

# Mitra - One Day Conference on Inclusive Disaster Risk Management









# Mitra – Conference on Inclusive Disaster Risk Management

# **Content**

1	Inaugural Session	01
2	Technical Session 1 Inclusion of Persons with Disability in DRM	04
3	Technical Session 2 Inclusion of Elderly in DRM	09
4	Technical Session 3 Inclusion of Children in DRM	11
5	Technical Session 4 Inclusion of Women in DRM	17
6	Group Discussion and Recommendations Thematic Area – Persons with Disability	20
7	Group Discussion and Recommendations Thematic Area – Elderly	21
8	Group Discussion and Recommendations Thematic Area – Children	22
9	Group Discussion and Recommendations Thematic Area – Women	24
10	Valediction	25
11	Participant List	27
12	Process Documentation	32

# **Annexure**

13	Concept Note – MITRA Conference on Inclusive DRM	38
14	Brochure - MITRA Conference on Inclusive DRM	40

# **Inaugural Session**

One day conference on Inclusive Disaster Risk Management named 'Mitra', jointly organized by Kerala Disaster Management Authority (KSDM) and CARE India on 20th March 2019 at Mascot Hotel Thiruvananthapuram. MITRA provided a forum where experts who has worked at national level and experts who have worked in 2018 Kerala floods share their rich experiences, present case studies, best practices and identify the gaps in the current system and make a road to deliberatively include vulnerable groups in disaster risk reduction programme and planning. Government departments, NGOs, Colleges and Universities participated in the 'Mitra' Conference.



Registration started at 9.30 AM and was followed by the inaugural session where Ms. Parvathy S, Hazard and Risk Analyst, KSDMA welcomed all speakers and special guests to the dais. Dr. Sekhar L Kuriakose, Member Secretary, Kerala Disaster Management Authority delivered the presidential address along with a speech on "Inclusion in the Context of Kerala Floods". He defined the concept "Inclusion", its significance; dimensions in the light of differently able, elderly, women and child in Disaster Risk Reduction. He also mentioned different activities performed by Kerala State Disaster Management Authority, such as Braille brochures, videos with sign language and audios regarding the self-care and reduction of risk during disasters. Along with it he added that they developed the module for handling the differently able at time of disasters, which later been used by the MG University. He passed the question of how to include elderly, women and children in that context and how to overcome emergency situations to the people gathered. His thought provoking questions made every gathered personality to think and ensure inclusive participation

during training programme and to prepare the people to face disasters. In conclusion, he initiated to identify the limitations and to portrait the process or the mechanism to overcome such situations and to produce a large outcome from this programme.



Keynote address was delivered by Padmashree Dr. MR Rajagopal, Director Pallium India. He said that he is proud regarding the people of the Kerala and how different departments work together for helping people at the time of flood. He unraveled the experiences and situation had to meet while working with people at the time of flood and specified about an elderly couple where one was differently able. He mentioned about the ignorance of the people who took part in the rescue operation to evacuate differently able person and elderly people to safer places during emergency time. He thus emphasized the need to form an army of trained person to rescue PwD and elderly from disaster prone area. He lauded the humanitarian works taken up by many including government machineries, non-governmental organizations, individuals and community in rescue, relocation and rehabilitation of PwD and Elderly people, but dissented by saying that after these people were sent back to their respective houses, rarely anybody enquired their wellbeing.

He alluded that restoration of health doesn't means physical health alone, but it involves psychological, social as well as spiritual. So we must considered about the multidisciplinary approach while we deal with PwD and elderly people. Mr Rajagopal also said that there are around three hundred palliative care organizations smaller and bigger functioning in the state of Kerala and these organizations are ready to provide all sort of help and assistance to PwD and to the elderly people, provided a unified system or a forum is developed for coordinating the activities of these good minded organizations. Finally he concluded his deliberation by clarifying the concept of the motto of Pallium India which translate as "True Health".



Followed was inaugural session by Ms. Sheeba George IAS, Director, Department of Women and Child Department, Government of Kerala. In her speech she articulated that in the event of a disaster whether it is anthropogenic or natural, the most affected in a community are vulnerable group like women, children, elderly, PwD and sick persons. The state of Kerala is not regularly prone to disasters and thus majority of the people are unaware to manage disaster by themselves which include administering First Aid. She also recommended starting regular training programmes for the students and teachers and prepare them to face emergencies be it a natural or anthropological. She pointed out the importance of mainstreaming Disaster Management in school curriculum, children must be taught disaster management from UP class to 12th standard, so we can protect and ensure safety of our future generation by preparing them for disasters and they take part in emergency services later. If women are trained in survival skills and strengthen their capacities on DRR then it will be easy for them and to the community to manage emergency situations and thus the impact of disaster can be brought down. With this she concluded her deliberation and thrown open 'MITRA' Conference on Inclusive Disaster Risk Management.

End of the inaugural session also witnessed release of a Braille Brochure on SUN BURN HAZARD. The brochure was released by Ms. Sheeba George IAS and was handed over to Mr. Sanjeevan – member of Kerala Federation for Blind (KFB).





Ms. Shyamala Ashok - State Programme Representative, CARE India delivered felicitation. She started her talk by comparing and contrasting 2018 Kerala Floods to that of 2015 Tamil Nadu Floods. She pointed out that Kerala was able to withstand the fury of disaster faster by its sheer unity, coordination and networking of various departments, NGOs and the community themselves. She said such a coordinated effort was not observed in Tamil Nadu during 2015 floods. Towards the concluding part of her deliberation, she shared CARE India's development works initiated in the backdrop of 2018 Kerala Floods at Wayanad and Idukki districts. Vote of thanks was delivered by Mr. Mohammed Wasi Alam, Acting Head Disaster Management Unit CARE India. After the inaugural session the participants dispersed for tea.

#### Guidelines of technical sessions

The input sessions were planned at three levels. In level 01, an expert who has worked at national level would speak from a national perspective covering policies, programmes and framework with recommendations. In level 02 – an expert who has extensively worked in 2018 Kerala Flood would share her/his experience and recommendations and in Level 03 – personal experience sharing by disaster survivors with her/his audio – visual documentary.

#### Technical Sessions No. 01 – Inclusion of 'Persons with Disability' in DRM

Dr. M R Rajagopal, Director Pallium India chaired the session for Persons with Disability and as well as Elderly. Ground rules of the talk was shared with key speakers including details of time allotted etc.

Mr. Joe John George, State Project Officer UNDP spoke about inclusion of Persons with Disability in DRR from the national perspective. He supported his presentation with ample figure and stated that Kerala is the first state in India to gain the attention of National Disaster Management Authority



MITRA Conference on Inclusive Disaster Risk Wanagement

(NDMA) through its effective work in the field of Inclusion and DRR and its functional model. Kerala has also succeeded in reaching out to grass root level population by being the first state in conducting and completing door to door disability survey and also by developing training module for Differently Abled Persons on Disaster Risk Reduction. He also explained the concept of "INCLUSION" in disaster management, which is defined as the process of "transforming the system and structure to make it fit into system." Thus we need to establish a network and functionality of several departments and people in order to establish the concept of inclusion with the system and society. He highlighted that the Sustainable Development Goals (SDGs) have mentioned 11 times about the rights and needs of Differently Abled population. Kerala State Disaster Management Authority (KSDMA) have put forward the project which focuses on four major areas of persons with disability which includes Physically Impaired, Intellectually Impaired, Visually Impaired and Speech and Hearing Impaired in collaboration with National Institute of Speech and Hearing (NISH).

#### **Best Practice**

The significant milestones achieved by Kerala State Disaster Management Authority was about conducting a four day training programme for persons with disability and their bystanders. Disabled friendly training materials and resources were provided to the participants for effective communication and better internalization of training content. Resources includes brochures and handbooks on Disaster Risk Reduction in all popular mediums including Braille was provided. Audio - Visual medium were used along with sign language so that information would be equally passed to all varieties of disabled population. In collaboration with NGO Thanal Palliative and Paraplegic Care Society, Ernakulam have developed brochures for persons with disability and elderly on coping with the emergency and reduce the risks caused due to disaster. The NGO also provided financial assistance to those who were terminally ill during disaster. These are considered to be the best disability friendly practices to promote during prevention, preparedness and response stages.

Before concluding the session he also mentioned about National Disaster Management Authority and their brochures on disaster risk reduction prepared by keeping Kerala Disaster Management Authority's modules as reference materials.

#### Recommendation:

- 1. Disability inclusive Early Warning System (EWS) which would help them to prepare themselves and reduce the impact of disaster upon them.
- Prepare appropriate materials for PWDs. There were 21 types of disabilities mentioned in PWD Act which is different from one another; therefore separate materials should be developed for each type of disability.
- 3. Mainstreaming disability inclusive DRR.
- 4. Disability inclusive relief camp, where the camp must be disable friendly including ramp, toilets etc.
- 5. Geo-tagging of disabled persons, would help the disabled people to be located easily and to receive immediate services to them.
- 6. Ensure buddy system, where the training is given to the family members, caregiver / neighbors to provide immediate response at the time of disaster.



