



**Central University of Jharkhand, Cheri-Manatu,
Ranchi-835222 Jharkhand**

In collaboration with

National Institute of Disaster Management
(Ministry of Home Affairs, Government of India)
A-wing, 4th Floor, NDCC-II Building, Jai Singh Road,
New Delhi – 110001

Online Process Orientation Training Programme on

“Child Centric Disaster Risk Reduction”



20th – 22nd October, 2021



11 AM – 1 PM

Patrons



Major General M. K. Bindal
Executive Director
NIDM, Government of India



Prof. Kshiti Bhusan Das
Vice Chancellor
Central University of Jharkhand

Guidance



Prof. Santosh Kumar
Project Director, CCDRR
NIDM, Government of India

Supervision



Prof. A.C. Pandey
Dean, SNRM
Central University of Jharkhand



Prof. Manoj Kumar
Head, DEVS
Central University of Jharkhand

Key Speakers



Sh. Ranjan Kumar
CCDRR Centre, NIDM



Dr. Kumar Raka
Programme Officer
CCDRR Centre, NIDM

Coordinators



Dr. Balu I
CCDRR Centre, NIDM



Dr. Kuldeep Baudh
Assistant Professor
DEVS, CUJ, Ranchi



Dr. Bhaskar Singh
Assistant Professor
DEVS, CUJ, Ranchi

Jointly Organized by :

CCDRR Centre,
National Institute of Disaster Management
Ministry of Home Affairs, Govt. of India
and
Central University of Jharkhand, Ranchi, India

Day 1: <https://youtu.be/D9daL5GtDLA>

Day 2: https://youtu.be/_gBa4CWl4m8

Day 3: <https://youtu.be/oMpXSxVhRZw>

LIVE (10:01) STREAMING YouTube

Register here- www.training.nidm.gov.in



**Stay Protected
from Corona**



Wear your Mask
Properly



Follow Proper
Hand Hygiene



Maintain Social
Distancing



Get
Vaccinated

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ABOUT THE INSTITUTE



The President of India gave assent to The Central Universities Act, 2009 that envisages establishing and incorporating universities for teaching and research in the various states.

The Central University of Jharkhand came into being under this Act on 1st of March, 2009. The Visitor of the Central University of Jharkhand, Her Excellency, Shrimati Pratibha Devisingh Patil, appointed Dr. Darlando T. Khathing, an internationally renowned scientist and a distinguished academic administrator, as its first Vice Chancellor.

CUJ's focus will be on research in cutting-edge technologies.

To develop enlightened citizenship of a knowledge society for peace and prosperity of individuals, nation and the world, through promotion of innovation, creative endeavours, and scholarly inquiry.

To serve as a beacon of change, through multi-disciplinary learning, for creation of knowledge community, by building a strong character and nurturing a value-based transparent work ethics, promoting creative and critical thinking for holistic development and self-sustenance for the people of India. The University seeks to achieve this objective by cultivating an environment of excellence in teaching, research and innovation in pure and applied areas of learning.

- To disseminate and advance knowledge by providing instructional and research facilities in such branches of learning as it may deem fit;
- To make special provisions for integrated courses in humanities, social sciences, science and technology in its educational programmes;
- To take appropriate measures for promoting innovations in teaching-learning process and inter-disciplinary studies and research;
- To educate and train manpower for the development of the country;
- To establish linkages with industries for the promotion of science and technology; and
- To pay special attention to the improvement of the social and economic conditions and welfare of the people, their intellectual, academic and cultural development.

Background of Program:

Disasters threaten the lives, constitutional rights and needs of the children worldwide. In past three decades, India have faced devastating disasters such as Latur Earthquake (1993), Odisha Super Cyclone (1999), Bhuj Earthquake (2001), Indian Tsunami (2004), Jammu & Kashmir Earthquake (2005), Urban Flood in Mumbai (2005), Bihar Floods (2008), Uttarakhand Floods (2013), Cyclone Phailin (2013), Srinagar Flood (2014), Chennai Flood (2015), Kerala Flood (2018), and Cyclone Fani (2019).

Droughts hits Andhra Pradesh, Gujarat, Karnataka, Maharashtra, Rajasthan, Tamil Nadu and Telangana. Bihar, Jharkhand and parts of North East are also drought prone. These states are home to nearly 500 million people that is almost 40% of the

country's population.

Droughts are slow onset disasters, adversely affecting women and children. Karnataka (16 districts) and Andhra Pradesh (4 districts) experienced at least 10 droughts between 2001-2015. During these emergencies, children are especially vulnerable to diseases, malnutrition, and violence and trafficking. Measles, diarrhoea, acute respiratory infections, malaria and malnutrition are the major killers of children during humanitarian crises. In future, vulnerability of children is expected to increase as the intensity and frequency of natural disasters rises.

Keeping in view the increasing vulnerability of children from climate change and natural disasters, National Institute of Disaster Management (NIDM), Ministry of Home Affairs, Government of India has established “**Child Centric Disaster Risk Reduction (CCDRR) Centre**” to mainstream child centric DRR activities through Training, Research, Advocacy and Consultancy.

AIM OF TRAINING

This **3 Days Online Process Orientation Training (POT) Programme on Child Centric Disaster Risk Reduction (CCDRR)** is intended for Trainers/ Teachers/ Professors/ Faculties of State level Universities, Colleges, Schools, Administrative Training Institutions and civil society trainers to help build their knowledge, skills and perspectives towards child centric disaster risk reduction. This will help officials understand and prepare for risk informed planning, sectoral readiness and preparedness for emergencies so that children are not deprived of basic amenities.

Programme Details

This training programme was scheduled for 3 days. It was based on e-learning module covering 2 hours each day during the programme from **11 AM to 1 PM**.

Learning Methods

CISCO WebEx Training Platform was used for this programme. All the participants were requested to install **CISCO WebEx Application** on their mobiles or desktops.

The training was conducted through various methods including power point presentations by the speaker/experts.

OBJECTIVES

Explain the Disaster Management Mechanism in India

- Identify and list the activities to protect and the children and their rights.
- Describe the ways to involve children DRR activities
- Explain the process of psychological care for children in disasters
- Draft and apply strategies for home to home school safety with the engagement of children
- Explain the process of mainstreaming child-centric risk management

COURSE MODULE

This Course has two modules and contents of the course would touch pon the following aspects, to achieve the objectives:

Module-I: Disaster and Children

Session -1: Disaster Management Mechanism in India

Session-2: Commitments toward Children in Disaster

Module-II: Approaches to Child Centric Disaster Risk Reduction

Session-4: Engaging Children in DRR

Session-5: Children in Disasters and Emergencies: A Methodical Understanding from a Psychological Perspective.

Session-6: Ensuring Home to School Safety

Demography of Participants:

A total of 336 officials from across India comprising of Faculties of Universities, Educational Institutions, Research Scholars, Students as well as Senior & Middle Management level officials from departments viz. Environment, Forest, Revenue, National Parks, Wildlife Sanctuary, Climate Change, Rural Development, Urban Development, Municipalities, Panchayats, Disaster Management etc. registered and

attended this online training programme, who are engaged in the management of disasters.

Programme Details:

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Learning Methods:

CISCO WebEx Training Platform was used for this programme. All the participants were requested to install CISCO WebEx Application on their mobiles or desktops. The training was conducted through various methods including power point presentations by the speaker/experts.

Link for Attendees:

<https://nidmmhaindia.webex.com/nidmmhaindia/j.php?MTID=m8fe816861b7b39ca8041d1a0761e829c> Meeting ID- 2514 105 4273 Password- 2021

PROGRAMME SCHEDULE

Program Schedule

Sl. No.	Time	Subject	Facilitator
Day-1			
1	11.00-11.30	Welcome Address	Coordinator Dr. Kuldeep Baudh Assistant Professor DEVS, CUJ, Ranchi
2		Opening remarks	Prof. Santosh Kumar Prof. & Head, CCDRR, NIDM
3		About the programme	Prof. Manoj Kumar, Prof. & Head, DEVS, Dean (Academic Affairs), CUJ
4		About SNRM	Prof. A.C. Pandey, Dean, SNRM CUJ
5		Key Note Address	Maj. General Manoj Kumar Bindal Executive Director, NIDM
6		Presidential Address	Prof. Kshiti Bhusan Das Vice Chancellor Central University of Jharkhand, India
7	11.30-12.00	Do's and Don'ts on Covid-19	Dr. Kumar Raka CCDRR, NIDM
8	12.00-13.00	Disaster Management Mechanism in India	Dr. Balu I. CCDRR, NIDM
Day-2			
9	11.00-12.00	Commitments to Children in Disaster	Mr. Ranjan Kumar CCDRR, NIDM
10	12.00-13.00	Engaging Children in DRR	Dr. Balu I. CCDRR, NIDM
Day-3			
11	11.00-12.00	Psychological Impact & Care for children in disasters	Ms. Namrata Shrama, Counseling Psychologist YWCA of Delhi
12	12.00-12.40	Ensuring Home to Home School Safety	Dr. Kumar Raka CCDRR, NIDM
13	12.40-13.00	Oral and Written feedback & Vote of Thanks	Dr. Bhaskar Singh Assistant Professor DEVS, CUJ, Ranchi

INAUGURAL SESSION

Welcome Address



The programme started with welcome address by **Dr. Kuldeep Baudh, Asst. Prof., DEVS, Central University of Jharkhand & Coordinator of the programme.**

Opening Remarks

Prof. Santosh Kumar, Prof. & Head, CCDRR, NIDM delivered the opening remarks in the during the programme. He highlighted the importance of collaboration, training and education and also the processes for disaster risk reduction.



Introductory Remarks



Prof. Manoj Kumar, Head, DEVS, Central University of Jharkhand briefed about the 3-days training programme

Special Address

Prof. A.C. Pandey, Dean, SNRM, Central University of Jharkhand briefed about the role of SNRM in teaching disaster management to all the Departments throughout the University and stated about the disasters affecting the Eastern India region like lightening strikes, forest fires, floods, cyclones, etc._



Vote of Thanks

Vote of thanks for the inaugural session was orated by Dr. Nirmali Bordoloi, Asst. Prof., DEVS, Central University of Jharkhand.

