

# OPERATIONS UPDATE



International Federation of Red Cross and Red Crescent Societies  
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## **INDIA: GUJARAT EARTHQUAKE RECOVERY AND REHABILITATION**

5 November 2002

*The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in 178 countries. For more information: [www.ifrc.org](http://www.ifrc.org)*

*Appeal No. 20/01*

*Launched on 9 July 2001 for CHF 60.6 million for three years for 1.5 million beneficiaries.*

*Operations Update No. 12 ; Period covered: 29 August - 11 October 2002;*

*Last Update: No. 11 on 17 September 2002; Next Update: No. 13 expected November 2002*

*Launched on 9 July 2000 for CHF 60.6 million for three years for 1.5 million beneficiaries.*

*Appeal revised on 27 June 2002 with a decreased budget of CHF 30 million.*

### **IN BRIEF**

*Appeal coverage: Covered*

*Related Appeals: South Asia regional programmes (01.24/2002)*

*Outstanding needs: None*

*Summary: The Indian Red Cross Society (IRCS), with Federation support, has continued its engagement in Gujarat long after many other organisations have come and gone. Donor support has been excellent and progress has been made in several key areas, including training and provision in various aspects of primary health care.*

### **Operational Developments w**

*Operational Objective: The Indian Red Cross Society (IRCS), supported by the Red Cross and Red Crescent Movement partners, aims to contribute over a three-year period to the earliest recovery of basic living standards of the affected population of selected districts in Gujarat as*

*well as to the development of a well-functioning national society to ensure effective implementation of the programmes.*

Gujarat has been in the news for several reasons during the reporting period. The brief monsoon showers in the last weeks of August and early September caused flooding of low lying areas of the Narmada. According to media reports, 19 people were killed and around 5,000 evacuated from areas near the Narmada river when rains lashed across the state in the first week of September eroding the river bed. However, the brief monsoon failed to improve the drought situation in the state, the third year in succession, causing inexplicable hardship to medium, small farmers and agriculture labourers who face the threat of a major food shortage. According to UNDP report, 29 blocks of the 25 districts in Gujarat received less than 40 per cent of the average annual rainfall and are facing severe drought conditions. Many villages in the blocks received less than 60 per cent of the average rainfall and are facing similar conditions. The heavy rainfall in the neighbouring state of Madhya Pradesh resulted in the filling up of Sardar Sarovar Dam and the release of water into the Narmada canal. Water is also being released through the Narmada canal into the dry rivers of the state. Despite this, it is feared that drinking water will become scarce both in rural and urban areas, especially in pockets that have not received rains till now.

To compound Gujarat's problems, two gunmen opened fire in the famous Akshardham temple in the state capital Gandhinagar on 24 September. 31 people were killed and 100 injured. The audacious gunmen were later killed by the security forces. The IRCS's blood banks in Ahmedabad and Navsari districts provided 131 units of blood to the hospitals in Gandhinagar and Ahmedabad which treated the injured. Officials and volunteers from the IRCS state branch also visited the hospitals and maintained close contact with the authorities. A nation wide strike was called for on 26 September in protest against the killings. There is fear of communal violence breaking out in Gujarat where peace has been elusive after the communal riots in February in which at least 1,000 were killed. To prevent further rioting, the government tightened security in the state deploying army in sensitive areas including Ahmedabad.

The Federation's India Operations Centre (IOC), in close collaboration with the South Asia Regional Delegation (SARD) in Delhi, immediately undertook the coordination role of security for all the delegates working in the country. Security updates were issued and shared regularly with the PNS. Despite reports of sporadic incidents in some areas across the country following the attack, the security situation in the state has caused only minor impact on the programmes of the Federation and the PNS. Field activities were quickly resumed soon after.



A new secretary for the IRC Gujarat state branch was elected in August. At the same time, a new governance body was also finally in place in Kutch district where the Federation supported community based health is currently running at full stretch and demands support from the branches. These are encouraging changes to undertake further efforts for branch development and to incorporate existing recovery programmes into the local branch structure for their long term sustainability.

The Secretary General of IRCS expressed her gratitude to the departing Head of Delegation of IOC.

Meanwhile, the IRCS and the Federation continue to reshape the three year recovery plan and budget. The overall budget is further decreased to CHF28.6 million Swiss francs. At the same time the country appeal for 2003-2004 has been revised for final scrutiny at the Secretariat in Geneva.

The head of delegation of IOC finished his mission on 30 September. The secretary general of IRCS expressed her appreciation for his prominent contribution particularly in building up better understanding and closer working relationship between the Society and the Federation over the operations in India. His tenure has now been officially handed over to the head of delegation (designate) who has since May gradually resumed this duty to ensure successful continuation of all the programmes.

