Guidance Note: Vulnerability and Capacity Assessments
Guide to using existing VCA tools & methodology ensuring a socially inclusive approach
UNICEF Kenya Country Office
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“The best way to know .. [an individual’s] .. needs and solutions, and to design and assess programmes, is through direct dialogue with..women, girls, boys and men – and involving them in programme design implementation, monitoring and evaluation.”

Introduction²

Background and summary findings

Vulnerability and capacity assessment (VCA) is a methodology that uses participatory tools that enable communities to identify their own capacities and vulnerabilities in relation to disaster management, developing mitigation strategies and building resilience to cope with future hazards. It is widely used by various organisations, including governments, NGOs and the Red Cross/Red Crescent Societies as part of their efforts to make development more sustainable, contribute to disaster risk reduction (DRR) and to assist communities in adapting to climate change.

UNICEF recognises the utility of VCAs and existing programmatic guidance³ outlines what information should be generated and how it will feed into programming. Yet the guidance is less explicit on the following practical issues:

- How should UNICEF conduct a VCA? i.e. through partners or through the development of a UNICEF-specific tool, which would meet UNICEF’s principles of gender equality and child participation
- What level (national/grass-roots/provincial) should a VCA take place?

These are the two areas of enquiry that UNICEF Kenya (KCO) sought to explore and during 2009, in a pilot project, VCAs were conducted in two newly demarcated districts that country-level analyses had highlighted were areas of highest disparity for child survival and were repeated vulnerability to disasters.

The validity of the VCA tool was reinforced by feedback from both UNICEF staff and partners as an entry point to:

- Advocate for greater engagement of children and women as well as other marginalised groups;
- Gain greater understanding of the vulnerabilities, capacities, disparities on the ground via a qualitative, versus a quantitative assessment, which can then lead to better programmatic work/ emergency preparedness and greater engagement with disaster risk reduction (DRR)/ climate change paradigms;
- Greater partnership – coordination and capacity-building opportunities with government and partners;
- Enhanced support to district structures in terms of disaster management.

Recommendations

1. It was clear at an early stage in the project that UNICEF has much to learn from other organisations related to VCA and the main recommendation from the pilot is that UNICEF should not develop its own VCA methodology but should conduct VCAs in partnership with another organisation which systematically uses VCA-type methodology.

2. VCAs usually take place at grass-roots level, yet the aim of this pilot was to assess whether it is possible to adjust the focus of a VCA to the district level, which is generally the lowest level of programmatic intervention for UNICEF in Kenya.

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¹ IASC Gender Handbook
² This work was made possible through the support of the Norwegian Government to strengthening the integration of gender into UNICEF’s emergency programmes.
⁴ Country Programme Document and the Analysis of the Situation of Women and Children (SITAN)
While UNICEF in Kenya does support community-based interventions, the focus of implementation is usually the district where there are representatives of most line ministries as well as a district management structure related to disasters and emergency preparedness and response. It was also noted that the participatory nature of VCA methodology is not suited to a national level assessment. The pilot proved that this was the case and the second recommendation is that the VCA takes place at the lowest level of programmatic intervention.

3. Despite being designed as a participatory approach, however, VCAs can be non-inclusive and this is a particular risk when conducting them at district level based on assumptions that the participants will reflect the diversity of the district. Understanding this is important because it is possible to counter them through good planning and ensuring that a socially inclusive approach frames the entire VCA. This reinforces an additional role for UNICEF in terms of its advocacy related to implementation of the CRC, CEDAW and the gender policy.

4. By adjusting the traditional focus of VCAs from the grass-roots to district level, KCO was able to show, in this pilot project that VCAs are able to meet the expectations articulated in the PPPM (see ANEX) but the exercise highlights the need for UNICEF to revise the PPPM in order to provide clarity and more detailed guidance for COs on how to utilise the methodology. At a minimum these should include:

- Recommendation that VCAs should focus on the lowest level of programming intervention and clarification on how national risk assessments, grass-roots and district-level VCAs are related
- A list of resources for COs to refer to and/or identify which tools / partners serve the operational and programming needs of UNICEF best
- A checklist or other tool for ensuring a socially inclusive approach and/or child centred approach is applied

Way forward
This document consolidates the learning from the pilot project which is strongly based on the practical experience of using a) Vulnerability and Capacity Assessment (VCA) as developed by the International Federation of the Red Cross and Red Crescent Society (IFRC) and b) World Vision’s Community Owned Vulnerability and Capacity Assessments (COVACA). It provides an overview of the purpose and background of the pilot and the main findings, it includes a list of resources, a summary of selected VCA-type methodologies, explains how some of the participatory tools can be made socially inclusive and provides a step by step guidance for how UNICEF can apply VCAs. Although initially intended that the guidance be of use to KCO staff, it is hoped that the work will feed into more global policy and practical work on DRR.

Based on the pilot, it is anticipated that there will be a more systematic application of VCA within KCO’s current programme cycle (2009-2012) and lead

VCA methodology
VCAs are participatory, usually grassroots, exercises whereby communities are facilitated to explore hazards they are exposed to, identifying their vulnerability in relation to those hazards and then articulating the capacities they, and others, have to manage the risks. VCAs are closely linked to DRR and they are a logical link between development programming and emergency response. By reducing vulnerability through developmental intervention, UNICEF can increase the likelihood of communities to deal with hazards, thus reducing their vulnerability.

An “in-depth vulnerability analysis helps to define underlying causes of potential crises, and to identify vulnerable children and women and local coping capacities on which to build” UNICEF (PPPM)

A VCA can identify strategies and an action plan for a community to become more resilient and mitigate the impact of disasters. VCAs often have a strong capacity building element and participants learn tools that they and their communities can then apply, thus enabling them to become more empowered in the face of disaster.

There are many VCA frameworks which incorporate tools used in Participatory Rural Appraisal (PRA). While similar in terms of the tools they use, they are also specific in terms of the needs of those that developed them.
to a KCO DRR strategy including district-level implementation, and enhanced focused on DRR in education.

**Kenya Pilot Project**

UNICEF Kenya Country Office conducted a pilot project from July to December 2009, aimed to investigate UNICEF’s engagement with VCA methodology, given the lack of direction within existing UNICEF guidance and absence of analysis of how it can positively impact on UNICEF’s work. Additional core aims of the pilot were to meet UNICEF’s child-focused objectives, reflecting also the growing literature on the role of children in DRR as well as to build on previous work in KCO to strengthen gender equality programming in emergencies.

“Preparedness and risk reduction activities that take full account of gender differences enable UNICEF, and its partners, to respond more completely when emergency strikes, and to “build back better” through the immediate establishment of rights-based processes and enhanced gender equality in the early post crisis and recovery phases, so that any opportunity for positive transformative change is not missed” UNICEF draft gender policy (unpublished)

The main output of the pilot was the development of guidance that would be of use to UNICEF staff and partners both within Kenya and elsewhere.

The Kenya pilot focused on two main areas of enquiry:

a) **How should UNICEF conduct VCAs, i.e. through partners or through the development of a UNICEF-specific tool, which would meet UNICEF’s principles of gender equality and child participation?**

b) **Can VCAs be adapted for use at district level to effectively serve UNICEF’s programming needs?**

In order to answer the above, the pilot commenced with a review and analysis of UNICEF’s existing guidance; an examination of the different VCA-type methodologies, including an assessment of gaps in the methodology related to gender and children and, following the identification of organisations which used VCA in Kenya, establishing partnerships for pilot testing of two district level VCAs.

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**Existing UNICEF Guidance**

UNICEF COs are advised (PPPM; SITAN Guidelines) to conduct VCAs to identify threats to children and women. VCAs should identify hazards/threats that may lead to an emergency, those who are most at risk, capacities and underlying vulnerabilities and is expected to assist COs to:

1. Identify strategies to strengthen the ability of the vulnerable population to cope with emergencies;
2. Identify emergency mitigation interventions;
3. Implement an EWS;
4. Develop contingency or preparedness plans to facilitate rapid emergency.

In recognition of the link between climate change and risks for children, the SITAN Guidelines elaborate the link between VCAs and climate change describing how a VCA will: Give greater attention on how Climate Change impacts on children among populations living in greatest poverty and in greatest vulnerability...

VCAs rely on past experiences while climate change is about the predicted changes in the nature or frequency of natural events. VCAs are a tool for capturing local perspectives on how climate is changing and how people are already adapting. It is also an important entry point in preparing people to deal with change and share information that might not be readily available to them.

**Yet existing guidance lacks clarity on how to conduct a VCA, the tools to use and the level a VCA should take place.**

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18 Sources for children and DRR include: Children in Changing Climate (CCC) Initiative – IDS, Plan, Save the Children and UNICEF, UNICEF’s Medium Term Strategic Plan (MTSP), Second Global platform on Disaster Risk reduction (2009)

19 This pilot was partially funded by EMOPS through a gender in emergencies project, which deployed consultants to several COs including Kenya (Aug. 2008 – Dec. 2009)
Following a review of tools, discussions in-house, with UNICEF HQ colleagues and meetings with partners in Kenya, it became clear at an early stage in the pilot that UNICEF had valuable lessons to learn from other organisations in using VCA methodology.

Consultations in Nairobi resulted in the establishment of two important partnerships with Kenya Red Cross Society (KRCS) and World Vision Kenya. Both organisations use VCA-type methodology as part of their programming but use different tools. KRCS uses the VCA tool developed by the International Federation of the Red Cross and Red Crescent Societies (IFRC) and World Vision, the Community Owned Vulnerability and Capacity Assessment (COVACA). The benefit in partnering with two different organisations was that UNICEF was able to learn from different approaches. Both KRCS and World Vision were enthusiastic about taking part in the pilot and also willing to adapt their methodology and focus for their own learning purposes. Furthermore, they both had a field presence in the areas where UNICEF has a programming focus, namely Northeastern and Western/Nyanza Provinces.

The first pilot VCA took place in September/October in Tana Delta District with KRCS. The exercise benefited from additional technical support provided by the regional office of IFRC. This was particularly valuable given that VCA is an IFRC tool and has over ten years experience in its application. In December, the second pilot, a COVACA, was conducted in Nyakach with WV. KRCS and UNICEF co-funded the Tana Delta VCA, while UNICEF funded the Nyakach COVACA, with WV covering staff costs.

In both cases, the partners provided the core technical expertise related to VCA and UNICEF staff from the Garissa, Kisumu and Nairobi offices were participants. UNICEF did, however take a key role in:

- re-focusing the level of enquiry to district level, which was new for both partners, thus ensuring greater linkages with district administration. The approach for gaining that district-level analysis differed slightly between each VCA yet overall the pilots showed that methodology can be successfully applied at district level and also

Social Inclusion

A human rights-based approach to programming (HRAP) recognises the rights of all people regardless of their differences to participate in decisions that affect their lives and experience has shown that ignoring those rights can be detrimental not just for those particular groups of people but for society as a whole.

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20 Only the PVA tool is explicit that PVA can be done at district level and national/international level, although this is part of the process that links the community level PVA with decision-makes and not a stand-alone PVA. The Zambia Red Cross did also conduct a district VCA and the report can be found at.
Gender inequality often results in women’s exclusion from decision-making; children are often not factored into preparedness and their participation is overlooked; many societies also tend to isolate minority groups and those who are perceived as different, such as the poor, the illiterate, homosexuals etc.; the main decision-makers tend, therefore, to make assumptions about the needs and abilities based on their own perspectives. Yet VCAs can actually be conducted without the inclusion of these perspectives, unless a socially inclusive approach is explicitly factored into the methodology. Ensuring such an approach was a major contribution of UNICEF to the VCAs that were conducted during the pilot and showed that VCAs provide one opportunity to put into practice key elements of UNICEF’s gender policy as well as the HRAP. The benefits of gaining a range of perspectives will identify inhibitors to social development, particular vulnerabilities requiring greater advocacy and entry points for programming to enhance resilience.

The term, social inclusion, was adopted in this exercise because the approach goes beyond the issue of mainstreaming gender and ensuring child participation, which were the original intentions. A socially inclusive approach goes further and incorporates the marginalised as a whole; people who are excluded because they are living with disabilities, with HIV/AIDS, because they are a small tribe, or because they live outside the norms of the society in which they live (see TABLE below).

In some cases the strategies for following an inclusive approach are the same, but where relevant, specific strategies are suggested in the Step-by-step Guidelines. This approach essentially promotes a questioning approach whereby ALL people regardless of the differences between them are considered according to their vulnerabilities and capacities so that plans and responses are not generic. This approach is consistent with UNHCR’s principle of Age, Gender and Diversity Mainstreaming and the SPHERE Standards. See BOX for more details on marginalisation.

