INDIAN RED CROSS SOCIETY
ANNUAL REPORT 2017-18
Indian Red Cross Society
is a National Federation
of over 700 Red Cross Branches.
Neither the Headquarters
nor the branches
are by themselves the Society.
It is their collectivity
inter-woven together
that makes up the
Indian Red Cross Society.
They inspire, encourage and initiate
at all times, all forms
of humanitarian activities
so that
human suffering
be minimized, alleviated
even prevented
.... and thus contribute to creating
a more congenial climate for peace.
Hon’ble Shri Ram Nath Kovind  
Our President
Shri J P Nadda, Chairman
Managing Body 2017-18

Shri Jagat Prakash Nadda Chairman

Nominated Members

1. Shri Avinash Rai Khanna Vice Chairman
2. Dr. Tamilsai Soundarajan
3. Dr. S.S. Agarwal
4. Brig.(Dr.) B.D. Mishra (Retd.)
5. Dr. Samir Kumar Chaterjee
6. Dr. Krishna Murthi Bandhi

Elected Members

7. Mrs. Roma Wani,
8. Shri D.R. Sharma
9. Dr. Shyam Swaroop
10. Shri S. Balasubramanyam, IAS (Retd.)
11. Sri Basrur Rajeev Shetty
12. Dr. Harish L. Metha
13. Dr. Binay Bahadur Sinha
14. Sh. W.R. Marbaniang, IPS (Retd.)
15. Mrs Minati Choudhury
16. Shri Gaurish M. Dhond
17. Dr. Bhavesh F. Acharya
18. Shri Vijay Kumar Singhal

Honorary Treasurer
Shri M.P. Gupta

Honorary Legal Advisor
Late Shri Pavani Parameshwara Rao
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10. KERALA
11. ODISHA
12. TELANGANA
13. WEST BENAGAL
**DISASTER MANAGEMENT**

Disaster Management is defined as the organization and management of resources and responsibilities for dealing with all humanitarian aspects of emergencies, in particular preparedness, response and recovery in order to lessen the impact of disasters.

A disaster is a sudden, calamitous event that seriously disrupts the functioning of a community or society and causes human, material, and economic or environmental losses that exceed the community's or society's ability to cope using its own resources. Though often caused by nature, disasters can have human origins.

Disaster management aims to reduce, or avoid, the potential losses from hazards, assure prompt and appropriate assistance to victims of disaster, and achieve rapid and effective recovery.

There are three stages of the disaster risk management which are collectively called Disaster Management Cycle. Broadly, there are six phases in Disaster Management Cycle viz. Prevention, Mitigation, Preparedness, Response, Recovery and Reconstruction.

During the year April 2017 - March 2018 the IRCS Nhq, as before, responded to all kind of actions related to disaster management. The brief activity report is placed below.

**Relief sent to Andhra Pradesh for Flood/Cyclone in April 2017**

Non Food Items Released: 500 mosquito nets from Vikhroli warehouse

**Relief sent to Jammu for displaced people in June 2017**

Relief material was required for distribution among the refugees who had arrived in Jammu due to shelling at the India – Pakistan border. Relief material was sent for the use of the displaced population there.

IRCS dispatched the following relief material:

- 700 hygiene kits
- 200 solar lantern
- 500 kitchen sets
- 4000 plastic buckets
- 65 mattresses
- 27 gaddas
- 455 durries
- 1000 notebooks
- and 900
Relief sent to Uttarakhand for landslide and flood victims in July 2017
Following relief material was dispatched to Uttarakhand for land slide affected people:

- 200 family packs
- 200 stoves
- 1000 woollen blankets
- 50 tents

Assam and Manipur Floods July 2017

Unprecedented flooding in 2017 resulted in 943 deaths across India. 30 million people battled the deluge. 1.1 million people lived in 3,271 relief camps.

In the North East floods caused 156 deaths and destruction. In Assam alone, 600 villages were inundated.

DREF was raised and 3000 family packs were released for the state of Assam, 2 water purification units with capacity of providing 700 litres of water was installed in worst affected District of Karimganj in Assam. 2000 family packs, 2 water purification units along with 100 rapid latrines were released for Manipur flood relief response. Chlorine tablets and bleaching powder, alum and lime were also sent to the states to prevent the spread of diseases.

Gujarat Flood August 2017

Disaster: Heavy rains and floods in different places of Gujarat state.

NFI Released: - 1000 of beds sheets, 1500 tarpaulins, 1500 plastic buckets, 1000 each of blankets, kitchen sets, towels, saris, dhotis & mosquito nets, 279 lantern, 2183 cloth sheeting, 648 cloth pieces, 355 sleeping bag, 37 mattresses, 2103 mufflers, 43 pillow covers, 178 stove (kerosene), and 100 steel cupboards were sent from Viramgam warehouse, Gujarat.

Bihar, UP & West Bengal Floods August 2017

Monsoon rainfall started in the month of June and continuous rainfall in northern India and Nepal resulted in flooding across Bihar, Uttar Pradesh and West Bengal. Nepal received intense rainfall for several days and the resultant flood waters flowed through several districts in Bihar, Uttar Pradesh and West Bengal. While all three states were affected by floods, the situation in Bihar was quite alarming.

The death toll in Bihar was 514 and 17.2 million people were affected and more than four lakh people were kept in relief camps. Kosi, Mahananda, Gandak, Bagmati and Ganga rivers were in spate and had breached the embankments at several places.
In Uttar Pradesh, the death toll in the state was 101. 2.7 million people were hit by the floods.

In West Bengal, the Districts of Bankura, Birbhum, West Midnapur, East and West Burdwan, Howrah and Hoogly were severely affected by floods, 254 people lost their lives, 8.6 million people were affected as many rivers were in spate and had breached the embankments causing inundation of villages.

IRCS responded to the floods in Bihar, West Bengal and Uttar Pradesh with support from IFRC through DREF by dispatching the following relief material. For Bihar 15,000 assorted clothes, 01 water purification unit, 500 solar lanterns, 3000 kitchen sets, 6000 tarpaulins and 6000 mosquito nets. In addition the following relief material was sent to Bihar through the ICRC support: 1000 tarpaulins, 1000 buckets, 50 life straw water purification units, chlorine tablets and bleaching powder. For West Bengal and Uttar Pradesh assorted clothes, 2000 tarpaulins 2000 mosquito nets and 1000 kitchen sets each have been released.

IRCS, NHQ also dispatched water purification units, assorted clothes and other relief material to Bihar State Branch. The Red Cross District Branches also opened community kitchen to feed the affected population.

**Cold Wave – Bihar, Orissa and Haryana.** In January 2018, extreme cold waves hit the states of Bihar, Orissa and Haryana. IRCS NHQ, in response, released 3000 woollen blankets from the Viramgam warehouse (INR. 6,30,000/-) for the State of Bihar and 100 woollen blankets each (INR 4,20,000/-) for the States of Orissa and Haryana from Viramgram and Bahadurgarh warehouses.

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**Blood Bank**

**Introduction:**

Transfusion of blood is an essential part of modern health care management. The first Blood Bank was started in India by Indian Red Cross Society (IRCS) in 1942 at All India Institute of Hygiene & Public Health, Calcutta (West Bengal).

In 1977, the blood bank started operating from the Indian Red Cross Society, National Headquarters (IRCS, NHQ). The Blood Bank is running round the clock and provides the services to the needy patients. It was designated as Regional Blood Centre by State Govt. in 1996 and has been designated as Model Blood Bank in 2010 by National AIDS Control Organization, Ministry of Health and Family Welfare, Govt of India and is also certified by the BIS for ISO 9001:2008 and accredited by NABH & NABL.

The Nhq Blood Bank focuses on encouraging voluntary blood donation. It collects approximately 25000 units of blood annually which contributes about 10% of the total blood collected in Delhi. The percentage of voluntary blood collection is above 90% in IRCS as compared to the 20-50% ratio of the total collection made by other
blood banks of Delhi. The blood bank provides 90% of total collection of blood free of service charges to the patients admitted in the General Ward of Govt. Hospitals in Delhi as well as to 975 Thalassaemic patients registered with it (which is about 50% of all the Thalassaemics in Delhi).

The IRCS (NHQ) Blood Bank is fully equipped to collect blood at its premises and also has mobile teams, which go out frequently to hold Blood Donation Camps. The blood collected is tested for HIV I & II, HBs Ag, HCV, VDRL & Malaria. Blood grouping with Rh D and Antibodies Testing (three cell panel) is conducted by fully automated advance technology. To ensure effective utilization of blood, besides supplying whole blood, Red Cross also has the facility of component separation that provides different components of blood, like fresh frozen plasma, platelet rich plasma, platelet concentrate, packed cells, cryoprecipitate and platelet aphaeresis.

