

Method 2: Vulnerability Matrix

Purpose

This Activity scores the vulnerability of people in different social groups to Hunger, Sickness and Physical Violence/Harm. Its results help us:

- Rank (using basic indicators of wellbeing) the vulnerability of Social Group members vis-à-vis others within a particular site
- Identify patterns of relative vulnerability between livelihood types and sites

Process

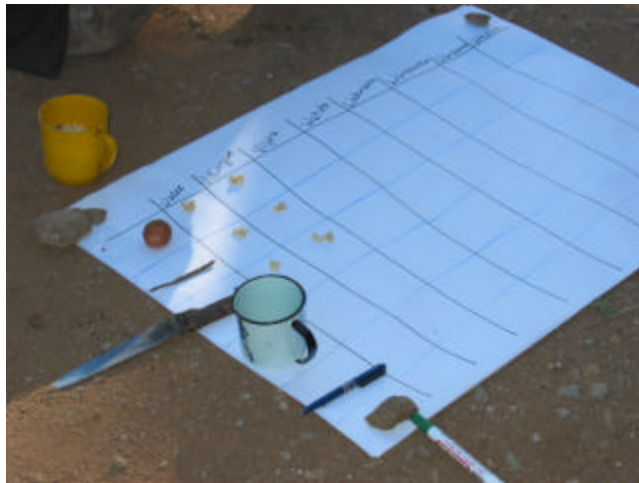
Step 1: Form two Discussion Groups (one for women and another for men) of 5-8 people each. Before splitting up:

- Explain the Activity's purpose and procedures
- Review the locally relevant Social Groups identified in the 1st Community Meeting. Agree to use, add or subtract from these (see Appendix)

Step 2: Split the two Discussion Groups. Each must be accompanied by a Facilitator and Recorder. Then, have participants create a matrix on paper or the ground in which symbols/words for the different Social Groups run along the top and Hunger, Sickness and Physical Violence/Harm run down the side. The result might look like this:

	Social Groups						
	Wazee	Vikongwe	Vijana	Wanaume	Wanawake	Watoto (under 5)	Watoto (over 5)
Hunger							
Sickness							
Physical Violence/ Harm							
Total							

Or:



Step 3: Once they have created the matrix, participants should choose markers (e.g. pebbles or sticks) to score each field on the basis of:

1 = not vulnerable (people in this Social Group aren't expected to experience Hunger, Sickness or Violence)

2 = barely vulnerable (people in this Social Group might experience Hunger, Sickness or Violence)

3 = vulnerable (people in this Social Group will, upon occasion, experience Hunger, Sickness or Violence)

4 = very vulnerable (people in this Social Group will regularly experience Hunger, Sickness or Violence)

5 = extremely vulnerable (people in this Social Group will typically experience Hunger, Sickness or Violence. For example, people in this Social Group typically don't have enough to eat, are ill or are subject to violence)

In this Step, the Facilitator's role should be confined to:

- Clarifying *why* a Social Group is assigned a particular score (i.e. asking appropriate "probing questions" that stimulate critical reflection and analysis by activity participants)
- Ensuring that scores reflect the opinions of all activity participants

Step 4: After the matrix is filled out, participants should tally the scores in each column and note the results.

On the basis of this information, the Facilitator should:

- Graphically rank the Social Groups in (descending) order of vulnerability
- Ask participants if these results appear to reflect reality. If not, discuss how, why and review the matrix...

Step 5: Reunite the two Discussion Groups, and in this context, representatives from each should present their final results.

Afterwards, a Facilitator should draw participants' attention to significant discrepancies between the two Discussion Groups and ask:

- Did rankings differ? Where? How? Why?
- Did some scores dramatically differ? Where? How? Why? (Men and women might, for example, assign very different scores to women's experience of illness)

Following this discussion, the Facilitator should ask if either Group wants to change their scores. If not, then close the Activity. If so, *meticulously* note the reasons given for each change.

Appendix

The community in which this method was tested made the following distinctions between Social Groups:

Men and women aged less than 30 are *vijana*, 30-50 are *manaume* and older than 50 are *wazee*. When people become very old and are effectively dependent upon their children, they are *vikongwe*. Children are also defined as being dependent (indeed, they are deemed *vijana* once they can fend for themselves).

In this test site, there was no livelihood diversity nor landless versus landed people. Moreover, it was of limited value to speak of widows (*wajane*) as a Social Group because young women are remarried within weeks of losing their husband. This is not true of older widows; but, in these cases, their situation is essentially the same as that of other *wazee* or *vikongwe*.

Therefore, for our purposes, there were seven locally relevant Social Groups:

1. Elders (age 50<) (*wazee*)
2. Very old persons (*vikongwe*)
3. Men (age 30 – 50) (*wanaume*)
4. Women (age 30 – 50) (*wanawake*)
5. Youth (age <30) (*vijana*)
6. Children (*watoto*)
7. Disabled persons (*welemavu*)