

On November 14-16, 2006 Swayam Shikshan Prayog and Groots International, supported by AJWS, organized the first of a series of workshops to strengthen community trainers on recovery and resilience.

The workshop brought young women leaders with a few months of experience face to face with senior leaders with more than ten years of experience. And the areas of expertise presented ranged from emergency response to organizing federations for enterprise and improving community access to health, water & sanitation.

RECOVERY TO RESILIENCE: STRENGTHENING COMMUNITY TRAINERS

G R O O T S I N T E R N A T I O N A L I N P A R T N E R S H I P W I T H A J W S

WORKSHOP REPORT

December 14-16, 2006 Tamil Nadu

After the tsunami & other disasters grassroots women's groups have done innovative work to rebuild their communities and are working build resilient communities that can cope with future disaster. These innovators are disaster survivors themselves and are thus best equipped to train and teach other disaster hit communities on how they can shape resilience and recovery processes ; and how they can change government, NGO and donor led programmes to the advantage of disaster affected families and communities.

This workshop six country initiative across Asia, Latin America & Carribean seeks to build on the expertise of grassroots leaders in hazard prone areas to create a global network of grassroots women trainers who can be called upon to support and teach other disaster-affected communities.



PARTICIPANTS



Twenty five grassroots leaders from drought prone areas of Tamil Nadu, earthquake affected Maharashtra, tsunami affected Tamil Nadu, and from cyclone and flood affected Andhra Pradesh in south eastern India gathered for three days to take stock of their skills and practices and to create a learning plan to strengthen their capacities to transfer their work to other disaster affected communities.

Each of the grassroots groups at this workshop have created community based organizations to address different facets of community resilience and recovery:

1. Restoring and upgrading livelihoods
2. Protecting lives and property,
3. Building linkages between communities and government to improve access to healthcare, water and sanitation.

Emergency Task Force Members from Sanghamithra Service Society, A.P



Grassroots leaders from Sanghamithra Service Society in coastal Andhra have formed emergency response teams said that at first men had been hesitant to let women join these teams. But the women argued that men would often be away fishing and so it would be left to women to protect lives and homes during disasters. Once trained the emergency teams of men and women had gone out and trained a number of other villages including one of the tsunami affected villages in Tsunami hit Tamil Nadu where ROSE works.

Task Force Members from ROSE, Nagapattinam, Tamil Nadu



The Task Forces or emergency response teams linked to ROSE were formed exactly a year ago with the help of the more experienced Task Forces from SSS, Andhra Pradesh. While at first women were hesitant to join they were soon convinced that it was very important to be part of the Task Forces to protect lives and property. ROSE Task Force members have collected savings to create a small contingency fund. They have also undertaken peer exchanges within Nagapattinam district with Ashaa women linked to SSP to learn how their task forces can improve health and sanitation while they train Ashaa women in relief, rescue and first aid.

Mahakalasangam Members from CCD, Madurai, Tamil Nadu

Experienced Mahakalasangam (federation) leaders from Madurai, explained how they have been managing federations of savings groups to undertake community enterprise in areas such as herbal medicine, traditional foods, etc. There are 6 federations with 16,000 members across 6 districts of Tamil Nadu. Following the tsunami older federation helped to organize tsunami affected men and women into livelihoods federation groups of farmers and women fish vendors and sea shell gatherers to help them restore diversify their livelihoods. The next step is to support the federations to leverage credit and access distance markets for their products.



ASHAA (Women for Health) Leaders linked to SSP, Tamil Nadu



Tsunami affected women groups facilitated SSP in Tamil Nadu presented their strategies for improving community access to health care and lowering health expenditures by building relationships with healthcare providers, accessing the primary health care centers, raising health awareness among women, encouraging the use of herbal and home remedies and improving sanitation and clean drinking water in their villages.



A team from Maharashtra's earthquake affected region, explained how communities have organized themselves and worked with their village local govts to ensure total sanitation or villages, with toilets in every house. A village council president from Walkewadi, Maharashtra proudly explained that his village had good sanitation because of the women's self help groups had motivated "new sanitation practices" that included self help on waste management, garbage disposal, drinking water & toilets for houses.

The community leader from Maharashtra explained they were part of community trainee teams who were regularly called upon to mobilize other villages to take similar action to clean up their neighborhoods.

Follow up Plans to Transfer Good Practice

On the last day community leaders created learning plans for themselves. The plans included action to improve their skills and things they wanted to learn from other community leaders present. Here are some things on the "to do" list.

ROSE Task force members said they wanted to expand the roles of their emergency response teams to work on improving health and sanitation in the villages. So they planned to do a serious of exchanges with Ashaa groups through which ROSE women would learn about improving health and sanitation while they taught Ashaa women how to organize emergency response teams.

Senior federation leaders from CCD plan to support the women leader from tsunami affected region to build their livelihoods groups. They also wanted to learn how to improve sanitation from the Maharashtra women and how to improve health and reduce health expenditure from the Ashaa women groups in the tsunami affected districts.

Ashaa groups from SSP talked about reaching out to more villages where they would identify leaders who could mobilize their communities around health and sanitation. In six months time they are hoping to have forty trainers.

Maharashtra participants wanted to create clusters of community trainers in each district to improve community access to basic services and build self-reliant villages. They also wanted to learn from the Mahakalamsam leaders of CCD how to support their federations to scale up community enterprises.



What Happens When Communities are Left Out of Disaster Response Planning and Rebuilding?

Participants visited a newly constructed settlement in tsunami hit Cuddalore district where communities from three old settlements have been moved a month ago. The settlement was almost as bad as a squatter settlement when visited in the rains. .

The tiny houses were crammed close together, the non-existent roads were flooded, roofs were leaking and the too small septic tanks had started overflowing within a day of use. Ezhilarasi, one of the community leaders who lives here told everyone that they had not been consulted during any of the planning or building of their homes. That was the main reason for such poor construction and planning.

Participants analyzed the community improvements that had taken place as a result of women's efforts:

Organised Communities: When people are organized it's easier for them to take collective action and coordinate with others in a crisis.

Credit: Women's livelihoods groups helped communities increase their access to credit, markets and thus increase their incomes.

Better Health: Health in their communities improved and health expenditures were reduced.

Fewer Deaths, Less Destruction: Community Task Forces could save lives and protect assets & property in a disaster.

More Information : Communities had information and could access more government programmes.

Better Access to Basic Services : Strong relationships with the public health care systems means that they can access better healthcare during in emergencies.



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