1. Blood Donation Awareness Programme through Publicity:

IRCS, Blood Bank conducts publicity to promote voluntary blood collection by stickers, posters, distribution of leaflets, announcements etc. in the public gatherings and also on the occasion of national and international days of Blood Donation and Blood Donors.

IRCS Blood Bank also spreads message about the information of the donation date, time, place etc. and some pictures about blood donation. The leaflets contain information of blood donation criteria, annual demand of blood etc. IRCS Blood Bank also publishes literature, columns in the print media and participates in talk shows in electronic media on special days.

2. Organizing Blood Collection Camps in and around Delhi:

The Society is fully equipped to collect blood within the premises of the Blood Bank and also has mobile teams which go out regularly to hold Blood Donation Camps. The mobile teams cover different parts of Delhi, Noida, Gurgaon, Ghaziabad, Faridabad, Bahadurgarh and even go to Pilani, Haldwani, Phagwara etc. Blood Donation Camps are organized in schools, colleges and other places with the help of religious, social, political, commercial, and military / paramilitary organizations.

Highlights of major camps:-

- A massive Blood Donation Camp was conducted on 24th April, 2017 by Sant Nirankari Mandal on the occasion of ‘Manav Ekta Diwas’ where 1370 devotees donated blood voluntarily. A total 2931 numbers of donors were provided by Sant Nirankari Mandal in 12 camps organized by them during the year.
- A total number of 705 units were collected from the volunteers in a camp conducted in BITS, Pilani, Rajasthan, from 3 - 6 Feb. 2017.
- Blood Donation Camp was organized in Parliament House on 13th December, 2017 on the occasion of the function held to mark the 14th Commemoration Day of the supreme sacrifice made by Security Personnel on the altar of duty while thwarting the attack of terrorists on Parliament House on 13-12-2001. Ministers of Lok Sabha and Raj Sabha also attended the function. 76 people paid homage to the departed souls by donating blood voluntarily, including their family members.

In the year 2017-18, Indian Red Cross Society, Blood Bank collected a total of 26908 units of blood out of which 25084 units were collected from voluntary blood donors. A total of 362 Blood Donation Camps were conducted in various places like Educational Institutions, Corporate Offices, Religious/Social Organizations etc.

The aim of the organization is to phase out replacement donors and achieve 100% voluntary blood donation in future.
Table Shows - Total No. of Camps including No. of Blood Units (2013-2014 to 2017-18)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>Colleges</td>
<td>4570(40)</td>
<td>4333(34)</td>
<td>3182(35)</td>
<td>3903(42)</td>
<td>4003(43)</td>
</tr>
<tr>
<td>b.</td>
<td>Schools</td>
<td>453(10)</td>
<td>742(14)</td>
<td>249(8)</td>
<td>336(18)</td>
<td>322(8)</td>
</tr>
<tr>
<td>c.</td>
<td>Social Organization</td>
<td>7183(85)</td>
<td>7212(89)</td>
<td>2394(111)</td>
<td>8411(89)</td>
<td>8645(108)</td>
</tr>
<tr>
<td>d.</td>
<td>Commercial Organization</td>
<td>5503(108)</td>
<td>5214(106)</td>
<td>4564(111)</td>
<td>6138(133)</td>
<td>4542(102)</td>
</tr>
<tr>
<td>e.</td>
<td>Political Organization</td>
<td>199(3)</td>
<td>551(03)</td>
<td>715(14)</td>
<td>1279(21)</td>
<td>221(3)</td>
</tr>
<tr>
<td>f.</td>
<td>Lions Club</td>
<td>147(2)</td>
<td>43(02)</td>
<td>22(1)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>g.</td>
<td>Services</td>
<td>137(3)</td>
<td>412(07)</td>
<td>816(9)</td>
<td>-</td>
<td>249(5)</td>
</tr>
<tr>
<td>h.</td>
<td>Red Cross State Branch</td>
<td>154(3)</td>
<td>46(01)</td>
<td>Nil</td>
<td>191(2)</td>
<td>2168(23)</td>
</tr>
<tr>
<td>i.</td>
<td>Banks</td>
<td>819(18)</td>
<td>1130(15)</td>
<td>668(16)</td>
<td>622(9)</td>
<td>616(14)</td>
</tr>
<tr>
<td>j.</td>
<td>Hotels</td>
<td>297(12)</td>
<td>177(06)</td>
<td>469(14)</td>
<td>359(9)</td>
<td>118(4)</td>
</tr>
<tr>
<td>K.</td>
<td>Blood Mobile Van in Public Places with NDMC at Palika Bazar</td>
<td>847(27)</td>
<td>644(26)</td>
<td>1145(39)</td>
<td>597(22)</td>
<td>706(35)</td>
</tr>
<tr>
<td>L.</td>
<td>Ministries</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>927(16)</td>
</tr>
<tr>
<td>M.</td>
<td>Hospitals</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>16(1)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>20354(312)</strong></td>
<td><strong>20504(303)</strong></td>
<td><strong>20224(358)</strong></td>
<td><strong>21836(349)</strong></td>
<td><strong>22539(362)</strong></td>
</tr>
</tbody>
</table>
3. Blood Donor Screening Processing & Storage of Blood

Donor blood is tested for infectious diseases (TTIs) such as HIV, HBs Ag, VDRL & HCV and blood group serology. The screening of Transfusion Transmitted Infectious Marker (TTIs) is done by ELISA Method.

### A. Testing report of infectious marker lab

Changes in Blood Screening Statistic during 2017-18:

- **Total HIV Positive Blood Donors is decreased** 0.12% (2016-17) to 0.11%
- **Total HBs Ag positive Blood Donors increased from** 0.64% (2016-17) to 0.66%
- **Total HCV positive blood is decreased** 0.44% (2016-17) to 0.36%
- **Total VDRL Positive Blood Donors increased from** 0.20% (2016-17) to 0.23%
- **Total Malaria Positive Blood Donors is 0.007%**

### B. Report of Component lab.

To ensure effective utilization of blood, besides supplying whole blood, Red Cross also provides its users with the facility of component separation like FFP, PRP, Platelet Concentrate, Packed Cells and Cryoprecipitate.

**Total Blood Components Preparation:**

<table>
<thead>
<tr>
<th>Year</th>
<th>Blood Components Prepared</th>
<th>Total Blood Component Prepared</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FFP</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Total Blood Components/Whole Blood/Red Cell Issues:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Blood Component /Whole Blood/Red Cell Issued</th>
<th>Free A</th>
<th>Paid B</th>
<th>Total (A+B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Blood Component</td>
<td>1658</td>
<td>4570</td>
<td>6228</td>
</tr>
<tr>
<td>2</td>
<td>Whole Blood/Red Cell</td>
<td>22474</td>
<td>3729</td>
<td>26203</td>
</tr>
<tr>
<td></td>
<td><strong>Total Issued (1+2)</strong></td>
<td>24132</td>
<td>8299</td>
<td><strong>32431</strong></td>
</tr>
</tbody>
</table>

Excess of Surplus Plasma /FFP to Reliance Life Sciences Pvt. Ltd.

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Excess of Plasma/FFP to Reliance Life Sciences Pvt. Ltd. (2017-18)</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>19700</td>
</tr>
</tbody>
</table>


A. In the year 2017-18, **51843** Blood/Blood components were prepared. The total **24132** units of blood components were issued free of cost to the patients admitted in Government Hospitals, Thalassaemic and Hemophilic Patients. **8299** units of blood issued against processing charges to the patients admitted in Private Hospitals/ Nursing Homes.

In the year 2017-18 NHQ Blood Bank issued about **19700** units of surplus plasma/FFP (3897.446 liters) to **Reliance Life Sciences Pvt. Ltd.**

B. Thalassaemia: In Delhi, there are about 2000 registered thalassaemic patients who are receiving blood from various Regional Centres like AIIMS, RML Hospital, Hindu Rao Hospital, LNJP Hospital, GTB Hospital and private blood banks. Out of which 975 patients are registered with Red Cross Blood Bank and more than 200 registered patients are from outside Delhi. IRCS continues to look after approx. 50% of the Thalassaemic patients in and around Delhi and provides Blood/Blood Components, to thalassemic patients and to the patients in Government Hospitals free of service charges.

5. Certificate of accreditation for ISO by BIS, NABH and NABL

The IRCS (NHQ) Blood Bank has been certified by IS/ISO 9001:2008, NABH and NABL w.e.f 2012 and 2013. Routine surveillance audit for the accreditation has been conducted by the auditor team in 2017-18 by BIS, NABL and NABH for renewal of accreditation.

6. External Quality Assurance Programme (EQAS):

IRCS (NHQ) Blood Bank has been enrolled with SDMH, Jaipur, (BEQAS), CMC Vellore, AIIMS and Bombay Red Cross for proficiency for infectious marker and serology testing.

