INCLUSIVE APPROACH TO DISASTER RISK MANAGEMENT:
DESIGNING STRATEGIES FOR SOUTH ASIA

SHAKEB NABI

THESIS REPORT, NOHA ERASMUS MUNDUS MASTER'S PROGRAM
Executive Summary

South Asia is one of the hot spots for disasters. It is one of the geographical areas which makes in very vulnerable to different kinds of hazards. The fragile Himalayas, the Indian Ocean, The Arabian Sea and the Bay of Bengal along with numerous perennial rivers makes these areas a perfect recipe for disaster. It is not the hazard which kills people but it is the socio-economic status of certain sections of populations which makes them highly vulnerable to disasters. The socio-cultural factors which plays a multiplier effect are deeply embedded in our society. The most vulnerable or the marginalized community are excluded from disaster risk reduction process and planning consciously or unconsciously. Any form of discrimination leading to exclusion is contrary to the humanitarian principles of impartiality, humanity, neutrality and independence.

It is overwhelmingly acknowledged that women, persons with disabilities and socially excluded groups / individuals (e.g. on the basis of caste, religion, ethnicity…) are, together with other groups, at higher risk with regards to natural hazards. Yet, so far, no harmonized, regionally-based, locally appropriate inclusive DRM model exists in South Asia nor is recognized by relevant region-wide DRM actors. A field-tested and evidence-based, inclusive model driven by proven effective methodologies and good practices needs to be developed and promoted at community, local, national and regional levels. The excluded communities are also heterogeneous in nature and there should be a conscious effort to map their diversity and respect and incorporate their needs and aspirations.

The global policy instrument on disaster risk reduction, ratified by 162 countries, The Hyogo Framework for Action also mentions the urgency to focus on the excluded of the forgotten community in disaster risk reduction interventions and processes. In spite of it being a serious issue not much concerted effort has been made towards inclusive disaster risk reduction. Based on the literature surveyed, it was found out that there are not many vision or strategy document which focuses on inclusive approach to disaster risk management.

The following research carried out across six countries in South Asia is a positive step towards that direction. It focuses on looking at exclusion as an issue of concern in depth and based on the primary research in the field comes out with strategies to makes disaster risk reduction inclusive. In most of the countries in South Asia, the disaster risk management initiatives is maturing. There are lots of lessons to be learnt from there but there are not many initiatives which looks at inclusion consciously.

The research can be used as a guiding document by practitioners and academicians working on development and disaster risk reduction issues globally and specifically in South Asia. I am very confident that this report is one step forward in inclusive approach to disaster risk management.
Acknowledgements

“Inclusive Approach to Disaster Risk Management” is an action research cum capacity building study carried out with the community and the frontline workers across six countries in South Asia. This report is dedicated to the millions of community members across South Asia, who are the most vulnerable to disasters still they are left out from the disaster planning & intervention strategies. This study is by the community, for the community and with the community. This report is also dedicated to the indomitable resilience and courage of the community who in-spite of facing disasters on a regular basis have not lost courage and hope.

My study is highly indebted to the frontline workers or the community volunteers, though called by different names in different countries across six countries for working together as a team on an issue which they are very empathetic about. Through this initiative, they have not only contributed to the study, but have also matured as a better community volunteer.

I would also like to share the credit of this study with INCRISD project, a consortium of three INGOs, viz. Handicap International, ActionAid International and Oxfam GB which gave me the opportunity and unconditional support to carry out the study. Since the project is being implemented in close collaborations with various ECHO funded DRR projects in South Asia, I must acknowledge that this study would not have been possible without their buy-in and support.

And, finally I would like to thank Prof. Andrej Zwitter, University of Groningen, my guide and constant source of inspiration not only just for this research but during the entire study period. My special thanks to Elena Herman-Pletjugina, NOHA Program Coordinator, University of Groningen for constantly guiding us throughout the course.

This report deserves a special mention of my family; Afroz, Adiba and Shayaan who were understanding enough to give me the time to burn midnight oils and showered me with words of encouragement, love and care when I was exhausted during the course of the study.
List of Abbreviations

AAA ActionAid Afghanistan
AA AfghanAid
AAP ActionAid Pakistan
ACTED Agency for Technical Cooperation and Development
ADP Annual Development Plan
ADRA Adventist Development and Relief Agency
BDRCS Bangladesh Red Crescent Society
CBDP Community Based Disaster Preparedness
CCDMC City Corporation Disaster Management Committee
CDMP Comprehensive Disaster Management Program
CPP Cyclone Preparedness Program
CRA Community Risk Assessment
CSO Civil Society Organization
CWW Concern Worldwide
DeSHARI Developing and Strengthening Humanitarian Assistance and Risk Reduction Initiatives
DIPECHO Disaster Preparedness European Commission Humanitarian Organization and Civil Protection
DMB Disaster Management Bureau
DMC Disaster Management Committee
DP Disaster Preparedness
DRM Disaster Risk Management
DRR Disaster Risk Reduction
ECHO European Commission Humanitarian Organization and Civil Protection
EWS Early Warning Systems
FSCD Fire Services and Civil Defence Department
GFDRR Global Facility for Disaster Reduction and Recovery
GUS Gram Unnayan Samitee
HAP Humanitarian Accountability Partnership
HI Handicap International
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tr>
<td>ICIMOD</td>
<td>International Center for Integrated Mountain Development</td>
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<tr>
<td>IDSN</td>
<td>International Dalit Solidarity Network</td>
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<tr>
<td>IEC</td>
<td>Information, Education and Communication</td>
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<tr>
<td>IME</td>
<td>Institution of Mechanical Engineers</td>
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<td>INCRISD</td>
<td>Inclusive Community Resilience for Sustainable Disaster Risk Management</td>
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<td>INGO</td>
<td>International Non-Governmental Organization</td>
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<tr>
<td>NARRI</td>
<td>National Alliance for Risk Reduction and Response Initiatives</td>
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<td>ODI</td>
<td>Overseas Development Institute</td>
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<tr>
<td>SAFER</td>
<td>Strengthening Actions for Fostering Resilience through Early Warning and Risk Sensitive Planning</td>
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<tr>
<td>SoD</td>
<td>Standing Order on Disaster</td>
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<tr>
<td>UNDESA</td>
<td>United Nations Department of Economic and Social Affairs</td>
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<tr>
<td>UNESCAP</td>
<td>United Nations Economic Commission for Asia and Pacific</td>
</tr>
<tr>
<td>UNISDR</td>
<td>United Nations International Strategy for Disaster Reduction</td>
</tr>
<tr>
<td>WMO</td>
<td>World Meteorological Organization</td>
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Introduction

In the event of a disaster, it is the community which has the maximum bearing of its impact in terms of loss of life, property, assets and self-esteem. Based on various empirical evidences from the field, it has been argued that in more than 90% of the instances it is the community who is the first responder. The community itself is very diverse in nature based on a diverse sets of factors such as caste, class, ethnicity, linguistics, the income, education & health status and the access of the community to various forms of resources.

Most of the disaster risk reduction or the response programs across the globe considers community as a uniform entity and not very different in terms of their needs and aspirations. There has not been a conscious effort to look at the community as a diverse set of people. Due to the failure to design programs respecting the diversity of the community, it is the dominant and the powerful section of the community which dictates the terms and condition for any program interventions and it is the invisible community who are powerless and the most vulnerable and the marginalized who are mainly forgotten in different phase of the crises. It can be inferred that the community which needs the most attention or higher degree of support is left out of the whole process.

Based on the secondary research it has been observed that there are not many literature available on inclusive approach to disaster risk management. With south Asia being one of the areas highly prone to natural disasters, the need for a guideline or a framework is a sine-qua-non.

The current research explores the issues related with vulnerability of the community due to exclusion due to various types of natural disasters. Some of the pertinent issues that it is going to address is the process of exclusion related with the most vulnerable community and the factors responsible for the same, how do we identify and work with the most vulnerable and the marginalized community. The research also focuses on developing a monitoring and evaluation indicators to measure inclusive approach to a disaster risk management project.

The study is aimed at field level practitioners as well as the policy makers who are working on development issues. It will help them identify and target the community and design proper interventions for them. Through the project from which the learning of the research is being extracted is a disaster risk reduction project across south Asia but this is also relevant to practitioners working on any development issues. The research also targets the policy makers in the sense that it will help them design and implement pro-poor policies.

The study is structured in such a way that it initially looks at the relevance of the research based on the available secondary literature. The secondary literature helped the researcher identify the gaps. Based on the identified gaps the primary research was designed and carried out with different agencies disaster disk reduction projects across south Asia. The study concludes with addressing the gaps through coming out with recommendations for inclusive disaster risk management.
About the Program

Funded by the European Commission Humanitarian Aid Department (ECHO), under the 7th DIPECHO Action Plan for South Asia, INCRISD South Asia (Inclusive Community Resilience for Sustainable Disaster Risk Management) is implemented by Handicap International, ActionAid and Oxfam. INCRISD South Asia aims at building safer, more resilient communities in South Asia by evidence-based inclusive approaches to Disaster Risk Management (DRM) through a multi-stakeholders’ engagement. INCRISD South Asia is rolled out in 6 countries of South Asia: Afghanistan, Bangladesh, India, Nepal, Pakistan, and Sri Lanka.

Why an inclusive DRM model?

It is overwhelmingly acknowledged that women, persons with disabilities and socially excluded groups / individuals (e.g. on the basis of caste, religion, ethnicity…) are, together with other groups, at higher risk with regards to natural hazards. Yet, so far, no harmonized, regionally-based, locally appropriate inclusive DRM model exists in South Asia nor is recognized by relevant region-wide DRM actors. A field-tested and evidence-based, inclusive model driven by proven effective methodologies and good practices needs to be developed and promoted at community, local, national and regional levels.

Therefore, INCRISD South Asia project aims at developing, validating and promoting a regionally-based inclusive model on DRM, by establishing a close collaboration with DIPECHO-funded projects and in general DRM stakeholders in 6 South Asian countries (Afghanistan, Bangladesh, India, Nepal, Pakistan and Sri Lanka).

What does INCRISD South Asia mean by model?

By model, INCRISD South Asia means a framework of reference encompassing inclusive approaches to DRM drawn from experiences from different stakeholders as well as from good practices collected at field level through the pilot-testing of inclusive approaches and methodologies. It does not intend to substitute the DRM model adopted or put forward by other DRM stakeholders; on the contrary, it builds on existing experiences and practices in terms of inclusion in DRM.

How will INCRISD South Asia develop an inclusive DRM model?

In its inception phase, INCRISD South Asia is compiling inputs, based on the experience from regional consortium members, Handicap International, ActionAid and Oxfam, into a draft preliminary framework on inclusive approaches to DRM. The present outline for a preliminary inclusive DRM model corresponds to this very initial stage. This initial outline will then be presented and discussed with DRM stakeholders during consultations organized in each targeted country in order to ensure different experiences feed in this preliminary model.

In the course of INCRISD South Asia and with the support of INCRISD South Asia team, targeted DIPECHO in-country projects will pilot-test inclusive DRM initiatives.
(possibly based or inspired by the inclusive approaches put forward in the preliminary model) and collect good practices on those. Collection, documentation, analysis and validation of such practices will be undertaken with the involvement of multiple stakeholders at various levels. Those will provide evidence and will further allow consolidation of the preliminary inclusive DRM model designed in the inception phase.

Towards an inclusive DRM Model

Underlying principles of an inclusive approach to DRM
As mentioned previously, social models to gender, disability and, broadly speaking, exclusion of individuals / groups on the basis of other characteristics acknowledge a human right dimension. Benchmarks of an inclusive approach therefore refer to the Universal Declaration of Human Rights, and thus include entitlement to rights and freedoms to all without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status, dignity, integrity and autonomy of all human beings. The responsibility of the State Parties needs to be highlighted in this respect.

It is also worth noting in this respect the "Common Understanding" of a human rights-based approach and the six main principles which stem from it:
- Universality and Inalienability
- Indivisibility
- Inter-Dependence and Inter-Relatedness
- Equality and Non-Discrimination
- Participation and Inclusion
- Accountability and Rule of Law
The twin-track approach and its implications for inclusive DRM

Given, on the one hand, the impact of institutional barriers (laws, attitudes, etc.) on dynamics of exclusion for persons with disabilities, women, and other groups / individuals, and on the other hand, the cause/effect relations between unequal social relations of power and social exclusion, working towards inclusion of such groups means focusing on both aspects, which is translated into the well-know “twin-track approach”:

![Twin-Track Approach Diagram]

Source: Handicap International, undated

Both elements are intertwined. Indeed, mainstreaming is a key to allow a recognition of the voice of excluded groups while empowering is instrumental to build demand for change in the environment (laws, attitudes, etc.) Linking up institutional and individual changes is of outmost importance.

The twin-track approach is closely related to theories of change, calling for simultaneous:

- Individual change (e.g. information and awareness of right-holders regarding their rights, opportunities, access to resources and services, etc.)
- Systemic change (institutional reforms promoting equality of rights in laws, policies, awareness of community members on inequitable practices and ideologies, resource allocation and monitoring, etc.)

To achieve equal access to protection and safety in situation of disaster risks for all individuals and groups regardless of gender, disability, ethnicity, caste, age... the twin-track approach provides a useful insight on how women, persons with
disabilities and other socially excluded groups can be both included at all stages of the disaster risk management process:

- **At systemic level**, general disaster risk management systems and services (e.g. early warning systems, community shelters or search and rescue services) should ensure equal access for women, persons with disabilities and other socially excluded groups. Specific services should be developed to address the additional needs of such individuals / groups in the event of a disaster. For that purpose direct and indirect causes embedded in social systems and institutions (including in terms of access to resources, services...) which results into restricted participation should be identified and addressed.

- **At individual level**, specific measures such as targeted training and skills building, provision of assistive devices, household preparedness, etc. should be taken to inform, guide, orient, capacitate and empower women, persons with disabilities and other socially excluded groups to come together and voice their concerns, set the agenda and be involved in decision-making processes with regards to disaster risk management, so that their capacity to participate and act effectively in the event of a disaster is strengthened. An important way to empower women, people with disabilities and other socially excluded groups is the provision of a personalised social support that allows assessing what support is needed to people to get involved within mainstream activities and services, be they of a basic, support or specialized nature.