Second session was facilitated by Mr. Sabith Umer, Secretary Thanal Palliative and Paraplegic Care Society, Ernakulam, where he narrated the major dimensions of PwDs from the backdrop of 2018 Kerala Floods. He mentioned about the course offered by MG University on management of Differently Abled Persons at time of disasters and shared detail of the activities undertaken by their society during 2018 Kerala Floods. In Ernakulam district with the help of volunteer network they have succeeded in providing succor to the disabled population without losing a single life. The major achievement of 2018 Kerala Flood were; evacuation and saving the lives of 160 PwDs, activating services of 19 units, 500 trained volunteers, 12 outpatient services, 50 homecare services, 2 ambulances and 250 nursing assistants and has provided assistive devices like wheelchairs and other aid materials to Persons with Disability. Thanal organization has also formed a singing group of disabled persons by name "Singers of Thanal".

Towards the end of his deliberation, a discussion was made on challenges faced by Thanal Palliative and Paraplegic Care Society in handling of PwDs during 2018 Kerala Floods with specific reference to the absence of proper mechanism and systems to undertake rescue and safe evacuation of PwDs. The major activities of the Thanal Palliative and Paraplegic Care Society are;

- Deployment of DRR team including physician, Para-therapist nursing assistant, volunteer, social worker.
- Early warning through media, organization and community helper.
- Vulnerability mapping done according to the guidelines of KGMA.
- Deployment of trained volunteer with equipment.
- Pre-disaster evacuation.
- ❖ Relief and rehabilitation.



#### Recommendation:

- 1. Mapping of PWDs according to the ward division.
- 2. R & D for search and rescue of PWDs.
- 3. Identification of accessible public places for PwDs.
- 4. Mechanism to find the abandoned people.
- 5. Awareness about Inclusive DRR among general public.
- 6. Coordination and training of volunteers through NGO's.

Mr. Dominic P (Physically Disabled Person), Payyampilli house, Eloor Ernakulam, a disaster survivor of 2018 Kerala Floods shared his painful experiences before the audience. He stated that 2018 floods was a harrowing experience for him. He was traumatized for losing his hard earned savings and many other valuables which includes collection of the poems and literatures which he wrote years down. Identifying safer places and relocating from place to place was a challenging job for him and his family. It took six days for them to return to their home to find out their damaged house and household equipments scattered around. Towards the end of the experience sharing session, a video documentary of the disaster survivor was screened before the audience.

Dr. M R Rajagopal, Director Pallium India who chaired the session consolidated the discussion points and put forward the suggestions and recommendations as follow.

Ms. Anju S G from Social Justice Department said they provided assistive devices to PwDs post to 2018 Kerala floods and they welcome suggestions from other line departments and experts, so that it can be included in the various schemes of the SJD.

- Ms. Soja Oliver from NISH recommended the need of making all public buildings disabled friendly and suggested that concerned government agencies/departments should make sure that they provide NOC to only those buildings which possess disabled friendly features.
- Mr. Jojy A S from Kerala Fire and Rescue Services mentioned that NOC can be issued for newly built buildings. He shared the difficulties faced by KFRS during rescue operations of 2018 Kerala Floods, due to the complexities of structures of the existing building. They brought in the idea of provisions for floating stretchers which can be used to easily transport disabled people through flood waters.

# Technical Sessions No. 02 - Inclusion of 'Elderly' in Disaster Risk Management

Mr. Biju Mathew, Director & State Head of Help Age India (HAI) spoke about inclusion of Elderly person in Disaster Risk Reduction from the national perspective. He focused his deliberations on sharing information on major activities and its background while working with elderly population, ensuring their participation in various phases of development programme as a deliberate effort to bring inclusiveness. He mentioned about the emergency unit of Help Age India since 1980, where they rush to reach not only the elder population but also the community at large, providing relief materials like clothes and shelters to establish long term rehabilitation until total recovery of the affected population is achieved. Following are the major interventions provided by Help Age India for elderly.

- ❖ Medical treatments for 6479 elderly through 94 medical camps in association with
- ❖ 6 medical units in 4 districts.
- ❖ Started medical relief centers in 2 district.
- ❖ Started a Vayojana Sevana Kendram.
- ❖ Mobile Health care unit at Idukki and Ernakulam.
- Planning to cover Health Care, Age care and Livelihoods for the elderly.

Mr. Biju Mathew explained major problem faced by the elderly such as deteriorating health conditions, feeling of isolation, neglect, abuse, economic insecurity and low self-esteem etc. They categorized elderly into three categories such as; working elders, assisted elders and destitute elders. He explained Age Care Model of Help Age India which is the combination of 'Appropriate Medicare', 'Social Support Structure', and 'Micro Enterprise' and is based on three pillars namely; 'Participation', 'Health' and 'Security' which make the model functional.

#### **Recommendation:**

- 1. Self-Care model need to be started among elderly which would be more effective.
- 2. Ensure participation of elders in Gramsabha meeting to bring Inclusion.

Ms. Vyshnavi V K, Project Officer Pallium India, Thiruvananthapuram spoke on inclusion of Elderly from the backdrop of Kerala Floods. She explained about the activities of Pallium India implemented in the state of Kerala for the elder population focused on physical, psychosocial, spiritual and emotional dimensions of an individual. Pallium India's work is centered on relieving pain and provide better quality palliative care to the suffering persons. Need assessment was

conducted at grassroot level to priorities and fulfill the immediate needs and provide necessary support to the elders. Pallium India provided medical and psychosocial care to the flood affected elders and conducted surveys and comparative studies on how their lives were before and after the devastating flood.

#### Recommendation:

- 1. Inclusion of palliative care components in disaster management policy and plan at local level.
- 2. Need of developing collaboration between government, NGOs and civil society organizations for ensuring safety of elders during all phases of disaster management cycle.
- 3. To prepare preventive measure for health related suffering.



Video documentary of Ms. Maniyamma Chandran, a disaster survivor from Keerithodu Idukki was screened before the audience followed by an interactive session with her. Ms. Maniyamma Chandran said her house was destroyed in the landslide which occurred in August 2018. Rebuilding of their house was altogether a challenging job for her and her unemployed son. Whatever small savings she had was spent to make their house livable. The video documentary of her ordeal was screened before the audience and in between the interaction with audience Ms. Maniyamma Chandran broke into tears and was consoled by the chair Dr. M R Rajagopal, Director Pallium India.

#### **General Discussion**

Dr. Anil V of Department of Health Services said that a large number of elderly persons lost their prescription, medications and medical examination reports in the flood disaster. He suggested creation of a common platform for storing e-copies of medical prescription and reports which can

be accessed at any point of time for providing timely medical care to the elderly population at temporary relief camps or at their own homes. Medical services like dialysis and chemo-therapy can be made accessible to the needy elderly by linking them with schemes of health department and to the NGO's. Dr. Anil V also opined that temporary relief camps functioning at schools can be made best platform for educating children and youth on becoming responsible towards disabled person and elderly friendly.

Mr. Aneeshkumar M S from Kudumbashree brought out the idea of forming SHGs for supporting disabled and elderly persons at grassroot level. He added that Kudumbashree have several limitations at implementation level, hence if services of NGOs or other voluntary organizations are mobilized then they could succeed in providing effective support systems to the disabled and elderly persons. Mr. John V Samuel, Deputy Collector Disaster Management suggested making database of each individual's medication and treatment records for future reference and it can be used during emergencies and in post disaster situations.

#### **LUNCH BREAK**

# Technical Sessions No. 03 - Inclusion of 'Children' in Disaster Risk Management

Ms. Aleyamma Vijayan, Secretary, SAKHI NGO based at Thiruvananthapuram chaired the sessions. Technical session 03 was on Inclusion of women in Disaster Risk Management and Session 04 on Children. Like the other two presentations, the first expert talked about inclusion from the national perspective, the second expert talked about inclusion from the backdrop of 2018 Kerala Floods followed by experience sharing my disaster survivors. The chair shared ground rules with key speakers including details of time allotted to them.

Dr. Kavitha P, Consultant UNICEF – NIMHANS WDC, SCERT Programme Kerala spoke about children and Disaster Risk Reduction from the national context. She highlighted the psychosocial care techniques that can be provided for children in difficult circumstances. Psychosocial care in disaster is a holistic approach and it integrates child to his/her family and to the society.



Recently psychosocial care has been estranged from disaster mental health, a service that focuses on mental health needs of those directly affected by disasters, indirectly affected by disasters and relief personals.

Psychosocial care is operationally defined as the process that deals with broad range of psychosocial problems and promotes restoration of social cohesion, infrastructure as well as independence and dignity of individual and groups it serves to prevent pathologic developments and social dislocation.

NIMHANS has three decades of work practice in disaster mental health and psychosocial care programme. In 2006 NIMHANS has developed knowledge materials for working with children affected by 2004 Tsunami. These materials are used by NIMHANS as a medium for providing psychosocial interventions among children affected by disasters. Other tools used are; Facial Expression Cards, Thematic Story Cards, Family Portrait, Drawing, Writing, Doll Family, Clay Modelling. The speaker put forward two models as best practices they carried out in 2018 Kerala Floods.

#### **Best Practice 01**

# Psychosocial First Aid for Survivors of 2018 Kerala Floods - A Kerala State Model

In Kerala NIMHANS started the Psychosocial First Aid (PSFA) for the survivors of 2018 Floods and was initiated in 11 affected districts. 30 Mental health professionals were deployed from NIMHANS on 23<sup>rd</sup> of August 2018. Services of NGO's working under Psychosocial Care for Children in Conflict with Law (Kaval Project) of the Department of Women and Child Development were utilized and conducted a drive to recruit volunteers for PSFA intervention. Out of the 5047 applications, 1040 volunteers were deployed to 11 districts within a period of 3 days for taking up psychosocial interventions for children affected by floods.

