“Training on Essentials in Humanitarian Response and Disaster Risk Reduction-Kolkata”

Venue: YWCA, Kolkata

Dates: 15-16th January 2014.
**Dates:**
*15th and 16th January 2014*

**Duration:**
*2 days (residential)*

**Venue:**
YWCA, Kolkata

**No. of Participants:**
35

**Facilitators:**
- Mr. Manoj Dash, State Coordinator, Sphere India
- Dr. Henna Hejazi, Focal Point-Training & Capacity Building, Sphere India
- Biplab Chakraborty, Programme Officer, ADRA India
- Isita Ray, Programme Officer, WWF

**Training Coordinator:**
Dr. Henna Hejazi

**Report compilation:**
Dr. Henna Hejazi
Background:
Compassion is a Christian organization working on child development in Eastern India. Compassion is successfully running a child development model which includes the child survival programmes to address infant mortality and malnutrition and various child sponsorship programmes. Compassion envisages a world in which all needs of children (spiritual, economic, social and physical) are addressed including releasing all children from poverty.

Much of Compassion work has been conducted under conditions of change – frequent disasters, rising population densities, deteriorating natural resources, and increasingly uncertain and unpredictable climatic conditions. During their interventions, Compassion has felt the need to include disaster response and risk reduction programming, as part of the overall development strategy of the organization along with a strategic need to build the capacity of their staff and partners.

In view of the growing interest, Sphere India has joined hands with Compassion to host a Basic Training in “Essentials of Humanitarian Response and Disaster Risk Reduction” in Kolkata with an aim to develop capacity of the Compassion staff and partners, to share their knowledge and promote good practices in DRR and mainstream DRR in development planning.

The programme schedule is attached as Annex 1

This is the first phase of training to the Compassion India partner staff. In the coming months Compassion as part of their nutrition interventions, has also expressed the need to train their staff in Nutrition in Emergencies and other thematic areas including Psychosocial care for children.

Objectives:
- To develop capacity of Compassion staff and partners in Kolkata in disaster risk reduction and Humanitarian Response.
- To mainstream Disaster Risk Reduction in Development Planning.
- To develop a Module/Course booklet in “Essentials of Humanitarian Response and Disaster Risk Reduction” for Compassion partners in Kolkata.

Output:
- 35 Compassion staff and partners in Kolkata trained in Disaster Risk Reduction and Humanitarian Response.
- DRR mainstreaming in developmental planning.
- Course Module for partner staff to be used as a training tool in the field.

Day 1:
Session Observations: Facilitator: Dr. Henna Hejazi

Session Objectives:
At the end of the session the participant will be able to:
- Get introduced to the broader objectives of the training
- Establish their expectations from the training
- Adhere to ground rules during the course of the training.
- Form six training groups
- Asses their understanding of DRR and Humanitarian Response

Topics covered:
- Background
- Course overview
The day started with the Registration of participants. 36 participants attended the training programme. The list of participants is attached as Annex 2.

The registration process was followed by the prayer session.

Introduction to the Course (Ground rules, expectations, group formation):

The opening session by Solomon David gave a brief background of the training programme and explained its need in humanitarian work. Dr. Henna, Sphere India, welcomed all the participants to the training programme and complimented them on their hands on experience from the field. She was enthusiastic that the training will meet its objectives and outcomes. The session started with an introduction to the course and its conceptualization with Compassion team. The participants were taken through each session of the programme schedule and its broader objectives.

The Ground rules were set through brainstorming with the group. The agreed ground rules were noted on a flip chart and kept on display inside the training hall. They included the following

<table>
<thead>
<tr>
<th>Do’s</th>
<th>Don’t’s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mobile on silent</td>
<td>Avoid criticism</td>
</tr>
<tr>
<td>Adherence to time</td>
<td>Avoid side talk.</td>
</tr>
<tr>
<td>Respect to all participants and each others views.</td>
<td></td>
</tr>
<tr>
<td>Give equal opportunity to all.</td>
<td></td>
</tr>
<tr>
<td>Time managers appointed</td>
<td></td>
</tr>
<tr>
<td>Soft punishment for those who violate ground rules</td>
<td></td>
</tr>
</tbody>
</table>

Each participant was asked to write down his/her expectation from the training. The expectations included the following

- What is DRR?
- Reporting of DRR
- Prevention
- Support of Government agencies
- Basic need for relief
- How to take part in disaster response?
- How to plan?
- Post disaster response?
- How to ensure safety during disasters?

