

CATHOLIC MISSION RELIEF AND REHABILITATION CENTREDIOCESE OF VIJAYAWADAPROGRESS REPORT NO. IV

(upto 25th January, '78)

More than two months have elapsed since the unprecedented catastrophe of the tidal wave and cyclone which hit coastal Andhra on the night of 19th November, 1978. It can now be said that the relief effort has assumed a functional and rational structure which is able not only to direct its efforts and resources according to real priorities and needs but also to reflect on itself and evaluate and correct its activities according to the needs of the day after nine weeks of relief work.

It has become abundantly clear that thanks to both the natural resilience of the local population and the courage and inspiration contributed by the volunteers, the victims are now ready and willing to work out an effective programme for the reconstruction of their shattered villages. The key-note therefore of the efforts of the volunteers working under this committee has now definitely changed from "working for" to "working with" these victims.

However, despite their determination and willingness to work, the people are obviously unable to carry out any reconstruction programme if left to themselves: the tidal wave has destroyed everything: house and home, reserves of food and health, clothes, tools and all belongings. The people live from day to day. Even if hope has returned, their reserves are destroyed. They cannot carry out any re-construction for themselves unless supported from outside in their effort and given the wherewithal for daily existence. The relief effort therefore takes the shape not of relief distribution but of support of those who spend their time and energy in reconstructing the village.

Two months of relief effort have also been a strain on the relief workers. One sees the efforts of some organisations which had done yeoman service in the early days of the tragedy, petering out as volunteers are forced to return to their own avocations and replacements are hard to find. This committee is fortunate to be able to appeal effectively to a nation-wide net-work of seminaries, convents, educational institutions, novitiates etc. which is able to supply a steady stream of volunteers even over a protracted period. Thanks to this support, the relief effort of the three camps in this Diocese has not slackened but rather has grown better organised and more effective.

The general structure of the relief organisation has not changed: the Central Office at Vijayawada continues to maintain and co-ordinate the three base camps at Avanigadda, Machilipatnam

and Nagayalanka while the field work at present is carried out by volunteers residing in nine small camps situated within the tidal wave zone. While accounts, reporting and recruitment of volunteers remain the responsibility of the Central Office at Vijayawada. the procurement of relief supplies and camp requirements is being decentralised since goods are now more easily available near the base camps, and the camps themselves are better organised and capable of handling their own supplies.

Village Situation: The relief work in the villages has taken a new dimension and greater emphasis is given in working WITH the People and not FOR the People. The villagers too have been very co-operative in clearing the debris. The recent "Sankranti" festival (the festival of harvest) celebrated by the villagers also symbolised in a way the return of 'Normalcy' in these cyclone and Tidal Wave affected villages. The people are very much willing to work in re-building their homes, but they need a lot of encouragement and motivation. This has led to a new programme of "food for work" being undertaken in various villages. As long as they are given food for their work they are willing to undertake any work.

Many problems of Social Justice have cropped up for instance; in one village there was a problem of a landlord trying to occupy the land of the 'Girijans' whose huts were washed away from that place, which obviously he wanted for cultivation purposes. But our volunteers working there managed to persuade the landlord to let the Girijans occupy the land they had before.

The role of women volunteers and village women has also stepped up. Before they were only engaged in medical work, but now they are venturing into new areas like Small Savings, Anti-liquor campaign, Small Scale Industries etc.

Operations: Great importance is still being given to clearing debris. corpses and carcasses as these pose a great hazard to health, since the stench and filth facilitate breeding of insects which are the main carriers diseases and epidemics.

(a) Threshing of Paddy has been given top priority as it has to be completed in time (within a fortnight) before the water is let out into the canals. Various methods have been adopted to help the farmers. We are supplying wooden boards for threshing, hiring tractors (for which they have to pay partly), and by supporting the relatives of the villagers whose buffaloes they are borrowing to help in the threshing since they have lost all their cattle.

(b) Clearing the fields channels and canals has also presented employment opportunities. Since the water is to be let out soon the need of clearing these waterways pose an urgent

neccesity. If they are not cleaned in time the sides will be breached and future irrigation will not be possible.

(c) Removal of Sand deposits from fields is also engaging many in work. Huge heaps of sand have been deposited in the fields by the tidal wave, rendering the fields useless for cultivation. All these projects have been very effectively working under as part of the relief programme.

The villagers have lost all their belongings in the recent disaster, and in order to facilitate their return to normal living, they need to have some tools and implements which would provide them with the source of subsidiary income. We shall therefore help them to purchase implements like pickaxes, spades etc. for agriculture and tools for carpenters, masons etc. They are also being helped to grow trees and vegetables, and for this we are providing them with saplings and seeds. Each family is also being supplied with some hens to help them to start a poultry.

House construction work is being carried out on an increased scale. In several villages house construction is almost complete. Distribution of clothes and food is also being regularly carried out.

Our volunteers are also working in the Anti-liquor campaign and have successfully combatted recently a major problem. In one village a licenced liquor-vendor used to come and sell this "Snake juice" and move around the village. This led to a lot of people wasting their income on liquor beside ruining themselves and destroying the peace of their homes. Our volunteers tried to stop him but he brought in the police. However, not to be led down by this, and with a spirit of love and justice, our volunteers managed to get the women folk to sign a memorandum and submit it to the district magistrate. Now the liquor vendor is permitted to sell his drinks only inside an authorised licensed shop, and not to move about in the villages. Thanks to the unwavering efforts of our volunteers in mobilising the local people to fight this menace, the problem has been brought under control.

