

MINUTES OF THE ONE DAY “STATE LEVEL ADVOCACY WORKSHOP ON PLANNING AND MAINSTREAMING OF DISASTER RISK REDUCTION INTO DEVELOPMENT PLANNING AND PROGRAMMES” HELD ON 6TH SEPTEMBER, 2011 AT CONFERENCE HALL, HP SECRETARIAT SHIMLA ORGANISED UNDER THE GOVERNMENT OF INDIA-UNDP DISASTER RISK REDUCTION (DRR) PROGRAMME (2009-12).

1. The list of the participants is attached at Annexure A. The list of IEC and other material distributed to the participants is at Annexure B.
2. The brief summary of the presentations and discussions is as under:-

Inaugural Session

Welcome Address

3. At the outset the Principal Secretary (Revenue) welcomed Worthy Chief Secretary, Principal Secretaries, Resource Persons and participants of the workshop. While welcoming the Chief Secretary he outlined the objectives of the workshop. The issues of mainstreaming and integration of (DRR) would be discussed and strategies finalized in the workshop mainly for Health, Education and Rural Development sectors, he informed. He stated that we are all familiar with the preparation of rain damages memorandum and submission thereof to the Government of India which essentially is part of disaster relief but with the enactment of Disaster Management Act, 2005 the authorities are also responsible for risk reduction to reduce damages and losses. He hoped that the department of Health, Education and Rural Development would particularly be benefitted from today's workshop and would take initiatives towards DRR in their ongoing flagship programmes such as NRHM, SSA, MGNREGS, IAY etc.

Key Presentation

4. Sh G. Padmanabhan, Emergency Analyst, UNDP gave a brief description of the disaster management (DM) structure at the national, state and district level. Beyond the district level, he said, the structure has not been laid down by the DM Act, 2005 and has been left for the SDMA/DDMAs to work out their own arrangements. He stressed that the disaster management is not a function of DM department alone but of all departments and mitigation concern must be addressed by the respective departments in all aspects of development. The issue of DRR integration has also to be addressed in the DM plans at the State, district and department level.

He also highlighted the issue of DRR integration contained in the National Policy on Disaster Management, 2009. The Five Year Plan specifically contained the following provisions:-

- i) Do “no harm” approach;
- ii) Focus on integration of DRR in development
- iii) Finance Ministry has announced mandatory requirement to the effect that all new projects to be screened from a DM angle.
- iv) Multi-hazard profile needs to be considered while deciding the locations of projects
- v) Adequate mitigation features to be incorporated in in the ongoing programmes.

5. That the States as per the DM Act have been mandated to take measures for prevention/mitigation of disasters and to ensure that appropriate preparedness measures for integration disaster management into development plans and projects are taken and further allocation of funds for prevention, mitigation, preparedness for disaster and capacity building are also made available.

6. The UNDP has been assisting the Governments in shifting their approach from relief to managing and reducing disaster risk and sustainable recovery. UNDP played active role in 1993 Latur earthquake rehabilitation programme, 1996 National Capacity Building Project in Disaster Management, 1999 Orissa Super Cyclone recovery projects and post 2001 Gujarat earthquake in capacity building to avoid risk creation and conceptualized DRM Programme which was implemented in the country from 2002-09. And now through the DRR Programme (2009-12) the Authorities created under the DM Act, 2005 and the Governments are being assisted in disaster risk management in a holistic way.

Inaugural Address

7. While delivering the inaugural address Ms. Rajwant Sandhu, the Chief Secretary said that today’s workshop is extremely important which is being organized under the GOI-UNDP Programme. The theme of the workshop – schools and hospitals safe from disasters - is extremely important as the State is highly vulnerable to earthquake and other hazards. The DRR programme though small in terms of resources but it can act as a guiding factor and catalyst for disaster risk management in the State. While talking about the disaster management strict measures should be taken to ensure safe constructions and legislation as an option can be explored to prevent construction of any pucca constructions in flood plains. Besides adhering to safety standards while constructing buildings on slopes to reduce loss of life and property is important as Himachal Pradesh is prone to floods, landslides and earthquakes. She emphasized

upon the necessity to integrate Disaster Risk Reduction (DRR) in the development plans of all departments.

8. She made a mention to the recent Pong Dam flooding in Kangra district where encroachment on flood plain area led to the damage of private property and inconvenience to the residents. Tremendous damage to property constructed in flood plains was also witnessed in 1995 floods in Kullu valley. She further said that flood plains could be utilized for economic activities like cultivation etc but construction of houses especially pucca buildings in these areas could prove hazardous to life and property. She stressed upon the need to make people aware of the risks involved in construction of houses on slopes and other unsafe areas without taking into account proper precautionary measures. She said that knowledge should be disseminated up to district, block and village levels about preventions to avert fire accidents etc.

