# DRR Field Session

“Moving toward – community safety and resilience through integration”

**Key note/guide for facilitator**

<table>
<thead>
<tr>
<th>Session expectation and proposed methodology</th>
<th>Preparation needed</th>
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<tbody>
<tr>
<td><strong>Participant introduction</strong></td>
<td>1. A space for the group to stand in a circle.</td>
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<tr>
<td>Participant introduction and Team building game:</td>
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<tr>
<td>1. As participants to stand in a circle</td>
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<tr>
<td>2. Facilitator instructs that:</td>
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<tr>
<td>- Start from one participant to another one by one – introducing your name and where you are from and</td>
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<tr>
<td>- Then act an action that represent any DRR related activity. Explain what your gesture means?</td>
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<tr>
<td>1. Divide participants into 4 groups – mix up DM, Health and other.</td>
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<tr>
<td>2. Each group discuss:</td>
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<tr>
<td>- What do you expect from this event?</td>
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<tr>
<td>- Each group prioritizes 6 key expectations maximum.</td>
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<tr>
<td>- Try to be specific – eg. if experience sharing – what experience?</td>
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<tr>
<td>3. Write down the response of each group in flip chart.</td>
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<tr>
<td>4. Present in plenary and summarize by facilitator.</td>
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</table>

**Expectation check**

1. Name list of the group  
2. Powerpoint – key question for group discussions.  
3. Flip chart, marker, and space for the 4 groups.

## DRR Field Session orientation

1. Presentation by assigned facilitator:  
   - Objectives, expectation  
   - Course flow and agenda.  
   - The course method/format – describe that all sessions will be done in interactive discussion/group work mainly, no or very less Powerpoint.

- Prepare powerpoint of the course orientation

### Part 1: Overview of community safety and resilient, and role of VCA in community safety and resilience

**Session 1 : What is community safety and resilience?** – by...........: This session will discuss the rational of integration or working together in order to achieve the purpose of building safer and resilient community through RCRC interventions. It will provide a completed or holistic view about the importance of integration. At the end of this session, participants will have common view that no matter what background they have, but they all have role to work to achieve ultimate goal as a whole in building stronger communities.
1. **Introduction**: presentation of session objective and contents.
2. **What is community safety and resilience?**
   a. Divide in 4 groups – mix up DM, Health and other background if any.
   b. Groups to review a case study,
   c. Each group after reading it:
      - Identify what are the key major **issues/problems/concerns/impact** that community people are facing.
      - Write the answer on Red Color meta card. One problem, one card.
      - Identify and brainstorm specific interventions / what will need to be done in this community?
      - As RCRC, what do you want this community to be like?
   d. Come to plenary and group those problems together on the floor, asking to:
      - DM: what do you want to **achieve** or **want to see** in this community and why?
      - Health: what do you want to **achieve** or **want to see** in this community and why?
      - Other staffs: what do you want to **achieve** or **want to see** in this community and why?
   e. Community safety and resilience:
      - Showing a picture (Bamboo tree) to be a metaphor of Safer and Resilient community, then explain that – safer and resilient community is like this bamboo tree. A bamboo tree can be bended or collapsed in the face of disaster or other crisis but it could then after that recover.
      - Asking to all that – refer back to this community with those problem they are facing, is this our **common purpose** as a Red Cross institution for them to be like this bamboo tree?
3. **Conclusion/session wrap up**: Summarize the discussion by:
   - **Asking**: one by one to DM, then health, then other - that - Does your department work to support community for them to be stronger and safe from any problems identify?
   - **Asking**: Can we say that – it is defined it as a safer and resilient community?
   - **Asking**: Do we all agree that no matter who we are, we are all working for the same purpose of building a safer and resilient community?
   - This is the current situation in many community that we are working now
      - They are facing different kinds of problems ...health concerns, disasters affecting them, road safety, water issues....etc.
      - That is why our work should not be just purely or isolate DM or health program, but required a joint hand to address those multiple problems and concerns. As long as we can do so, then the community becomes safer and resilient to those problem because all of those are impacting each other by
Session 2: **Step by step process for community safety and resilience:** by ....... In session 1, participants have a clear view and agreed that they have a common purpose and their work is contributing to build safer and resilient community. Therefore, this session aims to link to session 1 by focusing the common approach toward building safer and resilient community. By the end of this session, participants will be able to come up with some key step by step process toward safer and resilient community, particularly between health and DM.

