

# COMMUNITY SELECTION ASSESSMENT REPORT

Together Becoming Resilient project

*July – August 2014*



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## Abbreviations and acronyms

<b>ACS</b>	Area Council Secretary
<b>BO</b>	Branch Officer
<b>CBDRR</b>	Community Based Disaster Risk Reduction
<b>CCA</b>	Climate Change Adaptation
<b>CDC</b>	Community Disaster Committee
<b>DRR</b>	Disaster Risk Reduction
<b>FRC</b>	French Red Cross Society
<b>HQ</b>	Head Quarter
<b>KAP</b>	Knowledge, Attitude, and Practice
<b>MoU</b>	Memorandum of Understanding
<b>NDMO</b>	National Disaster Management Office
<b>NGO</b>	Non-Governmental Organisation
<b>PDC</b>	Provincial Disaster Council
<b>PDO</b>	Provincial Disaster Officer
<b>RRA</b>	Rural Rapid Appraisal
<b>SBO</b>	Sub-Branch Office/Sub-Branch Officer
<b>SG</b>	Secretary General
<b>TBR</b>	Together Becoming Resilient
<b>VRCS</b>	Vanuatu Red Cross Society

## Introduction

As part of the national Disaster management action plan, the National Disaster Management Office (NDMO) has mandated Non Governmental Organizations (NGOs) and Red Cross to set up Community Disaster Communities in order to build community resilience at local level.

Since 2010 the French Red Cross (FRC) has supported the Vanuatu Red Cross Society (VRCS) implementing a pilot Community Based Disaster Risk Reduction (CBDRR) programs called « Together becoming resilient project », or TBR, in Torba province. Following those CBDRR initiatives, water and sanitation mitigation projects have been also implemented to the targeted communities in order to go deeper to increase resilience capacity building of the community level.

In line with the NDMO Action plan, VRCS strategic plan for 2013-2017 targeted to replicate this CBDRR experience set up in Torba province to other provinces. During the definition of the strategy, the VRCS carried out an internal vulnerability mapping exercise in a participatory way. This exercise was focused on the identification of the main humanitarian needs in the different islands of Vanuatu archipelago. This map highlighted the remote places of the archipelago that do not have many services so that, remote areas have been prioritized for intervention by VRCS. Additionally, as we see in, Figure 1 joined, Malekula Island is an island from Vanuatu where almost the entirety of the territory is considered as remote area. In addition, Disaster Risk Reduction (DRR) is one of the main priority identified by Malampa province. To conclude, **because of those two elements mentioned, Malekula has been chosen as the area to target for this DRR project.**

USAID has funded a fourth phase of the CBDRR program titled “TBR4” project involving VRCS and FRC. Out of the activities that will be implemented at national and provincial level, this project will replicate the methodology developed in Torba in Malampa province during 18 months. According to the budget and the time frame and the field constraints, it has been **decided that 8 communities will benefit from the project.**

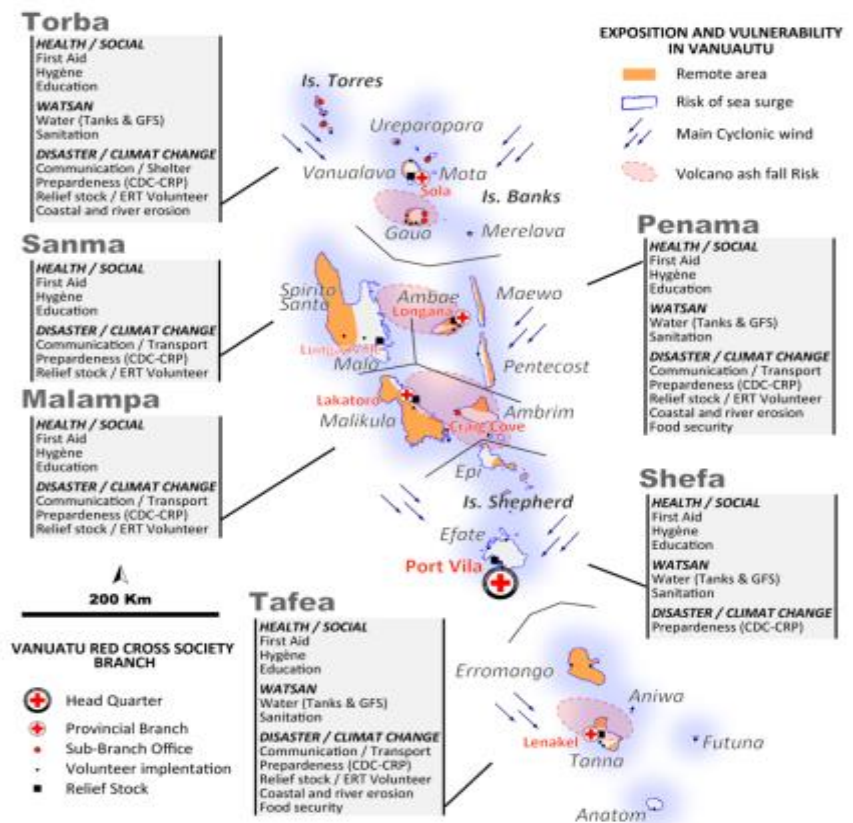


Figure 1 Vanuatu exposition and vulnerability map

**Thus, the main objective of this report is to describe the process established and followed to select the 8 communities just mentioned.** To reach that goal, first of all, the main objectives of this report will be highlighted, then each step of the selection process will be described and finally, this document will be concluded by the presentation of the main results and the limits of the methodology used.

## 1. Objectives of the report.

The main propose of this report is to describe the methodology used to select the 8 communities that will be involved in the TBR4 project. Following the Red Cross mandate and its strategy, the VRCS has decided to target in priorities communities exposed to a high risk of disaster. The development of this methodology aims to base the community selection process on objective criteria from a participatory approach with the main DRR Stakeholders (NDMO, Province, Area council representative).

The establishment of this justifiable process as to be understood as a tool that will help the Red Cross to explain the decisions taken to the Vanuatu's authorities, to target and none target communities and to NGOs. The approach developed may be also used as an advocacy tool to help the NDMO to strengthen the ongoing process to prioritize areas of intervention for CBDRR activities.

## 2. Methodology and community selection steps

The basic equation of the Disaster risk, available below, has been the starting point of the community selection methodology.

$$\text{Disaster} = \text{Hazard intensity} \times \text{Exposure}^* \times \text{Vulnerability}$$

(\*Population, infrastructure)

In order to target the most exposed to natural threat, populated and vulnerable areas and to cover the areas that are exposed to disaster risk, a **five steps methodology**, based on the CBDRR VRCS's hand book, has been developed:

**Step 1 – Provincial selection process:** used of National risk mapping to identify the targeted province and island. This process has been done during the VRCS strategy set up, before the beginning of the current DRR project. This process will be explain shortly in the part 2.1.1 "*Background of the research*".

**Step 2 – Areas of intervention selection process:** meeting with local authorities to identify areas to focus on in the selected province. This step will be describe in details in the part 2.2 "*Step 2 - Malekula authorities consultation*". "

**Step 3 – Identification of the community :** cross-check the information collected from the authorities and consultation of the national data base (population, infrastructure, communication, historical disaster and their damage...). In order to carry out this step, 3 tools from this RRA tools box, from the TBR package had been used during the assessment report: Community profile, Community criteria, and a criteria matrix for analysis. Those tools will be described in details in the part 2.3 "*Step 3 - Field assessment design*".

**Step 4 - Field data collection to assess community:** thanks to the Rapid Rural Assessment tools (step 3), data's from the communities had been collected. Those information will be used to compare the community and be able to select them. This step will be described in the part 2.4 "*Step 4 - RRA field mission*".

The analysis of the data collected on the field and the result obtain will be detail in the part 3 of this report. In the mentioned section, the final list of the 8 select community will be done and justified.

## 2.1. Step 1 - Preliminary Studies

### 2.1.1. Background of the research

As explained in the introduction, the step 1 has been done during VRCS Strategy workshop which involved the all staffs. This exercise identified Malekula Island as a priority for CBDRR intervention because of remoteness issues, its high population and the lack of coping mechanisms in place such the Community Disaster Committee (CDC) set up under the NDMO structure. Actually, Malekula is the 3<sup>rd</sup> populated island in Vanuatu with 22 902 peoples (2009 census), and there are only 2 Community Disaster Committee (CDC) established in Litzlitz and Uripiv by the NGO Act For peace in 2010 (Figure 2). According to those points, Malekula is considered as an island exposed to a risk of disaster that can potentially affect a large number of people throughout Vanuatu scale.

### 2.1.2. Information gathering preparation

Before to identify the communities that are most in need to benefit from a Disaster Risk Reduction (DRR) project, we have to identify the areas that are prone to the highest risk of disaster in the island. The approach chooses was to elaborate a risk map of Malekula.

In order to build a risk map of Malekula, a workshop (Step 2) has been organized in partnership with the Malampa province, through the Area Council Secretaries (ACSs), VRCS Malampa branch and the National Disaster Management Office (NDMO). This workshop took place in July 2014 and has been financed by a Dipecho grant from "TBR3" (Annex 1).



Figure 2 : Malekula location map

The main goal of the workshop was to:

- Sensitize the ACSs of Malekula on the disaster issue and DRR concept ;
- Present them the community's selection approach and criteria ;
- Cross-check the geographical, social and economic information ;
- Identify the priorities of the provinces.

In order to reach this goal the main expected outcomes were:

- 1) **Workshop participants have understood DRR project activities that will be implemented** in Malekula in 2014-15 **by red cross** ;
- 2) **NDMO structure** and the roles and responsibilities of the CDCs and PDCs are understood by the participants ;
- 3) **Community's selection tools** from the CBDRR handbook are understood by the VRCS ACS – VRCS Branch officer and they are able to comment them ;
- 4) Through a mapping exercise, participants **are able to identify areas prone to disaster risk in Malekula** Island.