9. The Chief Secretary also stressed that Himachal is highly prone to earthquake hazard. 1905 Kangra earthquake caused unprecedented loss of life and damage to property. Earthquake resistant technology must be adopted while constructing buildings especially schools and hospitals. She said that efforts should be made to allocate funds for old buildings too so that weak structures could be strengthened. She underlined the importance of undertaking mock drills and distributing pamphlets in schools and all departments regularly to strengthen response mechanism and capacity building. Gram Sabhas could prove to be effective platforms for generating awareness at community level in this regard, she added, and department of Rural Development should take a lead in this direction.

10. At the end she desired that mitigation measures must be integrated with the existing schemes of Rural Development Department, SSA, RMSA, NRHM, NRDWM, PMGSY etc. Today's agenda is very useful to the Officers of the State and today's advocacy workshop should lead to concrete actions by all the departments concerned.

Technical Session 01: Strategy for Mainstreaming Disaster Risk Reduction (DRR) into the Development and Disaster Management Plans.

GOI-UNDP DRR Programme (2009-12) – Key Objectives.

11. Sh. D C Rana, State Project Officer gave a brief presentation about the GOI-UNDP DRR Programme (2009-12), its objectives, coverage and deliverables. The programme has two components – DRR and URR. DRR Project is being implemented in Kangra, Mandi and Kinnaur districts and URR Project is being implemented in Shimla City. One of the objectives of the programme is to assist the State Government in integrating and mainstreaming DRR into developing planning and process.

Illustrative examples as how DRR can be Integrated/Mainstreamed into ongoing Flagship Programmes (As per the Minutes of 2nd PMB Meeting chaired by Secretary Boarder Management, MHA, GOI).

12. He elaborated the concept of DRR mainstreaming with main flagships programmes of the Govt. with illustrations. Mainstreaming Disaster Risk Reduction in the Development and Disaster Managements Plans is also an important mandate of the Disaster Management Act 2005 and is also one of the important deliverable of the GOI-UNDP Disaster Risk Reduction programme and the Urban Risk Reduction project. Approaches for mainstreaming: There are three suggested approaches of mainstreaming disaster management into the development process and disaster management plans-

1. Structural Measures
2. Non Structural Measures
3. Disaster Mitigation Projects

13. Based on the suggested approaches the specific action would involve:-

- a. Adopting a Sectoral approach and identification of Key sectors for mainstreaming.
- b. Within each sector, key programmes/projects would have to be indentified.
- c. This has to be followed by indentifying the entry points within the programmes/projects for integration.
- d. It would also involve work at the policy and planning level be it national, state and district level.
- e. It would also need a close coordination with State Planning Commission and Finance Department for promoting DRR into all development programmms and involve working with different departments to mainstream DRR into the Departmental Plans and policies.
- f. Advocacy would have to be done for allocation of dedicated budget for DRR within the Departmental plans.
- g. Further appropriate guidelines for different sectors would have to be development and for it to be effective and sustainable it has DRR would have to be ultimately integrated to the development plans of various departments at the district and sub-district levels.

14. More specifically, as mentioned in the agenda some of the following flagship programmes for Government of India could be used as an entry point for mainstreaming the DRR in development plans and the following steps may be undertaken:-

Sl. No.	Name of The Programme	Department/ Sector	Proposed Strategies for DRR Integration into the Flagship Programmes
1.	Indira Awas Yojana	Rural Develop ment	i. Inclusion of such measures like application of Hazard resistant design in construction of IAY houses, appropriate sitting of IAY housing in guideline of IAY ii. Development of model design for IAY houses which could be easily referred to by DRDAs at district level and used for community awareness depending on the geographical location.