7. Celebration of World Blood Donor Day
One week long programme (14.06.17 to 20.6.2017) was organized to enhance voluntary blood donation by spreading the message of Voluntary Blood Donation.

8. **Visit to Model Blood Bank, IRCS by Trainees from National Institute of Biologicals (NIB) / Universities/ Blood Bank Officials from various States**

The participants are taken for a Model Blood Bank visit to Indian Red Cross Society, New Delhi to enrich the knowledge on overview of procedures for testing in blood services, safety parameters etc. The visit facilitates the Blood Banks in strengthening the standards of Blood Services which were learnt during the training period and spreads awareness while enlightening the students for blood donations. The training was imparted on: Automated Cell counter, Automated Blood grouping technique, transfusion transmitted infections (TTIs), ADR monitoring, Blood component preparation Plasma Components and documentation of processes.

**Training at Model Blood Bank, IRCS**
### Support for IRCS (NHQ) Model Blood Bank (2017-18):

<table>
<thead>
<tr>
<th>S. No</th>
<th>Fund Raised through</th>
<th>Total Amount Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>NACO Support through DSACS (2017-18)</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Blood Transport Van</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Manpower support - Driver, Attendant</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. POL for Blood Transport van</td>
<td>1,50,000/-</td>
</tr>
<tr>
<td></td>
<td><strong>Blood Mobile Van</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Manpower support - Driver, Attendant and Cleaner.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>POL - Blood Mobile Van and Bus</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Manpower support for Model Blood Bank</strong> - Four Lab. Technicians, one Lab Attendant and one Counselor.</td>
<td>3,00,000/-</td>
</tr>
<tr>
<td></td>
<td><strong>Housekeeping Manpower support</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>30,000 Blood Bags</strong> (single, double, triple and quad bags.)</td>
<td>1,92,000/-</td>
</tr>
<tr>
<td></td>
<td><strong>Infectious Marker Kits</strong> (HIV, Hepatitis B and Hepatitis C).</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Refresher Training</strong> for Blood Bank Staff.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>State Blood Transfusion Council (SBTC)</td>
<td>6,25,000/-</td>
</tr>
<tr>
<td></td>
<td>Refreshment of Blood Donor @ Rs. 25/- per donor</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Processing Charges of blood /blood components</td>
<td>61,36,480/-</td>
</tr>
<tr>
<td></td>
<td><strong>Rs. 33,41,140/-</strong> collected from Processing Charges for 3635 units for issue of blood /blood components to the patients admitted in Private Hospitals/ Autonomous Body/ Nursing Home</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Rs. 22,86,300/-</strong> collected from Processing Charges for 4226 units for issue of blood /blood components to the patients admitted in Private Ward of Govt. Hospitals/Private Wards of Govt. Blood Bank &amp; Govt. Hospitals.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Rs. 1,86,600/-</strong> collected from Security Deposit against replacement donors for issue of blood /blood components.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Rs. 3,22,440/-</strong> collected for x-matched for 2687 units issue of blood /blood components.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Pt. Madan Mohan Malviya Hospital</td>
<td>5,13,270/-</td>
</tr>
<tr>
<td></td>
<td>Amount collected from Pt. Madan Mohan Malviya Hospital for Processing Charges for issue of blood /blood components.</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>M/s Reliance Life Sciences Pvt. Ltd.</td>
<td>1,01,81,394/-</td>
</tr>
<tr>
<td></td>
<td>Amount collected from M/s Reliance Life Sciences Pvt. Ltd. for the supply of surplus plasma / FFP</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td><strong>Donation from the company under CSR</strong></td>
<td>8,07,500</td>
</tr>
<tr>
<td>----</td>
<td>----------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td></td>
<td>Amount collected in donation from different Companies under CSR</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td><strong>1,89,05,644/-</strong></td>
</tr>
</tbody>
</table>

**TB Project, IFRC Supported**

**Introduction:**

Tuberculosis (TB) is one of India's major public health problems. According to WHO estimates, India has the world's largest tuberculosis epidemic. Indian Red Cross Society (IRCS) is playing an increasingly important role in ensuring that TB cases are treated successfully and stigma and discrimination against the patients is eliminated. With the aim to reduce the raised burden of MDR TB, IRCS addresses vulnerable category of patients to retreatment patients. Their treatment is being supervised and follow up is adhered to.

Since 2009, IRCS has been working for TB patient in different states at the community level. In 2017 Indian Red Cross society targeted 700 cat II patients in selected pockets of Haryana, Uttar Pradesh, Karnataka and Gujarat. The project covers awareness meetings, care and support, patients counseling, IEC activities and discussion sessions at the government health facility within the designated TB units.
**Goal and Objectives:**

- To ensure that Catt II TB patients, i.e. those who have stopped treatment without completion, are put back on treatment until they are cured.
- To ensure effectiveness of treatment by providing care and support to the most vulnerable TB cases.
- Prevention of Multi Drug Resistant TB.
- To reduce the number of deaths, illness and impact from Tuberculosis and MDR TB in target areas.
- To reduce the stigma and discrimination around TB through behavioural change communication and inclusion of TB patients in main stream.

**Target Geographical areas & Patient**

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>State</th>
<th>Districts</th>
<th>Patient</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Haryana</td>
<td>Faridabad &amp; Palwal</td>
<td>150</td>
</tr>
<tr>
<td>2</td>
<td>U. P</td>
<td>Amethi, Varanasi and Lucknow</td>
<td>150</td>
</tr>
<tr>
<td>3</td>
<td>Karnataka</td>
<td>Bangalore, Tumkur and Mandya</td>
<td>150</td>
</tr>
<tr>
<td>4</td>
<td>Gujarat</td>
<td>Ahmedabad Urban &amp; AMC</td>
<td>250</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>Faridabad &amp; Palwal</strong></td>
<td><strong>700</strong></td>
</tr>
</tbody>
</table>

1. **Haryana**

The TB Programme was extended for the year 2017 under which a target of 150 TB patients was kept. In addition, 48 TB patients who were under treatment till 31st Dec 2016 were also carried forward for treatment during the year 2018. Now till Dec 2017, 120 new TB patients were enrolled against the target of 100 patients in Faridabad. Thus, by 31st Dec, 2017, 168 (120 new+48 old) TB patients were given treatment & nutritional care support from Jan to Dec 2017 under the project.

On the request of Haryana State Branch, the IRCS NHQs sanctioned the TB Project India for District Palwal also from Jan 2017 with a target to treat 50 cat-II TB patients. Till 31st Dec 2017, 57 TB patients were enrolled in district Palwal for treatment and nutritional care & support.

Attention was paid on awareness activities also during the year. In this regard, 28 advocacy awareness meetings and 167 mohalla meetings were arranged in Faridabad & Palwal by the Red Cross volunteers and the District Coordinator so that the TB suspects living close to the TB patients and others in
surrounding areas came forward for early diagnosis & treatment. Hand bills on TB were distributed in the community.

Through the DOT centres and home visits almost 5120 counselling and follow up visits were undertaken by the project staff and volunteers. 3955 hand bills were also distributed.

The report of the Haryana State branch shows that cat II patients’ adherence rate is 98%.

<table>
<thead>
<tr>
<th>State</th>
<th>No. of CAT II Patient enrolled</th>
<th>No. of cured</th>
<th>No. of Ongoing Treatment</th>
<th>Death/Transf.</th>
<th>Dis.Cont./Failure</th>
<th>Default</th>
<th>Shifted to MDR</th>
<th>No. of CAT II Patient adherence (without default)</th>
<th>% of Adherence ensured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Haryana</td>
<td>225</td>
<td>122</td>
<td>81</td>
<td>Death-12</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>220</td>
<td>98%</td>
</tr>
</tbody>
</table>

2. Uttar Pradesh

The TB Programme 2017 was targeted in the selected pockets of Amethi, Varanasi and Sub urban area of Lucknow districts with 150 Cat-II patients i.e. 50 each in Amethi, Varanasi and Lucknow districts. 15 volunteers are working under the programme. Nutritional support is also being given to all identified 150 Cat II patients along with transport facility to some of the needy Cat II patients. Around 24000 no. of IEC material was distributed in the project area. Attention was paid on awareness activities in the year 2017, 53 advocacy awareness meetings, 12 meetings with DTO and 42 meetings were held with RNTCP in all the 3 districts.

Care & Support services were rendered to 150 Cat-II patients. District Coordinator along with the volunteers made home visits to the Cat-II patients in the districts. During their visits they counselled the Cat-II patients & their family members and also motivated them to ensure that the patients must adhere to the DOTS treatment. Care & support service was given to the Cat-II patients. TB Project in Uttar Pradesh witnessed 09 deaths (07 in Amethi, 01 in Lucknow & 01 in Varanasi) and 07 patients defaulted.
The Karnataka State branch has enrolled 150 Cat II patients for the TB Programme (50 each in Bangalore, Mandya, Tumkur). After the identification of patients, the Red Cross staff and volunteers met those patients in their houses and collected all the information about their family background, economic condition and past history of treatment etc.