## **2.2. Step 2 - Malekula authorities consultation**

### **2.2.1. Participants**

The 3<sup>rd</sup> July 2014 the training and consultation workshop took place in the administrative capital of Malampa province, Lakatoro, in Malekula Island (Picture 1). This Workshop has been facilitated by the VRCSs DRR team as well as the NDMO provincial liaison officer. The VRCS provincial branch manager, in position since 5 years, was also available to support the workshop implementation and to give his input as he knows very well Malekula.

The province has been represented by 4 ACSs from Malekula (North West, South West, South, and South East Malekula) out of 6 as 2 positions were still vacant (North east and central Malekula) at this time. Every ACSs was in position since at least 5 years and grew up in Malekula so they were good resources to gather information.

The ACSs know very well there area council (population, infrastructure, public services, past disaster and their impact), as they have in charge the administrative management and the development of those areas. The ACSs are the key stakeholder that the project will target to monitor the activities while the project will be finished. So it was much appreciated that all the ACSs were involved in the workshop to give their input and to select the areas to target in this project.

### **2.2.2. Implementation of the workshop**

The workshop was dividing in two main parts:

- 1) **Presentation** that aims to give a minimum knowledge to the participant on the Red Cross and NDMO (mandate, ongoing projects, current structure...).
- 2) **Participatory risk mapping exercise** that will be based on the knowledge from Malekula's participants and that will help the project team to identify priority areas to assess.

During the presentation part of the workshop constructive input have been done by the ACSs, in particular on the selection criteria. We will detail those input in the part 2.3.2 dedicated to the design of the selection criteria. We will describe in the section just mentioned the method used to create Malekula risk map and the process used to identify priorities area to be assess in a field mission.

### 2.2.3. Risk mapping method

To create the risk map, the tools used by the participants were flip charts and makers. Background map of Malekula has been drawn on the paper thank to a projector, to help the participants by giving them landmark. A printed map from the land department was also one of the main tools used by the participants as a data source. In order to complete the risk map participants went to several steps. They built a hazard map then a vulnerability map and finally the risk map. Thanks to this approach the disaster risk equation "Disaster = Hazard intensity x Exposure x Vulnerability" has been respected.



Picture 1 : Mapping exercise the 3<sup>rd</sup> July 2014 in Lakatoro. Area council secretaries, NDMO and Red Cross officer are committed to identify risk areas.

### 2.2.4. Exposure and hazard maps (Erreur ! Source du renvoi introuvable.)

The first map to create was the hazard map. This map aims to show the different kind hazard present, their intensity, and the territory exposes to it and intensity of it.

Areas exposed to natural hazards have been identified directly on the map thanks to the geographical context. Thus, the team was able to identify the areas located near the biggest river exposed to the flood, the communities located near the sea exposed to sea surge, and also areas located near slop exposed to landslide. Risky areas had been defined using ACSs field experiences, past disasters impact and ongoing data of the population.

The hazard intensity has been determinated mainly thanks to the ACS testimonies on the past events. Every disaster that strokes Malekula has been located on a map with the maximum detail level such as, hazard characteristic, date, damages. Some of the past disasters that affected the entire island, such as cyclones, had been mentioned on the side of the map. Limit of this approach is that the information



available is not accurate because of lack of information in the data base from the national level and should be checked on the field. The intensity and frequency of the hazard have been classified in three levels: Low, Medium and high.

Colours have been applied to each disaster identify (Figure 3 Malekula hazard and historical disaster map). All the areas where disasters never occurred have been considered as the lowest intensity of hazard. The under populated or the uninhabited areas (central Malekula) have been considered as well as a low intensity of hazard as there is no information available. Even this information is not exact because of the lack of information just mentioned the impact on our exercise will be very limited as there are no people living here so far.

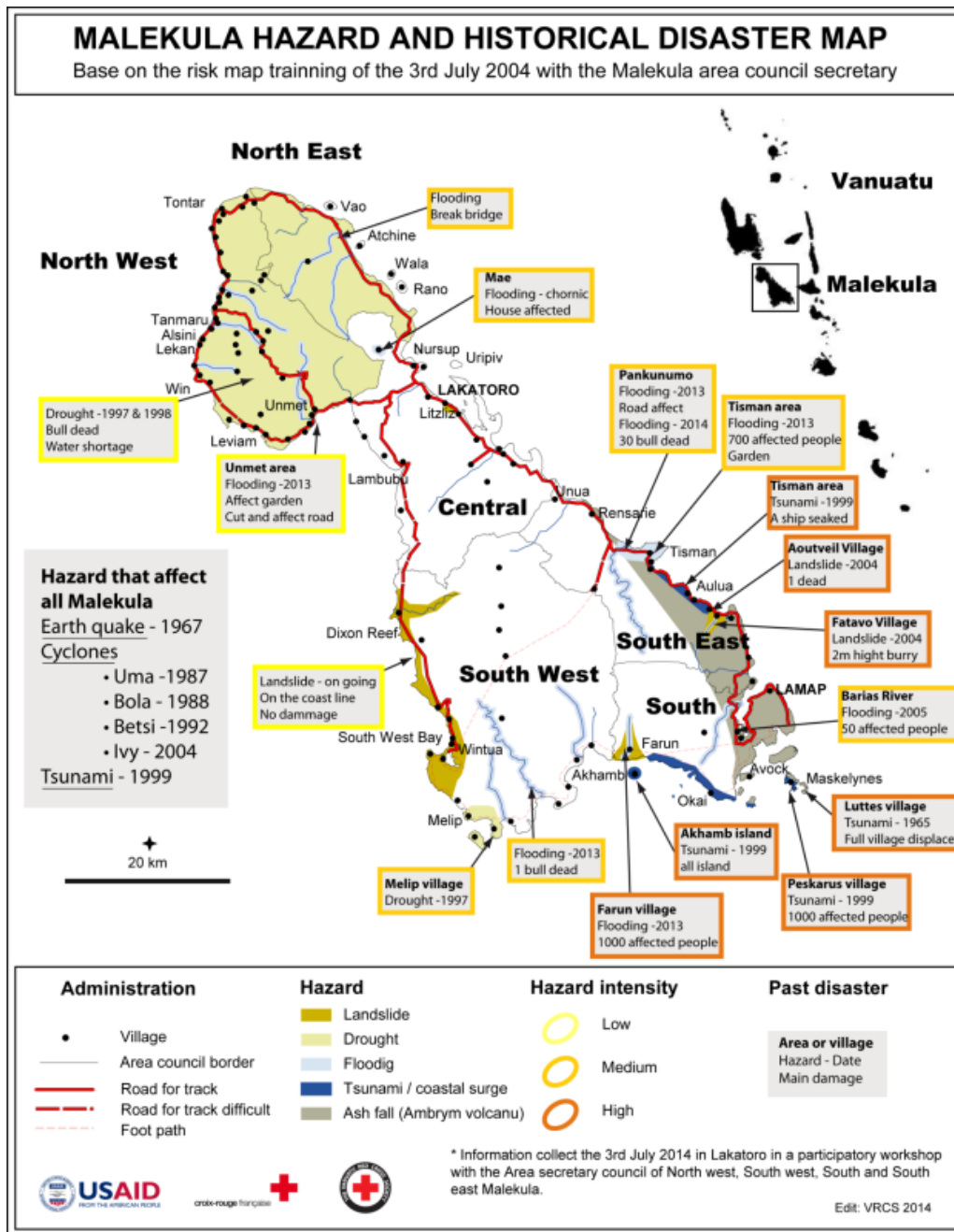


Figure 3 Malekula hazard and historical disaster map

The hazard map highlighted the South East and South as the areas that are the most expose to strong hazard. The East of the island is a flood and landslide prone area due to big river and sharp hills in the South East. This information has been identified mainly during the destructive cyclone Ivy in 2004 that caused important damage in Aulua area. The south part is also prone to flooding and tsunami hazard in the small island of Maskeline and Akhamb. Finally the west part of the island is mainly exposed to drought that has been described with a lower intensity compared to the rest of the hazard present in Malekula.

**2.2.5. Vulnerability map (Figure 4)**

The vulnerability is the most complex element to define as there are so many components to include to carry out an exhaustive study. Thus, participants established the following methodology.

First, they defined the elements that are useful to define vulnerabilities from the areas to target. The following criteria were chosen:

- 1) Infrastructure & public service access (School, health, road, anchorage...)
- 2) Communication access
- 3) Current projects
- 4) Population

4 maps have been drawn to illustrate each vulnerability component (Annex 2).

The map highlighted the North West and South west as most vulnerable place. This is because of the lack of infrastructure and communication means that make that those areas are under developed compared to the rest of the island. The largest part of the island is in medium vulnerability. Low vulnerable places are the areas that are the most developed (eq. Lakatoro area) or are inhabited.