## **Red Cross and Red Crescent action w**

### ***1. Integrated Health Programme***



Over 2,000 people have benefited from the first aid post set up by IRCS and the primary health centre at the Nakathrana fair in September. 11 Red Cross volunteers were working on a 24-hour roster.

#### **Community based health w**

**Objective 1:** *To train IRCS field workers and volunteers*

According to the latest statistics, 1,222 Red Cross volunteers have been trained by the IRCS field workers in 46 CBFA (community based first aid) courses in Kutch, Rajkot and Jamnagar. Trained volunteers who have already received first aid kit upon completion of the course have organized a diversity of health-related activities in their villages. Another batch of first aid kits have also arrived in Bhuj early October for the newly trained volunteers. These volunteers are receiving support and advice from the 51 IRCS field workers assigned for the three districts. The massacre attack on the Akshardam Temple in Gujarat on 24 September has not made substantial impact on the health activities and Gujarat continued to remain a popular place to celebrate the annual festival of Navrati - a nine day dance festival dedicated to the Goddess of Hope. This year, for the second time, the field workers along with the CBFA trained volunteers set up five 24-hour first aid posts along the pilgrim route. Media report indicated approximately 300,000 devotees came bare-footed from various parts of India to visit the Matana Madh temple in Lakhpat taluka. At least 593 first aid treatments were registered by the post in Mundra alone. The Red Cross involvement in this annual pilgrimage has been widely reported in the local newspaper. Four CBFA courses are planned for October in Bhuj and Wakaner for the volunteers.

During September, the field workers visited 679 villages involving the communities, contacting the community leader, anganwadi workers, teachers and PHC (primary health care) staff to address main health problems. Diarrhoea and skin diseases remain the most common health problems due to continuous shortage of clean water. Some 83,260 people have benefited from these field health activities in September with increased knowledge on safe drinking water, community hygiene, personal hygiene and fever. One notable achievement of these community based activities is that over 300 students gave up chewing tobacco in a number of rural talukas (sub-district) in Kutch. For the child-to-child initiative which was incorporated earlier into field worker activities, a modified CHETNA curriculum will be used with increased focus on Red Cross knowledge and first aid training besides hygiene awareness. The initiative will restart in November.

The Spanish Red Cross (SRC), in cooperation with the IRCS local branches, has conducted two CBFA trainings for 42 volunteers recruited from Bhachau, Gandhidham and Rapar. In addition, a guidance document for the volunteer's manual was finalised to facilitate the work of the field workers. On the other hand, the CBFA training in Banaskantha under the IRCS/AmCross community based project was postponed to October. A new AmCross health delegate has arrived and one CBFA ToT (training of trainers) planned for October in Patan. In early October, a project manager from the Canadian Red Cross also arrived and has been in close consultation with IRCS in developing a bilateral programme with initial focus on primary health care. The delegate was briefed by the Federation IOC, SARD and PNS delegates to understand the ongoing programmes in India.

**Objective 2:** *To provide training for Traditional Birth Attendants (TBAs)*

Two TBA training courses were conducted in September in Abdasa and in Rajkot respectively. To date, 284 TBAs have been trained in Kutch and Rajkot under the community based health project. A number of follow up visits are being carried out by the IRCS TBA trainers to ensure that the newly trained TBAs and their practices are accepted by the communities and registration procedure of ante natal mothers observed by the TBAs. The trainers will also organize meetings with the staff of the health systems explaining the role of the TBAs in safe motherhood in the communities and the importance of their continuous support to the TBAs. One TBA course is scheduled for October in Abdasa taluka. Meanwhile IRCS, in cooperation with the Spanish Red Cross, is currently undertaking the planning, preparation and assessment of the TBA initiative for the Rapar taluka. In Patan, under the IRCS/American Red Cross (AmCross) community based health project, a nurse from the government public health department has been appointed starting September to oversee TBA training which is scheduled to start shortly in the district.

**Objective 3:** *To provide training for Integrated Child Development Service (ICDS) workers functioning at the grass roots level. This group includes Anganwadi Workers (AWWs), Anganwadi Helpers (AWH) and Auxiliary Nurse Midwives (ANMs).*

Since the ICDS training initiative started in August, a total of 83 anganwadi workers, 57 helpers and eight auxiliary nurse midwives have been trained in Lakhpat, Nakhatrana and Abdasa talukas of Kutch. These training courses were facilitated by the ICDS supervisors, Chief District Health Officer (CDHO) and PHC medical officer of respective talukas. Staff from UNICEF also attended some sessions of the training. Five ICDS training courses will continue in Abdasa and Nakhatrana in October. Meanwhile, IRCS health workers continue to follow up the anganwadi workers and helpers trained by the government in Rajkot and Jamnagar during their village visits.

**Objective 4:** *To coordinate health related recovery and rehabilitation activities in Gujarat with government and NGOs.*

Close coordination with the health authorities, bilateral PNS and other agencies continues through the Bhuj health office and regular meetings and visits to Rajkot, Surrendranagar and Jamnagar. The Federation health delegate who was repatriated to Finland for medical treatment in August resumed her duty at the close of September.