Figure 1: In one village a wheelchair bound man who was observing from the sidelines had to be invited to participate, thus illustrating that one cannot assume PWDS will automatically be included by a community and that more significant outreach may be necessary.

KCO VCA PILOT PROJECT OVERVIEW (July – December 2009)

- Desk review of tools;
- Consultations with DRR expert, UNICEF HQ Geneva;
- Meetings with actors who use VCA methodologies – identification/establishment of partnerships;
- Advocacy/support a) socially inclusive approach and b) district-level analysis;
- VCA pilot testing - 2 different approaches;
  - VCA in Tana Delta District, Coast Province, with IFRC/KRCS (27th Sept. -9th Oct. 2009);
  - COVACA in Nyakach, Nyanza Province, with & WV (1st – 3rd Dec. 2009)
- De-briefings, analysis and development of Guidance Note.
<table>
<thead>
<tr>
<th>PEOPLE WHO MAY BE MARGINALISED</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>People living with HIV/AIDS (PLWHAs)</strong></td>
<td>In many communities there is continued stigmatization of PLWHAs. This stigmatization is likely to contribute to exclusion from community decision-making surrounding disaster planning and early warning systems. A disaster may have additional impact on PWLHA who have specific care and treatment needs and who may be cut off from those services and support networks. PLWHAs still have responsibilities, dependents and a role to play in society. Engaging in VCAs will contribute to ensuring their specific needs and the needs of their families can be planned for and impacts of disasters are mitigated.</td>
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<td><strong>Persons with Disabilities (PWDs)</strong></td>
<td>PWDs have difficulty moving, hearing, seeing, communicating and/or learning. They may need specific support related to their disability to participate fully in these activities. They may also be stigmatized/hidden in societies where disability is seen as a curse. In an emergency situation, a PWD's capacity to cope and survive depends on many factors, e.g. support from others, which may also be affected in a crisis situation. PWDs face additional barriers in accessing emergency support. Yet, as with PLWHAs, PWD’s still have responsibilities, dependents and a role to play in society. Ensuring their engagement in VCAs their specific needs and the needs of their families can be planned for and impacts mitigated.</td>
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<td><strong>Children</strong></td>
<td>Children are often excluded from civil society efforts to make their communities more resilient to disasters. They are often seen as helpless victims and their potential contributions to DRR are not always recognised. There is a double layer of exclusion for those children such children heading households and their siblings, children who are out of school, and those caring for sick or disabled parents. Yet children, with “unadulterated” perspectives, can often offer in-depth information about local vulnerabilities and capacities, and will identify different priorities than adults. They are also not constrained by local politics and institutional mandates. Children are recognised as important change agents and important entry points exist in schools DRR programmes and through community groups. “ Excluding children from the disaster planning process threatens their safety when the disaster strikes and ignores a valuable resource for risk communication, education, advocacy, and help with practical risk reduction activities (“Mitchel et al (2009)</td>
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<tr>
<td><strong>Women</strong></td>
<td>Gender inequality is still a reality in most of the world and this has an impact on women’s roles in decision-making from the household level to the political sphere. Ultimately the impact of that is less focus on the issues that affect women and often children as well. In an emergency, gender inequality can be exacerbated; alternatively it can offer opportunities for a change in the prevalent gender norms and be transformational. Women tend to be disproportionately affected by natural disasters. Yet, it is important not to consider women purely as victims. They are able to articulate what they need to adapt their lives and the lives of children, and are also increasingly empowered to fully engage in DRR measures. Women have unique perspectives and are likely to have access to community networks that can be useful organizations for DRR.</td>
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<td><strong>The Elderly</strong></td>
<td>Aid agencies and governments often mistakenly make assumptions that elderly people will be taken care of by their families. In emergency situations older people are particularly vulnerable. In the wake of a disaster the needs of older people are often ignored. Yet, older people often have the wisdom and experience to help themselves and their communities. Elderly people have historical knowledge about events and coping mechanisms that younger community members may not have. They often have the time to engage in preparedness and DRR activities that economically active members of the community may not have.</td>
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<tr>
<td><strong>Minorities (Ethnic/ religious/ political)</strong></td>
<td>Countries which are highly divisive by reason of tribalism, ethnicity and religious segregation are likely to have groups of people who are marginalised as a result of being in the minority, or less favoured politically, for example. In parts of Kenya smaller tribes may face challenges in gaining employment, in participating in political and district level decision-making level and in accessing social and other opportunities. This can exacerbate their vulnerability in times of disaster.</td>
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### Summary of the Kenya pilot VCA case studies

The table below briefly summarises the key observations about the two pilot VCAs:

<table>
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<tr>
<th>Adaptation to district level</th>
<th>Social Inclusion</th>
<th>Pros</th>
<th>Cons</th>
<th>Comments</th>
<th>Follow-up/recommendations</th>
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<tr>
<td><strong>Tana Delta, Coast Province, Partner: Kenya Red Cross Society, additional technical support provided by IFRC – 5 UNICEF staff participated Vulnerability and Capacity Assessment (VCA) – 2 weeks (1 week training/ 1 week field work)</strong></td>
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<td>After training, district actors in VCA methodology / tools, they conducted VCAs in 3 different locations spread through district. Participants represented the three sub-divisions of the district and various interest groups, PWDS, PLWHAs, the retired and women’s groups. The findings were extrapolated up to obtain an overview of the district.</td>
<td>On first day of training UNICEF provided a session (see ANNEX) devoted to social inclusion and participation – including practical exercises. KRCS facilitators then maintained focus on the issue throughout the rest of the training. This was successfully factored into the execution of the village VCAs. e.g. always worked in single-sex groups. Separate sessions were also held with children and their inputs incorporated in the report.</td>
<td>Detailed and thorough; Large number of actors involved (district/village) Generated huge amount of information; Capacity building: district members got first-hand practice in using tools and conducted field level VCAs; strengthened team work in district; UNICEF staff and other participants gained greater insight into dynamics/ environment within the district. Well-established and reviewed – technical support from IFRC</td>
<td>Too much information to analyse and lack of time to do well. Compromised data by district facilitators influencing and manipulating data collection.</td>
<td>The tool was developed by IFRC and KRCS have adopted it as their own which was positive. The exercise was heavier than it needed to be however and some important aspects related to analysis and feedback to communities were left out. KRCS are an important partner for UNICEF and this exercise strengthened that partnership.</td>
<td>After VCA, flooding hit the district &amp; UNICEF responded – staff noted greater partnership in field with KRCS and more nuanced assessments. The grass-roots assessment extremely valuable. This exercise dependent on KRCS leadership in location. This was a heavy exercise and less relevant to UNICEF.</td>
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| **Nyakach, Nyanza Province: Partner: World Vision Kenya Community Owned Vulnerability and Capacity Assessment (COVACA) – 3 days - 6 UNICEF staff participated** | | | | | |
| Actors from across the district were the subject of COVACA. They represented different locations and interest groups, such as PLWHAs, PWDS, children. Women made up around half of the participants. | One short session on social inclusion with a brief exercise on day one. UNICEF provided additional advice re: ensuring equitable participation throughout but less obvious that facilitators had incorporated social inclusion into workshop. UNICEF lobbied successfully for a separate COVACA session with children, who provided valuable and insightful feedback to the group. | Short, manageable timeframe; easy to use; systematic use of key tools; Report writing takes place throughout the workshop with rapid dissemination to participants. | Short time-frame Lack of triangulation with grass-roots and ability to get sense of operating dynamic in district – very centralised Over-reliance on plenary and group work – mistakenly called FGDs but too large. Could use other techniques. Limited to 4 threats – identification of which may be too rapid thus losing out on less obvious but more important one. | The tool is extremely straightforward but there is a lot to cover in short time frame therefore requires hands-on facilitation throughout. | Strengthened partnership with WV and govt. initiation of capacity building with WV on engagement with children Establishment of new district disaster committee. Opportunity to share info. On UNICEF programmes esp. WASH. This tool and partnership is relevant and useful for UNICEF – the time frame and the ability to strengthen district level planning in a shot workshop highly valid. Essential is the need to ensure some sort of grass-roots validation e.g. taking the report to several communities and seeking validation WV/K excited by child participation element and intend to adopt. |

### Findings
This section sets out the major finding from the pilot project, starting first with the major recommendations arising from the two key areas of enquiry, namely a) How UNICEF should conduct VCAs and b) Can VCAs be adapted for use at district level to effectively serve UNICEF’s programming needs? It then proceeds to outlining the benefits to advocating the socially inclusive approach and then how VCAs meet the programming expectations outlined in the VCA. The section concludes with some of the risks, making recommendations as to how to manage those risks.

1. **UNICEF should not develop its own VCA methodology but should conduct VCAs in partnership with another organisation, which systematically uses VCA-type methodology.** UNICEF should use its leverage to ensure that a socially inclusive approach is adopted.

Given the number of organisations in Kenya, which use VCA-type methodology and the partnership opportunities there is little value in UNICEF developing its own tool. In the Kenya pilot, other organisations were very willing to collaborate with UNICEF on the pilot and UNICEF should capitalise on the VCA expertise of partners. UNICEF’s role is not to duplicate what others are doing, but to build on and enhance that work.

VCAs are another way UNICEF can engage with partners to ensure quality of results and they provide opportunities to strengthen relationships, improve coordination and thus be more effective. Undertaking a joint VCA can build a joint understanding of the issues that a project wishes to address but also provides an entry point for advocacy and capacity building. Programming ideas will not be limited to UNICEF and the findings may generate additional and possibly non-traditional partnerships. Partners’ use of VCA as an entry point to DRR/climate change can help UNICEF in defining its emerging priorities.

UNICEF has a catalytic role to play in mainstreaming the needs and issues related not only to women and children, but also other marginalised groups as well as reinforcing linkages between grass-roots, district and national institutions. The Nyakach COVACA, for example, showed clearly that UNICEF has a key role in enhancing children’s participation and engagement in district decision-making. Thus, VCAs serve as an entry point for UNICEF to address social and cultural behaviour that leads to marginalisation and thus increases vulnerability. KCO’s desk review and practical experience illustrated that none of the tools available are comprehensive in addressing all the challenges of people who are socially excluded from community decision-making; people who are therefore often the most vulnerable. There are other organizations that work with children on DRR, such as ActionAid and Save the Children but these tend to be focused in the field of education or via children’s forums. The involvement of children in mainstream emergency and preparedness structures is not systematic. Given UNICEF’s leverage, and the experience of how transformational it can be to bring together adults and children to share their perspectives, UNICEF’s value added is clear.

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**Counteracting the Dependency Culture**

VCA is essentially an effort to counter over-reliance by some communities on external actors who are expected to provide solutions, i.e. the dependency culture.

It turns the focus back on a community’s own abilities to deal with emergency situations. As noted in Actionaid’s PVA the focus is also to motivate communities to enhance their resilience to:

“be able to constantly seek opportunities to enhance their resilience to difficult conditions. For the community to sustain efforts that reduce their vulnerability, they need to be encouraged to change any limiting beliefs they may have about their situation”.

The participatory process itself can actually be transformational as community members identify inequalities and the methods to address them. Ultimately this is positive as by challenging an unfair status quo, thus one step in addressing vulnerability and contributing to sustainable programming. Interventions can then be designed to support such strategic needs as opposed to just the practical needs.

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*The groups most frequently at risk in disasters are women, children, older people, disabled people and people living with HIV/AIDS .... In certain contexts, people may also become vulnerable by reason of ethnic*
UNICEF’s socially inclusive approach, which was integrated into both the VCA and COVACA (See BOX above) did enable discussion about specific vulnerabilities and did transform the way that both partners conducted their VCAs, clearly demonstrating an alternative strategy for mainstreaming gender and diversity with UNICEF partners:

“Gender inclusion in VCA has opened up a new avenue of exploring gender related issues surrounding vulnerabilities and capacities within the communities. I thank UNICEF for having slotted in the gender issue in our assessment because other VCAs don’t clearly incorporate gender issues in the assessment process”.

KRCs staff

2. The pilot proved that it was possible to adapt the VCA methodology, which is usually applied at grass-roots/community level, to district-level and that this focus serves both UNICEF and district-level partners in terms of emergency preparedness, disaster mitigation and developmental interventions.

UNICEF guidance is not specific as to the level at which a VCA should take place, although it does refer to VCAs forming part of SITANS or Common Country Assessments (CCAs). A robust national disaster risk assessment which includes an analysis of locations which are most vulnerable to disaster and the capacities that exist at all levels to manage those disasters is a core element in emergency and development planning. While an important element of emergency planning (it was this higher level analysis that informed the selection of the two pilot districts22), such an exercise cannot be called a VCA as currently understood by the practitioners of this approach.

