2013



Assam State Disaster Management Authority & Doctors For You

Community Based Disaster Preparedness

Course Book

PREFACE

Our mission towards developing safer communities......

Doctors for You (DFY), is a Humanitarian and Capacity Building Organization formed by a team of highly experienced and specialized doctors. DFY's focus is to address the most immediate and concerning problems faced by disaster affected populations viz. healthcare, hygiene, disaster response and emergency medical aid in the most affected developing countries there by touching millions of lives.

Natural hazards are inevitable. Time and again, we witness the horrible impact of calamities. The last decade showed a tremendous increase in the annual occurrence of natural hazards. These hazards increasingly have had an impact on the livelihoods of vulnerable people, more specifically on their economic situation, their food security and health conditions.

It is in this context, Doctors for You has been dynamically engage in disaster preparedness and response operations in-order to minimize or address issues during calamities. We also endeavour to develop safer communities resilient towards disasters by strengthening institutional/individual capacities, building partnerships, identifying the disaster risk management needs and mainstreaming risk reduction measures in our projects and programs.

Dr. Ravikant Singh

President, Doctors for You

INTRODUCTION

Community Based Disaster Preparedness is a process of bringing people together within the same community to enable them to collectively address a common disaster risk and to collectively pursue common disaster preparedness.

Community Based Disaster Preparedness is a process that mobilizes a group of people in a systematic way towards achieving a safe and resilient community/group. Its end view is a dynamic community that equalizes power relations, binds the group cohesively in the process of making decisions, deals with conflicts, resolves issues, and manages individual and collective tasks through addressing and bouncing back from hazard events.

The Community based Disaster Preparedness course provides an opportunity for field practitioners to learn essential skills and knowledge in community based disaster preparedness to address implementation challenges in a systematic manner. The participants will acquire tools and obtain knowledge on "how to" design and implement programs for reducing disaster risks and vulnerability and building community capacity.

Through exercises and simulations participants practice risk assessment and risk management planning, the participants will have a chance to learn about globally acknowledged programs and projects on community based disaster preparedness from leaders of these initiatives, with focus on examples from all over India.

The course tackles the issues in disaster preparedness from a developmental perspective, discusses the issues and problems concerning sustainability, replication/ adaptation of disaster preparedness practice and integration of risk management plans with government and non-government development plans.

Major Components of the training:

- The training is strategically important: its approach has resulted in communities becoming resilient and self-reliant, so that development initiatives are safe, secure and sustainable through time.
- It creates a sustainable intra-community working relationship, geared towards building group and community cohesiveness in achieving the task of disaster preparedness.
- People's capacity and survivability are enhanced and at the same time, dependence from external support is gradually terminated.

TRAINING CURRICULUM

The Community Based Disaster Preparedness course provides the opportunity to learn essential knowledge and skills in disaster and to address implementation challenges in a systematic manner. The participants will be provided with practical tools for design and implementation of programs for disaster preparedness through community capacity to promote a culture of safety.

Traini	Page Number	
1.	Terms and Concepts related to DRR	5
2.	Disaster scenario in Assam	10
3.	Concept of CBDP & its process	13
4.	Personal and safety measures during disaster	15
5.	Hazard prevention & mitigation- Process & steps by community people	19
6.	Importance of Community participation in CBDP	20
7.	Characteristics of a Safer, Resilient Community	22
8.	Conduct participatory Hazard, Vulnerability and Capacity assessment	25
9.	Community Disaster Preparedness- Process & Steps by NGO's	30
10	. Extrication & Evacuation	33
11	. WASH	39
12	. Psychological first aid	44

1. DISASTER MANAGEMENT TERMINOLOGIES

Learning Objectives:

- Overview of disasters.
- To understand the different phases of disaster management cycle.
- To understand the type of disaster and resulting public health emergencies.

Disaster Terminology

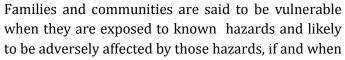
In order to understand the concept of disaster and disaster risk, it is important to have clear understanding on the following disaster terms and its definition:

a) <u>Hazard</u>: A hazard is an unusual event that has a potential to threaten people's lives, their property and livelihoods. Some hazards occur naturally are of natural origin, like, earthquake, floods, landslides, volcanic eruptions etc. Some hazards are caused by humans, like, environmental protection,



deforestation, ethnic conflicts, war etc. However, a hazard by itself is not necessarily a disaster. A hazard only becomes a disaster when it adversely affects people lives, cause damage to property and or peoples livelihood.

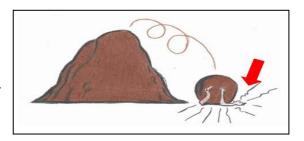
b) **Vulnerability:** Vulnerability is the extent or degree to which an individual, community, structure, service or geographic area is likely to be damaged or disrupted by the impact of a particular disaster.





they occur. But these vulnerable conditions are not for everyone. A family living on the riverbanks for example, is vulnerable to specific hazards (in this case floods) compare to a family whose house is located on the higher ground that cannot be reached by floodwaters.

c) <u>Disaster:</u> A disaster can be defined as the serious disruption of the functioning of a community, causing widespread human, material or environmental losses, which exceed the ability of the effected people to cope using their own resources.

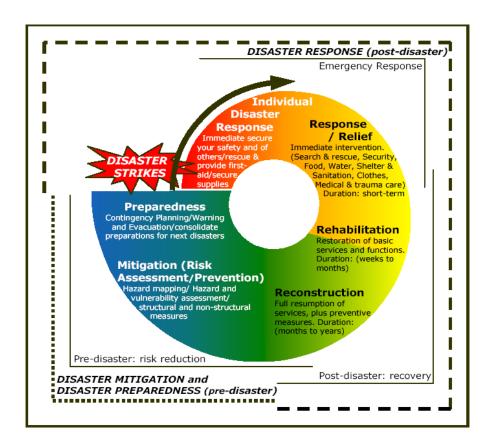


d) **Emergency:** Risk that can be managed using existing resources and support in a given condition and situation.

- e) **Response:** Actions taken immediately following the impact of a disaster when exceptional measures are required to meet the basic needs of the survivors
- f) **Rehabilitation:** Actions taken in the aftermath of a disaster to:
 - Assist victims to repair their dwellings;
 - Re-establish essential services;
 - Revive key economic and social activities
- g) **Reconstruction:** Permanent measures to repair or replace damaged dwellings and infrastructure and to set the economy back on course.
- h) **<u>Development</u>**: Sustained efforts intended to improve or maintain the social and economic wellbeing of a community.
- i) <u>Disaster Preparedness:</u> Ability to predict, respond to and cope with the effect of a disaster.
- j) <u>Disaster mitigation:</u> Measures taken in advance of a disaster aimed at reducing its impact on society and the environment.
- k) **Prevention:** Activities designed to provide permanent protection from disasters.
- Disaster Risk Reduction: It is a conceptual framework to include comprehensive set of activities & elements so as to minimize vulnerabilities and disaster risks throughout a society, to avoid (prevention) or to limit (mitigation and preparedness) the adverse impacts of hazards, within the broad context of sustainable development.
- m) <u>Disaster Risk Management:</u> The systematic process of using administrative decisions, organization, operational skills and capacities to implement policies, strategies and coping capacities of the society and communities to lessen the impacts of natural hazards and related environmental and technological disasters.
- n) **Resilience:** The ability of individuals, communities, organizations, or countries exposed to disasters and crises and underlying vulnerabilities to:
 - Anticipate;
 - Reduce the impact of;
 - Cope with; and
 - Recover from the effects of adversity without compromising their long term prospects
- o) **Contingency planning:** Contingency planning is a tool to anticipate and solve problems that typically arise during humanitarian response.

Disaster Management Cycle

Disaster Management can be defined as the body of policy and administrative decision and operational activities which pertains to the various stages of disaster at all levels. Broadly disaster management can be divided into pre-disaster and post – disaster contexts. The two context encompass various activities under its umbrella which aims at prevention and mitigation, as well as response.



Disaster management consist of different phases. The time period for each phase may depend on the type and severity of the disaster.