During the visits, counselling and moral support was provided to patients and family members. Five volunteers are working under TB project.

The adherence report of the Karnataka State branch shows that, the number of cat II patients’ adherence rate is 92%. Following are the adherence report,
Gujarat

The branch has identified 250 Cat II patients, i.e. 100 from Ahmadabad district, 50 from AMC (Ahmadabad Municipal Corporation) and 100 from Ahmadabad urban area respectively. 25 volunteers are working under TB project.

Gujarat has organized 58 awareness meetings in which about 6000 people participated. This activity helped in early diagnosis, reduction of stigma and decreased transmission of TB. The main purpose of awareness campaign is to spread awareness in community that this disease is totally curable and drugs are being provided free of cost in all government hospitals in India. This event also conveys some important messages in the community, such as, how to protect ourselves from TB and what is the proper treatment etc.

All the Cat II patients were benefitted by the care and support provided by the IRCS volunteers of TB Programme. 6000 brochures were distributed in the project areas. Through the DOT centers and home visits 4500 counseling sessions and follow up given by the project staff and volunteers.

The report of the Gujarat State branch shows that Cat II patients’ adherence rate is 100%.
This Annual TB Report (TB India 2017) provides an update on services provided through the year under Revised National TB Control Programme (RNTCP) and progress/status of initiatives implemented in 2016. India has highest burden of both TB and MDR TB based on estimates reported in Global TB Report 2016. An estimated 1.3 lakh incident multi-drug resistant TB patients emerge annually in India which includes 79000 MDR-TB Patients estimates among notified pulmonary cases. India bears second highest number of estimated HIV associated TB in the world. An estimated 1.1 lakh HIV associated TB occurred in 2015 and 37,000 estimated number of patients died among them. The estimates of TB for India has been revised upwards based on the newer evidences gained. This apparent increase in the disease burden reflects the incorporation of more accurate data. With backward calculations, both tuberculosis incidence and mortality rates are decreasing from 2000 to 2015. The incidence of TB has reduced from 289 per lakh per year in 2000 to 217 per lakh per year in 2015 and the mortality due to TB has reduced from 56 per lac per year in 2000 to 36 per lac per year in 2015.

**The Treatment Services:**

The major additions reflected in terms of strategies in treatment of TB are:

- Daily regimen for treatment of TB
- Use of Bed aquiline for treatment of drug resistant TB with Drug susceptibility testing (DST) guided treatment
- ICT based adherence support and
- Post treatment follow up

Goal and Objectives:

- To ensure that 400 (cat-I/cat-II defaulters) TB patients, i.e. those who have stopped DOTs treatment without completion, are put back on treatment until they complete the course of treatment.
- To ensure effectiveness of treatment by providing care and nutritional support to the most vulnerable TB cases.
- To screen minimum 2500 suspected missing cases of TB from most vulnerable communities and bring them back to RNTCP treatment umbrella by intensive social mobilization and advocacy work in the vulnerable clusters of Urban and rural areas of Amritsar and Jalandhar by intensified case-finding (ICF)
- To carry out community awareness outreach activities for bringing awareness about TB and impacts of discontinuation of treatment.
- To reduce the stigma and discrimination around TB through behavioural change communication campaign and inclusion of TB patients in important forums.

Target Geographical Areas & Patient:

<table>
<thead>
<tr>
<th>State</th>
<th>Districts</th>
<th>Patient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Punjab</td>
<td>Amritsar &amp; Jalandhar</td>
<td>400</td>
</tr>
</tbody>
</table>

Patient Adherence to TB Treatment:
Adherence to treatment means that a patient is following the recommended course of treatment by taking all the prescribed medications for the entire length of time necessary. Adherence is important because TB is nearly always curable if patients adhere to their TB treatment regimen.

Brief Summary of 2017:
The TB Programme 2017 targeted in Amritsar & Jalandhar districts of Indian Red Cross Society Punjab State Branch with 400 (cat-I/cat-II defaulters) TB patients. (145 patients carried forward from the year 2016 and 248 patients enrolled in year 2017). 21 volunteers are working under TB programme 2017. All the 393 patients who were under treatment during the reporting period were given care and support services by the Red Cross volunteers. 154 awareness meetings were held on TB. 29080 pamphlets were distributed to the community. Through the DOT centres and home visits almost 5133 counselling and follow up given by the Project staff and volunteers to TB patients. The year witnessed 19 deaths, 09 in Amritsar & 10 in Jalandhar. 15 patients are MDR, 07 in Amritsar & 08 in Jalandhar and 02 patients defaulted, both in Amritsar.

Care & Support services were based on nutritional support (high protein nutritional supplement such as Chickpea (Chana), Broken Wheat(Daliya), Soya bean & Nutri) was provided to all the vulnerable TB cases under treatment as per funds sanctioned under the project. The nutritional care support service was provided by the Red Cross volunteers under the direct supervision of the District Coordinator. It is mentioned here that the State Coordinator got direct feedback from TB patients through telephone about the nutritional supplement being provided through Red Cross volunteers under the project.

The Punjab State branch expended Rs.15,32,197/- in the period of January to December 2017 under the TB Project. The salary head Rs.7,60,682/-, administration expenditure is Rs.80,632/-, activity cost is Rs.4,85,683/- and volunteers honorarium is Rs.2,05,200/-. Following are the expenditure details:

<table>
<thead>
<tr>
<th>Salary part</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Consultant Salary</td>
<td>2,61,360</td>
</tr>
<tr>
<td>State finance &amp; admin salary</td>
<td>2,14,606</td>
</tr>
<tr>
<td></td>
<td>7,60,682</td>
</tr>
</tbody>
</table>
### Punjab

<table>
<thead>
<tr>
<th>Punjab</th>
<th>District coordinators salary</th>
<th>2,84,716</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admin cost</td>
<td>General admin state &amp; Dist. level</td>
<td>80,632</td>
</tr>
<tr>
<td>Activity cost</td>
<td>Community advocacy meetings</td>
<td>4,749</td>
</tr>
<tr>
<td></td>
<td>Community Mobilization NukkadNatak</td>
<td>9,300</td>
</tr>
<tr>
<td></td>
<td>Screening Camp</td>
<td>2,31,997</td>
</tr>
<tr>
<td></td>
<td>Care and support -- Districts.</td>
<td>2,39,637</td>
</tr>
<tr>
<td>Volunteers</td>
<td>Districts Volunteer’s honorarium</td>
<td>2,05,200</td>
</tr>
<tr>
<td><strong>Total (Jan-Dec-2017)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Achievements:

1. **Till 31st Dec - 2017, 393 (145 old and 248 new) TB patients were given by the District TB Control Officers (Jalandhar & Amritsar) with the target of 100% success rate of adherence to treatment. And the programme achieved a success rate of 99%.

2. **Social mobilization** - Social mobilization & awareness activities were also organized in both districts. In this regard, the major activities are mentioned as under: -
   - Nukkad Natak (Street plays) & Magic shows = 4
   - Group awareness meetings = 154
   The total no. of people reached during the above mention activities.

3. **Screening of minimum 2500 suspected missing cases of TB from most vulnerable communities:**

   There was a target of organizing 8 Health check–up and screening camps to identify 2500 suspected TB cases. During the year 2017, 4 camps were organized (3 in Amritsar & 1 in Jalandhar districts) with the support of District Health Department, and 2325 people were screened. 31 TB patients were diagnosed and were sent to DOTS centre for treatment.

4. **Money saved by roll back of CAT II cases to complete adherence preventing MDR TB.** The estimated cost of medication of MDR is approx. INR 2,00,000 per patient. IRCs has enrolled total 873 Cat II patients in the year 2015, 2016 & 2017. The total money saved is INR 17,46,00,000 (Euro 23,88,672 approx.)