The essence of VCA is on community participation, ownership and local level mitigation using local knowledge and skills, which this becomes diluted at higher levels of administration. Yet for UNICEF, the lowest level of programming engagement is at district level and not the grass roots. So a key line of enquiry for KCO was to assess whether the VCA methodology could be applied at this level of administration, bearing in mind UNICEF’s comparative advantage in engaging with district-level government actors. Some examples of how this district-level approach was useful:

- Both districts were newly carved out of larger districts, thus they did not yet have fully functioning disaster management committees despite being in areas vulnerable to natural disasters. In Tana Delta, the District Commissioner hoped that the outcome of the VCA would feed into the disaster management plans. In Nyakach, the DC was in the process of developing his disaster management team and some of the participants from the COVACA workshop would be members of that group.

- Discussions with the DC revealed that disaster preparedness is a new area of responsibility for him, yet he was facing pressure from national authorities to report on it. This identified an opportunity for UNICEF to provide a checklist on district-level disaster preparedness that would assist district authorities, UNICEF and other emergency actors.

- UNICEF WASH staff was able to make contacts with district actors and identify key WASH interventions, such as the need for latrines at a local school.

A further benefit of the district level VCA is that it creates strategic linkages between grass roots, district and national actors, which might otherwise be tenuous.

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21 SPHERE
22 It was this level of assessment that provided the rationale for the selection of the districts selected for the two VCAs. The CPD and SITAN had highlighted that Nyakach and Tana Delta districts were areas of highest disparity for child survival and their repeated vulnerability to disasters was a key focus of UNICEF programming. Thus the district VCAs were piloted in light of this higher level vulnerability analysis.
3. Despite being designed as a participatory approach VCAs can, nevertheless, be non-inclusive and this is a particular risk when conducting them at district level if organisers assume that the participants will reflect the diversity of the district. Understanding this is important because it is possible to counter them through good planning and ensuring that a socially inclusive approach frames the entire VCA. This reinforces an additional role for UNICEF in terms of its advocacy related to implementation of the CRC, CEDAW and the gender policy.

VCA methodology is consistent with UNICEF’s policies and principles of participation which are articulated in UNICEF’s HRAP and in UNICEF’s guiding documents: the Convention on the Rights of the Child (CRC) and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) as well as the newly revised draft gender policy. Programmes can misbehave when the people who are expected to benefit from them are not part of the planning. VCA is one method by which UNICEF’s work can be more effective and apply a bottom-up consultative approach as opposed to one that is top-down.

The pilot proved that the two methodologies (VCA and COVACA) could effectively be adjusted to district level analysis, however, it is important to recognize that district-level analysis can also be somewhat exclusive and reflect the issues of the most likely educated elite of a particular district. Measures should be taken to ensure representation of key groups of people and, if possible, one or more opportunities to factor in grass-roots validation. The pilot showed that participants and partners both valued the socially inclusive approach that was taken. A particular success was the impact of children participation in the Nyakach COVACA:

- Adult participants transformed their perspectives on children’s grasp of the issues surrounding disaster and risk when child representatives when they presented the results of their mini-COVACA. Participants stated that: “Children enlightened us”; and “Children should not be left behind when it comes to decision-making”.
- The DC insisted that the same children then present their findings to a district management team meeting.
- World Vision Kenya announced the systematic application of the same child participation strategies in future COVACAs.

Thus children’s involvement is critical and direct contact with the district actors can be transformational UNICEF’s role in enhancing child participation and engagement in various levels was also strategic in that it could lead to greater focus on how children’s vulnerability can be reduced and their creativity unleashed for DRR purposes.

“Involving children in disaster management planning can lead to much more effective results, since children have unique perspectives to adults. While adults tend to be more concerned about short-term risks, children have a long-term view of risk and are thus less fatalistic and more proactive and creative in support of risk management”.

NB. VCA sessions held with children can also provide an opportunity to raise awareness of child protection systems, such as Childline, a Kenyan telephone helpline and other relevant information.

4. By adjusting the traditional focus of VCAs from the grass-roots to district level, KCO was able to show, in this pilot project that VCAs are able to meet the expectations articulated in the PPPM (see BOX) but the exercise highlights the need for

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23 The CRC states: every child who is capable of forming his or her own views has the right to express those views freely in matters that will affect the child.
24 CEDAW recognizes the rights of women to participate in political and public life (Article 7) and Article 14 outlines the particular problems rural women face and calls on states parties to take appropriate measures to ensure the right of women to participate in the elaboration and implementation of development planning at all levels .... and to participate in all community activities.
25 “In adopting a participatory approach to programme development, UNICEF seeks to ensure the involvement of both girls and boys in the definition of their own priorities, and the development results that could deliver these priorities”
UNICEF to revise the PPPM in order to provide clarity and more detailed guidance for COs on how to utilise the methodology. At a minimum these should include:

- Recommendation that VCAs should focus on the lowest level of programming intervention and clarification on how national risk assessments, grass-roots and district-level VCAs are related

- A list of resources for COs to refer to and/or identify which tools / partners serve the operational and programming needs of UNICEF best

- A checklist or other tool for ensuring a socially inclusive / child participation approach is applied

UNICEF is shifting gear from focusing on emergency response towards the longer-term disaster risk and vulnerability reduction within regular programming. The VCA methodology itself, however, can expose many other issues that are not natural disaster related or traditional emergency-focused. They may, however, have resonance for UNICEF in terms of regular development programming, which equates to mitigation measures. Furthermore, VCAs, conducted on a periodic basis, could also be used as a means to monitor and evaluate interventions.28

Programme decision-making often relies on quantitative secondary data, which is frequently also aggregated, thus not bringing out the variations that may exist amongst different ethnic groups or sexes. Engaging with rights-holders directly is a means to enhance hard data with qualitative information that will reveal these nuances in the programming environment. VCAs also allow for an enhanced level of specificity in hazard and risk analysis – what part of the district is most affected, which areas are repeatedly flooded, what water supplies are highest risk – this allows for targeted interventions with the highest impact. It is part of the analytical process and can provide additional data to influence the ‘upstream’ policy work most COs do. All KCO staff who participated in the pilot reported that they learnt more about the district than they knew before and this was especially valuable since both districts were newly demarcated. Furthermore staff learned more about cultural and ethnic issues and how these impact on access to resources and knowledge.

Do VCAs meet the expectations contained within the PPPM?
The PPPM sets out what a CO should expect from undertaking a VCA. An additional output of the pilot was the validation of VCAs as an important tool for programming and confirms that the information generated via a VCA does in fact meet the expectations for COs contained within the PPPM. This section summarises the findings according to each of the four expectations.

1. Identify strategies to strengthen the ability of the vulnerable population to cope with emergencies;
   
   The main thrust of a VCA is on strengthening communities’ capacities to manage when disaster strikes, as well as to reduce the risk of disaster by adopting DRR measures. It is an approach that aims to reverse the trend of dependency, which in many locations has resulted in the erosion of traditional coping mechanisms and reliance on external aid. By building the capacity of communities to identify the hazards, risks, vulnerabilities and capacities, VCA methodology is empowering and encourages the community to self-identify how they will cope when disaster strikes. It also links actors at different levels, from line ministries to community-based organizations (CBOs) and can provide an important entry point to identify opportunities to support government such as strengthening district disaster management committees - a priority focus for UNICEF field/zonal offices for emergency preparedness. A key challenge, however, is how to continue, beyond the initial training of district level participants to ensure that a socially inclusive approach frames subsequent planning given that the members of district management committees are less likely to include people who are socially marginalized and this could be a continuing role for UNICEF field/zonal offices as part of capacity-building for such district structures.

2. Identify interventions that will mitigate against the occurrence of the emergency;

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VCA is a tool that can strengthen UNICEF regular programming as part of a DRR strategy. VCA already provides an entry point for other organisations’ work in DRR and threats identified in both VCAs practically demonstrated relevance to UNICEF priority programming areas in disaster mitigation (e.g. access to water, disease prevention, education, food security, protection) thus providing opportunities to expand & redesign as necessary. Participating in VCAs at district level provides opportunities for UNICEF staff to a) link with community identification of programming priorities b) network/strengthen partnerships with district actors/organisations and c) also enables staff to have a more nuanced appreciation of the risks and environmental and structural challenges at district level that will ultimately assist with implementation. Field based assessments can also link with national structures and help fine-tune the work of UNCT coordination such as, in Kenya, via the United Nation’s Development Assistance Framework (UNDAF) Theme Group on DRR.

3. Implement an Early Warning System, including identification and monitoring of early warning indicators;
In the Kenya experience neither VCA was able to explore early warning systems (EWS) in a meaningful sense yet it is anticipated that having identified some of the vulnerabilities in terms of access to information this could contribute to more effective EWS which will subsequently be developed by the district disaster management committees. Thus there are opportunities for UNICEF engagement but the role of field/zonal offices in terms of EWS is still to be determined.

4. Develop contingency or preparedness plans to facilitate rapid response by UNICEF in case of emergency
VCA is an entry point for strengthening District Disaster Management Committees so UNICEF’s funding of VCAs as a mechanism for enhancing district disaster management does provide an opportunity to strengthen UNICEF’s emergency response in needs assessment, for example. VCA also provides an opportunity to hold in-depth discussions with individuals whose voices are not heard in the hard numerical data that much UNICEF programming is based on. This is particularly important in terms of assessing attitudes and identifying the most vulnerable. Thus VCA’s qualitative nature enhances the quantitative data analysis and adds a more nuanced perspective to the potential needs in an emergency. By participating in a VCA, UNICEF staff members are able to identify potential partners for emergencies; note logistical challenges and locate warehouses for pre-positioning. An understanding of the existing vulnerabilities and marginalisation of some communities and having established a good rapport with partners in the district enhanced the response by UNICEF staff to floods following the Tana Delta VCA.

**Risks and Challenges**

There are a number of risks associated with conducting VCAs as recommended here. A few of these are listed below with recommendations as to how to address them.

**Data purity**
At all stages of capturing the data, the purity of the data risks becoming muddied by the interpretation of various actors from the translators, community “gate-keepers”, transcribers to report-writers and analysts. The IFRC approach, for example, is to train community members to undertake the VCA – this fosters ownership/responsibility for follow-up actions. Weaknesses of this approach, however, are that volunteers may lack the requisite participatory techniques and may inadvertently, or purposely, influence the data collection. A natural reaction, for example, is to re-phrase someone’s inputs into one’s own terminology at the risk of adjusting the meaning. **It is important to recognise this risk and to agree on standards for reporting and data collection. Furthermore, the data can be re-presented to the participants for them to validate, as far as possible.**

**The VCA report is the final product**
There is a risk that the VCA report is seen as an end in itself and that it is not used as a programming tool. Worse still, the community members may never see it. This results in loss of faith by communities surveyed and is a waste of resources. Although there may have been some positive elements in terms of partnership building, that is a hollow success if there is no tangible follow up. **A UNICEF role is to ensure that there is a clear way forward mapped out by the VCA team in advance of the exercise, which is then validated and adjusted as necessary with VCA participants at the end of the VCA.**
Ticking the participation box

With reference to Roger Hart’s Ladder of Participation, there are degrees of participation from the superficial to full partnership. Undertaking a VCA already entails a lot of work in terms of outreach and engagement that it is important to ensure that the outreach is as inclusive as possible. It is easier to visit the most accessible village than the community on the edge of the district; it saves time to talk to children in the neighbourhood school than engage with the disabled child, confined to the house. In line with the HRAP, UNICEF’s role is to ensure that the most vulnerable are factored into VCAs from the planning stage onwards.

Community over-assessment

Some communities are surveyed regularly because they are accessible, typical or vocal, yet some regularly surveyed communities may respond according to what they know agencies want to hear, or they may be unwilling to engage with a VCA because they are exhausted with these processes, especially when they yield little that is tangible. Ensure that criteria are established for selection of the communities to be assessed when conducting grass-roots assessments.

Children’s contributions seen as extraneous and not taken seriously

Neither partner in the Kenya pilot had incorporated children into VCAs before and they relied upon UNICEF guidance as to how to do it. It is important to consider how best to include children in the process but also so that their contributions and ideas are not superficial, but fully integrated into the report, analysis and subsequent planning. UNICEF staff should ensure that children’s participation is planned for from the beginning and an effective mechanism is agreed upon for feeding that data back to the main group. UNICEF may be required to be more active in this process if the partner does not have specific experience in working with children (SEE ANNEX: SUGGESTIONS FOR ENGAGING WITH CHILDREN IN VCA).