**A preliminary inclusive framework for key DRM activities**

The following preliminary framework for inclusive DRM provides for each key, typical DRM activity:

- **Guiding principles**: umbrella concepts or benchmarks DRM activities may refer to with regards to inclusion of women, persons with disabilities and other socially excluded individuals / groups

- **Standards**: those reflect how guiding principles translate into concrete actions to ensure DRM activities are inclusive

- **Checklist**: key questions DRM practitioners may raise in order to assess the extent to which each activity has been made inclusive

- **Indicators**: those are meant to specify the evidence that what was aimed at / expected was actually achieved. At this stage, those indicators remain generic and mostly expressed in qualitative terms as they need to be adapted for each particular project, especially when it comes to quantifying those.

- **Minimum targets**: Specific targets aimed at by INCRISD project on which in-country projects are required to report. Most are related to process indicators only.

### Table 1: Key Indicators on Inclusive Disaster Risk Management

<table>
<thead>
<tr>
<th>S No</th>
<th>Key DRM Activity</th>
<th>Standards</th>
<th>Indicators</th>
</tr>
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<thead>
<tr>
<th>1</th>
<th>Awareness-raising and rapport-building with stakeholders on inclusive DRM</th>
<th>Changing understanding, knowledge and awareness of duty Bearers</th>
<th>% of identified duty bearers who demonstrate knowledge and/or awareness of no. of specific risks with women, person with disabilities and socially excluded individuals / groups.</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>% of identified duty bearers who demonstrate knowledge on rights of women, persons with disabilities, socially excluded groups (with regards to DRM)</td>
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<td></td>
<td></td>
<td></td>
<td>% of identified duty bearers who demonstrate their responsibility with regards rights of women, persons with disabilities, socially excluded groups (with regards to DRM)</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>% of identified duty bearers taking into consideration of the needs of women, persons with disabilities, socially excluded groups/individuals in agenda, decisions, plans and allocated resources.</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>No. of policy documents reviewed and analyzed in close consultation with community</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Number of strategy papers prepared and shared on rights and entitlements of the excluded groups</td>
</tr>
<tr>
<td></td>
<td>Changing understanding, knowledge and awareness[1] of women, persons with disabilities and other socially excluded individuals / groups on their rights (with regards to DRM)</td>
<td></td>
<td>% of targeted women, persons with disabilities, socially excluded groups who demonstrate knowledge and awareness on their rights (with respect to DRM)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>% of targeted vulnerable groups who have accessed entitlements “in the event of a disaster”</td>
</tr>
<tr>
<td></td>
<td>Promote and ensure equal and meaningful participation of right holders (including women,</td>
<td></td>
<td>% of women, persons with disabilities, other socially excluded individuals / groups represented among duty bearers</td>
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<tr>
<td><strong>Persons with disabilities and other socially excluded individuals / groups</strong></td>
<td></td>
<td>% of agenda items reflecting needs and aspirations of the vulnerable communities.</td>
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<td></td>
<td></td>
<td>% of decisions made in favor of the vulnerable groups.</td>
<td></td>
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</table>
| **2 Risk Assessment**  
(hazards, vulnerabilities, capacities / capabilities assessment) | **Ensure that the risks for, including needs, vulnerabilities and capacities of women, persons with disabilities and other socially excluded individuals / groups are analyzed in differentiated way, at individual and systemic levels** | No. and type of groups identified at higher risk and its underlying causes in a participatory manner |
<p>|   |   | % of targeted vulnerable groups participating in risk analysis and planning and are able to identify their risks and capacities |
|   |   | % of action points reflecting needs and aspiration of vulnerable groups. |
| <strong>3 Small scale mitigation measures</strong> | <strong>Ensure universal accessibility, ownership and leadership in claiming entitlement to, managing and maintaining mitigation measures</strong> | % of targeted excluded groups who participate in designing of the small scale mitigation works |
|   |   | % of small scale mitigation work being carried out with the community which has physical accessibility features |
|   |   | % of targeted excluded community who participate in the construction of small scale mitigation work |
|   |   | % of targeted excluded community having access to small scale mitigation structure |</p>
<table>
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<tr>
<th>4</th>
<th>DRM planning</th>
<th>Ensure that the needs and aspirations of the vulnerable communities are addressed through the planning process</th>
<th>% of targeted excluded groups participating in the DRM planning process</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td>% of inclusive issues being reflected in the DRM planning document</td>
<td>% of inclusive issues addressed from the DRM planning document</td>
</tr>
<tr>
<td>5</td>
<td>Capacity Building and Information, Education, Communication (IEC)</td>
<td>Ensure enhanced awareness about the vulnerable community to key stakeholders</td>
<td>% of identified IEC materials developed that focuses on inclusion and inclusive issues</td>
</tr>
<tr>
<td></td>
<td></td>
<td>% of IEC materials developed in close consultation with the vulnerable groups</td>
<td>% of identified EWS which are designed keeping the needs and aspiration of the excluded group</td>
</tr>
<tr>
<td>6</td>
<td>Early Warning System</td>
<td>Ensure robust and inclusive early warning systems</td>
<td>% of excluded groups participating in designing the early warning systems</td>
</tr>
<tr>
<td></td>
<td></td>
<td>% of excluded groups who are members of the committee on early warning</td>
<td>% of identified EWS which are designed keeping the needs and aspiration of the excluded group</td>
</tr>
<tr>
<td>7</td>
<td>Coordination on DRM</td>
<td>Robust DRM coordination mechanism to discuss and address issues related with the vulnerable community</td>
<td>% of issues related with vulnerable community discussion during the coordination meeting</td>
</tr>
<tr>
<td></td>
<td></td>
<td>% of issues related with the vulnerable community addressed through the DRM coordination mechanism</td>
<td>% of issues related with the vulnerable community addressed through the DRM coordination mechanism</td>
</tr>
<tr>
<td>8</td>
<td>Response Mechanism</td>
<td>Ensure that the response mechanism established addresses and builds on the capacities of the vulnerable communities</td>
<td>% of vulnerable community who are a part of various task forces created at the community level</td>
</tr>
<tr>
<td>% of vulnerable community which has a robust support system developed for post disaster response</td>
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Exclusion: The Factors, The Processes

Exclusion of the most vulnerability and the marginalized community can be a very significant bye-product of the post disaster policies followed by the government and other agencies. The excluded community arguably are also the poorest community. The rehabilitation programs are most of the times anti-poor in the sense that the rehabilitation package for the community is decided by the assets lost by them. Somebody who has lost a house will get the house. In the case of the poor community, either they don’t have the house or even if they have the house which is made of muds and are very basic in nature. To add to the misery of the poor people, the houses are mostly on the land with no or improper records. The people with better houses and better assets are given better compensation package as compared to the poor people (NCDHR, 2010). Another classic example is the compensation for bigger livestock in the form of bigger livestock which was evident during the Uttarakhand Flood Response in 2013.

Boyce (2000) argues that measures to address the disaster risk vulnerability of the community is an “impure public goods” which when provided to one are provided to others but not in equal proportion. According to Cannon (2008) communities are places where normal everyday inequality, exploitation, oppression and imbalanced power equations are woven into the fabrics of relationships.

By highlighting on the impure public goods concept, Boyce (2000) comes out with an argument as to whom it should be provided. He further elaborates this as a scarce resource which if provided to one section of the community, the other section of the community might be deprived of the same. There needs to be a concerted effort to provide it to that section of the population who has the least of it and who needs it the most. This calls from a paradigm shift from the wealth based approach to rights based approach which is more of an egalitarian distribution of resources based on the premise that each individual has an equal right to risk mitigation.

Rashid and Shafie (2009) argues that exclusion and enduring undervaluing of women, persons with disabilities and socially excluded group perpetuate a cycle of poverty and deprivation. These groups of people are the ones who suffer the most in the event of a disaster and have the least capacities to resist, recover and recuperate from the loss sustained. They have come out with a detailed list of the community who are excluded and most vulnerable during a disaster. These communities are:

- Children and adolescents
- Women (including female headed households and victim of domestic violence)
- Persons with Disabilities
- Religious minority groups
- Trafficked persons
- HIV affected and infected persons
- Lesbians, Gays, Bi-sexual, Transgender etc.
- Elderly citizens
- Occupational minority groups
Refugees etc.

Different Processes Whereby Social Inclusion Operates

<table>
<thead>
<tr>
<th>Interactional/Associative Inclusion</th>
<th>Institutional/Organizational Exclusion</th>
<th>Exclusion from Market</th>
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<tbody>
<tr>
<td>Corporate or group interest</td>
<td>Discriminatory institution mission or objective</td>
<td>Scarce resources/assets of exchange</td>
</tr>
<tr>
<td>Stigmatization</td>
<td>Low status entitlements</td>
<td>Little mobility</td>
</tr>
<tr>
<td>Weak leadership</td>
<td>Lack of competitive skills of the excluded people</td>
<td>Distorted market arrangements</td>
</tr>
<tr>
<td>Restrained interactions</td>
<td></td>
<td>High transaction cost of capital and others</td>
</tr>
<tr>
<td>Mistrust by others</td>
<td></td>
<td>Labour and financial market segmentation and discrimination</td>
</tr>
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<td>Identity exclusion</td>
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<tr>
<td>Lack of mutually exchangeable resource of skills</td>
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Source: Rashid and Shafie (2009)

Defining Vulnerability

The term vulnerability is derived from the latin word *vulnerare* meaning ‘to wound’. So at the basic level vulnerability implies the capacity to be wounded.

Cardona et al (2012) defines vulnerability and exposure as dynamic varying across temporal and spatial scales and depend on economic, social, geographic, demographic, cultural, institutional, governance and environmental factors. They further elucidate that communities and individuals are differentially exposed to vulnerability as this is based on factors such as wealth, education, race/ethnicity/religion, gender, age, class/ caste, disability and health status. It is related to pre-disposition, susceptibilities, fragilities, weaknesses, deficiencies, lack of capacities that favor adverse effects on the exposed elements.

Vulnerability is an internal risk factor of the subject or the system that is exposed to a hazard and corresponds to its intrinsic predisposition to be affected or are prone to damage. It could also be interpreted as a degree to which different social classes are differentially at risk (Cardona, 2003). The above definition strengthens the argument that vulnerability is a determining factor of social, political and economic conditions of the community. Vulnerability is characterized by a set of conditions viz. social discrimination, expropriation, exploitation, political oppression and other processes that have made the poorest most vulnerable to disasters. It is a social construct and is the result of economic, social and political processes.
There are various conceptual models which explains vulnerability through its cause and effect equation. There is one model by Wisner et al (2004) which focuses on 'pressure and release'. The characteristics of this model is that it identifies vulnerability through social pressure and its relation to local and global level in which the global level being the root causes, the intermediate level being the dynamic pressures and local level the unsafe conditions. According this model, the root causes are the social, political and economic structures; the dynamic pressure being population growth, urban development, population growth, environmental degradation and the absence of ethics while the unsafe conditions are the social fragility, potential harm or poverty.

The impact of disaster to a great extent is dependent on the nature and intensity of the event but the impact on the community is directly dependent on the vulnerability of the different social groups within the community. This calls for different strategies during disasters to ensure inclusion and outreach to the marginalized communities (NCDHR, 2010).

There is another model by Sen (1981 in Cardona, 2003) called the 'access model'. It elucidates that the risk is generated as a result of difficulties that some social groups have in accessing certain resources over time. This model argues that when faced with equal hazard or when faced with the same potential for physical damage, the risk could be different for different community based on its capacity to absorb the impact.

Vulnerability under the ambit of disaster management is a manifestation of social construct of risk (Aysan, 1993; Blaikie et al, 1996 in Cardona et al, 2012). It describes a set of conditions that people derive from the historical and prevailing social, cultural, environmental, economic and political contexts. The vulnerable groups are not only at risks because they are exposed to hazards but as a result of marginality, of everyday patterns of social interactions and access to resources. In other words, the vulnerability profile can be constructed that take into consideration sources of environmental, social and economic marginality (Wisner, 2003 in Cardona et al, 2012).

Adger et al (2004) in Rygel et al (2008) defines nine categories of indicators for vulnerability viz. economic wellbeing; health & nutrition; education; physical infrastructures; institutions; governance, conflict & social capital; geographic & demographic factors; dependence on agriculture; natural resources & ecosystems; and technological capacity.

Cannon et al (2004) defines vulnerability as a predictive quality, a way of forecasting or assessing what is going to happen to an identifiable population under conditions of particular risks and hazards. It is a benchmark which can help development practitioners direct development interventions seeking ways to protect and enhance people’s resilience. It is quite different from poverty in the sense that it identifies populations who are deemed to be disadvantageous while poverty is a measure of current status of the community. Cardona et al (2012) argues that Vulnerability or social vulnerability is the characteristics of the people and differential impacts on
people in the event of a disaster. Cannon et al (2004) further elaborates on the traits of the vulnerability as follows:

(i) Initial well-being (nutritional status, physical & mental health, morale)
(ii) Livelihood and resilience (asset pattern & capitals, income & exchange options, qualifications)
(iii) Self-protection (the degree of protection afforded by capability and willingness to build safe homes, use safe site)
(iv) Social protection (forms of hazard preparedness provided by society more generally, e.g. building codes, mitigation measures, shelters, preparedness)
(v) Social and political networks and institutions (social capital but also role of institutional environment in setting good conditions for hazard precautions, people’s rights to express needs and of access to preparedness)

Vulnerability needs to be understood in the context of the individual and household as being composed of five interacting components viz. livelihood, baseline status, self-protection, social protection and governance. These five are all inter-related concepts. A person well-being or protection is governed by the strength of their livelihoods and in turn the way different livelihoods are arranged between different groups depends on the types of governance that operates. Social protection is also related to the type of governance in operation (Cannon, 2008). He further elaborates that vulnerability is not only about passivity and suffering, it also shows the way how it can be reduced.

**Vulnerability in terms of geographical context**

There are some countries within the region which suffer from the cumulative impacts of multiple disasters. There have been instances where the country has not been able to recover from a disaster that it is impounded with another disaster. Examples could be cited of Pakistan. In October 2005, Pakistan was jolted by a severe earthquake where in 73,000 people were killed and 2.8 million were left without water and proper housing. The damage was to the tune of around $ 3 billion. This was followed by cyclone “Yemin” two years later with 2.5 million people affected and $ 1.6 billion loss to the economy. Again there was a huge flood in 2010 affecting 20 million people and around $ 10 billion loss to the economy (UNISDR and UNESCAP, 2012). The cumulative effects of these disasters, one after another drastically impacted the GDP and took away many developmental gains.

Sapirstein (undated) comes out with a basic and working definition of vulnerability which according to him is the degree to which people will be impacted in the event of a natural or a man-made disaster.