<table>
<thead>
<tr>
<th>Year</th>
<th>No. Of Cat II Patients Enrolled</th>
<th>Estimated cost of MDR medication per patient</th>
<th>Total money saved (INR)</th>
<th>Total money saved (Euro)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>278</td>
<td>2,00,000</td>
<td>5,56,00,000</td>
<td>7,60,654</td>
</tr>
<tr>
<td>2016</td>
<td>350</td>
<td>2,00,000</td>
<td>7,00,00,000</td>
<td>9,57,658</td>
</tr>
<tr>
<td>2017</td>
<td>245</td>
<td>2,00,000</td>
<td>4,90,00,000</td>
<td>6,70,360</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>873</strong></td>
<td></td>
<td><strong>17,46,00,000</strong></td>
<td><strong>23,88,672</strong></td>
</tr>
</tbody>
</table>
## Comparison of Activities done in the year 2015, 2016 & 2017

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Enrolment of TB patients</td>
<td>400</td>
<td>353</td>
<td>400</td>
<td>457</td>
<td>400</td>
<td>393</td>
</tr>
<tr>
<td>2</td>
<td>Holding of Screening camp</td>
<td>6</td>
<td>6</td>
<td>8</td>
<td>6</td>
<td>8</td>
<td>4</td>
</tr>
<tr>
<td>3</td>
<td>Tracing out of suspected TB cases</td>
<td>1000</td>
<td>1584</td>
<td>2500</td>
<td>1558</td>
<td>2500</td>
<td>2325</td>
</tr>
<tr>
<td>4</td>
<td>Holding of advocacy awareness meetings</td>
<td>32</td>
<td>84</td>
<td>80</td>
<td>92</td>
<td>80</td>
<td>154</td>
</tr>
<tr>
<td>5</td>
<td>Nukkad Natak &amp; Magic shows on TB</td>
<td>8</td>
<td>7</td>
<td>20</td>
<td>11</td>
<td>20</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>District</th>
<th>Total Patients enrolled</th>
<th>CAT-II</th>
<th>MDR</th>
<th>XDR</th>
<th>2nd time Cat-II</th>
<th>Total</th>
<th>Cured</th>
<th>No. of Deaths</th>
<th>Not Traceable</th>
<th>Transferred out</th>
<th>Started Treatment</th>
<th>Failure</th>
<th>Defaulted Treatment</th>
<th>Patients under treatment</th>
<th>MDR &amp; XDR (A)</th>
<th>Cat-II (B)</th>
<th>2nd time Cat-II (C)</th>
<th>Total under treatment (A+B+C)</th>
<th>Number and % of TB patients’ adherence (without default)</th>
<th>HIV Pos.</th>
<th>Diabetic</th>
</tr>
</thead>
<tbody>
<tr>
<td>c/f from 2016 Amritsar</td>
<td>52</td>
<td>6</td>
<td>3</td>
<td>61</td>
<td>47</td>
<td>5</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>3</td>
<td>1</td>
<td>-</td>
<td>5</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>60(98%)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>2017 Amritsar</td>
<td>132</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>132</td>
<td>68</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>54</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>131(99%)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>c/f from 2016 Jalandhar</td>
<td>73</td>
<td>5</td>
<td>1</td>
<td>5</td>
<td>84</td>
<td>71</td>
<td>5</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>2</td>
<td>1</td>
<td>5</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>84(100%)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>2017 Jalandhar</td>
<td>113</td>
<td>3</td>
<td>-</td>
<td>-</td>
<td>116</td>
<td>39</td>
<td>5</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>67</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>116(100%)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>TOTAL</td>
<td>370</td>
<td>14</td>
<td>1</td>
<td>8</td>
<td>393</td>
<td>225</td>
<td>19</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>8</td>
<td>2</td>
<td>15</td>
<td>121</td>
<td>-</td>
<td>136</td>
<td>391</td>
<td>99%</td>
<td>4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Total TB suspects & confirmed TB cases identified during the year 2017

**Through organizing of Screening Camps & Awareness**

<table>
<thead>
<tr>
<th>Patients Examined</th>
<th>Through organizing of Screening Camps (A)</th>
<th>Through Awareness, Follow-ups &amp; Individual Contacts</th>
<th>Grand Total (A+B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Patients visited the camp</td>
<td>2325</td>
<td>-</td>
<td>2325</td>
</tr>
<tr>
<td>No. of Patients having chest problems examined</td>
<td>920</td>
<td>186</td>
<td>282</td>
</tr>
<tr>
<td></td>
<td></td>
<td>96</td>
<td>1202</td>
</tr>
<tr>
<td>Referred for sputum microscopy</td>
<td>192</td>
<td>186</td>
<td>282</td>
</tr>
<tr>
<td></td>
<td></td>
<td>96</td>
<td>474</td>
</tr>
<tr>
<td>Referred for x-ray</td>
<td>196</td>
<td>131</td>
<td>131</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-</td>
<td>327</td>
</tr>
<tr>
<td>Positive TB Patients identified</td>
<td>31</td>
<td>12</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>47</td>
</tr>
</tbody>
</table>

### People reached during reporting period 2015, 2016 & 2017

<table>
<thead>
<tr>
<th>Year</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
<th>Indirect recipients</th>
<th>Total people reached</th>
<th>Total people covered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Planned</td>
<td>Actual</td>
<td>Planned</td>
<td>Actual</td>
<td>Planned</td>
<td>Actual</td>
</tr>
<tr>
<td>2015</td>
<td>12000</td>
<td>21578</td>
<td>12000</td>
<td>20134</td>
<td>24000</td>
<td>41712</td>
</tr>
<tr>
<td>2016</td>
<td>20,000</td>
<td>23,720</td>
<td>20000</td>
<td>21,981</td>
<td>40,000</td>
<td>45,701</td>
</tr>
<tr>
<td>2017</td>
<td>18000</td>
<td>25497</td>
<td>18000</td>
<td>21231</td>
<td>36000</td>
<td>46728</td>
</tr>
</tbody>
</table>
PICTURES SHOWING ACTIVITIES OF THE PROJECT
NUTRITIONAL CARE SUPPORT GIVEN TO TB PATIENTS UNDER TREATMENT
IRCS –ICRC Cooperation Project

Background:

The IRCS-ICRC Cooperation project is supported by International Committee of the Red Cross (ICRC), Regional Delegation, based at Delhi. The ICRC supports the Indian Red Cross Society to conduct programmes and activities to disseminate correct and proper use of Red Cross Emblem to minimise its misuse; awareness programmes on Fundamental Principles and Geneva Conventions, Safer Access, Social Emergency Response Volunteer (SERV) Programme, First Aid Programmes, Youth Programmes, Livelihood Activities and Family News Service. The activities planned are awarded to the branches for implementation in the form of annual plan of action.

In the year 2017-18 the IRCS-ICRC cooperation activities covered fifteen states which were assigned to conduct the following activities:-

(A) Social Emergency Response Volunteer (SERV) Programme,
(B) Youth programme
(C) Livelihood programme
(D) Family News Service.
(E) Safer Access Framework (SAF)
(F) Physical Rehabilitation
(G) International Humanitarian Law (IHL)
(H) Communications


The programme states were (15) : Assam, Andhra Pradesh, Bihar, Chhattisgarh, Gujarat, Jammu & Kashmir, Jharkhand, Maharashtra, Manipur, Meghalaya, Telangana, Odisha, Tamil Nadu, Uttar Pradesh, West Bengal and National Headquarters.

Total expenditure: ₹1.90 crore.

Activities at glance - 2017-2018

(A) Social & Emergency Response Volunteer (SERV) Programme -- The name and acronym for First Medical Responder (FMR) has now been changed to Social Emergency Response Volunteers (SERV). It is envisaged that the SERVs would:
1. Act as First Responders in times of emergencies,
2. Educate the community to make them more resilient to disasters to which the community is vulnerable, and
3. Bridge the gap between the community and the Government programmes.

The concept of SERV is premised upon the principles of community based disaster risk reduction. It recognizes that 1) communities understand their problems and opportunities better than anyone else, 2) a community is more interested to understand its problems than anyone else, 3) community is the key stakeholder for the development of the country, 4) local communities are capable of initiating and sustaining their own response to emergencies and sustain their work.
(B) **Livelihood programme:** A multiyear partnership on livelihood projects was started in 2016 aimed at addressing the livelihood needs in identified vulnerable households/communities in the selected IRCS State Branches (Manipur, Maharashtra, Odisha & J&K). The main approach of implementing livelihood programs is need-based, identified through participatory needs assessment in each State (women headed households in Manipur and J&K, vulnerable communities in Odisha and Maharashtra).

(E) **Safer Access Framework (SAF)** -- Five SAF awareness sessions were undertaken during the year and 9 State Branches conducted SAF Assessment & planning workshops. SAF action plans were developed during the workshops.

(F) **Physical Rehabilitation:** Support was provided for strengthening of existing physical rehabilitation centres & capacity building of Orthopaedic and Physiotherapy units. The project is meant to identify people with disability, make referrals, provide assistive devices’ service and follow up. ICRC continues to support IRCS in developing and delivering training module on “mainstreaming disability during disasters” for specific IRCS training programmes.
(G) **International Humanitarian Law (IHL):** IRCS has expressed a clear interest in engaging more in the promotion of IHL, and seeks the partnership of ICRC to grow the requisite competencies/capacities within the IRCS to support the development and implementation of related activities.

(H) **Communications:** IRCS had desired to revamp their communications structure. The emphasis is now on targeting the emerging trends, such as social media, beneficiary communication, dynamic website, institutional profiling, communication with stakeholders, addressing partnership issues and resource mobilization. ICRC shall, in collaboration with IFRC, work towards addressing all of it for raising the profile of IRCS NHQ.