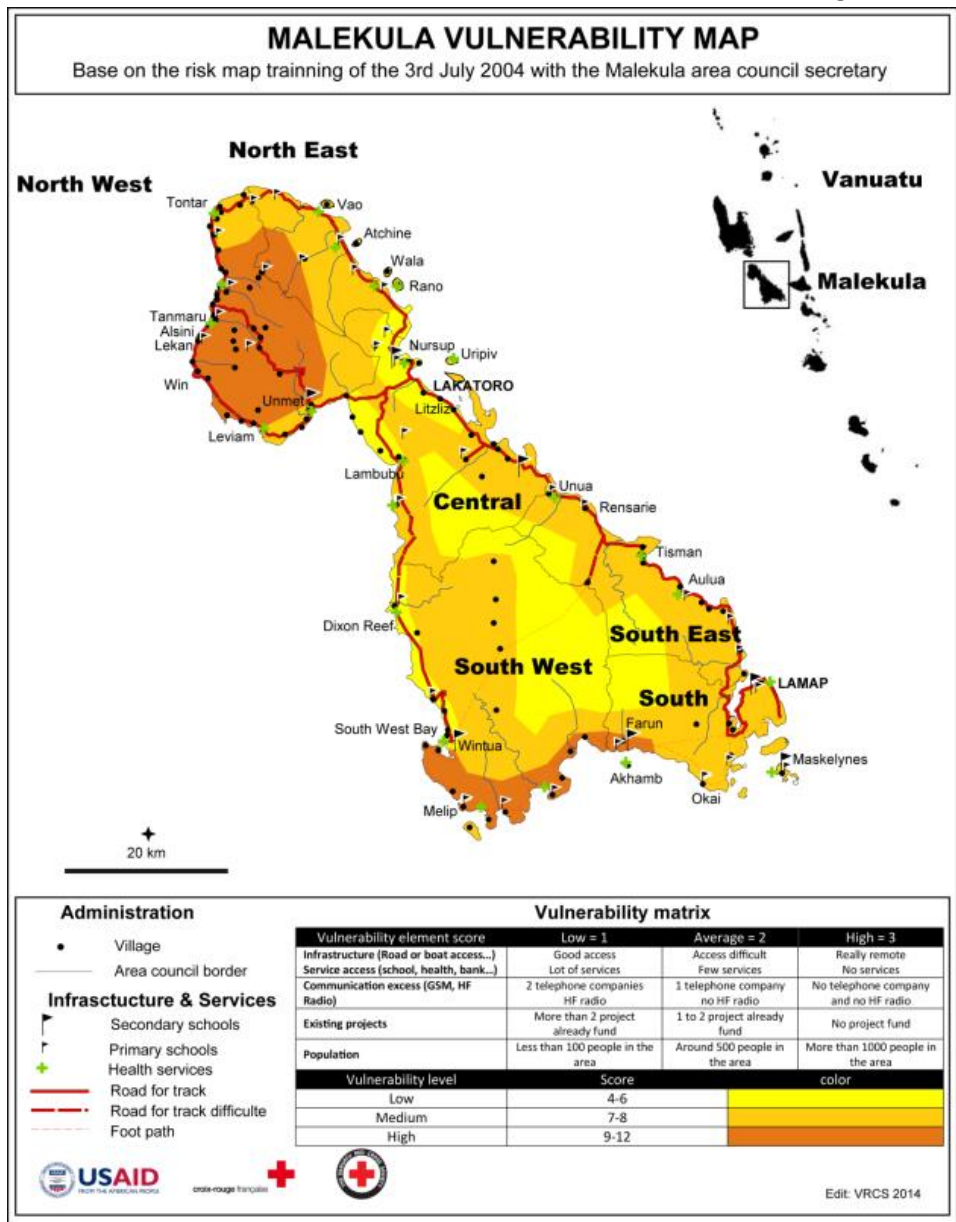


Figure 4 Malekula Vulnerability Map

## 2.2.6. Risk map, last step process (Figure 5)

The last phase of the mapping was the setting up of the island wide risk map. To do so, the vulnerability and hazard information have been integrated, by overlap, following of the disaster risk matrix. The result is an integrated multi risk map with 3 level risks: Low=yellow, medium = orange, High = Red (**Erreur ! Source du renvoi introuvable.**).

### ***Main finding from the mapping exercise***

This mapping exercise highlights 4 “red” areas, considered as the ones with the highest exposure to disaster risk:

1. In North West Malekula (Tamaru area);
2. In South East Malekula (Aulua area);
3. In South Malekula (Farun area);
4. In South West (peninsula of south west bay).

The small islands around Malekula have been considered as orange area. According to the 2009 census, the most populated areas out of those 4 red zones were Farun in the South and Aulua in the South East area council. This information is relevant in a risk analysis because the amount of population is a source to increase risk exposure. As mentioned in the hazard map the main threat in the North and South West part of Malekula is the drought however the south and south east are affect by many other kind of hazard such the coastal surge, tsunami, flash flood and massive landslide that take place in populated living areas. Indeed this diversity of hazard will be considered in the selection of the area target describe in the next part.

Thanks to the risk mapping, the identification of area to be assess during the RRA mission has been possible. The detail of the decision taken in terms of priority will be explained in the following section 2.3.1.



Picture 2 : An Officer of NDMO holding the disaster risk map

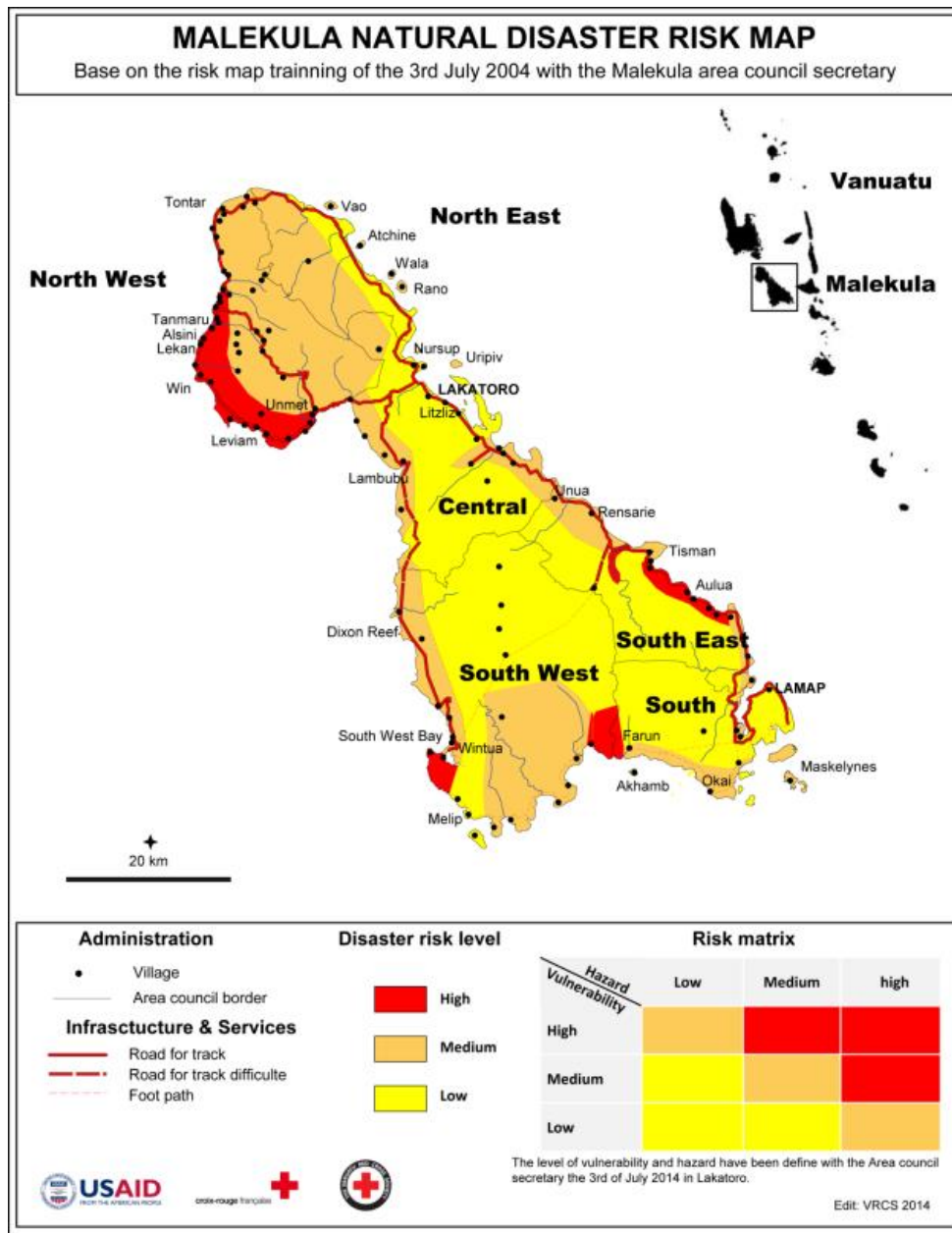


Figure 5 Malekula natural disaster risk map

### 2.3. Step 3 - Field assessment design

This section of the report describes the preparation of final step of the community selection process: the field assessment. First the selection of the areas to be assess will be explain. Then the paragraphs available bellow will be used to describe the main tools that have been used for the RRA mission (the community profile then the selection criteria form). Finally we will explain how the choice of villages that should be assessed during the field mission has been made.

### 2.3.1. Final selection of the priorities areas

The information collected during the risk mapping exercise will be used to prioritize the area that will be assessed and also to pre-identify communities. 4 main areas had been highlighted according to the disaster risk indicators designed with the ACSs (2.2.6). But taking into account the logistic challenge, the time frame and the budget, we decided to target only 3 areas.

The first criterion used for selection was the intensity of the hazard and its consequences. Actually we notice on the hazard map, that in the North and South west of Malekula, the past disasters had a limited impact on the communities compared to the South and South east Malekula. In fact, both areas are considered in the map as very exposed to disaster risk (red color) but mainly because of their remoteness and not because of past disasters impact (hazard intensity). For this project, it has been decided that communities localized in areas where the remoteness is too high will not be included in the project because of the time and cost to reach those small communities and also because few activities will be implemented and few beneficiaries reached with in addition high expenditure.