The Logistic details were provided by Arnab Mandal, to the participants including timing and venue for Tea, Lunch and Dinner. Some other facilities within the Hostel were also discussed with the participants.

This was followed by an ice breaking exercise wherein the participants were made to form a circle with one participant introducing his/her co-trainees (who had preceded giving their introductions) by their names followed
by his/her own name. This exercise helped the participants and training team in remembering the name of each participant.

At the end of the exercise participants were made to form four groups. While explaining the concept of group formation, all the groups were encouraged to share their individual learning within the groups and evoke healthy discussion during the group exercises.

Following were the designated groups and group members

<table>
<thead>
<tr>
<th>Group</th>
<th>Group name</th>
<th>Group members</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Minto Fresh</td>
<td>Stuti,ramesh,dibakara,subas,hapan,asis,bhibu,anup</td>
</tr>
<tr>
<td>2</td>
<td>Jellicious</td>
<td>Pranab,dilip,dipak,chinmoy,tapan,caleb,manthan,maniklal,mohan</td>
</tr>
<tr>
<td>3</td>
<td>Phailin</td>
<td>Nirjhar,swapna,jyotiranjan,rita,dekhit,kumar,jayanta,Pankaj,dhiren</td>
</tr>
<tr>
<td>4</td>
<td>Lacto disaster</td>
<td>Prabodh,pandu,sagar,samar,barun,manan,anugraha,prem</td>
</tr>
</tbody>
</table>

Besides a time manager was chosen to ensure the facilitators stick to their time schedule and to give gentle reminders to participants for coming back to the training hall at the end of each break.

This session was followed by a pre-assessment of the participants in terms of their understanding of DRR issues. They were instructed to tick the most appropriate option in an evaluation Pre-test questionarre. It was explained to the participants that this is a self evaluation which will be repeated at the end of the training also to assess the level of improvement in the understanding of the basic concepts. The pre/post test analysis is attached in Annex 3.

**Session 2: Terms and Concepts in DRR:**

**Terms and Concepts in DRR**

Facilitator: Dr. Henna Hejazi

**Session Objectives:**
At the end of the session the participants will be able to
- Develop better understanding of the terms and concepts used in Disasters
- Differentiate between Disaster, Risk, Hazard, Vulnerability, Capacity, Response
- Identify the Dos and Dons during Disasters
- Design a hazard vulnerability capacity risk map for their community.

**Topics covered:**
- Participants perception about terms and concepts used in DRR
- Hazard Vulnerability Capacity Risk Analysis Map.

**Session 3: Introduction to Humanitarian Response**

**Introduction to Humanitarian Response**

Facilitator: Manoj Dash

**Session Objectives:**
At the end of the session the participants will be able to
- Planning for Humanitarian Response with Right to Life as an Indicator in the disaster situation.
- Identify the basic Needs and ensure Sphere Minimum Standards in Humanitarian Response.
- Advocate for Minimum Standards.
- Establishing effective coordination with various Key stakeholders.

**Topics covered:**
- Humanitarian Response
Right to Life in Post Disaster situation
Needs in Emergency Situation (Food, Water, Health etc.)
Sphere minimum Standards
Key stakeholders in Humanitarian Response
Coordination in Humanitarian Response

Session 4: Planning and Managing Humanitarian Response 1
Planning and Monitoring Humanitarian Response I (PMHRI)  
Facilitator: Dr. Henna Hejazi

Session Objectives:
At the end of the session the participants will be able to:
- Explain the importance of the Project Cycle
- Identify different phases of the Project Cycle
- Define Assessment and its types
- Design the Assessment report at the time of disaster

Topics covered:
- Project Cycle and phases
- Assessment and its types
- Assessment Exercise

This was followed by a group exercise on how to prepare an Assessment Report, with a disaster scenario and multiple sources of information. The assessment template is attached as Annex 4.