Based on the exercise carried out in the field in Bangladesh with a set of communities of practitioners it was evident that the opposite of vulnerability is resilience which can be enhanced through increase in social capital of household and society at large.

UNESCAP and UNISDR (2012) argues that the major challenge in years to come is to reduce the growing rate of exposure leading to higher degree of vulnerability of
the community. One of the major reasons for exposure to hazards is the people living on the marginal land in urban areas due to rapid and unprecedented migration of the people from rural to urban area.

Many disaster related literature refer to the formula of the following type:

\[
\text{Risk} = \text{Hazard} \times (\text{Vulnerability} - \text{Resources})
\]

Where \text{Risk} is the likelihood or the expectation of a loss, \text{Hazard} is a condition posing threat or harm, \text{Vulnerability} is the extent to which persons or things are likely to be affected and \text{Resources} are those assets in place which will diminish the effects of hazard.

\textbf{The Vulnerable Community}

According to UNESCAP and UNISDR (2012, pg. 32) there are certain sections of the community which are exposed to multiple level of vulnerability like an elderly women who is also a person with disability or a pregnant women who is single with no bread winner. These categories of people will be more exposed to natural hazards and will face higher degree of challenge in recovering from disaster. Due to continued disaster they further get into the vicious cycle of vulnerability making it almost impossible to come out of it. Poverty is one of the crucial factors leading to the vulnerability of the community but there are various examples like Bangladesh which in spite of being poor has been able to reduce the vulnerability of its people. There are also examples of certain countries where large section of the population is comparatively well of but vulnerability is still prevalent in the country.

The variations in vulnerability of the community is directly proportional to the economic status of a state. The decline in the economy of a state directly impacts the most vulnerable section of a community as the countries are forced to balance budget and reduce fiscal expenditures (UNESCAP and UNISDR, 2012).

According to a report by Institution of Mechanical Engineers (2013), the attraction leading to mass migration of the people to urban areas has enhanced the susceptibility of these people to natural disasters with around 200 million people being impacted by natural disasters every year. The settlement of the people due to very limited choices available to them in urban areas along the coast, flood plains and earthquakes zones which are less prone to higher impact of natural disaster plays a very crucial role in increasing the vulnerability of the people.

Vulnerability is also a factor of dependence on external support during normal times and more so in the event of a disaster. The disaster situation can lead to weakened dependency if different section of the community are competing for the same resources and the resources are becoming scarce and diminished. Apart from the resource scarcity, the support system which has been traditionally established over a period of time also gets weakened as the community has to devote greater time in fending for itself. This can have a great adverse effect on the group who are dependent for survival on external support systems as their psychological, legal and protection needs are not fully met (UNESCAP and UNISDR, 2012). Under this
category are the most vulnerable and marginalized community like children, persons with disabilities, pregnant women and elderly people.

UNESCAP and UNISDR (2012) underlines five factors which leads to the enhanced risk of the community in the Asia-Pacific region which are related to the increasing socio-economic exposure to disaster.

It can be concluded that vulnerability is the degree to which a community is exposed or susceptible to external risks.

In 2011, 10 of the 20 megacities globally are located in Asia (UNDESA, 2011 in UNESCAP and UNISDR, 2012). Urban poverty is one of the crucial factors which enhances the vulnerability of the community, UNESCAP and UNISDR (2012) cites the example of Philippines flash flood and Thailand flood in 2011 wherein the urban poor were more significantly impacted by the disaster as compared to the general urban community. One of the significant factors related to urbanization is the proliferation of slums in and around the urban areas. In fact, in some of the cities in South Asia like Dhaka and Kathmandu, majority of the population live in slums. Most of the slums are in marginal or wasteland locations with informal structures on existing buildings and poor living conditions.

**The Social Vulnerability Index of Disaster**

Flanagan et al (2011) worked on the social vulnerability index of the community in the event of a disaster. According to them, social vulnerability has till recent times has been a neglected phenomenon. Most of the disaster risk reduction interventions focused on the infrastructure vulnerability this undermining the social vulnerability of the community. They further elucidate that exploring the manner in which disaster may affect the population at large is vital but understanding where and how the socially vulnerable communities are places can help allocate resources more effectively during the entire disaster cycle viz. mitigation, preparedness, response and recovery. The study focuses on characteristics of the population as they believe that socially vulnerable community are more likely to be impacted more in the event of a disaster and less likely to recover quickly as compared to the other population.

The social vulnerability index as constructed by Flanagan et al (2011) are based on four criteria viz. (i) the socio-economic status (ii) the household composition and disability (iii) minority status & language and (iv) housing and transportation. A brief discourse of the four criteria are discussed below:

(i) The Socio-Economic Status: This domain comprises of the income, poverty, employment and education variables. It is based on the premise that poor are the disadvantaged populations and are disproportionately affected by disasters. They also have less income or assets to prepare for or recover from the impact of a disaster. For a poor person, the monetary value of their assets may be less but for them replacing lost property might be difficult as compared to the well to do people as their risk are mitigated by several financial instruments like insurance policies, savings and financial investments. The employed person as compared to the unemployed person may have several employment benefits that takes care
of their income and health cost assistance. There is no direct proven correlation between vulnerability and education status, but the authors argue that education is related with income and employability. Higher level of education is also closely linked to access to various information like on hazard and preparation for recovery.

(ii) The Household Composition and Disability: This domain includes age, single parenting and disability variables. Under this category are the community which is dependent on some external source like children below 18 years of age, persons above 65 years, single-parent households and persons with disabilities. The factors which leads to the vulnerability of this group is the need for and dependence on external support and resources. Children are not able to take care of themselves during a disaster because of the lack of necessary resources, knowledge and life experience to effectively defend themselves against such a scenario. Many elderly people and persons with disabilities have special needs that requires assistance and support. Family members or other support systems which are active during normal times are destroyed or disrupted during disaster or are also overwhelmed by the intensity and severity of the disaster. According to a conservative estimate by UNESCAP and UNISDR report (2012), there are around 10% of persons with disabilities in the Asia and Pacific region.

(iii) Minority Status and Language: This comprises of race, ethnicity and language proficiency variables. There are certain ethnic groups or races which are normally discriminated against and the severity of the discrimination are more pronounced during the disaster.

(iv) Housing and Transportation: Comprises of housing structure, crowding and vehicle access variables. Housing quality and the location of the houses are key determinants in assessing the disaster vulnerability of the community. Poor people live on marginalized lands and poorly constructed and mobile houses that are vulnerable to different types of disaster. The quality of housing is a factor leading to its vulnerability to storms and earthquakes whereas houses constructed on marginal lands makes it more vulnerable to cyclones, floods and avalanches. Since the houses of the poor are cluttered together, they are prone to dominos effect and thus more vulnerable to disasters. The access and affordability to transportation services also makes the life of the poor complicated as they need these resources to evacuate and move to safer locations in the event of a disaster.

Disaster and Social Vulnerability

Dalits, as the untouchable community in Indian Sub-Continent are known are more vulnerable to the natural and man-made disasters as compared to the general
community or non-dalits due to their marginalized social positions, the location of their habitat or settlements and their vulnerable livelihood chores such as sewage disposal, rag picking, casual farm labor etc. They also have little or no land entitlements. They use on small piece of land which is mostly owned by the government of left fallow because of its non-productivity (IDSN, 2013). The dalit communities are also excluded or marginalized from the main village centers and community structures leading to their non-representation in the data and data collecting process during and in post emergency scenario. They also face problems for getting themselves registered in the relief camps and thus are excluded from the relief distribution processes also. There certain types of work like the burial of the dead, removal of the dead bodies, removal of debris and excreta in the event of disasters which are carried out by the members of the dalit community.

Being dalit makes a person excluded and more vulnerable. Based on some of the empirical evidences from across India, the dalits were the last to receive aids. Internal political rivalries and local leader’s involvement in managing the relief operations made it very difficult for the dalits to get their information incorporated into the roster of potential relief recipients. Examples could be cited of floods in Assam and Bihar in India, where the relief never reached the dalit communities. It may be further elaborated that neither the government nor the community were aware of the entitlements of the dalit in the event of a disaster. There has also been instances where the relief distribution were coordinated by the religious institutions which made it even harder for the people from the dalit community to access it (NCDHR, 2010).

The dalits are the excluded communities as most of the policies and practices of the government and other agencies don’t take into consideration the case dynamics or the power structures associated with caste.

There are several examples like the ones from flood in Bihar in India where millions of Euros were spent on relief and early recovery and still the dalits were without safe drinking water and basic amenities (IDSN, 2013).

According to IDSN (2013) there are certain principles through which disaster risk management programming and principles could be made inclusive. Some of the core principle are:

- Public Recognition: This principle focuses on public recognition of the fact that there is a caste based discrimination and exclusion in disaster prevention and response. It supposes that effective recognition can help in effective targeting. It will help in co-existence that cuts across caste lines and other social barriers.
- Common Approach: This includes methods such as vulnerability and capacity assessment for disaster risk management. It focuses on empowerment of the dalit community through proper targeting, inclusion through transparency and inclusion through empowerment.

The indigenous communities are also more vulnerable to disasters as they mostly live in the remote areas cut off from the rest of the society. Due to their remoteness
they have less access to health, education, employment and other social services provided by the government (Rashid and Shafie, 2009).

**Disaster and Persons with Disabilities**

One of the most important factors which leads to enhanced vulnerability of the persons with disabilities is the attitude of the society towards the person. In most of the cases they are perpetually dependent on the community for the support services.

**Disaster and Women**

According to Beijing Agenda for Global Action on Gender Sensitive Disaster Risk Reduction (2009), women as a group are among the poorest, they comprise of more than 70% of the world’s poor. The reason for their poor status is due to socio-economic, political and cultural disadvantages. The prevailing policies and the current frameworks do not adequately recognize and support the crucial role women play sustaining household and community economies and social networks. The situation does not show any sign of improvement as gender remains a marginal issue of concern in the current national and international negotiations around disaster risk reduction and climate change adaptation.

The seriousness to which gendered approach to disaster risk reduction is being adopted by the states could be gauged from the fact that only 19 out of 118 countries mentioned gender or women’s issues in their national report for the World Conference on Disaster Risk Reduction in 2004. Only 8 out of 61 reports received by UNISDR in 2007 for the first session of Global Platform on DRR touched on women’s and gender issues briefly (UNISDR, 2009). The reason for the same could be lack of understanding on the issues, political accountability & commitment and lack of institutional capacity on gender & DRR etc.

It has been observed, researched and documented that gender relations in disaster reflect gender relations in society. Women are more vulnerable than their male counterpart of their same social class, age and ethnic groups (UNISDR, 2009; ECHO, 2013). Gender based economic, religious, social and cultural construct marginalize women across all communities and groups. Rashid and Shafie (2009) by citing the example from Bangladesh argues that the disasters has always had a worse impacted on women as compared to men because of the built-in societal norms. This is due to the fact that women role & work burden is more as compared to men. She carries out various household and outside work like food processing, cleaning, cooking, collecting water & fuel, take care of the livestock and agriculture land etc. Their vulnerability is further enhanced by the culture and the social construct. In South Asia, the way women dresses, like wearing a saree restrict their mobility and the ability to come out physically from difficult situation. There has also been instances where women have been subjected to sexual harassment due to lack of protection. This has often led to distress marriage of the girls who have not yet even achieved the marriageable age.

UNISDR (2009) defines gender equality as equal rights, responsibilities and opportunities for women and men in policy making and programs where the interest, concerns and needs of both the genders are equally considered and met. Promoting
gender equality in DRR requires multi-sectoral and multi stakeholders approach. Gender issues need to be addressed through political, economic, social, scientific, technical and humanitarian approaches.

There are various causes related with gender based vulnerability in South Asia, Mehta (2007) comes out with some of the causes which are mentioned below:

- Inadequate access to resources: skills, literacy, decision making, mobility, employment, freedom from violence which are sine-qua-non in a post emergency response phase.
- Sociocultural practices restricting the movement of women and thus limit their ability for larger interaction with the society and going out to earn.
- The double burden of productive and reproductive health.
- Over representation in the informal economy and under representation in the formal economy.
- High level of responsibility for domestic work thus giving them little time to have some other constructive engagement.

The Beijing Agenda for Global Action on Gender Sensitive Disaster Risk Reduction (2009) recommends 9 achievable actions before 2015 and requests national Governments to make strong commitments in line with international mechanisms:

1. **Increase** political commitment to gender analysis and gender mainstreaming through enhanced cooperation and collaboration between Ministries responsible for disaster risk reduction, climate change, poverty reduction and gender issues, with the participation of civil society;

2. **Develop and review** national policies, relevant laws, strategies, plans, and budgets and take immediate action to mainstream gender into national development policies, planning and programmes;

3. **Foster** the linkage between disaster risk reduction and climate change adaptation from a gender perspective through policy and administrative measures;

4. **Collect** gender-specific data and statistics on impact of disasters, carry out gender-sensitive vulnerability, risk and capacity assessments and develop gender sensitive-indicators to monitor and measure progress;

5. **Increase** awareness of the public and media on the gender-sensitive vulnerabilities and capacities in disasters and gender-specific needs and concerns in disaster risk reduction and management;

6. **Support** research institutions to study the cost-benefit and efficiency of gender-sensitive policies and programs in disaster risk reduction, climate change adaptation and poverty reduction;

7. **Secure** the actual application of disaster risk assessments as part of development policy-making and program formulation to prevent disasters from making the poor even poorer;

8. **Improve** and mainstream a gender perspective and equal participation between men and women in the coordination of disaster preparedness,
humanitarian response, and recovery through capacity building and training

9. **Build and enhance** the capacities of professional organizations, communities and pertinent national and local institutions to enable gender mainstreaming into all development sectors.

**Why South Asia**

South Asian region is one of the most vulnerable regions to various hazards across the world. Within a span of last 40 years starting from 1971, the total number of disasters that has occurred across the region is to the tune of 1,017 with 9 disasters reported in 1971 and 40 in 2009. The above figure also gives the increase in disaster events over a period of last 40 years. The disasters during the last four decades has affected more than 2 billion people across the region and the casualty has been more than 8,00,000. The direct economic losses has been more than $ 80 billion (The World Bank and GFDRR, 2012). South Asia is the most exposed region of the world to flooding and cyclone. Of the total population exposed to floods globally more than 64% are in the South Asian Region.