<table>
<thead>
<tr>
<th>1. Introduction: Present the session objective and expected result:</th>
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<tbody>
<tr>
<td>2. Asking participants to come to the big floor and in a circle</td>
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<tr>
<td>• Present the Living through time model prepared from flip chart,</td>
</tr>
<tr>
<td>• Explain that it represents the community in the case study that we have discussed and its progression from past (drop one meta card), present (drop one meta card), the to future (drop another meta).</td>
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<tr>
<td>• Explain that – this community has some problems as identified and it is from past and in present situation. Given this situation, we all have agreed in the discussion of previous session that we want to see the future of this community is – as a safer and resilient community, in which it is our common purpose.</td>
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<tr>
<td>• Then drop another meta card of the safer and resilient. Explain that this is the purpose that we want, isn’t it?</td>
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Please refer to the following graphic (living through time) for all explanation above.

![Living through time model](image)

<table>
<thead>
<tr>
<th>3. Exercise on the step by step process:</th>
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<tbody>
<tr>
<td>a. Continue to explain: Given that we all have agreed that we work to have this community safer and resilience, that is our common purpose, no matter what department or unit we are because this community as facing different kinds of concerns and problems.</td>
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<tr>
<td>b. Therefore, we will need to discuss some of the common steps and processes that we can work to achieve this purpose.</td>
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<tr>
<td>c. Instruction for the exercise:</td>
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<tr>
<td>• Divide into 2 main groups – DM and health separately.</td>
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| 1. Powerpoint for session introduction. |
| 2. Living through time in flip chart, some meta card for some of the key words as see in the graphic. |
| 3. Step by step process |
|   - A space to work on the step by step process. |
|   - Name list of the groups |
|   - Meta card, pen |
• Each group using meta card to come up with the common step by step process.
• Note:
  - 1 meta card for one step
  - DM group refer to the experience in CBDRR/CBDP/CBRR/ICBRR program.
  - Health group refer to their experience in CBHFA/CBHD or any health related program in the past.

d. Each group comes back to plenary, and on the floor:
• 1 group start to put those steps/meta card on the floor.
• After that another group start to put down its steps/meta card by matching to group 1.
• Facilitator promotes discussion and try to find common step/process
• then agree on common steps.

Note for facilitator:
- According to experience of the DRR field session in the past, some of the common steps between the 2 groups are very similar. It is only the matter of the terminology that are different sometime. So facilitators will need to explore this issue and facilitate to have a common agreement.
- Make some written key notes to each step if necessary by using meta card again and locate it side by side to each of those steps.

Session 3 : Key terminologies: by .......... In first 2 sessions, participants already discussed what is community safety and resilience and what are the involved process to do it. This session will follow up those 2 sessions by discussing on the involved key terminologies that are crucial in some of the processes toward community safety and resilience. By the end of this session, participants will be able to define the key related terminology that are critical in working toward community safety and resilience that can contribute to the detailed discussions in following sessions and practices.

1. Introduction: Present the session objective, expectation and content.
2. Requesting each participant to review the Nano community’s case study again and then define – what are the risk/problem, vulnerability, root cause, elements at risk, capacity. They can highlight it in the case paper and no need to write on meta card – either as individual or with a peer next to them. After that:

3. Request participants to come to the floor again and stand in a circle:
• On the floor, present the table below (prepared in flip chart and color meta card – for each key terminology)

<table>
<thead>
<tr>
<th>Risk</th>
<th>Vulnerability (why this risk?)</th>
<th>Root cause (why is this vulnerability?)</th>
<th>Element at risks (target group)</th>
<th>Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hazard/threat 1 :</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>
Hazard/threat 2:

- Explain in plenary by providing an example.
  - Present the card, then place it to the right category.
  - Explain it one by one and make sure participant understands it.
  - Explain V, H, and Risk by using picture as below.

- Explain that usually people interpreted Vulnerability by referring to – elderly, people with handicap, children...etc. This is right to less extend according to their physical status. However, those are referring to the Element at risk only. Vulnerability according to the definition is about the “condition or situation” – example – the exposure to hazard that make people or property more at risk (shelter in the flood prone or storm risk area), or weak shelter locates in those areas. These are considered to be Vulnerability. And when we say reducing vulnerability, we refer to reducing these situation or condition. Facilitator should explain this clearly.

- Emphasize that RISK can also be defined as problem, issue, concern, impact. A hazard or threat in itself is not a problem as defined in this context now. An impact or risk as a result of the this hazard is defined as problem. The reason we try to be clear on this things is because it will help in the problem analysis.

- Make a note on HAZARD that if we use only HAZARD, then it is mainly referring to Disaster, so that is why we also use “THREAT” in order to cover other health related threats – eg. dengue, malaria, ...etc...and also the road safety, HIV...etc.

- This is in line with the discussion in session 1 that in order to build safer and resilient community we need to consider different kind of risks and problems to community.

- We can not just consider DM or health...or etc. ...but integrated approach is needed.

- Then ask participants to work to place the remaining meta cards to the right category.... starting from hazard first..to vulnerability....to ....Capacity.
Facilitator should promote discussion and cross check if participants have a clear understanding.

4. Exercise:
   - Ask participant to place the remaining meta cards for other hazard, risks on the table following the example above.

5. Session wrap up:
   - Referring back to the picture to explain the terminology.
   - Re emphasize that we don't want to use only HAZARD, but we also use THREAT in order to cover other issue.
   - Risk or problem not referring to hazard or threat, but it is a result or an impact from the occurrence of these hazards or threats.

### Session 4: Framework for Community Safety and Resilience

*By ……:

It is agreed that we all speak the same language that we are working to reduce vulnerability and increase capacity of community. In this session, we will try to discuss this matter and describe clearly what does that mean to our work, and what is rational for community safety and resilience. By the end of this session, participants should be able to aware of a fundamental framework that can be used to guide their work toward building safer and resilient community in which it could be used by all in the Red Cross movement.

1. Introduction:
   - Present session objective, expected result and content.

2. Framework for community safety and resilient:
   - Question in plenary: From the case study, community are not safe because they are facing problem or risk, isn’t it? So how to reduce those risks so that community is safe?
   - Introducing the equation that explain the relationship of H, Risk, Vulnerability and capacity.

   - Asking how many people that use to see this?
   - Explain it in detail by using number.
   - Present relevance example to respective sectors – road safety, dengue, malaria, disaster, HIV...etc.
   - Explain that so far this formula is known as DM asset but in fact it could be applied in all sectors of the Red Cross. It is by adding – the word THREAT.
   - Asking to:

2- DM – are your working to reduce vulnerability and build capacity of community ?

3- Health – do you agree that our work make a great contribution to reducing vulnerability and build capacity of the community in order for them to be safe and resilient to any kind of risks they are facing?
4- Conclude – Here is the entry point for integration and this formula is a fundamental principle for us to work toward more safer and resilient community and also to promote integration. Now we have a clearer idea that we are working for the same purpose which is to reduce whatever vulnerability and increase community capacity so that they are safe and resilient.

**Session 5: Introduction to VCA and its role in community safety and resilience**

- VCA is so far well known in the Red Cross movement that it is mainly used in DM especially for CBDP or CBDRR program. The fact is not, as we agreed in previous session that we are all working to reduce vulnerability and increase capacity of community. This indicates clearly the role of VCA in the process of safer and resilient community. On the other hand, VCA can be conducted differently and there were no common processes and steps. How VCA was used in health sectors were also not well understood so far. Therefore, this session will address these issues and especially it aims to have common step by step process that could be used by both health and DM.

1. Introduction: Introduce session objective and content.
   - Brainstorming - What is the rational for us to do/ or why we do VCA?
   - Referring back again that – we all working toward safety and resilience of community, and through reducing vulnerability and improve capacity of community. Refer back to the framework that has just discussed in previous session, and explain that it is the reason why we need to use VCA to identify what are the V and what are the C the we will work with community toward safer and resilient community.
   - Introducing program cycle management – assessment =>planning=>implementation=>M&E.
   - Explain that VCA is about assessment in initial stage of the program design, but here in our work we try to focus more on – what is V, what is C because we are as a red cross we work to: reduce vulnerability and build capacity of communities – as stated in the framework above.
   - Play the movie – the ABC of VCA.
   - After the movie is completed, explain that the gap in the past is that VCA is known as for DM. it is the same in the explanation in this movie that VCA is used for CBDP and DRR. However, we all clear through framework that VCA can be used for many other sectors. In this training we will try to use VCA as an entry point to work together in an integrated approach.

2. VCA step by step process:
   - Ask participants to be in plenary in circle at a big space on the floor. Explain that we are going to review a VCA step by step process, then agree on the common one that can be used/applied in the future.
   - Distribute the printed meta card that labeled each step throughout entire VCA process.
   - Ask participants to arrange/place the distributed meta cards into logical flow of each step (matching to the order of the number).
   - Facilitator promote discussion amongst participants.
   - Asking to CBHFA experienced person to explain the CBHFA’s community assessment step by step process (this will need to be arranged in advance with them) – using the meta card – by match it to the VCA step by step process that has just been agreed. This is to see the commonality between the 2.
   - Explain that – usually we practiced some of the common steps in community assessment, but the problem
is that we limit it to health or DM, or we call it differently. This is due to different factors – individual interest, and technical skills we have. However we should try in the future to avoid this.

3. Resilient or vulnerability component in VCA.
   - Referring to the flip chart of the living through time model.
   - Recall that – the whole purpose is to have a community that is safe and resilient to any kinds of risks that they are facing.
   - Then asking question, in order to be resilient, what are the involving or contributing factors/sectors?
   - Start to drop each key contributing factor (component) written in the meta card by explain how it contributed to safety and resilient of community, then how is its interlink to each other that can contribute to the same purpose.

4. Different name of VCA
   - In plenary – brainstorming: According to your experience, what are the different name of VCA (shortly), then
   - Facilitator present it in powerpoint.

5. Wrap up the session:
   - VCA should be used as an entry point by any long term developmental programs in one NS because we work to reduce vulnerability and build capacity of community for them to be safe and resilient.
   - Integration should start from the beginning – which is when doing VCA.
   - Refer to the steps that have been arranged and agreed.
   - The 5 resilient or vulnerability components.
   - VCA usually has different names by organizations, however, the purpose is the same.

Session 6: CCA, DRR, and Health – by ..........: While the whole idea of the event is toward safer and resilient community purpose, we could not ignore the negative impact from climate change to our current DM and health work. Therefore, this session will try to explore this issue and explain what is the relationship and influence from climate change to our work. Furthermore, discuss the way to address climate change. By the end of this session participant will have a clear idea of what are the impact of climate change to there work in DM and health, then a conceptual framework to address climate change.

1. Introduction: Present the session objective and contents.
2. CCA or DRR/RR
   a. Group exercise.
      Divide participants into 3 groups, and explain the exercise:
      - In each group, we are going to distinguish some of the interventions – whether they are Disaster Risk Reduction or climate change adaptation.
      - On a white board, divide it to 2 main parts:
        - Left hand side is CCA
        - right hand side is DRR.
- In between, draw a line top-down. This line represents some interventions that represent both DRR and CCA. (Note: for those interventions that are not clear, place it aside, and we will discuss in plenary)
- Distribute the printed card that labeled with those interventions. Let each group works together to place those cards to the right place according to instruction above.

(Please refer to the picture below as example – the picture below just try to explain the process for exercise, it does not represent the result from the exercise)

- After small group work, come to plenary and present it.
- Facilitator promotes discussion.
- Facilitator should pay attention to the following, then brainstorm. After that make a note like following:
  - EQ prevention or preparedness are not CCA – because EQ is not related to CC.
  - Tsunami preparedness also are not CCA because Tsunami is not climate induced disaster, it is caused by the EQ.
  - Volcanic eruption preparedness measures are also not CCA related.
3. How to approach CCA:
   - Facilitator use the following diagram to explain.

Start with:
   a. Top line: Hazard + vulnerability => Disaster =>
      DRR by explaining the progression of this and state that this is the way that we work on
      DRR to address disaster so far. Then,
   b. Bottom line: Climate change => Generate
      more Hazard and Vulnerability => more
      disaster => so what to do? We Still do DRR
      because it is to reduce disaster risks.
   c. Refer to the powerpoint about IFRC strategy
      2020’s statement of how to address CCA.
   d. Question – so what is the difference? The
      difference is to scale up DRR to address more
      disaster event.
   e. And how to scale up ? It is based on the CC information (present the card – at the bottom in the picture above)
      that can inform us how to scale up.
   f. What does scale up mean? Refer to the PowerPoint presentation.

4. Session wrap up:
   - Refer back to one of the result from the first exercise – and explain that :
     - Most of the interventions are both DRR and CCA – because we do CCA to address disaster risk.
     - However there are some interventions that are purely DRR and not CCA – those are related to
       intervention to address volcanic eruption, Tsunami, EQ. However, sometime when we do some of
       these, then those also contribute to CCA.
   - Refer back to the explanation the second graphic and summarize it by also linking to powerpoint about the
     meaning of scaling up of DRR to address CC.
   - Asking for questions.

5. Health related risks as a result of climate change
   - Introduction of major health related risks that people may face
   - How they affect our works?
   - What should be done to reduce its impact?
Part 2: Using VCA to promote integration toward safer and resilient community

Session 7: Preparation for actual field work (data collection) - by ...: This session allows participants in different assigned groups to discuss and prepare themselves with all the necessary tasks required before they fly to collect data in the community - eg. review the existing information, list down the information they may require, prepare the tools to be used, logistic and administration issue, and function of different persons in respective group. 1 facilitator should be assigned for each group to support and guide the process in order to ensure effectiveness and efficiency.

1. Introduction: Present the objective and contents of the session.
   a. Referring back to the review of VCA step by step processes and emphasize that we are going to do the data collection in the field. Therefore this session is about it - we need to prepare ourselves for it.
   b. Divide into 4 groups, then provide the name list of the 4 groups.
2. Instruction:
   a. Explain that - tomorrow we are going to field for first field work - on data collection.
   b. Therefore, what should we usually prepare before going to field for collecting data, what are things that we need to prepare?
   c. Tasks will be - these need to be done by each group:
      - Review secondary data, then come up with a checklist key areas of enquiry.
      - Selection of relevant tools to be conducted based on designed purposes
      - Design questionnaires and roles in your team, key informants expected, who is the overall/entire team's leader.
      - Logistic preparation – list down the materials you might need and inform the coordinator for preparation
      - Contact and inform community WHO, WHERE, WHEN, HOW and WHAT through TEAM leader.
   d. Present and explain the template for planning.
   e. Present the template for recording data, and explain

   Note for participants - one person in your team will need to take care as a recorder - from the beginning (this preparation) to the end of the process (community action plan). This is for consistent documentation.

3. Reminder:
   a. The purpose of collecting info:

<table>
<thead>
<tr>
<th>Risk</th>
<th>Vulnerability (why this risk?)</th>
<th>Root cause (why is this vulnerability?)</th>
<th>Element at risks (target group)</th>
<th>Capacity</th>
</tr>
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</table>

1. Powerpoint for session introduction.
   Name list of the 4 groups.

c. Powerpoint of the tasks that need to prepare.
d. Template for VCA planning and data recording.

a. Flip chart - template as see on left hand side here.
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<thead>
<tr>
<th>Hazard/threat 1:</th>
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<tr>
<th>Hazard/threat 2:</th>
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b. What is it mean by H, R, V, EaR and capacity.
c. We can need to add another column to next to capacity and it is for – recommendation for action/intervention.
- Referring to the picture and explain it again.
- Double check if something are still not clear.

4. Each group - starts up preparation, with support from one designated facilitator.
5. Latter in the day, before the closure of the day:
- Instruct what to do when first arrive in the community.
- Who will be the overall TEAM leader, that going to have the overall introduction in plenary when first meet community before splitting into groups.
- Cross check with participants whether they have some other questions – in order to ensure that each group is ready for the next day in the field.
- Facilitator declares some of the logistic and administration information before the closure of the day.

Key issues for facilitator to discuss and agree: whether we should arrange participant to have a short community visit upon arrival. This is for participants to a better view of community before they start to do data investigation.

**Session 8: Initial analysis and systematizing information (data analysis) – by.................:** This session is a very critical one. Based on experiences, the gap for many VCAs done in the past with different organizations is the linkage between – data collected by different tools to the analysis part. This is why often, if we look at the VCA document/result, there are inconsistency of information from first step to final step of VCA particularly in the action plan. It indicates that there was not enough logical linkage and flow from the first step to final step of VCA. This session will guide participants on how to do this appropriately, in a participatory and interactive process. It offers a chance for data collected from different tools, informants, and by different groups to be consolidated in one holistic picture of the community. This is known as 1 part of the data analysis in VCA process. By the end of this session, participants will be familiar with the process of how to do appropriate data consolidation and analysis.

1. Introduction:
   a. Present the session objective and contents
   b. Refer back again to the step by step process:
      • State that – we had done the data collection and get data in piece by piece from the field work the whole day.
   a. Powerpoint for session introduction.
   b. 1). Step by step process,
      2). Gigzaw game (cut it in
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Now it is time to consolidate it.

- Play **Gigzaw game** then explain that this represents this step in VCA (initial analysis and systematizing information), some people also call it – collating data or consolidating data. Explain also that information Vs Data in this game.
- Base on the result from yesterday working in community, it is time now to consolidate/collate it so that we could have a clearer picture of the community. It will then become information.

#### c. Brainstorm: based on experience, after doing the tools, what and how did you do in the next step? (shortly)

### 2. Initial analysis and systematizing information:

#### a. Group work:
- In the same group (field work), complete/finalize the tool that you have done. After that:
  - In each group, Use Meta card to identify:
    - Hazard: Red
    - Risk: Red
    - Vulnerability: Yellow
    - Root cause of vulnerability: blue
    - Capacity: Green
    - Actions/coping mechanism (existing or recommendation): White.

#### b. After all small group finishes, call all small groups to a plenary to collate data.
- Explain the process, and then stress that – normally we should have a few community member in this process to work with us because sometime we are not clear of something that we need to cross check with them.
- Promote discussion in plenary.
- Cross check information from different tools and groups. Always use tool from different group to cross check information.

#### c. Documentation of the collated data from the plenary. This will be used to present to community in the validation next time in community.

### 1. Session wrap up:
- The process will need to have some key persons from community to be with us.
- For tomorrow while working in the community, we need to validate/verify these info with community before proceeding to other steps.
- In this process, if there are something still not clear, we need to make a note in order for us to double
check next time when we are in community for the next step.

### Session 09 – Risk Ranking (data analysis) – by:
This is part of the data analysis by ranking the problems/risks that community are facing in order to understand the community’s perception of risks, which in turn could then lead to a relevant proposed interventions that match/represent the need of community. This session will discuss different ways to do ranking and with a participatory manner, then agree on the one that should be considered in different circumstances and contexts. By the end of the session, participants will be able to facilitate the risk ranking process with community.

1. **Introduction:**
   a. Present session objective and contents.
   b. Referring back to the step by step process, and highlight that we are now at Risk Ranking step.
      - From collating data, we have identified different types of risks that community are facing. These are the risks that we want to reduce in community and together with community in order to lessen the impact to them.
      - Thus, we will need to rank this with community in order to understand their perception of risk – which type of risks that they most concern about.
      - This will help us address the right issues that community are concerning.

2. **Ask for experience sharing:**
   - How did you do ranking in the past?
   - What did you rank in the past?
   - Showing a sample that use to be done in the past.

3. **Introduce the ranking method that should be considered.**
   - Ranking should be done with the specific criteria in order to have a fair judgment. Criteria should be discussed with community – especially, the impact of those risks that mainly could be used as criteria.
   - The risk/problems – should be well stated (clear problem statement). Eg.
     - if people are sick – then due to what?
     - Otherwise some problems are mixed up.
     - It can also help latter on in problem tree exercise.
   - Practicing the ranking method introduced.

4. **Instruction for risk ranking next day in community:**
   - Doing the ranking of risk with different groups: Still work in 4 groups as below:
     - Then compile the result into 1 in the big group.
     - Validate it in the big group – to see if the result of the ranking is acceptable.

5. **Session wrap up:**
   - Risk ranking is one of the crucial step that should not be missed. It could provide an idea of people’s perception about risk and what risk they want to address as a priority.
   - Risk/problem ranking should be done with a clear set of criteria in order to easily judge. The criteria should be...
set/selected with community – in most case, the impact from the risk are the criteria.

Session 10: Risk and vulnerability analysis or problem tree (Data analysis) – by........: After people’s perception of risk are ranked, it is better to go into a deeper analysis of those risks in order to understand the complex interaction of various factors of vulnerability that generate these to be potential risks to community. This session therefore will guide participants to handle this problem tree process in an understandable and simple approach so that they can facilitate it with community. By the end of the session, participants should be able to facilitate this problem tree exercise with community in a participatory process. The risks that have been ranked will be analyzed in this process.

1. Introduction
   a. Present session objective and content
   b. Referring back to Risk Ranking and explain that - we have known already, that community are concerning on what kind of risks/problems that are challenging to community through ranking exercise.
   c. In order to propose the appropriate and relevant intervention to those risks accordingly, we will need to analyze it with community carefully – to know what is the vulnerability and the root cause.
   d. Here we need to do problem tree analysis (risk and vulnerability analysis). It is part of problem analysis.

2. How to do problem tree:
   a. Brainstorm on experience:
      • Who use to do problem tree?
      • How to do it? and what are difficulty when doing this exercise?
   b. Instruct how to do this properly:
      • Exercise: Matching different levels in the tree.
         - Present the blank tree, and printed meta card that represent – Problem, Vulnerability, Root cause, and the impact.
         - Then ask participants to match each of the meta card to the blank tree.
         (see below)

<table>
<thead>
<tr>
<th>Key terminology</th>
<th>Different part of the tree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impact of the problem/risk</td>
<td>Leaf and fruit</td>
</tr>
<tr>
<td>Problem/risk</td>
<td>Main part of the tree</td>
</tr>
<tr>
<td>Vulnerability</td>
<td>Main root of the tree</td>
</tr>
<tr>
<td>Root cause/root cause of vulnerability</td>
<td>Smaller part of the root</td>
</tr>
</tbody>
</table>

   • From the tree, explain:
      - Link to the risk ranking, and explain that – this is the next step. It is still in problem analysis.
      - One Risk/problem for one tree. the difficulties in the past is that we try to mix all problems in one tree, that was why it is so confusing.
      - Using meta card is the best way because it is interactive and allowing it to be easily moved.
      - Link it to data collating matrix to have some already existed information about V and root cause of V.

   a. Powerpoint
   b. Refer to the result of the ranking exercise.
   c. Blank tree and printed meta card labeled with different real problems.
   d. Powerpoint – key questions.
   e. HVC/ consolidated data table
e. Practice on exercise about this.

3. Session wrap up:
   - The difficulties in the past is that – we mix up everything in one tree, that was why it could not be done properly.
   - Problem tree need to be done in a participatory method.
   - Using meta card is the best way to analyze problem – we can move those cards before final decision.
   - Link it to the initial collated / analysis information.
   - Sometime, analysis of problem is complicated that required technical expertise to support.

Powerpoint to wrap up the key learning point of the session.

4. Instruction for the problem tree exercise in community:
   - After risk/problem ranking, we should divide different risks for different group to handle in order to manage the time available.
   - Each group will then do problem trees for designated risks/problems that have been prioritized.
   - Each group will need to prepare blank problem tree and meta card – to be ready and to save time.

Powerpoint

Session 11: Converting problem tree to objective tree (transforming V to C or Risk reduction programming) - by …..: In term of risk reduction programming, this step is crucial step in promoting ownership with community on whatever the proposed interventions. Following the problem trees analysis, we will convert those problems from negative view into an objective tree which is the positive view. In the other word, this is about transforming vulnerability into capacity of community. It will propose different types of interventions in accordance with/ and to address the identified vulnerabilities and root cause of vulnerability in order to turn it into capacity of community.

1. Introduction:
   a. Present session objective and
   b. Referring back to step by step process and stress that we are now standing at – Objective tree.
   c. Refer to the problem tree - we already know what are prioritized Risks/problems that community are concerning. We also know about its vulnerability and the root cause.
   d. Now we need to propose actions in order to address those risks/problems.
   e. Here we need to do the conversion of problem tree to objective tree.
   f. Referring back to below and then ask participants, by using printed meta card of the first column below, to do the matching exercise again about – Goal/overall goal, objective, ER, and Activities (just as below)

<table>
<thead>
<tr>
<th>Logical level of LogFrame</th>
<th>Key terminology</th>
<th>Different part of the tree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal/overall goal</td>
<td>Impact of the problem/risk</td>
<td>Leaf and fruit (at the top)</td>
</tr>
<tr>
<td>Objective</td>
<td>Problem/risk</td>
<td>Main part of the tree</td>
</tr>
<tr>
<td>Expected result</td>
<td>Vulnerability</td>
<td>Main root of the tree</td>
</tr>
<tr>
<td>Activity</td>
<td>Root cause/root cause of vulnerability</td>
<td>Smaller part of the root</td>
</tr>
</tbody>
</table>

a. Powerpoint.
b. One result of the problem tree
c. Blank objective tree.
2. Instruction: Describe how to do it:
   - Link it to problem tree.
   - Proposed interventions based on the vulnerability and the root cause – referring to HVC matrix (initial analysis).
   - Discuss different levels of the objective tree – goal, objective, expected result, and activities.

5. Practice one objective tree.

6. Session summary:
   - Often the experience is that we did not do this one. We just propose the solution/intervention right away.
   - We better do this once with community and in community.

7. Instruction for this exercise next day in community:
   - Just follow the same group and the same risks/problems that have been designated.
   - Each group will need to prepare the blank objective tree and meta card, masking tape in advance.

Session 12: Transforming V to C (transforming V to C or Risk reduction programming) – by ...

Here is the real step of planning for risk reduction. It will transfer the information from objective tree into the first part of community plan template in a participatory process with community. Target groups to benefit from any proposed interventions will also be discussed.

1. Introduction:
   a. Introduce the template:

<table>
<thead>
<tr>
<th>Potential Risks (problem, concern, issue, impact)</th>
<th>Objective</th>
<th>Action to transform vulnerability to capacity (To reduce potential risk)</th>
<th>Element at risk/target group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outbreak of dengue fewer in ....</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   b. Explain that:
      - This template is used to propose solution or risk reduction measure, but with a close and mainly link to the objective tree. It mean that just to transfer info from objective tree to this template.
      - We should avoid – to jump directly to work/or complete the community plan template – because it is too much for community. We should consider this stage to discuss with community.
      - This step is crucial to promote the understanding and ownership with community. We need to transfer the info from objective tree to this template.

1. Practice the exercise.

1) Prepare the blank template (flip chart and A4 copy for distribution), 2) Objective tree, 4) meta card (copy from objective tree)
2. Instruction for field work in the next field:
   - Just follow the same group and same designated risks.
   - Each group will need to prepare the blank template in flip chart in order to work with community.

**Session 13: Resourcing the action plan (transforming V to C or Risk reduction programming) – by ..........:** Often in any long term development programs, we want to generate the existing resource and build on it and then combine with the external support in order to ensure sustainability. Often also that development workers faced a challenge with this matter. Part of the reason is that – this process of resourcing the action plan is missed out in the planning process with community, and not discussed well with community. Therefore, this session is to fill this gap by promoting the discussion with community about resource to support the action plan. Capacity mapping, and information on capacity from the early step of VCA will be brought out to discuss with community.

1. Introduction:
   - Introduce the template:

<table>
<thead>
<tr>
<th>Actions to reduce potential risks</th>
<th>What are available resource/capacity that can be used to do this action?</th>
<th>Does this need external financial resource or technical resource? and what?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   - Explain that:
     - This is another critical step in doing VCA and programming. We often assessed the resources and capacity in the community, then it is forgotten at this stage in planning with community.
     - On the other hand, we often complaint that we could not use any community resource or capacity to do the interventions. Partially, because we did not discuss this well with community – in this step now.
     - When doing this, we need to discuss clear with community.
     - We need to combine this process to the capacity that have been identified in data collating and the capacity map and the capacity mapping.

2. Practice the exercise.

3. Instruction for exercise in community:
   - Just follow the same group and the same risks/problems.
   - Each group need to prepare in advance the temple in flip chart in order to save time in community.

**Session 14: Compiling the action plan (transforming V to C or Risk reduction programming) – by ..........:** This step is mainly about compiling or writing up the action plan after all the detail discussion had been done.

Explain:
1. This is about write up the action plan while all information already exist through some of the step about.
2. Mainly this is to transfer info from the 2 templates above into the action plan - by joining 2 of them together.
3. After the completion, the action plan will need to be shared and launched in community so that it is clearly
Course wrap up:

1. Reviewing, agreeing VCA step by step process, and key learning point from each step:
   - On the floor, facilitator put down 1 piece of flipchart next to another horizontally. Each of this flipchart represents 1 main step of the VCA.
   - On each flipchart, divide it into 2 parts with a line horizontally in the middle. Part 1 on left hand side, write down the "sub-step", On right hand side write down "key notes/remarks". On top and in the middle of the page, write the title of the main step of VCA. Under the title "sub-step", write down the number. (Please refer to picture below)

   ![Flipchart images](image_url)

   - Facilitator can place the main step title on each flipchart.
   - After that, start from the first flipchart by introducing the meta card of sub-step and ask participant to place it to the right written down number (like in the picture above). After the step agreed, discuss on the right hand side about some key note/remarks of each of these step... eg. what are the key remarks? what are the template to be used in this sub step?

Flipchart, printed meta card, tape, a space to work on the floor.
• Continue to second flipchart - the same way as first flipchart.

2. Key learning points from the course:
   - Fish bond method:
     a. Introduce big flipchart labeled with a picture of the fish bond.
     b. Using a printed meta card that labeled with each session from session 1 to session 14 to locate it to each main fish bond on the body of the fish.
     c. Divide into different groups to work on each of the session. The instruction is:
        - What are the key learning points or reminder from each session that your group is assigned to work on? (using meta card – 1 card for 1 point)
        - What are the 4 important points that you want to bring home from your group (note it one the meta card)
     d. Come back to plenary and start from the first group:
        - Place the meta card to the rest part of the fish bond on each session.
        - Each group explains those points – why it is a key learning point.
        - Ask other group if they have other point to add to this group.
     e. Then continue the same way to the next group until the end.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>2.</td>
<td>Key learning points from the course:</td>
</tr>
<tr>
<td></td>
<td>Fish bond method:</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>b. Using a printed meta card that labeled with each session from session 1 to session 14 to locate it to each main fish bond on the body of the fish.</td>
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<td>c. Divide into different groups to work on each of the session. The instruction is:</td>
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3. Course evaluation and recommendation:
   Using a template for final evaluation and work in pair.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3.</td>
<td>Course evaluation and recommendation:</td>
</tr>
<tr>
<td></td>
<td>Using a template for final evaluation and work in pair.</td>
</tr>
</tbody>
</table>

|   | A joint flipchart of the fish bond (big one). |
|   | Meta card, marker, and tape. |

|   | Evaluation form. |