			<ul style="list-style-type: none"> iii. Capacity Building of Rural masons on safe construction. iv. Capacity Building of PRIs. v. Community Awareness. vi. Capacity Building Programmes for DRDA officials on Disaster Risk Reduction issues.
2.	Mahatma Gandhi National Employment Guarantee scheme	Rural Development	<ul style="list-style-type: none"> i. Utilisation of MGNREGS funds to reduce the vulnerability of Panchayat vis a vis natural hazards such as landslide, drought, forest fire, cloud burst, flash floods, earthquake etc. ii. Giving priority to those works which reduce the vulnerability of area over the works which enhances the vulnerability of the area to natural hazards. iii. Identified works are available which take into account the hazard profile and offer continuous employment opportunities in the event of disasters to ensure livelihood security in the event of disasters. iv. Works which reduce disaster risk are given priority in plans-such as local mitigation works etc. v. Any other implement able suggestion within the ambit of the scheme.
3.	Pradhan Mantri Gram Sadak Yojana	PWD	<ul style="list-style-type: none"> i. The Master Plan for rural roads, the district rural road plan and identification of core network under the planning process of this scheme should, which the overall guidelines of its preparation, explicitly address the disaster risk reduction concerns and accord priority to connect the vulnerable habitations. ii. The technical guidelines should explicitly provide for suitable protection and inclusion of disaster risk concerns explicitly - while provision of cross drainage, slope stabilization, protection works are already included, in multi-hazard and especially flood and landslide prone areas fair weather roads need to be upgraded on a priority basis. iii. The maintenance guidelines are modified to ensure that in case of disasters these roads get provision for restoration to ensure all weather connectivity.
4.	Sarva Siksha Abhiyaan	Education	<ul style="list-style-type: none"> i. Development of a Policy paper of school safety. ii. Introducing school safety as a part of the guidelines of SSA which is currently focusing on inclusive development. iii. Developing model structurally safe designs for schools. iv. Introducing School Safety in the Teacher's Training Curriculum. v. Training of Rural Engineers appointed under SSA Scheme as well as the SSA State Coordinators. vi. Training of masons in rural areas. vii. Construction of Technology Demonstration Units. viii. Community Awareness.
5.	Jawahar Lal Nehru Urban Renewal Mission	Urban Development	<ul style="list-style-type: none"> i. Strengthening of the compliance mechanism at the detail project report submission and appraisal stage in case of infrastructure projects as well as housing scheme to ensure structural safety. ii. Emphasis on disaster risk audit at the stage of preparation of detail project reports. iii. Inclusion of amending of building byelaws to ensure structural safety as a mandatory reform in the Mission cities to ensure safe habitat development.(Both structural safety and fire safety norms). iv. Inclusion of disaster management as a function of the Urban Local Bodies

			<p>and allocate resources.</p> <p>v. Inclusion of Disaster Resistant features in the houses being constructed under the BSUP component as well as promote development of safe habitat.</p> <p>vi. Inclusion of strategies for disaster management in the City Development Plans.</p> <p>vii. Training and Capacity Building Programmes for municipal officers on disaster risk reduction.</p>
6.	Rajiv Awas Yojana	Urban Development	<p>i. Since Rajiv Awas Yojana is focusing on developing slum free cities and Capacity Building and Community Mobilization is also an important component of RAY, through this programme attempts can be made towards community level disaster preparedness as slum dwellers often become the most vulnerable community during such disasters as floods, fire and high wind speed. The 30 cities selected on a plot basis can be targeted to initiate community based disaster preparedness activities.</p> <p>ii. Also the Housing Programmes to be implemented in these selected cities can ensure incorporation of hazard resistant features and safe sitting.</p>
7.	National Rural Health Mission	Health and family welfare	<p>i. Ensure that the village Health Plan and the District health plan explicitly address the disaster risk reduction concerns in the vulnerable habitations and the vulnerable districts and the disaster management plan as per DM Act 2005 takes links itself to the District and village Health plans.</p> <p>ii. Provide training to the ASHA workers on disaster health preparedness and response.</p> <p>iii. Strengthening of Disease Health Surveillance System in rural areas.</p> <p>iv. Ensuring structural safety of the CHC/PHC and other health care service delivery centers in rural areas.</p> <p>v. Training of doctors and hospital staffs on mass casualty management and emergency medicine.</p> <p>vi. Community awareness on disaster management.</p>

Mainstreaming DRR into Development Planning – Approaches, Issues and Challenges

15. Sh. G Padmanabhan, in this session through presentation showed as how disaster and development are inter-linked. Disasters are basically unresolved problem of development. Development can increase vulnerability. Development can reduce vulnerability. The outcome rests on developmental choices. The seeds of disasters are often sown in development patterns: poor land use planning, environmental management and lack of regulatory mechanisms. It is due to this reason that despite having almost similar exposures disaster has greater impact on humans in developing or low developed countries than the developed countries. Therefore, disaster risk can best be addressed through integrating into the developmental planning, programmes and processes.

