervention wards (i.e., light proof of replication).</td>
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<td>Tanzania (Tanzania Red Cross Society 2017): There was a significant change in the number</td>
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<td>of households with independent water storage containers.</td>
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<td>The Americas (AmRC 2016): Some 26 and 25 (out of 31) communities reported improvements</td>
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<td>in water storage and handwashing practices respectively.</td>
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<td>Indonesia (Indonesia Red Cross 2015): Respondents who had reported implementing at least</td>
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<td>two required practices for disaster preparedness rose from 4.3% to 34% (beyond the target</td>
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<td>of 25%). Additionally, endline results showed that 38% of households reported seeking</td>
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<td>information on potential hazards in the villages, 34% reported having agreed on a family</td>
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<td>meeting point, 33% reported having prepared a grab bag, and 16% reported participating in</td>
<td></td>
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<tr>
<td>a disaster simulation.</td>
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</table>
Why this conclusion matters

There is a growing appetite for proof that the huge investment in risk knowledge is paying off. Numerous actors seek stronger evidence that generating risk knowledge effectively leads to more frequent protective action across communities. Many evaluations articulate the common concern:

- **Haiti** (AmRC 2017): *Too much awareness raising and not enough concrete change.*
- **Indonesia (Aceh)** (Indonesian Red Cross 2014): *It is important that the project not only focus on knowledge, but also on demonstrated practice, and while dissemination of messages might be able to improve community knowledge, it does not necessarily improve the practice.*
- **Indonesia** (AmRC and PMI 2017): *The sustainability of knowledge and behavior related to preparedness, response and mitigation against disasters is still a question mark.*
- **Tanzania** (Tanzania Red Cross 2017): *The project’s size and duration of 3 years were rather too short for long-lasting and large-scale impacts—for a project that aimed at changing peoples’ mindset and behaviors.*
- **Rwanda** (Rwanda Red Cross Society 2017): *While the project produced some level of behavior change … Long-term organizational support and coaching is more conducive to achieving behavior change and socio-economic development outcomes than short-term support for unique projects.*

In sum, decades of investment in risk knowledge generation is starting to pay off. Along with marked progress, however, there is wide interest in seeing knowledge generation converted more visibly into tangible dividends. In fact, a common thread was that there is much assessing, awareness raising and training, but “not enough visible concrete change” (AmRC 2017).

3. Inclusion challenges persist

**What it is**

Inclusion reflects a fundamental belief in the rights and ability of people of different genders, ages, ethnicity, ability and other traits to participate in processes and decisions that directly affect them. In the context of community disaster preparedness, inclusion depends on the meaningful participation of all groups in the community, especially those that are more vulnerable, so that no one is left out of disaster preparedness plans and actions, and every person is safer as a result.
Trends

This meta-evaluation indicates that inclusion remains a challenge in the realm of gender equity. Despite decades of investment in raising awareness of women’s rights and the differentiated needs and capacities of women and men, in fewer than half of the evaluations was gender-sensitive disaster preparedness programming documented as effective or instrumental in achieving results. There were, however, some encouraging examples:

- **Haiti** (AmRC 2017): Training on gender was cascaded from team leaders to volunteers, and gender focal points were established to coordinate all gender-related activities. They also strongly promoted women’s participation in all activities (with the slogan *Plis fò, plis famn pou partisipè nan pwojè* or *More girls, more women to participate in the project*), and held sensitization events, such as women’s days and marches, to promote the role of women. As a result of their involvement and these events, more communities were reached by public health messaging and key disaster prevention messages were communicated to more women and girls.

- **The Pacific** (Oxfam, unpublished data): People from vulnerable and/or minority groups (female heads of households, widows and people with disabilities) were successfully engaged as a result of holding targeted sessions in which they were invited to talk, in small group meetings with other community members, about their different experiences of disasters. These were effective in raising awareness of their different needs and the ways in which they could contribute to community preparedness, and led to several becoming part of their community disaster preparedness committees where they helped to assess and address risk.

Few evaluations integrated age into their judgement of program quality, and most programs did not target specific age groups for either vulnerability or capacity reasons. Most examples of success were found in the internal evaluations, probably due to the organization’s strategic focus on youth. In addition to school-based DRR, examples involving youth included engaging young people as agents of change in risk reduction campaigns, and in recreation that promoted the community cohesion necessary for successful collective action on other issues of preparedness and resilience.

A few evaluations highlighted successful efforts to engage older people in preparedness, with specific benefits for them. In Vietnam (AmRC 2018), for example, the Viet Nam Red Cross Society employed social network-building as a disaster preparedness strategy, with the purpose of encouraging older people to support each other, which resulted in behavior change: *Older people told the evaluators (they) support each other more than in the past to prepare for disaster, not just when a disaster had happened.* In this way, when a disaster happens, they will be less reliant on help from other affected groups in the community and from external organizations.
Inclusion of people with disabilities in community preparedness appeared to be much less common. Only two (ZRCs 2017 and EU 2016) of the 24 evaluations noted examples of effectiveness. Ethnicity and minority groups were practically invisible in the portfolio, making it impossible to know whether programs did not include them, or evaluations did not consider them, or both.