Medical: The medical Teams working in these areas report that upto now no signs of any outbreak of epidemics has been noticed. The main complaints, however, continue to be Anemia, Mal-Nutrition and diarrhoea. Anaemia, which is generally caused by the 'hook worm' is widespread due to polluted water which is sometimes the only available water for drinking and which is infected by hookworm.

Body aches and headaches is another common complaint - which may be caused by concussion i.e. the force of water during the tidal wave, banging against hard objects etc. This cannot be treated by analgesics. So far stool tests have not been conducted,

but they might reveal multiple infections, which may explain the complete collapse of adults immediately after an attack of dysentery. There is a danger that anemia cases, if untreated, may lead cardiac ailments in the long run.

Problem: Such needs are not catered to by clinical treatment. Patients who do come for treatment receive medicines which probably give relief, but it is not possible in a village clinic to cater adequately to the patients according to the special medical history constituted by the ex impact of the tidal wave.

More treatment given at leisure and at length, in the houses, even though not provided by trained and qualified doctors may be useful, provided these "bare foot" doctors are briefed about and try to observe and follow up the peculiar effects of the tidal wave experience.

The village clinics are incurring very high expense and causing great strain on personnel resources of hospitals but perhaps do not reach the cause of health problems. For meeting the actual medical needs of the post-tidal wave situation for the next two or three months, a solution may be found on the following lines:

- (a) If public health personnel are available to engage them for three months even on high salary
- (b) since public health nurses are most probably not available, to recruit graduate ladies about ten or fifteen and give them an intensive training for a few days. After this these ladies to work in the existing sub-centres and attend to the following:
 - i) to observe and note down detailed symptoms of peculiar post-tidal wave health conditions of patients viz. incidence of anaemia in adults, headache and body-ache, muscular pain, to indicate patients for stool tests etc.
 - ii) to educate village women with respect to preventive health measures
 - iii) to refer patients needing more expert treatment to trained doctors
 - iv) to dispense simple medicines and follow up cases in the houses.

Plans: The plans of emergency relief having now almost come to an end various schemes of providing the infra-structure for the victims to return to their normal occupations, namely agriculture, livestock and fishing are being taken up. The people are being helped to purchase tools and implements to help them settle down

to regular work.

Various short-term cottage industries schemes have been started viz. manufacturing of jute bags, and plastic bags with plastic thread.

A scheme for small savings out of daily earnings has also been proposed to build up a sense of security in the house.

The big problem of the villagers is that they do not have any records or documents of their land holdings since everything has been washed away by the tidal waves. The village offices which would have had these records of the land-holdings, have also been washed away by the tidal waves. The village offices which would have had these records of the land-holdings, have also been washed away. The only solution is to try to procure them from the Taluka Office which is not an easy job! Our volunteers have undertaken this task of trying to retrieve these documents for the distraught people, from the Taluka Office.

Conclusion: The trend of relief work for the next five or six weeks has now become somewhat clear. The emphasis on relief distribution is reduced and community organisation activities, including preventive medicine, and subsidiary income schemes, small savings etc. assume more and more importance.

In keeping with the change in the nature of relief work, the type of volunteers needed also changes. While there is still a need for men who may not know the local language but are able to join in clearing operations, inspire enthusiasm in the villagers by their example and supervise distribution, there is a greater need for women social workers who can awaken and mobilise local women for initiating long-term improvement in the home and moving towards normalcy.

It is earnestly hoped that with this unremitting effort and constant reflection and evaluation of the relief work, the victims will be able to build up a new life which will be both prosperous, as it was before the disaster, and also more community-oriented and based on mutual love and concern in the village.

January 25, 1978.

+ Rt. Rev.Dr. Joseph Thumma,
Bishop of Vijayawada,
Chairman,
Diocesan Relief Committee.
Bishop's House,
Vijayawada - 520 008,
A.P., INDIA.

1976

CATHOLIC MISSION CYCLONE RELIEF AND REHABILITATION CENTRE

VIJAYAWADA

STATISTICAL REPORT Period 15-1-1978 to 21-1-1978.

(This Report is compiled from the Weekly Reports submitted by the three Bale Camps in the tidal wave zone to the Central Office)

A. Relief Distribution

1. <u>Food:</u>	Rice	. . .	8,947 Kgs
	Wheat	. . .	700 "
	Dal	. . .	340 "
	Milk Powder	. . .	3,108 "
	Vegetables	. . .	80 "
	Chillies	. . .	46 "
	Tamarind	. . .	76 "
2. <u>Utensils:</u>	Plates	. . .	38
	Spoons	. . .	38
	Glasses	. . .	38
	Vessels	. . .	38
	Mugs	. . .	38
	Lamps	. . .	38
	Ladles	. . .	38
	Buckets	. . .	9
	Mats	. . .	130
3. <u>Clothing:</u>	Blankets	. . .	958
	Sarees	. . .	200
	Dhotis	. . .	420
	Towels	. . .	411
	Old Clothes	. . .	17 bags

B. Medical Care

Fever	. . .	316 Cases
Respiratory	. . .	696 "
Stomach	. . .	552 "
Diarrhoea	. . .	561 "
Others	. . .	2,910 "

C. Re-construction

1. Construction of Huts:

a) Houses constructed in collaboration with CARE	. . .	259
b) Sites cleared	. . .	3 Villages
c) Materials supplied for House construction:		
i) Palmyra leaves	. . .	28,900
ii) Bamboos	. . .	4,855
iii) Poles	. . .	121
iv) Side Poles	. . .	851

d) Houses constructed	. . .	63
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2. Village water supply:

a) Wells cleaned	. . .	8
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3. Farming Operations:

a) Threshing	. . .	214 acres
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4. a) Corpses buried/burnt	. . .	20
b) Carcasses	. . .	12