The high vulnerability to hazard for the people living in South Asia are due to two geographical features viz. the Himalayan mountain belt and the Indian Ocean including the Bay of Bengal and the Arabian Sea. The causes of the major earthquakes in the region is the large scale seismic events in the Himalayas. The earthquake affects 6,60,000 people annually in this region.

Oceans generate high intensity cyclones that impact nearly all coastal belts of the region. There were two huge cyclone events in the regions in Bangladesh which had huge impact on the lives and property of the community. The 1970 cyclone and the 1991 cyclone, both in Bangladesh killed around half a million people together. The average cost to GDP due to exposure to cyclone of this area is $ 4.3 billion annually which has increased by more than fourteen times as compared to 1971.

Flood has been the single biggest destructive event across South Asia causing more than half of the disaster damage in the last 40 years. It affects around 27 million people annually and loss is to the tune of $ 1 billion. The monsoon carries more than 70% of the precipitation of the region during a very short span of time which is the major cause of flooding across the region.

**Conclusion**

There are a series of factors which enhances the vulnerability of the poorest and the excluded community. In the event of a disaster, these community are prone to falling further down into vulnerability. Different authors have divided the most vulnerable and the excluded community based on various parameters ranging from age, sex, ethnicity, language, type of structure that they dwell in, health, education & nutritional status, the livelihood options etc. These factors could be the factor in isolation or it could be a combination of above mentioned factors. The above mentioned factors could lead to multiple marginalization of the community.
Vulnerability needs to be understood in the larger context also ranging from vulnerability at the individual level to intra-household level to community level and to the larger regional and national level. The regional or larger level vulnerability is a factor of disproportionate policy decisions while the vulnerability at the local level could be a factor of the implementation of the policy decisions.

The countries in South Asia presents us with a scenario where vulnerability of the community is deeply entrenched in the socio-cultural context. A deeper analysis of the primary cause of the vulnerability of the community will help the practitioners and policy makers come out with concrete solution to mainstream the most vulnerable and the marginalized community into disaster risk reduction interventions.

**Research Methodology**

**Research Question:** To explore why certain sections of the community is left out of the Disaster Risk Reduction process and to come out with a framework for their inclusion into process. The proposed research is a combination of both the secondary literature review as well as carrying out the primary research in the field. The secondary research would be focusing more on fine-tuning the research objective and developing a better understating on the issue. The primary research is intended towards coming out with a framework based on the perspective of the community and other key stakeholders.

**Secondary Research:**

A range of literature was referred for the secondary research purpose. The purpose of the secondary research is to bring more clarity on the research problem, enhance & improve the research methodology, broaden the knowledge on the research area and contextualize the findings (Kumar; 2012). The literature review was carried out from various sources including books, journals and internet. The authenticity of the information was triangulated before being cited in the research. The secondary literature review was carried under the following themes:

- Approach to research methodology
- Tools and processes used at the grassroots for doing qualitative research
- Social research methods; qualitative and quantitative research
- Vulnerability of South Asia to various disasters as a whole
- Vulnerability of various countries in South Asia to various disasters
- Exclusion and factors leading to exclusion of the community from development and disaster risk reduction processes
- Examples/case studies/evaluation documents related to various disasters focusing on which community has been left out from the relief, rehabilitation and disaster risk reduction interventions
- Identification of various communities who are most vulnerable to various forms of disasters in South Asia in general and different South Asian Countries in particular
• To understand why certain section of the community are excluded or left out from disaster risk reduction, relief & rehabilitation and development interventions.
• How the most vulnerable and marginalized community can be incorporated into the development or disaster risk reduction processes
• What are the challenges associated with working with the most vulnerable and socially excluded communities
• Gaps in the literature on disaster risk reduction and incorporation of the socially excluded community.

Collection of Primary Data
The collection of primary data will be carried out to strengthen and validate the inclusive disaster risk management framework developed based on secondary research. The primary research will enhance the validity of the framework and contextualize it for South Asia. The project “Inclusive Community Resilience for Sustainable Disaster Risk Management” will be used as a platform to carry out the primary research in the field.

Instrument for Primary Research or Data Collection
The primary information was collected using the qualitative research design. Although there are some concerns related with qualitative research that it is not empirical and it is mostly exploratory in nature. Kumar (2012) argues that quantitative research brings in more objectivity to the whole research design as compared to the qualitative research but the nature of the study makes it convenient for the author to go for qualitative research design. Rao and Woodcock (2003) are also in the support of qualitative research process for this kind of a study as they argue that the research which is being carried by the community level volunteers or the front like workers, who are mostly unable to read and write, makes their work convenient. The information could be captured by them through graphical representations. This kind of a research should also focus on transformative participation techniques in which the goal is to facilitate a dialogue rather than extract an information that helps the most vulnerable community learn about themselves thereby gaining new insights leading to social change and empowerment. It also becomes a tool and process of identifying social dynamics and facilitate change (Mercer et al, 2008).

There might be drawbacks associated with the qualitative research design like poor validity or reliability but this is overcome by selecting a wide range of samples across three countries viz. India, Bangladesh and Nepal. Phillip (1997) argues that the term validity and reliability is not appropriate to be used in qualitative research.

Since the research is related with human behaviour, qualitative research can capture human behaviour at its most open and realistic moments (Phillip, 1997). Observational information gathering will be one of the tools to capture information from the community in the field. Rather than a standardized pre-set format, qualitative research gives the flexibility to capture new ideas and fresh perspective
during the course of the research. It can also be an empowering process giving voice to the community.

In order to enhance the confidence level of the research some of the methodology like triangulation were applied at various steps which information collection and analysis. Another method which could enhance the validity of the research is the duration or the prolonged engagement of the researcher and the community with the research (Phillip, 1997). The duration of the research being five months takes care of the same.

A range of consultative process and presentations were carried out during the entire cycle of the research to seek opinion from as many as stakeholders as possible. The current project under which the research is being carried out comprises of two teams which provides advice to the project on a constant basis. The first group “The Steering Committee” comprises of Regional Advisors from Handicap International, Oxfam GB and ActionAid International who are experts on disability issues, gender and social inclusion. The role of the steering committee, which meets once in two months, is to guide, handhold and challenge the project as it progresses. The author was engaged in the consultation process with the steering committee twice during the entire duration of the research. Apart from this, the project also comprises of “Regional Advisory Committee” who are external to the project and consists of some of the eminent persons on inclusion and inclusive approach. The researcher also had one formal interaction with the regional advisory committee during the course of the research. To summarize, the key primary stakeholders on whose participant observation the research is based are as follows:

- The community at large, who is the target beneficiary of the disaster risk management program funded by ECHO across three countries viz. India, Nepal and Bangladesh.
- The frontline workers of the INGOs or their partners NGOs who are involved in the implementation of the program across three countries.
- The middle management of the INGOs associated with ECHO funded DRR program (DIPECHO) across six countries in South Asia.
- The steering committee comprising of the advisors having the technical expertise on inclusion and belonging to Handicap International, Oxfam GB and ActionAid International
- The Regional Advisory Committee from across the world associated with civil society organizations, research institutions and government known for their expertise on disaster risk reduction, gender issues, disability issues and social inclusion.

**Sample Size:** The current on which the whole study is based is being implemented across six countries viz. India, Nepal, Sri Lanka, Pakistan, Afghanistan and Bangladesh in South Asia. There are around 15 INGOs across the six countries implementing the disaster risk management programs across South Asia. Looking at the time frame for the study which is around five months, it is proposed that three countries viz. India and Bangladesh is being considered for this study. There is no rational justification for selecting these countries except for that fact that these are
the countries where the program has already started and the researcher has access to these areas.

In Bangladesh, the study focuses on a consortium of eight INGOs called National Alliance for Risk Reduction and Response Initiatives, NARRI (www.narri-bd.org), while in Nepal it focuses on the work being done by VISTAR consortium, which comprises of CARE International in Nepal and Handicap International. In India the study was done through ADRA (Adventist Development and Relief Agency) which is implementing a Disaster Risk Management. It may be noted all across all the countries, the disaster risk management programs are being funded by European Commission for Humanitarian Organization and Civil Protection (ECHO) through their disaster risk management program called DIPECHO.

There are certain tools like vulnerability mapping, identifying barriers to access to resources, services & decision making and entitlements which are used for inclusive planning for development processes in general (ISDN, 2013). In order to make the field level exercises inclusive, the team will comprises members from the excluded community like women, dalits, persons with disabilities and elderly people.

**Process for Primary Date Collection**

The primary data will be collected through the front line workers or the volunteers of various ECHO funded DRR programs across South Asia. Later the data will be collected and collated by the researcher. The process followed for the data collection are:

1. Designing and sharing the study with the ECHO DRR partners
2. Assessing the capacity of the frontline workers of the partners to carry out the research in the field
3. Selection of the research area
4. Designing the capacity building program for the frontline workers
5. Capacity building of the frontline workers on inclusive approach to disaster risk reduction.
6. Designing the tools for the collection of information from the field
7. Collection of the primary information from the field
8. Collation and interpretation of the data by the researcher

**Designing the Capacity Building Program for the Frontline Workers**

The frontline workers or the community volunteers associated with disaster risk management program across South Asia is the key associate of the researcher in carrying out the collection of primary information in the field. Capacity building needs assessment was carried out for the frontline volunteers to ensure that they have good knowledge and skills to implement inclusive disaster risk management in the field. The capacity building of the community initially focuses on two days orientation program with the objective being “To orient In-country DIPECHO partners team on inclusive approach to DRM and on the proposed methodology to set up and facilitate a decentralized good practice collection mechanism”

The expected outcome of the orientation program were as follows:
The participants have a good understanding on the causes of exclusion and the excluded community.

The participants are able to identify the excluded community and come out with a strategy to mainstream the excluded community into their disaster risk management program.

The participants are able to facilitate inclusive approach to disaster risk management in their project areas.

The participants are able to understand and practically test their knowledge on criteria for good practices.

The INCRISD team develops a better understanding of the socio-cultural context of the in-country partner’s project areas.

The INCRISD team based on the two days orientation program is able to refine its preliminary framework.

The two days orientation program was divided into four modules focusing on the following:

1. Enhancing the understanding of the community volunteers on the topic of the research, methods associated with the research, importance of the research and their role in the whole research process.
2. Develop a deeper understanding on the exclude community & the reasons for their exclusion, inclusion and inclusive approaches to disaster risk management.
3. Collection of information required for the research from the field.

Tools for Primary Data Collection

To start any kind of interventions in the field including research, rapport building through interaction with the community is a sine-qua-non. This helps us in overcoming many obstacles that might come during the work (Mukherjee, 2002). Since this project is already on ground and the researcher is a part of this program, not much time is needed for building the rapport with the community.

Some of the methodologies/tools that will be applied for collecting primary information from the field are listed below. These are the general tools used for disaster risk reduction planning in general. In order to main the focus of the research on the excluded community and inclusive approach to disaster risk management, there are some tools like power analysis which has been added to the sets of tools used conventionally. Other tools are uplifted or enhanced so that it is able to look minutely into the process of exclusion and plan for inclusive disaster risk management.

Physical/Social Transect: This is also known popularly as participatory transect walk and involves walking across the village with a diverse set of community (Mukherjee, 2002). It helps us in understanding the physical as well as the socio-
cultural context of the community and is based on the premise “seeing is believing”. If carried out properly, the transect walk can also help the community realise the issue of marginalization and disparity existing in the community.

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<th>Objective of Tools</th>
<th>Suggested Guiding Questions</th>
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<td>Physical/Social Transect</td>
<td>Explore types of shocks that have affected the community in the past, identify patterns or trends</td>
<td>What are the physical resources which can be used by the community in the event of a disaster? What is the nature of the social and the environment? What are the most important livelihood resources? Which types of community have access to these resources? Who are the people or the community most impacted by the disaster?</td>
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</tbody>
</table>


**Hazard Mapping:** Hazard mapping is a process of identifying and displaying the spatial variations of hazard events or physical conditions (Noson, Undated). It helps us in assessing the probability of an event and intensity of an event occurring in an area.

Some of the key questions that will be explored through hazard mapping is given in the table below

<table>
<thead>
<tr>
<th>Tools</th>
<th>Objective of Tools</th>
<th>Suggested Guiding Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>List of Shocks</td>
<td>Explore types of shocks that have affected the community in the past, identify patterns or trends</td>
<td>What major events have affected the community in the past? Are there any trends or patterns between events? How does the community cope with difficult events? What events do you expect to happen in the future? How do you plan for these events? What changes have happened to make your life harder? What is different today compared to 20 years ago? Do certain shocks have a...</td>
</tr>
<tr>
<td>Trend Analysis</td>
<td>Assess level of preparedness for future hazards</td>
<td></td>
</tr>
<tr>
<td>Disaster Timeline</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Important Change</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
greater impact of certain social groups? Which groups and why? How do different groups cope up with threats?


**Participatory Social Mapping**: It is a tool which can help the community visualize and highlight different aspects such as settlement pattern, social stratification etc. (Mukherjee, 2002). It involves spatial drawing of any area to show and explain their locality and other related aspects. This is done by the community themselves with or without the help of an external facilitator. The proposed key questions for social mapping are as follows:

<table>
<thead>
<tr>
<th>Tools</th>
<th>Objective of Tools</th>
<th>Suggested Guiding Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Mapping</td>
<td>Helps to understand the dynamics existing in the community</td>
<td>What (religious, ethnic and social) groups are found in the community?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>What resources are abundant? What resources are scarce? Does everyone have equal access to resources?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Are there any systems or processes which exclude certain sections of the community? Who benefits from these structures?</td>
</tr>
</tbody>
</table>


**Resource Mapping**: Resource mapping is an exercise where the methodology is similar but focuses on the physical resources available with the community. It covers aspects of the community like livelihoods, physical infrastructure be used differently in the event of a disaster, land availability etc. This helps the community to plan for mitigation activities as well as preparedness for response.

Table 5: Resource Mapping: Tools and Guidelines
Power Analysis: Given the importance of societal institutions and power relations within those to determine inclusion or exclusion, a power analysis allow a greater understanding of inclusion / exclusion mechanisms.

Table 6: Power Analysis: Tools and Guidelines

<table>
<thead>
<tr>
<th>Tools</th>
<th>Objective of Tools</th>
<th>Suggested Guiding Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Power Analysis</td>
<td>To develop an in-depth understanding on the power relations (inter-community and intra-community)</td>
<td>What are the most influential, groups/institutions within the community? How do these groups relate to one another? Are there tensions between different groups? What causes the tension? Which groups stand to gain in the event of a disaster? Are there any groups which are excluded from services or entitlements?</td>
</tr>
</tbody>
</table>


*Note: Please note that the questionnaire with purple fonts in the tools focuses on the issues related with the exclude community and the process of exclusion in a disaster risk reduction discourse.