District level VCA is not reflective of district diversity

District sizes, environments and ethnic composition vary dramatically within Kenya. There is a risk that a district-level VCA may overlook pockets of vulnerability or the VCA may be influenced by the powerful people within a district. KCO’s pilot experimented with two approaches: a) Tana Delta - the findings of three separate VCAs were extrapolated up to form a district perspective yet the valuable knowledge of the district actors who conducted the VCA was not systematically incorporated; b) Nyakach – actors from throughout the district were the subject of the VCA yet there was no grass-roots validation and concern that not all perspectives were captured. The VCA methodology should also reflect the size and dynamics of a district. In a small district with little tribal, environmental diversity, a focus on district actors should be sufficient for the VCA, yet in a larger more diverse district it may be advisable to ensure some sort of grass-root validation takes place, e.g. applying smaller localised VCA exercises.
Step by step guidance for UNICEF in conducting a VCA, ensuring a socially inclusive approach

This section is based on practical experience of using IFRC’s VCA and World Vision’s COVACA. These methodologies, and the others developed and applied by CARE (Climate Vulnerability and Capacity Assessments), ActionAid (Participatory Vulnerability Assessments) and so on, while similar in terms of the tools they use, are also specific in terms of the needs (philosophical approach, processes and ways of working) of the organisations that have developed them. None of the tools available are explicit in terms of identifying how women and children are actively engaged in the process. Yet, based on the need to identify the most vulnerable it is critical to draw attention to how the perspectives of women, boys and girls and marginalised groups can be integrated at all phases of a VCA. This guidance attempts to consolidate practice from a variety of sources, and the TABLE: TOOLS provides additional recommendations in order to meet UNICEF’s commitments to human rights and child participation. This section also strongly draws on the work of other organisations related to vulnerable groups, notably Handicap International (people living with disabilities), Plan UK, World Vision International, Save the Children UK and ActionAid (children), IASC (Gender in Emergencies), VSO (participatory methodologies), UNHCR (Community-Based Approaches) and Help the Aged and Helpage international (the elderly) and van Riet (HIV/AIDS). Although apparently arranged sequentially, some of these steps will evidently be implemented concurrently.

The vulnerability of people increases the effects of hazards, putting people at increased risk of harm – and this is not a technical but a social issue. People vary widely in their exposure to hazards and in their ability to anticipate, plan for, survive and recover from the effects of disastrous events.”

1. Identify the Location

VCA methodology tends to be based on a community-based approach, whereby a village or limited area connected to the programme of the NGO/Red Cross Society who is undertaking the VCA, is the main focus of inquiry. For UNICEF, however, it may be more effective to conduct a VCA at a higher administrative level, e.g. district or zonal. In Kenya, it is recommended that the VCA takes place at district level for the following reasons:

- The lowest level at which UNICEF tends to operate is at district level where there are representatives of most line ministries as well as a district management structure related to disasters and emergency preparedness and response.
- UNICEF periodically gathers quantitative data via district profiling exercises and multiple cluster indicator surveys (MICs) and this enables valuation of that data with the qualitative analysis of the VCA.
- It also provides opportunities for the VCA partner whose district level leverage might be less significant than UNICEF’s.
- District is the locus of implementation and coordination in emergencies
- District level VCAs tend to be reflective of community level perspectives, although grass-roots validation is important to ensure that the district perspective is representative.

As per the HRBA the most vulnerable should be assisted to enjoy their rights. The district, or location, should be selected based on a number of criteria, which are priorities for the field/zonal office as per the annual work-plan, but may include the following:

a) It is prone to regular hazards;

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31 An alternative approach is to focus on a “community not based on spatial terms but on common interests, social status or age, for example, and conduct a VCA for that group, e.g. children. This could be an entirely separate activity OR linked to a broader spatially defined VCA (see Fordham (2008).
b) Communities’ existing ability to deal with hazards is low or diminishing;
c) There may be a lack of partners working in the area;
d) Indicators in district profiles illustrate humanitarian/development needs;
e) There are opportunities to strengthen district-level structures.

2. Identify the purpose / timing

“No SitAn is complete without a Vulnerability Analysis”

● **There should be a clear rationale for the VCA.** The objective of the VCA must be clearly understood as well as who is to benefit. It can be part of the development / implementation of an existing project; be designed to seize an opportunity to strengthen district-level emergency planning; feed into a CO DRR strategy or development programming; provide a snapshot of qualitative data in a risk-prone district for the Emergency Preparedness and Response Plan (EPRP) or the SITAN.

● VCAs can be scheduled at a variety of points in the programme or project planning cycle, depending on the needs of the CO and/or the section, although it is recommended that the decision is strongly tied into priorities identified by the Field/zonal office’s Workplans. **Field/zonal Offices have a critical role to play in implementing the CPAP** the Resident Programme Officer (RPO)

32, for example, will essentially be the staff member who will ensure follow-up. Good emphasis on field/zonal offices as key in planning and follow up but not as ‘drivers of the process’ as they are supporting CP implementation.

● With VCA methodology the process should not be driven purely by UNICEF’s programming priorities or for the benefit of the partner organisation but **aim to serve the community targeted by the VCA.**

● The **best timing will link with both CO/field/zonal office planning as well as national/district planning activities.** This will provide additional opportunities to influence processes. Furthermore, timing should also reflect local calendars of events and not coincide with a harvesting period, for example, which may affect people’s willingness to engage.

● Because of climate change, as well as the ongoing deterioration of coping mechanisms in perennial hardship zones, **trends should be monitored and VCAs should be repeated.** Determine time frame with the local partners/actors involved in the VCA.

3. Work with a partner

This note supports the PPPM guidance that advocates that UNICEF should conduct VCAs ONLY in partnership with another organisation such as an NGO, Red Cross Society or Governmental partner, which has a strong field presence. Collaboration is valuable in terms of longer-term benefits for the community but also for the following reasons:

● **UNICEF does not need to develop its own VCA tool** as partners already exist who have developed tools. By capitalising on existing knowledge UNICEF benefits from knowledge transfer as well as strengthening existing or new partnerships;

● Other organisations are more advanced in terms of using these methodologies as part of DRR strategies. These organisations have the knowledge, skills and experience in applying their own VCA tools. In terms of aid effectiveness, **it makes sense to partner: UNICEF (co) funds the exercise; the partner provides technical expertise;**

● Experience has shown that partners are keen to conduct joint VCAs and **willing to incorporate UNICEF’s priorities** into the process.

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32 SITAN Guidelines
33 UNICEF Kenya has two field/zonal offices (Garissa serving North-eastern and Coast provinces, and Kisumu serving Western and Nyanza Provinces) which report to the national office in Nairobi. Each field/zonal office is headed by an RPO.
Partnering with an organisation that has strong field presence, unlike UNICEF, is advantageous in terms of linking community, district and national actors. Furthermore, it strengthens the likelihood of follow-up at field level.

UNICEF’s role should be to advocate for social inclusion and children’s participation at all stages of the VCA. UNICEF staff should be engaged in the planning and the workshop for the benefits to new and ongoing programming.

4. Select a partner

There are a number of organisations that use VCA-based methodologies. These have adapted the principles and tools for their own programming purposes. Thus in identifying the partner and tool are one and the same. A list of some of these is provided in the box BELOW. It is not necessary to use the same partner for each VCA.

The box below suggests some pointers to help identify a partner and tool. The decision over which partner to choose may also come down to whether the process is ‘light’ or ‘heavy’.

<table>
<thead>
<tr>
<th>CHECKLIST FOR SELECTING PARTNER AND TOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the organisation have local capacity to conduct, and experience of, VCAs? Is the tool suitable and relevant? Are the facilitators effective and gender-sensitive?</td>
</tr>
<tr>
<td>Is there an existing partnership, which will be enhanced by the joint VCA?</td>
</tr>
<tr>
<td>Is the organisation’s approach consistent with UNICEF’s principles, including child rights and gender etc.? Does the organisation have an interest in maintaining an impartial perspective?</td>
</tr>
<tr>
<td>Is the partner willing to apply the tool at district level and can the tool be adapted for working with children and young people? How long does the organisation usually take for the VCA?</td>
</tr>
<tr>
<td>Is the organisation compliant according to the Harmonised Approach to Cash Transfers to Implementing Partners (HACT) Micro-assessment?</td>
</tr>
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</table>

Plan together with the partner to ensure joint ownership. UNICEF staff will be learning from the partner and vice versa.

There are advantages and disadvantages if facilitators come from the community under assessment. Advantages include a deeper understanding of the issues, possible sensitivities and the vernacular language, yet his/her opinion is also subject to their own particular perspective which may ultimately affect their ability to be neutral, to influence proceedings and therefore impact on the data reliability.

VCA facilitation teams should include women. Ideally this should be 50% of the team as women may be more comfortable talking to other women, although this depends on culture and traditions and may be less relevant at district level. It is important to gauge the cultural environment but also assess the gender sensitivity of the team. Being a woman does not imply she is gender sensitive, while many male facilitators are extremely competent and sensitive to gender dynamics.
TABLE: SUMMARY OF SELECTED VULNERABILITY & CAPACITY TOOLS

<table>
<thead>
<tr>
<th>ORGANISATION</th>
<th>TOOL / SOURCE</th>
<th>SUMMARY</th>
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| ActionAid             | Participatory Vulnerability Assessment (PVA)  
http://www.proventionconsortium.org/themes/default/pdfs/CRA_PVA_ActionAid2005_meth.pdf | PVA: “a systematic process that involves communities & other stakeholders in an in-depth examination of their vulnerability, & at the same time empowers & motivates them to take appropriate action. The overall aim of PVA is to link disaster preparedness & response to long-term development.” Guide provides a) section on vulnerability (including gender/poverty and case studies. Only guide that incorporates district level assessment as part of multi-level assessment; b) step-by step guide to conducting PVA but does not include tools. |
| CARE                  | Climate Vulnerability and Capacity Assessment Handbook (CVCA)  
http://www.careclimatechange.org/cvca/CARE_CVCAHandbook.pdf | CVCA: “helps us to understand the implications of climate change for the lives & livelihoods of the people we serve. By combining local knowledge with scientific data, the process builds people’s understanding about climate risks and adaptation strategies. It provides a framework for dialogue within communities, as well as between communities and other stakeholders.” Focus on climate change - using participatory tools to bring out issues and then examine them in context of climate change; aim to bring together external actors & research with communities. Handbook lists / explains a few tools and participatory methodologies, how to document process and how to use the analysis. Succinct. |
| IFRC                  | Vulnerability and Capacity Assessment (VCA)  
http://www.ifrc.org/Docs/pubs/disasters/resources/preparing-disasters/vca/vca-toolbox-en.pdf | VCA: “a participatory investigative process designed to assess the risks that people face in their locality, their vulnerability to those risk, and the capacities they possess to cope with a hazard and recover from it when it strikes...VCA helps people to prepare for hazards, to prevent them from turning into disasters and to mitigate their effects”  
Well-tested and evaluated over past ten years. Various materials produced providing step-by step guidance: What is a VCA? How to do a VCA, VCA Toolbox, VCA Training Guide. Also films available online. Focus on ownership of the tool and data by the local Red Cross Red Crescent Volunteers and community members concerned – strong capacity building element. Strong focus on triangulation and detail. Lists the multiple tools available for use. Very useful detail on tools and process. |
| Oxfam America/Charman Pincha | Gender Sensitive Disaster Management: A Toolkit for Practitioners  
http://www.preventionweb.net/english/professional/publications/y.php?id=7792 | "This toolkit is the outcome of a research study undertaken to understand gender mainstreaming strategies used by NGOs and the Government in the context of their response to & management of the Tsunami aftermath in Tamil Nadu. The field outcomes were analyzed through a gender perspective to understand the differential impact of disasters and coping strategies on women/girls, men/boys, and other marginalized groups...” Toolkit compiling training resources to highlight gender issues with case studies that show how gender & marginalisation impacts the management of disasters. There are tools/ exercises designed to be used with communities |
| Save the Children     | Child-led Disaster Risk Reduction: A Practical Guide  
http://www.preventionweb.net/files/3820_CHLDRR.pdf | CLDRR: “a child-centered community based framework where children play leading roles in their communities to minimize the negative impacts of disasters...whilst children will play lead roles with the support of adults in their communities, the responsibility & accountability for preparedness, mitigation & response still lies with adult stakeholders & duty bearers...to increase resilience & reduce the impact of disasters on children & their communities.”  
Essentially a useful source book of tools, resources and case studies on CLDRR programmes around Asia. Many ideas for engaging with children that can be applied to VCA as or part of DRR projects, including developing EWS. |
| World Vision          | Community Owned Vulnerability and Capacity Assessment (COVACA)  
http://www.phree-way.org/resources/documents/COVACA_paper_final_draft.pdf | COVACA: “ a process driven and managed by the community with a focus on reducing local vulnerabilities and increasing community capacities through open, free and transparent process whereby the community critically analyses its status with regards to hazards with a view to mobilizing community resources/capacities to mitigate threats”  
Step by step guidance on how to conduct the COVACA – systematic straightforward approach. COVACA focused strongly on community knowledge and application; training facilitators not supposed to bring external information. Currently undergoing revision and new version to be tested 2010. |
5. **Logistical Issues**

- VCA exercises do not need to be expensive and in some cases, as in Kenya, it will be possible to have a cost-sharing arrangement.

