# Including additional considerations on climate, gender and diversity, livelihoods and health into Transect Walk

The following are suggestions elaborated by VCA practitioners from different parts of the world to adapt or improve particular aspects of the VCA tools. While basic aspects of these sectors have been mainstreamed into the revised tools we recommend the following additions to the tools if you are looking to focus your VCA in one or several of the areas of:

* Gender and diversity
* Climate change adaptation
* Livelihoods
* Epidemics

These should be read and used as a complementary note to the steps described in the [Transect Walk.](https://www.ifrcvca.org/mapping)

## Gender & diversity[[1]](#footnote-1)

When identifying the ‘transect’ to take, ensure this has been identified in consultation with men, women, boys, girls and diverse groups to ensure a representative view of the village/community e.g. men and women will have different views on the key areas or routes in the community that should be looked at. People with disabilities may have to take different routes to access various services that other people in the community may not be aware of.

If the transect walk is being carried out after a mapping exercise, use the map to identify with different groups in the community which walks to take.

A representative team should be ensured to conduct the walk and the team should be gender balanced to facilitate discussions with men and women during the walk

The walk should be exercised with community members, who are representative of the community join the walk. The group could be a mix of groups, which can act as awareness raising among genders, age groups and different groups in the community, or conduct separate transect walked with different groups.

Provisions for people with disabilities should be made so they can participate in the transect walk

When recording what you found during the walk disaggregate information by sex especially when noting: types of livelihood, community centers (are these only used by men and/or women); specific risks mentioned by men and women; land ownership etc. As well as highlighting information provided by specific groups in the community.

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## Climate change adaptation[[2]](#footnote-2)

Based on the information you gathered when planning the VCA, you could use a baseline map to indicate places where changes are likely to take place in the future e.g. higher sea levels. This would indicate which locations are most vulnerable.

## Livelihoods: Economic activities, assets and financial services

When taking the walk, ensure you walk through areas identified by your key informants as relevant for the community main livelihoods. Also keep in mind the 5 livelihoods assets mentioned in the mapping[[3]](#footnote-3), and related the observation to the main types of livelihoods identified for the community.

It is an opportunity to pay attention to:

* Ongoing livelihoods activities and who’s involved in (men, women, elderly)
* Natural and physical assets: farming and grazing land, forests, rivers and streams (availability of water sources for livestock or farming): consider distance, access, and condition
* Condition of physical (productive) assets: farming tools and inputs, livestock (types, healthiness); backyard gardens/crop fields / equipment of micro and small enterprises (status, maintenance …
* Observation of markets, shops, etc.: number of retailers, what are they selling, what items may be missing?
* Availability of financial services (saving groups, banks, ATMs, microfinancing institutions, moneylenders…)

Additional info: [Rapid Market Assessments (RAM) Guidelines](https://www.preparecenter.org/resources/rapid-assessment-markets-ifrc-guidelines)

**Tips:**

* Consider the best moment for the walk, according to your objective, if you want to observe activities it should be during labour time, if not may be in other moments during day or weekends/ day off.
* Make sure you are accompanied by a local impartial representative that can guide you and facilitate extra information in case of doubts.
* Make sure you take the walk with representative from each livelihoods group or that you undertake different walks for each type of livelihoods (farmers, livestock keepers, small entrepreneurs…) as they may try to raise your attention to different issues and constraints
* Take pictures/ video when possible as means of verification.



## Health

Transect walks can be used to complement or verify the information of the mapping (see above)– it can entail observations of WASH facilities, HH level hygiene practices, schools, access for disabled, health facilities etc. or talks with community members and key informants on specific hazards observed.

To integrate epidemic into transect walk, it is essential first to understand the transmission route of the disease looked at. This will start with the community fact sheet to identify the potential disease, followed by the analysis and understanding of the transmission route. This could be found on the [epidemic control toolkit website](https://epidemics.ifrc.org/volunteer/disease). The eVCA team has to include at least one member with health background to help the team to understand and identify the element to consider. When the transmission route is well understand then the transect walk can be well planned.

For example, transect walk is useful data collection tool to assess the exposure to cholera. You need to know that cholera is a fecal oral disease. A person can get cholera by drinking water or eating food contaminated with cholera bacteria. In an epidemic, the source of the contamination is usually the faeces of an infected person that contaminates water or food. So you need to plan your transect walk to observe:

* Open defecation sites and non-functional latrines.
* Water sources near those contaminated sites.
* Measure distance between water sources and non-functional latrines that have high risk of leaking contaminated faeces.
* Observe household latrines and their hygienic status.
* Check how many latrines have a handwashing station nearby with signs of being used.
* Visit the local market and check whether street food vendors are selling food in hygienic conditions.
* Check whether communal latrines in public spaces like markets are kept in good hygienic conditions.

There is large group of diseases that, like cholera, have high epidemic potential and which exposure is strongly connected to the level of access to safe water and sanitation in the community. This is the case of hepatitis A, typhoid fever, acute watery diarrhoea, measles, etc.

Transect walk is also very relevant for diseases that are transmitted by an animal vector. For example, in communities that have faced dengue outbreaks in the past, it is recommended to plan a transect walk to observe masses of water (clean or muddy water, stagnant or not) where Aedes mosquito can easily breed and neighborhoods with poor housing/shelter where people are more exposed to mosquito bites.

There are emerging diseases transmitted by animals, less known than dengue or malaria, like Rift Valley Fever, with increasing epidemic risk, that can be well assessed through transect walks. In this case, plan your walk to observe whether cattle (buffalo, sheep, goats, and camels) are kept in closer contact with humans. For communities, located in areas that are prone to Ebola disease, you can walk in nearby forest to observe possible areas where human may get in contact with wild animals or dead bodies of wild animals. You can walk in the local market to observe wild animal meat is available for sale.

Factors that increase vulnerability of the community against health hazards can be observed during your transect walk. For example, for cholera-prone areas you can plan a transect walk in an ultra-poor neighbourhood where you can check whether families have no proper shelter, living in crowded spaces with poor hygienic status and no commodities such as insecticide treated mosquito net, safe water, hygienic toilet and soap.

Transect walk is also very useful to check on local capacities that enable communities to manage health epidemic risk:

* Walk to the nearest health facilities (clinic, hospital, local pharmacy or first aid point) to check on distance and accessibility. In there, observe that proper health-trained staff and medical equipment is available.
* Walk to sites/places where health information is communicated (churches, local NGOs, Red Cross branch office) and observe the communication materials available, if they are easy to understand by all in the community.

1. [Gender and diversity sensitive Vulnerability and Capacity Assessment (VCA). IFRC](https://docs.wixstatic.com/ugd/7baf5b_ece27859d67347539a37a75c700cb484.pdf). [↑](#footnote-ref-1)
2. [Red Cross Red Crescent Climate Centre. How can climate change be considered in Vulnerability and Capacity Assessments? 2012](https://docs.wixstatic.com/ugd/7baf5b_ea7bdbb5fa454ec59dc69ed30e1d3265.pdf). [↑](#footnote-ref-2)
3. Human, Natural, Social, Physical and Financial [↑](#footnote-ref-3)