Disaster often strikes without warning, taking homes, livestock, crops and soil. The most vulnerable groups to disasters are the poor and socially disadvantaged whose few possessions is wiped out by a disaster, leaving them without any means for living. Planned preparedness and mitigation measures can substantially reduce the vulnerability of people in communities when disaster strikes.

Community Based Disaster Preparedness refers to the measures taken to prepare for and reduce the effects of disasters. It is a response mechanism to save life, livelihood, livestock and assets, using the available resources within the community. The Government cannot reach out immediately to each and every community/household at the time of disaster, meaning communities need to be well prepared to mitigate disaster. This is achieved by ensuring better understanding of the risks, the role and responsibilities of all actors, and the technical guidance on how to reduce risks. The participation of the community is also vital to sustain the activities of rebuilding the shattered community life. The Government of India through National Disaster Management Authority and its counterpart state level agencies have been implementing a number of initiatives in partnership with multilateral agencies.

EHAs Disaster Management and Mitigation unit (DMMU) serves communities through relief programs with a vision towards building a disaster resilient community. Their main objectives include- disaster response, preparedness and risk reductions. This edition of Safar is focusing on community based disaster preparedness, providing much information for our communities on disaster preparedness.

Happy reading!

Feba Jacob and Kaaren Mathias
As we work with communities in rural and urban poor areas, one of the challenges any development agency faces is the lack of awareness and inadequate community-based institutions working for communities’ welfare. Besides the illiteracy and ignorance, one is faced with a ‘don’t care’ attitude to issues which may not be of immediate importance or need. For example, most communities do not take any precautions to prevent fire hazards even though the shanties or huts in which they live in close proximity are like a tinderbox, waiting for the inevitable to happen. Similarly, in regions like Utraula which are close to the river, despite awareness of flooding, people do not take any precautions to prevent flooding of their homes. The underlying attitude seems to be one of ‘Que Sera, Sera – whatever will be, the future’s not ours to see!’ Or it may be a karmic philosophy which believes one must NOT interfere with events pre-planned by the gods, based on our deeds and karma of the past.

EHA took these challenges head-on when we dealt with communities affected by disaster in the cyclone-affected areas in Gujarat and Andamans, which we responded to both in terms of rehabilitation and creating community preparedness for future disasters. Post-disaster, communities are naturally much more open to be trained in preparedness as they have experienced the impact of disasters and are eager to prevent or prepare for future ones. Training in first-aid, evacuation drills of institutions like schools, fire safety etc. have been welcomed and many volunteers are trained in skills needed to respond to various dangers during disaster.

The greatest challenge for our projects is to sensitize and train volunteers, school children and panchayat members in the communities we serve when they are not yet affected by a disaster. Our teams who pride themselves in community mobilization and sensitization should work on creating awareness, leading to training in these areas in all the communities where we have a presence, using the EHA Disaster team members more frequently to train our staff and community volunteers on a regular basis. This is a vital task as we see disasters – both natural and human-made - increasing in regular frequency, across the globe. As Benjamin Franklin stated many years ago, in the context of fire safety, “an ounce of prevention is worth a pound of cure”. This is an adage which EHA CH teams should take to heart and work on, both in terms of their own preparedness and for the communities they serve. I trust that this issue of Safar will increase our motivation to tackle this oft neglected area in our communities, so we can truly bring changes in thinking and actions, and unite communities to work together for their own good.

Dr Ashok Chacko, Director - EHA’s Community Health and Development Programme
Disaster is a sudden accident or a natural catastrophe that causes great damage or loss of life. It can also be caused by humans. These could be events such as cyclones, hurricanes, floods, tornadoes, drought, famines, fires, earthquakes, disease, and even invasion by an enemy. The Bible has records of disasters such as the Flood in Noah’s time, the Famine during the time of Joseph, and many other disasters the people of Israel faced.

In Leviticus 26:1-13, God promised the People of Israel blessings if they obeyed Him and punishment if they disobeyed Him (vs. 14-39). These punishments were basically disasters. Natural disasters happen within God’s providence. How do we understand disasters? Disasters come upon nations for a reason. 2 Chronicles 7:13-14 says, “When I shut up the heavens so that there is no rain, or command locusts to devour the land or send a plague among my people, if my people, who are called by my name, will humble themselves and pray and seek my face and turn from their wicked ways, then will I hear from heaven and will forgive their sin and will heal their land.” These verses talk about disasters coming upon a nation. Jeremiah 14:12 mentions disasters as instruments of judgment upon people. The verse says, “Although they fast, I will not listen to their cry; though they offer burnt offerings and grain offerings, I will not accept them. Instead, I will destroy them with the sword, famine and plague.”

