

# Capacity Building and Training Measures

## 6.1 – Approach

As per the Disaster Management Act (2005), capacity-building includes:

- I. Identification of existing resources and resources to be acquired or created;
- II. Acquiring or creating resources identified under sub-clause (i);
- III. Organisation and training of personnel and coordination of such trainings for effective management of disasters.

The primary purpose of capacity-building in disaster management is to reduce risk and thus make communities safer. This can be done by increasing resilience and enhancing coping capacities. Effective capacity-building at the district level requires the active participation of all those who are tasked with it. It must, therefore, include maintaining a comprehensive and up-to-date District Disaster Management Resource Inventory, awareness generation, education, Research and Development (R&D) and systematic and systematized training. The Deputy Commissioner should ensure the following capacity-building activities of the entire district, and the various Heads of Departments should ensure capacity-building of their respective departments. Furthermore, the Nodal Officers should, in coordination with the HODs, procure relevant equipment for disaster management activities.

## 6.2 – Capacity Building Plan

Capacity Building develops and strengthens skills, competencies and abilities of both Government and non-government officials and communities to achieve their desired results during and after disasters, as well as preventing hazardous events from becoming disasters. When undertaking disaster management planning assessments, it is important that the indigenous traditions, methods and materials being used for disaster management locally are considered and incorporated appropriately.

**Table: Training and Capacity Building Plan**

| SN | Nature of training | Demand | Target Departments | Potential training institutes | Frequency | Timeline and approach |
|----|--------------------|--------|--------------------|-------------------------------|-----------|-----------------------|
|----|--------------------|--------|--------------------|-------------------------------|-----------|-----------------------|

|    |   |                                |  |   |             |                            |
|----|---|--------------------------------|--|---|-------------|----------------------------|
| 1  | Training of Doctors on Mass casualty Management   | Batch of 30 to 40 Participants | CMO, MS ZH Dharamshala & MS RGPMC, Tanda     | HIPA, Medical , IGMC, RGPMC   | Quarterly   | Medium Term Upto Year 2020 |
| 3  | Training of Asha Workers Mass casualty Management   |                                | Health and Family Welfare                    | HIPA, Medical , IGMC, RGPMC   |             | Medium Term Upto Year 2020 |
| 4  | Training of Medical students in Mass casualty Management                                    |                                | Medical Colleges, MS RGPMC, Tanda,           | HIPA, Medical , IGMC, RGPMC   |             | Medium Term Upto Year 2020 |
| 5  | Training of ASHA, ANM for medical first response / psychosocial care                        | Batch of 20 to 25 Participants | Health and Family Welfare                    | HIPA, SDMA, Red Cross   | Quarterly   | Short Term 2018            |
| 6  | Teacher Sensitization   | Batch of 20 to 30 Participants | Education Departments                        | DIET, SCERT   | Bimonthly   | Long Term upto year 2030   |
| 7  | Training to teacher of Special Needs Children (Old Age, Orphan, ) for evacuation and rescue | Batch of 25 to 30 Participants | Education Departments                        | NDRF/ Home guards/ Education Departments  | Quarterly   | Medium Term Upto Year 2020 |
| 8  | Training to Engineers, Architects, Builders and Masons                                      | Batch of 20 to 25 Participants | PWD, Architecture, Masons                    | NIIT Hamirpur, IIT Mandi, HIPA,   | Half Yearly | Medium Term Year 2020      |
| 9  | Training to Police for Crowd Management and emergency Response                              | Batch of 30 to 40 Participants | Himachal Police Service, Kangra              | Police Academy, NDRF, Home guards, HIPA   | Quarterly   | Long Term upto year 2030   |
| 10 | Advanced search & Rescue training for Home Guards and Fire fighter                          | Batch of 25 to 30 Participants | Home Guards, Fire Services, Local Volunteers | <ul style="list-style-type: none"> <li>• NDRF,</li> <li>• Atal Bihari Mountaineering and sports allied institute, Manali</li> <li>• Water Sports Academy</li> </ul> | Quarterly   | Medium Term Year 2020      |
| 11 | Emergency Operation Center staff training   | 8+2 Participants               | DDMA   | <ul style="list-style-type: none"> <li>• Home Guards</li> <li>• NDRF</li> <li>• HIPA</li> </ul>   | Quarterly   | Short Term 2018            |

|    |  |                                |                        |                              |           |                          |
|----|--|--------------------------------|------------------------|------------------------------|-----------|--------------------------|
| 12 | Training on Applicable Wireless Communication (Walkie Talkie/ Wireless/ HF/ UHF/ VHF/ Ham Radio) | Batch of 10 Participants       | Police and Home Guards | HIPA, SDMA, Police           | Quarterly | Short Term 2018          |
| 13 | NCC/NSS/NYKS/Volunteers etc  | Batch of 25 to 30 Participants | Education Department,  | GVK 108/ Home Guards         | Bimonthly | Long Term upto year 2030 |
| 14 | Training to NGO/CBO/ civil society/SHG/Clubs etc.  | Batch of 25 to 30 Participants | DDMA                   | HIPA, Home Guards, GVK EMRI. | Quarterly | Medium Term Year 2020    |