**Why this conclusion matters**

Community preparedness programming is only effective if it actively involves all groups within a community. How can a community be considered disaster ready if, for example, women, who are often in charge of children and the sick, do not know what to do when flood waters are rising? The impacts of most hazard events are more pronounced for people who are already in situations of vulnerability, such as those experiencing food insecurity and disease. Successful preparedness programming depends on their involvement in risk assessment and in activities to help them anticipate, prevent and mitigate hazards. Communities are, in themselves, systems that require all parts to be operational and contributing to their overall resilience. Organizations that are cognizant of this have greater chances of success.

**How do contextual factors affect success?**

4. **Context analysis is insufficient to protect people and programs**

**What it is**

Entirely independent from but complementary to risk assessment (including VCA, risk mapping and parallel products), context analysis is critical to ground both the design and adaptive management of all preparedness programs. It includes analysis of tensions embedded in a community that could pose problems to the program, and of local inequalities that may be exacerbated by a program if not kept in check. Across the sector generally, practitioners do not invest sufficiently in understanding local settings and interactions: how the local context may influence a program and how the program, in turn, may change dynamics in the local context, potentially putting people at unexpected risk.

Context analysis is known by many other names. While Do No Harm (DNH) was coined by Mary Anderson in the 1990s for CDA Collaborative Learning Projects, this concept of carefully studying the context to improve programming was adopted and refreshed by RC/RC as the Better Programming Initiative (BPI). With backing from the Swiss Red Cross, IFRC is reviving the BPI to push for a more systematic application of context analysis as part of every program approval process. In the new version (BPI 2020), six context dynamics are considered. While all programs are encouraged to explore at least two (gender and diversity, and conflict sensitivity), the other four assess climate, urban dynamics, and access-constrained and long-term/sustainable development influences on programming.
Outside the Movement, context analysis is sometimes referred to as “political economy analysis” (UNDP, unpublished data). The Swiss Agency for Development and Cooperation developed the CEDRIG tool to ensure that programs are climate-, environment- and hazard-smart, and prevent the creation of new risk while protecting donor investment. Regardless of the name, the concept remains the same: assessing how to protect both people (relationships) and programs (investment). An acute understanding of local settings and humanitarian aid’s influence on them is key to effective programming.

**Trends**

In this meta-evaluation, context analysis was cited as the least effective of the 13 actions across the full model. Within AmRC, a few reports highlighted one effective use centered mainly on adapting programs to climate influences or urban dynamics. Context analysis was one of the action sets cited more frequently in external programs, even if not routinely examined. While inconsistently effective (i.e. some reports provided examples of both good and poor use), here too climate was the most frequently cited dynamic.

Just less than half of the external and only one of the internal evaluations explicitly or implicitly applied the concept of Do No Harm or BPI, the Federation’s equivalent. Conflict sensitivity (a key dynamic monitored within DNH/BPI) was not cited in design, or routinely checked in monitoring in the internal evaluations (and only rarely in the external evaluations). Conflict sensitivity, however, did appear twice as a lesson learned by AmRC. This strongly reinforces how critical it is to consider it early in design (before programs are launched) and systematically throughout program implementation.

**Why this conclusion matters**

While disaster risk assessment has become a regular feature of—and even an entry point into—preparedness programming, context analysis is still rarely a routine effort to guide program design and adaptive management. Context analysis tools are increasingly available to support such analysis through the full project cycle. When contexts are analyzed/monitored adequately, tensions are avoided, protecting the people that organizations support and the programs they implement. A community will be even more disaster ready when programs avoid—by design—the creation or complication of local power dynamics and tensions.

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6 The Climate, Environment and Disaster Risk Reduction Integration Guidance (CEDRIG) helps development and humanitarian actors “reflect on whether existing and planned strategies, programs and projects are at risk from climate change, environmental degradation and natural hazards, as well as whether these interventions could further exacerbate GHG emissions, environment degradation or risks of natural hazards.” While it is a context analysis, it is from an angle that does not focus on communities, gender and conflict per se.
What Makes a Community Disaster Ready?

5. Time required for disaster readiness is context-specific

What it is
International organizations supporting disaster preparedness are eager to understand what “time investment” is required for communities to become, and continue to be, disaster ready. Donors in particular want to be sure that aid is used effectively and efficiently, enabling the maximum number of at-risk communities to benefit. Both of these stakeholders are keen to identify what makes preparedness results sustainable and when external support can be responsibly scaled down.

Trends
Across the 24 evaluations, just under half mentioned exit or transition strategies. Even among those that did, threshold or outcome indicators were rarely used to signal that participating communities were ready for project activities and the funding from international actors to be scaled down. The required time for disaster readiness has not been systematically explored or tested, but the evaluations do reveal some conditions that could improve project design, budgeting and planning in this regard:

- The AmRC Indonesia (2014) evaluation found that sharing the cost of construction and improvement of small-scale infrastructure with the government was an effective exit strategy as it facilitated the subsequent transfer of responsibility for that infrastructure to the government. The evaluation did not specify a precise timescale, but implied that responsibility was assumed at the end of the three-year project. The timing of evaluations is problematic in this regard, because they are usually conducted in the last trimester of implementation and, as the Vietnam (AmRC 2018) evaluation explains: “As the activities have just been implemented, it is difficult to already assess the real sustainability achieved.”