7369 volunteers were identified and trained by a multidisciplinary team and the volunteers includes Counselors from ICDS, School Counselors, NGOs, Teachers, Staff from Social Justice Department, Academicians, ASHA Workers, ICDS Workers and Tribal Officers and these team joined District Child Protection Unit to form district teams. The team was linked up with the Mental Health Disaster Management Core Team at district level. The trained Social Work Volunteers were divided into groups and were assigned specific areas such that they could give psychological first aid to the survivors at the relief camps as well as in community through individual and group counseling sessions, music, dance and art therapy among children. After initial assessment of the survivors, those in need for further care and support were referred to District Mental Health Programme (DMHP) and to other stakeholders working in mental health.

2018 Kerala Floods bought different levels of impacts among children. From the results of intervention major intrusive reactions reported by the children were; 36.4% of children trouble in falling asleep; 30.2% have traumatic feelings about the incidents; 30.4% of children has images about the incidents popped into their mind and 26.8% of children said other things make them think about the incidents. Major avoidance reactions reported among the children were, 42.8% of the children trying to remove from memory; 38.7% of the children staying away from memories; 38% of the children felt that if it is not real; 30.7% of children are trying not to talk about the incidents and 39.8% of children trying not to think about the disaster.

The model had numerous effective outputs in providing psychological first aid to disaster affected

person by utilizing community resources at the aftermath of disaster to quickly act upon and bring normalcy. The model highlighted the importance of inter-sectorial and multidisciplinary approach in emergency situation with provision of psychosocial care in the immediate phase of disaster response action. The model can be adopted in similar other disasters situations to ensure immediate psychosocial support and reach out to a larger number of affected population.

#### **Best Practice 02**

# Psychosocial care for Women and Children in 2018 Kerala Floods

The main aim of the project was to develop a holistic intervention model for women and children affected by the 2018 Floods through multidisciplinary and inter-sectorial approach in the state of Kerala. The programme is intended to reach out to maximum number of women and children through community based and school based approaches.

Community based approach led through DCPU in every affected district in association with NIMHANS whereas school based approach is led through SCERT, WCD and NIMHANS. Process of community based approach included, 1) colloquium for finalizing the model; 2) capacity building through training of the trainers programme; 3) hand holding training to build community resources; 4) psychosocial need assessment for women and children; 5) Psychosocial intervention programmes and 6) reporting & recording.

School based approach included two days orientation for core teachers at SCERT Thiruvananthapuram followed half day orientation on psychosocial care for children in disaster organized in 11 affected districts. In addition to this, one day orientation on the psychosocial care for children in 87 selected schools in 11 districts. The model has provisions of one day training on parental orientation for parents of the survived children with inputs on understanding disasters, impact of disaster on children, emotional and behavioural reactions and its management as well as special orientation programme for teachers of the 87 selected schools on providing Psychosocial Care for children affected by flood disaster. The major outputs of the programme were;

- 1) Manual for the community level intervention.
  - Psychosocial care for women and children.
- 2) Manual for school level intervention.
  - Psychosocial first aid in disaster management.
  - ❖ Psychosocial care for children as a school based approach.
  - ❖ Psychosocial preparedness in disaster management.

#### Recommendation:

- 1. The psychosocial intervention need to be integrated along with the current disaster management plan of the Government of Kerala as per the recommendations of National Disaster Management Guidelines on Psychosocial Support and Mental Health Services in Disasters (December 2009).
- 2. Comprehensive psychosocial care programme needs to be implemented in state through a multi-disciplinary team consisting of social worker, psychologist and psychiatrist to reduce the psychological reaction in the survivors and prevent the occurrence of PTSD as mentioned in the National Disaster Management Guidelines, 2008 Management of flood.

- 3. Children need to be supported through schools, where psychosocial care need to be an integral part of the curriculum for a period of one year minimum through trained teachers and school counselors.
- 4. Vulnerable population (Children, Women, Elderly, Terminally ill, PWD's) need to be supported through specific programme. Periodic monitoring and evaluation of these population need to be carried out to ensure the sustainability of the services and to enhance their psychosocial wellbeing.
- 5. To address the shortage of human resources in providing psychosocial care for the affected population including community level workers such as ASHA worker and ICDS workers, volunteers, NGO representatives etc. need to be trained and supported through regular handholding services.
- 6. Towards providing a holistic perspective in disaster management, training on the provision of psychosocial first aid and services should be incorporated in the curriculum of health care and other services providers in disasters.
- 7. Networking and coordination of programmes under various department need to be collaborated towards a common objective of supporting survivors through multidisciplinary and inter-sectorial approach.
- 8. Psychosocial need assessment has to be done in regular intervals among the survivors to prevent the pathological development of illness and to provide timely referral services.
- 9. Psychosocial preparedness in disaster need to be pact of disaster management programme to enhance the coping of individuals and community to minimize the distress due to disaster.

The second session to talk on bringing inclusiveness of children in Disaster Risk Management was facilitated Mr. Sony Kutty George, Child Protection Specialist, UNICEF, Hyderabad from backdrop of 2018 Kerala Floods. He said during flood time, UNICEF primarily focused on tribal districts of Kerala and they listened to the affected children and adapted interventions. UNICEF ensured the availability of safe drinking water and access to sanitation facilities. They also tailored the existing programmes of NIMHANS to cater to needs of children and promoted accountability to the affected people.

#### **Best Practice**

UNICEF has started working with affected children from 16<sup>th</sup> of August 2018 immediately aftermath to Kerala Floods. School curriculum was reviewed to include Disaster Risk Reduction components by giving thrust to mock drills and disaster response trainings to children including child survival programme among tribal. Provisions of early intervention of entertainment and play for children in relief camps were initiated. The intervention activities shall be planned in such a manner to rope in with existing programmes of the government. Other interventions include; 1) strengthening of health interventions by building capacities of health nurses; 2) sector recovery programme shall be implemented.

#### Recommendation:

- 1. Invest in conducting rapid assessment of ground realities through a collective & iterative process.
- 2. Enhanced investment in emergency preparedness building capacity of key partners and

planned use of this capacity.

- 3. Access to standby agreements with resource agencies.
- 4. Have a roster of potential staff / consultants to be deployed in emergency situations.
- 5. Full-time position for monitoring, follow up and quality assurance.
- 6. Results based monitoring to be strengthened.

The speaker said, UNICEF is committed in partnering with Rebuild Kerala Initiative to work at three fronts - 1) Policy reforms; 2) Institutional strengthening and 3) Investment reforms. UNICEF through its thematic sectors will be engaged with respective departments to work on preparedness, mitigation and mainstreaming of risk informed programming and emergency management, so as to ensure the progress made on development does not get affected.



Video documentary of Miss Sheby Bobby (aged 16), child survivor from Elikkadu colony Aranmula Pathanamthitta was screened before the audience followed by an interactive session with her. Miss Sheby Boby said on 15<sup>th</sup> August while returning from school she was not able to figure out and visualize the road leading to her home as it completely inundated with flood water and rescue boats were sailing above her home, such was the height of water level. At last she somehow found her parents and siblings after which they took shelter at a nearby relief camp opened by the government. After few days when flood water receded, they returned to their home to find out the house was completely destroyed in flood water and the entire household's items were ruined including her certificates and important land documents. She took MITRA platform as an opportunity to thank voluntary organizations and individuals who helped her family to rebuild their home.

# Suggestions and Recommendations from the audience

- Officials from Kerala Fire & Rescue Services suggested that preparedness measures like mock drills at schools shall be made part of the school activities. The need for preparing and educating students to face any kind of disasters, provide emergency first aid were discussed.
- Integrating disaster management and responses through games and activities so that it reaches children quickly and easily.
- Mr. Sony Kutty George from UNICEF opined that capacity building training programmes for children shall be given utmost importance, so that they take part in disaster management activities right from lower class itself and this can be achieved by including appropriate modules in the school curriculum. He also mentioned the need to provide trainings at community level for children in providing emergency aid and management services.
- Dr. Anil V from Health Department enquired the possibility of mobilizing funding support from voluntary organizations who could help provide children who lost orthotics or assistive devices as it is essential to maintain their quality of life and many cannot afford the cost involved.
- Mr. Ramesh Krishnan, Executive Director, Foundation for Development Action (FDA) explained about the School Safety Programme currently being implemented by their organization at Saraswathi Vidyalaya (CBSE School), Vattiyoorkavu by building the capacities of teaching, non-teaching and students on Basic Fire Fighting & Rescue, Basic Life Support. Other activities implemented includes preparation of school evacuation maps, fire mock drills by actively ensuring the participation of teaching, non-teaching and student community, special orientation programme for school bus drivers on stress management and safe driving practices and preparation of School DM Plan which is under progress. All this was implemented without disturbing school academics. School safety programme shall be implemented in all vulnerable schools across Kerala by linking with government departments and NGO's working in the field of DRR.



