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CROSSOVER

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NEPAL RUNNING AGAINST TIME

Many children from poor families or those who had been separated after the earthquake are at risk of being trafficked and exploited. Last week, a report has confirmed the interception of 64 minors accompanied by strangers in the two worst affected districts of Dolakha and Dading. Some Nepalese and Indian nationals who accompanied them were apprehended and the minors are now in a protected custody. There are fears that traffickers, who had moved every year thousands of minors to India for manpower and prostitution, might be taking advantage of the situation. In fact, as a result of this circumstance, the government of Kathmandu has intensified police control and declared that no child under 16 years of age will leave the district of origin unless accompanied by a parent or an adult with permission from the local social service. It was also announced the cessation of international adoption in the next three months. (S.V.)

More than eight thousand died, over one hundred thousand injured, 500,000 homes totally destroyed, 250,000 partially damaged, 400 health centers collapsed and 683 seriously damaged. The numbers speak only a part of the tragedy that has affected 8 million people in Nepal during the devastating earthquake, of April 25 which was followed by another one on May 12. It is a nightmare that never seems to end. Aftershocks continue and the monsoon rain is fast approaching.

In these last three nights, our tents were battered by torrential rain and a strong wind. People are living on the streets or in temporary shelters even if their houses are still standing. Yesterday were awakened by series of aftershocks which is developing a sort of ritual. Everyone gets out quickly, look into our eyes assuring one another, and then return to sleep in the tents. The government is trying to respond in a very difficult situation geographically speaking. In order to reach the villages in some districts, you need to travel for three days on foot. The helicopters are not landing always and people are at risk of dying of starvation since aids are not reaching to them before the monsoon. NGOs are mobilizing in big numbers.

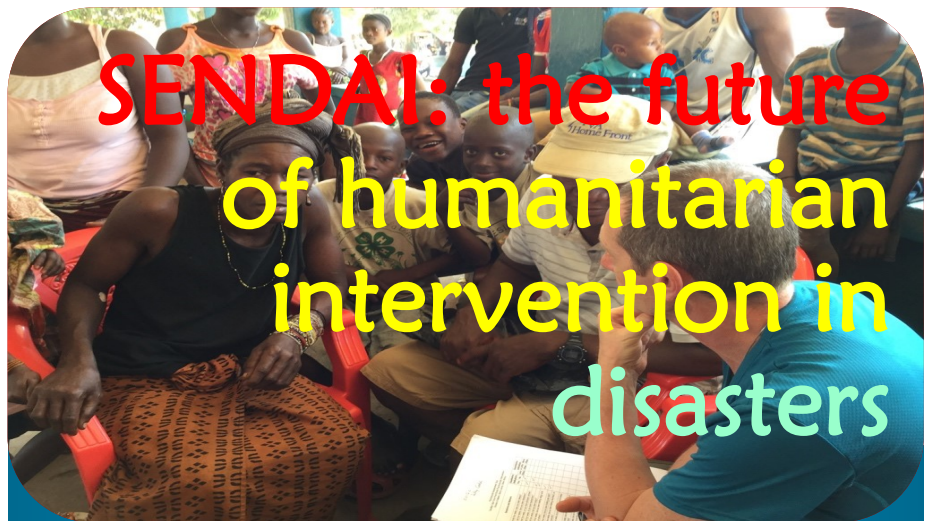
There are over 300 organizations and the streets are jammed with vehicles having stickers of international and local networks. Caritas Nepal has become the nerve center of actions particularly among the Catholic networks which is supporting the action of the local Church in favor of the poorest. Like for instance the Camillians have rendered health services to 1,300 patients in remote villages of the district of Gorkha together with some religious health professionals of four religious congregations from India. With their backpacks, they traversed rivers and climbed up mountains on foot amidst landslides brought about by aftershocks.

Catholic solidarity actions coordinated by Caritas Nepal are focusing in the 13 most affected districts of Nepal providing emergency supplies such as tents, blankets, and hygiene kits. The director of Caritas Nepal, Father Pius Perumana, stated that the aid "will not stop the emergency interventions but will continue in time helping survivors towards developing resilience." The faces of the Nepalese are marked by intense precarity after more than 30 days of aftershocks, living in tents, and seeking for food and medicines.

Burying the dead, and damaged houses, in the villages of Kathmandu, are images of people who affected by the terrible earthquake but longs to start anew. In the historical center of Kathmandu, cleaning up the area of the towers and the ancient temples has begun. Also in the mountainous villages, they started to rebuild their houses using indigenous materials such as bamboos and mud. Some use improvised aluminum sheets, and plastics as they are anticipating the monsoon season.