(I) **First Aid:** The Indian Red Cross Society (IRCS) is a part of the International Red Cross and Red Crescent Movement. One of the most common activities that all national societies perform is first aid training and providing first aid cover.

Today, First Aid is one of the core and crucial activities of the IRCS. This is the main strength of the Red Cross and Red Crescent Movement. The National Headquarters is regularly organizing workshops & trainings in basic FA with the aim to update the volunteers in the latest trends in this field thus contributing to strengthen the capacities of IRCS FA trainers. It helps to build up the capacity of the IRCS Branches in India to respond to humanitarian needs both in emergencies and in day to day support of the most vulnerable people. The trained personnel are deployed in local, national and international emergencies as and when needed.

**First Aid Training in NHQ:** The National Headquarters with the help of funding agencies, All India Institute of Medical sciences (AIIMS), Delhi and Magen David Adom (MDA), Israel conducted 03 First Aid trainings in National Headquarters, Delhi to create master trainers. The trainees were selected from all parts of India.

Apart from these the National Headquarter also organizes meetings and trainings two to three times in a year for focal persons / FA coordinators and other support staff at Headquarters, Delhi.
Family News Service/Restoring Family Link

Family News Service takes action when traditional means of communication (Telephone lines, electronic media and the postal services) are broken and as a consequence relatives are unable to make contact with each other.

These services are offered to:
- Family members separated due to conflicts, disasters or any other situation of humanitarian crisis,
- Refugees and asylum seekers,
- Migrants,
- Unaccompanied children and
- Migrants and their families.

FNS Activity Report 2017-18

In the year 2017-18, Indian Red Cross Society National Headquarters (IRCS NHQ) supported Tamil Nadu, West Bengal, Assam, Manipur and Telangana state branches in the Family News Service Programme with the help of International Committee of Red Cross (ICRC). Followings are the achievements during the period 2017-18.

- Recruited state FNS focal person at Tamil Nadu, Manipur and Assam IRCS State Branches.
- Complete IRCS (NHQ) FNS case worker review and submission of report.
- Complete the Tamil Nadu and West Bengal, FNS monitoring and evaluation visits.
- FNS Orientation Training for Volunteers organised at Alipore District, West Bengal. 33 people participated from 10 different districts.
- IRCS West Bengal FNS Coordinator was deputed to participate in the Training of Occasional Training at Thailand from 20-22 February 2018.
- West Bengal Project Coordinator along with FNS trained volunteers visited 05 correctional Homes in different district of West Bengal.

- Tracing case and RCMs time line: During the period 2017-18, many tracing cases have finalized since 2012 to 2017, the details are;
  - 2012: 16 tracing cases closed
  - 2013: 9 tracing cases closed
  - 2014: 13 tracing cases closed
  - 2015: 7 Tracing cases and 24 RCM closed
  - 2016: 51 Tracing cases closed and 205 RCM closed
  - 2017: 4 Tracing case closed and 11 RCM closed
Following are the FNS tracing cases and RCMs details under 2017-18.

**Details of Cases 2017-18**

<table>
<thead>
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**Youth Program**

IRCS launched Youth Program in 2015 with the support of ICRC in around 88 school/colleges, 44 communities from 22 districts in 11 State Branches [Maharashtra, Gujarat, Andhra Pradesh, Tamil Nadu, Odisha, Chhattisgarh, Assam, Manipur, Nagaland, Meghalaya, West Bengal]. The program has three key objectives –

- To enhance the understanding about the Red Cross Red Crescent Movement & its Fundamental Principles and promote peace and harmony among the youth and the selected communities.
- To strengthen the capacity of the YRC in the area of Hygiene Promotion, Household Water Treatment, Basic First Aid and Promoting Peace and harmony.
- To contribute towards increasing the awareness of and behavioral changes in the selected communities on Hygiene Promotion, Household Water Treatment and basic First Aid.
• IRCS-ICRC youth program is also considering an intensive - youth led community based interventions - component added to the J/YRC level activities.

**Key activities under youth program**

- Trainings to selected teachers and students on Red Cross, Youth program activities as well as on Hygiene Promotion, Water & Sanitation and First Aid.
- Initiation of preparation of visibility activities (wall paintings, posters etc) and printing of behavior change communication material etc.
- Initiation of behavior change communication sessions in communities on WASH, First Aid and Health.
- Exposure visits of selected Community members/J/YRC Members to other villages to observe community development approaches.
- Initiation of Providing WASH materials (e.g. water filter, soap) and FA Kits and FA Posts in the communities as per need.
- Initiation of clean school/college- Healthy school/college and clean village- Healthy village campaigns.
Youth as an Agents of Behavioral Change (YABC) Training Program

IRCS (NHQ) along with the IRCS Odisha State Branch conducted a YABC Training Program in Bhubaneswar from 23rd-27th December 2017 with the support of IFRC. In it 24 Youth Red Cross Volunteers/Members from 7 state branches (Karnataka, Jharkhand, Andhra Pradesh, West Bengal, Telangana, Bihar and Odisha participated. The purpose of the Training Program was:-

- Enhance participants’ awareness and understanding of issues related to the promotion of a culture of non-violence and peace, while equipping them with intra and interpersonal skills to embody, disseminate and act upon the seven Fundamental Principles and their underpinning humanitarian values.

- Bring to the participants an innovative format for conducting P&V activities (an interactive, experiential and non-cognitive self and group-learning platform) as well as peer education knowledge and techniques.

**Expected outcome**

- Ability to describe and promote the main lines of thinking of the Federation regarding P&V-related issues, especially non-discrimination and respect for diversity, intercultural dialogue, social inclusion, gender, as well as violence prevention, mitigation and response.

- Capacity to use and adapt the non-cognitive methodology and materials of the YABC toolkit to their context, while respecting the global coherence of the initiative.

- Deepened knowledge of the fundamental notions related to youth learning, and more specifically peer education techniques, in order to be able to take them into account and put them into practice when conducting sessions related to the YABC initiative in their National Society, region and/or zone.

- Acquisition and application of interpersonal skills (e.g. active listening, empathy, critical thinking, dropping bias, non-violent communication, collaborative negotiation and mediation) and techniques to strengthen their personal resilience and operate from inner peace in their daily RCRC work.
The action packed National Youth Festival organized by the Indian Red Cross in partnership with the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC) was held from 11-14 February, 2018. It was a challenge to bring nearly 400 young boys and girls from across the country, keep them engaged and entertained for three days. However, the NHQ team had designed the event in such a manner that along with the youth, their teacher counselors too remained joyfully occupied. The participants thanked Amity University for hosting the event in their sprawling NOIDA campus and the IRCS Haryana state branch for sponsoring and sharing some of the expenses.
The event had glitz, excitement, bonding and entertaining skill development sessions. All entered for grooming of the young minds into responsible citizens of tomorrow.

The event began with a larger than life inaugural function in which Youth Icons of today’s India namely Ritesh Malik (entrepreneur), Umesh Vikram Kumar (Para Badminton Athlete), Nipun Malhotra (Nipman Foundation), and Angad Singh Bedi, Film Actor and Cricketer were felicitated for their achievements. Their inspiring speeches shall be cherished by the youth for long.

The excitement of the extravaganza reached its crescendo when all the participants got the opportunity to visit Rashtrapati Bhawan. Eight of the participants got a lifetime opportunity to speak in the Darbar Hall in front of a packed house and the President of India who is also the President of the Indian Red Cross Society. They also had snacks there and got a chance to enter the Mughal Gardens, which was especially opened for them. The Hon'ble President, Mr Ramnath Kovind, was pleased to receive the youth and congratulated the IRCS for hosting first ever national level youth festival. Ms Anupriya Patel, Minister of State for Health & Family Welfare was also present on the occasion and made an impressive address.

The Volunteers were exposed to a bouquet of interactive sessions on flash-mob, career building, Red Cross emblem and RC principles & values. The evening of Day I saw several thrilling dance items, drama enactment and other competitive performances. The winners of the cultural show were West Bengal (First), Himachal Pradesh (Second) and Odisha (Third). Consolation prize was given to the teams from Chandigarh and Goa. The jury also decided to give Ms Piyali Karmakar (West Bengal) and Ms Shaina (Haryana) leading artists of a dance drama for their brilliant performances.

“It was once in a life time opportunity, provided to us by the Indian Red Cross Society,” said Piyali Karmakar of West Bengal,“. She also added that all the events were lined up at a fast pace and were befitting the energy of Youth.