- **Disaster phase** The phase during which the event of the disaster takes place. This phase is characterized by profound damage to human society. This damage / loss may be that of human life, loss of property, loss of environment, loss of health or anything else. In this phase, the population is taken by profound shock.
- Rescue phase This is the period that immediately follows the occurrence of the disaster. In a way, all individuals respond to the disaster, but in their own ways. Almost everyone is willing to help. The first important step during first 48 hours after a disaster is to save maximum number of lives. Food, shelter, clothing can be taken care of in later stage. The immediate need is to have search and rescue teams in place along-with emergency medical assistance which can save lives.

Disaster Management must stress on **immediate need assessment** after a disaster. This need assessment will be important for government organizations, NGOs as well as international bodies. The accuracy of need assessment will determine the efficiency of management.

- Relief Phase During relief phase, there should be a need assessment of survivors and based upon that immediate relief like food, clothing and shelter must be provided. Depending on the initial needs assessment, relief is provided to the survivors. The relief must be adequate and appropriate to the culture of the affected community. The relief is generally provided by external agencies (NGOS, INGOs) and Government resources. Immediate medical need includes immediate medical assistance, safe drinking water, nutritious food, temporary shelters, food, clothing, information on missing relatives, psycho-social assistance to trauma victims, special care to children, elderly and physically challenged special attention to pregnant and lactating women.
- Recovery phase When the immediate needs of the population are met, when all medical help has arrived and people have settled from the hustle bustle of the event, they begin to enter the next phase, the recovery phase which is the most significant, in terms of long term outcome. It is during this time that the victims actually realize the impact of disaster. It is now that they perceive the meaning of the loss that they have suffered. They are often housed in a camp or in some place which is often not their house, along with other victims. When the victims have recovered from the trauma both physically and mentally, they realize the need to return back to normal routine. That is, to pre-disaster life. During this phase, they need resources and facilities so as to enable them to return back to their own homes, pursue their occupation, so that they can sustain their life on their own, as the help from the government and other non-governmental organizations is bound to taper in due course. Thus, they are provided with a whole new environment, adequate enough to pursue a normal or at least near normal life. This is called rehabilitation.

During **rehabilitation** phase, adequate care is taken to follow all safety measure to prevent and minimize future impact of hazard. Also, the sustainable development approach is kept in mind during the whole process of rehabilitating and restructuring the community. During this phase, earthquake resistant houses are built, tsunami preventions are taken while building houses, cyclone resistant houses and flood resistant raised platform houses are built. Also, during rehabilitation, the community is settled in a safe location and as far as possible. Heterogeneous community settlements are preferred to eliminate social issues of caste and class.

• Prevention phase – This is the phase which indicates the start of pre-disaster phase. It engrosses measures to be taken in order to prevent a specific hazard from becoming a disaster. There are different measures required for different hazard. Primary responsibility rest with the government as actions taken in this phase requires large investment and work to ensure long term benefit. Only the government has the strength to implement these activities with high funds and necessary resources in place. The measures include, for example, increasing the capacity of a dam to prevent floods, activities promoting communal harmony at all levels to prevent riots, high construction and safety standards in industries and government offices and all other structures in order to prevent fire. Prevention should be at all levels- community level, local level and government level.

- Mitigation phase The notion of this phase is to mitigate the impact of a disaster if ever a disaster takes place. This phase includes technology and scientific techniques too. For example, predicting the path, time to be taken of a cyclone after knowing that it is approaching the country is one mitigation strategy so as to avoid losses of lives and property. Having a natural mangroves plantation along the coast is one mitigation measure. Construction of earthquake resistant buildings is another mitigation measure. Working on mitigation phase is also the responsibility of the government because such initiative at the local and community level is very difficult as huge funds and resources are required. Increasing, large funding organization such as IMF, World Bank etc. spend huge amount of funds in mitigation program globally.
- Preparedness phase This phase involves the development of awareness among the population on the general aspects of disaster and on how to behave in the face of a future disaster. This includes education on warning signs of disasters, methods of safe and successful evacuation and first aid measures. Preparedness must be on part of individual organizations as well as community as a whole. Preparedness phase also deals with the preparations which are needed on individual, community, authoritative level when a disaster occurrence cannot be avoided and a disaster is sure to happen. Community based disaster management plans must be formed with the help of local NGOs.

2. DISASTER SCENERIO IN ASSAM

Learning Objectives:

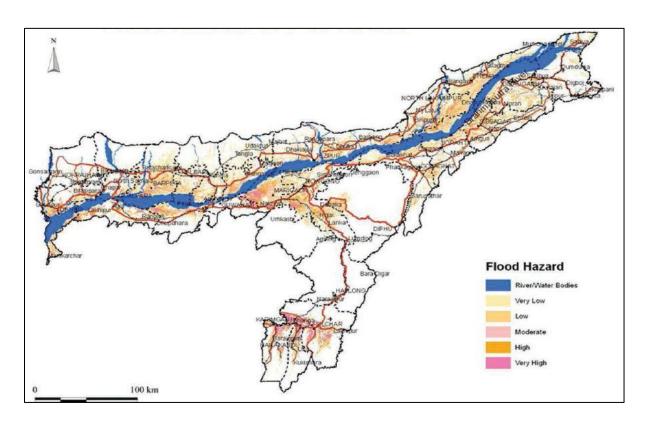
- To understand the major hazards in Assam
- List out the natural and man-made disasters in Assam

North East India is located in an earthquake prone zone, (zone v) of the Indian subcontinent. In this region earthquake comes with land sliding flood and along series of smaller magnitude earthquakes.

Here earthquakes of upto MM intensity IX can be expected. According to a hazard map by the Global Seismic Hazard Assessment Program, the state can expect to have a peak gravitational acceleration (PGA) of 0.24g to 0.48g. The region where the highest PGA can be expected is along the state's border with Meghalaya, the site of the Great Indian earthquake of 1897.

Seasonality disaster calendar of Assam

Hazard		Jan	Feb	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec
1	Flood												
2	Cyclone												
3	Household fire												
4	Drought												
5	Forest fire												



2.1 Review of Assam flood 2012

Description	June 2012	September 2012
Total number of districts affected	27	20
Total number of villages affected	4540	2595
Total population affected	23.91 Lakhs	29.14 Lakhs
Total crop area affected	2.55 lakh hector	3.28 lakh hector
Human lives lost	112	37
Relief camps established	768	1069
Damage of property	3591.89 Cr	

2.2 Major earthquakes in Assam:

Earthquakes during non-instrumental period in Assam: 1548, 159, 1601, 1642, 1663, 1696, 1756, 1772, 1838, & 1841.

Earthquake during instrumental period in Assam: 1869,1897, 1923, 1930, 1943, 1947, 1950, 1985, 1984 & 1988

Date	Epicenter	Intensity	Damages
10 th Jan 1869	Cachar	7.5	
12 th June 1897	Rongjoli	8.7 at RS	1542 Killed
9th Sep 1923	Meghalaya,Guwahati	7.1	
15 th Aug 1950	Near Rima, Tibet	8.6 at RS	1526 Killed
31st Sep 1984	Cacher	6.0	20 Killed

2.3 Disaster Management in Assam

Assam is one state in India, which has high number of disasters occurring on an average. It is also a state where a high number of populations are vulnerable to these disasters and where the coping capacity is minimal to deal with disaster risk. This is one state, due to the above mentioned reasons, which has an immediate need to practice disaster management with long terms strategies and sustainable developmental approach.

2.4 Hazards in Assam

The major hazards in Assam: Earthquake, Floods, Fire, Landslides, ethnic violence and Cyclone.

Assam represents highly flood-prone region characterized by severe hazards of floods. Although occurrence of flood has been an age-old phenomenon in the riverine areas of this region, the extent of damage caused by the flood has increased significantly in recent years. With more than 40 percent of its land surface susceptible to flood damage, the total flood-prone area in the Brahmaputra valley is about 3.2 Mha. (Goswami, 2001).