Children are expected to return to school in a few weeks with hope of restoring normalcy despite most of the schools were destroyed and damaged. We are all wondering what will happen if roads will become inaccessible due to rains in the next three months. How do people can survive in a situation of constant disasters? Most of the communities have resisted the serious impact of the event. Mutual solidarity is functioning which is an asset of their society permeated by religious values of caring for those who are suffering and solidarity.

Marco Iazzolino



From 14 to 18 March 2015, the third global conference on the prevention and management of disasters promoted by the UN was held in Sendai, Japan. Taking at least two years to prepare, the conference saw the involvement of national governments as well as non-government organizations engaged in disaster response. This Sendai Conference produced a 25-page document to guide the action in disaster up to 2030.

The document has 6 parts. Primarily, it identifies the expected outcome as "the substantial reduction of disaster risk and losses in lives, livelihoods and health and in the economic, physical, social, cultural and environmental assets of persons, businesses, communities and countries."

To achieve this above expected outcome, the following goal must be pursued: "Prevent new and reducing existing disaster risk through the implementation of integrated and inclusive economic, structural, legal, social, health, cultural, educational, environmental, technological, political and institutional measures that prevent and reduce hazard exposure and vulnerability to disaster, increase preparedness for response and recovery, and thus strengthen resilience."

The Conference also identifies 13 principles to guide concrete action and disaster prevention. Drawing from the experience gained from the implementation of the Hyogo Framework for Action, as well as in the pursuit of the expected outcome and goal, the gathering identifies the following four priority areas: understanding disaster risk, strengthening disaster risk governance to manage disaster risk, investing in disaster risk reduction for resilience, and enhancing disaster preparedness for effective response, and to "Build Back Better" in recovery, reha-

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bilitation and reconstruction.

The Sendai Conference Document will be relevant and challenging to the Camillian Task Force. It speaks not only, for example, the structural reconstruction of buildings; it speaks about preventive action and intervention, revolving around the term community. The community becomes the subject of and locus for the processing of priority actions in prevention.

The term resilience, for which the CTF has worked hard over the last three years, is a key feature of the third priority of the Sendai Conference Document. Promoting resilience is not only a challenge for the next 15 years. It is as well the objective that the United Nations has set to involve individual nation states and non-government organizations.

The issue of health is also central in the Sendai Conference Document. Dr Rick Brennan, Director of the De-

partment of Emergency Risk Management and Humanitarian Response of WHO, recalled that in the Hyogo Framework health was mentioned only seven times but the successor Sendai document has stressed the importance of health. This makes the work of the Camillian Task Force highly relevant and opens up opportunities for its organizational growth in the coming years as one of the few Catholic organizations engaged in medical relief in post-disaster interventions. What is certain is that climate change combined with a continuous and tragic impoverishment of basic rights will evolve the work of CTF towards thoughtfully building communities of resilience in carefully structured and coherent framework and evidence-based interventions, bearing witness to the gift Camillus received from God as charism and mission.

Marco Iazzolino

NEW EBOLA SCENARIO REVISITS PROGRAMS



Since February 2015, the trend in the Ebola infection rate is going down. Apart from the unexpected resurgence of infection in March, the number of cases is decreasing as shown in the regular online posting of updates on the EVD in Sierra Leone's Ministry of Health website. It appears that the epidemic is now under control. In fact, former British Prime Minister, Tony Blair, has commended the government of Sierra Leone and its partners in its fight to control the Ebola virus in the country. Holding Centers (HCs) for suspected cases, as well as Ebola Treatment Units (ETUs) for confirmed cases are getting empty. Currently, the bed occupancy in these centers are about 12% and they may be closed shortly.

This developing trend is pushing the CTF and the Diocese of Makeni, its main partner, to redirect its intervention towards prevention and psychosocial support for families affected by the EVD. Aware that the fragile healthcare systems in Sierra Leon, especially at the most basic levels, contribute to the high incidence of EVD cases, the CTF calibrated its response towards the strengthening of the healthcare systems, particularly in the rural and remote areas. The major actors in the field such as the WHO and international agencies are taking the same path to combat the EVD. Majority of the big actors are taking on the task of

refurbishing existing basic health care units and training their health care staff in prevention, management of the basic facilities, and in infection, prevention and control. Government institutions, while limited in many respects, provide continuity to services. Strengthening government healthcare institutions will thus provide continuity and sustainability to health care services for the local communities, especially those in the most remote areas. The move of the Camillian Task Force to strengthen the service capacity of the primary health care units in selected communities also ensures its commitment towards providing "health for all."