TECHNICAL SESSIONS

Day 1- 20th Oct, 2021

LECTURE – 1:

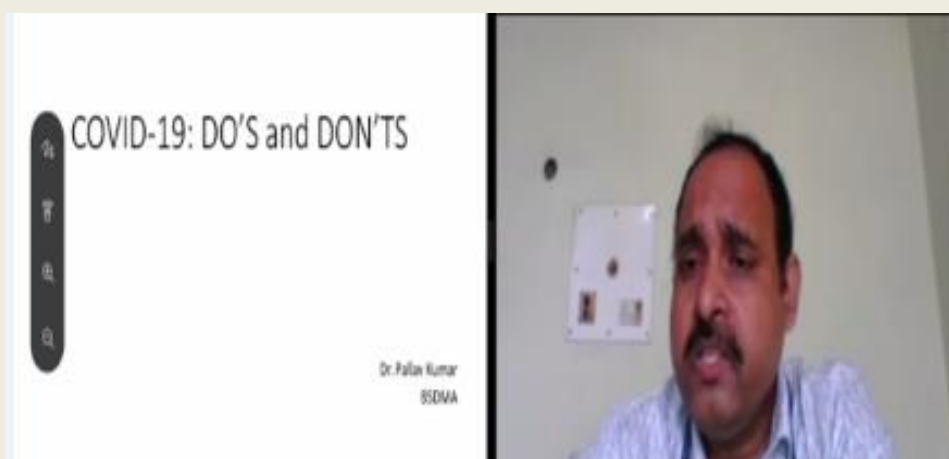
Topic: Do's and Don'ts on Covid-19

Speaker: Dr. Pallav Kumar, Bihar State Disaster Management Authority, Patna, Bihar.

Aim: To understand the fundamental things to do and the things that should be avoided during the period of COVID-19.

Dr. Pallav Kumar from Bihar State Disaster Management Authority, Patna, Bihar.

Through his personal experiences he suggested various measures to protect ourselves from covid-19. He pressed upon bringing behaviour change among the people. Protecting children during CoViD-19 is a major responsibility and he suggested children to play indoor games, requested parents to sanitize their belongings, & disinfect them. He suggested the schools to keep a check on kids when the schools will function at full capacity. Lastly, he emphasized on creating awareness regarding CoViD-19 A to Z .



Key Takeaways:

1. COVID-19 appropriate behavior.
2. Alphabetical learning of the precautions.
3. How to wear and remove a mask and how to be in other places.
4. Taking necessary precautions on how much time one should wash There hands. and other things.
5. Basics of Covid-19 precautions and actions of the individual.
6. Maintaining social distance and importance of taking the Vaccination.



LECTURE – 2:



Topic: Disaster Management Mechanism in India

Speaker: Ms. Dolphi Raman, Junior Research Officer at NIDM

Aim: To discriminate the knowledge about the Disaster Management Mechanism in India

Ms. Dolphi Raman is a Junior Research Officer at NIDM. She talked about hazard profile and disaster risk management mechanism in India. She told that covid-19 is a zoonotic disease and its frequency will increase with time. She also informed that frequency of landslides has increased, rivers have changed their course, sand mining has led to destabilization, occurrence of storms have increased, almost every state of India is now flood prone. She shared the National vision to build a safer and disaster resilient India by developing a holistic, proactive, multi disaster oriented and technology driven strategy through culture of prevention, mitigation, preparedness and response. She also informed about the salient features of Disaster Management Act 2005. Lastly, she talked about the role of NDRF & NIDM and their specific roles related to disaster prevention, mitigation, preparedness, & response.

Key Takeaways:

1. Understood the disaster mechanism and various types of disasters.
2. Effects of the Disasters and ways to minimize them in collaboration with various

organizations and NGO's.

3. Types of cyclones and causes and effects of them.

4. Ways of the storm surge and floods and tsunami's effects and actions to be taken.

5. Risk assessment of civil engineering, buildings, and infrastructure.

6. Risk governance, disaster response, management, and preventive actions such as spatial planning and remedial measures.

Day 2- 21st Oct, 2021

LECTURE – 1:

Topic: Commitments to Children in Disaster

Speaker: Dr. Balu I, CCDRR, NIDM

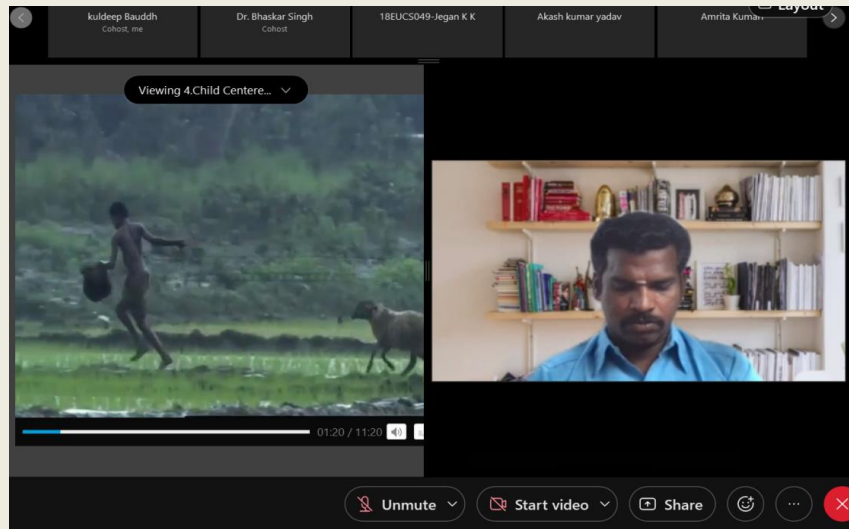
Aim: To provide a knowledge about the commitments to Children in Disaster

The first speaker of the session was Dr.

Balu I, of CCDRR, NIDM who talked about engaging children and adolescents in disaster risk management. He emphasized on the right to participation of children and the importance of engaging adolescents in



disaster management as their learning capability and creativity is immense along with their willingness to learn. He also focused on the institutional mechanism such as NYKS, NSS, NCC and Civil Defense for engaging youths in these endeavours. He also shared case studies that show successful children's participation in disaster relief such as in the Jnaneswari Express accident in West Midnapur where NCC cadets were mobilized to carry out rescue operations, in Earthquakes in Khillari and Bhopal Gas tragedy where NSS volunteers assisted in different ways. Additionally, he also informed about the importance of pre-disaster risk reduction activities by integrating DRR/CCA lessons into existing subjects and by participation in mock drills. Lastly, he concluded with a discussion about the challenges faced in engaging children and adolescents in disaster risk management.



Key Takeaways:

1. Special care on children and pregnant women to be taken.
2. Physical and Mental health of the children and care on the water intake from time to time.
3. Explained the nutrition values in different elements and child protection and steps one has to take towards it.
4. Education of the children is a very important for the mental growth of the children.
5. Learning and informing about the water sanitation and hygiene.
6. Social protection of girl child and Women empowerment and at the same time gender equality is to be maintained.

Lecture-2:

Topic: Engaging Children in DRR

Speaker: Ms. Dolphi Raman, Junior Research Officer at NIDM

Aim: To provide knowledge about the commitments to Children in Disaster especially during COVID-19

Ms. Dolphi Raman, Junior Research Officer at NIDM discussed about Constitutional Guarantees that are meant specifically for children with special focus on stakeholders of child development including the responsibility of states towards the protection of children and their rights. She emphasized on issues of maternal, neonatal, child and adolescent health conditions during the disaster period

WATER ,SANITATION AND HYGIENE (WASH)

- Quantity of water meets an initial **minimum survival level of 7.5 litres, to at least 15 litres per person per day**
- **Quality of water** meets **WHO** or **national** standards
- **No-one** is practicing **open defecation**
- A maximum **ratio of 20 people per functioning shared toilet,**



highlighting the importance of nutrition especially during covid times and problems

regarding rehabilitation of children in continuing their education post-disaster. She concluded her talk by shedding light on the importance of water, sanitation and hygiene, child protection, social protection and inclusion of children with disabilities during a disaster.

Concluding remarks and a formal vote of thanks for the second day's session was delivered by Dr. Purabi Saikia, Asst. Prof., DEVS, Central University of Jharkhand.

The screenshot shows a Cisco Webex Meetings interface. At the top, there's a menu bar with options like File, Edit, Share, View, Audio & Video, Participant, Meeting, Breakout Sessions, and Help. Below this, a participant list shows 'kuldeep Baudh' (Cohost, me) and 'Dolphi Raman (Cohost)' (with a microphone icon). To the right, there's a 'Meeting Info' section with 'Dr. Bhaskar Singh' (Cohost) and a 'Layout' button. The main content area displays a presentation slide titled 'HEALTH: MATERNAL AND NEONATAL'. The slide lists three bullet points: 'Pregnant women and adolescent girls receive scheduled antenatal care (ANC) in line with coverage of 4+ ANC visits', 'Pregnant women and adolescent girls receive skilled attendance at birth including essential new born care, with desired quality', and 'Mothers and new-borns receive early routine postnatal care within two days following birth'. To the right of the text is an illustration of a pregnant woman in a blue sari and a red headscarf, with icons representing ANC visits, skilled birth attendance, and postnatal care. The slide also includes the text 'Quality antenatal care will:' followed by three points: 'Encourage women to seek skilled care at childbirth', 'Reduce stillbirths, childbirth complications and newborn deaths', and 'Help women get care and counselling for HIV, malaria, TB and other conditions'. At the bottom of the slide, it states 'Quality antenatal care should be available for all women to ensure a positive pregnancy experience.' and features the World Health Organization logo. The bottom of the Webex interface shows controls for 'Unmute', 'Start video', 'Share', and other meeting functions.

Cisco Webex Meetings Meeting Info Hide Menu Bar

File Edit Share View Audio & Video Participant Meeting Breakout Sessions Help

kuldeep Baudh Cohost, me Dolphi Raman (Cohost) Dr. Bhaskar Singh Cohost nidm 18EUC5049-Jegdhre m Layout

Viewing Dolphi Raman's appl...

HEALTH: MATERNAL AND NEONATAL

- Pregnant women and adolescent girls **receive scheduled antenatal care (ANC) in line with coverage of 4+ ANC visits**
- Pregnant women and adolescent girls **receive skilled attendance at birth** including essential **new born care, with desired quality**
- Mothers and new-borns receive **early routine postnatal care within two days following birth**

Quality antenatal care will:

- Encourage women to seek skilled care at childbirth
- Reduce stillbirths, childbirth complications and newborn deaths
- Help women get care and counselling for HIV, malaria, TB and other conditions

Quality antenatal care should be available for all women to ensure a positive pregnancy experience.