In contrast, the south and south East Malekula are less isolated, more populated and have been already affected by a lot of disasters. Moreover, according to the ACS experience, there are much more kind of hazards that can affect those 2 areas council (Cyclone, landslide, tsunami, flood...). In addition, geohazard advised the Red Cross that the tectonism activity in Malekula is pushing down the south of the island and raise the north. This movement is indeed affecting mainly the small island of south Malekula that are more populated and with a relief at low altitude. This geographical situation should increase the coastal erosion, storm surge and tsunami effect, in this area, in the coming years. In opposition, the northern part of the island known several phases of uplifting like during the past earthquake (1994<sup>1</sup>).

Finally, according to those elements, it has been decided to focus only on the south and south east area council to implement the field assessment.

Communities localized in the 2 targeted areas will be assessed during the RRA mission in order to select the most exposed communities to the disaster risk. To implement the RRA mission we will first design the tools that will be used in order to determine the time to be spent in each community and secondly we will determine the number of communities that can be assessed during the mission.

### 2.3.2. Criteria of selection and matrix of analysis

The community selection approach is based on 11 criteria's that have been developed during the first phase of the TBR Program in 2010. One more criterion has been added to take into account the population. Thus the 12 following topics had been selected to carry out this analysis: **Number of beneficiaries, Number of issues, Accessibility, Geographical site, Historical events, Communication means, Existing programs, Security/Safety, Willingness, Representation of Red Cross, Organization of the community, Program constraints**

Those criteria are described in the DRR handbook in the "Step 1 – Identifying community" (Annex 3); they also followed the objective to consider the vulnerability of the population and also the exposure to natural hazards of the community members. As well as, project constraints such as logistic or security issues. During the workshop, mentioned above, implemented with ACSs criteria have been shared to them.

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<sup>1</sup> Stephane Calmant & al (1999) - *Cosismic uplifts and interseismic subsidence recorded in corals at Malekula (Vanuatu, southwest Pacific)* - IRD de Nouméa,- Scientific publication

The main feedback was to promote synergies between ongoing resilience programs and Red Cross CBDRR project. ACSs main advice was that it is better to work in areas where some projects are in implanting phase instead of starting something new. This comment was justified by the fact that needs are still very high in areas that are benefiting from projects thus, they recommend to reduce existing gaps and invest in sustainability then to start in new area. This remark has been taken into account during analysis of the communities data and for the rating of the criteria. The community already target by program that complementary will be preferred.

The analysis of the criteria has been done in a matrix (Annex 4) which was used to compare communities. As we could not give the same importance to each criteria different rates has been established. After the RRA mission, all the data collected will be used to score each criteria for all the communities assessed. The final score of each community will be done by summing results from each criterion. **The 8 first communities will be selected as target communities for the project.**

This matrix has been endorsed by the provincial authorities by signing the document. Involving many stakeholders, including authorities have ensure a mutual agreement during the community selection process. This is a lessons learnt that we would like to highlight because it shows how the process was transparent and based on criteria. Following this community selection process is also a way for the Red Cross to avoid criticism's and to put into question the final decision made.

The matrix mentioned above has been filled during the field collection process using the community profile tool.

### **2.3.3. Community Profile**

As part of the Rural Rapid Appraisal tool (RRA), the DRR team chose to use a simple form from the community profile (**Erreur ! Source du renvoi introuvable.**) to gather information from the field. This tool has been set up under the TBR 2<sup>nd</sup> phase in November 2012 to collect information from the field in order to select 7 communities in Tana (Tafea province) for a DRR awareness project funded by USAID.

This template has been reviewed in November 2013 to gather more information during the project implemented by the Red Cross in Torba. The main objective was to integrate some information regarding several sectors as Demography, community structure, communication, transport, disaster exposure, infrastructure, water and sanitation... in order to collect data that could be used by every project involving those communities. In 2013, a data base has been created in order to storage this data set.

This community profile has also been designed in order to answer to most of the criteria available in the community matrix. Thus, only the criteria safety, willingness, program constrains have been evaluated directly on the field through direct observation and focus group discussion with community members.

This template is also a relevant tool to be used by the CDCs during a post disaster assessment, because it shows a good overview of the communities. Thus, the community profile tool has been already presented to the CBDRR working group led by NDMO for these propose. The validation process is ongoing and the final step will be the NDMO endorsement. This tool complete will be handover to all the CDCs from targeted communities and integrated in the community disaster plan.

In order to fill properly the community profile template a meeting has been carried out with leader of each communities (Chief, teachers, church group, women group, committee, etc.). To fill the community profile with each representative of the main groups and sectors. More detail will be given in the part 2.4.1 that will describe the interview done on the field.

### 2.3.4. Pre identification of the communities & preparation of the mission

Before preparing the RRA field mission we need to pre-identify some communities out of the 2 areas councils select: South East and South Malekula. According to the approach and the tools developed and used for this mission it is estimated to spend at least half a day in each community for the assessment. Based on the travel time estimation, 10 communities will be pre identify to be visit in 8 days.

In term of pre-identify communities, priorities was indeed in the south and southeast to visit Aulua and Farun area that are located in the red zone of the Disaster risk map. Considering the elements mentioned above the decision has been taken to visit as well the 3 communities of Maskeline Island and Akhamb and two other communities that are located on Southern coastal area. The list of the communities to be visit is described in the Table 1 List of pre identify communities below.

Area council	Area	Community
South East	Aulua	Fartavo
South East	Aulua	Lambulbatuei
South East	Aulua	Lanvitvit
South	Maskeline	Lutes
South	Maskeline	Pelonk
South	Maskeline	Peskarus
South	Farun	Akhamb
South	Farun	Farun
South	Okai	Okai
South	Avock	Avock

Table 1 List of pre identify communities

The field trip was organized from the 11<sup>th</sup> to 16<sup>th</sup> August 2014, thanks to the help of the Area Council secretaries of the South and South East Malekula and the VRCS Volunteer and staff of Malekula. The assessment team was composing of:

- National Disaster Management Office provincial liaison officer -Philip Meto
- VRCS branch Officer -Neptik Keven
- FRC Head of Mission – David Bridier
- FRC project manager – Julien Lamberti
- VRCS DRR Support Officer – Jerry Anga
- The Area council secretary of South – Lulu Leymang
- The Area council secretary of South - Edwin Manron

A meeting with the authority has been program during the mission with the acting Secretary General and provincial planner, Palen Ata. This mission will be detail in the next part.

### 2.4. Step 4 - RRA field mission

The Rural Rapid Appraisal was implemented in Malekula from 11<sup>th</sup> to 16<sup>th</sup> August 2014 (Table 2). This mission aims to collect information with the community profile, to compare the 10 communities pre-identify and to be able to select 8 communities that will be targeted by the project. ACS and Provincial representative have been involved to get their feedbacks. ACS from each area was directly involved in the assessment team.

#### 2.4.1. Implementation of the field mission

As mentioned above, the team was composed of 3 members of the Red Cross HQ team, the NDMO officer from Port Vila, the VRCS Malampa branch officer and the ACS of the target area. The presence of the NDMO and the ACS was really important for the community representative to understand that this project is built with the local actors. As mentioned in the Table 2 the team started the assessment by the 3 communities of the Maskeline Island, then they went to Farun and Akhamb the 2<sup>nd</sup> day, and on their way back, they went to Okai and Avock and finally they finished by Aulua area the 3<sup>rd</sup> and 4<sup>th</sup> day.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
11 August	12 August	13 August	14 August	15 August	16 August
1. <u>PESKARUS</u> , 2. <u>PELONK</u> 3. <u>LUTES</u>	1. <u>FARUN</u> 2. <u>AKHAMB</u>	1. <u>OKAI</u> 2. <u>AVOCK</u>	1. <u>FARTAVO</u> 2. <u>LAMBUL</u>	1. <u>LANVITVIT</u>	1. <u>MEETING WITH SG</u> in Lakatoro

**Table 2 Program of the RRA mission**

In order to fill properly the community profile, the assessment team met the leaders of each of the 10 communities. The number of people interviewed was very variable (8 in Lanvitvit until 24 in Fartavo) according to the time of the interview and may be the interest of the communities. The leaders of the community interviewed were:

- Chief (custom and elect chief)
- Committee representative (Water, farmer...)
- Women's representative
- Teachers
- Church representative
- Health workers



**Picture 4 : NDMO and VRCS Officer fill the community profile of Farun in group interview with the leader (12/08/2014)**

To make sure that all the communities have the same level of understanding of the objective of the assessment conducted in there village, the agenda below have been followed during the focus group discussion.

- Presentation of each participant: Name, origin, role
- Presentation of the Red Cross and NDMO
- Presentation of the RRA mission goal



**Picture 3 : Transect walk in Pelonk, in Maskeline Island. The VRCS DRR officer takes picture of coastal surge area. (11/08/2014)**



- Group interview to fill the community profile.

In general 1 hour has been necessary to fill the community profile. After this work, the assessment team started a transect walk through the community with some of the leaders. The community transect walk has been the opportunity to have informal discussion with the leaders and cross-check the information gathered during the interviews. It was also a good way to learn more about the past disasters, the damage caused, and the capacity of the communities to response or not to those threats. It was also the opportunity to see the challenges to face by the disable or people with special needs during emergency or evacuation situation. Actually most of the paths are very difficult to use especially during the rain. Around one hour was necessary to implement the transect walk by communities.

