

## Women and men working together to saves lives in Vanuatu<sup>1</sup>

*Between May 2013 and December 2014, CARE implemented a disaster risk reduction project in Vanuatu's Tafea province. The 'Yumi Redi 2<sup>2</sup> project aimed to increase the capacity of vulnerable communities to prepare for and respond to disasters. When Cyclone Pam – a category five cyclone, one of the worst storms ever to hit the region - struck Vanuatu on March 13<sup>th</sup>, 2015 it tested the community's capacity to prepare and respond.*

When the small community of Dillon's Bay on Erromango Island heard the cyclone warning four days before the cyclone, the Community Disaster Committee (CDC) assembled. Using the cyclone map provided by CARE and listening to warnings via radio, the CDC began preparing the community. They alerted the community as soon as they received the initial warning, and told everyone to prepare their houses and to be ready to prepare for a day or night in an evacuation centre. Immediately people started preparing: cutting down branches near their homes, fastening roofs, pulling fishing boats out of the water, and gathering essential supplies.

The project's work to increase gender equality – through supporting women's agency, enabling equal relations between women and men, as well as transforming community structures to better support equality – meant that women and men worked together to prepare. "Before it was only the men's job to prepare – doing things like fastening the roofs - but this time everyone was involved. The women too were carrying timber to give to the fathers, and the women were getting the children to help... everyone was part of the preparation. We learned this through the simulation exercise that CARE did. It really saved lives, I know it," said Wilson Umah, CDC member. Deputy CDC Coordinator Jocelyn Naupa emphasises that the change was not just about knowledge, training and skills provided by CARE, but also about changing people's attitudes: "Before, people thought cyclones couldn't get them."



CDC member Sabrina shows off her new kitchen garden planted after the cyclone. Credit: CARE

The CDC is made up of both men and women, with leadership positions shared. 21 year old CDC member Sabrina Yaviong was a school student not long ago. She became a CDC member when she filled in for her mother one day, and she has been on the committee in her own right ever since. "The CDC is made up of ten people, four of them women," Sabrina explains. "The CDC women work the same as the CDC men," she says, "but there

are challenges. Sometimes people see me as just a girl, but Wilson [acting CDC coordinator] supports me and helps get people to take me seriously. Now, they listen to me." She adds, "I

like wearing the uniform... when I put on the CDC uniform I feel good, because I feel I'm helping other people, and I'm helping me too because I am a future women's leader."

**"When I put on the CDC uniform I feel good, because I feel I'm helping other people, and I'm helping me too because I am a future women's leader."**

Once the CDC knew the cyclone was near, they moved people to safe places such as the school, church and three private houses made of concrete. They went house to house, checking each one and encouraging families to move to a safe place when the evacuation warning came. On Friday afternoon, they started the evacuation, using the megaphone provided by CARE to announce the imminent arrival of the cyclone. CDC members also went from house to house, spreading the message.

Jocelyn notes, "The CDC helped the elderly and people with disabilities to move, carrying them and their things. If the CDC hadn't assisted them," she says "many of these vulnerable people would not have been able to move to the safe house in time. Even able-bodied people who could have moved themselves, without the CDC they wouldn't have been so quick, so early, and they would have endangered themselves trying to move later." She explains, "Evacuation is not a new practice in Dillon's Bay, but before some people did move and some people didn't. Now, everyone follows the CDC."

The evacuation was successful, with almost 95% of the community moving to safe places. In the whole community there were no serious injuries or deaths.

When the wind abated, the CDC went and checked on all people in the safe places. Soon after they did an assessment, using the official procedure of the National Disaster Management Office. "The CDC members did the assessment straight away, even though they too had been through a disaster and had a lot of work to do on their own houses and gardens. They just put on their uniforms, and their families understood that as CDC members they had a duty to the community, and they respected that," says Jonathan (CDC Coordinator).

**"I assessed the damage to houses, gardens, kitchens and things inside like pots and pans, and collected information on how many women and men there were in each household".**

Dividing up the community, each CDC member was responsible for assessing a particular area. "The area up the top was mine," says young CDC member Sabrina Yaviong. "I assessed the damage to houses, gardens, kitchens and things inside like pots and pans, and collected information on how many women and men there were in each household". This was the first time that assessments like this had been done in a community, and CDC members worked together with each other and the community to complete assessments faithfully and accurately.

"Once we finished the assessment, we worked on clearing the road to the airport. We didn't know if a plane would come, but as it happened a plane came just as we had finished clearing the road," says Wilson. Jocelyn recalls, "When the government representatives landed here they couldn't believe we were alive. All they could see from the plane was destruction. They came to do an assessment, but the CDC was right there waiting at the airstrip ready to hand

them the finished assessment report. This was on Tuesday [2 days after the first assessment was done].”

