IRCS (NHQ) E news letter Issue 01

10 Years Post Tsunami– Echoing the Beneficiaries

"I like working with Red Cross," Chakati Santoshi, volunteer for the IRCS Community Disaster Mobilization committee, Mogadalappadu Garamandal, Andhra Pradesh

"Ever since I started drying my fish in the smoking bins given by the Red Cross, the price at which I am able to sell them has significantly gone up."

Kasallama, fisherwoman, Baluspetta village in the East Godavari district of Andhra Pradesh.

"The water kept rising like a huge wall, no one knew where to run and there was widespread damage of boats and nets, the main components of our livelihoods."

Komara Paulamma, at the extreme left in the photo, also a part of the Community Disaster management Committee remembers the horrific landfall of the Tsunami, 10 years ago.

Under the FMR module, volunteers are trained for providing first aid, water, sanitation and hygiene promotion, public health and psychosocial support, search and rescue and management of dead bodies. At present IRCS has close to 5000 trained First Medical Responders throughout the country. Starting from the Uttarakhand landslide disaster in June 2013, Cyclone Phailin in 2013, Jammu & Kashmir floods in 2014 and Hud-Hud cyclone in 2014, the work and support of the FMRs is there for all to see. They reach out to rescue people, to assist with essential relief, provide clean drinking water, help authorities clear roads and help in rehabilitation.

The First Medical Responders has been unique module of the Indian Red Cross Society whose pilot programme was launched in Uttarakhand in 2011 and subsequently has been extended to 18 most disaster prone states of the country. An FMR is a person who is the first to provide first aid in emergencies to the community before external help arrives.

The FMRs are trained volunteers from amongst the community and are the first to respond to community needs in times of crisis and disasters.

NDRT Refresher Training

A 4 days refresher training and induction was held at the Bahadurgarh warehouse and Training Centre of the IRCS National Headquarters, from 15th till 19th March, 2015. Few of the participants were experienced NDRT members who were here to refresh their skills and others were new participants. 5 members of Vodafone India (which has supported IRCS relief operations in Uttarakhand and Odisha in 2013), also attended a part of the workshop for orientation in the Red Cross. The National Disaster Response Team (NDRT) is a cross sector disaster response team which was piloted in December, 2003 to strengthen the Disaster Response system of the Indian Red Cross Society. Refresher trainings for the experienced NDRT members and induction of new members are conducted by the IRCS National Headquarters every year.
The Case of the missing TB patients

There is a huge burden of missing TB patients in India. In addition, many people do not finish their treatment the first time after being detected and often develop resistance and convert to MDR TB patients.

It is estimated by the WHO that out of the 3 million missing cases of TB worldwide, India is home to at least one third i.e. 1 million such cases.

To concentrate on these missing TB cases, The Indian Red Cross Society, National Headquarters, recently received support from the Irish Red Cross Society, for the two project districts of Punjab, Amritsar and Ludhiana. In March this year, a screening camp for new TB patients in Punjab was organized which was attended by Mr. John Roche, Head of National Services and International Department, Irish Red Cross along with the Indian Red Cross Society and IFRC team comprising of, Dr. Veer Bhushan, Joint Secretary, Dr. Vanshree Singh (Director Blood Bank & Health Program- TB IRCS), Dr. K. Raizada, Senior Advisor IFRC and Dr. Jagbir Singh, Consultant Health Program IFRC. The IRCS is implementing TB Project-India in the states of Gujarat, Karnataka, Haryana, UP and Punjab, with the support of International Federation of Red Cross and Red Crescent Societies (IFRC) since 2009.

The role of this programme is complementary to the efforts of the Government. The IRCS volunteers are involved in holding screening camps, dissemination, ensuring that patients reach DOTS center for timely treatment, and facilitate their food supplements etc.

The Canadian Red Cross supported CBDRR programmes in Tamil Nadu, Andhra Pradesh and Telangana are coming to an end with great forays into developing the DRR capacities of around 61 coastal villages. Rather than being planned from the outset, the programmes evolved organically.

Following the Indian Ocean Tsunami of 2004, IRCS worked to rebuild and improve health services and livelihoods of affected villages through two separate projects. Towards the end of the programmes many assessments were made and simulation exercises held. The key successful aspects of the programme support have been Health & Watsan, building DM/DRR capacities, violence prevention, sustaining livelihoods and overall capacity building. Activities such as Community Based First Aid, Solid Waste Management, Simulations, Sketching of Community Maps on village walls etc. were part of the overall programme strategy. The programme began after the Tsunami in December, 2004 as a long term recovery programme and was implemented in various stages. It has benefitted more than one and a half lakh people till now.

ICRC Supports IRCS on a range of activities

“Together we are strong”, was the echoing sentiment at the recent state branch coordinators meet for the ICRC supported programmes. The ICRC supports many activities in 13 IRCS state branches. During the sessions, there is a continued focus on applicability/awareness of IHL, Budgeting, Safer Access, Youth and Junior Red Cross programmes and other areas of functionality which need capacity building. Addressing the session, Dr Agarwal, Secretary General, IRCS said that the main objective of the meet was to identify major gaps in functioning from the branches. Ms Mary Werntz, Head of, ICRC Regional Delegation based in New Delhi, appreciated the frank discussions held on a variety of issues while dwelling on finding the right solutions to accelerate success of activities. She also affirmed that the ICRC was here to support the IRCS in all ways possible.