Organization	Project component	Location	Time frame
UNDP	- Communities governance	- Maskeline	2014 - 2015
	- Livelihood	- Okai	
	- Transport	- Avock	
		- Farun	
		- Akhamb	
VRDTCA	- Livelihood	- Maskeline	2015
Fisheries	- Sea cucumber regulation	- Maskeline	2014 - 2015
French embassy	- Water supply material	- Okai	2014
	- School material		
New Zealand aid	- Salt water distillation	- Maskeline	2007
	- Water tank	- Lutes	2010
	- Water tank	- Avock	2013
	- School material	- Okai	2013
Australian embassy	- Fiberglass Canoe	- Maskeline	2000- 2005
	- 4 Water tanks school	- Akhamb	2003
	- Water tank	- Akhamb	2014
	- Water tank	- Okai	2010
	- Water tank	- Avock	2013
TVET	- Rural training centre	- Maskeline	2010
	- Fishing training	- Aulua	2010
VRCS	- Frist aid	- Maskeline	2010
	- DRR Awareness	- Aulua / Maskeline	2013
Palm Project	- Soap factory	- Maskeline	2008 – on going

**Table 3 existing project in the identify communities**

The information collected on the field directly with the communities has been helpful to correct the information gather from the ACS, especially concerning damage caused by disasters. The date of the events were usually difficult for the people to remember. Thus, some research have been done after the field assessment in order to guarantee the information collected.

The communication has been a challenge during the field mission. Some communities were not aware of the activity. Thus, the assessment has been some time delayed and the quality of the information collected has been influence by the lack of time.

#### **2.4.2. Coordination mechanisms between authorities and stakeholders**

As the mapping exercise and the RRA field trip have been done with the ACS, it was important to meet the province representative to present the project and get an official feedback from them. Like so a

meeting with province authority (Palen Ata the planner and also the acting secretary general) took place the 16<sup>th</sup> of August at the end of the RRA field trip.

During this meeting the acting SG acknowledged and thanked the coordination effort made by the Red Cross involving provincial authorities from the beginning of the project (Annex 6). He also highlighted that the CBDRR project proposed by the Red Cross fitted with the development of the area council plan for South East Malekula. He also mentioned that as part of this program an information center should be built in Aulua area which can be a good place to support the DRR awareness campaigns. The Acting SG mentioned that the Action plan that will be developed by the Communities in the DRR project might be included in the Area council plan and supported by the province.

During the field mission the information gathered through the community profile have highlighted that other agencies were working in the same areas selected by the project.

### **3. Analysis and result obtained**

At this stage the information collected on the field have been analyzed and discussed in order to fill the selection matrix and finalized the selection of the 8 communities that will be targeted by the project. Just below you will find some data's that will give you an over view of each communities; this information will be helpful to understand the choice done during the selection process.

#### **3.1. Community profile analysis**

##### ***Farun***

Situation: Farun is a remote place located in the west part of the south area council, at around 30 km and 4 hours by boat from Lamap (as there is no road so far). It covers a big area with 8 small villages with a population of 649 people (Red Cross Survey Sept 2014).

##### Infrastructure and livelihood:

- Primary and secondary school, the service still remain very low
- Health services no easy access
- Few shops and few incomes means
- Annual saving average is around 10 000 vatu per family<sup>2</sup>.

##### Disaster risk exposure:

- Tsunami and cyclone surge on coastal areas
- Many rivers are separating the different villages and are causing chronic flash flood.
- Landslide has already affected houses in the main village in 1998
- Water is also a big issue as there is only an old water supply in the main village. The other villages are depending rather of the river or to rain water catchment.

##### Willingness to participate to the project:

- Leaders look very enthusiastic to work with the Red Cross project as they have a lot of concern about disaster that happens, and very few support so far for government or other organization.

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<sup>2</sup> The annual saving amount is just indicative and might wrong as the people interview didn't really new about saving statistic. However following the observation the amount give look quite realistic according to the different location.

## **Akhamb**

Situation: Akhamb is a small and populated of 570 inhabitants (Red Cross Survey Sept 2014) island located outside of Farun at about 2 km. There is only one community on the island on the side of the sea.

### Infrastructure and livelihood:

- Only few services available.
- Primary school
- Aid post that is use as well by the people of Farun.
- The gardens are located on the main land and people have to cross by canoe every day. The garden are often located in slope are and vulnerable to land slide.



Picture 5 Stage of Akhamb community affect by the coastal erosion (12/08/14)

### Disaster risk exposure:

- Tsunami and storm surge already affect a lot of people.
- Water is one of the biggest daily issues of the island the habitant are mainly dependent of the rain harvesting system. There is a small water table but the lack of sanitation in the village polluted it.
- Coastal erosion is also a big concern as it is a sandy island. This phenomenon is increased by the tectonic phenomenon that is slowly droning the island. Cyclone surge and tsunami are also contributed to the erosion of the island. The community stage has been already affected by the significate movement of the coastal line (Picture 5 Stage of Akhamb community affect by the coastal erosion (12/08/14). Since the tsunami of 1999, few families from Akhamb already move to the main land.

### Willingness to participate to the project:

The people of Akhamb welcome well the idea of the project as they show good involvement in the assessment.

## **Okai**

Situation: Okai is a small community of less than 200 people (estimation of the leader during the interview), located on a sand bank of the main land, at the half way between Farun and Maskeline.

### Infrastructure and livelihood:

- Water gravity system has been repaired in 2014 thanks to the support of French Embassy.
- A road will be built by the UNDP project to form Lamap early 2015. That will make easy the access to the series for the Okai population.

Disaster risk exposure: Similar natural hazards affect this community but with a lower intensity compare to the communities mention before. A big reef is protecting the coastline from the tsunami and surge and there are no house located in landslide area

Willingness to participate to the project: Only few people attend to the interview which that shows an average motivation of the population for the project.

### **Avock**

Situation: Avock is a small community of about 150 peoples (estimation of the leader during the interview). It is separate in 3 settlements, the main village is located at 4 kilometers from Maskeline on a small island

Infrastructure and livelihood: the Primary school is located on a other island about 500 meter from the main place, and a settlement on the main land at about 2 kilometers from the main village

Disaster risk exposure: The main island knows important coastal erosion, probably mainly cause by the subsidence phenomena. This affect a lot of house located on the coastal area. As Akhamb the villager are depending of their garden located on the main land.

Willingness to participate to the project: The leader didn't show a big interest in the DRR program.as only few leader came at the meeting and it was difficult to have answer to our question. It seems that the leaders haven't any interest in the project expose to them as they fell already prepared to disaster.

### **Pelonk**

Situation: Pelonk is the second biggest village of Maskeline island with 320 inhabitants (Red Cross Survey Sept 2014).It is a quite develops village compare to the other communities of the south Malekula area council. There are a lot of facilities accessible such health center, primary schools, ships, bank...

Disaster risk exposure:

- Coastal erosion is one of the main issue as we can see in the Picture 4 page 16
- Cyclone surge and potentially tsunami are the main risk of this are as almost the full population is located along the coast line.
- Water shortage is also a main issue around Maskeline island as there is no proper fresh water table, no source and no river.

Willingness to participate to the project:

The community based organizations are very well structured. A sub branch of Red Cross is settled in Pelonk since almost 30 years. In terms of motivation the leader look very motivated to participate to the CBDRR project.

### **Peskarus**

Situation: Peskarus is the biggest community off Maskeline with 528 inhabitants (Red Cross Survey Sept 2014). It is located at the lowest point of the island.

Infrastructure and livelihood:

- 4 First aid trainer volunteer of the VRCS live in this community
- Same access to the services available in the all island
- The garden are located on another island that increase the vulnerability of the population.

Disaster risk exposure:

- There is a high risk of coastal surging that can potentially affect hundreds of people. Otherwise the risks are very similar with the other communities of Maskeline.

Willingness to participate to the project:

It seems that Peskarus is less organized than Pellonk as there are fewer committees. However the leader looks very motivated as well, as the VRCS volunteer to support and take part to the proposed project.

**Lutes**

Situation: It is the smallest community of Maskeline. The population of lutes is the last settlement of Maskeline that start on 1965 after a tsunami that destroyed the full village originally located on a neighbor island

Infrastructure and livelihood: Same access to service than Pellonk and Peskarus.

Disaster risk exposure:

- A third of the population is located on coastal sensitive area.
- Lutes have globally the same risk than the other village of the island.

Willingness to participate to the project:

The willingness of the leaders looks good.

**Fartavo**

Situation: This is the smallest community of Aulua area with only 237 inhabitants (Red Cross Survey Sept 2014).

Infrastructure and livelihood:

- Aulua areas have basic services like primary school, a health center, a cooperative.
- In terms of transport there is a road that is accessible by good weather.
- There are also good anchorage and regular ship give service in Lanvitvit.

Disaster risk exposure:

The full Aulua area is located between the coast line and the very sharp hills. In 2004 the cyclone Ivy caused big landslides, flash floods, major sea surge in the village. Many damages have been reported like sever injuries, houses collapsed, garden water supply destroyed. 10 years after the water supply haven't been fixed yet. Water is still a big problem in this area. Fartavo as the entire Aulua area is the zone the most exposed to strong hazard.

Willingness to participate to the project:

The leader and the population of Fartavo showed an extreme interest in the CBDRR project presented to them as it was the first time that an organization came to propose to give them support. The disaster caused by cyclone Ivy is still really present in the head of every one and they showed a real motivation to be involved in a project that can help to reduce this risk.

**Lambul**



Figure 6 : Final selection communities

Situation: Lambul is little bit bigger than Fartavo with 267 people (Red Cross Survey Sept 2014). It is dividing in 3 areas.

Infrastructure and livelihood: The services available are quite similar than the rest of the area as every village is easy reachable within half an hours from a village to another. It is however important to note that the severe weather cut usually the access between the villages because of the many river that make flash flood that stop crossing the road.

Disaster risk exposure: The village presented the same exposition than Fartavo the above mention hazard.

Willingness to participate to the project:

Unfortunately the message haven't been relay to the leaders so the only few people have been available to answer the interview. However they showed a really good motivation.

### ***Lanvitvit***

Situation: It is the biggest community of the Aulua area with 426 people (Red Cross Survey Sept 2014). It is shared in 3 main areas and located close by the primary school of Aulua.