- Before the actual field assessment, the VCA team must engage in substantial planning and preparation in order to ensure that as many of the “nitty gritty” issues are anticipated and then resolved well in advance. Some of these issues might include: providing refreshments for communities; clarity on out-of-pocket expenses for volunteers. Failure to address them in advance risks de-railing the whole process. The IFRC has a planning guide: *How to do a VCA: A practical guide for Red Cross Red Crescent staff and volunteers*, which provides useful pointers.

- The value of providing refreshments for all participants whether during a separate FGD or key information interview cannot be underestimated.

- Another major incentive for workshop participants in Kenya is certificates of attendance.

- Bearing in mind the socially inclusive approach the following will need to be considered in order to have as wide participation as possible:
  - Male/female sole carers may require child-care or not be able to stay overnight away from home;
  - Children may require their teachers or guardians to be present if it is school holidays, so there will be cost implications;
  - Alternative space may be required for separate FGDs with children etc.
  - PWDS may need spaces to be wheelchair friendly
  - Security must be ensured around the venue and routes to and from.

6. **Conduct desk review of research, assessments/information about the district**

   It is important to know key information about the community to be assessed in advance, e.g. livelihoods and environmental context. This may challenge biases and also inform which tools / approaches might best be used. Partners and UNICEF will usually have district profiles or programme documents informing their ongoing work in the area. The line ministries will also have useful strategic documents for planning.

- *Gather wide range of materials.* Contact as wide a range of data gatherers in the area of focus. Many valuable resources may not be on the Internet and may still be in primary form in a CBO’s office. Part of the process of gathering that information will benefit the VCA as it can raise awareness of the process with the actors on the ground and may lead to greater cooperation with sister organisations. Also look at national-level organisations that may have collected information of relevance – organisations dealing with special needs such as disabilities or the Ministry of Gender and Department of Children’s services. Also check within the UNICEF national /field/zonal office sections for resources that may not be in the public domain or shared drive. Maps are also useful.
• Allow time for analysis of the secondary data and the identification of key issues arising.
• Consolidate and share. Incorporate the gathered information into the VCA workshops and reporting method. Many members of the community may not have access to that information and it is important to share.

• Identify gaps. Draw out pertinent social exclusion issues for further investigation during the VCA and for subsequent research opportunities.

• Identify information related to boys and girls in the risk areas:
  o Numbers (in and out of school)
  o Locations of schools and numbers
  o Children with special needs/disabilities
  o Locations of children’s institutions and numbers
  o Whether disaster preparedness plans include children and their issues
  o Main morbidity/mortality risks for children
  o The main protection challenges for both boys and for girls; which ages and sex are more at risk?

6. Identify Participants

   Involve key actors (DCs, District Officers [DO], existing partners, the VCA partner) in identifying possible participants. Broad suggestions include the following, but they should have programming / interests in the district:

   • District Officials/government leaders;
   • Line ministries and institutions (e.g. health/public health, education [teachers], water, environment, agriculture/livestock, gender, children) CBOs (Youth, women, PWD, PLWHA);
   • Faith-based organisations (FBOs) - reflecting religious diversity;
   • NGOs, volunteers (e.g. voluntary children's officers);
   • Local activists;
   • UN agencies/international organisations working locally;
   • Relevant UNICEF staff (from national/field/zonal office) representing several disciplines;
   • School managers and teachers;
   • Representatives of Parents associates (at the district level, if not village);
   • Children and young people;
   • Meteorological department.

   • It may not be possible to engage with all community members, but aim for the broadest level possible. Should some groups not be represented the VCA should allow for additional data collection methods e.g. key informant interviews, FGDs, which will feed into final analysis.

   • Letters should be sent out asking first for nominations. Once received the partner and UNICEF can then select participants that reflect diversity and gender balance - Aim for equal numbers of women and men.

   “Empirical studies reveal that women and men make decisions differently. Whereas men are more risk-taking, women tend to be more risk averse...women usually listen to external advice, but men will not easily ask for directions. In general, women contribute more to a common good than do men and they are more aware of social bonds showing greater reciprocity and altruism. However, when social bonds are weak, men can be observed to be more cooperative than women. These findings have major implications

34 See also Save the Children (?) Child Led Disaster Risk reduction: A practical guide
for disaster management and could form important underlying motives for women’s and men’s reactions to hazards.\textsuperscript{35}

If there are obstacles to getting enough women, these obstacles should be explored and dealt with: childcare issues (arrange for temporary babysitters), lack of educated/skilled women (this should not be a constraint to their participation); few women who speak the language to be used in the VCA (employ translators). Ensure that there is a critical mass of women (which may be less than 50%) who will be proactive in engaging, such as women’s leaders, teachers etc. These women can then be role models, which will encourage other women and girls to take a lead.

- **Create opportunities for children’s engagement.** It is not appropriate to have children in an entire workshop of this type, yet children’s voices can be heard in other ways e.g.
  - Ensure people who work with children are part of the VCA (teachers, children’s officers, children’s advocates etc.)
  - Arrange for separate but complimentary sessions with children (divided by sex, and age) either as part of the VCA or in partnership with an organisation that already works with children, e.g. ActionAid who works on DRR in schools, for example. Save the Children has also conducted work on Child-led DRR\textsuperscript{36}. This is critical for UNICEF and every effort must be made to incorporate boys and girls of all ages in the VCA activities.
  - Ensure that the involvement of children is meaningful and not superficial. Possible entry points are: scout or guide groups, after-school groups, out of school groups or other existing children’s fora.
  - Schools and organised groups are also useful entry points or follow-up DRR activities and the VCA can initiate or strengthen existing contacts. Children tend to be more receptive to new ideas than adults.
  - An important element of the workshop will be to ensure there is space to incorporate children’s perspectives. Child representatives should then report back to the adults. Experience shows this to be transformative and children’s different responses to the risk etc. may actually elicit a rethink by the adults, as long as the children’s perspectives are actually systematically incorporated and not merely a superficial consultation.\textbf{SEE ANNEX: SUGGESTIONS FOR ENGAGING WITH CHILDREN IN VCA}

\textsuperscript{35} Pearl and Dankelman  
\textsuperscript{36} Ibid.
• **Representative of the ethnic diversity**, mitigating possible ethnic tensions and respecting needs for speaking in the local vernacular language. Secondary data collection in advance will identify the ethnic dimensions-specific issues of sensitivity and exclusion that will guide participant selection. It should be recognised that leaving participant selection to local actors may actually reinforce exclusion of minorities and this should be guarded against.

• **Represent various interest groups** present in the district. These are the people who are likely to engage in advocacy and who know the local context best. They will have useful insights based on insider knowledge. Disability advocacy groups, for example, can be powerful lobbyists. Also consider faith-based groups, environmentalists, cultural groups, professional organisations, women’s rights organisations.

• **Manage expectations of participants.** People may be resistant to participating if they do not see an immediate dividend. There is key information that should be provided in advance to communities who have agreed to be part of the VCA. They should be well informed about the process; how they can engage and what the expected outputs will be. They should also understand the time-commitment and whether they will receive refreshments or any other direct benefits. Planners should not necessarily rely on Government administrators to pass on the exact information that communities require, especially if those same administrators are not fully informed about what a VCA is and how it works. Instead the planners should make one or two visits in advance ensuring that they meet with a variety of actors in the community, encouraging as wide a range of participants as possible, ensuring that marginalized groups, women, children and people with special needs are also able to contribute, either in plenary or in key informant interviews. There are various ways to manage these expectations e.g.:
  - Be explicit in the invitation letter;
  - A one-page information sheet on VCA in the appropriate language should be printed and shared with the community.

7. **The VCA Workshop/Training**

It is important to note, however, that **participation does not equate to presence**. Ensuring that women and men are present in equal numbers, for example, does not imply they will have equal opportunities to express themselves and engage in decision-making. Participation should be measured in terms of quality and ensuring quality participation requires a range of strategies, including single-sex meetings, key informant interviews etc.

a) **Social inclusion incorporated into VCA trainings.** Everybody can be vulnerable at certain points in their lives, depending, for example, on the environment in which they are living, their personal circumstances, the occurrence of a particular event in which they get caught up. A VCA should identify these vulnerabilities, if carried out according to the principles of participation inherent in the process. Ironically, however, experience shows that VCAs can be conducted without the inclusion of the ‘vulnerable’ and this can be due to inadequate guidance in the tools or facilitators lack the awareness or skills that would ensure the marginalised are included. The table above draws attention to some of the pertinent vulnerabilities and capacities of groups of people who may normally be left out or who may participate cosmetically in emergency preparedness and DRR.

There should be a specific session towards the beginning of the training, which would then be augmented by references to gender, children and special needs throughout. Try not to rush this session, and allow time for participants to digest the information and rationale. The session should look at issues of social exclusion, access to information, decision-making, women’s reproductive and productive roles, access constraints. Information regarding the gendered division of labour is important because certain occupations may place a certain group at more risk or alternatively provide them with an increased role in managing post-disaster, which may be more labour-intensive or, conversely, more empowering, leading to positive social change. The session should provide a rationale as to why it is important to

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37 Nyakundi (2006)
consider marginalised groups by sharing, for example, facts on gender/children’s vulnerability in disasters and the how lack of access to decision-making at community/district level can increase vulnerability (See ANNEX for Two Social Inclusion Presentations). Cultural issues may be raised as to why some people should not participate. Beware of this argument.

“Participation of lack of participation may be influenced by cultural factors...While it is important to respect local culture, it is also important to be aware of ‘cultural smokescreens’ used to protect the power of dominant groups....facilitators must balance their ‘sensitivity’ to local cultures against the need to ‘proactively’ challenged systems that cause disadvantage and violate people’s rights and dignity...Culture and tradition can enable or obstruct, and be oppressive or liberating for different people at different times. There is nothing sacred about culture, and value judgements need to be made about which aspects of culture to hold on to, and which to let go of.”

b) Seize opportunities throughout to draw attention to the issues as you go through the workshop and if necessary adjust the approach as necessary. In the Nyakach COVACA, an attempt to have a plenary ranking of the threats was deteriorating as only the loudest voices were being heard. The facilitators then divided the group into two single-sex groups, which worked much more efficiently.

c) During the training when exploring the tools, participants should consider how the tool might work if done in single-sex or mixed sex groups and also groups of children versus adults. This could be illustrated by visual aids, which show two community-drawn maps – one by women, one by men (See ANNEX). Each illustrates locations, which are important to each sex; neither covers all aspects. Application of the tools, therefore, may require the facilitators to conduct separate exercises for different groups to ensure that the most marginalised in a community or those that will culturally not speak out in public are able to participate fully.

d) Participation exercises. There are many exercises, which allow for self-reflection on participation constraints. One is to divide participants into groups for some teamwork. Meanwhile select one volunteer from each group. Those volunteers are tasked with (secretly) identifying how well members of the team participate – were certain people dominating? Was there a difference in the way young, men and
women older men and women participated. When the other exercise is completed, the volunteers reveal what they were doing and their findings. An alternative entry point is to use a provoking exercise such as Flood Shelter (see ANNEX) although the previous exercise can be incorporated as well.

8. Reporting and Follow-up

A clear strategy for follow-up activities should be factored into the planning process. This should include reporting and dissemination of the report; follow-up activities/projects and programming. It is advisable that the report is being compiled as the workshop proceeds, or immediately afterwards. This increases the likelihood of dissemination to workshop participants as well as partner organisations in the district. The report is merely a tool, which records the proceedings, hazards, risks, capacities and maps the way forward in addressing or mitigating the risks. As noted already there is a risk that with completion of the report nothing happens. It is important not to focus on producing a beautiful report – the report should be a working document that provides a summary of the vulnerabilities and capacities but also a framework or action plan for the way forward, ensuring this is also socially inclusive.

The benefit of having UNICEF field/zonal office staff participating in the workshop as well as partners who have a field presence in the district, is that it is easier to seize the opportunity to move forward immediately on the priority issues together with the main district-level actors. This may include prioritising specific developmental activities related to safe water access of hygiene promotion or may relate to identifying how to support for the district disaster management committee.

The participants, plus other stakeholders should have an opportunity to validate the report and add to it as relevant. It is a snapshot of a time and place and it should be possible to revisit it over the passage of time, for example to measure progress of subsequent activities.