**Water and Sanitation w**

**Objective:** *To improve safe water supply and awareness of the relationship between safe water, sanitation and health of the population.*

The IRCS/AmCross water and sanitation project continues to adopt an income-generating venture for drought affected villagers. A one-year training plan focusing on community participation for the project staff has been finalized with the environmental education institute. Participatory rural appraisal activities have been completed in five talukas of Patan district and two talukas of Banaskantha district. Pond rehabilitation work in four out of five selected sites have been completed. One site has also been

identified in Banaskantha. The lack of rain - or heavy downpours when it rains, and the insufficient coordination among the numerous NGOs working on water-sanitation in the area are the biggest challenge for the project. Four additional construction supervisors have begun work from the end of September. Till date 57 ponds have been rehabilitated in Banaskantha and Patan.

**Objective:** *To contribute to the restoration of Gujarat's health infrastructure by reconstructing permanent health care facilities destroyed during the earthquake in the districts of Kutch, Rajkot and Surendranagar.* While construction work of eight sub health centres is going on in Surendranagar, 13 anganwadis in Rajkot are at their final stages - roof slabs have been cast in the buildings, all masonry walls completed, plastering works finalised and recreational facilities installed. Furniture and equipment will also be in place shortly. While construction work in 17 other sites is continuing, these 13 anganwadis are ready for handing over to the government authority by the end of October. Hand-over documents are being prepared. These facilities once handed over and operationalized will also be used during the rest of the day by the IRCS field workers and volunteers for health activities. Meanwhile, IRCS has approved the publishing of tender documents for the remaining health facilities with the plan to open tender in mid November and to start the construction in the first week of December. On 14 September, the construction coordinator of the reconstruction project of health facilities ended his mission and the infrastructure coordinator is now responsible for the whole project.

In Jamnagar, the three completed anganwadis of the IRCS/BRC project will be handed over shortly to the ICDS in October. One of the two PHC under construction is nearly completed whereas 57 anganwadis are at least 50 per cent completed. A community group attached to the anganwadi has been formed in 22 villages where anganwadis have been completed or being constructed. Activities ranging from health, nutrition and awareness about ICDS have started in these community groups. The BRC desk officer visited the project in September seeking possible integration of community development initiative with the IRCS/Federation supported community based health activities in Jamnagar. Under the IRCS/SRC anganwadi construction project in Bhachau, works in 40 out of planned 62 sites are continuing. The remaining 22 sites will be handed over to the contractors after evaluating the progress of the current construction works.

**Objective:** *To improve the capacity of the IRCS in health (disaster preparedness) and to increase the IRCS ability to provide relief health (disaster response).* IRCS, together with the Federation, has finalised the draft country appeal for 2003-2004 in which, except ongoing programmes derived from the Gujarat appeal 20/01, the newly designed HIV/AIDS awareness and advocacy programme will be the new focal point of IRCS to address the emerging humanitarian need in the country. The programme aims to achieve a more in-depth analysis of HIV activities carried by IRCS and to incorporate them into existing database, to support the development of HIV/AIDS policy and health policy and to support HIV awareness through Red Cross Youths, Junior Red Cross and CBFA trained volunteers in selected states. The programme also aims to develop a home based care pilot project by the end of 2003 in one state where CBFA and HIV awareness initiatives have been conducted during 2003. To secure funding for the HIV programme, IRCS has submitted a three-year proposal to the Global Fund for youth peer education, child peer education and HIV awareness in the communities. The Federation health delegate and IRCS counterpart visited Tripura, one of the selected states to implement HIV awareness programme, and met with the officials from the health department and IRCS Tripura state branch to assess the health situation and programme implementation needs.

An integrated approach, as necessitated in the appeal document, will use health training as the entry point to the communities, followed by DP training when the volunteers have acquired certain experience in the community based works and finally consolidating the volunteer structure and linking volunteers with the IRCS branches through OD activities which at the same time will support the branches in strengthening fundraising and sustainability capacities. This approach will engage IRCS, the Federation and PNS technical know-how whenever possible. The third CDBP training for the field health workers and volunteers scheduled to take place in Surandranagar in November is one example of coordinated effort within the Movement. The training will draw psychological first aid support from the AmCross. Besides Gujarat, psychological first aid training will be implemented in Bihar and Orissa.

The secretary general of IRCS has approved the position of a CBFA training coordinator in the IRCS NHQ. The position funded by the Federation will be responsible to supervise all the health training programmes across the country and, applying the Gujarat model, to develop and revise training materials accordingly. Following the participation in the CBFA training in Gujarat in August, IRCS Bihar state branch has initiated preparation for the CBFA training which is scheduled to take place in November starting with nine districts. The initiative aims to target 900 volunteers.