Damage may occur to human settlements, buildings, structures and infrastructure, especially bridges, elevated roads, railways, water towers, water treatment facilities, utility lines, pipelines, electrical

generating facilities and transformer stations. Aftershocks can do much damage to already weakened structures. Significant secondary effects include fires, dam failures, and landslides, which may block waterways and also cause flooding. Damage may occur to facilities using or manufacturing dangerous materials resulting in possible chemical spills. There may be a breakdown of communications facilities. Destruction of property may have a serious impact on shelter needs, economic production and living standards of local populations. Depending on the vulnerability of the affected community, large numbers of people may be homeless in the aftermath of a disaster.

2.5 Vulnerability in Assam

Physical	1.	People living on the banks of Brahmaputra river
	2.	Village islands go under water totally during floods
	3.	Assam comes under earthquake zone V
	4.	Workers working in petroleum and gas factories
	5.	Bomb blasts occur in Assam as a result of insurgent activities
Social	1.	There are differences in the society (1983 Bangla-Mishing riots)
	2.	In-equalities in Education Access
Economical	1.	Economically weak population resides on the banks of the
		Brahmaputra River
	2.	High rate of unemployment in the state
	3.	No concept of insurance in most of the parts of Assam
Geographical	1.	Earthquake zone V
	2.	During floods, Brahmaputra expands with a wide reach

2.6 Coping Capacity in Assam:

Coping Capacity in Assam can be attributed to the indigenous knowledge of the tribes in dealing with disasters. People living on river islands have skill of making quick boats from banana shaft to protect their family and valuables. The fisher-folk on river islands can predict the increase in flow of river and probable floods due to their experiences. Such indigenous knowledge needs to be documented and capacity be increased.

Also, people are hard working and do not fear from engaging themselves into hard physical work. This capacity can be utilized to quickly move to recovery and rehabilitation phase.

3. CONCEPT OF CBDP & ITS PROCESS

Learning Objectives:

To understand the different components of CBDP

Community Based Disaster Preparedness emphasize collective community action and the internal mobilization of resources to support the community's effort to be self-reliant to the extent possible and for a more systematic and effective mobilization and use of external resources needed to implement plans and projects identified by the community members to be most relevant.

The process of CBDP aims at the following:

- 1. The community should be made well aware of the risk they are living with.
- 2. Communities in high risk areas have been developing their own coping mechanisms and strategies to reduce and deal with the impact of disasters. CBDP recognizes the imperativeness of local knowledge and resources, and strengthen them in order to improve the capacity of people to withstand the impact of disasters.
- 3. Ownership of disaster reduction should not be stripped from local people who should be left even more powerless in case external intervention does not occur.
- 4. Disaster reduction activities should be based on participatory approaches involving local communities as much as possible, considering them as a proactive and not passive target for intervention.
- 5. Involvement and participation of communities will ensure a collective and coordinated action during emergencies.
- 6. Building community leadership and a chain of trained community cadres through participatory approaches can help harness the resilience and resourcefulness of the community to cope.
- 7. Solution is sustainable if it comes from people themselves rather than trusting upon them.
- 8. It is not only the big disasters that destroy life and livelihoods. Accumulated losses from small floods, droughts and landslides can exceed the losses from big disasters contribute significantly to increased vulnerability at local level. These disasters attract little media attention and communities are often left their own to cope with the destruction. This provides another reason to invest in community based disaster preparedness.

Importance of CBDP-

- It is at the community level where effects of disasters are felt the most and also where the physical, social and economic risks can be most adequately assessed and managed.
- Nobody is more interested in understanding and improving local affairs and conditions than the community residents themselves.

- Nobody can understand local opportunities and constraints better than the local residents themselves.
- The first and quickest response to a disaster in any community will always come from the community members themselves.
- For disaster risk reduction initiatives to be more effective generation and analysis of hazard and disaster related data and information should be in a manner and language that is understood by the community.
- Because the community is involved in the whole process, their felt and real needs as well as inherent needs are considered. There is more likelihood that problems will be addressed with appropriate interventions.

4. PERSONAL AND SAFETY MEASURES DURING DISASTERS

Learning Objectives:

Familiarisation with the various safety measures to be adopted during disasters.

Earthquake:

- Move beds away from windows.
- Move or secure hanging objects over beds, couches, and other places where people sit or lie.
- Keep shoes and a flashlight under the bed. Keeping shoes under the bed ensures quick access to prevent cutting feet on glass and reduces the risk that glass could fall into them.
- Store heavy and breakable objects on low shelves. Weed killers, pesticides, and flammable products should be stored on bottom shelves or in closed cabinets with latches. Chemicals will be less likely to create hazards if they are stored in lower, confined locations.
- Secure bookshelves, water heaters, and tall furniture to wall studs. Install latches on all cabinets, and anchor overhead lighting fixtures. Secure items that might fall, such as televisions.
- Develop a home earthquake plan so that you know what to do during and after an earthquake.
- Conduct earthquake drills with your family or co-workers. Locate safe spots (e.g., under a sturdy table), and identify danger zones (e.g., near windows).
- Develop a plan for reuniting all family members after an earthquake occurs.
- Keep supplies on hand, including food and water for 3 days, a flashlight with extra batteries, a portable radio, a fire extinguisher, and tools.
- Drop, cover, and hold. Move only as far as necessary to reach a safe place. Most persons injured in earthquakes move more than 5 feet during the shaking.
- If indoors, stay there until the shaking stops. Many fatalities occur when people run outside, only to be killed by falling debris from collapsing walls. It is safer to stay indoors until the shaking stops and it is safe to exit. When going outdoors, move quickly away from the building to prevent injury from falling debris.
- If outdoors, find a spot away from buildings, trees, streetlights and power lines, and overpasses. Drop to the ground and stay there until the shaking stops. Injuries can occur from falling trees, street lights and power lines, or building debris.
- If in a vehicle, pull over at a clear location free of hazards and stop. Stay in the vehicle with seatbelt fastened until the shaking stops. Turn on the radio to get information regarding the quake and any damage to roadways that may have occurred.

- If in a high-rise building, expect the fire alarms and sprinklers to go off during an earthquake. Check for and extinguish small fires. Do not use the elevators.
- If in a coastal area, move to higher ground. Earthquakes often generate tsunamis.
- If in a mountainous area or near unstable slopes or cliffs, be alert for falling rocks and other debris that could be loosened by the earthquake. Also, watch for landslides that could be triggered by the earthquake.

Flood:

- Know the flood risk in the area, including the elevation above flood stage and the history of flooding in the area.
- Prepare a flood evacuation plan and practice the route. Be aware of which roads become flooded and which remain passable. The entire family should know where to go if they have to evacuate.
- Keep important documents in a water-proof box. Most documents can be replaced, but some are more difficult to replace than others. Protecting them in a water- (and fire-) proof container is the safest plan of action.
- Elevate the furnace, water heater, and electric panel to at least one foot above the level of the floodplain (also called the Base Flood Elevation). In some areas, elevating these appliances and utilities may mean relocating them to a higher floor or even to the attic.
- Move furniture and other items to a higher level. Even if the main floor of the home is flood damaged, moving furniture and other items to a higher level will reduce flood losses.
- Avoid driving- Reserve the roads for those who are in emergency situation.

Landslide:

- Be alert for signs indicating land movement. Landslides can occur weeks or months after intense storms
- Plant ground cover on slopes and build retaining walls.
- Try and get out of the path of the landslide or mudflow
- Run to the nearest high ground in a direction away from the path.
- If rocks and other debris are approaching, run for the nearest shelter such as a group of trees or a building.
- Listen to a radio or television for the latest emergency information.
- Stay away from the slide area. There may be danger of additional slides.