Assuming that the results and internal/external follow-up are satisfactory, UNICEF can establish an ongoing project with one or more partners who utilise VCA methodology, to conduct VCAs in a more systematic way. VCAs can form part of the regular programmatic cycle such as within the periodic SITANS. Other possible entry points would be as part of the UNDAF development process or within the UN’s Emergency Planning cycle.
Tools

VCA tools are designed to elicit, via a variety of methods, information that can then be triangulated. This contributes to the validity and reliability of the information, but can also be repetitive and a challenge when time is short. **The tools are only as effective as the facilitator** and can easily be hijacked and/or applied badly, which could ultimately "be damaging if the opinion of participants is influenced or presented inaccurately..."[participatory approaches have] also been hijacked for political reasons, to 'tick the participation box'...If the tools are misused to support the agenda of outsiders rather than the opinions and experience of local people projects will almost inevitably fail as a result."³⁹

This section does not advise which tools to use as that will depend on a number of factors, most importantly the partner and the VCA methodology they apply. The table that follows contains a non-exhaustive list of participatory tools. This section does not explain how the tool is used – readers can refer to the IFRC or VSO toolboxes. As with the hijacking of tools, as identified by VSO above, tools can also be poorly applied when the facilitator is not aware of ways that people can be marginalised. The objective of the table below, therefore, is to highlight how tools can be used to ensure as wide participation as possible. As an overarching principle, where possible, consider separating older men, younger men, older women and younger women for certain exercises to ensure that the most marginalised / or the least confident in a community or those that will culturally not speak out in public are able to participate fully. Please note the following:

- Tools should be applied in a flexible way to ensure that the data that needs to be collected is gathered and this requires careful monitoring to ensure that all members of the group are heard.
- Facilitators must know what type of information they wish to get out of the consultations and be prepared to pursue specific lines of inquiry.

Tools should be applied in a flexible way to ensure that the data that needs to be collected is actually collected. This requires careful monitoring of the group to ensure that the activity is being followed correctly, and that all members of the group are heard.

³⁹ VSO
**TABLE: CHECKLIST FOR APPLYING TOOLS IN SOCIALLY INCLUSIVE MANNER**

<table>
<thead>
<tr>
<th>Table Title</th>
<th>Points to Consider</th>
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<tbody>
<tr>
<td><strong>Introduction to concepts</strong>&lt;br&gt;Definitions and understanding of key terms</td>
<td>• Important to ensure that the DRR terms are appropriate and not mystifying or overly technical.&lt;br&gt;• Ensure aids are suitable for groups – e.g. visual aids might be useful for illiterate people or children, e.g. pictures of hills may have no resonance for people who live in flat lands (see Save the Children’s CLDRR Appendix 14)&lt;br&gt;• Skits can be designed – especially useful where drama is popular.&lt;br&gt;• This is a good time to raise the issue of social inclusion – raising issues of different members in a community and their differing needs, vulnerabilities and capacities.&lt;br&gt;• Try an exercise, e.g. Flood Shelter (See ANNEX), which raises issues of prejudice /stereotypes)</td>
</tr>
<tr>
<td><strong>Focus Group Discussions</strong></td>
<td>• FGDs designed based on line of inquiry – one ethnic group, a group of people living with disabilities, female school drop outs, out of school boys – some sort of homogeneity can help. In order to be transformative, smaller FGDs can then be brought back together and findings shared in plenary – may create a forum which might not normally exist. Take care that such divisions not exacerbate existing tensions nor create added stigmatization. One way to manage this is to work via existing structure e.g. CBOs working with a particular group, rather then create artificial divide by splitting a plenary session.&lt;br&gt;• Hold inside so that external “gate keepers” or passers by do not hijack/inhibit the discussion.&lt;br&gt;• FGDs should be manageable to ensure that all participate – 7-10 people&lt;br&gt;• Facilitators monitor and manage to ensure that few people do not dominate.&lt;br&gt;• If people are reticent about talking within the larger FGD, allow for brainstorming in pairs/first&lt;br&gt;• Ideally have two facilitators – one to lead discussion – one to record and observe so that they can also advise facilitator on issues requiring further discussion.</td>
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<tr>
<td><strong>Key Informant Interview/Semi-structured Interview</strong></td>
<td>• The timing and choice of who to interview is flexible. The FGDs and plenary sessions may reveal issues to follow up with a particular individual. So it may be best to leave the KII until the end when any other discussion topics could be further explored.&lt;br&gt;• Alternatively KII can be used at any point as a strategy to remove a person who is dominating but who may also have useful information.&lt;br&gt;• Choose a range of individuals to get various perspectives.&lt;br&gt;• Do not use identifying information about informants in report</td>
</tr>
<tr>
<td><strong>Hazard Identification</strong></td>
<td>• Different groups may identify different hazard and prioritise them in different ways.&lt;br&gt;• Share findings in plenary, allow for debate and revisit – although it is not necessary that the whole community agrees.&lt;br&gt;• Beware of prioritising in plenary, as the loudest will win, especially if the facilitator allows it.</td>
</tr>
<tr>
<td><strong>Mapping</strong>&lt;br&gt;Creating a map of a community/focus area which can be used to identify hazards, capacities and opportunities for emergency preparedness etc.</td>
<td>• See Save the Children’s CLDRR appendix 15 for exercise with children and hazards/capacities.&lt;br&gt;• Mapping is useful because both literate and non-literate people can contribute to the map construction and words are not necessary.&lt;br&gt;• For children it may be useful to have them sit down and decide how they will proceed in advance e.g. make decisions on a) which hazards will be on the map, b) how big an area will it cover, c) what colours may be used to identify certain aspects d) what symbols will be used, e) who will do the drawing. The children can be asked to agree what will be included on the map prior to the drawing. The map can be crosschecked with a relevant adult in order to improve the details then it can be shared with the wider community. This is a useful way to integrate CLDRR with adult driven activities. Or vice versa, a map already drawn by adults or an outline map drawn by facilitator can be augmented by the children. Ask children to add their own houses – this allows them to be “in the map” and then they can identify hazards etc for them.&lt;br&gt;• Ensure that the drawing is done in a way so that group members can all see and contribute – e.g. on the ground (using paper or soil) or on a table so that many people can be involved in...</td>
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the activity. There should be several markers to ensure one person doesn’t take control. In terms of validation people more likely to make corrections if all can see.

- Maps can describe complex information that might be difficult to describe verbally.
- Allow for the creation of several maps – women, men, boys and girls – the differences are revealing and may serve as an entry point for transformative activities. E.g. the community working together to destroy an area of cactus that children fear because of snakes. Risks will differ according to who is assessing them,
- Mapping can also identify those community members with greater /lesser vulnerability according to where they live. It can allow for debate about how to protect particular groups, but again care must be taken to avoid stigmatization.

<table>
<thead>
<tr>
<th>Ranking</th>
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<tr>
<td>Requires informants to assess the relative importance of different items using a form of scoring.</td>
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<td>• Ranking can be done in numerous ways but whichever way is chosen it needs to be appropriate to the group and context.</td>
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<tr>
<td>• When ranking in a group there is the risk that certain people can dominate—i.e. who holds on to the seeds, stones or whatever is being used. For verification it may be productive to do in groups and then consolidate at different stages. Ranking by itself must then be verified by explanations as to why this is the case. Single sex or age groups will identify different priorities.</td>
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<tr>
<td>• To engage children in a visual and fun way use happy/sad face ranking which can be adapted in different ways. Each child is given one happy face, one neutral face, and one sad face. With three issues to rank they place the faces accordingly. The facilitator then adds up the faces. Alternatively, they can be given three happy faces and 3 sad faces and also totals can be added up. [See Save the Children, CLDRR, Appendix 25]</td>
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<tr>
<th>Seasonal Calendars</th>
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<tr>
<td>Using a matrix, communities identify the months when certain activities take place over a yearly cycle.</td>
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<tr>
<td>• Within one area of investigation there may be several different livelihoods. Seasonal calendars should capture this variety and can be done separately e.g. pastoralists/farmers and then combined. If done together and there is a marginalised group the louder group may dominate.</td>
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<tr>
<th>Daily Activity Calendars</th>
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<tr>
<td>Marking off hours of a 24 hr clock, people identify the activities they do</td>
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<tr>
<td>• Typically used to highlight the multiple roles of women and girls, this is best done in sex-and age-disaggregated groups.</td>
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<tr>
<td>• Coming together to share the different daily activities is useful in that it identifies opportunities for who has the time to engage in particular DRR activities.</td>
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<tr>
<th>Historic Timelines</th>
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<tr>
<td>Identifies key events affecting the community/country. Can be directly related to disasters or linked to policy decisions. Used to identify trends over time e.g. 30-50 years</td>
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<tr>
<td>• Best done by a small group of people with good, long memories- it can be a way to integrate older people in the community. Again it is useful to include different groups who may have experienced events differently. A first draft could be shared and verified by the larger group.</td>
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<tr>
<td>• Can also be used to extract a dominant person from plenary – capitalising on his/her knowledge but allowing others to participate more fully.</td>
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<tr>
<td>• It is important to try and introduce political/policy level changes that may have had an impact – rather than focusing on major natural disasters.</td>
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<tr>
<th>Direct Observation</th>
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<tr>
<td>• Usually related to observation about the community’s environment/practices etc but can also be useful to guide facilitation team: Throughout the VCA, facilitators should be noting things they have observed and flagging them amongst one another for follow-up if necessary. E.g. how do men and women relate in plenary – who is allowed to talk – only the older or more educated women? How are the elderly treated – with respect? Or are they sidelined? This can then identify for the facilitators different approaches.</td>
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<th>Transect Walk</th>
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<tr>
<td>A walk/drive through the</td>
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<tr>
<td>• It might be useful to conduct separate walks with different individuals whose domains may culturally / practically differ.</td>
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</tbody>
</table>
| **location identifying hazards/environments/activities.** | ● Such exercises can also identify areas where access may be challenging for physically disabled people and also serve to identify escape routes. ([See VSO Participatory Approaches p164](#))

● Vary time of day when different people will be around and different activities ongoing.

● Ensure that the ‘chaperone’ is not restricting facilitator’s perspective

● Opportunity to engage in direct observation of activities of different groups of people and triangulate information already gathered. |

| **Livelihoods analysis and coping strategies analysis**
**Used to understand how people meet their basic needs and identify strength and resilience related to hazards** | ● Using sampling, identify some households from different socio-economic / livelihood groups, using a socially-inclusive approach this sampling should include households with PWDs, PLWHAs and single-headed or child-headed households, and different ethnic groups. Various tools can be used to compensate for illiteracy such as pie charts and block diagrams but essentially takes an interview format. ([See IFRC VCA Toolbox](#)). When discussing coping strategies it will be important to delve into the impact of different coping strategies that may have more of a detrimental effect on some family members e.g. who is more likely to have a lower food intake, elderly or young? Women or men? Individual interviews may be necessary to triangulate information, as some of these issues may be difficult to discuss in plenary. |

| **Venn Diagram**
**Identifying organisations/people who have influence in/support the community** | ● Used to measure institutional relationships with the community. This should be done in different groupings, which the community itself may prefer to divide – e.g. young, old, male, female etc. A health NGO may be more important to women of childbearing age than it is to men, for example. A micro-finance institution may have closer ties to one community rather than another. This exercise may identify useful connections and identify where organisations that could be approached for assistance that the community was not aware of previously. |

| **Forum theatre**
**Uses theatre techniques to bring out issues** | ● This tool can bring out in plenary, issues that may affect people differently or different people in the same way. Participants can be divided in different ways to elicit the differences or similarities, e.g. two ethnic groups living in close proximity could be asked to each improvise a scene illustrating a shared problem, which may be an opportunity to strengthen inter-ethnic relationships and resolve together a challenge. ([See VSO, Participatory Approaches p98](#)) |

| **Local Solutions** | ● This tool is focused on reinforcing local capacity but it can also serve to mine the resources of the older members of a community whose historical knowledge may have been lost in modernising or dependent communities. The tool examines a problem and then explores local solutions and explores how they can be improved. ([See VSO p118](#)) |

| **The Problem tree**
**A flow diagram illustrating root causes / impacts of a problem** | ● Once again, like many of the exercises, it is useful to do this exercise in smaller FGDs, as impacts/root causes may differ according to sex and age. |

| **Questionnaires** | ● Useful to ensure that the same information is gathered from a range of people but can be time-consuming/expensive to collect all the data

● Translate questionnaires into local languages or to manage illiteracy complete it with interviewee