The workshop on public health in emergencies was successfully held in Delhi from 16-20 September.



The overall goal of the workshop was to improve health response in disaster prone states and to achieve a better outreach to vulnerable communities during disasters in India. The workshop has given a more comprehensive health training to IRCS community based health workers and introduced IRCS health specialists with previous experience in disasters to a community based approach of health response. The workshop was attended by 28 participants consisting of doctors, nurses, pharmacists and community based health volunteers with previous experience of working with IRCS during disasters.

A possibly unprecedented combination of Red Cross medical health specialists and community based health workers and volunteers participated in the workshop on public health in emergencies in September.

Meanwhile, a report is being prepared on the IRCS blood banks assessment by the AmCross which will be distributed in mid October. The

IRCS/AmCross blood safety project will encompass issues such as hepatitis B and C, red cell serology and if possible use WHO Quality Management Programme for IRCS initial staff training. Another IRCS blood bank in Ranchi of Jharkhand state and two more in Bihar have recently been identified and visits will be arranged shortly to these facilities. A new psychosocial delegate from the AmCross has arrived on 11 September and is currently reviewing the needs of psychosocial support among the disaster affected people and is formulating new projects in consultation with the IRCS and the Federation.

## **2. Capacity Building Programme**

### **Organizational and Resource Development w**

**Objective 1:** *To establish appropriate structure, systems and resources within the IRCS to better respond to the needs of affected communities, and improve coordination mechanisms between the National Headquarters and branches.*

A kick-off planning meeting for IRCS NHQ project managers has been arranged in September. Annual planning process is currently underway at different departments with an intention to submit the plan and budget to the newly elected managing body (governance) in December. An ordination programme for IRCS managing body was held on 6-7 September in Delhi covering basic introduction to the Red Cross Movement, the role of the governance and management, change management, strategic capacity building and progress update on various IRCS programmes. Meanwhile, in order to proceed with the development of a resource development strategy, discussions have been held between IRCS and IOC about the existing resource mobilization situation in the society. The result and method of the mapping exercise were also shared with the Federation's regional delegation in Bangkok and Myanmar Red Cross. In addition, the recruitment of an OD manager based in IOC has progressed in consultation with IRCS. The position is expected to be filled in November.

### **IRCS Branch Development w**

**Objective 1:** *To strengthen the capacity of the IRCS Gujarat state, district and local branches to respond to disasters and provide essential services to the state's most vulnerable communities.*

With the newly elected Gujarat state branch secretary on board, there have been fruitful discussions between him, IRCS NHQ and Federation IOC on the rehabilitation programmes in Gujarat. At the same time, the recruitment of two positions, branch development officer and disaster preparedness coordinator, will soon be processed.

### **Human Resource Development w**

**Objective 1:** *To improve systems for recruitment, development and maintenance of staff and volunteers at IRCS National Headquarters and in the branches.*

The initiated recruitment of the 12 key positions for IRCS NHQ is expected to take place after the managing body (governance) meeting on 16 October. A human resource mapping of the NHQ has also started and should be completed by October 2003. In the meantime, a process is being taken to amend IRCS service rules which were established in 1950 and to draft new service rules accordingly for the IRCS staff. The proposed document will be presented to the managing body in December for approval and enforcement.

### **Finance Development w**

**Objective 1:** *to develop the IRCS capacity for financial planning, management and reporting.*

Further scrutiny and assessment of the finance software have been conducted and a new tender process is being undertaken.

### **Information Development w**

**Objective:** *To develop and improve the internal and external communications strategy of IRCS, and to enhance the strategic relationship between the society and the media.*

A plan for the development of a communication strategy has been drafted and will be implemented shortly. There has been increased information capacity of some selected state branches such as the production of situation reports of disasters, state branch newsletters and communication with the National Headquarters. The recent train derailment in Bihar (see news story and information bulletin) demonstrated the information capacity in transmitting Red Cross actions at local branch levels to the headquarters. On 14 September, the Society marked its very first First Aid Day in India by organizing a day-long campaign to generate public awareness of first aid. In the country's capital New Delhi, a 'Run to Save Life' campaign was launched in which around 700 junior Red Cross, school children, Red Cross volunteers, staff and families, ran approximately for 2.5 kilometres. Red Cross branches across the country also celebrated the day by holding rallies and first aid demonstrations. The activities were widely reported in local printed and electronic media.

### **IRCS Central Training Institute (CTI) w**

**Objective:** *To rehabilitate the IRCS Central Training Institute.*

The tender documents for the rehabilitation of the CTI complex have been prepared and the tender process will be initiated shortly.