# Technical Sessions No. 04 - Inclusion of 'Women' in Disaster Risk Management

Ms. Annie George, State Coordinator, UNDP talked about inclusion of Women in Disaster Risk Management from the national perspective. She stated the impact of various policies and programmes on women and men should be equally considered at every stage of programme cycle, from planning to implementation and to evaluation. She focused more on the concept of temporary shelters in disaster situation where male dominates women to have access and control over basic services. Even the design of the temporary shelter shall relates to the socio-cultural conditions of the affected community and rebuilding effort shall respect local customs, believes and traditions and this will help the affected women to willing accept and utilize the shelters constructed for them and their family. While de-segregated information on knowledge, attitudes and commonly followed practices is important to drive a shelter planning process and it is also equally important to ensure that the aspects of access to basic services, water and sanitation, protection, gender based violence, risky adaptive practices be looked through gender lens.

The non-negotiable factors in a gender approach are gender and diversity analysis, inclusion, protection, prevention and response to sexual exploitation and abuse (PSEA), preventing sexual and gender based violence and safeguarding the interests of sexual and gender based minorities. Later she mentioned about survivor centered approach which is based on four focus area; 1) Dignity, 2) Access, 3) participation and 4) Safety. The speaker then moved to the gender analysis in the context of disasters and discussed about the areas to be specially focused while addressing issues related to women affected by disasters. Special focus should be given in the field of health and reproductive health, nutrition and food security, access to health care, livelihoods and coping mechanisms, risks, vulnerabilities and capacities and protection techniques.

#### Recommendation:

- 1. Participation of women in programme planning and decision making.
- 2. Targeted interventions.
- 3. Gender mainstreaming and,
- 4. Participatory monitoring and evaluation

Aspect related to 'Inclusion of Women' in Disaster Risk Management from the backdrop of 2018 Kerala Floods was shared by Ms. Devi Balakrishnan, State Assistant Programme Manager – Organization, Kudumbashree. She mentioned about the background, functioning and objectives of Kudumbashree as a nodal organization for working among women which focuses on poverty alleviation and empowerment of women. She drew light on the impact of 2018 flood on women workforce including loss of job opportunities which resulted in economic insecurity affecting their psychological and social life. Some of the activities implemented by Kudumbashree during Kerala flood were; cleaning of houses and public places, counselling, community kitchen, packing of take home kits, resource mobilization and NGO coordination etc.

#### **Best Practices**

- ❖ RKLS Loan.
- ❖ Purchase mela.
- ❖ Navakerala lottery sale by CDS's.
- Community kitchen & Jeevanam unit.
- Counselling & Psycho empowerment for children and
- Nutrimix in relief camps makes babies happy.

#### Recommendation:

- ❖ Addressing the economic needs of women affected by floods and provide skill trainings in emerging avenues for economic and social empowerment.
- \* Women's collective farming would help the farmers group who suffered loss with input assistance for restoration of farm activity.
- Animal husbandry which would support the family by providing livestocks with focus on value additions could enhance their economical and psychosocial aspects.

Video documentary of Ms. Annamma Cheriyan (disaster survivor) from Arattupuzha, Aranmula Pathanamthitta was screened before the audience followed by an interactive session with her. Ms. Annamma Cheriyan said the water level raised abruptly and their home were fully inundated with flood water in fraction of time. They were forced to spend three nights and two days on roof top of their home with no food except drinking which was available in their overhead water tank. Her family along with grand-children had suffered a lot until they were rescued by the rescue team and shifted to a temporary relief camp opened by the government. When they came back to their home, they found almost all household things were wiped out by flood water including important documents like; Aadhaar cards, land title deeds, her and her daughter's education certificates, text books her grandchild as well as material losses. She also explained the hardship she faced being a women in relief camp focusing on lack of proper clothing, safe sanitation and other facilities at relief camp etc.



Experience sharing was followed by the presentation on Gender in Emergency by Mr. Mohammed Wasi Alam, Acting Head, Disaster Management Unit, CARE India. He explained about CARE India's approach on gender in emergencies for which they were able to come up with tools and methods to help the team integrate gender effectively into humanitarian works of CARE India, they are as follow;

- ❖ Rapid Gender Analysis (RGA).
- ❖ Gender mainstreaming and gender specific programming.
- ❖ Women's participation and leadership and
- ❖ Gender and MEAL.

# Recommendations

- Strengthen capacity to address in emergency programmes.
- \* Create condition for more equitable representation of women and men in emergency team.
- Promote an accountable and gender aware culture in management of emergencies.
- ❖ The floor was opened for general discussions by the participants and recommendations thereof. Safety issues for women and children in relief campus shall be given utmost priority in all disaster response programme.
- Mr. Arif Salah, student from Department of Sociology, Karivattom campus came up with the idea of deploying women volunteers in relief camp especially at night hours to help women and children in distress situations. As most of the volunteers are men, women feel uncomfortable to share their problem especially pertaining to personal hygiene and related needs.
- Officers from Kerala Fire and Rescue Services (KFRS) put forwarded the need to appoint adequate number of women officers/rescuers in their department, as this will helpful to cater to the needs of women and children in certain emergency situations. According to them, the community rescue volunteer service training programme conducted by KFRS for women volunteers were attended by few women. They said it is very important and necessary to build the capacities of women within the community so that their services could be used during emergencies.
- Kudumbashree mission shall join hand with Kerala Fire and Rescue Services (KFRS) for providing specialized trainings to the member of CDS/ADS and Self Help Group on Search & Rescue. This will help to build an emergency response team at local level to perform during emergencies and act as a supportive system to KFRS.
- Ms. Annie George, State Coordinator UNDP said while developing gender mainstreaming policy both female and male shall be equally consulted and roles and responsibilities of malefemale-children shall be specifically mentioned in the document.
- One of the participant said that our system of functioning is still in response stage. We shall give high priority to preparedness and prevention activities.

# **Group Discussion and Sector Wise Recommendations**

After winding up of the general discussion, the participants were divided into groups (department wise and the sector which correlates them) based on four thematic area of MITRA Conference on Inclusive DMR - the PwD, Elderly, Children and Women and directions. Subject experts were made group leader who facilitated the discussion. The groups were allotted adequate 30 minutes and were instructed to discuss core issues/gaps and to come up with concrete recommendations. Group leaders later presented the discussion points before the general audience and was finalised after it being pruned.

# Thematic Area – Persons with Disability

Members of PwD group includes representatives from Thanal Palliative and Paraplegic Care Society, Ernakulam; National Institute of Speech & Hearing, Thiruvananthapuram; Kerala State Disaster Management Authority, Thiruvananthapuram; Social Justice Department and students of Kerala University.

# **Challenges**

- Ignorance of the rescuers about types of disability and lack of knowledge on how to handle PwDs in emergency situation. Therefore trainings must be provided on rescue methods of differently abled persons.
- 2. Most of the building and public places are not disabled friendly, therefore they need to be made disable friendly.
- 3. Inadequate assistive devices for disabled person make it difficultly for rescuers to rescue them during emergencies.
- 4. Lack of database of differently abled person especially the bedridden and their living locations and places of residence. Availability of such data will help to evacuate such persons and provide help faster.
- 5. PWD Act 2016 is available only in English language shall be translated to Malayalam language so that more people have access to it.
- 7. Present education system and curriculum doesn't provide in-depth knowledge on various aspects of disaster management.



MITRA Conference on Inclusive Disaster Risk Management

#### Recommendations

- 1. Public places like; government offices, educational institutions, religious institutions, hospitals, shopping malls, railway and bus stations, cinema hall, public transport systems shall be made disabled friendly with provisions of ramps for wheelchair carriers to have easy access, disabled friendly toilets etc.
- 2. Shortlist organizations working in the field of differently abled and train them in disaster management including rescue and evacuation, so that during emergency they can provide immediate services to PwDs in their area and in nearby localities.
- 3. Disabled friendly vehicle shall be made available at local places, so that it can be used during emergency situation for relocating/evacuating and transport them to safer places.
- 4. Develop data base of differently abled persons with the help of KSHWC, BRCs, Disability board and other like-minded organizations, so that they can be used to retrieve data at the time of emergency and help the team to easily locate PwDs.
- 5. 24x7 availability of electricity, water and sanitations facilities for persons with disability in relief camps. Adult diaper were not available at relief campus which was one of the major difficulties faced by the bed ridden persons.
- 6. The relief camp and public place shall have adequate number of spare wheel chairs in order to use it during emergency situation.
- 7. PMR must be established in every taluk, it is in order to gain access to every disabled persons in the locality.
- 8. Formation of emergency rescue teams at local level and provision for training on rescue techniques especially with skills for handling PwDs. Services of these volunteers shall be made available for immediate response at the time or emergency.
- 9. Supply of artificial limbs, equipment and other assistive devices shall be provided to PwDs with help of voluntary organizations in post disaster scenario.

# Thematic Area – Elderly

Members of elderly group includes representatives from Pallium India, Sakhi (NGO), Social Justice Department, Foundation for Development Action (NGO) and student representatives. Ms. Vyshnavi V K, Project Officer, Pallium India presented the outcome of group discussion before the audience.

# **Challenges**

- 1. Lack of expertise and equipment to handle elderly people in emergency situations.
- 2. Lack of the availability of age wise medical kit in relief camps.
- 3. Data pool transparency at local level regarding the elderly persons in a locality.
- 4. Public attitude towards elderly care. People shall have the attitude to help elderly especially during emergency by considering the situations they are going through.
- 5. Not much coordination and networking among the stakeholders working in elderly sector. Individual works are progressing in peace time, but during emergency situations worsens because of lack of connectivity among stakeholders.