4.4 Fire:

In the event of a fire, always, remember that time is precious and every second counts. Follow the following tips:-

Do's

- Stay calm, don't panic and don't run.
- Raise alarm and alert everyone in your premises.
- Escape first and then call for help.
- Use nearest available exit routes.
- While leaving the premises, close all doors and windows behind you if possible but must ensure that anybody is left behind and you are safe.
- Use only escapes routes because they are built for the purpose.
- Use Staircases. "Don't use Lifts'.
- If you come to a closed door, use the back of your hand to feel the top of the door, the doorknob and the cracks between the door and door frame to make sure that fire is not on the other side. If it feels hot, use your secondary escape route. Even if the door feels cool, open it carefully. Brace your shoulder against the door and open it slowly. If heat and smoke come in, slam the door and make sure it is surely closed, then use your alternate escape route.
- If you are trapped in smoke logged area, lie down and keep your nose close to floor and crawl towards an exit point.
- If you become trapped in your room closes the door and blocks any gaps which might let smoke or fumes through. Shout from the window to attract the attention of rescue team as well as others.

Don'ts:

- Never stand up in a fire, always crawl low under the smoke and try to keep your mouth covered. Never return to a burning building for any reason; it may cost your life.
- Never go back into a burning building for any reason.
- Teach children not to hide from fire fighters. If someone is missing, tell the fire fighters. They are equipped to perform rescues safely.
- Don't secure open fire/smoke check door open as they limit the spread of fire smoke when in closed position.
- Don't be tempted to clutter the stairs, corridors and lobbies as they are your escape routes.
- Never use the lift. It you have to leave the building use the staircases.

- Do not stop to collect belongings.
- Don't shout or run. This tends to cause panic to others.
- Prevention & Mitigation measures by the community people without external support.

5. HAZARD PREVENTION AND MITIGATION- PROCESS & STEPS BY COMMUNITY

Hazard Prevention: This covers mechanisms designed to impede the occurrence of a Hazard event and/or prevent such an occurrence from having harmful effects on communities and facilities.



Example: Fire can be prevented from occurring. Having Miniature Circuit Breakers (MCBs) installed along with the electric connections cut the flow of current and can help preventing the spread of fire due to short circuits. Similarly, de-siltation of river beds can prevent floods from happening. Also maintaining proper green cover on hill slopes can prevent landslides in the mountains.

Hazard Mitigation: covers mechanisms which reduce the impact of the forces of hazard that minimize the effects of hazards and thus lessen the magnitude of a disaster.



Example: Plantation of trees can reduce the force of water and also that of the landslides on the slopes of mountains. Use of non-inflammable construction material in houses can reduce the spread of fire, and plantation of mangroves can slow down the speed of sea water and wind in a cyclone. All these effort reduce / mitigate the impact of hazard.

Community Readiness: includes measures & mechanisms where Group/community organization functions collectively and prepares for any hazard that is going to happen.



Example: Having search & rescue team, water & sanitation team, establishment of community fodder and grain bank, running community kitchen, setting up emergency community shelter, creating community emergency funds etc. can be called as community readiness measures.

6. IMPORTANCE OF COMMUNITY PARTICIPATION IN CBDP

Learning Objectives:

Importance of Community Participation in Disaster Preparedness

Disasters can become uncontrollable, once the event has got underway. Therefore, preventive steps need to be taken before, during and after the disaster events. If the community is not well prepared, control over the disaster event would be usually lost during its occurrence. If each individual in the community is familiar with ways of coping and precautionary measures, then the disruption by a disaster can be reduced.

All communities and villages have some vitally important assets to deal with disasters. These may include knowledge of disaster warning signs, locally safe and vulnerable areas, experience of past disasters, methods of survival and social relations that are often vitally important in coping with crisis. Local communities have an active part to play before and after disasters because:

- More number of lives can be saved during the first few hours after disaster has occurred through local response teams, before help arrives from elsewhere.
- The numerous problems of survival and health resulting from a disaster are dealt with more efficiently, if the community is active and well organized (WHO 1989).

The key aspect of community involvement is the sustainability of community level initiatives for disaster reduction. External agencies, like government, non-government organizations may initiate and implement community level programs before and after disasters. However, such initiatives many times discontinue once the external support is ended. There can be many reasons behind this lack of sustainability, some of which may be the lack of partnership, participation, empowerment and ownership of local communities. Unless the disaster risk management efforts are sustainable at individual and community level, it would be difficult to reduce the vulnerability and losses. It is therefore important to involve people in decision making on policies and strategies that should be followed for their development in the community.

Importance of Community Involvement:

- Local people are capable of initiate and sustain their own community development.
- Various community members and groups in the community may have different perceptions of risk and varying vulnerabilities.

Outcomes of Community based disaster risk reduction in the community level:

There can be various reasons for which we need to discuss CBDP with the community but some of the important reasons are listed below.

- Generally, a hazard can strike anyone, irrespective of caste, sex, religion, age, class etc. But it may affect people differently because their capacity to respond to a hazard varies.
- On the other hand, if the community understand CBDP, it will be easy for them to engage & direct the risk reduction & the contingency planning process with focus upon the needs & situation of the

elderly. If they can direct the planning from collective point of view then it may be easy for the other community members to plan measures considering their needs & place them on priority for rescue at the time of hazard strike & even after that for their relief & rehabilitation.

- Also, the involvement of community can give very useful insights & ideas about various traditional/indigenous ways of coping which others can make use of to cope up with the hazard strike.
- Very importantly, since the community can play a very crucial role in taking right decisions in planning by sharing their valuable experiences.
- Community can also play a very crucial role in hazard identification & risk analysis with the insights of experiencing disaster they must have come across in their whole life.

7. CHARACTERISTIC OF SAFE AND RESICIENCE COMMUNITY

Learning Objectives:

• To enumerate how community can be called safer, resilient for disaster preparedness.

The aim of community Based Disaster Preparedness is to create resilient people living within safer, more resilient communities within safer, more resilient environments within safer, more resilient countries. This is achieved by reducing the:

- Reducing the probability of failure through applying preparedness measures.
- Reducing the consequences of failure, in terms of fewer lives lost fewer injuries and reduced direct and indirect damage.
- Reducing time needed for recovery.
- Recognizing patterns of vulnerability that can develop during the process of reconstruction.

Characteristics of community resilient before a disaster-

Community can reduce disaster impact by adopting many approaches, such as:

- Using traditional experience and knowledge.
- Preparing for any possible hazard by having emergency kits or supplies, (buffer stocks) ready for the event.
- Having family or community disaster management plans as well as improving adaptive behavior, strengthening houses, providing emergency protection of doors and windows from high winds.
- Organizing capacity building training courses on first aid.
- Evacuation plans.
- Permanent relocation of the community away from unsafe sites.

Characteristics of community resilience during disaster:

Community can cope during a disaster by:

- Drawing on the support of their community.
- Taking stock to determine what they have and what or who is missing.
- Restoring communications to facilitate aid distribution.
- Mitigating future risks (both psychological as well as material threats)
- Regarding the entire experience as a learning process.

Characteristics of community resilience after disaster:

The following concerns need to be addressed during the recovery process to build more resilience communities:

- Plan community recovery plan that links social, physical, economic and environmental recovery.
- Regard physical recovery work as bereavement therapy and a possible income source and the entire reconstruction experience as a learning process.
- Draw on support of the community by being adaptable, flexible and patient.
- Where possible ensure that local labor and locally purchased reconstruction goods are used to revitalize the damaged local economy.
- Recognize the value of a prepared community who know what to do to recover.
- Take actions to reduce future vulnerability as the recovery proceeds.

The Nature of safer and resilient communities-

A resilient community is one that has certain capacities at three phases:

- Phase 1. The ability to absorb the shocks of hazard impact, so that they do not become disasters (thus to reduce the probability of a failure)
- Phase 2. The capacity to bounce back during and after disaster (thus to reduce the consequences of a failure)
- Phase 3. The opportunity for change adaptation following a disaster (thus to reduce the time needed for recovery as well as patterns of vulnerability)

Indicators of a Resilient Community-

Resilience is a moving target, and realistically it may not be possible for communities to achieve absolute resilience against hazards or other risk factors. However, communities can still achieve certain level of development, and they can establish institutional arrangements that would enhance their resilience. In order to assess whether a community has achieved a certain level of resilience, stakeholders need to establish some indicators, which if existed would mean that the community had achieved a minimum level of resiliency. A set of indicators is given as below.

- Community organization.
- DRR and DP plan.
- Community Early Warning System.
- Trained manpower: risk assessment, search and rescue, medical first aid, relief distribution, masons for safer house construction, fire fighting.