**Disaster Preparedness and Response (DP/DR) w**

**Objective 1:** *To establish a functional IRCS disaster management network.*

A meeting was held with UNDP to coordinate the selection of disaster prone states and a questionnaire developed for the assessment of DP capacity of all states and union territories. The recruitment of the three new roles, namely the warehouse coordinator, DP officer and DMC (Disaster Management Centre) administrator, for the IRCS NHQ disaster management department is awaiting approval from the IRCS secretary general. At the DMC, a telephone connection is now in place and computer equipment has been delivered, while the establishment of a technical library is being initiated. During the reporting period, joint DP and OD meetings were also held with the new Gujarat state branch secretary. The recruitment of the Gujarat disaster management coordinator is now in process.

**Objective 2:** *To establish an operational IRCS disaster response team and mobile disaster units (MDUs) facilitating disaster coordination and information management in India's most disaster-prone zones.*

The recent emergency preparedness task force meeting has outlined several disaster response initiatives. Detailed specifications were worked out for the procurement of needs assessment kits and MDU equipment and procurement plan was completed. An inter-agency consultation on disaster assessment and MDU has been planned for 22 and 23 October '02

**Objective 3:** *To initiate disaster preparedness and response pilot projects and community based disaster preparedness (CBDP)*

The IRCS branches in Assam are currently engaged in relief operation in the flood affected districts. Six mobile medical units have been deployed since 23 August in badly affected states for a period of three months with two medical officers each provided by the state health ministry. For areas which still remain cut off, two assessment and medical unit boats have been equipped and are in a state of operational readiness. For this a service and maintenance contract is being finalised with a registered boat manufacturer for two years (see India Monsoon Floods operations update). In the meantime, a new DP officer has been recruited for the Assam state branch and community level mitigation activities are progressing as planned. In the pilot district of Nalbari, two additional bore wells/hand pumps have been installed. Five more have already been installed with elevated platforms. Construction of two toilet blocks is currently being carried out in Nalbari and three out of four in Goalpara district have been completed. Due to the ongoing flood relief operation, the flood relief learning review and disaster assessment and response workshop originally scheduled for 24-27 September has been postponed to a later date. A CBDP training programme will be conducted for volunteers in Kamrup from 1-5 October and in Darrang from 21-25 October respectively.

**Objective 4:** *To develop and disseminate IRCS disaster preparedness and disaster response policies and disaster management plans at national and branch level.*

A questionnaire has been prepared for the assessment of DP capacity of all states and union territories and branch mapping summary are awaiting approval from the Secretary General. Joint DP and OD meetings were held with the new Gujarat branch secretary and approval has been secured to begin the process of recruitment of a disaster co-ordinator to be based at the state branch office.

**Objective 5:** *To provide proper training to key staff and committees in disaster preparedness and disaster response.*

Following a seven-day disaster management induction course in August, a second course is being initiated for another 12 participants while a third community based disaster preparedness training is also be planned in Surendranagar.

**Objective 6:** *To establish a functional IRCS disaster preparedness and disaster response knowledge sharing unit based in New Delhi.*

Another emergency preparedness task force meeting will be scheduled for 29 October. The team comprises the DM and health counterparts of the IRCS, the Federation and the SRC.

**Objective 7:** *To ensure sustainability of all existing Red Cross cyclone programmes and expansion to selected states.*

Due to the success of the phase I of the Orissa Disaster Mitigation Programme (ODMP) from 1996 to 2002, which included the construction of 23 cyclone shelters in six coastal districts of Orissa along with mobilization and training of the communities around the shelters, the German Red Cross will continue to support the IRCS Orissa state branch in implementing a second phase. Phase II of the ODMP includes the construction of another 30 cyclone shelters, social mobilization and training on cyclone preparedness. The five-year programme is scheduled to start early 2003. The IRCS Orissa state branch, in cooperation with Spanish Red Cross, is also running disaster mitigation and community DP mobilization projects. Since August, five community based DP and DR courses, three search and rescue courses and one community health training have been conducted for 265 Red Cross staff and volunteers. In addition, the construction of four cyclone shelters is expected to be completed in October.

**Objective 8:** *To establish a logistics management system in strategically sited and rehabilitated warehouses.*

Following the close of 2001 floods appeal, funding has been secured to renovate the IRCS central warehouse in Bahadurgarh (Delhi) and to replenish the DP stock. In keeping with the new procurement manual, plastic sheets, mosquito nets, kitchen sets, cotton blankets, bed sheets, towels, bleaching powder and high density polythene bags (HDPB) will be procured beginning this month. One truckload of pallets and kitchen sets have already been shifted to the Viramgam (Ahmedabad) warehouse which will see some renovation once the action plan is finalized.

### **Capacity Building Programme Coordination w**

**Objective:** *To coordinate IRCS long term policy making and capacity building efforts.*

Following the capacity building coordination meeting on 20 August, another meeting has been scheduled for 25 October.