Infrastructure and livelihood: The access to services is almost the same than in other communities of the area, as mention before.

Disaster risk exposure: The village knew the same effects during the cyclone Ivy as mentioned in the Fartavo description and knew the same kind of exposure and hazard intensity.

Willingness to participate to the project:

Here as well the message didn't reach the leader, so only few people came to the meeting. However during the transect walk more people have joint the group and really look interest in the project.

## **3.2. Final Community selection**

The above community profile analysis helped the team to fill the selection matrix (Annex 4 **Final selection matrix**). In order to optimize the efficiency of the project 3 groups of communities have been selected to be involved in the project because they share the same culture and language. We also think that proximity will be helpful to build CDC network.

**According to the selection matrix the 8 communities targeted by the project are the following ones: 3 zones (Figure 6):**

- ***Aulua***: Fartavo, Lambul, Lanvitvit
- ***Maskeline***: Pelonk, Peskarus, Lutes
- Farun, Ahkamb

Okai and Avock have been excluded because they were the smallest communities and the more isolated. Thus, it will be easier for the ACS to replicate what they learn from CBDRR training to those communities.

## **3.3. Feedback to the authorities on the community selection**

It is really important to consider the Red Cross accountability regarding the national, provincial and communities authorities. Thus, following this objective it was important to show the community selection methodology and the final decision taken to NDMO, Provincial representative, ACSs, CDCs and Malampa Red Cross board. This information has been shared during the project opening workshop the 18<sup>th</sup> November 2014 (Annex 7).

Over the presentation a small booklet that summarize all the process has been developed and distributed to each participant. A leaflet explaining the project has also been distributed.

Malampa province representative has also validated the selection process carried out by signing the community selection template (Annex 4). This document is important because is an official authorisation for the project to work with those communities.

At communities' level, Memorandum of Understanding (MoU) have been signed with the chief of the each targeted communities. MOUs are also official acknowledgement from the communities' authorities for the project launch and established the roles and responsibilities of both parts. Those MoUs have been signed as well by the NDMO, ACS and Province representative. The MoU sign is mark the end of the process as every stakeholder have endorse the condition of collaboration for this project.

#### **4. Method limits**

Even if the final selection of the target communities fitted with our expectations; some limits of the method used should be mentioned.

The first criterion used to start the area selection is mainly based on the knowledge from the ACS which didn't have proper data recording what is a sources of error. Some mistakes have been corrected through the RRA mission but despite this some information was still missing (old disasters forgotten by the interviewee, inaccurate data, etc.)

For those reasons we considered that the disaster risk indicator, develop in the risk map (part 2.2.6), is still unperfected and should be reviewed by the appropriate department. The objective of the risk map develop in this report was to help the Red Cross to target disaster exposed community in Malekula. However this map is **not an official risk map** that can be used by any organization. This **risk map will be not shared out of this report.**

Another limit of the approach is that some of the communities that could match to our criteria's may have been forgotten by the ACS, and out of the field mission road. Some of the advices or information's given by the authorities were not always correct because giving bad data, they wanted to influence the community selection process. Thus, it was very important to check this information on the field.

The risk map design activity involving all the ACSs generated tensions because they wanted their area to benefit from the project.

We also noticed that time frame was too short to cross-check every information and to visit the communities during the field visit. It might be possible that some communities not involved in the project have biggest needs that the one selected. If we can confirm this concern we will try a way to push CDCs to reach this communities.

#### **Conclusion**

The 8 communities selected by the project are filling to the most important criteria put down in the matrix. They all have more than 200 inhabitants, they are all exposed to several hazards that can potentially affected severally each community. The project has been well designed because it can propose tools to reduce the impact of the hazard mentioned in this study. All the leaders showed a good enthusiasm to work with the project. The community members willingness to be active in this project is real and is certainly one of the most important point for this kind of participatory project to ensure the ownership of the population and the long-term sustainability of the project.

To target only 3 areas including 8 communities will increase the rate cost/effectiveness because of the easy access. 3 Red Cross staff (Sub branch Officer) will be recruited in each area to implement and monitor the activities. To ensure a smooth coordination mechanism, long term sustainability in the activities, the staff will be recruited in the communities.

The involvement of the national, provincial and local authorities at the beginning of the process has a positive impact on their ownership to the project. The NDMO is thankful regarding the support given by the Red Cross and showed is willingness to always be involved in this project because a NDMO staff is every time available to join Red Cross activities. It is a great opportunity for NDMO to be involved in this project and in each activities because it will help the agency to be recognized at each level of the country as the leader of disaster management network. The province already acknowledged the project and gave its support for the opening workshop. Those actions showed the willingness of the authorities to develop and strengthen their capacities in terms of DRR by training their staff and promoting replication mechanisms.



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## Annex 1 Term of Reference Workshop on CBDRR Approach



### Term of Reference Workshop on CBDRR Approach

**Date:** 03<sup>rd</sup> July 2014.

**Location:** Lakatoro, Malekula island, Malampa province

**Facilitator(s):** Vanuatu Red Cross Society, NDMO officers,

**Participants:** All six area council secretaries of Malekula province

**Donor Funding Partners:** ECHO program (European Commission)

#### **Back ground and training propose**

Based on experience of the TBR project (Together Becoming Resilient) in Torba Province, the VRCS is targeting to replicate the experience by train all Area Council Secretaries (ACSs) for the expansion of the methodology and to enable them to conduct the Community based DRR approach. The objective of this week of workshop and training for the ACSs is to build their capacities in terms of awareness on Disaster risk reduction and climate change. The ACSs will attend to two training.

The first one will be on the climate change awareness tools it will be conducted by VMGD. As the climate change issues are currently integrated into the DRR, it is a good opportunity for the ACS to have a clear understanding of this long-term issue to address good support to their communities.

The second training aims to introduce the first steps of the DRR methodology developed by VRCS and FRC in coordination with NDMO to the local authorities of Malekula as it has been recognized as the next DRR rural priority zone of the VRCS and NDMO. It will help the ACSs to identify the priority areas that they can replicate the CBDRR approach. Other trainings will happen by the end of the year to consolidate the knowledge of the ACSs in CBDRR. This workshop will be facilitated by VRCS Program officer, branch officer and The FRC program manager and NDMO provincial liaison officer. It will be an opportunity for the Red Cross to pre-identify locations to implement its next phase of TBR project funded by USAid. This project will be a replication of the TBR methodology developed under DIPECHO program on a period of 18<sup>th</sup> and will target 8 communities.

#### **Objectives**

- Present the Red Cross DRR project in Malekula
- To disseminate the DRR activities across the provinces of Vanuatu
- To build the capacity of the area council secretary in the scope of the CC- DRR
- To strengthen the communication and the coordination between community, area council secretary, province and the NDMO.
- To strengthen cooperation and coordination among VRCS, NDMO, VMGD and stakeholders

#### **Outcomes**

- The participants know about the Red Cross DRR project activities that will happen in Malekula in 2014-15
- Participants understand the NDMO network and the roles and responsibilities of the CDCs and PDCs.
- ACS – VRCS Branch officer know and gave inputs on the communities selection tools of the CBDRR handbook of the VRCS
- Participants have targeted the priority disaster risk areas of Malekula island through a mapping exercise.