# Recommendations

- 1. Community level training in disaster management focusing on care, protection and treatment of elderly would help in the time of emergency situations.
- 2. Development of resource directory would help to get the contact details of elderly which will be helpful to locate them at the time of emergency.
- 3. Separate units and facilities shall be arranged in relief camp for children, bed ridden, disabled women and children.
- 4. Community gatherings irrespective of gender discrimination for effective communication.
- 5. Bud school would help in execution of elderly care.
- 6. Elderly care medical kits shall include basic necessary medications like; for diabetic checking apparatus, syringe, medicines etc.
- 7. Public places shall be made elderly friendly.
- 8. Development of policy for physically challenged and elderly.
- 9. Legal legislative and statutory body must make policy for physically challenged and elderly care.
- 10. Government shall set up geriatric care centre and physically challenged.
- 11. Orientation and training to selected responsible citizens to keep regular contact and connection with elderly persons and family, especially those are staying alone.

#### Thematic Area - Children

Members of children group includes representatives from Education department, UNICEF, NIMHANS and student representatives from Social Work Colleges. Ms. Kavitha P from NIMHANS presented the outcome of group discussion before the audience.

# **Challenges**

- 1. The exclusion of detail and in-depth module of disaster management in the existing school curriculum. While preparing the module for students expert advises has to be sought from this field (like, fire and rescue, first aid, road and safety and army etc.) under the guidelines of State Disaster Management Authority.
- 2. Training to teaching and non-teaching staffs on disaster management focusing on prevention, preparedness and in emergency response (rescue) operations.
- 3. Multi-disciplinary approach must be used especially while handling children in emergency situations.

#### Recommendations

- 1. Orientation on basics of disaster management (hazard, vulnerabilities, risks, preventions, preparedness) for students from UP to 12<sup>th</sup> standards.
- 2. Familiarizing survival skills to students, including basic life supports and rescue.
- 3. Disaster management shall be integrated into the existing subject (language, social, environment science etc.) along with related assignments.
- 4. Ensure continuity of disaster management programmes at schools and educational institutions.
- 5. As part of preparedness in schools, disaster specific mock drills shall be organized under the supervision of trained persons/agencies.



- 6. Teachers shall be trained to identify unusual behaviour among children especially after the happening of a disaster, and if such abnormalities are seen, then the student shall be referred to the school counselor or to further referral system to help them to cope with the traumatic experience.
- 7. Psychosocial care for children shall be part of disaster management policy, guidelines and programmes.
- 8. Local Self Government shall involve in preparing programmes and extend services for children in disasters.
- 9. Child protection committee need to be strengthen at local level to identify vulnerable children and to refer her/him to District Child Protection Unit.
- 10.NCC, NSS, SPC, Red Cross, Scouts and Guides and all other clubs in the school shall involve in school Safety Programme.
- 11.Disaster news updates and reports from authentic sources shall be discussed in school, so that the student get more knowledge and information by exploring themselves on key concepts of disasters and its management.

#### Thematic Area - Women

Members of women's group includes representatives from Kudumbashree, Social Justice Department, Women and Child Department, student from universities and social work colleges. Mr. Aneeshkumar M S, Senior Consultant Kudumbashree presented the outcome of group discussion before the audience.



# Challenges

- 1. Women attending a capacity building training programme are sometime look down upon by general community and thus a stigma is attached to attending training programmes.
- 2. Lack of awareness about the availability of modern rescue aid and equipments.
- 3. Issues within the relief camp which is been faced by women.
- 4. Addressing the vulnerable categories (PWD, elderly) by women in the community.
- 6. Identification of feasible livelihoods related aspects for affected women for their social and economic empowerment.

#### Recommendations

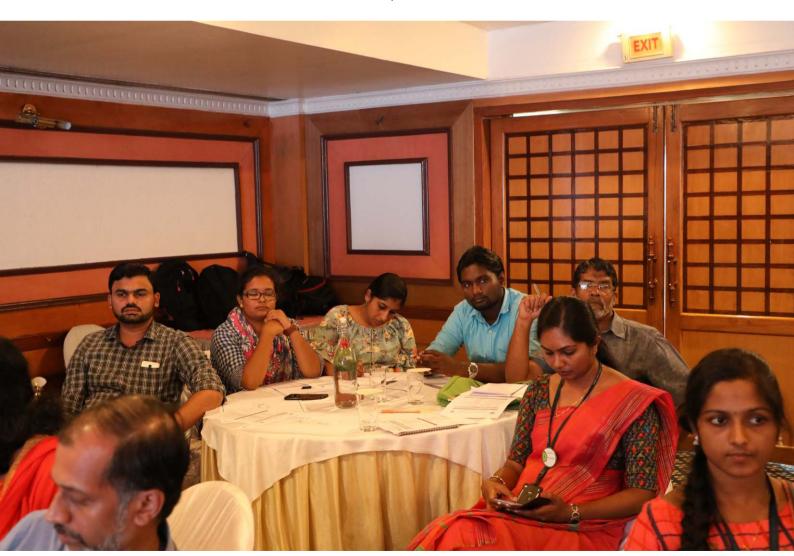
- 1. Social stigma shall be addressed by providing adequate sensitization programmes in the community by highlighting the relevance and importance of getting trained in disaster risk reduction thereby for reducing disaster risks and its impact.
- 2. Information dissemination, risk identification can be done through women from the community.
- 3. Anganwadi teachers and ASHA workers should be trained on information dissemination.
- 4. Geo-tagging and centralized database of local population collected from Anganwadis should be developed.
- 5. Promote life insurance policy for women and general insurance policy for their enterprises.
- 6. SHG network can be used to disseminate information in the community and practical training on disaster management with focus on rescue, basic fire-fighting and on basic life support shall be given to members of SHG's.
- 7. Provide immediate livelihood support, compensation and rolling out of scheme for women affected by disaster through SHG.
- 8. Provision of safety and privacy aspects for women in relief camps.
- 9. Local bodies (Corporations, Municipality and Grampanchayat) shall design projects on disaster risk reduction which caters to the need of women, children, elderly and PwD.

#### **Valediction**

The valedictory session was facilitated by Mr. Hari Balaji V R, Team Leader, CARE India Kerala. He made a brief presentation on 2018 Kerala Floods activities implemented by CARE India in association with various stakeholders which include government and others. Subsequently Mr. Hari Balaji proceeded to have feedback of MITRA conference on Inclusive DRM. Ms. Vyshnavi V K from Pallium India felt the conference worth, because key departments working on the thematic areas (PwD, Elderly, Children and Women) of the conference and NGO's participated in the event which would help to build collaboration in the coming days. Experience shared by the disaster survivors (thematic wise) and the video documentary made the conference enriched to the understanding of the context of the conference. Ms. Kavitha P from NIMHANS also hailed the collaborative approach of the conference with different line departments and stakeholders along with the survivors sharing their experience which has helped to find out the gaps. Ms. Kavitha P felt

it to be a unique from usual conference by its mode of designing, formulation, three levels of thematic presentation and experience sharing by disaster survivors. She pointed out it would have been better, if two more categories were included in the MITRA conference on inclusive DRM – the tribal community and the farmers. Finally Mr. Sony Kutty George from UNICEF ensured that their organization is ready to provide and extend all possible services to the government of Kerala and others in the area they are working. Mr. Balaji from Care extended gratitude for the people who took part and contributed to the conference with their knowledge.

Before falling of the curtain, Mr. Hari Balaji VR of CARE India delivered vote of thanks and expressed sincere gratitude and thanks to the guests, chairs and to all participants represented various departments, NGO's and university students who took part and contributed to the conference with their knowledge. He thanked Kerala State Disaster Management Authority (KSDMA) for the support and guidance extended to CARE India without which MITRA couldn't have been successfully organized in such a productive manner. He also expressed his gratitude to the consultant organization - Foundation for Development Action (FDA) for meticulous planning and well-crafted conference which made it more prolific.



# **Conference Participants**

A total of 68 person representing various government departments, agencies, non-governmental organizations, social work students from universities and disaster survivors has attended the MITRA Conference on Inclusive Disaster Risk Management. Sector wise detail of participants are as follows.