### **3. Rehabilitation/ Shelter Programme**

#### **Private Housing Reconstruction w**

**Objective 1:** *To reconstruct basic housing for 1,300 affected families in Surendranagar district.*

After completing 561 houses of the first phase of the project in Surendranagar, the private housing consortium of Austrian, Belgian and German Red Cross has decided along with the Indian Red Cross to extend the project by four months up to December 2002. The decision came as a result of requests from 68 villages in August. The second phase of the project now aims to support 350 families (approximately 1,750 persons) in the talukas of Wadhwan and Lakhtar to rebuild earthquake resistant houses.

### **4. Programme Management and Coordination**

**Objective:** *To provide support to the IRCS through readily available resources in management, coordination and implementation of the operation.*

During the reporting period, the IRCS and the Federation continue to reshape the three year recovery plan and budget. The overall budget has been further decreased to CHF28.6 million Swiss francs. The India Desk Officer from Geneva visited IOC from 1-17 September and travelled to the programme areas in Gujarat and Assam for the flood operation. The internal auditor from the Secretariat's risk management and audit department also conducted audit of IOC and field offices in Gujarat from 14-27 September.

On 30 September, the head of delegation of IOC finished his mission and handed over his tenure to the head of delegation (designate) who has since May gradually resumed his duty. The secretary general of IRCS, making her farewell remarks, expressed appreciation for the prominent contribution made by him over the past one year. Better understanding and closer working relationship has been established between the Society and the Federation which is significant to ensure successful continuation of all the existing programmes.

In addition in early October, Federation's consultant on International Disaster Response Law project also visited India as one of the three regions to be visited for making field and legal studies on the Federation initiated project. He met with IOC delegates, SARD delegates, PNS and IRCS officials and collected valuable feedback.

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*All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.*

*This operation seeks to administer to the immediate requirements of the victims of this disaster. Subsequent operations to promote sustainable development or longer-term capacity building will require additional support, and these programmes are outlined on the Federation's website.*

*For further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>.*

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**INDIA EARTHQUAKE OPERATION****Calendar of Events for October 2002**

| <b>Date</b>  | <b>Event</b>   | <b>Location</b>                      | <b>Organizer</b>     |
|--------------|--|--------------------------------------|----------------------|
| Oct 1-5      | A volunteer training programme   | Kamrup, Assam                        | IRCS/Federation      |
| Oct 6        | Prize presentation to HIV cartoon competition winners                              | Andhra Pradesh                       | IRCS                 |
| Oct 6        | One-day HIV dissemination to IRCS youth representatives                            | Andhra Pradesh                       | IRCS                 |
| Oct 7-26     | TBA training   | Abdasa                               | IRCS/Federation/PHC  |
| Oct 9-11     | CBFA training for RC volunteers  | Wakaner                              | IRCS/Federation      |
| Oct 15-18    | CBFA training for RC volunteers  | Bhuj                                 | IRCS/Federation      |
| Oct 16       | IRCS managing body meeting   | Delhi                                | IRCS/Federation/ICRC |
| Oct 17-18    | Red Cross introduction course newly recruited staff of the Federation and PNS      | Delhi                                | Federation           |
| Oct 17-19    | ICDS training for anganwadi workers  | Abdasa                               | IRCS/Federation/ICDS |
| Oct 21, 25   | ICDS training for anganwadi helpers  | Nakhatrana                           | IRCS/Federation/ICDS |
| Oct 21-22    | Red Cross introduction course for newly recruited staff of the Federation and PNS  | Delhi                                | Federation           |
| Oct 22-24    | ICDS training for anganwadi workers  | Abdasa                               | IRCS/Federation/ICDS |
| Oct 23-24    | An inter-agency consultation on disaster assessment and MDU (Mobile Disaster Unit) | Delhi                                | IRCS/Federation      |
| Oct 23-25    | CBFA training for RC volunteers  | Wakaner                              | IRCS/Federation      |
| Oct 25       | Capacity Building Coordination Group meeting                                       | Delhi                                | IRCS/Federation      |
| Oct 28-30    | ICDS training for anganwadi workers  | Abdasa                               | IRCS/Federation/ICDS |
| Oct 29-31    | CBFA training for RC volunteers  | Bhuj                                 | IRCS/Federation      |
| Oct 29       | Emergency Preparedness Task Force  | Delhi                                | IRCS/Federation/SRC  |
| Oct 30 (tbc) | Legal handover of anganwadis   | Rajkot                               | IRCS/Federation      |
| Oct          | CBFA ToT (training of trainers)  | Patan                                | IRCS/AmCross         |
| Oct          | CBFA training for RC volunteers  | Bachau/Rapar/<br>Gandhidham, Gujarat | IRCS/SRC             |