World Health Organization

Unmute Start video Share

Key Takeaways:

1. Increasing public awareness about mental health
2. Right to participation of the Children.
3. Importance of Engaging the adolescents and mechanism for Engaging youth.
4. Various Disasters happened and the role played by the NSS volunteers and youth.
5. Pre disaster Reduction Activities and methods, and post Disaster recovery activities.
6. Explanation of Activities with live examples and tasks.

Day 3- 22nd Oct, 2021

Lecture-1:

Topic: Psychological Impact & Care for Children in Disasters

Speaker: Ms. Namrata Sharma, Counselling Psychologist from YWCA of Delhi

Aim: To monitor the mental health of the children in the event of a disaster and address the psychological impacts_

Ms. Namrata Sharma, an eminent Counselling Psychologist from YWCA of Delhi and the program started with her lecture.

Ms. Sharma spoke about Psychological Impact and Care for Children in Disaster. She said that mental health plays a significant role in the well-being of a person and mental issues that arise due to disaster are difficult to cope. Children's mental health suffers a lot due to disasters. She informed there are



several factors such as disaster type, extent and duration of disaster that affect the mental and emotional health of the child. She also discussed how the COVID-19 pandemic impacted the mental health of children. She highlighted that proper help, care and emotional responses could be minimal distress, fear, anxiety or disruptive behavior of the disasters affected victims. Lastly, she informed about Psychological First aid (PFA) which is recommended for children and adults in distress to promote their recovery.

Key Takeaways:

1. Role of Mental Health Professionals in Disaster Situation
2. one-on-one support for individuals in need of assistance
3. support for collective activities
4. support around living conditions and income
5. increasing public awareness about mental health

6. Establishment of systems to collect and share sufficient and relevant knowledge and to coordinate organizations for long-term post-disaster post ventions would be desirable.

For adolescent boys and girls, self-harm is among the top five causes of death

Death rate per 100,000 population, boys aged 15-19

Cause of death	Death rate per 100,000 population
Road injury	25.3
Interperson...	14.3
Self-harm	9.4
Drowning	5.8
HIV/AIDS	4.9

Download data

Death rate per 100,000 population, girls aged 15-19

Cause of death	Death rate per 100,000 population
Maternal conditions	5.9
Self-harm	9.4
Road injury	8.3
Diarrhoeal diseases	5.5
Tuberculosis	4.8

Download data

Source: WHO. Update from the Global health estimates 2015: deaths by cause, age, sex, by country and by region, 2000–2015 Geneva, 2016.
Note: 'Other' causes of death are not included in the charts.

Unmute

Start video

Share

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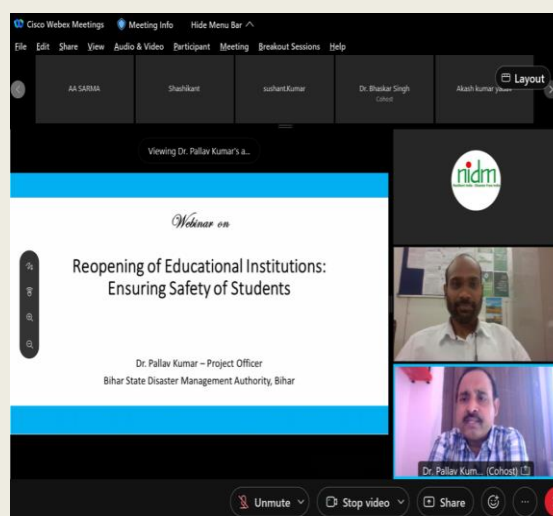
Lecture-2:

Topic: Ensuring Home to Home School Safety

Speaker: Dr. Pallav Kumar, Bihar State Disaster Management Authority, Patna, Bihar

Aim: To assist the students towards resilience post reopening of the schools and collages

Dr. Pallav Kumar from Bihar State Disaster Management Authority, Patna, Bihar, talked on “Reopening of educational institutions: Ensuring the safety of students. Dr. Kumar discussed the reopening of school after the disastrous COVID-19 pandemic lockdown and the safety percussion to be taken during the school opening times. He stressed on the increased vigilance and hygiene during the school opening can be reduced the further spared of the diseases. He recommends that sick students, teachers and staff should not come to school. Schools should have an uninterrupted water supply, waste management facility and sanitation facility. He also told that regular cleaning of school floors, walls and touchable surfaces and promoting social distancing can reduce the chance of spread of the disease.



A formal vote of thanks for the final day was delivered by Dr. Bhaskar Singh, Asst. Prof., DEVS, Central University of Jharkhand. In the end, Prof. A. C Pandey, Dean, SNRM, CUJ delivered the Concluding remarks and thanked all the organizing committee members and participants of the three days training programme.

Recordings

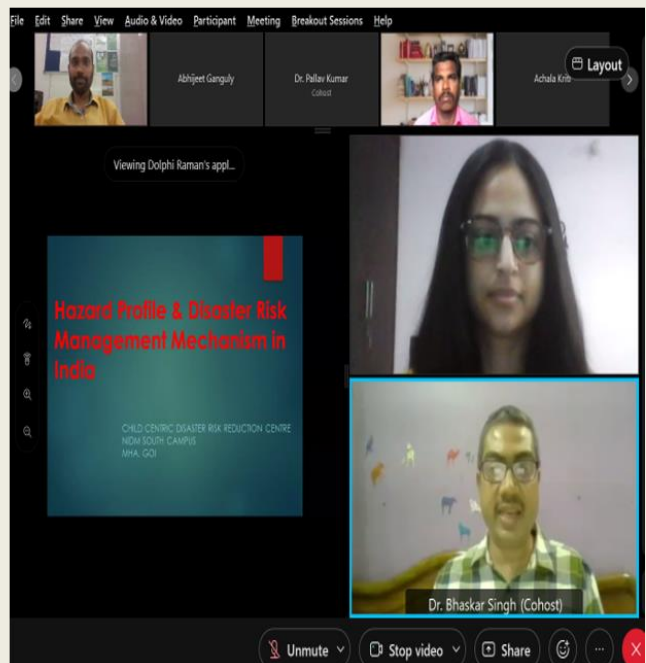
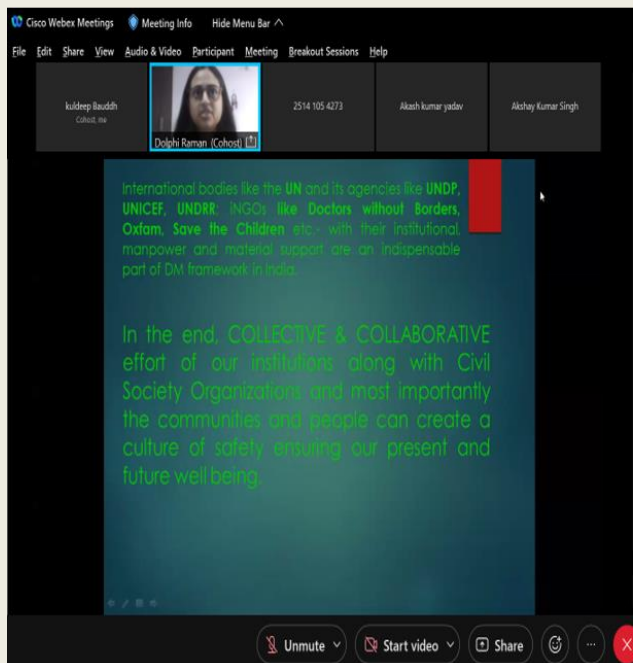
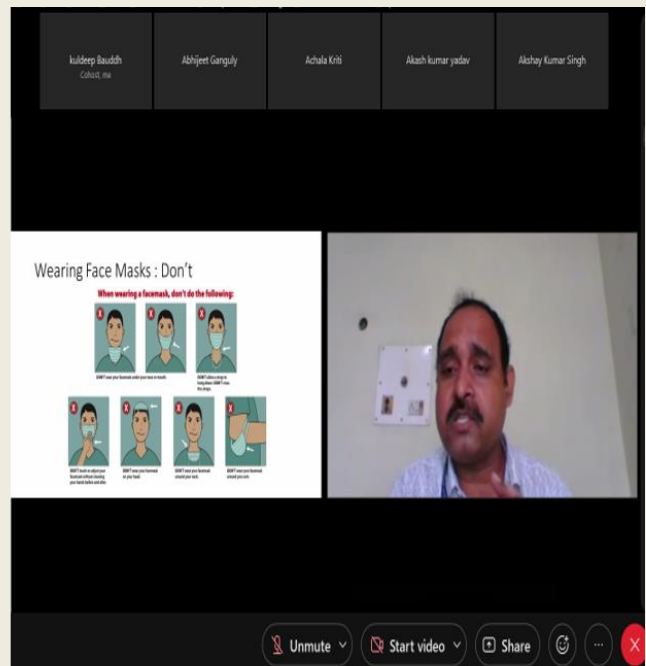
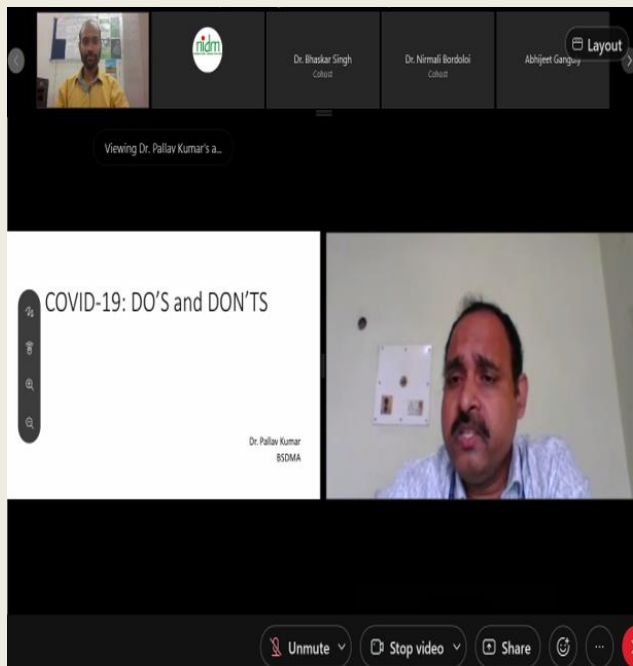
The recordings of the sessions of the three day's training programme could be seen at:-

<https://nidmmhaindia.webex.com/nidmmhaindia/j.php?MTID=m8fe816861b7b39ca8041d1a0761e829c> Meeting ID- 2514 105 4273 Password- 2021

Key Takeaways

Three-days' online training programme on "Child Centric Disaster Risk Reduction" jointly collaborated by NIDM, Ministry of Home Affairs, Government of India and CUJ, Ranchi, Jharkhand from 20th to 22nd October, 2021 provided opportunity towards helping guardians of the students, officials, school persons, policy makers to understand and prepare for risk informed planning, sectoral readiness and preparedness for emergencies so as children are not deprived of basic amenities during disaster, especially when the reopening of the academic institutes have been starting. Some of the important key takeaways that came out of the three days training programme are mentioned below:

1. Important role of NDRF & NIDM and their specific roles related to disaster prevention, mitigation, preparedness, & response.
2. Importance measures to take for protecting the children along with ourselves from covid-19.
3. Comprehensive understanding about Do's and Don'ts during COVID 19.
4. Importance of comprehensive school safety programs.
5. institutional mechanism such as NYKS, NSS, NCC and Civil Defense for engaging youths.
6. The importance of nutrition especially during covid times and problems regarding rehabilitation of children in continuing their education post-disaster.
7. How the COVID-19 pandemic impacted the mental health of children.



ORGANISING TEAM

National Institute of Disaster Management

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Guidance

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Professor & HoD,

Governance Inclusive Disaster Risk Reduction

Child Centric Disaster Risk Reduction

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Mr. Ranjan Kumar. CCDRR Centre. NIDM

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& Dean, Academic Affairs

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Coordinators

Dr. Kuldeep Baudhh

Assistant Professor

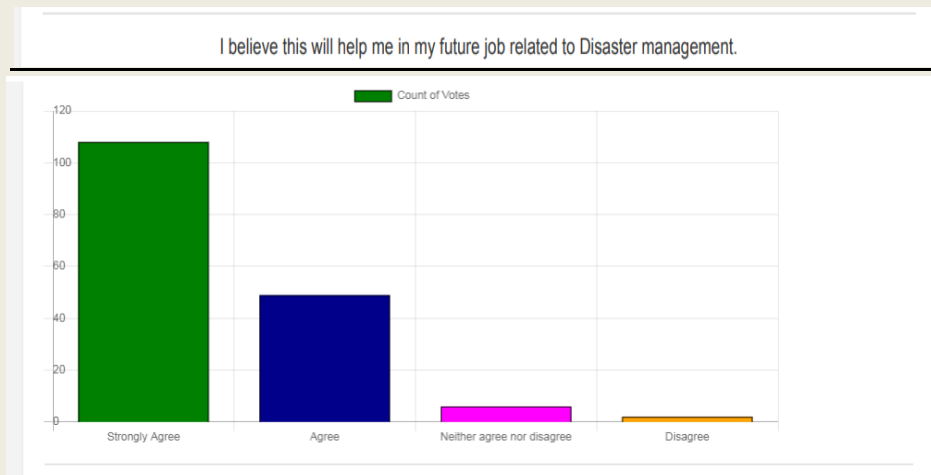
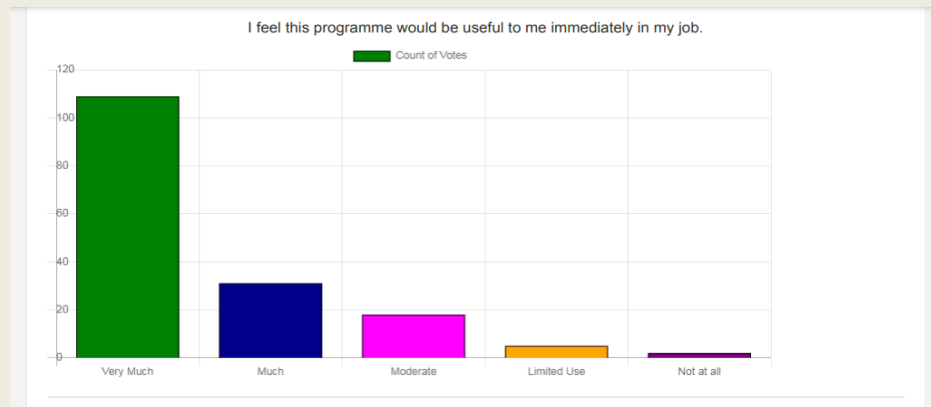
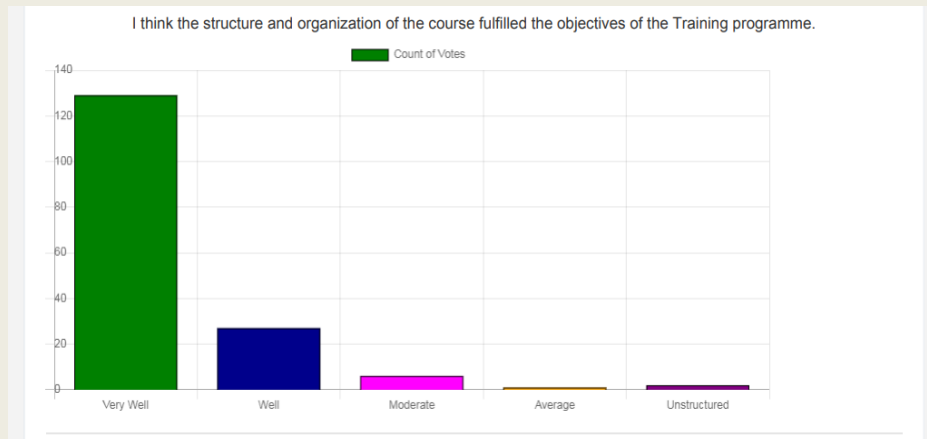
DEVS, Central University of Jharkhand

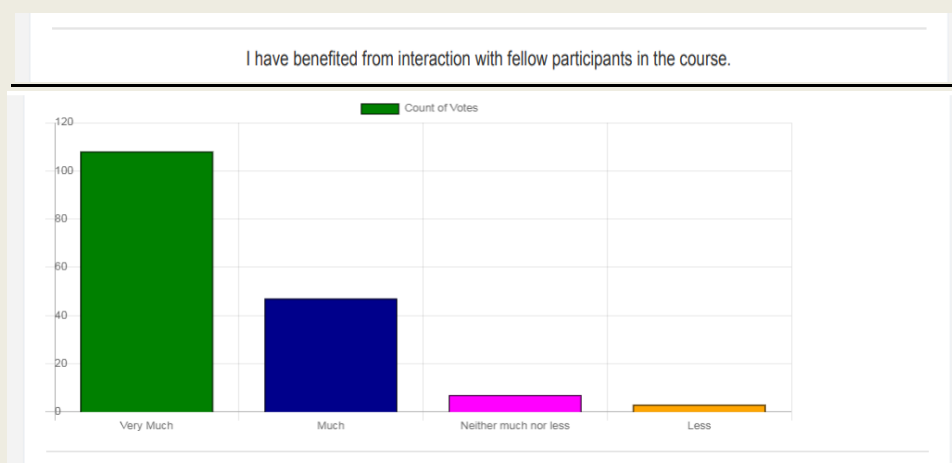
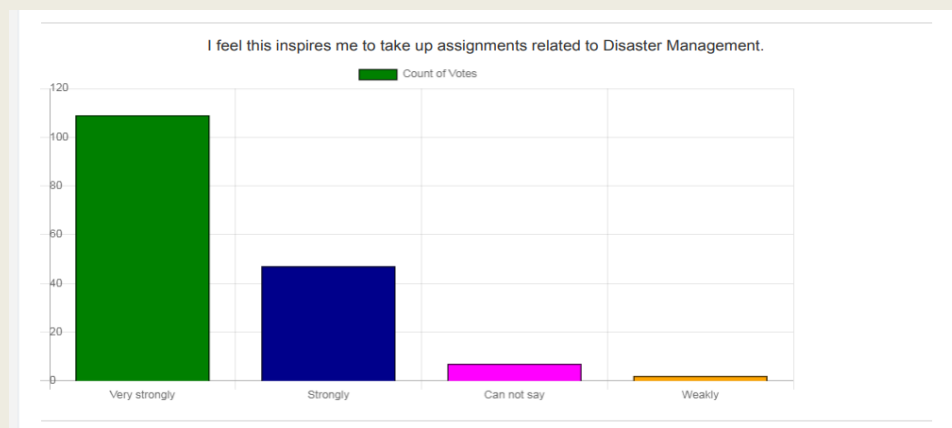
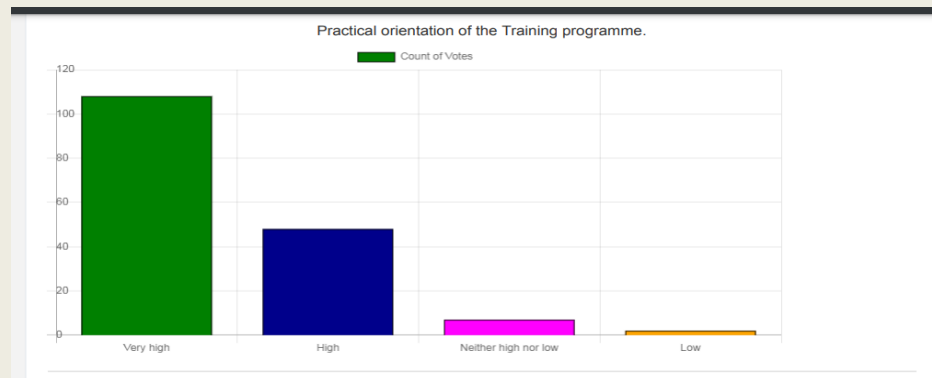
Dr. Bhaskar Singh

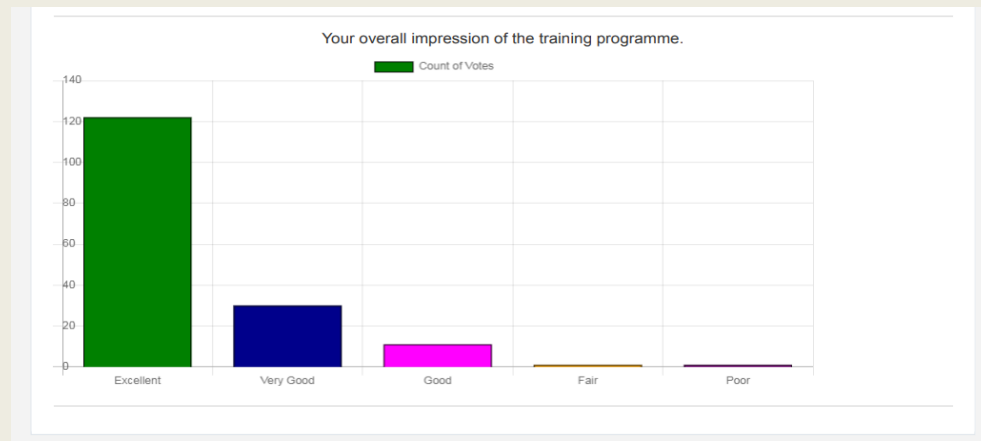
Assistant Professor

DEVS, Central University of Jharkhand.

Course Feedback







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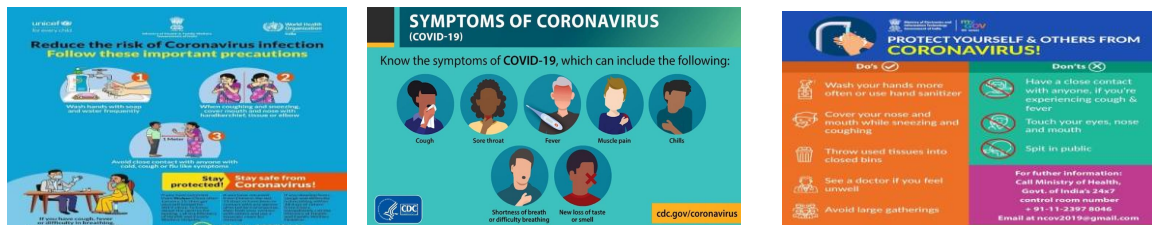
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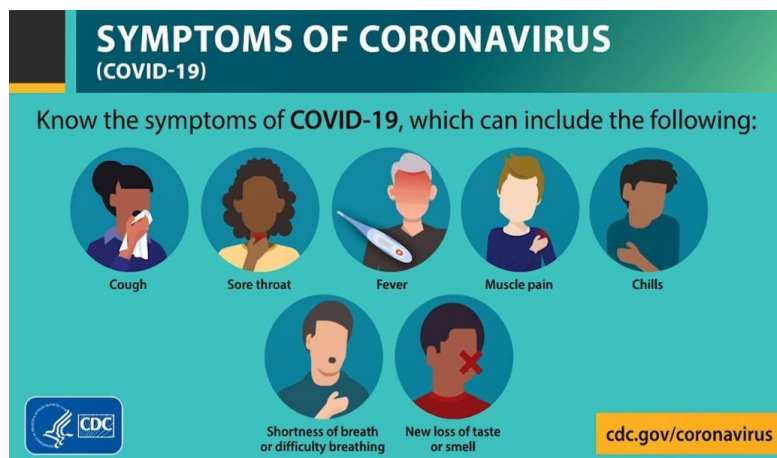
Reading Material



COVID-19 APPROPRIATE BEHAVIOUR

BACKGROUND

- The **first case of coronavirus** took place on **1 December 2019 in Wuhan, China**- a man who was 55 years old.
- In India was reported on **30 January 2020**



COVID-19 Tracker

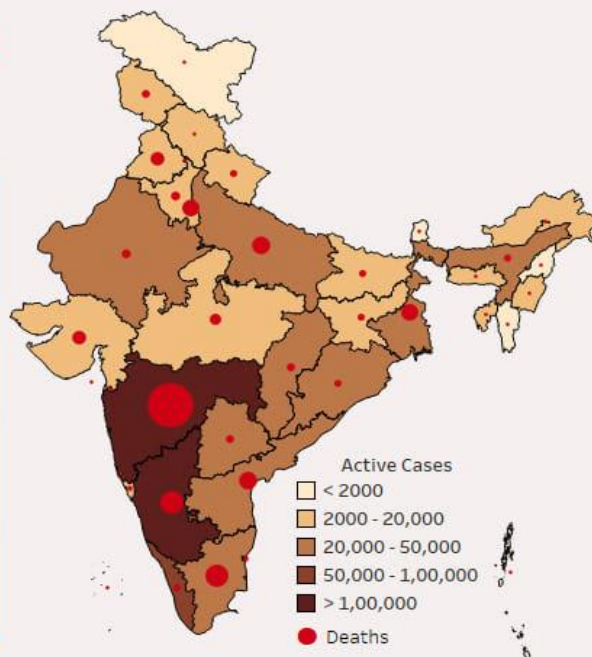
As on 12 October 2020, till 8AM

Total Cases **71,20,538** (▲66,732)

Recovered **61,49,535** (86.4%) ▲ 71,559

Active **8,61,853** (12.1%) ▼ 5,643

Deaths **1,09,150** (1.5%) ▲ 816

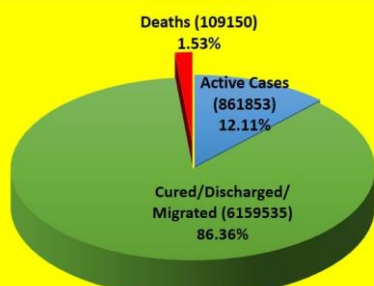


COVID-19 STATUS

#IndiaFightsCorona

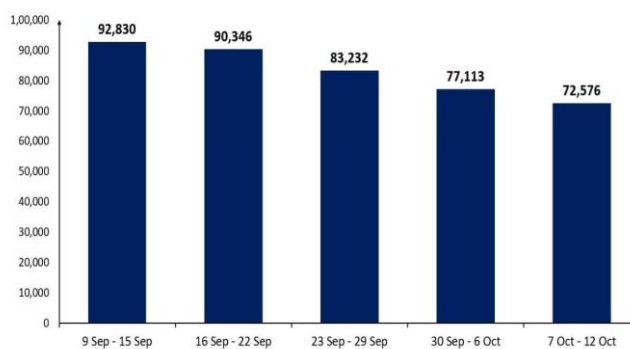
Total COVID-19 cases in India

(October 12, 2020)



@COVIDNewsByMIB

Continuous decline in average daily new cases for last 5 weeks



JAN ANDOLAN CAMPAIGN

- Prime Minister Narendra Modi will launch a '**Jan andolan**' campaign for Covid appropriate behaviour on 8 Oct.
- launched in view of the **upcoming festivals and winter season** as well as the **opening up of the economy**.



NOVEL CORONAVIRUS DISEASE (COVID-19)

Ministry of Health & Family Welfare
Government of India

Help us to help you



How to wear Face-cover/mask properly?

- ✓ Tie the top string first while wearing it
- ✓ Ensure mouth and nose are fully covered
- ✓ Ensure you do not have any difficulty in breathing while face-cover/mask is on
- ✗ Do not touch the front of your face-cover/mask with hands
- ✓ Untie bottom string first while taking it off

Badalkar Apna Vyavahar, Karein Corona Par Vaar

For information related to COVID-19
Call the State helpline numbers or Ministry of Health and Family Welfare, Government of India's 24x7 helpline number 1075 (Toll Free), Email at ncov2019@gov.in, ncov2019@gmail.com

mohfw.gov.in [f @MoHFWIndia](https://www.facebook.com/MoHFWIndia) [@MoHFW_INDIA](https://twitter.com/MoHFW_INDIA) [@mohfwindia](https://www.instagram.com/mohfwindia) [mohfwindia](https://www.youtube.com/mohfwindia)



Ministry of Health & Family Welfare
Government of India

NOVEL CORONAVIRUS DISEASE (COVID-19)



Help us to
help you

COVID APPROPRIATE BEHAVIOUR

Wear home-made reusable face-cover/mask at all times



PROPER WAY

IMPROPER WAYS

Badalkar Apna Vyavahar, Karein Corona Par Vaar

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Government of India



Help us to
help you

Novel Coronavirus Disease (COVID-19)

Practise frequent hand-washing with soap and water!



1 Palm to palm



2 Between fingers



3 Back of the hands



4 Base of thumbs



5 Back side of the fingers



6 Fingernails



7 Wrists



8 Rinse and wipe dry

Together we can fight COVID-19!

For further information:

Call the State helpline numbers or Ministry of Health and Family Welfare, Government of India's 24x7 helpline numbers

1075 (Toll Free) or 011-23978046

Email at ncov2019@gov.in, ncov2019@gmail.com



Ministry of Health and Family Welfare
Government of India



Help us to
help you

NOVEL CORONAVIRUS (COVID-19)



Practise Social Distancing...
Safety comes first!

Do's ✓



Maintain at least 1 metre distance in hospitals, malls, market places, restaurants, public transport, etc.



Work from home and avoid meetings, classes, tutorials, workshops, etc., as far as possible



Keep number of guests minimal if social events cannot be postponed

Don'ts ✗



Visiting crowded or public places



Non-essential social, commercial, religious, cultural, sporting events, etc.



Shaking hands and hugging as a matter of greeting



Non-essential travel



Tourist trips

**Together we can fight
COVID-19!**

If you feel unwell (Cough, fever or difficulty in breathing), avoid exposure to others and immediately call the helpline numbers

For further information call
Ministry of Health and Family Welfare,
Government of India's 24x7 Control Room Number

1075 (Toll Free) | +91-11-2397 8046

Email to: ncov2019@gov.in, ncov2019@gmail.com

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NOVEL CORONAVIRUS DISEASE (COVID-19)



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NAMASTE



**GREET WITH NAMASTE,
AVOID HANDSHAKES AND HUGS**

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1075 (Toll Free). Email at ncov2019@gov.in, ncov2019@gmail.com

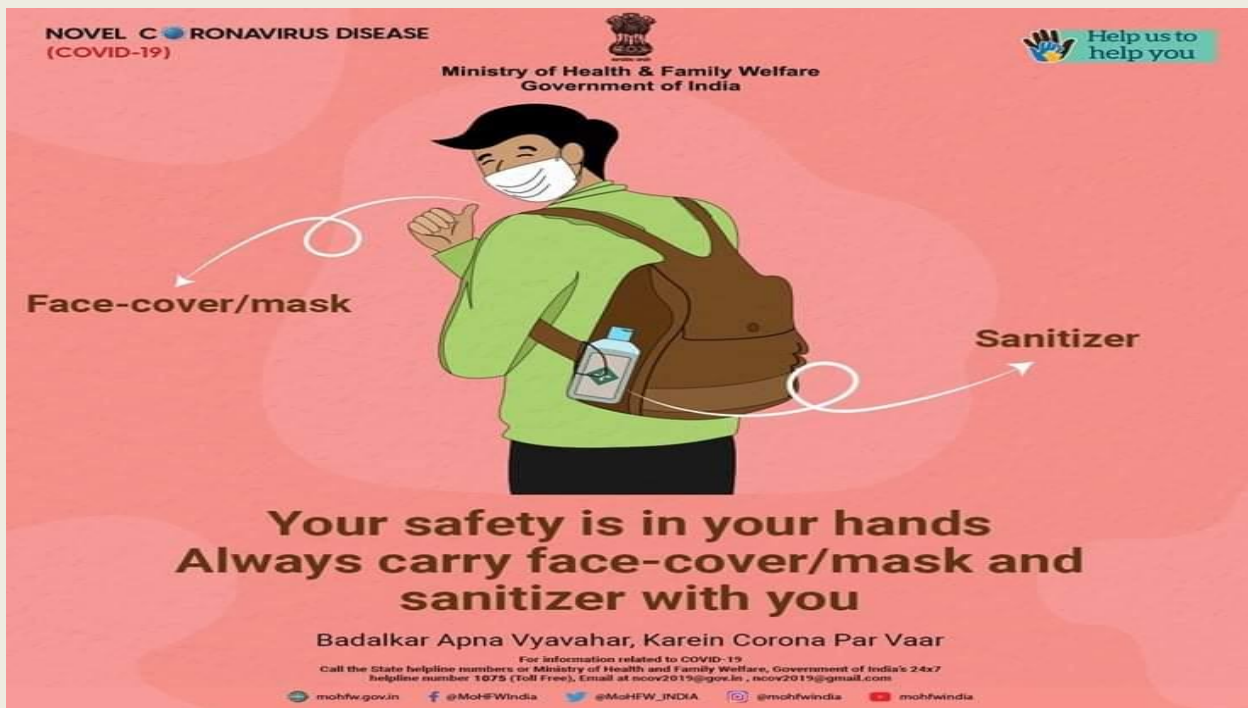
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NOVEL CORONAVIRUS DISEASE (COVID-19)

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Help us to help you

I permit only one passenger in my rickshaw to ensure physical distancing



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NOVEL CORONAVIRUS DISEASE (COVID-19)

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Government of India

Help us to help you

COVID APPROPRIATE BEHAVIOUR



**MAINTAIN DISTANCE OF 6 FEET
STAY HAPPY, HEALTHY ON YOUR FEET**

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Help us to help you

LITTLE DROPS MAKE THE MIGHTY OCEAN

LET US ALL DO OUR BIT AND FOLLOW COVID APPROPRIATE BEHAVIOURS, EVERYDAY, EVERYWHERE



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NOVEL CORONAVIRUS DISEASE (COVID-19)

Help us to help you

Commuting to office using public transport?

Always maintain distance from co-passengers and wear your face-cover/mask at all times



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NOVEL CORONAVIRUS DISEASE
(COVID-19)

Help us to help you

COVID APPROPRIATE BEHAVIOUR



**2 GAJ KI DOORI
HUM SABKE LIYE
ZAROORI**

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NOVEL CORONAVIRUS DISEASE
(COVID-19)

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Help us to help you

Customers are encouraged to stand on the markings to ensure physical distancing



**6 Feet
2 Gaj**

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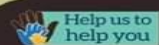
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NOVEL CORONAVIRUS DISEASE
(COVID-19)



**Maintain distance of 6 feet from others
while visiting religious places**

**Take off your shoes/footwear inside
your own vehicle or keep it in a
separate slot from others**

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Karein Corona Par Vaar**

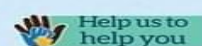
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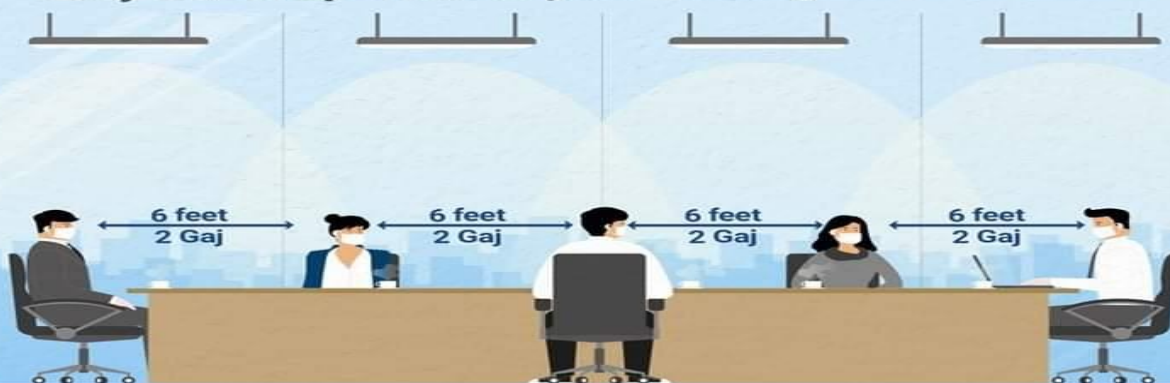
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NOVEL CORONAVIRUS DISEASE
(COVID-19)



**Rearrange your office seats to
maintain physical distance from others**

Stay 6 feet apart from your colleagues at all times



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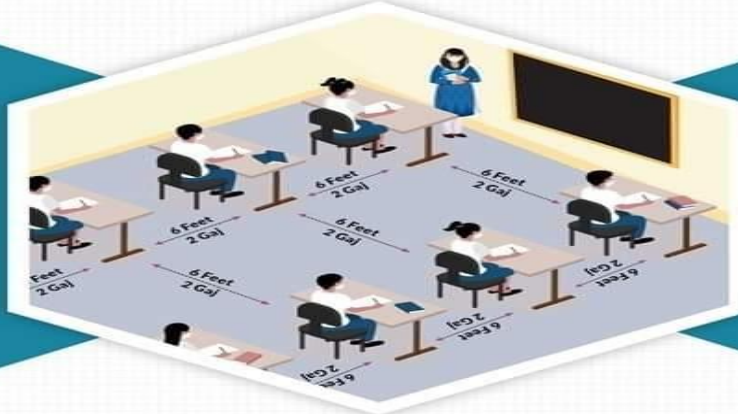


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TAKING AN EXAM!

REMEMBER TO WEAR YOUR MASK AND FOLLOW DISTANCING NORMS
ALL THE BEST!



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NOVEL CORONAVIRUS DISEASE (COVID-19) Help us to help you

Prevent the spread of COVID-19 by cleaning your house regularly!

KEEP SURROUNDINGS CLEAN BY DISINFECTING COMMONLY TOUCHED SURFACES

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Ensure that regularly touched surfaces are kept clean

Electronic devices

Doorhandle

Keyboard

Elevator Button

Phone

Stairs

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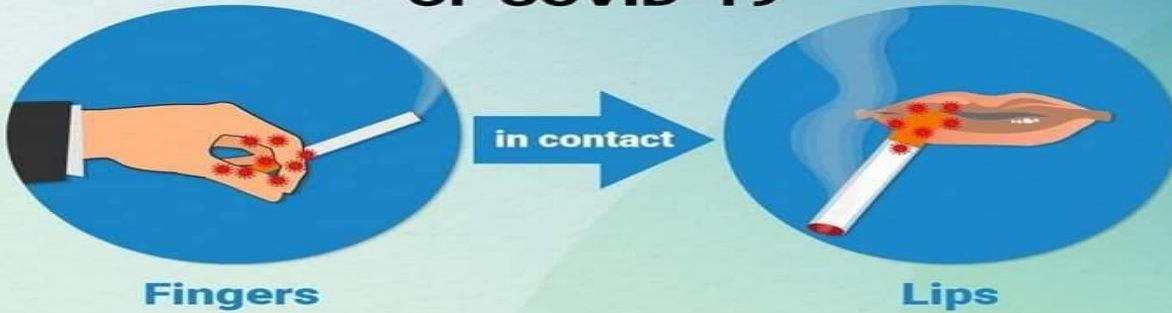


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Government of India

NOVEL CORONAVIRUS DISEASE
(COVID-19)



SMOKERS ARE MORE LIKELY TO DEVELOP SYMPTOMS OF COVID-19



**Smoking increases the possibility of
transmission of virus from hand to mouth**

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NOVEL CORONAVIRUS DISEASE
(COVID-19)



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CARPENTER, PLUMBER OR ANY OTHER ESSENTIAL SERVICE PROVIDERS

**EVERYONE MUST FOLLOW
COVID APPROPRIATE
BEHAVIOURS**



6 Feet
2 Gaj



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COVID-19 is not over yet!
**Do not start visiting others and organizing
social functions. Stay home, stay safe!**



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**Avoid stepping out of the
house unnecessarily**

Take extra care of:



**Senior citizens
(Above the age of 60)**



**Those with co-morbid
conditions**



Pregnant women



**Children under
the age of 10**

Stay home, stay safe

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1075 (Toll Free), Email at ncov2019@gov.in, ncov2019@gmail.com

PROTECT CHILDREN FROM COVID-19

Wash their hands,
frequently



Maintain at least 6
feet (or more)
distance from
outsiders

Keep their hands
off their faces



No indoor
games at a
shared
facility

Keep their things clean
(toys, cabinets, stores,
shelves, table-tops, etc.)
regularly



No in-person socializing
(parties, play-dates,
sleepovers, etc.)



Ministry of Health & Family Welfare
Government of India

NOVEL CORONAVIRUS DISEASE (COVID-19)



Help us to
help you

Anxiety associated with COVID-19 pandemic may lead to psychological issues

If your child has:

Sudden changes in school
performance/poor grades

Delayed physical or
mental development

Poor
attention/hyperactivity



Frequent changes in
emotions and mood

Frequent
temper-tantrums/aggression

Recent sleep disturbance

Visit your nearest health center with your child

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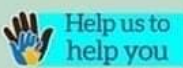
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NOVEL CORONAVIRUS DISEASE (COVID-19)




Let's do our bit And pledge not to spit

Spitting in public places increases the risk of spread of COVID-19

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MINISTRY OF
HEALTH AND
FAMILY WELFARE
GOVERNMENT OF INDIA


Help us to
Help You



CORONAVIRUS

HOME QUARANTINE TIPS



Home quarantined person should stay in a well-ventilated single room with a toilet



Relatives should maintain a distance of at least 1 meter between the two



Stay away from elderly people, pregnant women, children



Restrict movement within the house



Frequent hand washing, avoid sharing household items, wear surgical mask



Disinfect frequently touched surfaces

FOR FURTHER INFORMATION
Call +91 11 23978046 or Email ncov2019@gmail.com



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Government of India

NOVEL CORONAVIRUS DISEASE
(COVID-19)



WAYS TO PROMOTE MENTAL HEALTH



Be positive and maintain a good work-life balance



Stay active and engage in recreational activities



Practise yoga and meditation



Stay away from tobacco, alcohol and addictive substances



Stay connected. Share your feelings



Sleep well

THE BEST YOU CAN DO TO HELP YOURSELF IS TO SEEK HELP

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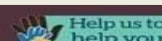
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Government of India

NOVEL CORONAVIRUS DISEASE (COVID-19)



Anxiety associated with COVID-19 pandemic may lead to psychological issues

In case you are feeling

Persistent or prolonged sadness



Having negative thoughts



Tiredness



Lack of interest in tasks you enjoyed previously



Changes in sleeping/eating patterns



Suicidal thoughts



You could be under depression

Visit your nearest health centre if you have these symptoms for more than two weeks

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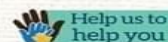
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NOVEL CORONAVIRUS DISEASE (COVID-19)



Anxiety associated with COVID-19 pandemic may lead to psychological issues

In case you're feeling anxious and stressed out



**Call NIMHANS (toll-free)
helpline #080-46110007**

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HELP LINE

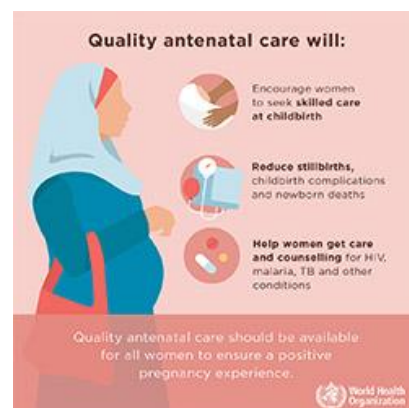


**Helpline for
Novel Coronavirus
+91-11-23978046**



HEALTH: MATERNAL AND NEONATAL

- Pregnant women and adolescent girls **receive scheduled antenatal care (ANC)** in line with coverage of **4+ ANC** visits
- Pregnant women and adolescent girls **receive skilled attendance at birth** including essential **new born care, with desired quality**
- Mothers and new-borns receive **early routine postnatal care within two days following birth**



HEALTH: MATERNAL AND NEONATAL

- Small and sick new-borns have **access to inpatient level special new-born care within two hours of travel time**
- Children and women **receive routine vaccinations, including in hard-to-reach areas**
- Women and children **reached during vaccination campaigns** conducted to reduce risk of epidemic-prone outbreaks

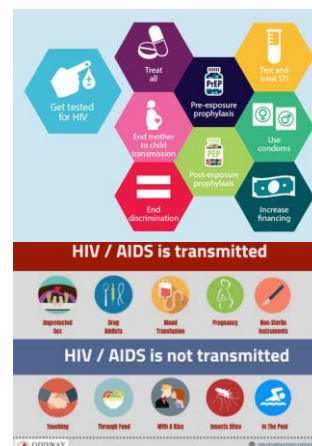


CHILD AND ADOLESCENT HEALTH

- Children and adolescents have **safe and uninterrupted access to health services** through functional health facilities, school and community-based activities and at the household level
- Children and adolescents **receive quality, age- and gender-appropriate prevention, diagnosis and treatment** for **common causes of illness** and death
- Children, adolescents and caregivers have **access to psychosocial support**
- Children, their caregivers and communities are **aware of available health services** and **how and where to access them**
- Adolescents have **access to information on health, including sexual, reproductive and mental health**

HEALTH : HIV /AIDS

- HIV **prevention services** are available and used, including information on **post-rape care, HIV post-exposure prophylaxis and sexually transmitted infection (STI) treatment**
- Confidential and voluntary HIV testing** is available and used
- HIV and AIDS care and treatment services**, including antiretroviral treatment, are available and accessed



NUTRITION: PREVENTION OF UNDERNUTRITION, MICRONUTRIENT DEFICIENCIES

- **Caregivers of children aged 0-23 months** are supported to adopt recommended infant and young child feeding (IYCF) practices, including both breastfeeding and complementary feeding.
- Children aged 0-59 months have improved nutritional intake and status through age-appropriate nutrient-rich diets, micronutrient supplementation, home-fortification of foods and deworming prophylaxis, according to context.
- Children in middle childhood have access to community- and school-based package of interventions that includes at a minimum: iron supplementation, deworming prophylaxis nutrition education, counselling and support
- Adolescent girls and boys have access to community- and school- based package of interventions

NUTRITION

- Pregnant women and breastfeeding mothers - with special attention to pregnant adolescent girls have access to a package of interventions
- All children aged under five years in affected areas are screened regularly for the early detection of severe wasting and other forms of life-threatening acute malnutrition and are referred as appropriate for treatment services
- Children, adolescents, caregivers and communities are aware of available nutrition services and how and where to access them



FASTEST WAY TO RECOVER FROM MALNUTRITION



CHILD PROTECTION

- **Civil registration systems** provide accessible and **safe birth registration** and certification for children and their families.
- Family and community support systems are identified and strengthened **to provide MHPSS** activities.
- **Causes of child separation are identified** in a timely manner and **actions to prevent separation**,
- All **UASC are identified**, are in **family-based care or in a suitable, safe, alternative care arrangement**;
- **UASC are registered, safely reunified and reintegrated** with primary caregivers or other family members

EDUCATION

- **Formal and non-formal education programmes**, including **early learning and skills**, are available and used
- Preventive measures are taken to make **learning environments safe and accessible**
- Learning environments are **free from sexual harassment, abuse and violence**
- Preventive measures are taken to make learning environments healthy and free from disease outbreaks
- **Continuity of education for all children is ensured**, with a **specific attention to girls, children with disabilities, refugees, displaced children and other marginalized or vulnerable** children.

WATER ,SANITATION AND HYGIENE (WASH)

- Quantity of water meets an initial **minimum survival level of 7.5 litres, to at least 15 litres per person per day**
- **Quality of water** meets **WHO** or **national** standards
- **No-one** is practicing **open defecation**
- A maximum **ratio of 20 people per functioning shared toilet,**



WATER ,SANITATION AND HYGIENE (WASH)

- **Separated toilet for men and women, with locks, child-friendly features and hand washing facilities,** is ensured and adapted to people with disabilities.
- **Sanitation service** meets at **least “limited” level,** as per **JMP standards.**
- **Excreta is safely contained, collected, transported,** treated and disposed of in a way that **safeguards public health**
- Adolescents benefit from hygiene awareness-raising activities and have **access to hygiene and menstrual health** information

GENDER EQUALITY AND EMPOWERMENT OF GIRLS AND WOMEN

- **Organizations** representing **adolescent girls, women's rights and youth** are **engaged in programme design, delivery and monitoring**
- **Women and adolescent girls** are **equitably represented** in **community feedback and complaints mechanisms**
- **Men and boys** are **mobilized** to support and **promote gender equality** and the rights and engagement of women and girls



ADOLESCENT DEVELOPMENT AND PARTICIPATION

- **Age- and gender-responsive services** and programmes **addressing the priority needs of adolescent girls and boys** are available, accessible and used
- **Training and capacity-building for adolescent girls and boys**, including **skills development**, are available, accessible and undertaken across sectors
- **Adolescents** are **supported and promoted as agents of change**



PUBLIC HEALTH EMERGENCIES

- **Interagency and intersectoral coordination** mechanisms, **including cross- border**, are in place and allocate clear **roles and responsibilities across sectors**, without gaps nor duplications
- **Surge deployments and emergency procedures** are **activated on a no- regrets** basis
- The **risk of geographical spread of the outbreak** and its **potential impact** are **monitored**,
- Specific **needs and vulnerabilities of children and women** are **considered in prevention and treatment protocols**, including in the design of patient-centred treatment programmes
- Directly affected by the PHE are **reached with Infection and prevention control (IPC)**

Hazard Profile of India

- ▶ India is the **7th largest country** by area, the **2nd most populous country** with over 1.37 billion people and due to its physiographic and climatic conditions is one of the **most disaster prone areas** of the World.
- ▶ Nearly **59% of the landmass is prone to earthquakes** of moderate to very high intensity.
- ▶ More than 40 million hectares (**12% land**) is **prone to floods** and river erosion.
- ▶ Nearly 7,500 km long coastline, close to **5,700 km is prone to cyclones and tsunamis**.

Hazard Profile of India

- ▶ Nearly **68%** of the cultivable area is **vulnerable to drought**.
- ▶ Large tracts in hilly regions are at risk from **landslides** and some are prone to **snow avalanches**.
- ▶ Further, the vulnerability to **Chemical, Biological, Radiological and Nuclear (CBRN)** disasters and terrorism has also increased manifold.

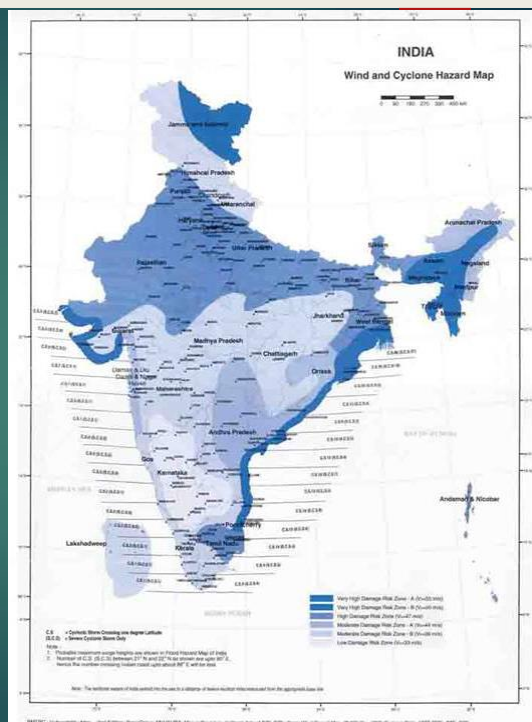
Tropical Cyclones

Total Coastline – **7,516 kms**

Vulnerable to Cyclones & Tsunamis – **5,700 kms**

High Vulnerability States

- Odisha
- Andhra Pradesh
- West Bengal
- Tamil Nadu
- Gujarat
- Kerala
- Puducherry



Tropical Cyclones

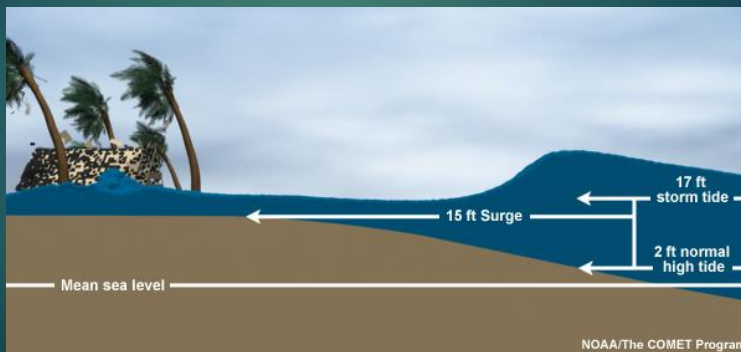
- ▶ India's long coastline of nearly **7,500 km** is **vulnerable** to about **10% of the World's tropical cyclones**.
- ▶ Cyclones occur frequently on both the west coast in the **Arabian Sea** and the east coast in the **Bay of Bengal**.
- ▶ More **cyclones occur in the Bay of Bengal** than in the Arabian Sea and the **ratio is approximately 4:1**.
- ▶ On an average, **5 to 6 tropical cyclones** form every year, of which 2 or 3 could be severe.

Landslides

- ▶ Resulting from **natural phenomena** (heavy rainfall, snowmelt, gravity, volcanic eruptions, earthquakes) or **man-made actions** (deforestation, construction, blasting etc.)
- ▶ Landslides **occur in the hilly regions** of India such as the Himalaya, North-East India, the Nilgiris, Eastern Ghats and Western Ghats.
- ▶ It is estimated that **30% of the World's landslides** occur in the Himalayan ranges. Landslides are also common in Western Ghat.

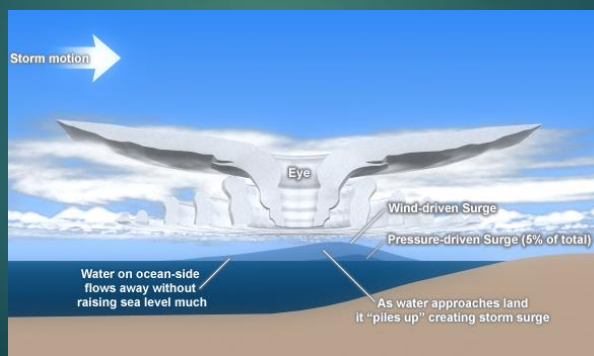
Storm Surge

- ▶ Storm surge, **a coastal phenomenon**, is the inherent destructive aspect of cyclones.
- ▶ It is an **abnormal rise of water** generated by a storm, over and above the predicted astronomical tides.



Storm Surge

- ▶ The rise in water level **can cause extreme flooding** when storm surge coincides with normal high tide, reaching up to 6 metres or more in some cases.
- ▶ Most casualties during tropical cyclones occur as the result of storm surges.



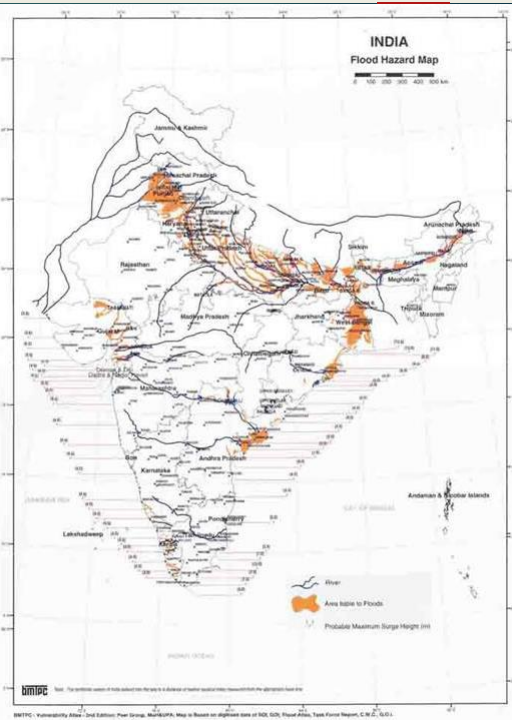
Floods

Vulnerability – 12% of total landmass

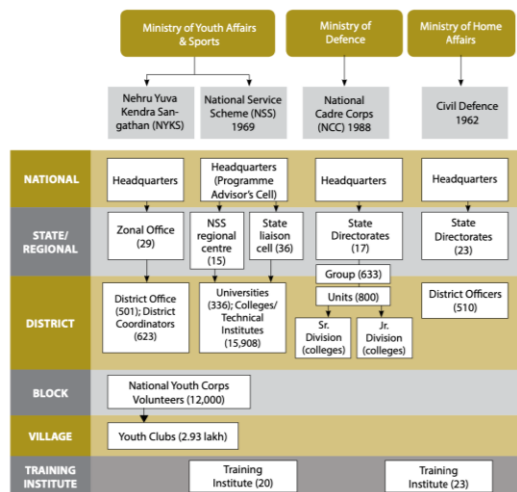
Most of the States in the country are vulnerable to floods in varying degree

High Vulnerability States

- Assam
- Bihar
- Andhra Pradesh
- Odisha
- West Bengal
- Gujarat
- Maharashtra
- Karnataka
- Gujarat
- Uttar Pradesh
- Uttarakhand
- Himachal Pradesh
- Delhi
- Punjab
- Haryana
- Kerala



INSTITUTIONAL MECHANISM FOR ENGAGING YOUTH



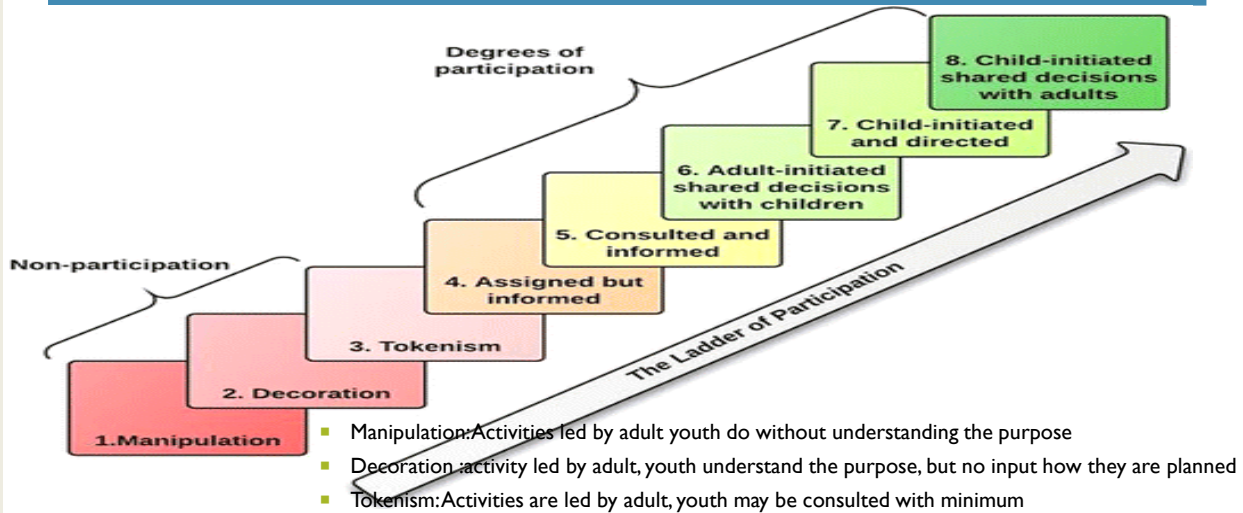
STRATEGIES FOR ENGAGING ADOLESCENTS

STRATEGY 1		Engagement of youth in all phases of disaster management
STRATEGY 2		Focus on environmental resource management and combating the impact of climate change
STRATEGY 3		Establish institutional linkages and promote convergence of initiatives
STRATEGY 4		Build capacity of institutions and individuals
STRATEGY 5		Use information and communication technology to promote and connect volunteers
STRATEGY 6		Setup Youth Technical Advisory Boards and mentoring groups; Identify local youth leaders

STRATEGIES FOR ENGAGING ADOLESCENTS

STRATEGY 7		Strengthen networks with civil society organisations; promote volunteerism
STRATEGY 8		Advocate the role of youth volunteers through social and print media
STRATEGY 9		Develop a robust monitoring and evaluation plan
STRATEGY 10		Mobilise resources
STRATEGY 11		Establish partnerships with the private sector
STRATEGY 12		Design community-based projects for implementation at the local level
STRATEGY 13		Implement supporting actions to promote youth volunteerism

LADDER OF ADOLESCENTS PARTICIPATION



THE CADETS WERE EMPLOYED FOR:

- Crowd management
- Blood donation
- Organising **temporary camp**
- Organising **community (kitchen)** and **distribution of food and water** in conjunction with the locals.
- **Helping the Disaster Management Team** with their specialized equipment for the rescue operations.
- **Evacuation of the injured people.**
- **Nursing the patients** and helping the hospitals.
- **Removal and guarding of the baggage** recovered from the train.

CASE STUDY-TSUNAMI RELIEF

- The **Tsunami on 26 December 2004** is one of the worst natural disasters.
- The relief began with **immediate supply of food, medicines and clothes to the victims**
- In the initial phases **people were rescued and temporarily given shelter** in nearby schools and temples.
- **Repair the schools** that was badly damaged and set the schooling for the children.
- **Counselling sessions were organized**, who were in a state and shock and mentally disturbed after the tragedy.

Thank You



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