- The Disasters and Emergencies Preparedness Programme (DEPP) evaluation (Harvard Humanitarian Initiative 2018) attributed the uniquely successful handover of an urban early warning early action (EWEA) system to local county government to the fact that it built on a previous project: “This project benefitted from a longer ‘effective’ timeline compared to the other projects. Without that existing work to build on, Urban Early Warning Early Action Project (Kenya) would likely have faced similar challenges as the rest of the cohort”. Unfortunately, evaluations rarely take into account this historical perspective or how long current partners have been working in and with the community, and what degree of trust has been developed. The relationship between partners’ organizational capacity and project results is another gap; the results of organizational assessment were not included in any of the evaluations in this study.
Understanding what makes people continue to volunteer is crucial both to the International Red Cross and Red Crescent Movement and for community preparedness in general. Both rely on developing and sustaining social capital, which depends on contextual factors. Several evaluations noted that if volunteers no longer had organized activities or opportunities for practical application, such as through deployment to other areas experiencing disasters, their level of engagement and skills diminished. In this sense, “time to readiness” must include both the time required to build capacity, and also the time required to build systems to ensure that social capacity is maintained.

Catholic Relief Services advises that preparedness/resilience program managers and planners include light-touch continuation after project end. What this entails depends on each project: in some, where partners continue to work on other projects, their mere presence may be adequate motivation for activities to continue. In others, there is an understanding that CRS would provide resources for early action or response in the event of a disaster.

In the Democratic Republic of the Congo, ACF (2010) successfully worked with representatives of the health ministry and other relevant actors to formulate a schedule for ACF’s withdrawal that would enable project outcomes to continue. This involved scheduling trainings and sessions for the transfer of skills, careful planning of responsibilities transfer between entities, timeframes for donation of materials, and a progressively more prominent role for the entities that would remain. As one evaluator commented: “The success of exit strategies rests on the degree to which they are created in a participatory manner. Investing time in fostering and participating in coordination platforms should be prioritized.”

For one of AmRC’s donors, Margaret A. Cargill Philanthropies (MACP), “how long?” has been one of its top learning questions for several years. It is testing a three- to five-year model, for which it has developed a set of indicators and a rubric to help assess when a community is disaster ready. The indicators relate to capacities to be measured at least annually using a rubric to assess and track progress.

Two examples of unsuccessful transitions also offer learning:

- In Haiti, AmRC (2017) had a transition strategy that involved supporting Red Cross branches to develop business plans and income-generating activities. However, at the time of the evaluation, most plans were delayed or unsuccessful, and the program had to close regardless. The evaluation does highlight, however, that the focus of an exit or transition strategy should be on local organizations rather than on expecting communities to be able to sustain all activities and outcomes on their own: “The recommendations of the evaluation are based on the premise that the objective of the AmRC is to build the capacity of the Haitian Red Cross to improve the resilience of populations.”
It suggests business ventures for HRC branches, combined with ongoing management, and legal and technical counselling, as the means to ensure that AmRC could exit while the community’s and local partners’ preparedness continued to grow.

The DEPP evaluation (HHI 2018) suggested that reliance on the availability of funding for continuing activities led to some organizations assuming that exit planning was not yet necessary. One key informant commented: “I think if people knew (a second funding round) wasn’t an option they could have thought from the very beginning how to strategically plan for that.” Understanding the resource context, including international, local and national funding sources, is an important precursor to making decisions on exits or transitions.

In addition to the above examples, data gaps that could have provided valuable insights were identified. Financial metrics, such as investment per capita, proportion of budget dedicated to coordination, or micro-mitigation projects, were not available for most of the evaluations. Human resources issues, such as the profiles and competencies of staff and volunteers, contact time with community members, and engagement with other stakeholders, were rarely assessed or commented upon in the evaluations. Even the status of previous preparedness investments and an analysis of what caused them to continue or fail were omitted.

The PEER Evaluation (AmRC 2014) presents an alternative perspective on “time for readiness.” It implies that if a program is achieving results, exiting should not suggest an end to its work: “the primary focus of future exit strategies should be on strengthening the capacities necessary to handover, rather than phasing out financial and human resources at the program’s conclusion.”

**Why this conclusion matters**

With limited resources, all external stakeholders in community preparedness have to plan for a time when they will scale down or stop funding. Learning how to design programs and develop budgets that allow sufficient time, resources and flexibility for successful transition in different contexts, and having monitoring systems that facilitate this, would be of great assistance to organizations committed to strengthening community preparedness.

6. **Mixed results and missed opportunities for early warning systems**

**What it is**

An early warning system (EWS) is well-recognized as a critical life-saving tool for floods, droughts, storms, wildfires, tsunamis and a range of other rapid- and slow-onset hazards. To be effective, an EWS needs four components:
What Makes a Community Disaster Ready?

- **Risk knowledge**: An understanding of the hazards in the area, and the vulnerabilities and capacities of the population.
- **Monitoring**: A system or service that monitors hazards and can detect changes in their behavior, or in the vulnerability of the at-risk population.
- **Response capability**: National and community response capacities such as in skills, equipment, materials and protocols to activate when needed.
- **Warning communications**: A system and the means to communicate risk information and warnings.