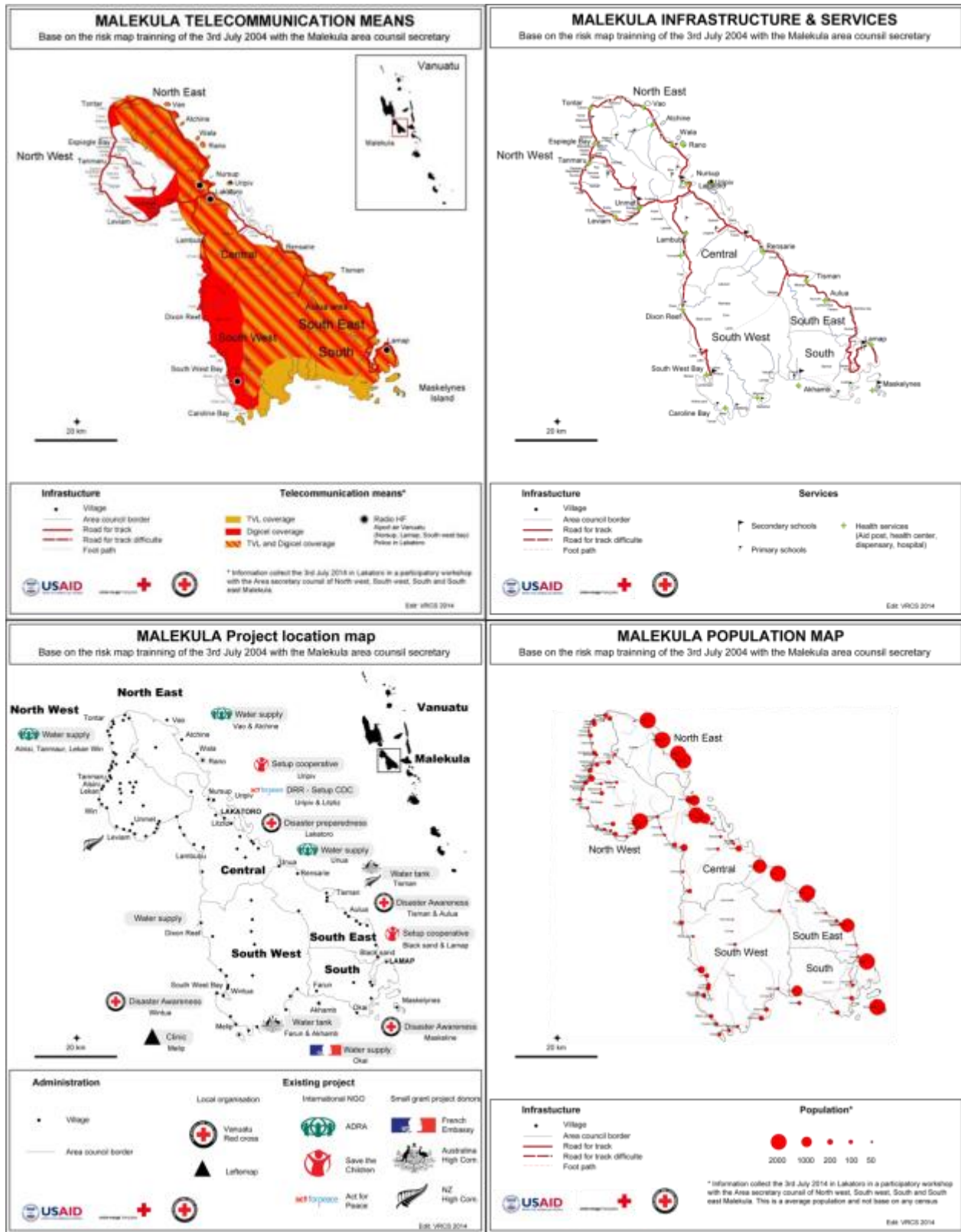
Humanitarian Aid  
and Civil Protection



## AGENDA of The DRR workshop - Thursday 3 July

TIME	SESSION	TOPIC	DETAILS	RESPONSIBLE PERSON
8.00 am 8.10 am	SESSION 1	Opening session	<ul style="list-style-type: none"> <li>Prayer</li> <li>Introduction to workshop</li> <li>Presentation of agenda</li> </ul>	<b>Julien Lamberti</b> <b>NDMO Rep</b>
8.10 am 8.30 am	SESSION 2	Introduction to TBR project	<ul style="list-style-type: none"> <li>Historic of project</li> <li>Presentation TBR 4</li> </ul>	<b>Robert Butal</b> <b>Julien Lamberti</b>
8.30 am 9.00 am	SESSION 3	Introduction to the Hand book	<ul style="list-style-type: none"> <li>Step by step DRR</li> <li>Disaster plan</li> </ul>	<b>Robert Butal</b>
9.00 am 10.0 am	SESSION 4	Introduction of identify communities and empowerment	<ul style="list-style-type: none"> <li>What and why an MoU (VRCS – NDMO)</li> <li>CDC and PDC roles and responsibilities</li> <li>Selection Criteria</li> </ul>	<b>Philip Meto</b> <b>Robert Butal</b>
10.00 am	Morning Tea & Ice breaker			
10.35 am 12.00 am	SESSION 5	Risk assessment in Malekula	<ul style="list-style-type: none"> <li>Mapping Risk area of Malekula with ACS</li> <li>(Hazard – historical hazard) Mapping vulnerable and capacities of Malekula with ACS (Infrastructures, school, health facilities...)</li> <li>Population density</li> </ul>	<b>Robert Butal</b> <b>Julien Lamberti</b> <b>Philip Meto</b>
12.00 am	Lunch Break& Ice breaker			
1.35 pm 2.35 pm	SESSION 5	Risk assessment in Malekula (Continue)	<ul style="list-style-type: none"> <li>Mapping Risk area of Malekula with ACS</li> <li>(Hazard – historical hazard) Mapping vulnerable and capacities of Malekula with ACS (Infrastructures, school, health facilities...)</li> <li>Population density</li> </ul>	<b>Robert Butal</b> <b>Julien Lamberti</b> <b>Philip Meto</b>
02.40 pm	Afternoon Tea Ice breaker			
03:50 pm 04.30 pm	SESSION 6	Identifying priorities area in DRR	<ul style="list-style-type: none"> <li>Priorities of Province</li> <li>Willingness of communities</li> </ul>	<b>ACS and TAC members</b>
<b>Closing workshop</b>				

## Annex 2 Malekula Vulnerability component maps



### Annex 3 Proposed selection community criteria for CBDRR project

**Number of beneficiaries (.../10):** Is there many people in the community. More the population increase more the risk of hazard affect a big number of people is important. **0: there are few people in the community - 10: Big population in the community that can be affecting by disaster.**

**Number of issues (/10):** i.e. absence of health services, absence of governmental support, water not drinkable, sanitation very poor, many diseases, level of education very low, absence of electricity, etc. **0: there is no issue in this community - 10: many issues can be identified according to the list above.**

**Accessibility (/10):** Is it difficult to access this community (means of transport, road conditions, sea condition, accessible during bad weather, etc.)? **0: very easy to access- 10: very difficult to access.**

**Geographical site (/10):** Is the community located in a place which is prone to natural hazards (close to the sea, close to a volcano, in a flooding area, etc.)? **0: Few hazards - 10: hazards could happen easily.**

**Historical events (/10):** Was there a lot of natural disaster event in the past (floods, earthquake, tsunami, etc.)? **0: there have never been any disasters - 10: there have been many disasters.**

**Communication means (/6):** Is there many communication means in the community (mobile phone, land line, HF radio, FM/AM radio, etc.)? **0: Many means of communication - 6: No means of communication.**

**Existing programs (/4):** Is there another organization working with the community? (Especially in DRR) **0: A DRR project is currently/already implemented - 4: There are no programs at all.**

**Security/Safety (/6):** Is there a security risk for Red Cross staff/volunteers to go and work in this community (violent community, risky environment, etc.)? **0: Very dangerous - 6: No danger at all.**

**Willingness (/10):** Do the leaders and the community members want to implement the activities and to dedicate time to do so? **0: they do not want DRR support - 10: they want DRR support and have time for it.**

**Representation of Red Cross (/4):** Is there any Red Cross activities or RC volunteers in the community? **0: there is no RC committee or volunteer – 4: there is a RC committee or volunteer.**

**Organization of the community (/6):** Is there any existing committees which could facilitate the implementation of the project (women committee, development committee, etc.)? Do they want to help the implementation of the activities? **0: No committee in the community - 6: there are many committees which will help to facilitate the activities.**

**Program constraints (/10):** Would it be possible to implement the project within the time frame and with the budget allocated to the branch? **0: the time frame/budget will not allow implementing the activities in this community (too difficult to access, too expensive to go there) - 10: the time frame and the budget will allow the implementation of this project.**

Annex 4 Final selection matrix



Island: Malekula

Evaluator: - Red Cross DRR Team: Julien Lamberti FRC project manager, Jerry Anga DRR support officer, NDMO officer, Philip Meto

NAME OF COMMUNITY	Number of beneficiaries (.../10)	No of issues (.../10)	Accessibility (.../10)	Geographical site (.../10)	Historical events (.../10)	Communication means (.../6)	Existing programs (.../4)	Security/Safety (.../6)	Willingness (.../10)	Representation of Red Cross (.../4)	Organization of the community (.../6)	Program constrains (.../10)	TOTAL (.../86)	SELECTED
FARTAVO	4	8	6	10	10	4	4	5	10	0	4	9	74	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
LANVITVIT	6	8	6	10	10	4	4	5	6	0	4	9	72	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
LAMBULMBATUEI	4	8	6	10	10	4	4	5	7	0	4	9	71	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
AKHAMB	8	7	10	9	8	3	3	4	6	2	4	7	71	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
PESKARUS	8	5	5	7	8	4	2	6	8	4	5	9	71	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
FARUN	10	7	10	7	8	3	4	4	6	0	4	7	70	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
LUTES	4	5	5	8	8	4	3	6	8	4	5	9	69	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
PELONK	4	5	5	8	8	4	2	6	8	4	5	9	68	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
AVOCK	2	7	5	9	6	4	4	5	3	0	3	8	56	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
OKAI	2	5	7	7	6	3	3	4	5	0	3	7	52	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Provincial Government validation:

The Provincial Government approved these 8 communities selected for implementing a Community Based Disaster Risk Reduction (CBDRR) project:

PG representative name: PALEN ATA



PG signature: .....

Date: 20/11/2015

This study is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of French Red Cross and do not necessarily reflect the views of USAID or the United States Government.

## Annex 5 Community profile

**Community name** \_\_\_\_\_

Province _____
Island _____
How many station (precise name) _____
Years of existing village
<input type="checkbox"/> 0 – 5 years <input type="checkbox"/> 5 – 15 years <input type="checkbox"/> 15 - 30 years <input type="checkbox"/> 30 – 50 years <input type="checkbox"/> > 50 years

### GENERAL INFORMATION

**Population** \_\_\_\_\_ **Household** \_\_\_\_\_ **Average number of children by family** \_\_\_\_\_

# **Men** \_\_\_\_\_ # **Women** \_\_\_\_\_ # **Children** (<5 years) \_\_\_\_\_ # **Disable** \_\_\_\_\_

**Number of paid worker in the community** \_\_\_\_\_

**Average annual money resource per family** \_\_\_\_\_

**Other main source of income** \_\_\_\_\_

(example: Local market, sell fish, food, Kava, Copra, cooperative, store, export lobster, export coconut Crab...)