| India earthquake rehabilitation |          |                  |      |                   |            | ANNEX 1  |
|---------------------------------|----------|------------------|------|-------------------|------------|--|
| APPEAL No. 20/2001              |          | PLEDGES RECEIVED |      |                   | 01.11.2002 |  |
| DONOR                           | CATEGORY | QUANTITY         | UNIT | VALUE CHF         | DATE       | COMMENT  |
| <b>CASH</b>                     |          |                  |      |                   |            |  |
| REQUESTED IN APPEAL CHF ----->  |          |                  |      | <b>29'526'970</b> |            | <b>TOTAL COVERAGE<br/>107.7%</b>   |
| AMERICAN - RC                   |          |                  |      | 283'698           | 30.08.2002 |  |
| AUSTRALIAN - RC                 |          | 14'763           | AUD  | 13'731            | 06.06.2001 | DISASTER RESPONSE  |
| AUSTRALIAN - RC                 |          | 400'000          | AUD  | 334'720           | 08.11.2001 | WATER & SANITATION, C B HEALTH PROJECT                                     |
| AUSTRIAN - RC                   |          | 139'452          | EUR  | 210'782           | 25.07.2001 | PRIVATE HOUSING RECONSTRUCTION, DIRECT                                     |
| AUSTRIAN - RC                   |          | 145'000          | EUR  | 219'168           | 03.07.2001 | WATER PROJECT  |
| BRITISH - RC                    |          | 224'719          | GBP  | 537'078           | 06.08.2001 | HOSPITAL   |
| BRITISH - RC                    |          | 214'830          | GBP  | 513'444           | 06.08.2001 | DAM/WATER CATCHMENT & VILLAGE WATSAN EDUCATION                             |
| BRITISH - RC                    |          | 50'000           | GBP  | 120'000           | 22.11.2001 | DP/DR PROJECT  |
| BRITISH - RC                    |          | 100'000          | GBP  | 229'610           | 18.04.2002 | MOTHER & CHILD HEALTH, WATSAN HEALTH, WASTE DISPOSAL AND CAPACITY BUILDING |
| BRITISH - RC                    |          | 800'000          | GBP  | 1'836'960         | 09.04.2002 | PCMB   |
| CANADIAN - RC                   |          | 250'000          | CAD  | 260'325           | 22.03.2002 | COMMUNITY BASED HEALTH, RECONSTRUCTION & ORGANISATIONAL DEVELOPMENT        |
| CANADIAN - RC                   |          | 250'000          | CAD  | 262'375           | 10.12.2001 | COMMUNITY BASED HEALTH   |
| CANADIAN - RC                   |          | 200'000          | CAD  | 192'000           | 04.09.2002 | INTEGRATED HEALTH & CAPACITY BUILDING                                      |
| CHINA/HONG KONG - RC            |          |                  |      | 821'000           | 24.04.2002 | INTEGRATED HEALTH  |
| FINNISH - GOVT                  |          | 336'376          | EUR  | 496'087           | 04.12.2001 | BHUJ TEMPORARY HOSPITAL  |
| FINNISH - RC                    |          | 150'000          | EUR  | 220'876           | 12.07.2002 | CBH  |
| FRENCH - RC                     |          |                  |      | 462'000           | 29.01.2002 | CONSTRUCTION HEALTH FACILITIES   |
| FRENCH RC, GUADELOUPE BRANCH    |          | 18'000           | USD  | 29'011            | 02.01.2002 | INTEGRATED HEALTH  |
| GERMAN - RC                     |          |                  |      | 19'296            | 31.08.2001 |  |
| GERMAN - RC                     |          |                  |      | 176'500           | 31.08.2001 |  |
| GERMAN - RC                     |          |                  |      | 44'000            | 03.09.2002 | WORKSHOP PUBLIC HEALTH IN EMERGENCIES                                      |
| INDIA - PRIVATE DONOR           |          | 10'425           | INR  | 399               | 31.12.2001 | RECEIVED BY DELEGATION   |
| INDIA - PRIVATE DONOR           |          | 459'837          | INR  | 16'085            | 26.02.2002 | RECEIVED BY DELEGATION   |
| INDIA - PRIVATE DONOR           |          | 1'000            | USD  | 1'679             | 14.09.2001 | RECEIVED BY DELEGATION   |
| INDIA - PRIVATE DONOR           |          | 500'000          | INR  | 17'100            | 20.12.2001 | RECEIVED BY DELEGATION   |
| JAPANESE - RC                   |          | 704'850'000      | JPY  | 9'617'678         | 03.12.2001 | C B HEALTH, HEALTH FACILITIES, WATSAN, DP AND RESPONSE, MGT & COORD.       |
| KOREA, REPUBLIC - RC            |          | 34'026'511       | WON  | 46'616            | 19.07.2001 |  |
| MACAU - RC                      |          | 13'770           | USD  | 24'442            | 20.08.2001 | DEVELOPMENT  |
| MALTESE - RC                    |          |                  |      | 6'254             | 08.01.2002 |  |
| MONACO - RC                     |          | 488'570          | FRF  | 112'096           | 23.07.2001 |  |
| NETHERLANDS - RC                |          | 1'450'000        | NLG  | 989'552           | 14.08.2001 | INTEGRATED HEALTH  |