**Trends**

One of the major goals of the Sendai Framework for Disaster Risk Reduction is to “substantially increase the availability of and access to multi-hazard early warning systems and disaster risk information and assessments to the people by 2030.”

Progress is evidenced in the effective aspects of EWS cited in just over half of the evaluations, although most of these systems were deficient in at least one aspect. For example, in Haiti (AmRC 2017), an early warning system was introduced during the project but, according to endline monitoring results, only 25% of people knew where to evacuate to: “Extensive DRR sensitization campaigns were held at the community level and DRM training was extended to CBOs. The household survey however shows that about only 25% of households know what to do or where to go in case of natural disasters, which is much below the 75% target.” In the Philippines (AmRC 2019), community members participated in drills, but they were not connected to an early warning system. In both cases, the weakness in the EWS resulted in related aspects of the program being evaluated as gaps or lacking effectiveness. In addition, one of the challenges in evaluating EWS is that even if its four basic components—risk knowledge, monitoring, response capability and warning communications—are present and observable, the way they interact and the expected outcomes for the community are not visible until there is a hazard event or a simulation of one.

In the other half of the evaluations, EWS were conspicuous by their absence. For example, even in programs in countries of Latin America where seismic activity is high, EWS did not feature in program activities. And in some programs in Africa, where food security crises are frequent, no activities related to EWS were included in the program design, despite a strong emphasis on health and livelihoods, both of which are severely affected by disasters. One possible explanation for this is that wider resilience goals led to the overlooking of a fundamental for preparedness.

No fully sustainable or replicable examples of EWS were cited in the evaluations; the nearest being in the Disasters and Emergencies Preparedness Programme (HHI 2018), in which several parts of the EWS were found to be functional after the project funding ended. None of the programs included activities to hand over the EWS created, or to connect it to a wider system.

A challenge in evaluating early warning systems is that outcomes are not visible without a hazard or simulation.
In summary, while efforts are being made, there is room for improvement at the design stage, during implementation, and in formulating exit strategies.

**Why this conclusion matters**

In addition to their role in communicating an imminent event and triggering action, EWS can be a very empowering part of preparedness, because they enable community members to take proactive and timely steps to protect their own lives and livelihoods. On the other hand, when governments and organizations fail to include them in preparedness initiatives they are, in effect, neglecting an opportunity to reduce risk and empower the most vulnerable. Furthermore, when EWS exist but have weaknesses, community members may be given a false sense of security. Put simply, opportunities to develop or improve EWS are opportunities to prevent disaster losses in at-risk communities. Having an effective EWS in place is integral to knowing when a community is ‘disaster ready.’
What other learning emerges from this study?

7. Red Cross mandate and presence is suited to developing local preparedness capacity

What it is

Strengthening local preparedness capacity and local leadership for preparedness has been strongly advocated by the World Humanitarian Summit since 2015. In parallel, localization—or giving more power to those closest to threats and crises—is widely accepted as good practice. The IFRC’s Strategy 2030 promotes “an urgent shift of leadership and decision-making to the most local level.”

In the RC/RC, capacity development of national preparedness skills is reinforced through the auxiliary role of National Societies, and local capacity transfer is directed to communities, community volunteers and staff in branch offices. Strategy 2030 suggests that a signal of success in inspiring and mobilizing volunteerism is “evidence that we are able to connect with a whole new generation of young community-based changemakers … supporting them to design and deliver their own ideas and initiatives.”

Trends

Preparedness capacity development was a hallmark of the internal evaluations. Local capacity development was one of the most positively reported preparedness actions taken. In the AmRC model, local leadership—part of the ability to take action—was frequently reported in the internal evaluations as being effective. Effective activities included building technical sectoral capacity, mitigating risk on a local scale, and refining branch and volunteer planning skills for disaster preparedness. Planning was also strengthened by experience gained during emergency response operations.

This contrasts starkly with the external evaluations where the opposite was found: the ability to take action was reported as the least effective component. In the external evaluations, programs focused more often on multisectoral resilience building, much less visibly at the community level, and without a focus on local volunteers. In fact, local capacity surfaced as effective only twice in the external evaluations, with one example citing IFRC.

Why this conclusion matters

This conclusion is closely linked with many others. Building national and local preparedness capacity is seen here as benefitting from a systems approach (see Conclusion 1) because learning new skills is of limited value if those skills cannot be applied and put to the test before they are forgotten.

A system-wide approach needs to create a demand for those skills and to incentivize their use. Local leadership in this study is directly related to connectivity (when communities are better linked to their authorities) and sustainability (when leaders have skills solicited by communities). A community is more disaster ready when its leaders are able to connect it to outside resources (administrative and private sector) and when community demands insist that local leaders understand and can adapt to complex and fluid situations. Finally, developing local capacity is closely entwined with linking risk knowledge to visible preparedness actions (Conclusion 2).