SI. No	Name of participant	Designation	Department / Office	Email ID	Contact Number
Ξ		Participants	from Government	departments	
1	Harisuthan Pillai K	JS	Directorate of Public Instruction	agniprs@gmail.com	9947774960
2	B Ajith Kumar	Snr. Superintendent	Directorate of Public Instruction	mavelikaraajith@gmail.com	9946953111
3	Dr. Tinsy Ramakrishna	CDPO, ICDS	Department of Women and Child Development	tinsuvs@gmail.com	9746202086
4	Sethulekshmi Pillai S	Snr. Clerk	Department of Women and Child Development	sethusjd@gmail.com	9846256488
5	Salini K J	N/A	General Education department	salinisect@gmail.com	9446012443
6	Hema V	Section officer	General Education department	jaanv9574@rediff mail.com	9495513175

SI. No	Name of participant	Designation	Department / Office	Email ID	Contact Number
7	Dr. George Zachariah	N/A	Dept. Physical Medical Rehabilitation (PMR), Medical college	zachisgeorge@gmail.com	9442603090
8	Dr. Vidya G	N/A	Dept. Physical Medical Rehabilitation (PMR), Medical college	dr.vidya.g.vg@gmail.com	9037278728
9	Dr. Anil V	N/A	Department of Health	anilvgovind@gmail.com	9846024483
10	John V Samuel	Deputy Collector (DM)	District Disaster Management Authority	johnrevenue@gmail.com	8547610025
11	Lalimole V S	Superintendent	District Disaster Management Authority	ddmatvm@gmail.com	8547934773
12	Devi Balakrishnan	State Assistant Programme Manager – (Orgn)	Kudumbashree	balakrishnandevi@gmail.com	7907194232
13	Anishkumar M S	Senior Consultant	Kudumbashree	kudumbashreetr@gmail.com	9447138450
14	Jogy A S	District fire Officer, Ernakulam	Kerala Fire And Rescue services	adoekm.frs@kerala.gov.in	9497920115
15	Abdul Rasheed U	District Fire Officer, TVM	Kerala Fire And Rescue services	rasheedfire@gmail.com	9497920110
16	Anju S G	Junior Superintendent	Directorate of Social Justice	anjusgnair@gmail.com	8122596978
17	Soja Oliver	AO	NISH	sojaol@gmail.com	9048920238
18	Prasanth R L	Lecturer	NISH	prasanth@nish.ac.in	9446750983
19	Dr. Shekhar Kuriakose	Member Secretary	Kerala State Disaster Management Authority	seoc.gok@gmail.com	9400202927
20	Parvathy S	Hazard and Risk Analyst	Kerala State Disaster Management Authority	parvathy.utradom@gamil.com	9895201684
21	Siji M Thakachan	Section Officer	Kerala State Disaster Management Authority	keralasdma@gmail.com	9447759655

SI. No	Name of participant	Designation	Department / Office	Email ID	Contact Number
22	Joe John George	State Project Officer, UNDP, KSDMA	Kerala State Disaster Management Authority	mailstojoe@gmail.com	9447138450
23	Pradeep G S	Hazard Analyst	Kerala State Disaster Management Authority	pradeepgsgeo@gmail.com	9895817557
24	Kavitha P	Consultant UNICEF – NIMHANS WDC, SCERT	Department of PSW, NIMHANS	kavimanoj@gmail.com	9341435109
	Pai	rticipants fron	n Non-Governmen	tal Organizations	
25	Vyshnavi V K	Project Officer	Pallium India	vyshnanvi@palliumidia.org	7907425026
26	Dr. Raja Gopal	Director	Pallium India	chairman@palliumindia.org	9387296889
27	Abin S Madathissery	Project Coordinator	Malankara Social Service Society	abins91221@gmail.com	9526461323
28	Dr. Raghi Bhaskar	Project Team Leader	Malankara Social Service Society	raghibhaskar@gmail.com	9447554573
29	Ajin John J C	Project Coordinator	Malankara Social Service Society	johnyajin94@gmail.com	9048696663
30	John E Daniell	Dy. Director (Programme)	HelpAge India	john.daniell@helpageindia.org	9446135227
31	Bincy Baby	Volunteer	HelpAge India	bincykmartin@gmail.com	7510829590
32	Biju Mathew	Director	HelpAge India	biju.mathew@helpageindia.org	9447209678
33	Shibin Antony	Advocacy officer	HelpAge India	shibin.antony@gmail.com	9809435773
34	Lipin P Paul	N/A	Shreyas (NGO)	lipin141@gmail.com	9747692235
35	Hari Balaji V R	Team leader- Kerala	Care India	harib@cissd.in	8939037925
36	Mona Mahendru	DM Coordinator	Care India	mmahendru@careindia.org	8500010246
37	Mohammed Wasi Alam	Acting Head, Disaster Management Unit	Care India	walam@careindia.org	8743013773
38	Dr. Shibu Augustine	Project Officer	Care India	shibupathickallil@gmail.com	9048691832

SI. No	Name of participant	Designation	Department / Office	Email ID	Contact Number
39	Madhusoodran KV	Project Officer	Care India	madhumsw007@gmail.com	9497519314
40	S Rajandran	Finance Officer	Care India	rajendran.cissd.in	7010191523
41	Shyamala Ashok	State Programme Representative	Care India	shyamal@careindia.org	7708064030
42	Sajeevan C	Staff	Kerala Federation For Blind (KFB)	N/A	N/A
43	Abdul Gafoor	Staff	Ideal Relief Wing	idealreliefwing@mail.com	9495329333
44	Sabith Umer	Secretary	Thanal	thanalppl@gmail.com	9947922791
45	Annie George	State Coordinator	UNDP	annie@bedeoe@gmail.com	9442100074
46	Dr. Uma Vasudevan	Hazard Analyst	UNDP	unneema@gmail.com	9496370435
47	Midhun VL	Hazard Analyst	UNDP	midhunl@gmail.com	9995050932
48	Sony Kutty George	Child Protection Specialist, DRR Office	UNICEF, Hyderabad	sogeorge@unicef.org	9550050144
49	Ramesh Krishnan	Ex. Director	Foundation for Development Action (FDA)	fdaction@gmail.com	7907680589
50	Sibi A	Senior Project Coordinator	Foundation for Development Action (FDA)	sibimatha@gmail.com	9447865209
51	Ginu Mathew	Project Coordinator	Foundation for Development Action (FDA)	g.numathew@gmail.com	9037355598
52	Bristin C Baby	Case worker	Foundation for Development Action (FDA)	bristinsefaniya@gmail.com	9447865209
53	Divya Chandran U	Project Coordinator	Foundation for Development Action (FDA)	divbavan@gmail.com	8593003776
54	Ann Mary George	Counsellor	Foundation for Development Action (FDA)	annmary.grg@gmail.com	9947910839

SI. No	Name of participant	Designation	Department / Office	Email ID	Contact Number		
	Participants from University and Colleges						
55	Dr. Baburaj	N/A	IUCDS, MG university	baburjyoe@yhaoo.in	9495213248		
56	Dr. Hena N N	Lecturer	IUCDS, MG university	nnhena@gmail.com	9846735917		
57	Elna Joseph	Student	Loyola college of Social Sciences	elnajosephbenny@gmail.com	9526685949		
58	Sajin M	Student	Loyola college of Social Sciences	sajinm93@gmail.com	8547276222		
59	Sruthi V	Student	Loyola college of Social Sciences	sruthi2014v@gmail.com	8089266557		
60	Sreelekshmi Sreekumar	Student	Department of Sociology (MSW), Karivattom Campus	sreenccm@gmail.com	9645600547		
61	Janshida A	Student	Department of Sociology (MSW), Karivattom Campus	janshizmanar@gmail.com	9496940662		
62	Arif Salah	Student	Department of Sociology(MSW), Karivattom Campus	arifsalah477@gmail.com	9496698293		
	Participants who come for the experience sharing						
63	Annamma Disaster Survivor Vadakkaneth Mannil House, Arattupuzha PO, Aranmula, Pathanamthitta				9961370593		
64	Shebby Boby	Disaster Survivor	Thudayizhathil House, Elikkadu colony, Kurichimuttom PO, Edayaramula, Aranmula, Pathanamthitta		9061138705		
65	Dominic P	Disaster Survivor	Payyappilli House, Madapattu, Parapahtu Road, Eloor, Kalamaserry, Ernakulam		9497564687		
66	Rajamma Divakaran	Disaster Survivor	-Do-		8304022844		
67	Maniyamma Chandran	Disaster Survivor	Chirayil House, Keerithodu PO, Keerithodu, Idukki		9539522360		
68	Rosely	Disaster Survivor	-Do-	9947474687			

# PROCESS DOCUMENTATION

# **Engagement of Consultancy Firm**

CARE India in consultation with Kerala State Disaster Management Authority has selected Foundation for Development Action (FDA), an NGO based at Pathanamthitta, having rich experience in implementing Disaster Risk Reduction programmes to perform as consultancy firm for organizing the entire activities of 'MITRA' conference on Inclusive Disaster Risk Management from planning to its execution. The organization has started working for organizing the conference from 6th of March 2019.

# First joint meeting with KSDMA, CARE India and FDA

On 6<sup>th</sup> March a meeting was held at the office Kerala State Disaster Management Authority, Thiruvananthapuram to discuss about 'Mitra' Conference on Inclusive Disaster Risk Management. Dr. Sekhar L Kuriakose, Member Secretary Kerala State Disaster Management Authority; Mr. Joe John George, SPO UNDP-KSDMA; Ms. Shyamala Ashok, State Programme Representative, CARE India; Mr. Hari Balaji VR, Team leader- CARE India Kerala; Mr. Ramesh Krishna, Executive Director and Ms. Divya Chandran U, Project Coordinator, Foundation for Development Action attended the meeting. CARE India representatives introduced the organization before the Member Secretary KSDMA and discussed on the concept of 'MITRA'.



The broad objectives of the workshop is to pull together national and regional experts who has worked in 2018 Kerala Floods to share their ideas and best practices before the conference participants and thereby to find a way forward to deliberately include vulnerable sections of the community like; Persons with Disability, Elderly, Children and Women in disaster risk reduction programme planning and execution.