The original plan to provide training on psychosocial support facilitation for a large number of priests, catechists, teachers, nurses and seminarians was changed. Instead, participants for the training on psychosocial support facilitation were selected from the 20 parishes within the Districts of Bombali, Kambia, Port Loko, Koinadugu and Tonkolili using a set of criteria for selection. A total of 20 participants were selected and have undergone the first module of formation and training on psychosocial support facilitation for disaster stricken families. Called as Community-Based Psychosocial Support Facilitators (CBPSF), they will facilitate for access to support, assistance and care for Ebola affected

families assigned to each one of them. At the end of the program, which will be in December, the Diocese of Makeni will have twenty (20) well trained CBPSFs who would have undergone 17 days of intensive formation and training and a practicum of nine (9) months under the supervision of a local trainer in mental health and two expert trainers coming from the Camillian Pastoral centers of Madrid, Spain and Nairobi, Kenya.

Luca Perletti, MI



BAGANGA, DAVAO ORIENTAL - They used to provide medical needs and pastoral care for the sick of Mati City and Davao Oriental but now they help in building communities. This is what the Camillian Task Force (CTF), a humanitarian organization under the Order of the Ministers of the Infirm (MI), is doing for the communities in the town of Baganga, of the Province of Davao Oriental. The Camillians, through the CTF, are carrying out an initiative, the Awuyon Baganga Agro-forestry Project, funded by the Italian Bishops Conference.

Baganga is one of the most devastated towns in the aftermath of Typhoon Bopha. Seeing the need for material and spiritual nourishment of the communities, the Camillian Task Force conducted medical missions right after the typhoon on December 10, 2012. After the relief interventions, the CTF carried out feeding interventions to address disaster-induced hunger among children, including a school-based feeding program that run from September 2013 to March 2014. And now the CTF is focused on ensuring that there will be food on the table for every family it is currently assisting.

“The Camillians want to restore if not strengthen the relationship of the people,” said Cherubin Navarro, 45, the project coordinator of Awuyon Baganga Agro-forestry and Livelihood projects. He said the Camillians intend to strengthen the “awuyon” or the culture of mutual under-

standing and self-help in times of need already inherent in the indigenous Mandaya culture. To do this is to nurture and deepen the Mandaya indigenous culture of communal self-help in the clearing of lands, in harvesting and or undertaking the sustainable stewardships of the environment.

For Mr. Navarro, the Camillians believe that for a community to be strong, mutual self-help has to be nurtured. Aside from that, the Camillians have also wanted the people to protect Mother Nature through responsible and sustainable agricultural practices. “People have stopped cultivating their lands when they went down in the lowlands to work as laborers for construction so they can feed their families. The Camillians have found a way to help the farmers feed their families while they cultivate their lands,” Navarro said referring to the Awuyon Baganga Agro-forestry and Livelihood projects which was launched last March 19, 2015

Fr. Angel Crisostomo, MI, who is the Director of St. Camillus Hospital of Mati Foundation, Inc. heads the Camillian Task Force Mindanao.

John Frances Fuentes



A YEAR AFTER THE STRONGEST TYPHOON ON RECORD

The CTF Team responded to the affected communities in the islands of Samar and Leyte a week after “Haiyan,” the strongest typhoon on record to hit land, battered the Philippines on November 2013. Leyte and Samar were two of the worst hit provinces. For two years, beginning 2004, I was assigned at the St. Camillus Hospital in Calbayog, Samar and these places are quite familiar. I used to bring patients for referral from the St. Camillus Hospital in Calbayog City to one of the Hospitals in Tacloban City in the island of Leyte. Highly urbanized and among the most competitive cities of the Philippines, Tacloban City was totally devastated and thousands perished.

Typhoon Haiyan caught the attention of the world. Days ahead, international and local media organizations were positioned in places where the massive typhoon was predicted to hit landfall. The devastation and loss of lives in its aftermath was tremendous such that Pope Francis decided to visit Tacloban in January 2014.

With support from organizations and foundations such as Pro.Sa Italy, the Camillian Task Force Philippines intervened in three severely affected and underserved municipalities of Basey, Marabut and Santa Rita in Western Samar. It delivered food relief to 25,500 families, enrolled 3,125 children in health and nutrition program and provided psychosocial support to 3,150 children. Another 3,597 individuals received medical, dental, and surgical services including the vaccination of 2,256 children. Also, a total of 3,432 school children were provided with educational materials and hygiene kit bags and 1,250 families received kitchenware.

The provision of livelihood is part of the intervention of the Camillian Task Force. A total of 19 barber kits, 7 mani-

cure sets, 21 motorcycle taxis and 36 motor fishing boats were awarded to qualified recipient families.