Evidence shows that the RC/RC mandate already fills a gap in international humanitarian action. Applying the new services of enabling and connecting (as promoted and tested by the Road Map to Community Resilience), RC/RC is visibly building local preparedness capacity (enabling) and connecting communities to national systems. The marked difference between the internal and external preparedness evaluations points strongly to a comparative advantage for RC/RC with a more enduring local presence in countries than external actors. In fact, fully capacitated and motivated disaster-ready community volunteers may be the most promising sustainable solution. Disaster readiness may gain from modelling the IFRC’s Strategy 2030, narrowing the focus of preparedness capacity onto volunteers to enable them to lead their community through the next disaster.

8. Absence of shared preparedness model limits learning

What it is

A preparedness model or theory of change is understood as a framework to guide the design, monitoring and learning about the combinations of elements that justifiably lead to disaster-prepared or disaster-ready communities. Anchored at a global portfolio level, such a model will gain value when it is flexible enough to facilitate systematic contextualization and ownership. Indeed, Strategy 2030 supports “shifts to … models that are localized and regional.” When jointly designed or agreed among pertinent levels of an organization and partners, such a model also fosters learning across contexts, levels, evaluations and even actors.

Trends

The Sendai Framework for Disaster Risk Reduction and its predecessor, the Hyogo Framework for Action, are the most well-known global models in the sector. Their focus is a comprehensive concept of disaster risk reduction. For example, among the four priorities of Sendai, only one (i.e., Priority 4) explicitly mentions “preparedness.”

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8. IFRC. 2016. Road map to community resilience: Operationalizing the framework for community resilience. International Federation of Red Cross and Red Crescent Societies.
Upon closer examination of the Sendai priorities, AmRC’s community preparedness theory of change, and the Disaster-Ready Communities model of MACP (a preparedness-focused donor of AmRC and several peer agencies), all three capture three of the four Sendai DRR priorities, including preparedness (see Table). There is weaker alignment between Sendai Priority 3 and the connectivity components of the AmRC and MACP models (following row). This leads to the understanding that preparedness or disaster readiness in AmRC and MACP respectively are more comprehensive models than their names suggest.

<table>
<thead>
<tr>
<th>Sendai</th>
<th>AmRC community preparedness theory of change</th>
<th>MACP Disaster-Ready Communities model</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Understanding disaster risk</td>
<td>Preparedness component: Knowledge and awareness</td>
<td>Knowledge and awareness (awareness of policies/practices, context knowledge, risk mapping/assessment)</td>
</tr>
<tr>
<td>2. Strengthening disaster risk governance to manage disaster risk</td>
<td>Preparedness component: Self-organization (committees, plans and response teams at many levels)</td>
<td>Self-organization (coordinated response, plans and social capital)</td>
</tr>
<tr>
<td>3. Investing in disaster reduction for resilience</td>
<td>Preparedness component: Connectivity (other communities, private sector, local government, other sector experts)</td>
<td>(see also Connectivity: access to resource, below)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Connectivity (access to resources, partnerships and robust communication)</td>
</tr>
<tr>
<td>4. Enhancing disaster preparedness for effective response, and to “Build Back Better” in recovery, rehabilitation and reconstruction</td>
<td>Preparedness component: Ability to take action (evacuation, micro-mitigation, EWS)</td>
<td>Ability to take action (mitigation, local capacity, local leadership, enabling environments)</td>
</tr>
</tbody>
</table>

No preparedness model was found to explicitly anchor all the evaluations studied. Surprisingly, fewer than half the external and only a quarter of the internal evaluations referred to or reported against Sendai priorities (or its Hyogo predecessor). Resilience as a related but broader model (but which almost always contains preparedness) is more common outside of than inside AmRC.

AmRC’s community preparedness theory of change was not yet used as a framework to guide the internal evaluations (and only four of the 12 internal evaluations published after the ToC was developed in 2018/19 could have, see Annex). Instead, many of the evaluated internal and external programs created their own models or theories of change on which evaluations reported.
While this is good practice, not having a higher-level or shared framework greatly complicates the ability to examine differences in content, context and coverage in preparedness programming. This hinders learning about the process of designing and implementing preparedness programs, both inside and beyond AmRC.

**Why this conclusion matters**

The lack of a common model runs parallel to a dearth of literature on the topic of preparedness. While the American Red Cross provided the internal evaluations for this study, the external evaluations were identified using robust search criteria seeking meta-evaluations and multi-country evaluations of disaster preparedness, readiness or disaster risk reduction more generally from 2010 to 2019. An absence of thorough studies on preparedness since 2010 is noteworthy. Of the 12 external reports, only three featured any form of “preparedness” in their study title and five used “DRR,” two had “resilience” and two featured “response.” It has been highlighted repeatedly that no visible compendia on preparedness exist e.g., by SDC DRR Evaluation in 2019.

Since 2009, the United Nations Office for Disaster Risk Reduction (UNDRR, formerly UNISDR) has produced the Global Assessment on Disaster Risk Reduction, or GAR, every two years. Its mandate is to compile the most cutting-edge global knowledge on DRR with a particular focus on risk knowledge. In the latest edition (2019), preparedness is not a main focus, nor does the volume shed any light on the action of preparedness (e.g., while preparedness is mentioned many times, it is often in passing, i.e., the term is not featured in a title or subtitle), perhaps pointing to limited available preparedness studies. Furthermore, the few times it refers to “community preparedness” or “community-based DRR” is in the context of examples from RC/RC, an indication that RC/RC is in the vanguard of preparedness thinking. This is also evidenced by the AmRC and IFRC’s hosting of the Global Disaster Preparedness Center, a hub for preparedness learning and innovation.