The volunteers also participated in an interesting quiz competition. The quiz master, Amit Arora, also the anchor for the event, lifted the spirits of the participants by conducting the event in an interesting manner. Team from Punjab won the competition and Chandigarh team was adjudged the runners up. The event also showcased the importance of First Aid in community life by scripting a situation of the university campus. The festival ended with a gala dinner which was attended in full strength by the staff of the IRCS, IFRC and ICRC.
Indian Red Cross at CSR Fair

The introduction of the Companies Act has changed the CSR landscape in India by putting in place-legal provisions that have had a domino effect that includes better informed and sensitized stakeholders, and a development sector that has begun to align itself to accepting CSR funds from corporates. In the realm of Business Sustainability, SEBI has mandated Business Responsibility Reporting for top 500 listed companies based on their market capitalization from 1 April 2016. This move is an effort to improve corporate governance practices and transparency in terms of reporting of socially responsible activities carried out by the business houses.

Ministry of Heavy Industries & Public Enterprises, Government of India hosted a Corporate Social Responsibility fair at Pragati Maidan (ITPO) from 4-6 May, 2017. Indian Red Cross Society also put up a stall in the event. It was inaugurated by Shri Anant Geete, Hon'ble Minister, (HI&PE) in the presence of Shri Babul Supriyo Hon'ble Minister MOS (HI&PE).
Healthy Ageing Training of Trainers for India, Sri Lanka and Maldives by Indian Red Cross Society

The Training of Trainers for Healthy Ageing for India, Sri Lanka and Maldivian National Societies took place from 27th to 29th April, 2017 in Ahmedabad, Gujarat. It was hosted by Gujarat state branch of the Indian Red Cross Society with the support of the International Federation of Red Cross and Red Crescent Societies (IFRC). Total 24 staff and volunteers participated in this training. In the programme 20 participants from 12 state branches (Gujarat, Maharashtra, Karnataka, Uttarakhand, Assam, Tripura, Manipur, Meghalaya, Goa, Andhra Pradesh, Telangana and Andaman & Nicobar and NHQ), two from the Maldivian Red Crescent, one from the Sri Lanka Red Cross and one from IFRC participated. The training was based on the toolkit developed by the IFRC in close partnership with Pfizer (a leading pharmaceutical company) and subject matter experts. This training was the second global training conducted by the IFRC after the first one by the Montenegro Red Cross.

The overall objective of this training was to strengthen capacities of National Societies to contribute to enhance quality of life of older people and development of pool of trained professionals of National Societies to replicate or integrate the healthy ageing concept into their branches / National Societies and communities. The ToT was followed by a Deepdive community project. In this 75 staff and volunteers from 3 district branches participated in different workshops related to healthy ageing. At least 600 people were introduced, assessed, followed and evaluated on the healthy ageing concept by the participants.
volunteers as per the tools; c) training manuals, toolkits and dissemination materials have been translated and proof read in at least one local language; d) Improved cooperation with relevant institutions and organizations that deal with ageing and health; and e) lessons learnt and case studies produced to feed into the global tools, frameworks and approach for healthy ageing portfolio.

The target groups for the whole initiative are people aged 65 and older, beneficiaries of NS home care programmes in India and/or elsewhere; village and urban community, with emphasis on young and middle aged people; and representatives of relevant institutions - Ministry of Labour and Social welfare, Ministry of Health and Ministry of Education.

Once trained, participants will be able to coordinate the implementation of new training/workshops at National Society/branch level, but also can replicate these contents at community level. This way, strengthening of capacities of the National Society in their response to Non Communicable Disease (NCD) is achieved and can be worked towards healthy ageing concept.

The Training of Trainer was facilitated by IFRC Geneva Health and Care Department and trainer from Montenegro Red Cross. The training was based on interactive adult learning methodology that allows participants to acquire skills in group management and assessment techniques mentioned in the Healthy Ageing Module.

Dr. Vanashree Singh, Director Blood Bank and Health & Care focal person, IRCS National Headquarters is the officer designated for the Healthy Ageing programme in India.

Figure 4: Participants from NHQ expressing his views of the training on the last day (Photo by the IRCS Gujarat State Branch))
Indian Red Cross Society, National Headquarters, was joined by several branches at State/UT and district level to observe International Day of Yoga. In Delhi IRCS, ICRC, CMSS, DHR & IDBI office staff and past & present students of the Health Promotion through Ayurveda & Yoga course took part in the Yoga Shivir. Some of the alumni of the past batches thanked Red Cross for having started the course which has been a life changer for them. They participated in the yogic exercises and pranyama at the Yoga Shivir. The session was conducted by the Yoga Instructors’ of the Moraraji Desai Institute under the Ministry of Ayush.

In modern times a large number of human beings are suffering from lifestyle related diseases resulting into, among others, psychosomatic disorders. It has been established that Yoga & Meditation are very useful in combating these disorders and help people lead a healthier and happier life.

The part time course at IRCS NHQ, “Health Promotion through Ayurveda & Yoga”, is being successfully run in partnership with Central Council for Research in Ayurveda and Siddha (CCRAS) &
Morarji Desai National Institute of Yoga which is being supported by Ministry of Ayush, Government of India.

World Red Cross Day across India
All the State/ UT, district, sub-district branches, Red Cross health & MCW centres, warehouses, cyclone centres...and scores of schools & colleges across the country celebrated this year’s World Red Cross Day. The celebrations were led by the National Headquarters, as decided by its Managing Body, at Jaipur, Rajasthan. The Managing Body member from Jaipur (Presidential nominee Dr S S Agarwal) and Vice Chairman of the Managing Body Shri Avinash Rai Khanna led from the front to make it a grand event. As a result, the World Red Cross Day, 2017 was celebrated at Birla auditorium Jaipur, Rajasthan, on 8 May. Shri Kalyan Singh, President of the IRCS Rajasthan State Branch and Governor of Rajasthan was the chief guest. He contributed the subscription amount to the State Branch to become a life member of the Society and also made a fervent appeal to all to join Red Cross by becoming its member. He also said, “Service to needy is a national service and all should partner with Red Cross to achieve it.” Many people, then and there queued up to obtain Red Cross membership.

Shri J P Nadda, Chairman and Minister for Health & Family Welfare, Government of India, in his presidential address congratulated Vice Chairman Shri Khanna and Dr Veer Bhushan, Joint Secretary, IRCS, Nhq for holding the World Red Cross function of the National Headquarters for the first time outside the national capital Delhi. In his tribute to the founder of the Red Cross, Henry Dunant, whose birthday is celebrated today, Mr Nadda said, “A person with commitment and vision can create a worldwide movement. And, Mr. Dunant was such a visionary.” He also lauded the Indian Red Cross for its role in providing safe blood by promoting voluntary blood donation. He added that the thalassaeemics, who need regular blood transfusion, are a big beneficiary of this organization. He said, “In India there are two crore child births every year so the challenges here are enormous. The annual child birth alone is more than the population of several countries put together. But, we have been able to protect our population from globally active viruses and provide health cover to people because of the support received from organizations like Red Cross.” He also talked about the importance of organ donation as in India lakhs of people need it and there are lesser number of people donating their organs. He exhorted people to pledge their organs by filling in the form circulated there and save the life of millions of needy in the country.

The Minister for Health & Family Welfare, Government of Rajasthan Shri Kali Charan Saraf, in his address promised to launch a massive 3 month membership campaign in the state. He also said that from present 23, he shall extend the number of active district branches to all 33 districts in the state. Shri Avinash Rai Khanna, Vice
Chairman of the IRCS NhQ, in his address talked about the importance of first-aid in our daily lives. Sharing experiences from his own life he said, “In every household we should have a first aider. It is a priority and we are committed to make it a success.” Dr Veer Bhushan, Joint Secretary, IRCS introduced the theme in his welcome address and provided information about the ongoing activities. Mr Adebayo Olwe Ake, ICRC and Mr Bhavesh Saudagar from the IFRC and Dr S S Agarwal, Member Managing Body, IRCs NhQ also shared their thoughts on the occasion.

A special cover was released through the Rajasthan postal department in which the theme and mission of the Red Cross were printed. The IRCS, NhQ also launched its on line Central Volunteer Registry on the occasion. Now schools, colleges and individuals would be able to register/enroll as Red Cross volunteers. The Chairman also inaugurated a Philately and Photo exhibition that was set up at the venue of the function. Rare collection of postage stamps relating to Red Cross from around the world was displayed by the philatelists.

On World Red Cross Day online essay and photography competitions were also held. The best three adjudged essays were from Chaitali Shah, Malika Jaidka and Prawigya Pariyar. The winner of the Photography Competition was Mr Gagan Gunwant. Ms Malika and Mr Gagan, who were present, received prizes in the function. The Rajsamand district branch was felicitated for highest blood collection during the last year and Mr Shiv Garg from Bhatinda, Punjab, was felicitated for exhibiting his collection of postal stamps on Red Cross. A Red Cross publication highlighting its achievements and activities during last one year was also released. The Director of NOTTO (National Organ and Tissue Transplantation Organisation) administered pledge for organ and tissue donation. Shri Avinash Rai Khanna, Vice Chairman, initiated constitution of Junior and Youth Red Cross in 4 schools and colleges on the eve of the occasion. The students took the Red Cross and other pledges as well to promote global peace, friendship, health and hygiene. The newly enrolled members also participated as volunteers in the Red Cross day celebrations.