# Major outcomes of the meeting;

- MITRA to be organized on 20<sup>th</sup> March 2019 at Mascot Hotel Thiruvananthapuram.
- Draft conference agenda agreed.
- ❖ Agreed on thematic areas of the MITRA.
- Mobilization of best speakers (both national and regional experts).
- ❖ Development of concept note of MITRA.
- Development of brochure of MITRA.
- Finalised list of departments and organizations who shall attend the conference.
- Photo Exhibition by CARE India at the conference venue.
- Follow green protocol promoted by the Government of Kerala and,
- Provide ecofriendly stationeries to the conference participants.

# Finalizing conference venue

As per the suggestion of KSDMA, Mascot Hotel situated at PMG Junction, Thiruvananthapuram was selected as venue for organizing the MITRA - Conference on Inclusive Disaster Risk Management. Mascot Hotel is functioning under the Department of Tourism, Government of Kerala and almost all government supported events are being organized at Mascot Hotel.

#### **Development of agenda**

Consulting organization – Foundation for Development Action prepared draft agenda of the conference and was shared with Kerala State Disaster Management Authority as well as with CARE India and was finalised after obtaining comments from both the parties.

# Mobilization of key speakers

MITRA - Conference on Inclusive Disaster Risk Management has four thematic areas namely; 1) Persons with Disability; 2) Elderly; 3) Children and the last 4) Women. As per the planning session held with KSDMA and CARE India on 6<sup>th</sup> March 2019, each session shall have a total of three speakers — the first speaker shall be a national expert who could speak from the national perspective on a particular thematic area, followed by regional expert who has the experience of working in 2018 Kerala Floods and a disaster survivor sharing her/his flood experiences from inclusion point of view.

FDA in consultation with KSDMA; UNDP; UNICEF; CARE India and Kudumbashree - State Poverty Alleviation Department has identified key speakers for the conference. Disaster survivors of theme Women and Children was identified by FDA, whereas survivors representing PwD and Elderly was identified with support from HelpAge India and Thanal Palliative and Paraplegic Care Society respectively.

# Preparation of concept note of MITRA

Concept note of 'MITRA' - Conference on Inclusive Disaster Risk Management was prepared by the consulting organization – FDA and was finalised after including comments and feedbacks from both KSDMA and CARE India.

# **Development of Brochure of MITRA**

Brochure of 'MITRA' - Conference on Inclusive Disaster Risk Management was developed by the consulting organization – FDA and was finalised after including the comments and feedbacks from the experts working in KSDMA and CARE India.

# Development of audio visuals of disaster survivors

As per the requirements of CARE India, audio-visuals of four categories of disaster survivors namely; PwD, Elderly, Children and Women was made for screening at conference venue on 20-March-2019. For making the video documentaries of disaster survivors, SURAG Creations - a Thiruvananthapuram based firm was hired. The documentary team had cameramen, assistant cameramen, drone technician, interviewer and a team leader. The team visited the homes of the disaster survivor at Idukki, Ernakulam and Pathanamthitta for the shoot. It took two days for the team complete the shooting and post production was done at studio which took another 4-5 days. The final product was screened on the conference day and was appreciated by the audience with regard to its content and design.

# Listing of participant departments, NGO's and others

In consultation with KSDMA, the consulting organization – FDA prepared list of the conference participants. Deliberate attempt was taken to include and invite line departments and NGO's whose area of work corresponds to the thematic area of 'MITRA' - Conference on Inclusive Disaster Risk Management i.e.; Persons with Disability, Elderly, Children and Women. Social work students from colleges and universities were also invited to be part of the event. Around 65 participants were invited for the conference. Department/NGO/colleges wise number of participants are mentioned in the table below.

SI. No	Name of Participating Governmental Department	Expected Nos. of participants		
Government Departments & Agencies				
1	Kerala State Disaster Management Authority (KSDMA)	6		
2	Revenue and Disaster Management	3		
3	Education Department- Directorate of public education (DPI) 2			
4	General education department 2			
5	IUCDS – MG universities 2			
6	Kudumbashree	2		
7	Department of Women and Children Development (DWCD)	2		
8	Social Justice Department (SJD)	2		
9	District Disaster Management Authority (DDMA)	2		
10	Kerala Social Security Mission	2		
11	Health Department	2		
12	Physical Medical Rehabilitation (PMR), Medical college, TVM	2		
13	National Institute of Speech and Hearing (NISH)	2		
	INGO's & NGO's			
14	Care India	5		
15	UNDP	4		
16	UNICEF	1		
17	Sphere India	2		
18	Help page	1		
19	Kerala Federation for the build (KFB)	3		
20	Thanal Palliative and Paraplegic society	3		
21	Foundation For Development Action (FDA)	5		
22	Malankara Social Service (MSSS)	2		
23	Ideal Relief Wing	2		
	Social Work Colleges & Universities			
24	Loyola College of Social Sciences (LCSS), Thiruvananthapuram	3		
25	Department of Social Work, Kerala University, Thiruvananthapuram	3		
	Total Expected Participants	65		

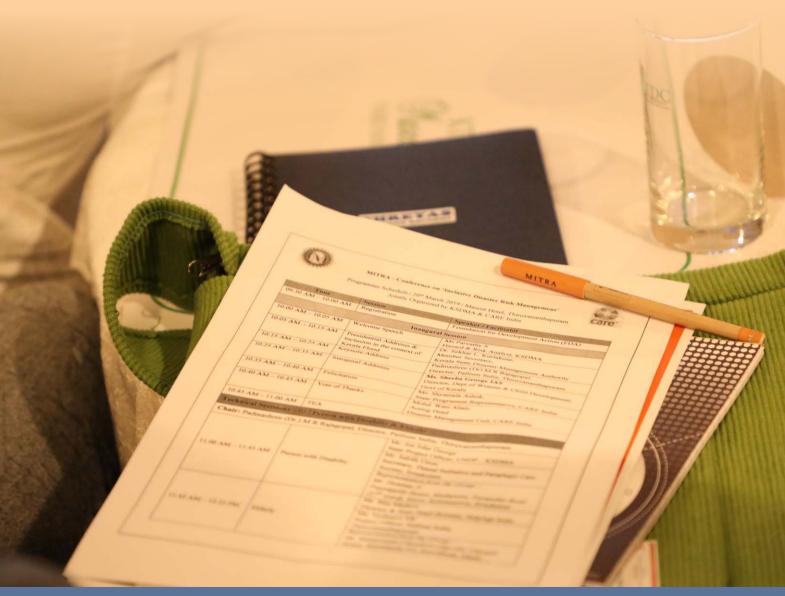
# Thematic Area – Children

Following are the departments and agencies visited and invited for participating in 'MITRA' Conference on Inclusive Disaster Risk Management.

SI. No	Date of Visits	Name of the Department/s
1	12/03/2019	Department of Women and Child Development, Poojapura
2	13/03/2019	Department of Women and Child Development, Poojapura
3	13/03/2019	Kudumbashree, TRIDA Centre
4	14/03/2019	Social Justice Department, Vikas Bhavan
5	14/03/2019	Department of Fire and Safety, Chengalchulah
6	14/03/2019	Social Security Mission, Poojapura
7	15/03/2019	Directorate of Public Instruction, Jagathy
8	15/03/2019	Department of General Education, Jagathy
9	16/03/2019	National Institute of Speech and Hearing (NISH), Aakulam
10	16/03/2019	Physical and medical rehabilitation, Medical College, Ulloor
11	16/03/2019	Directorate of Health Services, General Hospital Rd. Jn.
12	16/03/2019	Kerala State Handicapped persons Welfare cooperation, Poojapura
13	16/03/2019	District Disaster Management Authority, Kudappanakunnu
14	19/03/2019	Department of Women and Child Development, Poojapura
15	From 6/03/2019 to	Kerala State Disaster Management Authority, Vellayambalam
	20/03/2019 (15 Days)	



# **Annexures**







# **Concept Note**

# "MITRA" - One day conference on Inclusive Disaster Risk Management

Jointly Organized by Kerala State Disaster Management Authority & Care India
Date: 20th March, 2019 | Venue: Mascot Hotel, Thiruvananthapuram

# Introduction

Disaster risks are highly significant due to increased vulnerabilities and less capacities to cope with natural and anthropogenic hazards. In the last two decades, 218 million people each year were affected by disasters at an annual cost to the global economy that now exceeds \$ 300 billion (world Humanitarian summit, 2016). Disasters have a huge impact on human, infrastructure, lives and livelihoods. They can result from natural as well as human induced factors which can lead to displacement of the larger population. Through inclusive Disaster Risk Management programmes, incorporated in the human development plans and poverty reduction programmes, the risks can be reduced and communities' resilience to disasters can be strengthened.

Among the poor, vulnerable groups like; women & children, people with disabilities and aged experience additional vulnerability to hazards and the disaster managers need to reduce those vulnerabilities. Although gender disaggregated data on disaster mortality and damage are seldom available, case studies demonstrate that Women and Children suffer more in disasters and their specific needs are mostly ignored. In Indian Ocean Tsunami, more women than men died with estimates of between 60-70 percent of the death were Women and Children. The socially prescribed roles make women more vulnerable to hazards. The dropout rates of girls in school increases and violence against women soars under the stress of disasters. A sizable number of women and girls are trafficked or driven to prostitution after disasters. Children are more vulnerable as they depend on their family members for survival.