The above discussion points to a lack of clarity in 2020 on the differences between preparedness and DRR, and a sustained gap in the knowledge base on community preparedness. This result presents a golden opportunity for AmRC, beginning with the existing community preparedness theory of change and this study.
Cyclone preparedness volunteers gather during a cyclone drill in South Khali, Bangladesh. The American Red Cross works alongside the Bangladesh Red Crescent to prepare families living near the coast and deltas for emergencies.

Photo by Brad Zerivitz/American Red Cross
RECOMMENDATIONS

Based on the findings and conclusions of this meta-analysis, to strengthen community preparedness and increase the sustainability and replicability of successful actions, stakeholders should:

1. **Foster a systems approach**
   - Develop multisectoral preparedness through partnerships with the most appropriate actors with the expertise, interest and resources to address the community’s priority needs in risk reduction.
   - In theories of change or models, emphasize the importance of connections and partnerships for sustainability and potential replication.
   - Cultivate relationships with government at all levels, to garner their interest in replication of successful preparedness practices. Consider offering capacity building as a starting point for engaging with them.

2. **Ensure risk knowledge leads to action**
   - Systematically assess and compare the value of risk-awareness trainings, campaigns and risk assessments to determine the strengths and weaknesses of each, leading to indicators or a process that tracks movement from knowledge to validated action.
   - Using simple knowledge-to-action metrics, train volunteers in high-risk communities to identify and document protective behaviors following early warnings, hazard events and disasters.
   - Engage communities in behavior change studies, to answer questions such as: what makes people take protective action, when are they most likely to do so, and how best can they be influenced?

3. **Make inclusion a reality**
   - Invest in context analysis to equip community leaders and supporting organizations with information about community and local demographics.
   - Using knowledge of successful experiences of inclusion, target activities according to needs and capacities, and use disaggregation by demographic when monitoring activities and outcomes, to identify any problems while there is still time to address them.
   - Scale up the education of staff, volunteers and leaders on the specific needs, capacities and vulnerabilities of all groups, and provide budgets that enable them to organize activities appropriately, implement sensitively, monitor smartly, and ensure that the program benefits all.
   - Update organizational ToCs to incorporate gender and inclusion.
4. Commit to context analysis
- Actively embrace the concept of context analysis in all aid programs, as a conscious reflex at every juncture and for every service delivered.
- Decide what is required (i.e., a minimum process and format) for such a context analysis to be thoughtful and thorough, but easily assimilated. It must be more than a compliance mechanism.
- Make context analysis a visible part of every proposal template, such as with a checklist of concise questions. Make it an integral part of monitoring and evaluation, giving managers incentives to adapt programs to match evolving risk and dynamics.

5. Test and contextualize conditions for transition
- Encourage donors to support budgets that build evidence on timeframes for sustainable community preparedness.
- Use theories of change to systematically monitor and report on the time required for projects to implement each element of the theory, and task evaluators to verify the results and examine contextual variables. Share this information with others in the sector to develop an evidence base.
- At the start of new projects, convene community leaders and all relevant actors to share expectations, information about resources and limitations, status and lessons learned from previous preparedness investments in the location, and make a transition strategy for when external resources will be reduced.

6. Invest in early warning and early action
- Ensure all disaster preparedness or disaster risk reduction programs include EWS-related activities, focusing on strengthening the four basic components of disaster preparedness, and promoting inclusion.
- Make a functioning EWS one condition for exit or transition.
- As an incentive for EWS, consider incorporating funds for anticipatory action within program budgets. Knowing that resources exist to help the community respond to an early warning is encouraging for all stakeholders.

7. Capitalize and scale up Red Cross local preparedness capacity
*(Recommendation targeting RC/RC actors)*
- Enable local communities, households and individuals to be first preparers as often as first responders. Strengthen partnerships with local Red Cross and Red Crescent Movement actors as a means to sustain the impact of preparedness investments.
- Put the RC/RC volunteer model to the test. Equip volunteers to transfer preparedness skills to their communities. Use volunteer preparedness capacity as a scaled measure of community readiness. Only when volunteers have these skills can RC/RC branches gradually shift their focus to the next community in need, replicating successful approaches.
Set up a simple monitoring system to track the transition of volunteers through various levels of preparedness, until they are able to effectively lead the community through the next disaster or can train other volunteers in a nearby community to do so.

8. Pilot a shared model for community preparedness

(Recommendation targeting AmRC)

- Disseminate widely the chosen model/ToC across the AmRC preparedness portfolio, requesting programs to build proposals around it and welcoming contextualization.
- Test the model fully in multiple contexts. Require reporting on it in project evaluation terms of reference, even if the model was not explicitly used or mentioned.
- Plan opportunities to gain insights from the model, adapt it to align with proven preparedness practice, and adapt programs to benefit from the model as a learning instrument. Consider a “state of community preparedness” review (i.e., every two years) that could become a compendium of learning or even a flagship document published by the Global Disaster Preparedness Center.