● Advantage is that the same question will be asked to everybody interviewed which when analysed will bring out the differences. |

| **Institutional and social network analysis** | ● This can also be adapted to identify who in the community has more/less access or voice with these particular organisations – greater institutional analysis might identify the personnel who interact with the community and whether marginalised people benefit or not. Which of these support the marginalised groups and how can they better coordinate to support to fill identified gaps. How can communities better engage? |

| **Social norms** | ● This exercise is useful in bringing out the challenges faced by a particular group and identifying how to break down those barriers. Originally designed for PWDS, it could actually be effectively used for girls, children, women, PLWHAs and minorities ([see VSO Participatory Approaches p150](#)). |
More details and descriptions of how to use these tools can be found in VSO, Save the Children, IFRC

Resources

Useful websites

Children in a Changing Climate is a website bringing together researchers and development organisations working with a focus on children’s roles in preventing and adapting to climate change
http://www.childreninachangingclimate.org/default.php

The Gender Disaster Network is a forum for discussion, information and networking on issues related to gender relations and disasters http://www.gdnonline.org

IUCN’s gender and environment website has a variety of resources and initiatives looking at gender and climate change. http://www.genderandenvironment.org/index.php

Additional Tools (not listed in table)


Selected Texts


Ferretti S (unpublished) Participatory Vulnerability Analysis at Masalani Primary School, 8-13 June 2008, ActionAid Kenya


Pincha, C () Participation of Women in the Community Based Disaster Preparedness Program: A Critical Understanding, CARE India http://www.gdnonline.org/resources/Pincha_Participation_Women_CommunityBased_DRR.pdf


UNICEF Concept Note(unpublished) : Review and Policy Brief on Child Focused Disaster Risk Reduction, 2009


UNICEF (draft 09) Commitment to an Equal Future: UNICEF Policy on Gender Equality and the Empowerment of Girls and Women
ANNEXES: Vulnerability and Capacity Assessments
Guide to using existing VCA tools & methodology ensuring a socially inclusive approach

ANNEXES

Materials developed as part of the UNICEF Kenya pilot project

- PowerPoint presentation – Social Inclusion – Tana Delta
- PowerPoint presentation – Social Inclusion – Nyakach
- Session Outline – Child Focus Group Discussion – COVACA
- Exercise: Flood Shelter
- Summary Suggestions for Engaging with Children in a VCA

Handouts that can be shared with workshop participants

- IUCN Factsheet – Gender and Disaster Fact Sheet
- Glossary of Disaster-Related Terms
Participation and Inclusion

Vulnerability & Capacity Assessments

Tracy Vaughan Gough
UNICEF Kenya

Overview

• Principle of Participation
• Diversity and Marginalisation - EXCLUSION
  – Gender
  – Children
• Context: Tana River District
• Strategies for INCLUSION

Participation: a principle of VCA

• VCA = a community-based participatory process
• Ownership – empowerment – decision-making
• Acknowledges that people themselves have knowledge/skills
• Provides a forum for discussion AND planning that might not otherwise exist.

Some Facts:

• Only 1 in 3 survivors of the tsunami were women or children under 15. In the worst affected village, 80% deaths were women.
• In the 2003 French heat-wave, 15,000 died, 70% were women.
• Boys & girls under 18 are highly vulnerable especially if at school. The 2005 Kashmir earthquake killed 17,000 school children.

Participation: a principle of VCA

• Leads to improved accuracy of baseline data/better response
• Rights-based programming

IFRC Global Agenda (2005-2010)
Goal 4: Promote respect for diversity and human dignity, and reduce intolerance, discrimination, and social inclusion

What does participation mean?

Degrees of participation

• Manipulation - indoctrinate
• Information – one way communication
• Consultation – two way communication
• Consensus building - interaction
• Decision making – collective decisions
• Risk sharing - accountability
• Partnership – exchange amongst equals
• Self-management - empowerment

Constraints to participation

Who is least likely to be consulted?

– Those living on periphery – physically /socially
– Women – gender inequality
– Children – at school, not considered worthy
– PLWHA and disabled – inaccessible, forgotten
– Minority groups – marginalised by the main interlocutors
– Poor
– Illiterate

Challenges to participation

Why are some people not likely to be consulted?

– Lack of time
– Lack of confidence/skills/awareness
– Community constraints – traditions/negative perceptions/experiences of your organisations
– Identifying the right people to talk to
– Lack of gender-balance on assessment team
– Communication issues (language)
Focus Areas

Gender
Children

Gender and Sex

- **Sex** is biologically determined and immutable (it is fixed)
- **Gender** is socially determined and dynamic (it can change)

*We are born male or female but LEARN to be boys and girls, men and women*

Defining Gender

- Learned social differences between males & females
- Deeply rooted in every culture, but changeable over time (variations both within & between cultures)
- Gender determines roles, responsibilities, opportunities, privileges, expectations, & limitations for males & females in any culture.

Men and Masculinities

- Perception gender focuses on women
- Yes – to address inequality
- BUT – because men's and women's identities are interlinked, any change experienced by women will impact on men
- Men's gender roles can ALSO oppress them
- Men's engagement as advocates critical

Case Study: Cyclone, Bangladesh, 1991

The winds blew; water flooded the hut. The widow clutched her 4 little boys & fled the hut. She ran into the blinding rain, falling, losing grip of her boys. Bruised, drenched they could not reach the far away shelter but just managed to reach the landlord's sturdy house before the water overpowered others, sweeping them to their deaths. In the hours that passed, she comforted her clinging children, shrieking with fear, hunger, thirst & cold. Daylight brought a view of the havoc. Young men roamed the streets, looting … & worse. When help came she battled with stronger men in huge queues for food, clothes, medicine, shelter. Her household was on no one’s list of beneficiaries the relief agencies said they would deal with her case later. She survived by begging, & fighting for relief. When life returned to normal, she stood out her living from door-to-door sales.

Men

May be *interested* by traditional male roles. Consider:

- widowers, single fathers, who may need support for coping with non-traditional male roles
- orphaned boys vulnerable to negative coping mechanisms
- boys put to work/trafficked
- male "first responders"
- migrant workers – distance from families
- men in agricultural communities under stress
- socially isolated/marginalized men
- men living with disabilities
- men exposed to health hazards, e.g. HIV/AIDS

Gender-blind assumptions

- Men, women, boys and girls of all ages:
  - have the same needs
  - do not need privacy when using latrines
  - do not menstruate
  - can all cook
  - share their food equally
  - equally have access to school/work
  - have the same household (reproductive) obligations
  - are equally vulnerable to gender-based violence
  - are equally likely to be consulted during aid assessments

Discuss:

Gender means women
Impact of assumptions

• Can result in misplaced assistance
• Can exacerbate gender inequality
• Can heighten challenges of coping in the aftermath of a disaster
• Can lead to gender-based violence
• Can lead to inappropriate response

Gender analysis

• Examines relationships between females & males.
• Examines roles, access to, and control of, resources & constraints they face relative to each other.
• It is critical to conduct gender analysis before implementation

Children

Children, with "unadulterated" perspective, can often offer in-depth information about local vulnerabilities and capacities, and in presenting and acting on this information, they are not constrained by institutional/political mandates or sectoral priorities (PLAN/WVI).

Yet Children Are:

• Often excluded from civil society efforts to make their communities more resilient to disasters
• Often seen as helpless victims
• Their potential contributions to DRR not always recognised.

The CRC states: every child who is capable of forming his or her own views has the right to express those views freely in matters that will affect the child.

How do we ensure participation?

⇒ USE ALTERNATE STRATEGIES TO ENGAGE MARGINALISED GROUPS

Strategies

• Tools should be applied in a flexible way to ensure that the data that needs to be collected is actually collected. This requires careful monitoring of the group to ensure that the activity is being followed correctly, and that all members of the group are heard.

Strategies for Children

• Ensure children are not led by facilitators assumptions
• Adapt tools to make them child-friendly
• Take enough time to explain concepts to ensure everybody understands
• Certain students may dominate discussions so strategies for this
• Link work with children as part of broader process and not isolated
• Use appropriate communication form, e.g. sitting on ground, playing
• Use language appropriately
• Take time, trust is not instantaneous
• Appreciate that children may express themselves in un-adult ways
Consider who in a community:

- Manages & uses natural resources on a daily basis
- May have no access to radio/media
- Has limited economic resources to anticipate, prepare for, & recover from disaster
- Is under-represented politically

Women's potential capacities:

- Connected with schools & children's education
- Influence over others through social networks
- Effective communicators
- Attentive to emergency warning & preparedness
- Organize locally to address immediate family/community needs e.g. clean water
- Responds to on-going needs in recovery period following a disaster
- Are safety-conscious or risk-averse.

Tana River District: Reflection

- How are disabled people involved in community decision-making structures?
  - Are some members of the community segregated for religious/cultural reasons?
  - Are there language barriers for some people?
  - How will insecurity impact access to information?
  - How does illiteracy affect VCA/DRR?

Participation Standards

**People are:**

- Not required to participate if don’t wish to
- Not required to provide information they don’t wish to
- To be informed of purposes – do not raise false expectations
- Be able to express self freely without criticism
- Be kept informed – remain active in process.

Gender, age and diversity must be considered in VCAs:

a) to avoid excluding some members of the community
b) to ensure information elicited reflects ALL views not just the loudest speakers
c) because all people of have different experiences and may be more or less vulnerable to risks depending on their sex, age, gender roles, disabilities etc.

Tana River District: reflection

- How are elderly people treated?
- How will insecurity impact access to information?
- How does illiteracy affect VCA/DRR?

Participation Standards

**Teams should:**

- Be aware of constraints to participation – family obligations/inconveniences
- Inform people of possible benefits of participation – for community not individual
- Ensure protection for informants
- Provide contacts for follow-up (accountability)

Concluding thoughts

- Try not make assumptions based on your own gender roles, age and culture
- Always ask if the risks are different for men, women, boys and girls etc.
Social inclusion

COVACA
Nyakach
1-3 December 2009
Tracy Vaughan Gough, UNICEF Kenya

Social exclusion

- Who is excluded?
  - People with disabilities
  - PLWHA/housebound illnesses
  - Women
  - Children/young people
  - The elderly
  - Ethnic/religious minorities
  - Others who are outside the norm

- From what?
  - Decision-making
    - Community level
    - Household

The right to participate

- Enshrined in human rights treaties
  - Universal declaration of human rights
  - Convention on the rights of the child (CRC)
  - Convention to eliminate all forms of discrimination against women (CEDAW)

Some facts

- Studies show that women, boys and girls are 14 times more likely than men to die during disasters
- It was easier for men to survive during the tsunami because boys are taught to swim
- Men who feel they are the “stronger” sex may expose themselves to risky situations, e.g. early deaths during hurricane Mitch were men who took fewer precautions

COVACA and Social Inclusion

- The most vulnerable during a disaster are often those who are marginalised/excluded because:
  - They are not included in planning/awareness-raising (e.g. community meetings)
  - EWS do not reach them (they are tailored to a particular group, e.g. radio owners)
  - They lack the basic survival skills (girls may not swim)
  - Cultural practices (women may not be allowed to go to mixed-sex cyclone shelters)
  - Access challenges
  - Caring obligations
  - Poverty
  - Vulnerable livelihoods

What can be done?

- Always ask the experts
  - Include CBOs/lobby groups/representatives in DRR activities
- Do not make assumptions that you know better
  - We all have biases/ignorance
- REMEMBER - one does not speak for all -
  - Wide consultations - reaching the marginalised children

tips

- Presence does not imply participation
  - Single-sex groups
  - Focus groups
  - One-on-one interviews
  - Use checklists to ensure all issues covered
KENYA MATERIALS

ANNEX: SESSION OUTLINE – CHILD FOCUS GROUP DISCUSSIONS - COVACA
Participating children in Community Owned vulnerability and capacity assessments
Focus Group Discussions for children in Nyakach District, 2\textsuperscript{nd} December 2009
UNICEF/World Vision

Introduction:
The facilitator will lead children through a session of introductions, and climate setting after which, they will be introduced to a few terms and terminologies related to disasters to enable them to engage well in the discussions.

Discussion 1.
A) Children will then be lead through a discussion on identifying the threats that affect them in the community. The first session they will identify all the threats/disasters affecting their community. Children to discuss in pair and voice their threat to the rest of the group.
B) Children will be asked if there are any signs that occur in the community that shows that the threats that we have listed above will occur. List the signs down.
C) Children to be divided into 4 groups and have them prioritise 4 threats form the list given in a) then let them present to the whole group and have them harmonize to finally have just 4 threats.

Discussion 2.
Children to be divided into 4 groups according to age, then have the FGDs led by facilitators, discuss the following questions. Each group will tackle one key threat prioritized above:
   a) How does the threat affect/impact them/community?
   b) Who is most affected by the threat?
   c) How do these people who are affected cope with the effect of the threat?
   d) What can be done to help these people who are affected to cope better in the future?
   e) What is it that the community members are doing/not doing/have or do not have that is causing this threat to occur?
   f) Do you think your community has any resources, tools and knowledge to deal with this threat? If yes, what are they?
   g) Using the resources above what activities do you think the community can do to reduce the impacts of the threat?
   h) What activities can children be involved in, and how?