16. Mapping of hazards, identification of elements at risk and exposure data assist in quantifying risk. Thereafter risk reduction initiatives can be taken. Mainstreaming DRR is a

prerequisite for safe and sustainable development. Mainstreaming as a term is used to describe the consideration of DRR elements in national and regional decision making process (Policy, planning and budgeting etc.). DRR integration leads to addition of specific measures to the development plans, programmes and strategies. Some of the key sector where mainstreaming/integration of DRR can be done with illustrations is as under:-

a) Public Infrastructure:-

- i) Incorporate disaster risk impact assessment as a part of the planning process before the construction starts.
- ii) Site analysis and risk sensitive land-use planning (either avoid development in hazard prone areas or adopt treatment and mitigation measures)
- iii) Strengthen compliance to the various provisions of the codes – set up hazard safety cell for advice and monitoring
- iv) Disaster resistant technologies mandatory in case of all construction using public/corporate funds.
- v) Training and capacity building of the department and functionaries.

b) Housing – Rural and Urban

- i) Application of hazard resistant designs
- ii) Prepare construction guidelines for rural areas, Nagar Panchayats and Municipal Councils.
- iii) Amendment of Building bye-laws, Zoning regulations and Development Control Regulations.
- iv) Strengthening the enforcement of techno-legal and managerial regime.
- v) Training of masons, engineers, architects, contractors, promoter and builders.
- vi) Sensitization of the banking and financial institutions.
- vii) Promotion of disaster insurance in housing sector.
- viii) Having a housing reconstruction policy.

c) Health Sector

- i) Ensure hospitals and health facilities are not located in hazard-prone areas.
- ii) Analyze the internal and external vulnerabilities of existing health care facilities during emergencies.
- iii) Retrofitting of the critical hospitals.
- iv) Prepare and implement hospital preparedness plan.
- v) Training of doctors on mass casualty management, trauma care and emergency medicine.
- vi) Training of health workers on emergency preparedness and response.
- vii) Strengthening of disease surveillance system.

d) MGNREGS – Scope of work – Some illustrations

- i) Water conservation and water harvesting;
- ii) Drought proofing, including forestation and tree plantation;
- iii) Irrigation canals, including micro and minor irrigation works;
- iv) Plantation and horticulture;
- v) Renovation of traditional water bodies, including de-silting of tanks;
- vi) Land development;
- vii) Flood-control and protection works, including drainage in water logged areas; and
- viii) Rural connectivity to provide all weather access.

e) Indira Awas Yojna

- i) Study IAY housing typology and develop hazard resistant model design (taking into consideration of available local materials and culture).
- ii) Training of DRDA officials and engineers.
- iii) Awareness generation among villagers and PRIs members and community mobilization campaign.
- iv) Construction of sample IAY units for promoting the technology.
- v) Training of Masons and community members on hazard resistant technology.

17. He also discussed the challenges in mainstreaming the DRR. Those challenges can be overcome with the awareness and capacity building of the functionaries. He also stressed to look at DM as multi-sectoral discipline as it is not only the responsibility of disaster management department. There is need to improve the enforcement mechanism. The issue of last mile connectivity also needs to be addressed. There is also need of adequate platforms for sharing of knowledge and information.

Technical Session 02: Integration of DRR into Education, Health and Rural Development Sectors – Illustration and Experience Sharing

Education and Health Sector: Key Speaker Sh. Hari Kumar, National Coordinator, Geohazard International

18. Sh. Hari Kumar National Coordinator, Geohazard International shared his experiences of DRR in education and health sector. According to him DRR essentially consists of - i) increasing capacity – awareness generation, training of architects, builders, contractors, designers, engineers, financiers, Government functionaries, homeowners, community ...everyone, ii) decreasing vulnerability – enforcement of building codes and bye laws in new construction,

structural mitigation – retrofitting and falling hazard mitigation of existing buildings. The purpose of DRR is also to ensure that the hospitals and other critical facilities not only survive the disaster but also remain functional.

Schools Safe from Disasters

19. Few would disagree that our children deserve the right to a safe education yet time and again we fail our children with unsafe schools. Schools are vulnerable to disasters and in the past thousands of children have been killed/injured in schools and large number of school buildings have been damaged or destroyed during disasters (For reference please refer to Annexure C). School safety is important because children are the most valuable segment of any culture or society since the future rests in their hands. Moreover, children, the ill and the elderly are generally the most vulnerable segments of society. Children have no choice when they are exposed to unacceptable high levels of risk in their school buildings. School which are unprepared to face disaster respond with fear, panic, disorder, confusion, lack of proper response and unnecessary consequences. On the other hand schools which are prepared have less fear, fewer loss of life takes place, injuries are prevented, evacuation is organized and devastating consequences of disasters are reduced and lives are saved. According to him the steps for safe school are:-

- i) Basic disaster awareness and sensitization;
- ii) Conduct hazard hunt and secure hazards at school (structural and non-structural);
- iii) Preparedness of Emergency Preparedness Plans;
- iv) Conduct of Mock drills to test the plans and organized response;
- v) Discuss emergency plan with parents;
- vi) Link school safety with community, SMC, PTAs etc. and
- vii) Discuss earthquake safety at home.