9. Develop a common evaluation framework for community preparedness programs

(Recommendation targeting AmRC)

- Develop an evaluation framework for preparedness programming to enable common learning across country-level projects.
- In the evaluation framework, identify evaluation questions that are grounded in the ToC and align with the learning priorities of multiple stakeholders; for example, the questions generated for this study around sustainability, replicability and time to impact.
- Incorporate context analysis and examination of cross-cutting issues of gender and inclusion into the evaluation framework.
REFERENCES

European Union. 2016. Evaluation of DG ECHO’s Actions on Building Resilience in the LAC Region.
IFRC. 2016. Road Map to Community Resilience: Operationalizing the Framework for Community Resilience. International Federation of Red Cross and Red Crescent Societies.
Indonesian Red Cross. 2015. Final Evaluation Report: Integrated Community Based Health and Disaster Risk Reduction Project Wonogiri - Central Java, Indonesia
ANNEX 1. RESEARCH FRAMEWORK

The research framework for this meta-evaluation and the subsequent study of external resources was developed by IRMA to include the key questions posed by AmRC in the terms of reference, and the main features of AmRC community preparedness theory of change. The questions are featured in table below:

<table>
<thead>
<tr>
<th>Question</th>
<th>Sub-questions</th>
</tr>
</thead>
</table>
| 1: What makes communities disaster ready? | ■ What activities and components of preparedness and risk reduction programming have demonstrated effectiveness in making communities disaster ready?  
■ What programmatic gaps are identifiable in the portfolio? |
| 2. What makes outcomes replicable (and scalable)? | ■ What activities/components, approaches and methodologies of community preparedness programs ensure replicability? |
| 3. What ensures sustainable impact? | ■ What activities/components, approaches and methodologies of community preparedness programs have ensured meaningful and sustainable impact? |
| 4. When is a community disaster ready? | ■ When is a community understood to be disaster ready? What indicators, if any, are used to determine/suggest a responsible exit? |
| 5: What is the right level of AmRC ISD effort to invest to make a community disaster ready? | ■ What level of effort (HR, staff, length of programs) has been invested to make a community disaster ready, and with what results? |
| 6: How do contextual factors affect success? | ■ How do contextual factors affect the success of past preparedness interventions?  
■ Are there any common enabling factors supporting effectiveness of community DP programming across different contexts and countries?  
■ Conversely, are there any context-based barriers to effective programming? |
| 7: What other learning emerges from this study? | ■ What else should AmRC consider?  
■ What should AmRC require in terms of information and evaluation? |

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9. This question was not answered due to the absence of a full set of relevant data across the AmRC evaluations provided.
ANNEX 2. METHODOLOGY

This study is a meta-evaluation. It entailed an in-depth analysis of 24 evaluation reports to glean learning and produce knowledge of trends on effective preparedness action.

Source material
A total of 24 evaluation reports were selected from a much larger set that establishes learning on disaster risk reduction and disaster preparedness, published between 2010 and 2019. They were analyzed in two phases:

- Phase 1/Internal: Half of the reports detailed results of AmRC programs or projects. Internal evaluations were provided by the AmRC commissioners of this review.
- Phase 2/External: The other half is comprised of evaluations identified using robust search criteria seeking published meta-evaluations and multi-country reviews. Priority was given to reviews with “disaster risk reduction” (DRR) or “preparedness” in the title. The aim was to have a roughly comparable and balanced set across actors and geographies in the 2010–2019 period.

The set of 24 span a wide range of contexts and actors, as portrayed in table below.

<table>
<thead>
<tr>
<th>Evaluation Reports</th>
<th>Type of evaluation</th>
<th>Actor evaluated</th>
<th>Geographical Focus (many)</th>
<th>Phase of the Study</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sum of Report Pages</td>
<td>Meta-evaluation</td>
<td>Multi-</td>
<td>Multi-Prog/</td>
</tr>
<tr>
<td>Year</td>
<td>NbRpts</td>
<td>Fages</td>
<td>Country</td>
<td>Project</td>
</tr>
<tr>
<td>2010</td>
<td>1</td>
<td>52</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2012</td>
<td>1</td>
<td>34</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2014</td>
<td>2</td>
<td>90</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2015</td>
<td>3</td>
<td>203</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2016</td>
<td>2</td>
<td>139</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2017</td>
<td>8</td>
<td>675</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2018</td>
<td>4</td>
<td>536</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2019</td>
<td>3</td>
<td>188</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Grand Total</td>
<td>24</td>
<td>2017</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

Internal evaluations reviewed were shorter single program or project reports (not counting the country summaries for RITA), excluding the MENA region and predominantly in Asia/Pacific (all for RCRC movement). External reviews featured longer reports, had a wider range of evaluation type (no single project reviews) and of actor evaluated, covered all regions with the fewest in MENA, and reflect DP/DRR practice for on average 15 countries per report.
Lists of the 24 evaluations are found below (with full titles provided in the References).