Wrapping up
The children will present their findings to the rest of the participants and choose who, from each group will present their work to the adults in the district COVACA.

NB. This is the session designed by World Vision and UNICEF Kenya for the short FGDs held with children as part of the Nyakach COVACA. The findings and recommendations generated by the children were subsequently shared with the adults in the district COVACA and formed part of the final report. The children’s input was extremely well-received and adults were astonished at the knowledge and insights the children presented. The District Commissioner consequently invited the children to participate in the next day’s district management meeting.
ANNEX: FLOOD SHELTER EXERCISE

Purpose: This discussion tool can be used for educational purposes (informing), for information-gathering about local cultural norms and perceptions, or for joint analysis of people’s rights and capabilities.

Technique: 1. Explain the following: There is room for six people in a flood shelter. Within a few moments a major flood will engulf the area killing everybody else. Before that happens six people must be safely inside. There are however ten candidates. Characters can be listed on paper, or presented as drawings, cut-outs or puppets.

- a police officer with a gun
- a 16-year-old mentally retarded boy
- a 19-year-old homosexual Olympic athlete
- a 21-year-old female singer
- a 50-year-old female politician
- a 50-year-old female pastor
- a poor woman pregnant for the first time who is HIV positive
- a 70-year-old grandfather/mzee
- a 35-year-old male scientist in a wheelchair
- a 7 year old
- a 40-year-old retired commercial sex-worker.

2. The group divides into several smaller groups and brainstorms whom they are going to save. After five – ten minutes each group joins another group and explains their choices. The discussion might get rather lively. After a period of time, the facilitator calls a halt. S/he does not ask who the groups chose. Instead:

- Is there a right answer? Of course not – we all have rights and this exercise brings out that point.
- Why do we do this exercise? To reveal pre-conceptions, prejudice etc.

Attitude checklist: • Intervention should be minimal – only to bring in the views of those who have not contributed, or to check agreement. • Once choices have been made, ‘Why’ questions can be used to explore the reasoning of the group. If the purpose of the exercise is to explore notions of universal rights, these need to be introduced gradually once the group has had a chance to discuss their own interpretation and meaning.

Benefits:
• This exercise is designed to make participants act on and explain their prejudices and stereotypes in deciding who is more dispensable to them and society.
• There is obviously no correct solution, but the discussion around these ten characters enables people to recognise and question their own discriminatory practices
• As this can be a purely oral method, it is easy for people with mobility and visual disabilities to participate. It is also possible to adapt into a role play to facilitate the involvement of people with hearing disabilities.

Variations: Adapt scenario to suit culture, or adapt characters to investigate different diversity issues (caste, ethnicity, HIV).

Potential pitfalls
• The facilitator imposes their values on the group.
• The purpose of the exercise is not adequately explained.
• The exercise goes too far into sensitive issues too fast, without establishing adequate rapport.
• The characters or the scenario are not appropriate for the group.
• The facilitator is not comfortable or adequately prepared to examine and challenge local culture.
SUMMARY SUGGESTIONS FOR ENGAGING WITH CHILDREN IN A VULNERABILITY AND CAPACITY ASSESSMENT

Create alternative opportunities for children’s engagement. It is not appropriate to have children in an entire workshop of this type, yet children’s voices can be heard in other ways.

Ensure that the involvement of children is meaningful and not superficial.

Planning phase

- Ensure that the partner has an interest in including children as active participants in the process.
- Identify in advance via review of secondary data relevant issues affecting children in the district, e.g.
  - numbers (in and out of school)
  - Children with special needs/disabilities
  - Locations of children’s institutions and numbers
  - Whether disaster preparedness plans include children and their issues
  - Main morbidity/mortality risks for children
  - The main protection challenges for both boys and for girls; which ages and sex are more at risk?
- Ensure people who work with children are part of the VCA (teachers, children’s officers, children’s advocates etc.)
- Plan one or more separate, but complimentary, sessions with children, with both single-sex and plenary FGDs. This can be done:
  - In partnership with an organisation that already works with children, e.g. ActionAid who works on DRR in schools, for example. Save the Children has also conducted work on Child-led DRR.
  - Organising separate sessions for children during the VCA (e.g. the facilitators divide – half working with children/half remaining with the adults). Possible entry points are: scout or guide groups, after-school groups, out of school groups or other existing children’s fora. Schools and organised groups are also useful entry points or follow-up DRR activities and the VCA can initiate or strengthen existing contacts. Children tend to be more receptive to new ideas than adults.
- Plan for how this work will be incorporated into the larger VCA.

VCA sessions with children

- Provide refreshment, transport and other expenses incurred
- Be realistic about time requirements with participants but do not take too long. Three hours should be sufficient. Explain location of bathrooms/time of breaks etc.) Explain that people may leave the room should they need to.
- Try to select a location free from distractions.
- Conduct the FGD in an environment where participants will feel comfortable and where they will feel able to talk freely and informally. It may be appropriate, for example, to remove authority figures e.g. teachers and parents.
- Sit at the same level as the participant to subvert the “them and us” mentality.
- Provide context/rationale for the consultation in appropriate language and framed in a culturally appropriate way.
- Take enough time to explain the concepts to ensure everybody understands.
- Be open about the purpose of the discussion and take time to build up trust.
Some children may have bad experiences of adults.

**Explain** the following:
- We need your input and want you to be honest and open with us.
- We want you to do the talking
- Every person’s opinions are useful – don’t worry if your ideas are different - there are no right / wrong answers
- We want you to feel comfortable if sensitive issues come up – everything we say in this room stays here
- We will take notes to capture your thoughts but everything is anonymous
- Do not force children to participate
- **Ask participants if they have any questions, explaining that they can also stop the discussion and ask at any point.**

It can be helpful if the FGD facilitators / note-takers come from the community or have worked in the area for a period of time as they will be more sensitive to the language, non-verbal communication and cultural norms than outsiders.

If interpreters are required, ensure that they are competent in both languages so that subtleties are not lost. Interpreters should also be experienced and competent in working with children and be sensitive to any special needs the children may have.

It may also be necessary to have male facilitators for boys and females for girls. If in doubt, ask.

Facilitators should be competent in working with children and be sensitive to any special needs they might have.

Children must not be led by facilitators making assumptions about certain aspects e.g. the most important hazards;

Use language appropriately so that terms are explained fully – repeat questions by framing sentences differently and double-check that children have understood – ensure they feel able to ask for clarification

Do not ask too many questions at the same time

Use open ended questions: who, what why where how

Be patient and don’t interrupt

Take time, trust is not instantaneous

Appreciate that children may express themselves in un-adult ways.

Certain children may dominate discussions so important to strategies for this. Also important to remember the exercise is not to teach facts about disasters but to ascertain local hazards and vulnerabilities and teach children how to analyze these. Use children who have been affected by disasters as resources, if appropriate.

Use visual aids to attract more participation and dialogue

Assess children’s answers – are they concrete facts, opinions or rumours.

**Integrating children’s perspectives**

An important element of the workshop will be to ensure there is space to incorporate children’s perspectives. Child representatives should then report back to the adults. Experience shows this to be transformative and children’s different responses to the risk etc. may actually elicit a rethink by the adults, as long as the children’s perspectives are actually systematically incorporated and not merely a superficial consultation.
Adapted from practical experience and also from Ferretti S (2008) Participatory Vulnerability Analysis at Masalani Primary School, 8-13 June 2008, Disaster Risk Reduction (DRR) in School Project, ActionAid International and Save the Children Child-led Disaster Risk Reduction: A Practical Guide

HANDOUT

ANNEX: IUCN FACT SHEET: DISASTER AND GENDER STATISTICS

• Neumayer and Plümper analyzed disasters in 141 countries and found that, when it came to deaths, gender differences were directly linked to women’s economic and social rights; in societies where women and men enjoyed equal rights, disasters caused the same number of deaths in both sexes. They also confirmed that discrepancies were the result of existing inequalities. For example, boys were given preferential treatment during rescue efforts and, following disasters, both women and girls suffered more from shortages of food and economic resources (Neumayer and Plümper, 2007).

• Studies show that women, boys and girls are 14 times more likely than men to die during a disaster (Peterson, 2007).

• In 1991, during the cyclone disasters in Bangladesh, of the 140,000 people who died, 90% were women (Ikeda, 1995).

• In industrialized countries, more women than men died during the heat wave that affected Europe in 2003. In France most deaths were among elderly women (Pirard et al., 2005).

• During the emergency caused by hurricane Katrina in the United States, most of the victims trapped in New Orleans were Afro-American women with their children, the poorest demographic group in that part of the country (Gault et al., 2005; Williams et al., 2006).

• In Sri Lanka, it was easier for men to survive during the tsunami because knowing how to swim and climb trees is mainly taught to boys. This social prejudice means that girls and women in Sri Lanka have very few possibilities of surviving in future disasters (Oxfam, 2005).

• Following a disaster, it is more likely that women will be victims of domestic and sexual violence; they even avoid using shelters for fear of being sexually assaulted (Davis et al., 2005).

• Nutritional condition determines the capacity to deal with disasters (Cannon, 2002). Women are more likely to suffer from malnutrition because they have specific nutritional needs when they are pregnant or breast feeding, and some cultures have food hierarchies. For example, in south and south-east Asia, 45–60% of women of reproductive age are below their normal weight and 80% of pregnant women have iron deficiencies. In sub-Saharan Africa women lift much heavier loads than men but consume fewer calories because the culture rules that men receive more food (FAO, 2000).

• In some cases, gender differences also increase men’s mortality in disaster situations. Many men are exposed to risky situations and even die because they believe that by being the “stronger sex” they need not take precautions and because society expects them to take heroic rescue action. For example, there were more immediate deaths among men when hurricane Mitch struck Central America, not only because they were engaged in open-air activities, but because they took fewer precautions when facing risks (Bradshaw, 2004).

• In Kenya, fetching water may use up to 85% of a woman’s daily energy intake; in times of drought a greater work load is placed on women’s shoulders, some spend up to eight hours a day in search of water (Duncan, 2007).

• Extreme weather events often create conditions conducive to outbreaks of infectious diseases; heavy rains produce insect breeding grounds, and contaminate clean water sources while drought on the other hand can cause fungal spores and spark fires. Women, especially expectant mothers, are highly vulnerable to water-borne diseases, thermal and other extreme events.
• In refugee camps that arise as a result of natural disasters and conflicts over scarce resources, women and the girl child refugees are exposed to higher risks compared to male refugees. Social strains in such situations aggravate stress levels in the family, which may result in incidences of domestic violence.

HANDOUT

ANNEX: GLOSSARY OF DISASTER-RELATED TERMS

Disaster - a serious disruption of the functioning of a community that causes widespread human, material, economic or environmental losses and exceeds the ability of the affected community to cope using its own resources.

\[ \text{Disaster} = \text{vulnerability} + \text{hazard} \]

Hazard - a potentially damaging physical event, phenomenon or human activity that may cause the loss of life or injury, property damage, social and economic disruption or environmental degradation. Natural hazards are natural processes or phenomena occurring that may constitute a damaging event.

Risk - the probability of harmful consequences, or expected losses (deaths, injuries, materials, livelihoods, economic activity disrupted or environment damaged) resulting from interactions between natural or human-induced hazards and vulnerable conditions.

Vulnerability - the conditions determined by physical, social, economic and environmental factors or processes, which increase the susceptibility of a community to the impact of hazards.

Capacity - a combination of all the strengths and resources available within a community, society or organization that can reduce the level of risk, or the effects of a disaster. Capacity may include physical, institutional, social or economic means as well as skilled personal or collective attributes such as leadership and management. Capacity may also be described as capability.

Mitigation - ways to limit the likely extent of damage - structural/physical measures taken before a disaster to protect and/or strengthen vulnerable elements, to reduce the potential for negative impact on it from natural hazards.

Preparedness - actions taken and plans made in an attempt to cope better and increase survival chances when a hazard arrives. It includes all activities, which are taken in advance by people and organizations to ensure effective response to the potential impact of natural hazards, including support to the local coping capacity of the population at risk, the issuing of timely and effective early warnings, as well as the temporary removal of people and property from a threatened location.

Resilience / resilient – the capacity of a system, community or society to resist or to change in order that it may obtain an acceptable level in functioning and structure This is determined by the degree to which the
social system is capable of organising itself and the ability to increase its capacity for learning and adaptation, including the capacity to recover from a disaster.