20. He further stated that Himachal Pradesh has over 44% land are in Seismic Zone V and the rest in Zone IV. Earthquakes will cause injury, loss of life, disruption and economic damage related to schools. There are thousands of children in schools who may be in danger. If no action is taken, the problem will only get worse due to population growth and redistribution and our greater emphasis on “Education for All” initiatives. That each unsafe classroom added to our building stock will put 40-50 more children at risk.

21. That we have responsibility to provide a safe learning environment for children and methods are available for assessing the seismic risk of school buildings and cost effective

approaches exist for reducing this risk within a reasonable time frame. Now having significantly raised awareness on Seismic safety issues, we have now a unique opportunity to make a significant difference in the safety of schools children throughout the State. He had the following suggestions for mainstreaming actions for school safety:-

- a) Establish clear and measurable objectives for school seismic safety that can be implemented and supported by the community with timeline.
- b) Define the level of earthquake hazard and establish norms for school buildings in each zone.
- c) Set forth expectations or objectives that define the desired ability of school buildings to resist earthquakes – All school buildings designed, constructed or retrofitted to prevent collapse and prioritize school buildings with pre-defined post-earthquake roles should remain functional.
- d) Address all schools regardless of the ownership – private or public.
- e) Give initial priority to make new schools safe. A longer timeframe should be established to correct seismic weakness of existing school buildings – set standards for new schools and assess the existing school buildings.
- f) Establish programmes as long-term undertakings with a strong commitment to sustained effort rather than one-time action.
- g) Adopt multi-hazard approach to school safety with earthquake mitigation strategies that complement and enhance disaster counter-measures for other hazards.
- h) Employ advisory committees as needed to assure that policy and technical decisions are consistent, and to provide long-term independent support and evaluation to the State for the seismic safety effort.

Hospitals Safe from Disasters

22. When it comes to disaster mitigation, hospitals need special attention due to the vital functions they perform, their high level of occupancy, and the role they play during disaster situation. But time and again, these facilities fail the communities they were to serve in the most critical “golden hours”. (For reference see Annexure D). Mr. Hari Kumar also elaborated the aims and objectives of DRR mainstreaming into health sector. According to him the objectives includes – i) to protect lives of patients and health workers by ensuring that the structural resilience of health facilities; ii) to improve the risk reduction capacity of health workers and institutions; and iii) to ensure health facilities and services continue to function in the aftermath of emergencies.

23. That in case of hospitals structural mitigation is important. But earthquake resistant hospital buildings are not enough for the facilities to remain functional. The non-structural elements – all those other elements that without forming part of the structure, but enable the

facility to function such as equipment, services or lifelines - also need to remain operational. The main ingredients for a functional hospital are:-

- safe buildings,
- hospital staff is safe and prepared,
- medical equipment are functional,
- utility system is functional,
- communication is functional and
- supplies are available.

24. And the questions which health facility administrators must ask from themselves:-

- 1) Is there any earthquake hazard where we are?
- 2) Are our hospital buildings safe?
- 3) What can be done to reduce earthquake risk in existing hospital buildings?
- 4) Do we need retrofitting? What performance are we looking at?
- 5) How do we increase our capacity for effectively responding to emergencies involving mass casualties?
- 6) How safe are our equipment?

Disaster Risk Reduction in Tripura in Rural Development Sector

25. Mr. Sarat Kumar Das, State Project Officer Tripura shared the disaster management structure and system which is in place in Tripura. SDMA in Tripura is fully functional DDMPs at all levels have been prepared. EOCs are functional 24 x 7. The resources are being managed through web-based networks.

Integration of DRR issues in IAY scheme has been done as under:

- i. Proposal submitted to GOI for increasing of funds IAY scheme to construct Earthquake resistant structure for the poor BPL families. 4 models sent which support reduction of high risk factors are:
 - a) G.C sheet walling with RCC post, Est. Cost=Rs.60,641.00
 - b) G.C sheet walling & wooden post, Est Cost=Rs.58,471.00
 - c) CK Bamboo walling with RCC Post, Cost=Rs.64,470.00.
 - d) RCC frame structure with concrete room, Cost=Rs.1,15,000.00
- ii. Construction of mud wall houses under IAY has been stopped.