Session 5: Planning and Managing Humanitarian Response 2
Planning and Monitoring Humanitarian Response II (PMHR II)  
Facilitator: Manoj Dash

Session Objectives:
At the end of the session the participants will be able to:
- Assess the situation, preparation of sectoral assessment reports and planning for Humanitarian Response in short & long term. Preparation of Log Frame on sector specific activities.
- Monitor and Evaluate the Humanitarian Response by fixing Indicators.

Topics covered:
- Assessment & Planning
- Log Frame for Humanitarian Response
- Monitoring and Evaluations in Humanitarian Response.

The participants were given an exercise on filling in information on the Log Frame Table as a home assignment. Each group was asked to choose a group leader to present the Log Frame on the next day of the training.

Day 2:
Session 1: Disaster Risk Reduction and mainstreaming DRR in Development
Facilitator: Biplab Chakraborty

Session Objectives:
At the end of the session the participants will be able to:
- Identifying Risk
- Inter-relation between Hazard, Risk, Vulnerability and Capacity
- Reducing Risk or Risk Reduction measures
- Definition of developmental activities
- Mainstreaming DRR into development activities
**Topics covered:**
- Identifying Risk
- Types of vulnerabilities and capacities
- Defining DRR and Disaster management cycle.
- Mainstreaming DRR in Developmental activities

**Session 2: Community based disaster risk reduction**
Facilitator: Biplab Chakraborty

**Session Objectives:**
At the end of the session the participants will be able to
- Describe the importance of Community Participation and Mobilization in DRR.
- Designing a Community Hazard Vulnerability & Capacity Assessment.
- Developing an Integrated & Inclusive DRR Planning process
- Identification of the community Stakeholders
- Identification of the Community Based Disaster Risk Reduction (CBDRR) Processes

**Topics covered:**
- Important Stakeholders
- Level of Preparedness and Risk Reduction
- Community HVCA (Hazard Vulnerability & Capacity Assessment)
- Inclusive & Integrated Planning Process
- Community Based Disaster Risk Reduction (CBDRR) Process

**Session 3: Planning for Humanitarian Response and DRR-Group Exercise**
Facilitator: Isita Ray

**Session Objectives:**
At the end of the session the participants will be able to
- Prepare a plan for Humanitarian Response and DRR with specific focus on their activities and operational areas

**Topics covered:**
- Hazard mapping and identify the elements at risk within the community
- SWOT analysis in the community when disaster strikes
- Preparation for DRR of your own community

**Methodology:**
The participants were divided into groups according to their areas of operation
Gr.1- community living at riverside villages that are prone to floods
Gr.2- community living at plain facing recurring natural events
Gr.3- community living in island villages of Sundarbans delta

**Group Exercise:**
Task 1: As the part of the community draw a hazard map of the community and identify elements at risk and why they may be damaged.

Task 2: Do a SWOT analysis in the community hypothetically when disaster strikes.

S - What is the strength of the community when the hazard strikes?

W - Weaknesses of the community?
O - What opportunity is there for individuals and families to escape hazards?

T - What are any other threats when hazards happen? How can you control them?

**GROUP-1**

Imagine a situation where you live in a riverside village of northern Bihar. You have formed a task force on Women & Child Protection.

Plan for your 'Before disaster' activities:
Hints
Prevention
Mitigation
Preparedness

**GROUP-2**

Imagine a situation where you live in a coastal village of West Bengal. You have formed a task force on Women & Child Protection.

Plan for your 'During Disaster' action:
Hints
Evacuation
Search and rescue
First aid
Supply relief

**GROUP-3**

Imagine a situation where you live in a flood prone village of coastal Orissa. You have formed a task force on Women & Child Protection.

Plan for your 'After disaster' activities
Hints
Plan for the process of recovery
Rehabilitation and
Reconstruction

Each group was invited to present their work. A discussion was facilitated between groups on each presentation. Trainers and facilitators comment and feedback were also incorporated.