|   |                 |                 |             |                  |             |   |
|---|-----------------|-----------------|-------------|------------------|-------------|---|
| NEW ZEALAND - RC  |                 | 54'220          | NZD         | 37'889           | 07.12.2001  |   |
| NORWEGIAN - GOVT/RC   |                 | 350'246         | NOK         | 64'620           | 18.12.2001  | DP & DR   |
| NORWEGIAN - GOVT/RC   |                 | 3'236'246       | NOK         | 600'230          | 19.10.2001  | PREFABRICATED HOSPITAL                          |
| PRIVATE DONOR   |                 |                 |             | 1'090            | 18.02.2002  |   |
| PRIVATE DONORS  |                 |                 |             | 222              | 26.02.2002  |   |
| PRIVATE DONORS  |                 |                 |             | 981              | 01.11.2001  |   |
| PRIVATE DONORS  |                 |                 |             | 494              | 23.10.2001  |   |
| SINGAPORE - RC  |                 |                 |             | 2'416'000        | 23.01.2002  | 2 UNITS OF PHC & 46 UNITS OF ANGANWADIS         |
| SOUTH AFRICAN - GOVT  |                 | 100'000         | INR         | 3'420            | 12.09.2001  | RECEIVED BY DELEGATION                          |
| SPANISH - RC  |                 | 66'110          | EUR         | 97'770           | 14.01.2002  | PROGRAMME MANAGEMENT & CO-ORDINATION BUDGET     |
| SWEDISH - RC  |                 | 6'000'000       | SEK         | 932'400          | 12.11.2001  | HEALTH PROGRAMME                                |
| SWEDISH GOVT/RC   |                 | 10'000'000      | SEK         | 1'700'000        | 30.01.2001  | REALLOCATION FROM E.A. 04/01, CAPACITY BUILDING |
| TAIWAN - RC   |                 | 2'305           | USD         | 3'772            | 19.12.2001  |   |
| <b>SUB/TOTAL RECEIVED IN CASH</b>                             |                 |                 |             | 23'973'450       | CHF         | 81.2%   |
| <b>KIND AND SERVICES (INCLUDING PERSONNEL)</b>                |                 |                 |             |                  |             |   |
| <b>DONOR</b>  | <b>CATEGORY</b> | <b>QUANTITY</b> | <b>UNIT</b> | <b>VALUE CHF</b> | <b>DATE</b> | <b>COMMENT</b>                                  |
| AMERICAN - RC   |                 |                 |             | 6'789'948        | 30.08.2002  | BILATERAL: TRIPARTITE AGREEMENT/ 3YEARS         |
| Austria   | Delegate(s)     |                 |             | 39'753           |             |   |
| Australia   | Delegate(s)     |                 |             | 88'213           |             |   |
| Canada  | Delegate(s)     |                 |             | 48'624           |             |   |
| Denmark   | Delegate(s)     |                 |             | 59'959           |             |   |
| Finland   | Delegate(s)     |                 |             | 100'862          |             |   |
| Germany   | Delegate(s)     |                 |             | 141'272          |             |   |
| Great Britain   | Delegate(s)     |                 |             | 278'930          |             |   |
| Japan   | Delegate(s)     |                 |             | 59'959           |             |   |
| Netherlands   | Delegate(s)     |                 |             | 98'233           |             |   |
| Sweden  | Delegate(s)     |                 |             | 111'046          |             |   |
| <b>SUB/TOTAL RECEIVED IN KIND/SERVICES</b>                    |                 |                 |             | 7'816'799        | CHF         | 26.5%   |
| <b>ADDITIONAL TO FEDERATION BUDGET (BILATERAL PROGRAMMES)</b> |                 |                 |             |                  |             |   |
| <b>DONOR</b>  | <b>CATEGORY</b> | <b>QUANTITY</b> | <b>UNIT</b> | <b>VALUE CHF</b> | <b>DATE</b> | <b>COMMENT</b>                                  |
| AMERICAN RED CROSS  |                 |                 |             | 9'771'580        |             |   |
| CANADIAN RC   |                 |                 |             | 2'407'500        |             |   |
| ITALIAN RC  |                 |                 |             | 294'960          |             |   |
| BRITISH RC  |                 |                 |             | 3'837'000        |             |   |
| SPANISH RC  |                 |                 |             | 2'000'000        |             |   |
| GERMAN RC   |                 |                 |             | 2'055'000        |             |   |
| CONSORTIUM (AUSTRIA / BELGIUM / GERMANY)                      |                 |                 |             | 3'697'000        |             |   |
| <b>SUB/TOTAL RECEIVED</b>                                     |                 |                 |             | 24'063'040       | CHF         |   |