- iii. But the cases where the shortage of existing fund, concept of bamboo rafting inside mud wall, cross bracing between corners of the top walls, iron wire stitching between roof and wall for better protection from disasters are being taken up. 5000+ structures already been constructed by 2009.
- iv. Demonstration model of Bamboo Houses (20nos.) at District level have been constructed for popularization and adoption.
- v. And requested NMBA to construct 200 numbers of dwelling Houses in rural sector using bamboo strips, chicken mesh and clay cement as they developed low cost EQ resistant technology for demonstration, awareness and adoption during 2011-12.
- vi. Hazard zone specific IAY construction practices are being used.
- vii. To facilitate rural beneficiaries for construction of safe houses, local masons and helpers are being trained at Block HQs. Till date about 500 masons have been trained by the department.
- viii. IAY house with brick foundation/GCI Sheet walling tied with 3nos. of 25mmdia BIP horizontal battened by J or L hook and 40mm BIP corner & middle post with tubular truss & G.C sheet roofing has been introduced to reduce the risk factor and is being constructed widely throughout the state as desired by beneficiaries. Estimated cost Rs.56100.00 in/c smokeless chulha & bore hole latrine. Beneficiary contribution is Rs.7600.00.
- ix. Construction materials like G.C. Sheet, BIP, Cement, Rod etc., as per BIS norms are being departmentally purchased and supplied to ensure quality.
- x. Initiative has been taken for introducing of term insurance of properties / beneficiaries under this scheme.

Integration of DRR issues in MGNREGA scheme for Road (from formation to brick soling) as under:

- i. Alignment of road as per guidelines and specification of PMGSY is being maintained.
- ii. Training of Engineers/ TA / Masons is being organized in regular manner for capacity building under Disaster management programme.
- iii. Supplying of standard **Fist aid box** has been ensured under MGNREGA to all the panchayats/villages First Aid Teams.
- iv. Selection of shortest route for alignment of road for smooth evacuation and rescue operation during disasters.
- v. Involvement of PRI bodies during selection of route/ site/ land acquisition is being maintained including awareness generation among beneficiaries.

- vi. Construction of village road width will be minimum 3.0 mtr. and other all roads to connect village to village will be minimum 4.5 mtr.
- vii. The camber on straight section of road should be a) Earth road – 5%, b) WBM road – 4%.
- viii. Maximum effort is being made to cover all the habitation with road connectivity from MGNREGA fund.
- ix. Cross drainage, stream, channel, low land areas are being avoided as much as possible while taking alignment.
- x. Quality works is being ensured with proper supervision/monitoring/ evaluation.
- xi. Flat brick soling work with both side edge brick soling has to be maintained with quality of works.
- xii. Earth cutting alignment in construction of hill roads should not be more than 45 deg. Proper drainage system retaining wall provisions have been ensured during designing of the road in the scheme.
- xiii. Plantation on road sides has been included in the process.
- xiv. 300+ Bharat Nirman Volunteers have been trained on CBDRM under the scheme.

The SPO also shared other efforts in DRR Mainstreaming in his State, the detail of which is as under:-

- a) Soil testing is must for construction of RCC buildings/ public constructions.
- b) 39 Helipads have been constructed by the Department at all district/ sub-division/ block HQs for carrying out S&R and relief operation during any disasters. The Helipads are being used and maintained by Transport Department and Health Departments during normal time.
- c) Collaboration with L&T made for training of unemployed local youth on Masons training. Already 68 youths trained in L&T training center at Howrah and Chennai during 2010-11 (for one year). More 88 youths will be trained during 2011-12.
- d) A state wide database has been created for registering masons and local artisans which may be seen at <http://www.tsu.trp.nic.in/eshramik>
- e) PRTI has been strengthened for providing specialized CBDRM trainings for PRI members. Till date, 7 (263 nos.) batches already been trained. Besides this, one hour session on DM is being taught in each training.

Concluding Session

View of the Participants

26. The session was coordinated by Sh. R K Sood, Consultant cum Advisor SDMA. The summary of view of the participants is as under:-

- a) Sh. Rakesh Kanwar, MD, NRHM stressed upon the need to have practical training on disasters and regular mock drills. In Health sector institution specific plans should be made and contribution for this can come from NRHM and supplement the efforts of various agencies. He also said that we need to focus on communities and functionaries and train them as first responders. In order to make the hospital safe self-certification procedures can be prescribed and time line can be set for this. The initiative of the SDMA is welcome and the Health department will sit together and see how they can look into the issue of mainstreaming and what more can be done.
- b) Ms. Anita Rao, Advisor Education said that training of teachers and students would be needed for safe schools. Students of NSS and NCC can be roped in for mock drills. The PTA should be associated in school safety initiatives. Students can be given project works on disaster management to educate them about the subject. The construction of safe buildings needs serious attention. In the school safety we should also look into the public schools too.
- c) Ms. Santosh Banial, OSD Colleges and Nodal Officer DM, Department of Higher Education stated that school safety committee needs to be constituted and school teachers require to be trained. Recently the department in association with the HIPA conducted TOT of College lecture in which 21 College Lecturers were trained. Recently, fire extinguisher have also been installed in the schools. She stressed on the need of getting the school buildings designs signed by the Engineers and checking of soil strata before undertaking any construction.
- d) One of the participant stated that availability of land is an issue in construction of schools as a result of which there is compromise with the construction of school buildings. There is also need to standardizing the building drawings and funds should be allocated on the basis of actual estimate. Involvement of architect should be done.
- e) It was also opined that technical expertise at the lower level is lacking as a result of which it is not possible to construct earthquake resistant school buildings. Non-availability of trained masons is also a bottleneck.
- f) Sh. Gopal Sharma, Additional Secretary SAD was of the view that strong enforcement mechanism needs to be put in place and violations should be visited with penalty. Unsafe multi-storied structures should not be allowed to come up.
- g) Sh. G. Padmanabhan, Emergency Analyst, UNDP said that DRR is a long and slow process. The State needs to prioritize where to start with and what to do first.
- h) Sh. Hari Kumar, National Coordinator, Geo-hazard International expressed his concern about the exclusion of private schools from the purview of School Safety Programme and opined that all schools – Govt. or private- should be taken in the programme as safety is issue for all. The construction of private institutions also requires to be checked and regulated.
- i) Sh. R K Sood, Consultant cum Advisor SDMA concluded the discussion with the remarks that there is need to look into the issue of DRR integration in a time bound manner and we must work towards making our schools and hospitals safe from disasters.

Concluding Remarks

27. Sh. Deepak Sanan, Principal Secretary (Revenue) thanked the participants, and resource persons to participate in the day long workshop. Disaster management is about behavior, mindset change, community involvement. Changing collective behavior is important to make an impact. It is also about how do we confront the challenge of mis-governance. Compliance comes only when significant number of people believe then we cross the Rubicon. And the outcome of proposed HRVA and KAP studies would assist us in making a dent in collective behavior. He hoped the participants must have been benefitted from today's workshop. That the Departments of Health, Education and Rural Development would find it easy to look into the DRR mainstreaming issues into their flagship programs the instructions of which have already gone to them through Revenue Department as proceedings of the State steering Committee headed by the Chief Secretary.

28. At the end Sh. Gopal Chand, Joint Secretary (Revenue) thanked the participants, and the Resource Persons for attending the workshop.

Sd/-
Principal Secretary (Revenue) to the
Government of Himachal Pradesh

Endorsement No.

Dated: the 14th September, 2011.

Copy forwarded for information and necessary action to:-

1. Sr. Private Secretary to the Chief Secretary to the Government of Himachal Pradesh.
2. All the Additional Chief Secretaries to the Government of HP.
3. Sr. Private Secretary to the Principal Secretary (Revenue) to the Government of HP.
4. All the Principal Secretaries/Secretaries to the Government of Himachal Pradesh.
5. All the Deputy Commissioners, Himachal Pradesh.
6. Director Rural Development, SDA Complex, Kasumpti, Shimla.
7. Director Higher Education, Lalpani Shimla.
8. Director Elementary Education, Lalpani Shimla.
9. Director Health Services, Directorate Health and Family Welfare, SDA Complex, Shimla.
10. Mission Director, NRHM, Directorate of Health and Family Welfare, SDMA Complex, Shimla.
11. State Project Director, SSA, Directorate Elementary Education, Lalpani, Shimla.
12. All the participants.

Sd/-
Joint Secretary (Revenue) to the
Government of Himachal Pradesh.

State-level Advocacy Workshop on Planning and Mainstreaming of Disaster Risk Reduction

On 6th of September,2011 at Conference Hall, HP Secretariat, Shimla

under the 'Government of India - UNDP Disaster Risk Reduction Programme (2009-12)'

#	Name	Designation	Department	Cell No.	Email
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Annexure -B

The following I.E.C. items were provided to the participants-

To all the Participants

- 1) Disaster Management Act, 2005
- 2) Earthquake Preparedness Guide
- 3) Earthquake Safety of Masonry Building in Zone-IV
- 4) Typical Design of Masonry Building for Zone III, IV & V
- 5) Hospitals and School – a chapter from the Bhuj Earthquake Reconnaissance Study.
- 6) CD Containing department specific reference material as per the Annexure E.

To the Key Participants of Respective Departments and District Representatives:

In addition to the above the following material was also given

- 1) Education Department – Book on Keeping Schools Safe in Earthquakes, NICEE Publications. (Education Department only)
- 2) Reducing Earthquake Risk in Hospitals, Geohazard International Publication. (Health Department only)
- 3) Seismic Safety on Non-Structural Elements and Contents in Hospital Buildings (Department of Health only)
- 4) Model School Designs for Construction in Various Seismic Zones of India. (Education and Rural Development Department)

Annexure - C

Summary of Some Key Past Disaster and School Centric Damage including loss of life and Infrastructure

Sr. No.	Location	Date	Disaster	School Centric Damage
1.	Dabwali, Haryana.	December, 1995	Fire during a school prize distribution ceremony	425 deaths, most of them school children
2.	Bhuj, Gujrat	26 th January, 2011	Earthquake	971 school children and 31 teachers died, numerous more injured, 1884 school buildings collapsed 11761 school buildings suffered major to minor damages, 5950 classrooms were lost and 36584 classrooms became unfit for use
3.	Saraswati Nursery School, Kumbhkonam, TN	July, 2004	Fire	93 children burnt alive.
4.	South/South East Asia	December, 2004	Tsunami	Indonesia – 765 to 1151 severely damaged or destroyed schools Sri Lanka – 51 schools completely destroyed, 100 were partially damaged. Maldives – 44 schools were destroyed or damaged – a huge percentage of the total. Thailand – fewer than 30 schools were damaged and very few destroyed. India – 358 schools were destroyed or damaged.
5.	Muzzafarabad, Pakistan	October, 2005	Earthquake	16000 children died due to collapse of school buildings.
6.	Sichuan, China	May, 2008	Earthquake	7000 inadequately engineered schoolrooms collapsed in the earthquake. 19,065 identified school children died, hundreds disabled and hundreds missing.

Annexure – D

Damage to Health Facility during Bhuj Earthquake, 2001

Facilities	Destroyed	Damaged
Districts/Taluka Hospitals	5	26
Community Health Center (CHC)	21	46
Primary Health Center (PHC)	48	118
Sub-centers	227	357
Integrated Child Development Scheme (ICDS) Anganwadis (Kindergartens)	800	2180
Chief District Project Officers office	11	4
Go-downs (warehouses)	6	4
Ayurvedic/homeopathic dispensaries	110	8
Medical colleges and specialty hospitals	-	15

(Source: Department of Health and Family Welfare (DOHFW) , Government of Gujarat)

Annexure - E

Material Distributed in Soft form to the Participants

For Department of Rural Development

Disaster Management Plans :-Format of Block, GP DMPs & Village Profile

Training Manuals: i) GP DM Training Manual – UNDP; ii) Building PRI Capacitates for Disaster Preparedness and Management – A Training Manual – UNDP; iii) Reading Material for Training of Trainers - UNDP

Other Material: i) Reading Material on CBDRM; ii) Model School Design for Construction in various Seismic Zones of India – MHA; iii) Disaster and Development; iv) DRR Mainstreaming Toolkit; v) DM Act and Notifications

For Department of Education

DRR Mainstreaming in Education: A Toolkit: i) Mainstreaming DRR in Education – ADPC; ii) Towards a Culture of Prevention: DRR begins at School – Good Practices and Lessons Learned – ISDR; iii) Guidance Notes on Safe School Construction – ISDR & WB; iv) Let Our Children Teach Us – A Review of the Role of Education and Knowledge in DRR – ISDR; v) Model School Design for Construction in Various Seismic Zones of India – MHA; vi) Risk land – Let's Learn to Prevent Disasters – ISDR; vii) Colouring Activity Book – Disaster Preparedness – MHA; viii) School Safety – MHA.; ix) Disaster & Emergency Preparedness: Activity Guide for K to 6th Grade Teachers – IFC (WB Group); x) Disaster and Emergency Preparedness: Guidance for Schools – IFC (WB Group); xi) Keeping Schools Safe in Earthquakes – OECD; xii) Instructor Guide for Student Sensitization Sessions – GHI; xiii) Instructor Guide for Teacher Sensitization Sessions – GHI; xiv) Student Guide for Volunteer Training Course – GHI; xv) Non-Structural Risk Reduction Handbook for Schools – Delhi Government.

Other Material: i) Disaster & Development; ii) Toolkit on DRR Mainstreaming; iii) DM Act and Notifications

For Department of Health

DRR Mainstreaming in Health - A Toolkit: i) Hospital Safe from disasters – ISDR, WHO & WB; ii) Hospital Safety Index – Guide for Evaluators - WHO; iii) Hospital Safety Index – Evaluation form for safe Hospitals - WHO; iv) Hospitals should be Safe from Disasters - WHO.

NDMA Guidelines: i) Management of Biological Disasters; ii) Management of Dead in the Aftermath of Disasters; iii) Management of Earthquakes; iv) Medical Preparedness and Mass Casualty Management; v) Management of Nuclear and Radiological Emergencies; vi) Psycho-social Support & Mental Health Services in Disasters; vii) Management of Chemical (Terrorism) Disasters.

UNDP Guidelines: i) Guidelines for Hospital Emergency Preparedness and Planning; ii) Seismic Safety of Non-Structural Elements & Contents in Hospital Buildings.

Other Material: i) Disaster & Development; ii) Toolkit on DRR Mainstreaming; iii) DM Act and Notifications