The above five tools are the essential tools for disaster risk management planning. The combination of these four tools is being used in the field to understand and identify the most vulnerable community.

**Timeline of the Research:** The total duration of the study is five months starting August 2013. The first two months was spent on defining the scope of the study and doing the secondary literature review. The next one month was focused on designing the tool while the last two months was related with carrying out the research in the field and report writing.
Selection of the Research Area

The program areas for the research is focusing on the disaster risk management projects being implemented by various NGOs across six countries in South Asia. The countries where the program is being implemented are India, Nepal, Bangladesh, Afghanistan, Pakistan and Sri Lanka. There are altogether fifteen projects being implemented by the NGOs. The area for research was selected based on the SWOT (Strengths, Weaknesses, Opportunities and Threats) analysis of various program. SWOT analysis is a strategic tool which helps in the decision making process as to how a certain interventions can be implemented (ODI, 2009).

The basic framework for the SWOT analysis are as follows:

<table>
<thead>
<tr>
<th>Table 8: SWOT Analysis Framework</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>Skills and abilities</td>
</tr>
<tr>
<td>Funding lines</td>
</tr>
<tr>
<td>Commitment to positions</td>
</tr>
<tr>
<td>Contacts and partners</td>
</tr>
<tr>
<td>Existing Activities</td>
</tr>
<tr>
<td><strong>Opportunities</strong></td>
</tr>
<tr>
<td>Other organizations relevant to the issue</td>
</tr>
<tr>
<td>Resources: financial, technical, human</td>
</tr>
</tbody>
</table>
### Political and policy space

**Other groups or forces**

Source: ODI, 2009

The detailed of the SWOT analysis conducted for project across six countries is given below:

**Afghanistan**

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level of interest is very high among the field level functionaries (CWW, AAA and AA).</td>
<td>Level of interest among the leadership is weak in AAA as well as CWW</td>
</tr>
<tr>
<td>High Level of interest among AfghanAid leadership</td>
<td>There is no stable leadership with all the three focal agencies.</td>
</tr>
<tr>
<td>Good understanding on inclusion and inclusive approach to disaster risk management (CWW, AAA)</td>
<td>Lack of diversity in the team (gender) due to the socio-cultural context.</td>
</tr>
<tr>
<td>AAA has a good experience of working in the DRR sector in Afghanistan</td>
<td>Even talking about gender even could be a big challenge in the country due to the socio cultural scenario prevailing in the country at the moment.</td>
</tr>
<tr>
<td>Afghan Aid has a high level of acceptance and presence among the community</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>ActionAid focuses on Early Warning Systems specifically and is thus have an in-depth understanding on the issue. The inclusive approach to EWS could be captured.</td>
<td>Language could be one of the barriers. (The popular local languages are Dari and Pushto). There are no members within the INCRISD team who are familiar with this language.</td>
</tr>
<tr>
<td>Lack of in-country capacity which gives us the opportunity to build the capacity of the team.</td>
<td>Not much understanding of the INCRISD team on the socio-cultural context of the country.</td>
</tr>
<tr>
<td>High acceptability of the INCRISD team.</td>
<td>The INCRISD team members are working in Afghanistan for the first time leads to limited understanding of the team on the issue and the context.</td>
</tr>
<tr>
<td>DRR as a concept is new and evolving in the country. Possibilities to influence policies and practice.</td>
<td>Limited possibilities of direct interface with the community due to inaccessible</td>
</tr>
</tbody>
</table>

**Table 9: SWOT Analysis, Afghanistan**

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level of interest is very high among the field level functionaries (CWW, AAA and AA).</td>
<td>Level of interest among the leadership is weak in AAA as well as CWW</td>
<td>ActionAid focuses on Early Warning Systems specifically and is thus have an in-depth understanding on the issue. The inclusive approach to EWS could be captured.</td>
<td>Language could be one of the barriers. (The popular local languages are Dari and Pushto). There are no members within the INCRISD team who are familiar with this language.</td>
</tr>
<tr>
<td>High Level of interest among AfghanAid leadership</td>
<td>There is no stable leadership with all the three focal agencies.</td>
<td></td>
<td>Not much understanding of the INCRISD team on the socio-cultural context of the country.</td>
</tr>
<tr>
<td>Good understanding on inclusion and inclusive approach to disaster risk management (CWW, AAA)</td>
<td>Lack of diversity in the team (gender) due to the socio-cultural context.</td>
<td></td>
<td>The INCRISD team members are working in Afghanistan for the first time leads to limited understanding of the team on the issue and the context.</td>
</tr>
<tr>
<td>AAA has a good experience of working in the DRR sector in Afghanistan</td>
<td>Even talking about gender even could be a big challenge in the country due to the socio cultural scenario prevailing in the country at the moment.</td>
<td></td>
<td>Limited possibilities of direct interface with the community due to inaccessible</td>
</tr>
<tr>
<td>Afghan Aid has a high level of acceptance and presence among the community</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Proposed Interface:

1. INCRISD project continues supporting the in-country actions in Afghanistan but on a reduced scale
2. Much work has progressed with the partners in Afghanistan. Inputs have been provided on the tools and guidelines. The in country consultation and the national sharing workshop has also been concluded.
3. The team will not go to the field directly which involves interaction with the community. The team will have a separate strategy to monitor the work being carried out in the field. The strategy could be working through the local partners or individual who has easy access to the field.
4. There is scope for one monitoring visit which could be either restricted to Kabul or field office.
5. There is ample scope to piloting and good practice collection online
6. The Afghanistan team (one from the project and one from government or civil society) would be invited for final validation of the project

**Bangladesh**

<table>
<thead>
<tr>
<th>Table 10: SWOT Analysis Bangladesh</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>High brand equity of one of the consortium working on disaster risk reduction (NARRI).</td>
</tr>
<tr>
<td>Well-developed systems and processes (NARRI)</td>
</tr>
<tr>
<td>Vast experience of working on DRR (NARRI consortium) and also as individual organisations which are associated with NARRI.</td>
</tr>
<tr>
<td>Experience of working on Inclusion (NARRI member organizations).</td>
</tr>
<tr>
<td>Diversified team (NARRI and DeSHARI). The members of both the</td>
</tr>
</tbody>
</table>
consortium have different expertise on different disaster risk reduction related issues.

NARRI is giving due importance to inclusive. This is reflected by the fact that they have an In-house inclusion officer.

High level of willingness (DeSHARI) to work collectively with the INCRI SD project.

Moderate level of understanding on inclusion (DeSHARI) as this is the first time that DeSHARI as a consortium is implementing a disaster risk reduction project.

Christian Aid, Dan Church Aid and Save the Children (DeSHARI partners) has a good understanding on DRR
Save the Children has a good understanding on inclusion (DeSHARI).

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>Matured DRR programs, recipe for collecting good practices.</td>
<td>Political unrest</td>
</tr>
<tr>
<td>High level of accessibility of INCRI SD team to operational area. (NARRI &amp; DeSHARI)</td>
<td>Inability to conduct the orientation on inclusion and good practices with DeSHARI in spite of several efforts.</td>
</tr>
<tr>
<td>Good Government and NGO coordination (NARRI + DeSHARI)</td>
<td>Time constraint (limited duration of the project.)</td>
</tr>
<tr>
<td>Strong interface between CDMP and consortiums (NARRI + DeSHARI)</td>
<td></td>
</tr>
</tbody>
</table>

Proposed interface

1. INCRI SD project continues supporting the in-country actions in Bangladesh.
2. Work exclusively with NARRI. DeSHARI is dropped for the list due to communication problem as a direct fallout of absence of leadership.
3. Inputs have been provided on the models (NARRI and DeSHARI) and on guiding notes on inclusion (NARRI).
4. In Country consultation and National Sharing workshop has already happened.
5. Enhanced support to NARRI through field visits for monitoring and setting systems and processes for good practices collection.
6. To support the piloting and good practice collection through online and personal interface on a regular basis (NARRI).
7. The Bangladesh team (two from the project and two from government or civil society) would be invited for CSO consultation and validation workshop.
8. INCRISD team members based in Bangladesh will be the point person for this program.

India

Table 11: SWOT Analysis India

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relatively small project</td>
<td>Institutional capacity on DRR limited (ADRA and ACTED)</td>
</tr>
<tr>
<td>Committed and young staff and thus easier to implement.</td>
<td>ACTED and ADRA have limited interface with national and state government actors</td>
</tr>
<tr>
<td>High willingness and motivation level of the team including the senior management.</td>
<td>Physical access to the operational area is a big challenge due to remoteness of the area and political environment (ACTED).</td>
</tr>
<tr>
<td>Direct access to field functionaries (small team)- short communication channel and less transmission loss</td>
<td></td>
</tr>
<tr>
<td>Good interface with local government structure</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accessibility and acceptability of INCRISD team to operational area (ADRA)</td>
<td>ACTED – Fragile politically and isolated operational area.</td>
</tr>
<tr>
<td>Working in highly vulnerable location.</td>
<td>Starting late with ACTED (based on request from ACTED) and not a part of initial project design.</td>
</tr>
<tr>
<td>Individual organizations rather consortiums are implementing the project which makes communication and coordination easier.</td>
<td></td>
</tr>
<tr>
<td>ADRA is a part of the original project design approved by the donor.</td>
<td></td>
</tr>
</tbody>
</table>

Proposed Interface:
1. INCRISD project continues supporting the in-country actions in India.
2. The inputs to ADRA will be full scale but the inputs to ACTED will be on a very limited scale.
3. Inputs have been provided on the DP harmonisation process and tools.
4. Enhanced support to ADRA through field visits (two sets). And limited support to ACTED based on need and shared resources.
5. To support the piloting and good practice collection through online and personal interface on a regular basis (ADRA). Support for collection of good practices to ACTED will only be provided online.
6. The India team (1 from the project and 2 from government or CSO) would be invited for CSO consultation and validation workshop.
7. The INCRISD team member based in West Bengal in India main technical input provider for ADRA and other team member based in Orissa to provide online support to ACTED.

Nepal

<table>
<thead>
<tr>
<th>Table 12: SWOT Analysis Nepal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>Past experience of implementing DIPECHO programmes (CARE, Mission East, Handicap International, OXFAM, Practical Action, Mercy Corps). These are the current ECHO DRR partners as well.</td>
</tr>
<tr>
<td>The willingness and commitment level of VISTAR and Mission East to work on inclusion is high.</td>
</tr>
<tr>
<td><strong>Weaknesses</strong></td>
</tr>
<tr>
<td>Delay in Model validation (SAFER &amp; VISTAR). ECHO wanted the project model to be validated by the government before the implementation starts in the field.</td>
</tr>
<tr>
<td>Delay in project implementation (SAFER).</td>
</tr>
<tr>
<td>Lack of consensus on modus operandi between SAFER and INCRISD.</td>
</tr>
<tr>
<td><strong>Opportunities</strong></td>
</tr>
<tr>
<td>Good Governance and NGO coordination</td>
</tr>
<tr>
<td>Mission East – only High altitude DRR programme in South Asia.</td>
</tr>
<tr>
<td>Inclusion is a main mandate of both Mission East and VISTAR</td>
</tr>
<tr>
<td><strong>Threats</strong></td>
</tr>
<tr>
<td>Political instability Remoteness of areas / accessibility (Mission East)</td>
</tr>
</tbody>
</table>

Proposed Interface:

1. INCRISD project continues supporting the in-country actions in Nepal.
2. Inputs have been provided on the Mission East Document on a study on inclusion.
3. 2 days orientation on inclusion for SAFER and Mission East each.
4. Enhanced support to (VISTAR & SAFER) through field visits (two sets). And limited support to ME (online) based on need and shared resources.
5. We will support the piloting and good practice collection through online and personal interface on a regular basis (SAFER + VISTAR).
6. The Nepal team (2 from the project and 2 from government and CSO) would be invited for CSO consultation and validation workshop.
7. One of the INCRISD team members to be in-charge of coordination with Nepal country programs.

**Pakistan**

<table>
<thead>
<tr>
<th>Table 13: SWOT Analysis Pakistan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>Small consortiums and easy to manage.</td>
</tr>
<tr>
<td>HelpAge International is one of the partners of the consortium working with the elderly people and have a strong understanding on inclusion.</td>
</tr>
<tr>
<td>Fair clarity, in terms of INCRISD and Consortium engagement.</td>
</tr>
<tr>
<td>High level of acceptability of the INCRISD project.</td>
</tr>
<tr>
<td><strong>Weaknesses</strong></td>
</tr>
<tr>
<td>Organisational presence: None of the INCRISD partners (Handicap International, ActionAid International and Oxfam GB are directly associated with this project.</td>
</tr>
<tr>
<td><strong>Opportunities</strong></td>
</tr>
<tr>
<td>ActionAid Pakistan’s commitment to manage as well as support field level actions.</td>
</tr>
<tr>
<td>Support from HI Pakistan based on an understanding between the HI regional ream and HI Pakistan team.</td>
</tr>
<tr>
<td>Pakistan – scope for learning is huge due to past experiences. There has been some large scale disasters in the recent times which is an opportunity for the community to realise the impact of a disaster and at the same time to INCRISD to capture the lessons from the field.</td>
</tr>
<tr>
<td><strong>Threats</strong></td>
</tr>
<tr>
<td>Political Instability.</td>
</tr>
<tr>
<td>Poor access / presence of INCRISD team to field. (KPK)</td>
</tr>
<tr>
<td>Three out of four INCRISD team members are based in India and due to diplomatic relations between the two countries, accessibility to the operational area is a huge challenge.</td>
</tr>
</tbody>
</table>
Proposed Interface:

1. INCRISD project continues supporting the in-country actions in Pakistan.
2. Inputs have been provided to documents on inclusion.
3. Enhanced support to (CADR) through field visits (two sets) through AAP + HI and external consultant.
4. INCRISD to support the piloting and good practice collection through online and personal interface on a regular basis (CADR).
5. The CADR team (1 from the project and 1 from government or CSO) would be invited for CSO consultation and validation workshop.