**Group 1:**

Hazard Map:
- Flood prone village
- Foot-hill village
- Low land area
- Forest fringe village
- Coastal village
- Recurring storm and cyclone
- Straying of wild animal
SWOT analysis

Strength:
- All weather road
- Adequate food supply at anganwadi centers and MCH project stock
- Concrete buildings for school, temple, church, health centre and rural bank
- Availability of volunteers in villages
- Availability of medical aid on time
- Availability of shops
- Local boat and water transport

Weakness:
- Over flow from barrage and dam
- River side location of village
- Recurring flood
- Low land area with in village
- Lack of awareness on disaster preparedness among community
- No alarm/early warning system
- Unavailability of proper transportation during calamity
- Lack of govt. infrastructure
- Lack of medical facilities
- Forest fringe village
- Remoteness
- High volt electric wire across the village
- No traffic control in highway

Opportunity:
- Scope to accommodate a large number of people in community hall and other double storied buildings
- Active Gram Panchayat
- Active NGOs
- Monetary support by SGHs
- BDMA/PDMA
- Hill as escape route
- Less population
- Source to generate fund by local church body and NGOs

Threat:
- High speed vehicle in highway
- Wild animal from forests
- Landslide
- Power cut during disaster
- Communication failure
- Child and Women protection

Group 2: DRR Practices

PRE-DISASTER PREPAREDNESS:
- Task force
- Training
- Identification of vulnerable groups (for pregnant, children, elderly, physically & mentally challenged)
- Rescue shelter identification and maintenance
- Early warning system
- Preserve food and drinking water
- Ensure emergency medical services
- Making roads above MFL for easy transportation

**DURING DISASTER:**
- To ensure that task forces are in action
- Evacuation
- Search and rescue
- Emergency medical support
- Ensure safe drinking water
- Special attention for vulnerable groups of the community
- Need assessment
- Listing of necessary relief materials and prioritization
- Distribution of relief
- Ensure law and order
- Security for girls, women, children
- Livestock care and rescue

**AFTER-DISASTER:**
- Contact local CBOs/NGOs
- Asking for government support
- Reconstruction work
- Disposal of debris
- Treatment of affected and injured persons
- Trauma care
- Supply of reconstruction materials
- Ensure child rights
- Fund procurement for re-building of village infrastructures

The session was wrapped up by thanking participants for a good job and showing how the session objectives are achieved by their cooperation and learning ability.

**Session 4: Group Exercise on Log Frame Analysis**

**Facilitator: Manoj Dash**
The group presentations of previous days assignment were taken up in this session.

**Session Objectives:**
By the end of this session, participants should be able to know about
- Prepare plan for Humanitarian Response and DRR with specific focus on their activities and operational areas in the Log Frame Approach
- Identification of the indicators in LFA
- Clarity on the means of verifications and assumptions

**Group Presentations:**

**Group 1:**
**Goal**
- Supply of minimum drinking water
- To ensure sanitation

**Objectives**
- All people should get sufficient and pure drinking water
- All people should live in clean and hygienic environment
Activities
- Survey/assessment
- Analysis planning water test
- Awareness
- Implementation

Stakeholders
- NGO, Govt. Agencies
- Volunteers and social workers

<table>
<thead>
<tr>
<th>Goal objectives</th>
<th>Indicators</th>
<th>Means of verification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activities</td>
<td>Received sufficient water or not</td>
<td>Interview method</td>
</tr>
<tr>
<td></td>
<td>To cover drinking, cooking &amp; personal hygienically use</td>
<td>Through Govt. agencies</td>
</tr>
<tr>
<td>Output</td>
<td>Good sanitation everywhere</td>
<td>Observation</td>
</tr>
<tr>
<td></td>
<td>Quality test of water</td>
<td>Behaviour change in the community</td>
</tr>
<tr>
<td></td>
<td>Awareness</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Quality sanitation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Repair of tube well and repairing of tube well</td>
<td></td>
</tr>
</tbody>
</table>

**Group 2:**

<table>
<thead>
<tr>
<th>Project description</th>
<th>Indicator</th>
<th>Sources of verification</th>
<th>Assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Objectives to provide health facilities</td>
<td>Decrease Malnutrition</td>
<td>Survey</td>
<td>Accept 100 people as 30% are literate or not</td>
</tr>
<tr>
<td>To reduce malnutrition</td>
<td>No child death</td>
<td>Data Collection spot</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Visit</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Interaction</td>
<td></td>
</tr>
<tr>
<td>Result</td>
<td>They use Toilets</td>
<td>Health centre far away</td>
<td></td>
</tr>
<tr>
<td>To make healthy community</td>
<td>Ambulance</td>
<td>Remote area</td>
<td></td>
</tr>
<tr>
<td>Free from diseases</td>
<td>First Aid training</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Water test in every 6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nutrition</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Formation of Disaster Management committee</td>
<td></td>
<td></td>
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<tr>
<td>Activities for DRR:</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Health awareness and health precautions for the targeted groups</td>
<td></td>
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<tr>
<td>Setting up of health monitoring or screening centres</td>
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<tr>
<td>Providing health education on water borne diseases</td>
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<tr>
<td>Task force to be involved in providing emergency health services</td>
<td></td>
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<tr>
<td>First Aid training and supply</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Medicine stock list</td>
<td></td>
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</tbody>
</table>

