



# **Annual Report on World Humanitarian Summit Commitments - Emmanuel Hospital Association 2016**



## Stakeholder Information

**Organisation Name**

Emmanuel Hospital Association

**Organisational Type**

Other

**City and Country where Headquartered**

New Delhi, India

**Focal Point Name**

Peniel Malakar

**Region**

Asia

**Twitter ID**

Nil



## 4B Anticipate, do not wait, for crises

### Individual Commitments

Commitment	Commitment Type	Core Responsibility
The Emanuel Hospital Association has been engaged in developing disaster response networks (DRN) across India engaging local community based organizations, interacting closely with various lessons learned, understanding ways or approaches to effectively and efficiently respond to disaster situations keeping local context in mind.	Partnership	Change People's Lives: From Delivering Aid to Ending Need

### Where did your organization stand on these issues prior to making these commitments

Many major disaster events are concentrated almost entirely in states like Uttar Pradesh, Bihar, Jammu & Kashmir & Northeastern states etc. Due to a lack of proactive networking with local organizations and trained volunteers (for a real time assessment report), timely response has been a challenge. Following the release of the Sendai Framework 2015, EHA adopted a real time response commitment & therefore launched the Disaster Response Network (DRN) as a strategy. The objective is to improve response timing by (1) developing a local level proactive collaborative platform and (2) building capacity of local responders.

### Achievements at a glance

We have more than 100 organizations which actively participated in the DRN from across India in locations with high disaster frequency. This enabled us to respond to some recent disaster events rather better and faster. We trained more than 17000 volunteers as Community First Responders (CFRs) and these trained volunteers are linked up with the local DRN. The DRN is rooted locally at the district level. During 2016, we have expanded the DRN to Nepal. We have also added many DPOs (Disabled Peoples Organizations) both in India and in Nepal.

### How is your organization assessing progress

One, we are constantly trying to refresh and update the training of the organizations' leaders and volunteers. We are also adding more organizations from events to events especially in new locations. Besides, we are also adding organizations in the network anticipating disaster in certain locations. The types of organizations participating in the DRN have included local NGOs, institutions (educational, healthcare), clubs, faith-based organizations, philanthropic organizations, and DPOs.

### Challenges faced in implementation

One of the major challenges is the change of people - leaders, volunteers, etc. in terms of their shifting organizations or locations. Other challenges are -  
 1) financial resources  
 2) no disaster has taken place for a long time  
 3) over-enthusiasm that leads to cross locations by local partners

### Next step to advance implementation in 2017

We are now looking forward to developing a regional level network among the active response organizations in South Asia. To start with, early in the year 2017, we started working toward the Health Emergency Alliance (HEAL). This strategy would enable the local DRNs to effectively link up with regional level and global level organizations with critical information such as assessments-needs and gaps, or logistics. This platform or alliance would also help systematically build capacity of local stakeholders in areas of relevant need (eg. Hospital Disaster Resilience & Response; Medical First Responders etc.)

### If you had one message for the annual report on what is most needed to advance the transformation Anticipate, do not wait, for crises , what would it be

Lack of ineffective coordination very often leads to wastage of critical resources and hence, 'focusing on developing a proactive collaborative network engaging local potential stakeholders can radically increase effective use of critical resources while building local response capabilities can help reduce loss of lives meaningfully'.



**Tag with other relevant transformations, keywords, initiatives**

**Keywords**

- Disability  Disaster Risk Reduction

**Specific Initiatives**

- A Global Undertaking on Health in Crisis Settings  NEAR - Network for Empowered Aid Response

**Agenda for Humanity**

- 5A - Invest in local capacities