Sri Lanka

<table>
<thead>
<tr>
<th>Table 14: SWOT Analysis Sri Lanka</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>Very good understanding at senior management and field level on inclusion and inclusive approach to disaster risk management</td>
</tr>
<tr>
<td>Strong willingness to promote inclusion with the operational plan.</td>
</tr>
<tr>
<td>Well defined and shared roles and responsibilities among consortium members</td>
</tr>
<tr>
<td>Working with a diverse set of communities</td>
</tr>
<tr>
<td>Good practices collection already a part of the program</td>
</tr>
<tr>
<td>The model explicitly talks about inclusion</td>
</tr>
<tr>
<td><strong>Weaknesses</strong></td>
</tr>
<tr>
<td>In country projects are comparatively new on DRR</td>
</tr>
<tr>
<td>Lack of evidence based experience on DRR</td>
</tr>
<tr>
<td><strong>Opportunities</strong></td>
</tr>
<tr>
<td>Support from the government. The Secretary, Disaster Management for the Government of Sri Lanka is also a key person on behalf of the government for the ECHO funded DRR projects.</td>
</tr>
<tr>
<td>Possibility of influencing national level policy instruments as the country is very young on DRR</td>
</tr>
<tr>
<td>Good linkage with community actions</td>
</tr>
<tr>
<td><strong>Threats</strong></td>
</tr>
<tr>
<td>Intervention in the Northern and Eastern part of the country which is politically fragile</td>
</tr>
<tr>
<td>Limited access of the INCRISD team to the field</td>
</tr>
</tbody>
</table>
and advocacy at national level. Managed to engage government – as they are the task force identified by government on inclusion.

Proposed Interface:

1. INCRISD project continues supporting the in-country actions in Sri Lanka.
2. Inputs have been provided to documents on inclusion.
3. Enhanced support to DRR through field visits.
4. We will support the piloting and good practice collection through online and personal interface on a regular basis.
5. The DRR team (1 from the project and 1 from government or CSO) would be invited for CSO consultation and validation workshop.

Based on the SWOT analysis conducted by the INCRISD team, there are three types of intervention proposed by the team. The interventions are 1. Enhanced support 2. Limited Support and 3. Withdrawal. The meaning of the three terminology in relation to the project is given below:

Enhanced Support

- Give inputs on various documents (tools, processes and guidelines) from an inclusion perspective.
- Build the capacities of the country ECHO DRR partners through a two days orientation program on inclusion, inclusive approach to DRR and criterion for identifying good practices.
- Provide on field support to the projects through regular visits to the field (at least two) to monitor the work in the field from the inclusion perspective.
- Enhanced effort for collection of good practices from the field.
- Involve the project team in on field capacity building initiatives.
- Involve the team in online capacity building initiatives.
- Support provided through resources from the INCRISD project

Limited Support

- Give inputs on various documents (tools, processes and guidelines) from an inclusion perspective.
- Build the capacities of the country ECHO DRR partners through a two days orientation program on inclusion, inclusive approach to DRR and criterion for identifying good practices.
- Provide on line support to the projects to monitor the work in the field from the inclusion perspective.
- Limited effort for collection of good practices from the field.
- Involve the team in online capacity building initiatives.
- On field support provided if the INCRISD team has the time and the country project has the resources for the same.
Withdrawal

- No support provided to the in-country projects
- Special considerations could be made based on the time and the resources available to the INCRISD project.

The table below gives the level of support to be provided to different in-country projects by INCRISD.

<table>
<thead>
<tr>
<th>S No</th>
<th>Country</th>
<th>In Country Projects</th>
<th>Level of Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Afghanistan</td>
<td>Concern Worldwide</td>
<td>Limited</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ActionAid International</td>
<td>Limited</td>
</tr>
<tr>
<td></td>
<td></td>
<td>AfghanAid</td>
<td>Limited</td>
</tr>
<tr>
<td>2</td>
<td>India</td>
<td>ADRA</td>
<td>Enhanced</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACTED</td>
<td>Limited</td>
</tr>
<tr>
<td>3</td>
<td>Pakistan</td>
<td>CADR Consortium</td>
<td>Limited</td>
</tr>
<tr>
<td>4</td>
<td>Bangladesh</td>
<td>NARRI Consortium</td>
<td>Enhanced</td>
</tr>
<tr>
<td></td>
<td></td>
<td>DeSHARI Consortium</td>
<td>Withdraw</td>
</tr>
<tr>
<td>5</td>
<td>Sri Lanka</td>
<td>DRR Consortium</td>
<td>Enhanced</td>
</tr>
<tr>
<td>6</td>
<td>Nepal</td>
<td>VISTAR Consortium</td>
<td>Enhanced</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SAFER Consortium</td>
<td>Enhanced</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mission East</td>
<td>Limited</td>
</tr>
</tbody>
</table>

It can be concluded that Sri Lanka, Bangladesh, India and Nepal are the focus areas of the project. For research purpose, based on the time and the resources available with the researcher, Bangladesh and India is taken up for the study. The researcher is also citing examples from various other countries among the six countries which is a part of the original project design.

Role of the Researcher and other Team Members

The researcher has navigated the entire research with the help of team members belonging to different disaster risk reduction projects across South Asia. The role of the researcher is to design the research proposal, select the target areas for the research based on interaction with in-country disaster risk reduction project teams, and build the capacity of the team to pilot inclusive disaster risk reduction in the field and collection of good practices from the field.

The researcher during the entire course of the research visited Bangladesh and India field areas thrice each. The first visit was focused having a broad understanding about the disaster risk reduction programs in the two locations in order to fine tune the research study. The second visit was focused on building the capacity of the team through a two days orientation program on inclusive approached to disaster...
risk reduction and defining the criteria for identifying good practices from the field. The same visit had a component of field visit where in the community level volunteers were guided in the field to ensure that they have a hands on understanding on implementing inclusive disaster risk reduction. In between the first and the second field visit, the role of the researcher was to look at various tools, strategy document and guidelines from the inclusion perspective. The third leg of visit to the field focused on monitoring the work in field from inclusion perspective. There was a gap of around two months between the second and the third field visit so that the community level volunteers gets ample time to implement inclusive disaster risk reduction. In between the visit two and visit three to the field, the researcher was engaged in designing the formats and systems for collecting good practices in the field.

The role of the other team members, mostly the front line volunteers associated with the local NGOs in the field was to first go through the capacity building process, experiment through implementation, inclusive approach to disaster risk reduction, give the feedback on the evolving research design and based on the criteria mutually identified, collect the good practices from the field and validate it at the community level.
Field Based Research: India and Bangladesh

The field based research in India was divided into three main components to make it comprehensive.

1. Capacity building of the field team on inclusive disaster risk management
2. Developing the criteria and indicators for collecting good practices on inclusive approaches to disaster risk management
3. Handholding support to the field team in ensuring that the systems, processes, tools and guidelines are implied in the manner as per the project design.

The first intervention with the field team is related with the capacity building of the team. The team members who are implementing the program in the field and are directly interacting with the community is the target of the capacity building exercise. The details of the capacity building workshop is given below:

Course Objective:

To orient field teams of targeted In-country DIPECHO partners, working in pilot areas who will be facilitating local inclusive committees in identifying practices and focal points on the proposed methodology to set up and facilitate a decentralized good practice collection mechanism.

Expected Outcomes:

- The participants have a good understanding on the causes of exclusion and the excluded community.
- The participants are able to identify the excluded community and come out with a strategy to mainstream the excluded community into their disaster risk management program.
- The participants are able to facilitate inclusive approach to disaster risk management in their project areas.
- The participants are able to understand and practically test their knowledge on criteria for good practices.
- The INCRISD team develops a better understanding of the socio-cultural context of the in-country partner’s project areas.
- The INCRISD team based on the two days orientation program is able to refine its preliminary framework.

Participants:

Altogether nineteen team members comprising of community level volunteers, field officers and senior management participated in the workshop.

Session Details: MODULE 1

Introduction and Pre-test:
The workshop started with an introduction about the workshop and the possible areas of interface between INCRISD and ADRA. This was followed by a round of introduction. A pre-test in the form of group exercise was conducted to capture participant’s understanding on Good practices. A set of 4 questions were given on flipcharts pasted on the wall. Participants were divided into 3 groups and encouraged to discuss and put their answers directly on the chart paper. Given below are the Pre – test questions:

INCRISD Project:
A brief overview of the INCRISD project was shared with the project

Context Setting:
With the objective of making a recap on agreed action points on Pilot areas and level of multi stakeholder, Information was captured on the composition of the agreed Village. As the lowest administrative unit that ADRA works with is at the booth level – it was decide that the level of the multi-stakeholder committee will be the Gram Unnayan Samiti (GUS) – which is the booth level body responsible for development of the booth.

The teams explained that is most places the GUS is yet to be formed and that it was expected to be in place in the coming month. Delay in the formation of the GUS is due to delays in government processes. Participants were divide into 5 groups, village wise. The FIOs led the discussion supported by specialist team, DRR coordinators, from ADRA. Each group (Village and booth wise) plotted a matrix demonstrating the planned activity versus timeline.

MODULE 2: Good Practice collection mechanism:

Introduction to Good practice Collection:

a. Terminologies:
The objective of this session was to have a common agreement on terminologies such as: Practice, Good practice, case study and success stories.

b. Criteria for Good practices:

Participants were asked to review the criteria agreed upon during the workshop held in Kolkata during a workshop with them on 7th and 8th of August 2013.

The following Criteria for Good practices were discussed at length with the team and each participant was encouraged to explain and give actual examples which fulfilled the criteria.

- Creating positive Impacts,
- People are the main actors of the practice.
- Can be sustained,
- Is Replicable,
- Is locally adaptable and relevant/meaningful.
- Positive impacts as stated / felt by people.
- Significant change in quality of life.

- Impact is not only achieved for socially excluded groups but, ideally, on others (of the environment)
- It should not reflect on improved enjoyment of rights of few but promote equality of the community.
- People are main actors of the practice and/or the practice has been initiated by them
- Leadership (“change agents”) and high level of ownership.

Examples shared ranged from WASH, DRR to livelihoods and included both hardware and software components. Examples were as follows: making Kitchen gardens, reinforcing hand washing for Hygiene, storing a fistful of rice, incorporating simple techniques such as J hook and U hook to hold roofs in the event of strong winds, forming water user groups, making raised tube well platform –, promoting Vermi-compost, raising height of shelter, Doing a community led HVCA which is replicated in other villages.

From the list of Criteria mentioned above, all participants we of the mutual opinion that the following 6 would be Non- Negotiable while defining practices as “Good”.

**Non-Negotiable Criteria**

The participants were explained that “non-negotiable” criteria are those criteria which has to be essentially present in the good practice in order for it to be qualified as a
good practice. The participants discussed the criteria selected earlier and came out with a list given below:

1. **Positive impact**
2. **Replicable**
3. **Cost Effective**
4. **People are the main actors**
5. **Sustainable**
6. **Evidence based.**

Participants were divided into 6 groups and each group asked to present a real time example in DRR which would illustrate the criteria.

Each group then presented their practice and further reviewed the practice looking at whether it would fit the other 5 non-negotiable criteria as well. Given below are the examples used.

1. **Sustainability** e.g.: (making organic compost) e.g.: name: HH No. 208, Booth no. 230, Jharkhati, Basanti.
2. **Evidence Based** – Raised tube well platform in Assam char area – leading to availability of safer drinking water. Evidence – from – reduced number of illness reported by A&M. (Barpeta, Dhakin Kudani, Village: major Char.
3. **People are the Main Actors of the practice:** (H.H: 443, Booth – 82, Booth Name: Nazat 5 No. Giri Para, GP: Nazat II, Block – Sandeshkhal – I) - Alternate livelihoods option – such as kitchen garden – farming on barren land.
4. **Replicable:** Storing seeds – replicated by neighbours, the SHGs and Farmers club.
5. **Positive impact**- (making a trench around the house and using the mud to raise the plinth level. so when water comes it stays in the trench and doesn't submerge the house. Plus, fish swim in the trench and can be consumed by the family.
6. **Cost Effective:** covering the thatch by a net and the plinth by a simple plastic.

While criteria on positive impact, people being the main actors of the practice and replicability was easier to agree upon, others such as cost effectiveness and sustainability involved the following discussion. On sustainability – participants said that if the above 5 criteria were met it would automatically result in sustainability, however, it was then agreed that they would like to explicitly mention sustainability. Cost effectiveness was another area, where participants debated – low cost versus affordability. However, no clear agreement was reached.

**Pre-identification of Practices by the Inclusive DRM committees:**

To familiarize participants with the tools mentioned in the participants handout and review applicability of these tools in real time situations, participatory methods mentioned in Box 1, 2, and 3 in the handout were tested.
From the discussion on cyclone Aila the following actions emerged:

1. Keeping Dry food
2. Going to higher place for shelter
3. Holding hands when crossing roads under water – post flood.
4. Air Dropping
5. Many took shelter at a school.
6. Did not receive early warning
7. Distributed DDT, taught preparation of ORS, generated awareness on healthy eating. (not dead fish)
8. Collected and distributed clothes.
10. Strengthening of embankments.
11. Preparing life jackets and storing

Participants were divided into three groups and encouraged to discuss the actions and categorize them as good (1) in-between (2) or bad (3).

When recommendations of the 3 groups were collated the following was found: five actions, highlighted in yellow were universally accepted as good and 1 as universally bad (highlighted in red). (As the objective was to introduce the tools and test the use of these tools – in depth discussion on why they had voted in the manner was not done.

Given below is the way the groups voted.

1. Dry food
2. Going to higher place for shelter
3. Holding hands when crossing roads under water – post flood.
4. Air Dropping
5. Many took shelter at a school.
6. Did not receive early warning
7. Distributed DDT, taught preparation of ORS, generated awareness on healthy eating. (not dead fish)
8. Collected and distributed clothes.
10. Strengthening of embankments.
11. Preparing life jackets and storing.

On ranking, it was found that storing Dry food was a priority among all. And this practice was then reviewed against the six criteria’s agreed upon.

**Session Details: MODULE 3 Unpacking Inclusion**

With the objective of introducing and demystify inclusion, the method given below was used. The focus of the discussion was to first identify:

1. who are vulnerable
2. Who are the “most” vulnerable
3. Why are they vulnerable
4. What can we do in the project to ensure / facilitate inclusion?

The project title INCRISD was used by Shakeb Nabi, Regional Project Coordinator – INCRISD South Asia to introduce the discussion on inclusion.

Participants were asked if they understood enough - each word in the title. “Sustainable” was the first terminology which participants felt they understood, followed by “DRM” then “Community” and when it came to inclusion participants were asked to write any 5 words which came to their mind, that they associated with inclusion.