**Group 3:**

<table>
<thead>
<tr>
<th>Project Description</th>
<th>Indicator</th>
<th>Source of verification</th>
<th>Assumptions</th>
</tr>
</thead>
</table>
Right to live with dignity
To provide the basic need
To provide safety & security to the
women, girl and children
Bring the women, girls and children into the mainstream of the society
women, girl and children shall live fearless
All women shall use toilets
Volunteer Task force Police Family head
100% women and children will be achieved
All victims will be free from Trauma

Purpose
As per the assessment report most girls are vulnerable groups (women, girl and children) are in risk
To provide the safety and hygiene environment to live with dignity
Within a week the females shall use the ladies toilet
No health hazards
Government Report Media
Free from Unhygienic Conditions

Results
They shall come back to the mainstream
The children will continue their education
The children shall continue the study and start their education
Do
Within a month it will reopen

Activities
Safety and hygienic toilets
Tuition classes for students
Trauma counseling
Women task force Separate toilets for male and female
To monitor the safety of women and girls
All the problems will be addressed as per the need based

Session 5: Action Planning:

Based on the participants location, broad objectives and key learning from this training, the participants were made to work in groups towards how they would incorporate the learning into their field work and activities.

Group I (Minto Fresh)

- Location: Bhubaneswar and Midnapur
- Type of work: Women and Child Development
- Workers: Project Managers, Project Accountant, Project SWS

Learning points:
- Terms and concept in DRR (Hazard, capacity and Vulnerability)
- Humanitarian Response and Principle of need assessment
- Planning and Management in Response
- Log Frame Analysis
- Project Cycle and Disaster Management Cycle

Future Action:
- We will share these teaching tools to staffs and elder children
- Create awareness among local community
- Design our community projects and HVC Maps
- We will apply the same techniques vis a vis DRR in our field implementation.
- We will create different task force teams
- Optimum utilization of local resources at the time of disaster.

Group 2 (Jellicious)
Location: Bhubaneshwar and Midnapur

Type of work:
- Child and Women Development
- Child Protection
- Pregnant Women
- Child Rights
- Advocacy
- Hygiene & Sanitation

Lessons learnt:
- Disaster Preparedness
- CBDRR
- Need assessment
- Humanitarian Response
- Planning in LFA method
- Project Cycle
- Hazard: Flood, Cyclone, Fire, Road Accident, Snake bite etc

Future Action:
Capacity-Building:
- Govt. NGO, Project staff, School and Institution and SHG group

Preparedness:
- Awareness on Disaster Preparedness
- Alert Early Warning System
- Fire Exit emergencies
- Emergency protocols should be displayed
- Identification of local resources for safety measures

CBDRR
- Identification of local youths and training on Disaster planning and management
- Active involvement of community in DRR
- Networking with the stakeholder

Humanitarian Response
- Our primary focus will be on child and women
- Need assessment and maintaining minimum standards
- Disaster Management plan by LFA and Project Cycle with project staff and community people

Group 3: (Phailin)

Location: Mayurbanja District, Khurda District and Annual District of Orissa and Midnapur

Type of work:
- Holistic Child Development (Physical, Spiritual, Socio-Economic, Cognitive)

Future Action:
- We will apply Log Frame Analysis in our project to achieve our goal.
- Application of learning processes of CBDRR in our project and community to prepare for natural and manmade disasters.
- Project Cycle will be also useful in our project.
- Community HVCA tool village summary is also important for our project
**Group 4 Lacto Disaster**

**Location** Bhubaneswar and Medinapur

**Type of Work:**
- Child and Women welfare
- Protection
- Holistic Development
- Health & Hygiene
- Immunization
- Education and Social Relationship
- Women Empowerment