What is the Biblical response to disaster? The Bible teaches that God does and has used disasters to discipline and judge nations. This can be clearly seen in II Chronicles 6:26-27 where Solomon sees the possibility of such in the future. He says, “When the heavens are shut up and there is no rain because your people have sinned against you, and when they pray toward this place and confess your name and turn from their sin because you have afflicted them, then hear from heaven and forgive the sin of your servants, your people Israel. Teach them the right way to live, and send rain on the land you gave your people for an inheritance.” Notice that drought comes because of the nation’s sin and that God uses drought to teach people the right way to live.

A biblical response to disaster is to acknowledge God, as a people. The emphasis here is that a nation is being addressed and if the people of the nation repent that nation will be healed. The emphasis is national and is directed to a nation not a people within a nation. Nineveh repented at the preaching of Jonah and that nation was spared. The whole nation repented as a people collectively from the top down. That is a true national repentance. The nation as a people not only needs to pray and seek the face of the Lord but they need to follow through and repent of their sins.

The result of repentance as a people is the healing of their land. Then we will dwell in peace. Then we will have better weather and our land will produce. Then we will be protected from disasters of many kinds. We will see a national healing of our land when we see a national repentance of the people of our land.

Asia as the World’s Natural Disaster Hot Spots
Even though humans have made tremendous progress in various aspects in terms of technological growth, there is one area they have not been able to surpass and that is the supremacy of Nature. Nature has always proved much more powerful than humans, despite many technological and scientific advancements and achievements. Today, natural calamities in the form of flood, tsunami, famine, cyclone and earthquake are mainly due to global warming.

World Bank and Columbia University identified 96 countries globally with high mortality risk from two or more hazards, by using data on historical occurrence to determine areas of relatively high risk to lives and livelihoods.

Geologically, the Asian region is characterized by active tectonic plate movement in the Pacific and Indian Oceans, which has been the source of major earthquake and tsunami. The Indian and Pacific Oceans also regularly generate tropical cyclones and typhoons. The region is home to young mountain ranges which are especially prone to earthquake, landslide, flash flood, avalanche, and Glacial Lake Outburst Flood (GLOF). The weather and climate systems are driven primarily by monsoon variability and snow cover dynamics, which both contribute to the frequency and severity of floods and drought.

According to the Climate Change Vulnerability Index compiled by risk management group Maplecroft, all seven cities classified as at “extreme risk” are in Asia: Dhaka, Manila, Bangkok, Yangon, Jakarta, Ho Chi Minh, and Kolkata.

Indian Perspective

We also cannot forget many wars, internal conflicts, and epidemics that took millions of lives and destroyed billions worth of property in India!

Community-Based Disaster Management Approach
In a rural context, people in the community are the first responders to any disaster event. It is, therefore, very
important to proactively engage community to build their capacity and resilience. Community-Based Disaster Management (CBDM) is an approach to help prepare community to be able to respond to a disaster situation and to build disaster resilience by reducing potential risks of disaster.

CBDM covers a broad range of interventions, measures, activities and programs to reduce vulnerabilities and increase capacities of communities to cope with disaster, minimize loss and damage to life, property, the environment, and to increase speedy recovery. The CBDM approach helps transform vulnerable communities to disaster resilient communities, which can withstand and recover from stresses and shocks from the natural and socio-economic political environment.

The key indicators of CBDM are safety, livelihood security, and sustainable economic, social and physical development i.e., general well-being, health, education, amenities, natural and physical environment etc.

With the shifting of paradigms from reactive emergency management to disaster risk reduction (DRR), there is more stress on proactive pre-disaster interventions, which are usually categorized as prevention, mitigation, and preparedness. While natural hazards may not be prevented, human-induced hazards such as those associated with industries/accidents, technological failures, pollution, and civil strife can be prevented. Prevention covers measures to provide permanent protection from disasters or reduce the intensity/frequency of a hazardous event so that it does not become a disaster. These include safety standards in industries, poverty alleviation and assets redistribution schemes, and provision of basic needs and services such as preventive health care and education.