- Physical Connectivity: roads, electricity, telephone, clinics.
- Relational connectivity with local authorities, NGOs, etc.
- Knowledge of risks and risk reduction actions
- Community Disaster Reduction Fund to implement risk reduction activities.
- Safer House to withstand local hazards.
- Safe source/s of livelihoods.

8. HAZARD, VUNLERABIITY AND CAPACITY ASSESSMENT

Learning Objectives:

- Identification of hazard, risk and vulnerability
- Assessment of level of risk of different components

The Hazard, Vulnerability and Capacity assessment in the community is a participatory process of determining the nature, scope and magnitude of negative effects of hazards to the community and its households within an anticipated time period. It determines the likely negative effects on 'elements at risk' (people; household and community structures, facilities like schools and hospitals; livelihood and economic activities, jobs, equipment, crops, livestock etc.; lifelines, access roads and bridges) and why particular households and groups are vulnerable to specific hazards and others are not? The coping mechanisms and the resources present in the community are also identified.

Hazard, Vulnerability and Capacity Assessment is participatory in nature because the affected target because the affected target populations are involved in the various stages of risk assessment. It unites the various stakeholders in the locality, most especially the community in common understanding of the disaster risk.

Moreover, vulnerability and Capacity Assessment combines both scientific and empirical data concerning known hazards and other possible threats to the community. Although indigenous knowledge is vital, scientific data is especially important in a situation when the hazard has not been experienced by the community.

The following are the components of Hazard, vulnerability and Capacity Assessment:

Hazard Assessment: Hazard Assessment focuses on the existing or latent factors present in, or around the community that could potentially have a harmful effect on the community. As stated earlier in the course these may be natural (geological, hydro-meteorological and biological) or induced by human processes (environmental degradation and technological hazards). Hazards can be measured in terms of their location, intensity, frequency and probability.

Particularly useful tools for hazard assessment are hazard mapping, seasonal calendar, historical visualisation and projection, semi structured interviews, transect walk, direct observation are also useful tools.

Vulnerability Assessment: Vulnerability Assessment 'measures' the physical, social, economic and environmental factors or processes, which increase the susceptibility of the community to the impact of hazards. Particularly useful tools are social vulnerability mapping, physical vulnerability mapping, and seasonal calendar; transect walk, direct observation and semi-structured interviews.

Capacity Assessment: Capacity assessment 'measures' the strengths and resources available in and to the community and areas where these can be improved. As stated previously these may include physical, institutional, social or economic means as well as skilled personal or collective attributes such as

leadership and management. Particularly useful tools for capacity assessment are resource mapping, semistructured interviews, transect walk and direct observation.

Prior to the conduct of Hazard, Vulnerability and Capacity Assessment, the most commonly used tool to assess the community needs is the baseline studies. The following are the most commonly used tools for hazard, vulnerability and capacity assessment.

- Mapping.
- Seasonal Calendar.
- Historical Visualization and Projection.
- Semi-structured Interviews/ Focus Group Discussions.
- Transect Walk.
- Direct Observation.

Mapping: Maps facilitate communication and stimulate discussions on important issues in the community. Maps can be drawn for many topics:

- Social map (houses, social facilities and infrastructure, i.e., temple, school, health centre, roads, water pumps, irrigation, recreational facilities, etc.)
- Hazard map, elements at risk, safe areas etc.
- Resource map showing local capacities (Health centers, religious facilities, schools, local markets etc.)
- Accessibility map (route and condition of access to evacuation centre or shelter)
- Mobility map.

Team and community members for mapping: village leaders who are familiar with number of houses; religious leaders, the elderly, people with disabilities, sectorial representatives- women, children's committee, farmers etc.

Mapping can be drawn in the following ways:

- Decide what kind of map should be drawn.
- Find men and women (also children and consider vulnerable group representation) who know the area and are willing to share their experiences.
- Choose a suitable place (ground, floor, paper) and medium (sticks, stones, seeds, pencils, chalk) for the map.
- Help the people get started but let them draw by themselves.

Seasonal Calendar: Seasonal calendar showing different events, experiences, activities, conditions throughout the annual cycle.

Seasonal Calendar can be design for many reasons:

- Identify periods of stress, hazards, diseases, hunger, vulnerability etc.
- Identify what people do in these periods, how they diversify sources of livelihood, when do they time for community activity, when do they have savings, what are the coping strategies.
- Identify gender specific division of work, in times of disaster and normal times.

Seasonal Calendar can be design in the following ways:

- Use 'blackboard' or craft paper; mark off months of the year on the horizontal axis. Ask people to list sources of livelihood, events, conditions etc. and arrange these along with vertical axis.
- Ask people to enumerate all the work they do (e.g. plugging, planting, weeding etc.) for each source of livelihood/income by marking months and duration, adding gender and age.
- Facilitate analyze by linking the different aspects of the calendar; how do disasters affect sources of livelihood? When workload is heaviest? Ask for seasonal food intake; period of food storage, outmigration etc.

Historical visualization and Projection:

Historical visualization and projection gather information about what happened in the past and its impact in the future.

Historical visualization and projection is important for the following points:

- To get insight and past hazards, change in their nature, intensity and behavior.
- Understand present situation in community.
- To make people aware of changes.
- To identify impacts of past experiences in the future.

Historical visualization and projection can be design in the following ways:

Plan group discussions and ensure that key-informants (old people, leaders, and teachers) are present. Invite as many people as possible, especially the young ones, for them to hear the history of their community.

Ask people, if they recall major events in the community, such as;

Major hazards and their effects.

- Changes in land use (crops, forest cover etc.)
- Changes in land tenure.
- Changes in food security and nutrition.
- Changes in administration and organization.
- Major political events.
- Changes in attitudes (e.g. toward people with disability and the elderly)

Semi-structured Interviews/ Focus Group Discussions:

Semi-structured interviews are discussions in an informal way. They do not use a formal questionnaire but at the most a checklist of questions as a flexible guide. There are different types of semi-structured interviews- (a) Group interview (b) Focus Group Discussions (c) Individual Interview (d) Key-informant interview.

Semi-structured Interview is important because of the following reasons-

- To obtain community level information to have access to a large body of knowledge, not useful for sensitive issues.
- To obtain special knowledge about a particular topic, interview a farmer about cropping practices, a village leader about procedures and policies.
- To discuss specific topics in detail with a small group of persons who are knowledgeable or who are interested in the topic.

Semi-structured Interview can be done in the following ways:

- Prepare key issues in advance.
- Select one person lead the interview.
- Ask questions in an open-ended ways.
- Ask for concrete information and examples.
- Try to involve different people.

Transect Walk:

Transect walk is a systematic process with key-informants through the community to look out the layout of the community including distances between key places, accessibility, and land use zones, by observing, asking, listening and producing a transect diagram.

Transect walk is important because of the following reasons-

- Visualizes interactions between physical environment and human activities over space and time.
 Identifies danger zones, evacuation sites, local resources used during emergency periods, land use zones etc.
- Seeks problems and opportunities.

Transect walk can be done in the following ways-

- Based on map, select a transect line.
- Select a group of six to ten members, who represent the cross section, and explain exposure.
- During walk, take time for brief and informal interviews at different places in the transect.
- Focus issues on proneness to particular disasters.
- Conduct transects walk with representatives from vulnerable groups and their families.

Direct Observation:

It is systematically observing objects, people, events, relationships, participation and recording these observations. Consider how to observe the 'invisible' (e.g. people with disabilities)

Direct observation is important to get a better picture of the (disaster) situation, especially of things that are difficult to get across verbally.