<table>
<thead>
<tr>
<th>Phase 1/Year</th>
<th>Report Name</th>
<th>Year</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. 2017</td>
<td>Zimbabwe Red Cross BRACES Final Evaluation Report.docx</td>
<td>2017</td>
<td>Zimbabwe</td>
</tr>
<tr>
<td>8. 2017</td>
<td>CNDP Final Evaluation Report</td>
<td>2017</td>
<td>Haiti</td>
</tr>
</tbody>
</table>

### Coding

Each of the 24 evaluation reports was uploaded and parsed in Dedoose, mixed methods research software, and coded in two passes.

- **Pass 1/Criterion code:** This sought anything that an evaluation reported as “effective,” “successful” or generally working well, and their opposites (“ineffective,” “unsuccessful,” etc.). The same was done for “replicable” and “sustainable” and their opposites. These terms form part of the set of six normative criteria promoted by the Organisation for Economic Co-operation and Development's Development Assistance Committee (DAC) for evaluation quality.11

- **Pass 2/Action or Approach code:** Once all documents had been coded on the first pass, excerpts already tagged with an evaluative criterion were given an additional code by a different analyst to reflect one or more of the 13 AmRC community preparedness model action sets. In this pass, Criterion codes (from round 1) were assessed with a new perspective: which community preparedness activities, if any, were concerned? Community preparedness activities were drawn from the AmRC community preparedness theory of change. Beyond those actions, and wherever found, excerpts were also coded to correspond with an approach, such as multilevel or multisectoral, and/or reporting on an inclusion factor, such as age or disability.

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10. Coding is the process of assigning a code or meaning to an excerpt of the document, aligned to coding guide.
The aspect of co-occurrence is key to this approach. This reflects text that is tagged with a Criterion (i.e., Phase 2) and a specific community preparedness action or approach. As this research did not set out to map preparedness actions, here we tracked which of the AmRC activities are indeed most effective/replicable/sustainable and under which circumstances. Co-occurrence is a technique that enables us to track this most efficiently and lends itself to light quantification to get a sense of the breadth across the portfolio.

**Analysis**

In the analysis phase, the multiple layers of coding enabled the detection of trends in co-occurrence of the criteria, actions, approaches and inclusion factors. Exploring the double-tagged excerpts in greater depth enables an understanding of the dynamics and greater specificity on the activity implied.

What surfaced was the frequency of reports (internal or external, but not frequency of excerpts) that highlighted, for example, effective mitigation measures, sustainable mapping efforts, or connections that promoted replication. Comparison of this frequency and examination of the content of the coded excerpts in relation to good practice in the fields of DRR, community disaster preparedness and development programming in general led to the conclusions and recommendations presented in the report.

Fully triangulated with author expertise, consultations with key informants and literature, all of the statements in the report above are anchored in the frequency (or absence) of co-occurring codes, especially when comparing between the internal and external landscape, and relative to sets of actions found in the theory of change. While the numbers are available upon request, it was deemed more interesting to describe the trends and their meaning then to focus on the counts.

**Desk and key informant interviews**

Simultaneously with the meta-evaluation coding, and to enhance both phases of the review, a set of external literature/guidance documents was consulted, and key informants were interviewed as follows:

- **Phase 1/Internal**: 4 individuals were interviewed, representing IFRC and three Partner National Societies (PNS).
- **Phase 2/External**: 3 individuals were consulted representing Oxfam, CRS and MACP.

<table>
<thead>
<tr>
<th>Part 1/Internal</th>
<th>Part 2/External</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raimond Dujsens, Danish Red Cross</td>
<td>Amy Hilleboe, Catholic Relief Services</td>
</tr>
<tr>
<td>Caroline Zastiral, British Red Cross</td>
<td>Marion Cabanes, Oxfam</td>
</tr>
<tr>
<td>Anne Mette Meyer, The Netherlands Red Cross</td>
<td>Representative of Margaret A. Cargill Philanthropies</td>
</tr>
<tr>
<td>Bruno Haghebaert, IFRC</td>
<td></td>
</tr>
</tbody>
</table>

12. Frequency (or counting) of excerpts in a report can be easily swayed by source material that tends to be limited in thematic scope or to repeat main points. For this study, the only frequencies analyzed were of reports, not excerpts within them.
Limitations
This study is subject to the same limitations of any meta-analysis. These include:

- **Heterogeneity of source material:** The evaluations studied were designed with different terms of reference and content requirements. This may introduce selection bias. Some contextual (internal and external) data for example were not found in the reports, thus preventing IRMA from adequately answering some questions.

- **Irregular quality:** The analysis depends on the quality of the individual evaluations. This may introduce a measurement bias (if evaluations inadequately measured preparedness) or a publication bias (when only the most favorable findings were published).

Given that a main purpose of even weak evaluations is to report on standard criteria, tracking co-occurrence trends provides a compelling and readily replicable snapshot of the community preparedness landscape.

As with all meta-evaluations, all the positive/negative codes reflect what was found in the evaluation reports. This review holds no judgement on the quality or completeness of the evaluations or on the subject programs being evaluated.
ANNEX 3. AMERICAN RED CROSS THEORY OF CHANGE

In Peñalosa in the Philippines, community leaders have repurposed a gas cylinder as a bell to warn residents of evacuation orders for impending emergencies. The American Red Cross and Philippine Red Cross help communities prepare for disasters.

Photo by Brad Zervitz/American Red Cross