# **Background**

The state of Kerala experienced heavy rainfall between 1st June and 18th August 2018 which resulted in worst ever flood in its history since 1924. The state received cumulative rainfall that was 42% in excess of the normal average. The torrential rain triggered several landslides and forced the release of excess water from most of the dams across the state. According to the government, 1260 villages across 14 districts were affected and the Government has declared 7 districts worst affected.

The Government of Kerala, Kerala State Disaster Management Authority with technical support from UN organizations has brought out PDNA (Post Disaster Need Assessment) Report, October 2018. The report says, the devastating floods and landslides affected 5.4 million people, displaced 1.4 million people and took the lives of 433 persons. PDNA highlights that the floods and landslides have affected women & girls, Persons with Disabilities, elderly population, transgender persons,

migrant workers, fisherfolk, scheduled tribe and scheduled caste population disproportionately. The report says over 8600 PwDs were affected by the disaster. Lack of proper EWS mechanism, evacuation and rescue plan made them more vulnerable compounded with their heavy wheelchairs, absence of disabled friendly toilets at camps etc. Elderly who were living alone, mostly elderly women were hard hit by the disaster. During evacuation, few elderly resisted from moving out fearing loss of their life. Few of them stayed in relief camps and some did not have a home to go back, as their homes were completely destroyed. Women and girls across social groups experienced gender-based disadvantaged and discrimination have exacerbated.

MITRA - Conference on "Inclusive" Disaster Risk Management (DRM) will provide a forum where experts who has worked at national level and experts who have the flavor of working in 2018 Kerala floods will share their rich experiences, present case studies & best practices which will help the key participating departments and NGO's to carry back lessons learnt and make a road to deliberatively include vulnerable groups in disaster risk reduction programme and planning. The recommendations thus generated in the conference will be submitted to the Government of Kerala for giving feeder points to Nava Keralam – Rebuild Kerala Mission with special focus on four sectors – PwD, Elderly Care, Women and Children.

# Objectives of the conference

- To strengthen the technical knowhow of key government departments and NGO's to plan and implement inclusive disaster risk reduction programme in all phases of disaster management cycle.
- ❖To celebrate the best practices towards inclusion in the Kerala Floods 2018 and also to identify gaps towards inclusion by brainstorming and discussion, so that the gaps may be minimized.
- ❖ To facilitate establishment of a better & safer state for the vulnerable groups.

# Venue

Harmony Hall, Mascot Hotel, PMG, Thiruvananthapuram

### Date of the conference

20th March 2019, Wednesday

## **Expected participants**

Government departments / agencies / Institutions, UN Agenceis, NGO's and Universities.

A CONSULTATION BETWEEN CROSS-SECTIONAL COMMUNITIES
ON INCLUSIVE DISASTER RISK MANAGEMENT



**'MITRA'** 

Conference on Inclusive Disaster Risk Management







20th March, 2019

Mascot Hotel, Thiruvananthapuram



Jointly organized by
Kerala State Disaster Management Authority &
CARE India



### **Background**

International framework such as Sendai Framework for Disaster Risk Reduction 2015–2030 and The 2030 Sustainable Development Goals focuses changes in policy, legislation and financing for Disaster Risk Reduction and sustainable development. Priority No. 04 of Sendai Framework – Enhancing disaster preparedness for effective response and to "BUILD BACK BETTER" in recovery, rehabilitation and reconstruction have deliberate and concerted effort to include Persons with Disability, Elderly, Women, Children and Indigenous people in designing of disaster risk reduction policies, plan and programmes. However the mainstreaming of these vulnerable communities in disaster risk reduction still requires greater priority at all levels from local to global.



### **MITRA**

Conference on Inclusive Disaster Risk Management, christened MITRA, will open up perspectives on inclusion in disaster risk management for government departments, disaster management practitioners, NGO's and academic institutions to share and exchange resourceful information by presenting best practices, case studies, identifying gaps and suggesting recommendations for Inclusive Disaster Risk Management for the state of Kerala. Along with this, survivors of the recent floods & landslides will also share their experiences.

### **Conference Objectives**

To strengthen the technical knowhow of key government departments and NGO's to plan and implement inclusive disaster risk reduction programme in all phases of disaster management cycle.

To identify the best practices towards inclusion in the Kerala Floods 2018 and also to identify gaps towards inclusion.

To facilitate establishment of a better & safer state for the vulnerable groups.

### **Participants**

Government Departments

NGO's

Universities / Colleges

#### **Expected Outcome**

Capacities of key government departments and NGO's strengthened for inclusive disaster risk reduction programme.

Sector wise recommendations for the Government of Kerala evolved to give more impetus in shaping of Nava Keralam mission.

Evolving of a new and enlightened group of officials to ensure inclusion in government and non-governmental sectors.

Milra

#### **PERSONS WITH DISABILITIES**

KERALA FLOODS, 2018

Lives of over 8600 people living with disabilities got affected (PDNA).

About 40,000 assistive devices were damaged/lost due to floods (SJD, GoK).

Unique initiative was undertaken to rescue persons with disabilities & the elderly in Ernakulam district.

15 - 20% of the world population are persons with disabilities. (WHO, 2011)

80% of Persons with Disabilities live in developing countries, according to the UN Development Programme. (WHO)

The World Bank estimates that 20% of the world's poorest people have some kind of disability, and tend to be regarded in their own communities as the most disadvantaged. (World Bank)

HAITI EARTHQUAKE, 2010

Approximately 200,000 people are expected to live with long-term disability as a result of their injuries.

HURRICANE KATRINA, 2004

21.3 - 27.1 % of the affected population had a disability.

INDIAN OCEAN TSUNAMI, 2004

There was an estimated 20% increase in the number of persons with disabilities in affected areas.

ODISHA, 1999 SUPER CYCLONE

More than 80% of PwDs faced food shortages post-disaster, due to lack of proper information on the locations of relief supplies.

BANGLADESH CYCLONE

55% of PwDs (women and girls) avoided shelters because of lack of accessibility and safety.

BANGLADESH FLOODING

At least 96% of PwDs interviewed reported facing difficulties in accessing safe drinking water and particularly latrines during floods.

#### **ELDERLY**

KERALA FLOODS, 2018

20% of the fatalities in the floods was of the elderly (PDNA)

The World Health Organization estimates that the world's 580 million elderly people (aged 60 years and more) include around 355 million in developing countries.

By 2050, one in every five Americans will be 65 years or older. (American Psychological Association)

JAPAN TSUNAMI 2011

56% who died were aged over 65 years. (HelpAge International)

GREAT EAST JAPAN EARTHQUAKE 2011

56% of those who died and 89% of post-disaster related deaths, were people aged 65 years and above.

**HURRICANE KARTINA 2005** 

75% who died were aged over 60 years. (HelpAge International)

IN DARFUR

29% of 4,000 elderly people surveyed looked after orphans - most caring for two or more children.

Milra

#### **CHILDREN**

KERALA FLOODS, 2018

15% (67) children lost lives to floods and landslides

Children represent 50-60 % of those affected by disaster. (UNICEF)

HAITI, EARTHQUAKE, 2010

4,992 schools (23% of the total) were affected. Of these, 3,978 (80%) were damaged or destroyed, and were closed after the earthquake.

CHINA, SICHUAN EARTHQUAKE, 2008 7,000 classrooms were destroyed.

KUMBAKONAM FIRE TRAGEDY, 2004 (MHA GOI - SCHOOL SAFETY HANDBOOK) 93 children all below 11 years of age were killed.

SRI LANKA POST TSUNAMI 2004

Mortality among children living in temporary camps was 3 - 4 times greater than among young adults.

BHUJ EARTHQUAKE 2001 (MHA GOI - SCHOOL SAFETY HANDBOOK)

971 students and 31 teachers died; 300 children marching in the Republic day procession in a narrow lane were killed when the building collapsed in the narrow streets from both sides.

DABWALI FIRE TRAGEDY 1995 (MHA GOI - SCHOOL SAFETY HANDBOOK)

425 people many of them school children died when they tried to escape the fire during a school prize giving ceremony.

#### **WOMEN**

KERALA FLOODS, 2018

23% (98) of women lost lives to floods and landslides

HAITI EARTHQUAKE, 2010

242 cases of rape against women were reported in the relief camps in the first 150 days following the earthquakes.

AHMEDABAD, HEATWAVE, 2010

Of the death recorded, 881 were women and 287 were men.

59% of women died in BANGLADESH CYCLONE 1991

At MIAMI, UNITED STATES, HURRICANE ANDREW (1992), Spousal abuse calls to the local community helpline increased by 50%.

55% of women died in INDIA EARTHQUAKE 1993.

57% of women died in JAPAN EARTHQUAKE 1995.

77% of women died in NORTH ACHE, INDONESIA TSUNAMI 2004.



#### **Kerala State Disaster Management Authority**

Observatory Hills, Vikas Bhavan PO Thiruvananthapuram - 33 Tel 0471 - 2331345, 2331645

Website: www.sdma.kerala.gov.in



#### **CARE India**

Vintage Home, Colony Road, Munnar 685612, Kerala, India.

Ph: 8939037925

harib@cissd.in | www.careindia.org

Milra







- www.fdaction.org
- www.fb.com/fdaction
- www.instagram.com/fdaction
- www.twitter.com/fdaction
- 7907680589 8129207788
- © 0472 2581014
- M fdaction@gmail.com