The following is a compilation of the words associated with inclusion shared by participants:

1. Equality
2. “plus”
3. Children
4. Persons with disability
5. Tribal
6. Pregnant and lactating women
7. Old age
8. Single women
9. Participation
10. Unity
11. Equality
12. Backward
13. Raise voice of women
14. Mainstream
15. Equality
16. Village Leaders
17. Women
18. SC/OBC – (Backward)
19. Good practice
20. Youth
21. Promote all
22. Non-biased
23. Never exclude
24. Embodiment
25. Non-discrimination
26. Universal
27. Consent of all

Once this list was prepared, participants were asked to identify the “WHO” in the list highlighted in yellow. On further probing, on whether any persons have been left out? Participants shared that - sex workers, LGBT community, transgender and
minor religious groups were some left out in the list. It was acknowledged by participants that most times this population is hidden, hence usually “invisible”.

Having prepared this list, the group tried to discuss from among “vulnerable” who could be more vulnerable. Taking the help of the list participants came up with the following which addressed degrees of vulnerability. It was also discussed that not just “who” but other aspects such as physical environment contributes to the degree of vulnerability.

Examples on Degrees of Vulnerability and multiple layers of Exclusion:
- SC + People with Disabilities + Women
- Dalit + Poor + Woman
- Leprosy + Past History.
- Poor + Muslim + social status
- (superstitious – “Dayan” (witch) + Old
- Poor women + pregnant
- Illiterate + social status
- Orphan

The following list sums up the cause of discrimination as discussed in the workshop:
- Caste
- Class
- Disability
- Gender
- Religion
- Age
- Historical reasons (criminal/prostitute)
- Superstition
- Language
- Exclusion based on political affiliation
- Literacy

Having discussed who are excluded and why, participants worked on the questions:

- Why should we include?
- How should we include?

WHY:
- For the development of the entire village
- Simply because – we need to work with them as they are the most vulnerable.

HOW:
Participants decided that they would identify key activities within their project and start working on how they would include those who are usually excluded. Activities planned in the coming months are

- Model Family Preparedness Program
- Task Force Training
- Team Formation

Hence the team was keen to first confirm whether they had identified such persons and work on increasing awareness in community on inclusion and towards empowerment of vulnerable groups and subsequently on how these groups could be linked to the activities mentioned above.

Conclusion:

The workshop was followed by a two months plan in the field where in the field based practitioners decided that they will be carrying out the inclusive piloting on 20% of their geographical areas. The INCRISD team will be providing handholding support in the field based on the need and the request from the field team. The handholding support will be mostly focusing on experimenting with the tools and guidelines for piloting inclusion, identification of the most vulnerable & the marginalized community, ensuring their mainstreaming, identification of the good practices related with inclusion from the field and preliminary documentation of the same based on the guidelines shared with the project team at a later stage.
Field Based Research in Bangladesh

The field based research in India was divide into three main components to make it comprehensive.

1. Capacity building of the field team on inclusive disaster risk management
2. Developing the criteria and indicators for collecting good practices on inclusive approaches to disaster risk management
3. Handholding support to the field team in ensuring that the systems, processes, tools and guidelines are implied in the manner as per the project design.

The first intervention with the field team is related with the capacity building of the team. The team members who are implementing the program in the field and are directly interacting with the community is the target of the capacity building exercise. The details of the capacity building workshop is given below:

**Purpose of the in-country workshop**

**Objective:**

To orient field teams of targeted In-country DIPECHO partners, working in pilot areas on inclusive DRM and on the decentralized good practice collection mechanism.

**Expected Outcomes:**

- Field teams have a common and agreed upon understanding on inclusion in the context of their project in Bangladesh.
- Field teams of targeted In-country DIPECHO partners working in pilot areas have acquired the knowledge & skills and are motivated to facilitate inclusion in their planned activities.
- Field teams of targeted In-country DIPECHO partners define and agree on the criteria for good practices.

**Participants**

There were around 35 participants comprising of DIPECHO project team members from NARRI and DeSHARI Consortium and Handicap International Bangladesh. Consortium coordinators, managers and staff from the partner organisations participated.

**Session Details:**

**Session1:**

In the backdrop of a fragile political environment, a workshop on inclusion and capturing good practices was organised in Dhaka with participants from the field from both consortiums – NARRI and DeSHARI. Despite blockades and strikes announced by political parties, programme staff and field staff from the organisations were present. The senior management team of the NARRI consortium welcomed
and introduced INCRISD team to the participants seconded by the Consortium Manager – NARRI and the Interim Project Manager and Consortium Coordinator, DIPECHO VII, DeSHARI Consortium, Save the Children.

With the objective of simplifying and developing a common understanding among all participants on the meaning of inclusion, the lead researcher directly tasked each participant to introduce themselves and give one word which they associated with “INCLUSION”. The whole exercise was to fathom the team’s understanding of dialogue among the team members. Box 1, below, lists the words that came up during this discussion:

**Understanding Inclusion:**

Table 18: Summary of Understanding on Inclusion by the Participants

| 1. Integration | 1. Dignity |
| 2. Exclusion | 2. Holistic |
| 3. Persons in “position” – take decision. | 3. Realisation |
| 4. Equal | 4. Acceptance |
| 5. Participation | 5. Twin track |
| 7. Equity | 7. Mainstream |
| 8. Incorporate | 8. Understanding |
| 10. Together | 10. Cohesion |
| 12. “Net” (connecting) | 12. Supporting |
| | 15. Respect |

For the purpose of taking the message on inclusion to the field, a few Bangla words were discussed however the first one “Sabhai ek saathe” was the preferred terminology, as stated by participants.

1. “Sabhai ek sathe”, “Sabai ke niye”…
2. “Ansogrhan”?
3. “Amara Ek Sathe”? 

Figure 2: Orientation of the Community Workers on Inclusive Approach to Disaster Risk Management in Bangladesh
Probing into the exclusion-inclusion dynamics, the facilitator, revisited each word listed above and asked participants to reflect on their interpretation of the term and to look at who is being excluded? Why are they excluded and how not to try and do any harm while implementing. Documented in the Box 2 are discussions on the words.

**Access** – what do we mean? – Access to what? – To society? To services? Or both?

If we are working on **gender** – do we speak only with women, or work with the entire **community**. It was agreed that we work with the entire community though we may need to have additional or a special way to engage with certain sections that may be excluded.

What do we mean by - **Holistic**? We mean comprehensive – touching all aspects from education, livelihood, health, including DRR. 

**Realisation**: “Bujhai” – more of an internalisation of the awareness.

**Acceptance** – if something or someone is different (on basis of behaviour, culture, sex, disability) to take them in or to include with dignity is acceptance. For us (DIPECHO teams) acceptance also means acknowledging what we can do realistically.

**Enable** – Empowered, moving from charity – where one gives money to providing capacity building to be able to earn money instead.

### Understanding Resilience:

Using the same methodology the term resilience was discussed. The box below lists out the adjectives and in some places Bangla terminologies discussed.

Table 19: Understanding of the Participants on Resilience

<table>
<thead>
<tr>
<th>1. Adjust – “Khap khaba”</th>
<th>12. Ability to combat or face disaster.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Capacity</td>
<td>13. Elasticity</td>
</tr>
<tr>
<td>3. Bounce Back</td>
<td></td>
</tr>
<tr>
<td>7. Capability</td>
<td>17. Strong? (community is strong</td>
</tr>
<tr>
<td>8. Absorb</td>
<td>without necessarily any</td>
</tr>
<tr>
<td>9. Mentality</td>
<td>external support –</td>
</tr>
<tr>
<td>10. Protection</td>
<td>independent community)</td>
</tr>
</tbody>
</table>

Resilience was further elucidated using the examples given below:
- Ability of the community to resist. (e.g. – 2 houses – one broken in the disaster and one not broken)(impact on one is less)
- Ability to bounce back (e.g.: both houses broken – one builds it back sooner and better compared to the other) (same impact different speeds of recovering)

It was noted that in our DIPECHO projects we are working on working on preparedness at both community and individual level, hence, resilience at:

1. Community Resilience
2. Individual level Resilience

**Understanding Vulnerability:**

To order to introduce the vulnerability dimension – the facilitator asked participants identify the opposite of resilience: - **Vulnerable.** Words discussed to explain vulnerable were:

In order to address vulnerability, all projects were working on increasing capacities and resilience of communities.

**In Conclusion:**

**Inclusion:** The following five were agreed as key words in terms of inclusion: 1. Equity, 2.Equality, 3.Participation, 4.Acceptance and 5.Togetherness; while “Sabhai ek sathe” was agreed as the most appropriate Bangla word which could be used in the field.

**Resilience:** Agreed was the following explanation on resilience: - Ability of the community or individual to resist disaster impact and bounce back better and quicker.

**Vulnerability:** Agreed that it is the opposite of resilience, and a focus area of all organisations working in the field.

**Session 2: INCRSID SA project**
Basic information on INCRISD was shared with participants followed by a discussion on the need and processes followed to develop an inclusive DRM model for the South Asia region.

Each country DIPECHO supported programme/project is working on a country specific model wherein inclusion is a primary focus. Processes followed by the different countries will indeed be different however commonalities also exist.

It was reiterated that to develop a model, evidence from the field / community is essential and that to do so, the community and front line worker in the field would be the focal persons to facilitate the information flow, ensuring the role of the community in the model development and validation process.

Since a number of DIPECHO cycles have been completed and a number of projects supported in SA one should be in a position to propose how an inclusive DRM should look like. Hence information from secondary research is collected and would be verified in the community.

INCRISD SA project proposes to verify this secondary research through – pilot testing and Good Practice collection from DIPECHO support partners in the different countries in South Asia.
The flow chart given below outlines the proposed process for the development of the inclusive DRM framework:

1. Developing Preliminary Inclusion Framework
2. Validating regionally applicable Inclusion Markers
3. Regionally applicable Basket of Indicators
4. Identifying Country specific inclusion indicators
5. Piloting identification of Activities for piloting inclusion aspects (tools/processes/formats/guidelines)
6. Identification of pilot areas
7. Good Practice Collection
   - Evidence from piloting
   - From DIPECHO project activities
   - Identified/Developed by community
8. Validating Indicators
   - Country specific indicators w.r.t. country level indicators (output - 6 sets of country specific indicators)
   - Validating framework through regional workshop
9. Final Inclusion Framework
Based on the presentation related with developing the inclusive framework, some of the questions raised by the participants are as follows:

- What are country specific indicators?
- Concern raised by NARRI - since we are working on replication? The support is to government hence if our model doesn’t say so, inclusion maybe difficult to replicate.

Issues:

1. Tools are frozen and inclusive
2. Processes are inclusive. (Can we look at processes and make inclusive?) (what we can do is give a guiding note to government on recommendation for inclusion)

The flow chart was revisited and with the objective of working on country specific indicators which would follow the SMART principles of Specific, Measurable, Achievable, Realistic, and Time Bound.

Activities planned and implemented by NARRI and DeSHARI, in the current cycle were reviewed as per the following 8 key areas.

- Awareness-raising and rapport-building with stakeholders on inclusive DRM
- Risk Assessment (hazards, vulnerabilities, capacities /capabilities assessment)
- Small scale mitigation measures
- DRM planning
- Capacity Building and Information, Education, Communication (IEC)
- Early Warning System
- Coordination on DRM
- Response Mechanism

In Conclusion:

The steps for developing inclusive DRM framework were clarified and the following major activities were identified as common to both DeSHARI and NARRI:

1. CRA
2. Formation of DMC (guidelines – making them inclusive?)
3. Task Force
4. Mitigation
5. Strengthening SMCs.

It was agreed that evidences will be collected:

1. From NARRI or DeSHARI + INCRSID SA intervention areas.
2. Past NARRI and DeSHARI own practices from past project.
3. Existing community practices.

Session 3: Reflection on inclusion within NARRI+DeSHARI key activities:
To gain an understanding on how inclusive key activities are being implemented by NARRI and DeSHARI and to probe further to identify scope of enhancing inclusion, participants were asked to do a group exercise to look at three major areas and assess how inclusive the activity is and if there is scope to look at enhancing the inclusiveness.

Table 20: Inclusive Matrix for the Country Program

<table>
<thead>
<tr>
<th>Key Activities</th>
<th>Is it inclusive?</th>
<th>How to enhance inclusion</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Risk Assessment (urban/rural)</strong>*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre</td>
<td>Yes</td>
<td></td>
<td>To work with Master trainers and their orientation (highly recommended by NARRI as area of intervention – as they do not have a budget for the same.)</td>
</tr>
<tr>
<td>During</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Post</td>
<td>Yes Planning and validation - also made inclusive as marginalised groups are represented</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Capacity Building (DMCs)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Selection of master trainer</td>
<td>No Structure + policy + mind set</td>
<td>Policy advocacy</td>
<td></td>
</tr>
<tr>
<td>Harmonised training module</td>
<td>Partial</td>
<td>To sensitise Master trainers – a separate training on inclusion.</td>
<td></td>
</tr>
<tr>
<td>Orientation on DMC by MT</td>
<td>No Limited knowledge of MT Time ownership, and participation selection process</td>
<td>Advocacy Extra Training Mind Set Change</td>
<td></td>
</tr>
<tr>
<td>Formation/Deactivation of DMCs (District, Upzila, Union, CC, Ward)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DMCs according to SoD</td>
<td>Partially (ALL the DMCs are formed) Others (1 person PWD/ women/aged/Children)</td>
<td>Since this is already “frozen” it may be taken up as an advocacy agenda</td>
<td></td>
</tr>
<tr>
<td>WDMC (30 members)</td>
<td>Yes</td>
<td>30% women, 5 % PWD or family, 5 children, 5% Elderly</td>
<td></td>
</tr>
<tr>
<td><strong>Implementation of RRAP (Urban/Rural)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prioritization</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implementation</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
In conclusion:
As both NARRI and DeSHARI are working with the government - It was agreed that though tools, guidelines and formats may be “frozen”, there is scope to work on the processes in terms of enhancing inclusion.

Session 4: Good practice collection:
A Good practice is a specific approach, initiative or action, which according to set criteria, clearly demonstrates effective achievement of a specific goal.
‘Good’ does not mean ‘perfect’ (hence the choice not to talk about “best practices”: practices can always be improved.

Key elements of good practice collection from the project perspective are:

1. **Good Practice Criteria**
   - Inclusivity – Moving beyond participation.
2. **Role of inclusive communities in identifying and validating practices.**
   - Gathering voices of vulnerable groups as visible agents of resilience.