Part of the intervention of the Camillian Task Force is to build capacities in psychosocial support, basic health education and in the restoration of community spaces such as multi-purpose centers. A total of 84 volunteer teachers and hospital personnel were trained in psychosocial intervention and 540 mothers completed training on basic health education. The CTF repaired 3 partially damaged centers and 17 youth volunteers received specialized training in Psychological First Aid (PFA). The CTF also trained 38 regular volunteers on Climate Science, Disaster Risk Management and Humanitarian Systems, Protocols and Tools. From March to June 2015, the CTF will carry out in-depth training and organizing on disaster risk management in two villages in the municipality of Basey. This will support and strengthen the efforts of the local government unit in making these communities disaster resilient.

Many of those affected by Typhoon Haiyan still reside in transitional houses a year after Typhoon Haiyan wrought massive devastation in central Philippines. The Philippine government is in the process of identifying safe and permanent relocation sites for those affected families who could no longer restore their homes in areas declared as dangerous zones. During the blessing of a newly rehabilitated multi-purpose center, smiles were on the faces of people and signs of hope are visible. Apparently, life is back to normal as children are going back to schools and day and night and fishermen take their fishing boats and their nets into the sea. At the blessing of the center, members of the community served us big fish and crabs for lunch. Their courage and determination are impressive.

SeS Philippines

THREE YEAR FINANCIAL STATEMENT

Rome, Italy

EURO

241.695,32

9.121,83

492.660,65



Less: Projects Supported			
Wajir Project of CTF Kenya	24.250,00	90.552,53	304.814,34
Typhoon Pablo of CTF Philippines	70.000,00	796,11	15.000,00
Typhoon Haiyan of CTF Philippines	70.000,00	10.000,00	
Typhoon Sendong CTF Philippines		129,38	74.101,50
Landslide Uttarakhand CTF India	31.344,70	30.597,22	
Earthquake Aquila CTF Central		10.500,00	800,00
Earthquake Bohol CTF Philippines		10.872,63	
Ebola Intervention	5.307,77		
Other emergency assistance	11.776,48	7.000,00	15.602,28
Total projects supported	212.678,95	160.447,87	410.318,12
Less: Administrative Expenses			
Salaries and wages	49.689,30	48.836,21	47.867,00
Payroll taxes	32.546,51	50.145,84	47.082,88
Organizational and staff development	30.439,18	5.260,00	25.265,44
Publications			500,00
Resource Mobilization, marketing and promotion			
Travel and transportation	2.572,25	1.605,52	7.237,43
Communication	177,41	49,71	2.033,79
Office supplies	324,06	505,46	93,60
Equipments, rent and maintenance			
Furnitures and fixtures			
Postage and courier service			
Legal fees			75,00
Professional and retainer's fees			3.577,60
Books and subscriptions	31,43	13,16	
Bank Charges	735,44	421,24	710,64
Various Expenses	18.561,29	1.000,00	78.574,28
	135.076,87	107.837,14	213.017,66
NET FUND BALANCE FOR THE PERIOD ENDED	85.566,01	128.532,67	111.020,19



CAMILLIAN TASK FORCE IN WAJIR

It was in 2011 when the Camillian Task Force arrived in Wajir, North Eastern Kenya in response to drought brought about by prolonged lack of rain that lasted from October to November 2010, followed by a long dry spell in December 2010 lasting up to March 2011. These changes in weather pattern severely affected the livelihoods of pastoralists, causing up to 70% mortality of their livestock upon which majority of them depend for survival. Members of the CTF provided food relief and rehabilitation. Specific activities also include health care delivery, nutritional programs for children and the elderly, community-based health care systems development, food security, and sanitation and hygiene.

There were several challenges to the implementation of the objectives and specific activities of the CTF. For instance, the lack of rains for a long period of time, excessive heat, high soil PH and strong winds affected the activity of food production through green house technology. There were other challenges that include terror attacks, inter-clan clashes, youth radicalization, closure of imports from nearest countries such as Somalia and high cost of living. This results to greater suffering of people in the affected areas.

The local community, however, appreciated and praised the work of the CTF. There was visible cooperation of the partner families in the projects and the willingness to make positive changes. Their openness enables them to



look at life in positive, developmental terms even as they were ready to employ their newly acquired skills in health delivery and food production. Through the training of community based health workers, basic health care services in the communities improved. Many people have begun to visit health care facilities. Some of those trained in small-scale greenhouse food production can now produce food on their own and not buy them from the market. These are small-scale, incremental improvements of the situation that bring about a sense of hope for the people assisted by the Camillian Task Force.

Fr. Francis Maina, MI



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Ministri degli Infermi**

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