**Future Actions:**
- CBDRR activities
- Use of local resources during disaster
- Early warning system
- Assessments (Pre, post, need based, rapid and mid term)
- Project cycle (Assessment Analysis, planning, implementation, monitoring, evaluation)
- Humanitarian response and planning
- Logistics framework SWOT Analysis
- Hazard mapping
- Purchase of sphere minimum standards book 2011 edition

**Feedback of the training:**
At the end of the training many participants came out with a variety of inputs, suggestions, recommendations which were recorded in a Feedback Form at the end of the training and included the following

Q: When asked how confident do the participants feel in planning and managing humanitarian response in their respective areas, after attending the Sphere Training, 19 ppts said 30-70% and 15 said 70-100%

![Confident in PMHR at work](image)

When asked how much has the Sphere Training on DRR and Humanitarian Response added to their knowledge, 19 ppts said 30-70% and 14 said 70-100%
When asked how satisfied are they with the materials provided during the course, 12 said 30-70% and 20 said 70-100%.

![Satisfaction with training material provided](image)

When asked that would they recommend this course to their colleagues in their respective areas, 34(all)ppts said yes

![Would you recommend this course to others](image)

When asked do they think that enough time was given to all the topics during the course? (Including theory and practice), 24 ppts said yes, while 8 ppts said the training time was less because of which more time was not given to all topics covered.

![Was enough time given to all topics](image)

When asked what was the most interesting topic during the course, most of the participants revealed DRR, humanitarian response and project cycle.
Comments/suggestions:

- Systematic and organized delivery.
- Easy to understand for all.
- Learned many new concepts.
- Require constant guidance from Sphere India.
- Handouts to be sent in soft copy to all participants.
- The duration of the training ought to have been five days instead of two days, for more clarity and group work.
- More breaks in between sessions to refresh.
- More group exercises to develop the practical skills of participants.
- A video clipping on Phailin or Uttarakhand would have been appreciable to show the impact of disaster and the immediate response provided.
- Few sessions were spilling beyond the allotted time.
- A detailed knowledge on SWOT Analysis would have been very helpful.
- More knowledge required on Agencies engaged in Disaster Management.
- Accreditation would have been a motivation for the participants.

Post test of the participants has revealed 25-30% improvement in the knowledge of DRR and Humanitarian Response. Refer to Annex 3.

Annexures

Annex 1:

Programme Schedule

<table>
<thead>
<tr>
<th>Session</th>
<th>Duration</th>
<th>Day 1</th>
<th>Facilitators</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>10:30-11:30</td>
<td>Introduction Ice-breaking, Course Overview</td>
<td>Dr. Henna, Sphere India</td>
</tr>
<tr>
<td></td>
<td>11:30-11:45</td>
<td>Tea break</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>11:45-12:15</td>
<td>Terms and concepts in DRR</td>
<td>Dr. Henna, Sphere India</td>
</tr>
<tr>
<td>3</td>
<td>12:15-13:30</td>
<td>Humanitarian Response</td>
<td>Manoj, Sphere India</td>
</tr>
<tr>
<td></td>
<td>13:30-14:15</td>
<td>Lunch break</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>14:15-15:30</td>
<td>Planning and Managing Humanitarian Response 1</td>
<td>Dr. Henna, Sphere India</td>
</tr>
<tr>
<td></td>
<td>15:30-15:45</td>
<td>Tea break</td>
<td></td>
</tr>
</tbody>
</table>
### Annex 2:

#### List of participants:

<table>
<thead>
<tr>
<th>S.No</th>
<th>Name</th>
<th>Location</th>
<th>Ph No</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Premjeet Behera</td>
<td>Bhubaneshwar</td>
<td>9437209080</td>
<td><a href="mailto:premjitbehera@gmail.com">premjitbehera@gmail.com</a></td>
</tr>
<tr>
<td>2</td>
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**Annex 3:**

**Pre-Post Test Analysis**

**Pre-Test**

![Pre-Test Chart]

**Post-test:**
Annex 4: 
Assessment Report template

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<td>No of villages affected</td>
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<td>No. of Gram Panchayats affected</td>
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<td>Urban/Rural</td>
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<td>Pregnant/lactating women in the affected area</td>
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<td>No. of people living under poverty and dalit population</td>
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