Preparedness involves measures taken in anticipation of a disaster to ensure that appropriate and effective actions are taken during the emergency such as setting up the systems for early warning, coordinative and institutional arrangements, evacuation and emergency operations management, public awareness, disaster and evacuation drills, and stockpiling. Emergency responses are measures undertaken to ensure survival and prevent further deterioration of the situation. These include search and rescue, immediate repair and restoration of critical facilities and utilities, conduct of damage needs and capacity assessment, food and non-food relief assistance, medical assistance, evacuation center management, and networking. Recovery covers rehabilitation and reconstruction and can be undertaken within the framework of mitigation and vulnerability reduction, and not just bringing back the situation to pre-disaster levels.

“Development is the process through which people increase their capacities for producing things they need and for managing their political and social lives as they desire, and at the same time reduce their immediate and long-term vulnerabilities (especially in disaster-prone areas) to events which threaten their economic and socio-political existence” (Anderson & Woodrow). This view of development expresses succinctly local and community aspirations in participation in disaster mitigation and risk reduction.

The basic CBDM features applied during community disaster preparedness are:

- **People’s participation:** Community members are the main actors and propellers; they also directly share in the benefits of disaster risk reduction and development.
- **Priority for the most vulnerable groups, families, and people in the community:** In urban areas the
vulnerable sectors are generally the urban poor and informal sector, while in the rural areas they are the subsistence farmers, fisher folk, and indigenous people; also vulnerable are the elderly, the differently abled, children, and women.

- **Risk reduction measures are community specific:** They are identified after an analysis of the community’s disaster risks such as hazards, vulnerabilities and capacities, and perceptions of disaster risk.

- **Existing capacities and coping mechanisms are recognized:** To build upon and strengthen existing capacities and to raise the level of coping mechanisms with the aim of reducing vulnerabilities; the goal is building disaster resilient communities.

- **Links disaster risk reduction with development:** It addresses vulnerable conditions and causes of vulnerabilities.

- **Outsiders have a supporting and facilitating role:** Closely related to the elements and features cited above are the principles of CBDM activities and programs. These also serve as overall parameters/indicators to keep track of DRR activities.

- **Participatory process and content:** Involvement of community members, particularly the most vulnerable sectors and groups in the whole process of risk assessment, identification of mitigation and preparedness measures, decision making, and implementation; the community directly benefits from the risk reduction and development process.

- **Responsive:** Based on the community’s felt and urgent needs; considers the community’s perception and prioritization of disaster risks and risk reduction measures so the community can claim ownership.

- **Integrated:** During pre- and post-disaster measures are planned and implemented as necessary by the community; there is linkage of the community with other communities, organizations and government units/agencies at various level especially for vulnerabilities, which the local community cannot address by itself.

- **Proactive:** Stress on pre-disaster measures of prevention, mitigation, and preparedness.

- **Comprehensive:** Structural (hard, physical) and non-structural (soft, health, education, livelihood, organization, advocacy, etc.) mitigation measures are undertaken; short, medium, and long-term measures to address vulnerabilities.

- **Multi-sectoral and multi-disciplinary:** Considers roles and participation of all stakeholders in the community; combines indigenous/local knowledge and resources with science and technology and support from outsiders; addresses concerns of various stakeholders while upholding the basic interest of the most vulnerable sectors and groups.

- **Empowering:** People’s option and capacities are increased; more access to and control of resources and basic social services through concerted action; more meaningful participation in decision making which affects their lives; more control over the natural and physical environment; participation in disaster mitigation and risk reduction develops the confidence of community members to participate in other development endeavors.

- **Developmental:** Contributes to addressing and reducing the complex relation of conditions, factors, and processes of vulnerabilities present in society.

**Conclusion**

CBDM approaches are increasingly important elements of vulnerability reduction and disaster management strategies. They are associated with a policy trend that values the knowledge and capacities of local people and builds on local resources, including social capital. CBDM may be instrumental not only in formulating local coping and adaptation strategies, but also in situating them within wider development planning. In theory, local people can be mobilized to resist unsustainable (vulnerability increasing) forms of development or livelihood practices, and to raise local concern more effectively with political representatives.

With the increasing frequency of disaster events happening across the world and the associated cost of relief and recovery, it is wise to proactively work toward disaster preparedness engaging local community to reduce risks.
**Success Story**

**Village Disaster Management Committee at Vimal ki Chaloti**
*By Ms. Perine Christopher, Project officer, LCH, Mussorie*

In 2013, one of the villages in Vimal ki Chaloti was affected by disaster. Houses were damaged and roads were destroyed making it unable for the children to go to schools and the villagers to go for regular work. The CHDP team decided to visit the village and conducted meetings where the villagers shared their problems and difficulties. CHDP team suggested them to form a VDMC (Village Disaster Management Committee), as it was a disaster prone village. The community agreed and VDMC was formed in the year 2016. This VDMC has been trained in various topics related to the Disaster Relief Management and preparedness through-out the year in village and block level. VDMCs have task force and they practice Mock drills in the village and block level. VDMCs have contact with local police and district level Disaster Management task-force. After the formation of the group they have been empowered to approach the government department (MNREGA) and they submitted an application to reconstruct their pool which was destroyed in the disaster, for fish farming. Their request was approved and Rs. 15 lakh was sanctioned for the reconstruction of the pool.

**Umeed Project**

On 16 – 18 June 2013, Uttarakhand was affected by heavy rain and flooding. This resulted in loss of land and animals, blocked roads, damage to crops and grains, flooded houses, and no electricity. People were discouraged and many families considered migrating to other places.

Landour Community Hospital (LCH) provided relief for 3500 families, including rations, a solar light, a radio, clothes, sanitary pads, quilts, woollen clothes, torches, cooker and a solar panel for cooking purposes, a tarpaulin, sewing machine, and wool. Goats to strengthen their livelihood were provided in partnership with another organization. This relief continued for six months.

First phase of Umeed Project
At the end of 2013 the Umeed project submitted a report on their work.

**Key steps:**
- Mobilize community
- Immediate step to prevent migration
- Capacitate and empower the community to mainstream DRR
- Demonstrate working model of community managed DRR and lobby with government to replicate
- Prevention of soil erosion, land degradation and conservation of rain water (community based watershed management)
- Restoration of livelihood
- Cash for work
- Disability inclusive disaster risk reduction
- Community resilience through climate change adaptability and water shed management
Progress and activities completed:
1. Land reclaimed
2. Livelihood strengthened
3. High elevation barren land reclaimed for those who lost their land in the river side
4. Irrigation system in place
5. New techniques introduced and farmers trained on crop diversification
6. Seed distribution
7. Kitchen gardening system introduced
8. Tree plantation created for climate change and to prevent soil erosion and landslide
9. Resource for fodder increased
10. Trainings conducted on disaster preparedness
11. Radios and first aid provided for early warning system
12. Medical camps organized
13. Filters provided for safe drinking water in schools
14. Village Disaster Management Committees formed and trained to mitigate the effects of the disaster.

:: INTERVIEW ::

A telephone interview with Dr Henna Hejazi
Programme Manager, Capacity and Knowledge Management, Sphere India, Delhi.
[ By Feba Jacob, Editor, Safar ]

Safar- Could you please share about your organization Sphere India?
Dr Henna- Sphere India is a national coalition of humanitarian agencies in India. The members include key nodal agencies from Government of India, UN agencies, INGOs, NGO networks and national NGOs. Sphere India facilitates inter agency coordination, training and capacity building, collaborative advocacy, and information knowledge and learning management through a collaborative process for quality & accountability.

Safar- Why is it important to focus on communities for disaster preparedness?
Dr Henna- Whenever a disaster strikes, the communities are the first responders and the most affected ones. Irrespective of the nature and severity of the disaster, the initial response to save life comes from the community. Community thus plays a critical role in the initial disaster preparedness, as they are the centre of disaster response and can manage the ability of the affected population to cope using their existing resources. Being the centre of all response mechanisms it is very important to prepare the community for disasters.

Safar- What are the major initiatives undertaken by your organization in disaster preparedness?
Dr Henna-

a) Conducting orientations on a tool called Joint Rapid Needs Assessment. This is a tool whereby, at the time of disaster, an initial rapid assessment is carried out by different actors and multiple stakeholders. Every year we facilitate these trainings in different states to better prepare the state IAGs and local community networks in conducting this assessment post disaster.

b) Developing disaster preparedness management plans. Supporting the SDMAs in developing the State/District disaster management plans, Sphere India initiated the first DDMP in Madhubani which was recognised as an initial benchmark by member agencies and Government, and later was replicated in other states. Sphere also facilitated technical support in developing a State Disaster Management Plan for Sikkim, Regional plan for Assam (Majuli), and District Disaster Management Plans for Jammu and Kashmir.
Sphere India has facilitated a process of strengthening Health Preparedness Plans as part of State Disaster Management Plans with support from Governments of Meghalaya, Mizoram and Manipur. Presently the respective States are engaged in developing these plans with technical support and inputs from National Disaster Management Authority, WHO etc. These plans integrate the 19 Sphere minimum standards in Health.

c) Training - Capacity building trainings are organised at National and State level on various themes including Sphere Minimum Standards and Humanitarian Charter, DRR, HVRC analysis, health, WASH, mainstreaming disability in disasters, SRH and Psychosocial services post disaster, inclusion of vulnerable in DRR, Google earth mapping.

d) Sphere India is also part of South Asia Together for Humanitarian Imperative (SATHI) which is a network established for effective collaboration of relevant stakeholders from South Asian countries to achieve positive results in humanitarian action. These include Agency Coordinating Body for Afghan Relief and Development (ACBAR) from Afghanistan, Sphere Bangladesh, Sphere India, Disaster Preparedness Network (DPNet-Nepal), Pakistan Humanitarian Forum from Pakistan, and Consortium of Humanitarian Agencies (CHA) from Sri Lanka. It is a good platform for knowledge and regional experience sharing and the initiative reaches out to a wider audience through this network.

Safar- From these initiatives, could you please elaborate on the successful strategies adopted by Sphere India?
Dr Henna- We at Sphere India believe in consultation and building collaborative partnerships. Sphere India is a coordination platform and a network.

Sphere India has developed a strategy for 2016 - 2020. This strategic plan is the outcome of a wide consultation process. It involved review of previous learning and annual learning events, restructuring of program priorities by a committee appointed by the Executive Committee, SWOT and a strategic planning exercise, Program and Strategy Committee presentations, consultation with CEOs of member organisations, key stakeholder consultations, input from members, and restructuring priorities. It also involved aligning with the changing contexts in India and priorities emerging from new global frameworks and plans.

The 2016 – 2020 Strategy seeks to harness Sphere India’s diversity, presence and position in advancing accountability to affected populations by developing/strengthening humanitarian systems with a focus on DRR priorities for efficient and effective humanitarian and DRR coordination, predictable humanitarian finance, and appropriate policy, knowledge, and capacity development.

Safar- Why it is important to have a disaster preparedness plan? How is a disaster preparedness plan developed?
Dr Henna- It’s important to have this plan to minimize the impact of disasters and to be better prepared for unseen catastrophes and disasters within a short duration of time. It helps in delivering effective response pre-disaster, during disaster and post-disaster and gives us a clarity of roles and responsibilities at the time of disaster. It helps us develop and structure SOPs - the standard operating procedure for different line departments - such as, what will education do, what will PHCs do, what will health do, what will hospitals do, etc. This plan also helps us develop hazard vulnerability capacity analysis; for example, do we have the hospitals in place, where are the schools, where do we have a distribution site. If we already have this kind of structure and evaluation and analysis done, it can be helpful during disasters. All these can be done pre-disaster but need a lot of ground work, consultation, and one to one interviews with concerned departments.

The plan is being developed in three steps: One is the pre-multiphase stakeholder consultation. If we are preparing
the state level disaster management plan, we have people from all the districts. For a district disaster management plan, we ask people from all the line departments who are the nodal officers to have a first account of what will be in the plan, the objectives, the time line, and the kind of reports we expect from them. This plan has four volumes under which the DDMP consultants must work on different strategies. This is followed by a final multi stakeholder consultation in which feedback and inputs are sought from all the district officers, the state officers, civil society and the NGOs. This can't happen by only having an interface with the government and requires engaging with other stakeholders.

**Safar-** What are the key issues you faced while working with communities in disaster preparedness? How did you overcome these?

**Dr Henna-** I think in many places the policy makers and the service providers should have the willingness to develop capacity. We need to prioritize cross cutting issues like gender, inclusion of vulnerable people like disabled, pregnant women, children, lactating mothers, and mainstreaming disability in disaster risk reduction. These are issues which are under-prioritized and that need to be highlighted at the time of disaster, and we can address this by developing contingency plans. Sphere India rolled out a Health Standard called MISP in 10 - 12 States of India and did rigorous advocacy with the State Government for integrating SRH services in Health Plans and allocating resources for RH Kits at the district level to prevent maternal mortality and HIV-STI during disasters. Adherence to Sphere Minimum Standards at the time of disaster is another very important and critical step that all humanitarian organizations and Government Agencies need to put into action. Sphere provides training on the Sphere Minimum Standards and its implementation. Incident command systems and coordination mechanisms need to be well defined pre-disaster.

**Safar-** Which are the ideal roles and responsibilities of NGOs in preparing communities for disaster?

**Dr Henna-** NGOs play a very important role in capacity building on disaster preparedness. NGOs should share their good practices, work with common agendas of concern, and work in coordination in relief response and recovery. Similarly, there is need for collective advocacy on issues pertaining to vulnerable community. We should ensure effective coordination mechanisms between Government and NGOs at State and District level. Streamlining resources in effective ways yields good outcomes. Advocacy with Government on key issues pertaining to Disaster Risk Reduction and relief and rehabilitation needs to happen in some states.

NGOs also play a very important role in data maintenance. They play a vital role in mapping the resources and sharing knowledge and information with the Government and complement and supplement Government efforts.

*Thank you so much Dr Henna for your time and input.*
In this article I will discuss a few questions on community based disaster preparedness, such as “Disaster is an act of God. Who can save us from that?”, “O!! It will never happen to us!!”, “How can we be prepared, who knows about it??” or “We don’t expect bad things, nothing bad can happen to us!!”

But the fact is that it is an unexpected event which can happen anywhere, to anyone!! Recently the heavy snow fall in Shimla paralysed life, affected electricity supply, and took the life of a few people who slept in closed rooms with a coal fire. The videos and photos of disasters ask us to fear the almighty and donate funds!!

Donation, religion, politics, social behaviour (migration), health, everything gets affected. We wait for ‘Nature’ to halt so we can start working on implementing the policies to save lives, our action plan to reach to the people with food and necessities, and deal with the horrifying effects of disaster, nightmares etc. We get so busy with submitting the report and establishing the figures of how many intended population or beneficiaries we have reached and how much we have helped them that we forget something still needs to be done - to learn to live with it!

I remember the song we learnt in Sunday school ‘Budhiman ne Chattan pe banaya apna...’ God wants us to act intellectually and prepare ourselves by building our plans to fight the disasters. With today’s technology we have brilliant information about many things: weather forecasts, patterns of earthquake, seasons of fire, areas prone to disaster and so on. But we fail to be prepared ourselves.

We must remember that when we plan or make a project proposal for areas which are disaster prone, we need to include disaster preparedness activities and try to create behavioural changes which help us to deal with disaster more effectively and efficiently. Preparedness for disasters and emergencies at individual, community and organisational levels could be more effective tools in mitigating (the growing incidence) of disaster risk and ameliorating their impacts. Preparedness efforts focus on changing human behaviours in ways that reduce people’s risk and increase their ability to cope with hazard consequences.

Community based disaster preparedness includes individuals, communities and organisations (Government or NGOs). It is a collective effort to minimise the loss of life. The other most important advocacy point is to have disaster preparedness policies for areas which are vulnerable to disasters. Teams should always be working on preparation activities in schools, hospitals, communities etc. Disaster changes human lives in a few minutes; it’s our responsibility to fight back with preparations and not to be fools like the man who constructed his house on mud. Funds can be negotiated but not lives which are lost without knowing the Lord. As Christians, it is our responsibility to create an environment in which we live prepared!!
A workshop on “Introduction to community based mental health” was conducted on 26th of January 2017. The session was facilitated by Dr Kaaren Mathias.

Community organization training was organized at Navinta, Delhi from 23rd to 27th of January 2017. The session was facilitated by Mr Scott Smith.

A training on Disaster relief management was organized at Don Bosco, Delhi from 15th to 17th of March 2017.

HR MOVEMENTS

By Hemlatha

Appointments

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<tr>
<td>Ms Kuldeep Kaur</td>
<td>Project Officer</td>
<td>CHDP Lalitpur</td>
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<td>Mr Rakesh Prasad</td>
<td>Community Coordinator</td>
<td>Karuna Project, Duncan</td>
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<td>Ms Keneisenuo Metha</td>
<td>Project Officer</td>
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<td>Mr Sharon Sarmen Hanse</td>
<td>Project Officer</td>
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NEXT ISSUE OF SAFAR

Safar Issue 25 is focusing on 40 years celebration of CHDP

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