### 6.3 Capacity-building at the Community Level

Community Disaster Management Planning is one of the vital components of community preparedness. It involves all important parameters related to hazard awareness, evacuation planning, resource inventory, community level taskforces and committees etc. which helps community members in organizing themselves to combat disaster in a pre-planned manner and also focus on vulnerable groups – women, children, aged persons and persons with various kinds of disabilities. Preparation of community plans encourages promoting preparedness planning at community level. District Administration is also imparting trainings on regular basis to the volunteers of Home Guards, Nehru Yuva Kendra Sangathan, NGOs, Self Help Groups etc. to involve them into community planning. The hazards of the district indicates that there is a vital need of awareness among community through public awareness programs on the following themes of disaster:

- Types of disasters and basic Do's and Don'ts related to those disasters.
- Post disaster starvation / Health (epidemic) problems
- Mitigation measures such as retrofitting techniques for hazard resistant building construction
- Communication of information of all possible risks based on vulnerable areas, groups, structures / situations and related response such as evacuation in the district and to solve preparedness problems at community level.

Local residents are likely to be the first emergency responders to such incidents, particularly in remote areas and, therefore, critical to the successful outcome. The capacity building plan should cater to the 'differential capacity building needs' based on the functional responsibilities assigned to stakeholders. It should address –

**Volunteers and social organizations also play a vital role in spreading mass scale community awareness. Media can also play an important role in raising awareness and educating people.**

Not all organizations can focus on disability issues to the same extent; every organization has to choose its level of involvement and accordingly obtains the appropriate education/training/ skilled personnel. Options for different organizations are outlined below:

- Mainstreaming disability within the organization ensure that disability is included as in all activities/ projects.
- Sensitizing staff, volunteers, and managers towards disability through exposure is the first step in understanding difficulties encountered by PWDs (e.g. contact disabled peoples' organizations, visit organizations already involved in disability)
- Training and sensitization campaign for community level disaster management committees and community volutes on disability issues.

It is important to consider the special/ specific needs of persons with disabilities in every phase of disaster management and risk reduction.

| <b>Disaster Management/ Risk reduction Phase:</b>  | <b>Addressing Specific/ Special needs of the Person With Disabilities:</b>  |
|--|---|
| <ul style="list-style-type: none"> <li>• Preparedness</li> <li>• Immediate Response / Recovery</li> <li>• Mitigation/ Rehabilitation</li> <li>• Development</li> </ul> | <ul style="list-style-type: none"> <li>• Medical treatment / therapy / medications</li> <li>• Assistive / Mobility aids</li> <li>• Infrastructure / relief accessibility</li> <li>• Community attitudes towards PWDs</li> </ul> |

Capacity-building at the community level includes awareness, sensitization, orientation and developing skills of communities and community leaders. At the district-level, assistance will be provided by consolidating the know-how and practical training provided by NDRF, Civil Defense and NGOs, District Red Cross and Self-Help Groups (SHGs) and disseminating it within the communities. Multiple responsibilities within the arena of capacity-building and training will be delegated to local authorities, PRIs and ULB under the overall guidance of District authorities. It is also crucial to focus on imparting training, cultivating community awareness and ensuring skill-develop men among members of the community .Furthermore, capacity-building at the community level should be done on the Public Private Partnership (PPP) model. This can be done by ensuring identification of local resources and developing local infrastructure through PPP. Community-based Disaster Risk Reduction (CBDRR) and Village Contingency Planning (VCP) are also critical for capacity building at the community-level and will be managed by the concerned departments in the district.

## 6.4 Development of IEC Material

Addressing the specific requirements of vulnerable regions and the risk mitigation and preparedness needs of identified communities, various IEC material like list of do's and don'ts, posters, leaflets, banners, training modules and audio visual material must be produced using capacity-building funds from the state. The aim is to develop a large body of advocacy and awareness materials, especially in vernacular languages, targeting vulnerable groups such as women, children, elderly, differently-abled, and marginalized and excluded groups.

| Dissemination of Other IEC Materials MODE  | AGENCY RESPONSIBLE   |
|--|--|
| <ul style="list-style-type: none"> <li>Wall Painting, Street Play, Village Task Force/ Volunteers Training</li> </ul>        | <ol style="list-style-type: none"> <li>CDMO – Through field agencies</li> <li>BDOs - Through CBOs/ Village volunteers</li> <li>NGOs – through Block level NGO network</li> </ol> |
| <ul style="list-style-type: none"> <li>Slide in Cinema Hall</li> </ul>   | <ul style="list-style-type: none"> <li>OIC Judicial, Deputy commissioner</li> </ul>  |
| <ul style="list-style-type: none"> <li>Hand Bills, Paper advertisement</li> </ul>  | <ul style="list-style-type: none"> <li>DPRO &amp; BDO</li> </ul>   |
| <ul style="list-style-type: none"> <li>Media &amp; Press release</li> </ul>  | <ul style="list-style-type: none"> <li>Information Officer</li> </ul>  |
| <ul style="list-style-type: none"> <li>Posters, Cartoons, Charts, Photographs, Folk song</li> </ul>                          | <ul style="list-style-type: none"> <li>CBOs/ NGOs /schools</li> </ul>  |
| <ul style="list-style-type: none"> <li>Training Camps, Group discussion and special lectures by Community Leaders</li> </ul> | <ul style="list-style-type: none"> <li>DPRO, BDO, DCR</li> </ul>   |

## 6.5 Inventory of Skilled as well as trained professionals, engineers, architects and masons, medical Professionals, rescue specialists etc.

Details to be maintained as per following Annexure:

## 6.6 Simulation Exercises