“When the government representatives landed here they couldn’t believe we were alive. All they could see from the plane was destruction. They came to do an assessment, but the CDC was right there waiting at the airstrip ready to hand them the finished assessment report.”



“After the assessment, we started with the work of cleaning up our gardens and recovering bits of our houses and building temporary shelters,” Wilson explains. “Many people had lost everything and stayed in the safe houses or with neighbours until they could build temporary shelters.” Jonathan says proudly, “The CDC did not stop its work after the cyclone. They advised everyone to help each other, to replant and rebuild, and slowly, slowly, help the village recover. The CDC also played a role in sharing information on relief, safeguarding supplies, helping CARE with the distributions, and planning for food security after distributions end.”

According to Sabrina, “The chief thanked the CDC very much, and said that with the CDC’s help everyone is working together as one community.” Wilson agreed: “Before, we were all in small groups, but now we are uniting together. Everyone is looking out for everyone.”

### Success factors for enhancing resilience through gender equality<sup>3</sup>

- A dedicated and competent management team that promotes a sustained focus on gender equality and women’s empowerment
- Committed national staff who were keen to learn about and support gender equality and women’s empowerment
- Use of DRR as an entry point to address gender equality
- Targeting both women and men in gender and leadership training
- Targeting (mainly male) Area Secretaries and senior provincial leaders in gender training
- Participation by staff in Gender and Protection Cluster meetings
- Consistent efforts by male and female field officers to encourage the attendance and active participation of women in project activities

- Separate focus groups discussions for women and men in project activities and participatory activities
- Confident and experienced women mobilisers within the community.

## Glossary

**DISASTER RISK REDUCTION:** DRR is a systematic approach that analyses and manages the causal factors of disasters through: reduced exposure to hazards, reduced vulnerability of people and assets, wise management of land and the environment, and improved preparedness for adverse events.

**GENDER:** Attitudes, feelings, and behaviours that a given culture associates with a person's biological sex.

**GENDER EQUALITY:** The equal enjoyment by women, girls, boys and men of rights, opportunities, resources and rewards.

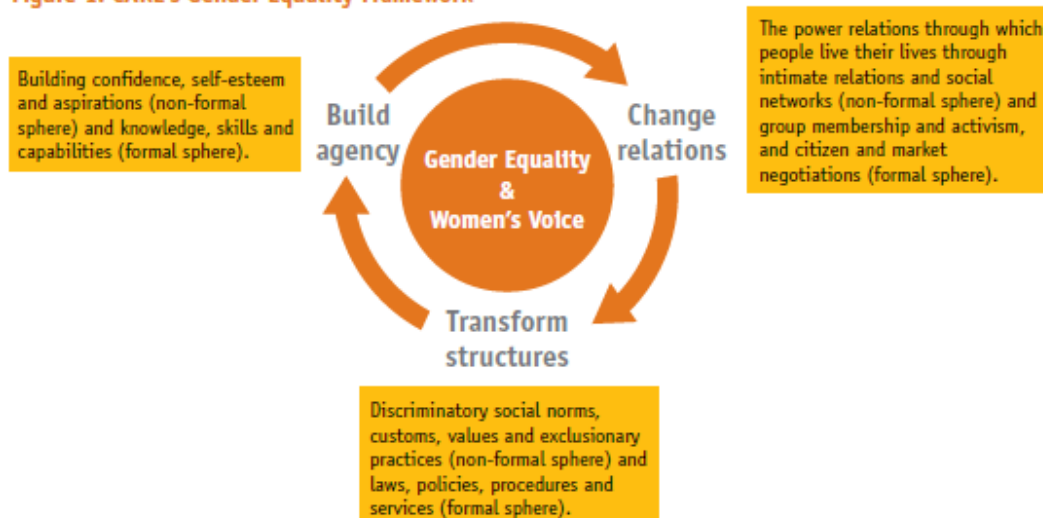
---

[END OF DOCUMENT]

This case study was written by Charlotte L. Sterrett and is one of a series of case studies based on learning from CARE Australia's disaster risk reduction and community-based adaptation programming in the Asia Pacific region in 2011-2015.

The purpose of these case studies is to highlight and provide examples of the practical use of CARE's Gender Equality Framework in resilience-related programming.

**Figure 1: CARE's Gender Equality Framework**



---

<sup>1</sup> This case study has been adapted from a case study written by Sarah Whitfield and Giselle Hall called "Dillon's Bay's preparedness for and response to Cyclone Pam."

<sup>2</sup> 'We are Ready' project.

<sup>3</sup> Whitfield, S. (2015) *Yumi Ready 2 End of Project Evaluation*, CARE Australia, p.35.