### ORGANIZATION

	# of members	Name (Chairman)	Contact
Chief committee			
Development committee			
Water committee			
Disaster committee			
Farmer committee			
Turtle monitor			
Red Cross volunteer			

### COMMUNICATION

**Means of communication**  TVL network  Digicel network  HF radio  No

**Distance to the means of communication (Km)** \_\_\_\_\_

**Quality of the communication**  Good  Average  Bad

### TRANSPORT

**Boat access**  Good  Average  Bad  No **Ship access**  Good  Average  Bad  No

**Truck access**  Coal tar  Coral Road  ground road  No **Distance to the road (Km)** \_\_\_\_\_

**Plane access**  Air strip  Airport  international Airport **Distance to the airport (Km)** \_\_\_\_\_

## GEOGRAPHICAL SITE

**Geographical site**  Cliff,  Hill,  Plain  River,  Lac,  Swam,  Sea cost

Other : \_\_\_\_\_

**Elevation (meter)**  <10m  10 - 20 m  > 20m

Historical Disaster (Main events)	Dates	Main Damage
Cyclone		
Flood		
Landslide		
Earthquake		
Tsunami (tidal wave)		
Volcano		
Drought		

## INFRASTRUCTURE

# of school in the community	# Kindy	# Primary	# Secondary
# of student in the community			
Name of school that the student used			

**Health facilities**  Aid post;  Health center;  Dispensary;  Hospital;  Clinic, **# of nurse** \_\_\_\_\_

**# of Church** \_\_\_\_\_ **Denomination of Church** \_\_\_\_\_

**Bank service**  Yes  No **# Store** \_\_\_\_\_ **Other services** \_\_\_\_\_

**Evacuation Site**  store building;  Health building;  School;  Church;  Community house;  No, other \_\_\_\_\_

**House** % local material \_\_\_\_\_ % Iron roof \_\_\_\_\_ %Semi permanent \_\_\_\_\_ % concrete \_\_\_\_\_

## WATSAN

Main source of water	NB	Drinking Yes or No	Rain catchment	NB	Type (polytank, fiberglass, cement)	Capacity In Liter
Rain Water catchment Tank			Water Tank			
Spring water tank			Water Tank			
Spring water directly			Water Tank			
Open well			Water Tank			
Well with hand pump			Water Tank			
Gravity fed-system			Water Tank			
Stream			Water Tank			

**Type of Toilet**  Water seal  Bush toilet  VIP toilet  Flush toilet  No

**% of household with toilet** \_\_\_\_\_ **% of household with bath room** \_\_\_\_\_

## Existing project

Type of activity examples: DRR, CCA, Water (Supply (GFS), Tank, well), Sanitation (toilet, PHAST...), communication....)

Name of the organization	Type of activity	Beginning / end



## **Annex 6 Minute of interview with Palen Ata, planner of Malampa province**

**Date of interview:** 16/08/14

**Venue:** Malampa guest house

**Interviewer:** Jerry Anga & Julien Lamberti

**Interviewee:** Palen Ata planner of Malampa province

**Subject:** Presentation of the DRR project of the FRC/ VRCS and priorities of the Province in DRR.

First the FRC/VRCS team presents briefly the Red Cross movement to the planner. High light was made on the international and national status of auxiliary of state and the support done between the different national societies, to clarify the implication of the FRC in the project.

The Team made a presentation the DRR project of the FRC/VRCS:

- Historic of the project: Origin in 2010 in Torba province, then expansion in Malampa, Shefa, Tafea, and Penama province.
- Operational human resources of the project: 1 Head of Project, 1 support officer, 3 Sub Branch Officers
- Presentation of the methodology of selection of the communities (area selection, Community profile, selection criteria and matrix) and of the work done with the Area Council Secretaries (ACS).
- Presentation of the activities of the projects.
- Handover of the presentation print in A4 size.

The planner reacts to the presentation by highlight the fact that their only 2 existing Community Disaster Committee (CDC) but they are not train. He acknowledges that the CDC network should be established in the entire province as it should be a good ways to improve the first assessment post disaster. Actually he mention that assessment was difficult because the big rain cut the road that cross the rivers and cut the access in the province, especially in South and South east Malekula.

The planner acknowledges the fact that such project can have indirect effect on none target neighbor village.

He asks that all the communities profile should be share with the province.

The planner share us that the province have a project on Aulua area in South East to develop and implement the area council plan. The project should include an information center to be use by local committees. The main issues already identify are the settlement located in slop are that cause landside that already cause a lot of damage (1 dead, Damage on Road, destruction of Water supply during Cyclone Ivy in 2004.

He indicate that North West and South West Malekula are more affect by drought

The Planner highlight the fact that each group of the Community should be represent in the CDC and that their roles and responsibilities should be clearly explain to them and the authorities.

The planner approves the fact that we want to train the ACS and mention that those activities will be including in their report in May and November. In terms of Reporting for the VRCS to the province the planner suggest that the VRCS Branch officer present a quarterly report to the Technical Advisory Group.

## Annex 7 Disaster Risk Reduction Opening Workshop of “Together becoming resilient” Project



<b>Date:</b>	18 <sup>th</sup> November 2014, 8.00 am - 4.30pm.
<b>Location:</b>	Malampa Province, Lakatoro, Nimbaur hall
<b>Chair:</b>	Vanuatu Red Cross Society – French Red Cross
<b>Facilitator(s):</b>	Julien Lamberti DRR Project manager (FRC); Jerry Anga DRR Support Officer
<b>Participants:</b>	- 8 <b>Community representative</b> of Malekula (CDC, volunteer...) - 6 <b>Area council Secretaries</b> of Malekula - 10 <b>Provincial Disaster Committees</b> (SG, Planner, Police officer.) - 3 <b>VRCS Branch Officer &amp; Sub Branch Officer</b> - 1 <b>NDMO Representative</b> (PDO, National Rep)
<b>Donor Funding Partners:</b>	This workshop is made possible by the generous support of the American people through the United States Agency for International Development (USAID)

### BACKGROUND

Based on experience of the TBR project (Together Becoming Resilient) in Torba Province, the Vanuatu Red Cross Society (VRCS) is targeting to replicate the experience in other province. Base on the Vanuatu Red Cross strategy 2013-2017 Malekula have been target like one of the priority area for the implementation of a new Disaster Risk reduction (DRR) project. With the generous support of the American people through the United States Agency for International Development (USAID), a new DRR project in Malekula have been fund and started in August 2014. This project will be a replication of the TBR methodology develops under DIPECHO program on a period of 18 Months and in 8 rural communities.

In July 2014, a first workshop to pre-identify the communities has been done at Lakatoro with the area council secretary of Malekula to identify the areas. In august a first mission of identification on the field has been done. In September le communities have been selected and sign a MoU with the Red Cross (sign by the province). In October first survey in the 8 target communities that will be the base of our action.

The opening workshop of this project aims to clarify to the main DRR stakeholders the VRCS DRR strategy and the application on the field through the activity of the USAid fond project. A presentation of the methodology of selecting the target area will be also explained in details. One of the main focuses will be to share the first figure collect on the field by the Knowledge, Attitude and Practice (KAP) survey. Finally the stakeholders will be inviting to brainstorm to their roles in the new network of NDMO that Red Cross help to set up. Action plan of each one of the stakeholder will be design to empowerment of the Provincial government and the community leader representative.

### OBJECTIVES

1. To empower the coordination of the DRR stakeholder from National to local level.
2. To present the DRR program of VRCS and the DRR project activities in Malekula
3. To present the lessons learn of Torba province
4. To present the project site and the methodology of selection
5. To clear the NDMO roles and structure
6. To present the main finding of the “Knowledge, Attitude and Practice survey” done in 8 target communities in October 2014.
7. To develop action plan and indicator for DRR stakeholder in Malampa province

### OUTCOMES

1. Every stakeholder have a clear understanding of the what will happen in the project
2. The communication between CDC / ACS / PDC / NDMO / VRCS is strength
3. Each Stakeholder setup Action Plan and indicator that will be check at the lesson learn workshop.



## SCHEDULE

Day	Time	Contents	Methodology	facilitator
Day 1 Tuesday, 18th November	08.00	<b>Registration of Participants</b>		
	08.15	- Opening of the Workshop by Malampa SG as Chairman - Presentation of the agenda	<u>Discourse</u>	SG Malampa VRCS/FRC
	08.30	<b>Session 1:</b> <b>Update of participant and expectation</b> - Quick presentation: Name, position, origin, main responsibility in Disaster Management - Tell your main expectation of the lessons learn Summarize of expectation (VRCS BO)	<u>Speed dating</u> <i>In circle and 2 by 2 people have 1 min to exchange</i> - Group 1 ask question - group 2 answer - Every minute the Group 1 change sit and meet other person - Every people should speak with every one	SO
	9.00	<b>Session 2</b> <b>VRCS DM Strategy &amp; DRR Program</b>	<u>Presentation</u>	DMO
	09.30	<b>Session 3</b> <b>Lessons learn of past disaster in Malekula.</b> - Strength - Challenge - Improvement <b>Presentations of outcomes of each group</b>	<u>In 5 groups</u> - 1 PDC /NDMO - 1 ACS - 1 SBO - 1 CDC - 1 Red Cross <i>List down the idea on a flip chart 5 min by groups in plenary</i>	All participants
	10.45	<b>Morning tea</b>		
	11.00	<b>Session 3</b> <b>NDMO Roles and Structure</b>	<u>Presentation</u>	NDMO
	11.30	<b>Session 4</b> <b>“Together becoming resilient project” 4 presentation</b> - Lessons learn of Torba - Project activities	<u>Presentation</u>	FRC - SO
	12.00	<b>Lunch</b>		
	1.30	Ice Breaker		
	1.35	<b>Session 5</b> <b>Methodology of community selection</b>	<u>Presentation</u>	FRC - SO
	2.00	<b>Session 6</b> <b>Presentation of KAP result</b>	<u>Presentation</u>	FRC - SO
	2.30	<b>Session 7</b> Empowerment of the DRR Stakeholder of Malampa - Expectation, Action plan and indicators	<u>In 5 groups (World café style)</u> - 1 PDC /NDMO - 1 ACS - 1 SBO - 1 CDC - 1 Red Cross <i>A One Topic by table group turns on the table to answer questions.</i>	All participants
	3.00	<b>Afternoon tea</b>		
	3.15	<b>Session 7 continue</b> Presentation of all groups	<u>Presentation</u>	All participants
4.00	<b>conclusion</b>		FRC - SO	