Direct observation can be done at the initial phase when you enter community and during to cross-check verbal information. Observations are analyzed afterwards (for instance how men and women participate in community meetings)

9. COMMUNITY BASED DISASTER PREPAREDNESS - PROCESS & STEP BY NGOS'

Learning Objectives:

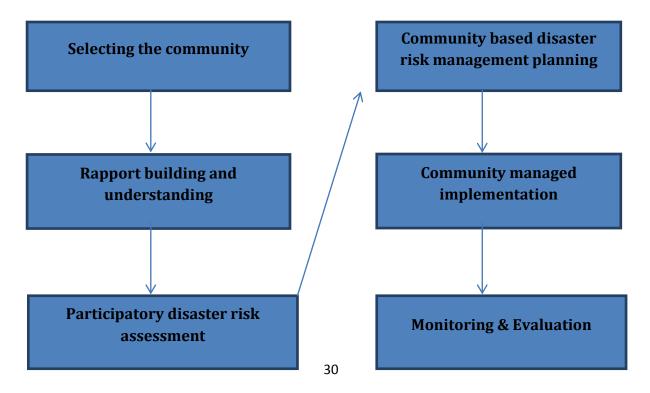
 To understand how community people can take the help of local resources/ NGO's for disaster preparedness.

Successful disaster preparedness strategies involve careful efforts to combine knowledge, technology, expertise, institutional capacities, management skills, and practical experience for optimum results, which would not be possible without proper collaboration between the two key players: state and civil society. The state can effectively link up knowledge, technology, skills, and resources, expertise offered by specialist institutions with grassroots experience, organizational capacity, participatory management skills, and community based initiatives of NGOs for disaster reduction. NGOs can be innovative, rooted to the ground and participatory in their approach while government can replicate best practices for larger impact.

NGOs play an important role in disaster response and mitigation in different regions. Many international NGOs specifically focus on providing humanitarian aid to disaster victims. Local NGOs in South Asia have also played an active role in disaster management in recent years. In India, NGOs played a significant role in emergency response and rehabilitation following major disasters: the 1993 earthquake at Latur, which killed 7601 people, the 1999 Orissa super cyclone which killed 8931 people, the 2001 Gujarat earthquake which killed over 13,000 people. Apart from that cloud burst at Leh, Sikkim Earthquake, Ethnic violence at Assam where NGO's played a significant role.

NGO's can play various ways in Community Based Disaster Preparedness. Disaster risk reduction process has six sequential stages, which can be implemented before a disaster occurs or after one has happened to reduce future risks. Each stage grows out of the preceding stage and leads to further action.

The stages in the disaster risk reduction process are given in the figure below:



A thorough assessment of the community's vulnerabilities, coping capacities and the risks is needed to start any risk reduction activities. The active involvement of communities, subject experts and elected authorities is important in decision-making to promote ownership and sustainability.

Selecting the Community

The first task of NGOS's is to conduct a detailed risk assessment survey of the whole area. The selection of communities for implementation of CBDP activities depends upon a number of factors and criteria, but most importantly the risk exposure of the particular community. Given below is a list of the criteria for identifying communities for CBDP activities:

- Severity of community's exposure to risk (most vulnerable)
- Number of people to benefit from Disaster Risk Reduction (DRR) activities
- Readiness of community to engage in Disaster Risk Reduction activities
- Poverty status of the community
- Governmental priority of physical, social and economic vulnerability
- Budget availability
- Accessibility

All of the above mentioned criteria wouldn't be equally important in a given area. The NGO's/ Local Authorities can make decisions on the basis of factors that might be more important locally, then the others. A thorough survey will need to be conducted for the identification of vulnerable communities. The following table can be used to conduct survey for identifying the vulnerable communities for a transparent decision-making process.

Table 1. Community Identification Matrix

Communities	Risk	Poverty	Will to	No. of	Accessibility	Staff	Total	Rank
	Exposure	Status	engage	potential		security		
			in DRR	beneficiaries				
1								
2								
3								
4								
5								
6								

Source: Participants Hand Book, Community Based Disaster Risk Management, ADPC

Rapport building & Understanding:

Once the most vulnerable communities are identified it would be important to understand the local social relationships and power structures, key economic groups and to build good informal relationship with the local people. This will be crucial in order to ensure participation of various local groups.

The NGOs who support the community in disaster preparedness need to build a picture of the nature, needs and resources of the community. This step usually involves interacting and integrating with the community and gathering basic information to have a general description of the community.

Participatory disaster risk assessment:

Participatory Disaster Risk Assessment is a process to identify the risks that communities, villages, communes face and how people overcome those risks. This will be conducted in most vulnerable and priority communities. This process involves hazard assessment, vulnerability assessment and capacity assessment, analysis and prioritization of risks. The participatory disaster risk assessment will be conducted by the NGO's with the involvement of local people, community leaders and subject experts.

Community based disaster risk management planning:

At this stage, further analysis will be conducted jointly by the NGO's and communities to analyze the risks and identify strategies and solutions to address them. Based on this analysis, a detailed risk reduction and response plan will be developed for the particular communities. The planning process will involve analysis of local stakeholders and local resources. Roles and responsibilities of the various stakeholders for implementation of activities will be clarified.

Community managed implementation:

The implementation of the plan should be done through the community organization at community level with support from NGO's and other technical and research institutions. The implementation process will include various structural and non-structural activities; e.g. community training, disaster response drills, community early warning systems, disaster resilient construction of houses, forest plantations, mangrove plantation, diversification of crops, rainwater harvesting, construction of dykes, bridges etc. for vulnerability reduction and hazard mitigation. The community-based organization would be responsible for overall management of the disaster reduction activities. The NGO's should play a facilitating and coordinating role for the implementation of the community plan and mobilization of resources. NGO's can also need to provide essential technical assistance to the communities for hazard mitigation and vulnerability reduction.

Monitoring & Evaluation:

Participatory monitoring and evaluation (PME) involves the local community, development agencies, NGO's, local authorities, PRI members, and other stakeholders in measuring the progress made, and identifying necessary follow-up actions. Harmony among all the groups in PME is an important factor for success!

10. EXTRICATION AND EVACUATION

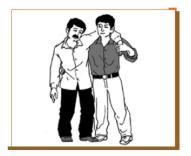
Learning Objectives:

- To know how to extricate patients from a variety of situations.
- To use scarce resources for transportation of needy patients

1. SINGLE RESCUE

Human Crutch:

Casualty is in a position to help themselves.



Pick-a-back:

Casualty is conscious without any injury but unable to walk.



Pick-a-back (Reverse) (The rescuer and the casualty stand back-to

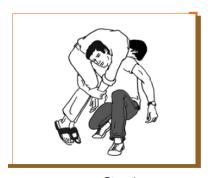
back):

Casualty is conscious but unable to walk for an injury such as burn on the belly or chest, a wound on the neck, or face or any upper body parts.



Fireman's Lift:

When the casualty is unconscious but without any injury



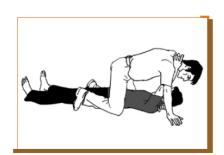


Step1

Step 2

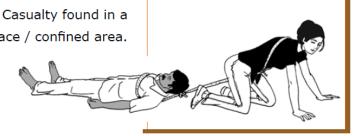
Rescue Crawl:

Casualty is unconscious, too heavy or found in a smoke filled room, or in a confined place limiting movement.



Bowline Drag:

narrow space / confined area.



Toe Drag:

Casualty found in a narrow space / confined area where the rescuer finds difficulty to enter.

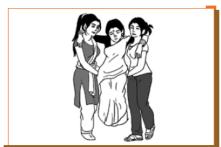


2. MULTIPLE RESCUE

Two-Handed Seat:

casualty is conscious but unable to walk

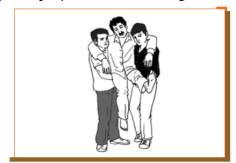




Three-Handed Seat:

Casualty is conscious, heavy and / or has bleeding or injury to one of the legs





Four-Handed Seat:

Casualty is heavy but without any injury.





Fore and After Method:

Casualty has an injury in the abdomen and is unable to move



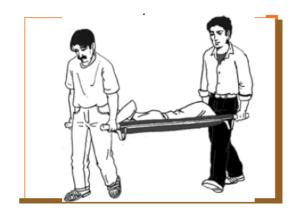
Blanket Lift:

Casualty is found in a grave condition and need to be shifted in flat condition, but the rescuers do not have a stretcher to carry the casualty.