Herein, the objective of collecting good practices is:

1. As a tool to collect and document evidence on inclusive practices in DRM.
2. As a tool to gather voices of vulnerable groups and facilitate inclusion.
3. To inform the advocacy agenda.

**Criteria for Good Practices:**
Using a large group discussion the following were criteria identified as non-negotiable from a larger pool of suggestions.
Non-negotiable criteria:

1. Positive/ Reduces Vulnerability/positive for all/
2. Acceptable
3. Replicable
4. Tested/approval for the good practice/ Validation
5. Sustainable
6. Cost effective/Community capacity to mobilize resources; up scaling; Then acceptance becomes a factor

Other criteria discussed:

..Harmless, timely, effective, sensitised, area specific, appropriate, leadership of excluded persons, Do No Harm, accessibility...

**Unpacking each “Criteria”:** With the objective of gaining clarity on each criteria and to simplify it for the benefit of the field functionaries a group exercise was one wherein each group had to first clearly state what the criteria meant in language understandable by all and further provide an example based on a real experience in DRM.

**Criteria 1:** Positive/ Reduces Vulnerability/positive for all

- Every excluded person is benefitted from the mentioned good practice
- Community vulnerability is reduced
- People have easy access to service and facilities
- People with disabilities have easy access
- Children issue is reflected and addressed
- Needs of women and sick people is addressed.

**Example:** A bridge constructed at Uria Union of Fulchari Upzila, demonstrates that the bridge not only benefits the community but all its members – including people with mobility problems. There is system of maintenance in place.

**Criteria 2. Acceptable:**

1. All of community will work collectively
2. All people will appreciate the good practice
3. Less barrier to implement good practice

Acceptance by local Government / administration and ensures its sustainability.

**Criteria 3 Replicable**

A piece of work or practice at community by which they benefit and use their own resources. People’s capacity enhanced and other communities are influenced from its usefulness and decide to take this practice.

**Characteristics:** Local context
Capability and capacity
Effectiveness
Uses of local/ own resources
Cost effective and easy equipment

Wherein we discussed the example of Flood Shelter in Char Nagdah in Pabna and came to the conclusion that there are certain activities which might have high cost implications and essential to save lives and property of the community. The ability of the community to replicate it in terms of resources available to them could be an issue. This could be taken up as an advocacy issue.

Criteria 4: Tested/approval for the good practice/ Validation

A work that is done by community/people of the area/ institution and its give good result.

Characteristic: Time congruent
Practical
Positive and negative impact
Possible to do by everyone

People from flood prone area at Jamalpur and Islampur cultivate banana tree around the house. The banana tree is used to make a Bhella (floating raft/boat) for moving people like children, women, person with disability, pregnant women, elderly people or sick people in nearby shelter centre. Banana can used for eat or sell for income

Nearest community are influenced from this practice and they also started to cultivate banana tree around their home.

Criteria 5: Sustainable :

Useful and acceptable for all and which can practice for long run and get sustainable positive effect.

Example: Shelter center of Char Nagda is used as education, health, sports and community centre. This shelter centre is suitable for all. Women, Children, person with disability can get all facilities to live there. Community and Union parishad took initiative to maintain, secure and multiple uses of this shelter centre.
Case study: There are some opinion come from the community to make boundary of Nagda shelter like by using block, sand bags, barbed wire and thorny fence etc. Using outside materials is costly so community decided to use Kash/Chon and Dhol kolmi (one types of creepy plant) for make a boundary. Now this practice is implemented across. Local people regularly maintain, protect these shelter’s boundary. The boundary is now well protected.

While discussing example of Flood Shelter in Char Nagdah in Pabna, we came to the conclusion that there are certain activities which might have high cost implications and essential to save lives and property of the community. The ability of the community to replicate it in terms of resources available to them could be an issue. This could be taken up as an advocacy issue.

The second key element of the good practice collection: the “role of the community” was reviewed in light of previous discussions made during the first workshop on the UDMC and WDMC – (See Workshop report Annex...)

**In conclusion:**

Agreed criteria for good practices are:

1. Positive/ Reduces Vulnerability/positive for all/
2. Acceptable
3. Replicable
4. Tested/approval for the good practice/ Validation
5. Sustainable
6. Cost effective/Community capacity to mobilize resources; up scaling; Then acceptance becomes a factor

Agreed that proposed that the criteria would be rewritten in simple Bangla so that it could be used as a tool for community field orientation

Agreed that scope of good practices could be identified from community. Tools to do the same need to be further worked with NARRI+DeSHARI. It was discussed that the information collection on inclusion could be done using the CRA tools.

**Session 5: Crystallizing the collaborative action plan:**

To define the scope of collaboration in terms on of inclusive DRM, participants were divided into three groups and each group were asked to look at five key components of DRM viz a viz risk assessment and planning, small scale mitigation, local level advocacy, community volunteers and engagement with local government. The
participants were then asked to discuss and identify areas for potential collaboration on inclusion and identify indicators to measure the same.

<table>
<thead>
<tr>
<th>Table 20: Piloting Good Practices in the Field</th>
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<tbody>
<tr>
<td><strong>Key components of CBDP</strong></td>
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</table>
| CRA and Validation, DM Plan | CRA Tools and format are already inclusive.  
The CRA process requires support.  
Validation process requires support. | - % of actions in RRAP reflecting the need to marginalize groups  
- % of people (MG) participated in the CRA process  
- % of people (MG) participated in the validation process |
| Small Scale Mitigation | - Standardized  
- Guideline was developed under 6th DIPECHO. The guideline needs to be revised. | - % of inclusive schemes implemented  
- % of excluded people included in PI&MC  
- % of people able to access inclusive schemes  
- % of MG involved in the implementation process |
| Local Level Advocacy | - Tools, format, guideline required | - % of DMC members have knowledge on inclusion  
- % of MG oriented on their entitlement  
- No. of evidence collected on inclusion for advocacy  
- % of excluded people accessed Social Safety Net  
- % of excluded people participating in decision making process |
| Community Volunteers (mass awareness and mobilization) | - Harmonized and standardized Tools/ Process/ Format/ Guideline required  
- Inclusive IEC materials | - % of MG members included in volunteer groups/WDMC  
- No. of mass awareness issues carried out with focus on inclusion  
- % of HHs covered with mass awareness activities on inclusion issues |
| Engagement with Local Government | - Harmonized and standardized Tools/ Process/ Format/ Guideline required | - % of inclusive actions taken by DMCs  
- No of DMCs considering inclusion issues  
- % of inclusive issues taken by |
Analysis Based on Primary Research

Inclusive disaster risk management is an emerging concept across various programs in south Asia. Based on the projects that the research focused on, it is one of the non-negotiable part of the project design. In spite of this there has not been a concerted effort by different agencies working on disaster risk reduction to take the issue seriously.

Based on the level of understanding of the field team as assessed during the workshop, the Bangladesh team seems to be more matured. This could be attributed to the fact that it is one of the countries which has been more prone to disasters especially cyclone and flood. There has been concerted effort by the government, bilateral agencies, donors and INGOs to work on issues related with disaster risk reduction. The Bangladesh team were more articulate in expressing their understanding on disaster risk reduction.

Due to the gap in understanding of the team in both the countries, the research who is also the facilitator of the training had to modify the training delivery methods without working much on the module. In the India context, the knowledge imparted to the field level practitioners had to be reinforced before it could be absorbed by them.

The geographical areas in terms of the implementation of the program was very large in Bangladesh as compared to India as the program is implemented through a consortium of six INGOs working together on disaster risk management. Due to the vastness of the area, the community associated with the project was also diverse thus making it bit cumbersome to develop a general understanding on the community. Apart from that since the Bangladesh project is being implemented in a much larger area, the field level functionaries are also diverse in terms of region, ethnicity & culture and thus brings in diverse perspective to the entire project.

Since the nature, the project cycle and duration of the project is almost similar, there is a vast possibility of one project learning from other and maintaining a knowledge sharing mechanism. The DIPECHO project community in south Asia has some website and social networking sites with large subscriptions which makes the communities of practice easier to exchange knowledge at the larger level.

During the exercise related with the identification of the most vulnerable and the marginalized community in the two countries, the Bangladesh team came out with the usual list based on age, sex, ethnicity etc. while the Indian team has much more diverse opinion on the same which included historical reasons, ‘superstition, language, literacy and political affiliations.

While discussing about the criteria for identifying good practices in both the countries, some of it which were common across both the countries are creating positive impact on the life of the communities, cost effective, replicable and sustainable. Apart from that India workshop came out with certain criterion like ‘people are the main actors’ and ‘evidence based’ while the Bangladesh field team came out with criteria like ‘tested and approved’.
Based on the criteria finalized during the workshop, the field team were asked to identify good practices in the field in both the countries. It could be deduced from the above exercise that the examples given by the Indian team were more focusing on disaster risk management whereas the examples given by the Bangladesh team is more related with inclusive disaster risk management. This again highlights that the Bangladesh program is more matured in terms of inclusive approach to disaster risk management.

Social audit is one of the tools and processes which can help develop a better understanding of the underlying causes of vulnerability and the process of social exclusion and discrimination. First of all it proactively addresses the issues of social exclusion and discrimination. It also facilitates analysis of complex social and economic relations affecting the poorest and the marginalized. Apart from this it also best practices and gaps in inclusion processes. The planning and monitoring & evaluation systems in the programs needs to be designed in such a way that it the most vulnerable community are not left out during the entire process.

Some of the common gaps which were observed across both the programs are as follows:

1. Both the team understood the basic concept related with inclusive disaster risk management but when it came to the process related with identification of the excluded community, they did not had much orientation on the same.

2. There is a big gap in understanding between the management team and the grass roots level functionaries who directly interact with the community.

3. The DIPECHO project, which is an ECHO funded disaster risk reduction project does not give much space to the implementing agency to ensure high quality work with better impact. This is due to the fact that it is a short duration project (around 18 months). In order to ensure a better impact through the project, DIPECHO project should be a part of the larger program.

4. Across both the projects, the community level volunteers had very limited documentation skills. In an action research project which is being implemented across a large area, mechanism was developed where in the field team was supported by the management to document good practices emerging from the field.

5. Across both the projects in Bangladesh and India, the team has been able to realise that it is the most vulnerable and the marginalized community which is left out of the disaster risk reduction processes and programs but the team needs to be sensitized on making a conscious effort on mainstreaming the invisible community.

6. Due to similar socio-cultural context and contiguity in the area. The issues, challenges and the strategy on disaster risk reduction is almost similar.
Concluding Remarks

Disasters do not discriminate, human being do. It is the discrimination which makes certain sections of the community highly vulnerable to disasters.

The participatory planning should not only be focusing on the needs and aspirations of the invisible community but also on their roles and responsibilities in recovery and disaster risk management. The communities which are the most vulnerable and the marginalized need primary attention to be incorporated into disaster risk reduction interventions and processes. They are most of the time the invisible and the excluded community. The impact of disaster on these communities are the most and their ability to bounce back is also the least. It is very likely that they are also excluded from the response and recovery efforts.

Race, class, age, ethnicity and gender are key markers of a person’s potential vulnerability to different types of hazards. The inclusive approach to disaster risk management needs to be thought of and imbibed right since the beginning. Inclusion is not about projects, it is all about change in attitude of the people especially the community and key stakeholders associated with it. There should be tools, guidelines, systems and processes right from the design intervention phase which can help the stakeholders analyse the complexity associated with it.

There is an immediate need to develop strategies and tools to tackle exclusion and discrimination issues related with humanitarian response and disaster risk management. This strategies and tools could be used throughout the project management cycle. Some of the tools that could be used are participatory vulnerability and capacity assessment, inclusion monitoring and social equity audit.

Based on the exercises conducted with the community level workers and communities in the field, it was observed that there is a complete lack of knowledge about vulnerabilities of the excluded community. The inclusive approach to disaster risk management could not properly take place in some of the places as the community level front line workers were not very well equipped to carry out the identification and mapping of these types of communities. In order to ensure inclusion, it is a sine-qua-non that the front line community workers and other people at the grass-roots are sensitized as the action at this place defines the efficiency and effectiveness of the program.

In order to make the disaster risk management framework inclusive there are certain international guiding documents like “The Sphere Standard”, “Good Enough Guide”, “People in Aid” and “HAP” should be followed during various phases of the project cycle. The Sphere Standard calls for the humanitarian agencies to compose aid workers team with a balanced ratio of people from different sections of the society especially the marginalized and the vulnerable. The Humanitarian Accountability Partnership follows the principle of impartiality, participation, informed consent and transparency. The Good Enough Guide is a tool for impact measurement while People in Aid is an initiative to efficiently and effectively manage human resources which includes commitment to promote inclusive and diversity within the organization.
In order to come out with an inclusive framework to disaster risk management, the rights based approach to disaster risk management need to be adhered to. It should be based on the various international directive and policy documents related being borne out of international humanitarian law. There is also a non-negotiable need to monitor the policies of the government from the inclusion perspective with a provision of appointing independent committees and ombudsman.

Disasters are of varying nature and are entrenched deeply in different social context and milieu. Focus on relief and rehabilitation is not sufficient to overcome the unequal power relations deeply entrenched in the community. In order to combat exclusion, emphasis should be laid on equal power sharing and decision making process. There should be tools and mechanisms to address discrimination and ensure the inclusion of the excluded community in various systems, processes and end products.

There has to be a higher level of effort engage the excluded community in redefining various policy instruments like the disasters management acts and policies in various countries. The excluded communities are also heterogeneous in nature and there should be a conscious effort to map their diversity and respect and incorporate their needs and aspirations.

Good practices from across the globe as well as from the research conducted comes out with empirical evidences that inclusive approach to disaster risk reduction benefits all the sections of the community and can lead to attainment of global commitment like the Millennium Development Goals and the Hyogo Framework for Action. The focus should also be on developing a high level of indicators for performance measurement as indicators helps in meaningful and realistic measures of changes over time.

The excluded community has most of the time been depicted as a victim in any planned interventions. Challenge the depiction of the excluded community as victim and bank on their resourcefulness. The disaster risk reduction plan and policy has to address increasing the resilience of the most vulnerable and the marginalized community at an individual, household, community, country and the global level. The community should be able to withstand, to adapt to and quickly recover from shocks and stresses.

Unless and until there is a comprehensive and long term approach to addressing exclusion in resilience building and development processes, the most vulnerable and the marginalized community will continue to be at risk and suffer from preventable disasters.
List of References:


