Above the Monday morning hustle and bustle of Savaii the chant “Samoa Red Cross – One heart!” can be heard. It comes from a circle of young, dedicated volunteers and programme staff from the Samoa Red Cross Society (SRC S) who are just about to set out to the village of Sili, where they will conduct one of many community assessments that the SRC S has planned for this year.

According to the SRC S’s volunteer management officer, ‘one heart’ reflects the way their team of volunteers recognizes that they are all parts of an interconnected whole supporting each other while they are out in the field working with vulnerable communities. It is also this philosophy that underpins the way that the SRC S approaches its programming in community health and first aid, disaster preparedness and climate change.

Drawing upon approaches promoted in the International Federation of Red Cross and Red Crescent Societies’ vulnerability and capacity assessment (VCA) toolbox and community-based health and first aid (CBHFA) assessment manual the SRC S has developed an integrated approach to work with vulnerable communities.

Using suitable entry points to reach communities
One of the key methods in reaching out to communities and disseminating information is through established networks, including in many cases local churches. Generally, prior to visiting a community the SRC S’s disaster management officer will jointly collaborate with local church leaders, informing them of the SRC S’s overall approach, as well as providing information on programmes and the fundamental principles. In addition, suitable timing of community visits are established and church leaders are then asked to communicate this information to their congregations regarding the SRC S’s impending visit.

Talking to households
Under the leadership of the SRC S’s volunteer development, disaster management and health programme officers a team of volunteers visit the community once the community has been fully informed of the process. The volunteers and programme officers break into small groups and spend their first days conducting transect walks of the village and visiting households where they talk to members about the risks they face, community leadership, their health and well-being, their livelihoods, the availability and quality of food and their access to basic services such as running water and health. In order to guide these discussions with households, the assessment teams use a semi-structured interview format that touches on all these issues but still allows for households to express themselves freely. When visiting a household, assessment teams always take time to talk to household members about the work of the SRC S, the fundamental principles and the purpose of their visit.

Collating and analysing information
After conducting household surveys during the day, team leaders work tirelessly into the evenings to collate and analyse the baseline data they have collected to establish the pertinent issues emerging from the community.

Bringing the community together
After the finalization of household surveys, community representatives, identified through the interviews, are brought together to conduct more participatory assessments in small groups. Participatory activities from CBHFA and VCA, such as seasonal calendars and risk mapping are used to verify information collected from households as well as to identify other additional issues in the SRC S’s focus areas. On the final day the assessment team invites community representatives to prioritize issues and facilitates this process. Throughout the process the community is informed by the assessment team of the expected outcomes from each of the activities.

Designing and delivering training
In the next stage of its engagement with communities, the SRC S takes stock of priority issues and puts together an awareness and training package tailored to meet the specific needs identified through the household-level...
surveys and sessions with community representatives. This awareness and training package is designed to build upon existing community capacities and to provide them with the knowledge and skills to address the issues they face. Training which generally takes place during the course of a week, depending on the community and the issues identified, can include awareness on:
- basic first aid
- the benefits of immunization and donating blood
- HIV
- disaster preparedness including community mobilization for disaster response
- climate change and what communities can do to minimize potential impacts
- water safety and hygiene.

In delivering this training SRCS volunteers and staff emphasize the importance of community participation and utilize a variety of different styles to deliver their messages and engage the community in taking further action.

Advocacy for vulnerable communities
The SRCS recognizes that they cannot always meet all of the priorities identified by the community. The secretary general of the SRCS notes that while volunteers engaging with communities try to manage expectations, the SRCS has an equally strong role to play in advocating with other key stakeholders and partners, in particular in addressing community priorities that the SRCS cannot meet. The SRCS therefore uses its existing networks as well as membership on various national committees to try and address all of the priorities identified by a community. However, as the secretary general notes, there are always challenges involved in getting stakeholders to take on extra work and responsibility and thus this involves persistence, continual monitoring and follow-up. One of their most recent successes in this respect was seeing the community in Moamoa on Upolu gain access to clean running water as a result of the advocacy work the SRCS did with the Samoa Water Authority.

Following-up with communities
The SRCS also recognizes that it is important to follow-up with communities once they have completed an assessment and a training has been conducted with them. This follow-up on the part of the SRCS will assess how the knowledge gained throughout the process is being applied and also allow it to let community members know what the SRCS is doing to help them address remaining longer-term priorities. Therefore, to strengthen this dialogue and process the SRCS routinely conducts follow-up visits to communities they have conducted assessments with.

Often these follow-up visits will include an evening programme where SRCS volunteers use drama, song and dance to consolidate key messages on issues that were delivered in community training and awareness raising sessions. These follow-up visits also enable the SRCS to touch base with community leaders on priority issues and further programming.

Best practice
- Building the knowledge and understanding of a core group of volunteers of the linkages between a cross-section of programmatic areas including first aid, community health, climate change and disaster management.
- Building the skills of a core group of volunteers in the use of participatory approaches.
- Conducting participatory assessments with communities that capture priorities in all programmatic areas.
- Designing and delivering awareness and training to assist communities to develop the knowledge and skills they require in meeting their specific priorities.
- Drawing on available methodologies (VCA and CBHFA) and adapting them to the programming needs of the National Society.

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