Step 1





Standard Ambulance Stretcher:

Moving a patient with a suspected closes head, neck & spinal Injury:



Recovery Position:



Immobilisation of Neck:



Step 1



Step 2



Step 3



Step 4

Fractures:

Upper arm



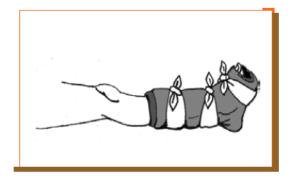
Upper leg



Lower arm



Lower leg

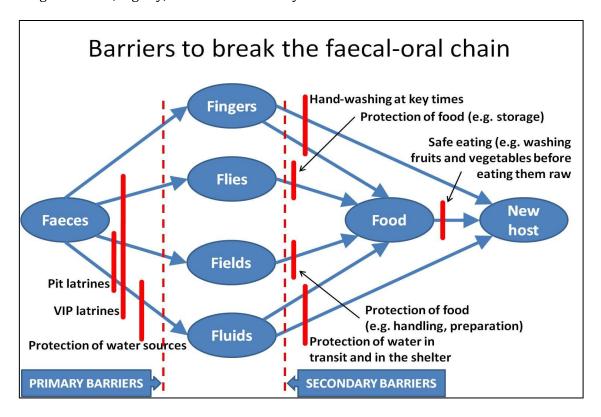


11. WATER, SANITATION AND HYGIENE PROMOTION (WASH)

Learning Objectives:

- To know its importance
- To know how it saves life
- To know how it reduces faecal-oral transmission of diseases

Water, Sanitation and Hygiene (WASH) plays significant role in preventing water related communicable diseases during normal course of development as well as during emergency. The WASH sector deals with safe water supply, safe sanitation services and safe hygiene behavior. People's participation is the key for any successful WASH intervention and PRIs can play significant role in planning and implementing such interventions during normal course of development as well as during emergency. The main objective of water supply and sanitation programs are to reduce the transmission of faecal-oral diseases and exposure to disease-bearing vectors through the promotion of good hygiene practices, the provision of safe drinking water and the reduction of environmental health risks and by establishing the conditions that allow people to live with good health, dignity, comfort and security.



Good Practices in WASH and Disaster Risk Reduction (DRR)

Disaster risk reduction in WASH sector relates more to the prevention or mitigation of the public health risks during and post disaster situations. Disaster risk reduction practices can emerge from both the hardware and software components of WASH. In other words, they can emerge from both the behaviour and the habits of the community and also the way the existing water and sanitation facilities are designed, installed, put into use and maintained. Good DRR practices need not always be complex or complicated in

order to achieve effective risk reduction. Even simple behaviour changes can bring about a phenomenal transformation in the health and well being of the community, at large. It is a proven fact that hand washing at critical times of the day alone has been able to reduce the incidence of diarrhoeal diseases by more than 50%. Besides hygiene, good DRR practices also come from use and maintenance of water and sanitation facilities and more importantly the design, construction and structural repair of such facilities by PRI. Examples of good DRR practices under each category are given below:

Personal hygiene based DRR practices:

Practices those are inherent to the habits, customs, faith and behaviour which can reduce the public health risks fall under this category. Given below are some of the crucial behaviour changes that are considered best hygienic practices:

- Washing vegetables and fruits, especially when they are eaten raw
- Washing hands with cleaning agent such as soap or ash:
 - \Rightarrow after defecation
 - ⇒ before cooking, eating or feeding
 - ⇒ after cleaning children's bottom
 - ⇒ after safely disposing children's faeces
- Taking bath and keep oneself clean
- Washing clothes
- Use and safe disposal of sanitary napkins or any other appropriate material to ensure menstrual hygiene

Good practices that involve use and maintenance of water and sanitation facilities:

The purpose of water and sanitation facilities is to enable hygiene improvement in order to reduce the public health risks. If these facilities are not properly used or maintained then hygiene improvement is not possible. Some of the good practices that can reduce the disaster risks are:

- Use of latrines
- Avoiding open defecation
- Safe fetching of water (without making hand contact with the inside of the containers)
- Fetching of water from protected water source
- Avoiding water from contaminated sources such as surface water like streams and ponds for the purpose of drinking

- Safe storage of drinking water; store in a container with a lid
- Use of ladle for drawing water and not dipping fingers and hands into the stored water
- Regular maintenance of water abstraction points and sources
- Avoiding use of water at the abstraction point or the source
- Proper drainage of waste water at the household level and community level
- Proper disposal of household and community level garbage and solid waste

Good practices based on structural measures for DRR

Effective disaster risk reduction is possible by integrating good DRR practices in WASH interventions in all the components of WASH such as water supply, excreta disposal, drainage etc. It involves use of appropriate technology and adopting appropriate design and installation of facilities for the given conditions of topography, ground water table, soil porosity, natural geographical features like presence of water bodies, drainage channels etc. For example, leach pit type twin pit latrine is absolutely inappropriate in high ground water table areas. Construction of a hand pump in a low lying area is inappropriate, as it cannot be used during floods, besides chances of water contamination. Instead of a leach pit latrine technical options such as raised latrine with containment tank, septic tank system or ecological sanitation (where faecal matter is dry composted using ash or lime and urine is separated) will prove to be appropriate in high ground water table areas.

Therefore, structural measures for DRR need to be designed based on the local context and integrated with the development plan of the village. These measures can be in the form of new installation, repair of existing facilities and maintenance. Some examples:

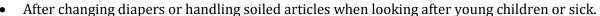
- Fencing or protecting existing water sources
- Construction of concrete apron (platform) to protect the ground water
- Repairing the cracks in the platform
- Construction of drain at the water abstraction point (hand pump, water tap etc)
- Raising the hand pump corresponding to the high flood level
- Construction of raised latrines
- Construction of incinerators for safe disposal of menstrual cloth
- Installation of garbage bins at specific locations
- Construction of drainage to avoid flooding and also deter vectors like flies and mosquitoes.

Guidelines for Hand Washing Technique

Hand washing, when done correctly, is an important personal hygiene practice to prevent contracting and spreading communicable diseases.

When should we WASH our hands?

- Before touching the eyes, nose and mouth.
- Before eating handling food
- After using the toilet
- When hands are contaminated by respiratory secretions, e.g., after coughing and sneezing.
- After touching public installations or equipment, such as escalator handrails, elevator control panels, or door knobs.



Steps for good Hand washing

- Wet hands under running water
- Apply liquid soap and rub hands together to make a soapy lather
- Away from the running water, rub the palms, backs of hands, between fingers, backs of fingers, thumbs, finger tips and wrists. Do this for at least 20 seconds.
- Rinse hands thoroughly under running water
- Dry hands thoroughly with a clean cotton towel, a paper towel or a hand dryer.
- The cleaned hands should not touch the water tap directly again.





Please Note:

- Towels should never be shared.
- Used paper towel should be properly disposed of.
- Personal towels to be reused must be stored properly and washed at least once daily.
- It is even better to have more than one towel for frequent replacement.
- When hands are not visibly soiled, application of 70-80% alcohol-based hand rub is equally effective for disinfection.

12. PSYCHOLOGICAL FIRST AID

Learning Objectives:

- To identify people who require Psychological First Aid in Emergencies
- To know the basic steps of PFA
- Do's and don'ts while providing PFA

Introduction:

PFA involves -

- providing practical care and support, which does not intrude;
- assessing needs and concerns;
- helping people to address basic needs (for example, food and water, information);
- listening to people, but not pressuring them to talk;
- comforting people and helping them to feel calm;
- helping people connect to information, services and social supports;
- Protecting people from further harm.

It is also important to understand what PFA is not:

- It is not something that only professionals can do.
- It is not "psychological debriefing" in that PFA does not necessarily involve a detailed discussion of the event that caused the distress.
- It is not asking someone to analyze what happened to them or to put time and events in order.
- Although PFA involves being available to listen to people's stories, it is not about pressuring people
 to tell you their feelings and reactions to an event.

Who is PFA for?

PFA is for distressed people who have been recently exposed to a serious crisis event. You can provide help to both children and adults. However, not everyone who experiences a crisis event will need or want PFA. Does not force help on people who do not want it, but make yourself easily available to those who may want support.

People who need more immediate advanced support:

- 1. people with serious, life-threatening injuries who need emergency medical care
- 2. people who are so upset that they cannot care for themselves or their children
- 3. People who may hurt themselves
- 4. people who may hurt others

When is PFA provided?

Although people may need access to help and support for a long time after an event, PFA is aimed at helping people who have been very recently affected by a crisis event. You can provide PFA when you first have contact with very distressed people. This is usually during or immediately after an event. However, it may sometimes be days or weeks after, depending on how long the event lasted and how severe it was.



Where is PFA provided?

You can offer PFA wherever it is safe enough for you to do so. This is often in community settings, such as at the scene of an accident, or places where distressed people are served, such as health centers, shelters or camps, schools and distribution sites for food or other types of help. Ideally, try to provide PFA where you can have some privacy to talk with the person when appropriate. For people who have been exposed to certain types of crisis events, such as sexual violence, privacy is essential for confidentiality and to respect the person's dignity.

Respect safety, dignity and rights:

When you take on the responsibility to help in situations where people have been affected by a distressing event, it is important to act in ways that respect the safety, dignity and rights of the people you are helping. The following principles apply to any person or agency involved in humanitarian response, including those who provide PFA:

Respect people's...

Safety

- Avoid putting people at further risk of harm as a result of your actions.
- Make sure, to the best of your ability, that the adults and children you help are safe and protect them from physical or psychological harm.

Dignity

Treat people with respect and according to their cultural and social norms.

Rights

Make sure people can access help fairly and without discrimination.

- Help people to claim their rights and access available support.
- Act only in the best interest of any person you encounter.

Do's	Don'ts
Be honest and trustworthy	Don't exploit your relationship as a helper
Respect people's right to make their own decisions	Don't ask the person for any money or favour for helping them
Be aware of and set aside your own biases and prejudices	Don't make false promises or give false information
Make it clear to people that even if they refuse	Don't exaggerate your skills
help now, they can still access help in the future	
Respect privacy and keep the person's story confidential, if this is appropriate	Don't force help on people, and don't be intrusive or pushy
Behave appropriately by considering the	Don't pressure people to tell you their story
person's culture, age and gender	Don't share the person's story with others
	Don't judge the person for their actions or feelings

Providing PFA:

Good Communication – Being calm and showing understanding can help people in distress feel more safe and secure, understood, respected and cared for appropriately.

Things to say and do – Try to find a quiet place to talk, and minimize outside distractions.

- Respect privacy and keep the person's story confidential, if this is appropriate.
- Stay near the person but keep an appropriate distance depending on their age, gender and culture.
- Let them know you are listening; for example, nod your head or say "hmmmm...."
- Be patient and calm.
- Provide factual information, if you have it. Be honest about what you know and don't know. "I don't know, but I will try to find out about that for you."
- Give information in a way the person can understand keep it simple.
- Acknowledge how they are feeling and any losses or important events they tell you about, such as loss of their home or death of a loved one. "I'm so sorry. I can imagine this is very sad for you."
- Acknowledge the person's strengths and how they have helped themselves.

Allow for silence.

Things NOT to say and do -

- Don't pressure someone to tell their story.
- Don't interrupt or rush someone's story (for example, don't look at your watch or speak too rapidly).
- Don't touch the person if you're not sure it is appropriate to do so.
- Don't judge what they have or haven't done, or how they are feeling. Don't say: "You shouldn't feel that way," or "You should feel lucky you survived."
- Don't make up things you don't know.
- Don't use terms that are too technical.
- Don't tell them someone else's story.
- Don't talk about your own troubles.
- Don't give false promises or false reassurances. »» Don't think and act as if you must solve all the person's problems for them.
- Don't take away the person's strength and sense of being able to care for themselves.
- Don't talk about people in negative terms (for example, don't call them "crazy" or "mad").

Action principles of PFA:

There are three action principles of PFA – look, listen and link

a. Look

- Check for safety.
- Check for people with obvious urgent basic needs.
- Check for people with serious distress reactions.

Look	Questions	Important message
Safety	 What dangers can you see in the environment, such as active conflict, damaged roads, unstable buildings or flooding? Can you be there without likely harm to yourself or others? 	If you are not certain about the safety of the crisis site, then do not go. Try to get help for people in need. If possible, communicate with people in distress from a safe distance.

People with obvious urgent basic needs	 Does anyone appear to be critically injured and in need of emergency medical help? Does anyone seem to need rescuing, such as people trapped or in immediate danger? Does anyone have obvious urgent basic needs, such as protection from the weather, torn clothing? Which people may need help in terms of accessing basic services and special attention to be protected from 	Know your role and try to get help for people who need special assistance or who have obvious urgent basic needs. Refer critically injured people to medical personnel or others trained in physical first aid.
	discrimination and violence?Who else is available around me to help?	
People with serious distress reactions	 Are there people who appear extremely upset, not able to move on their own, not responding to others, or in shock? Where and who are the most distressed people? 	Consider who may benefit from PFA and how you can best help.

People may react in various ways to a crisis. Some examples of distress responses to crisis are listed below:

- Physical symptoms (for example, shaking, headaches, feeling very tired, loss of appetite, aches and pains)
- Crying, sadness, depressed mood, grief
- Anxiety, fear
- Being "on guard" or "jumpy"
- Worry that something really bad is going to happen
- Insomnia, nightmares
- Irritability, anger
- Guilt, shame (for example, for having survived, or for not helping or saving others)
- Confused, emotionally numb, or feeling unreal or in a daze
- Appearing withdrawn or very still (not moving)
- Not responding to others, not speaking at all

- Disorientation (for example, not knowing their own name, where they are from, or what happened)
- Not being able to care for themselves or their children (for example, not eating or drinking, not able to make simple decisions)

Some people may only be mildly distressed or not distressed at all. Most people will recover well over time, especially if they can restore their basic needs and receive support such as help from those around them and/or PFA.

b. Listen

- Approach people who may need support.
- Ask about people's needs and concerns.
- Listen to people, and help them to feel calm.

Listening properly to people you are helping is essential to understand their situation and needs, to help them to feel calm, and to be able to offer appropriate help. Learn to listen with your:

- Eyes Giving the person your undivided attention
- Ears Truly hearing their concerns
- Heart With caring and showing respect

Steps:

Approach people who may need support:

- Approach people respectfully and according to their culture.
- Introduce yourself by name and organization.
- Ask if you can provide help.
- If possible, find a safe and quiet place to talk.
- Help the person feel comfortable; for example, offer water if you can.
- Try to keep the person safe.
- Remove the person from immediate danger, if it is safe to do so.
- Try to protect the person from exposure to the media for their privacy and dignity.
- If the person is very distressed, try to make sure they are not alone.

Ask about people's needs and concerns:

- Although some needs may be obvious, such as a blanket or covering for someone whose clothing is torn, always ask what people need and what their concerns are.
- Find out what is most important to them at this moment, and help them work out what their priorities are.

Listen to people and help them to feel calm:

- Stay close to the person.
- Do not pressure the person to talk.
- Listen in case they want to talk about what happened.
- If they are very distressed, help them to feel calm and try to make sure they are not alone.

c. Link

- Help people address basic needs and access services.
- Help people cope with problems.
- Give information.
- Connect people with loved ones and social support.

Frequent needs:

- Basic needs, such as shelter, food, and water and sanitation.
- Health services for injuries or help with chronic (long-term) medical conditions.
- Understandable and correct information about the event, loved ones and available services.
- Being able to contact loved ones, friends and other social supports.
- Access to specific support related to one's culture or religion.
- Being consulted and involved in important decisions.

Ending your help

When and how you stop providing help will depend on the context of the crisis, your role and situation, and the needs of the people you are helping. Use your best judgment of the situation, the person's needs and your own needs. If appropriate, explain to the person that you are leaving, and if someone else will be helping them from that point on, try and introduce them to that person. If you have linked the person with other services, let them know what to expect and be sure they have the details to follow up. No matter what your experience has been with the person, you can say goodbye in a positive way by wishing them.