REPORTS FROM STATE BRANCHES

Andhra Pradesh

ANANTAPURAMU DISTRICT: A Blood Donation Campaign was organised at Municipal Complex, Anantapuramu19 units of Blood was collected. CHITTOOR DISTRICT: Blood grouping and H.B tests conducted for 120 Orphans in Tirupati, by Tirupati SubBranch. KURNOOL DISTRICT Distributed (8) Sewing missions to Widows, conducted a Blood Donation Camp and collected 28 Blood Units. Y.S.R.KADAPA DISTRICT conducted Blood donation camp and 10 Units of Blood was collected. A Medical camp was also conducted in which 300 patients benefited. SRIKAKULAM DISTRICT: Thalassemia Blood Transfusion Cell was opened. In a Blood Donation Camp 20 units of blood was collected and in a Medical camp for 272 patients were treated. 500 caps were also distributed. VISKAHAPATNAM DISTRICT: A medical camp was organised and 210 benefited. BP and Sugar Tests done for 78 people. A Blood Donation Camp was also held in which 20 units of blood was collected. Tree plantation programme was organised and 20 plants are planted. VIZIANAGARAM DISTRICT: A medical camp was conducted and 98 benefited. A Blood Donation Camp was organised and 18 units of blood collected. WEST GODAVARI DISTRICT: Fruits and Biscuits were distributed to the HIV/AIDS Patients and T.B Patients at Government General Hospital,42 Leprosy patients at Leprosy home, and 35 HIV patients at Ravi Teja HIV Home. Blood grouping tests were conducted for 100 students at
Govt. ITI College, Blood Donation camp was organised and 10 units of blood was collected. KRISHNA DISTRICT: A Mega medical camp was conducted and 400 patients were treated. Certificates were distributed to the winners of Essay writing and Photography competitions for School students. GUNTUR DISTRICT: Brochures were distributed on Red Cross Emblem Awareness and Summer precautions. Blood Donation Camp was organised and 10 units of Blood was collected. PRAKASAM DISTRICT Organised Eye check-up camp benefitting 62 people. SPSR NELLORE DISTRICT: Following medical camps were organised:- i) Dental Camp - 53 beneficiaries ii) Eye check up - 200 beneficiaries iii) Cataract operations - 30 beneficiaries iv) Free supply of spectacles - 30 beneficiaries v) BMI tests - 350 beneficiaries in 3 camps

ASSAM

Flag hoisting, seminar, spreading the theme was all pervasive in Guwahati, Assam. In health camp 188 patients were treated and 20 units of blood was also collected. Sixty volunteers actively participated in organizing the activities.

BIHAR

The state branch conducted health camp in which 121 artificial limbs were distributed and conducted a blood donation camp in which 60 units of blood was collected. It also held a rally. They also disseminated the theme through meetings and media. District branches namely Chapra, Lakhisarai, Bhagalpur, Katihar, Saharsa, Khagaria, Gopalganj, Gaya, West Champaran and Darbhanga have reported health camps, blood camps, seminars, rallies, dissemination of theme etc. In Katihar, Bhagalpur and Chapra districts each 15 health camps and in West Champaran 6 were held at block level. Over 11000 people were treated in the health camps in the state.

GOA

The state branch organised a number of activities. The Ponda branch held a Traffic Safety Programme in which traffic rules and advisories were disseminated in public. The state branch conducted a All Goa Poster Design contest on the Red Cross theme for the children. On the same day Goa’s Bardez Branch Office cum Clinic was inaugurated by the State Governor and President of the state branch Dr (Mrs) Mridula Sinha.

GUJARAT

No of camps; 14, no of beneficiaries 2245, which included medical checkup, blood group, blood sugar, haemoglobin and thalasemia detection.

HARYANA

Every year on the World Red Cross Day the state branch hosts a state level function. This year it was held at Kurukshetra University, Kurukshetra. The programme was inaugurated by the Governor of the State and President of the State Red Cross, Shri Prof Kaptan Singh Solanki. An awareness rally on the theme was held with JRC students in which 1500 children participated. A blood donation camp was also held in which 44 units of blood was collected. All the district branches participated in an exhibition in which Faridabad and Jhajjar won first and second prizes respectively. On this occasion Haryana State Branch also launched its website and two publications highlighting the activities of
Red Cross and St John in the state were released. The Secretary of the State Branch, Shri D R Sharma, also informed about the introduction of Management Information System (MIS) by the state Red Cross for better supervision, reporting and enhanced performance by the district branches and project staff. Over 2000 people from all parts of the state participated in the activities.

JAMMU & KASHMIR

In Srinagar the state branch organized essay & painting competitions and also held a blood donation camp. At Jammu the Divisional branch organized a seminar, Jal dhan oath by school children, medical camps for orthopedics, eyes, diabetes and neurology were held in which 525 patients were treated. In Udhampur and Poonchh districts function and rally were organized with students, at Ramban a Red Cross mela was held and Red Cross Express was launched, Doda hosted a seminar and Reasi launched fund raising campaign.

JHARKHAND

Several district branches in the state of Jharkhand organized rallies, seminars, health camps and theme for the day was disseminated. Youth, members and volunteers actively participated in the activities. Jamshedpur district branch held a massive voluntary blood donation camp in which previous records were broken. In a single day 1060 units of blood was collected.

KERALA

Ernakulam and Kasragod district branches held flag hoisting, seminar, felicitations to their achievers and volunteers and health camp. Wayanad District:-Two villages were adopted to train 380 Families and 150 tribal’s in First aid and self rescue techniques. Kollam District:- Distributed meals to all patients and companions of the District Government Ayurvedic Hospital. Kasaragod District: Conducted Awareness class on ‘Organ and Tissue Donation’. Kottayam District: Celebrated World Red Cross Day by felicitating Junior Red Cross Cadets, who secured full A+ in 10th examinations Palakkad District:- Conducted awareness class on ‘Expunging Cancer’. Malappuram District:- Conducted awareness rally about “Red Cross” by Junior Red Cross Cadets . Kozhikode District:- Conducted Awareness class on “Lifestyle diseases”. Thrissur District:- Celebrated World Red Cross Day by felicitating Junior Red Cross Cadets, who secured full A+ in 10th exam. Pathanamthitta District:- Celebrated World Red Cross Day by conducted one day class on “Home Nursing”.

MADHYA PRADESH

In the state a variety of health camps were organized and over 1500 people were treated. They were also given medicines for their ailments. In Gwalior a function was held in which over 200 people participated. It was informed that the target of collection of 6000 units of blood in a year was achieved, 250 attendants of patients in the city hospitals were provided food twice daily, 500 students were given free coaching for entrance examinations such as PCS, civil services, PET, PMT, 210 people were trained in first aid and the branch spent Rs 18.00 lacs on the treatment of poor patients. Those contributing in the programmes were felicitated.

NAGALAND
Nagaland state branch held a function in which the State Governor and President IRCS State Branch also participated.

PUNJAB

On the eve of World Red Cross Day Punjab Governor and Administrator UT Chandigarh, Sh. V.P.Singh Badnore, released the Red Cross Flag at Punjab Raj Bhavan. Punjab State Branch organized its state level function in collaboration with District Branch, Hoshiarpur on 9th May, 2017 at DAV College of Education, Hoshiarpur. Shri Avinash Rai Khanna, Vice-Chairman, Indian Red Cross Society, National Headquarters, New Delhi was the Chief Guest. Speaking on the occasion, he appealed the audience to get First Aid Training and become members of the Indian Red Cross Society in order to strengthen Red Cross activities in the State. The state level function was held at Hoshiarpur. Dissemination of the theme, jal dhan & vandhan oath by students, inauguration of the revamped District Red Cross building etc were carried out.

All district branches organized a number of activities which include lectures on fundamental principles, distribution of tricycles & wheel chairs, oath taking by children on “Jal Dhan & Van Dhan”, awareness camps on dengue & chickengunia, blood donation camps, dissemination of the theme, medical check-up camps, extempore speech competitions, felicitation of life members/donors were facilitated, distribution of sewing machines among widows, kits valued at Rs.50,000/- were distributed to 20 girls who are getting beauty parlour training, awareness campaigns on drugs in the rural areas, painting & drawing competitions, project for providing meals to the needy at very subsidized rates were launched by some district branches.

TAMILNADU

Thanjavur district branch organized a seminar on the theme that was inaugurated by the deputy commissioner. A big health camp was also held in which patients were treated for various ailments and medicines were provided. In Cuddalore on “World Red Cross Day” appreciation certificates were given to people for their yeoman contribution towards Red Cross Movement. At Dindigul bust of Jean Henry Dunant was unveiled. Similar functions and activities were reported from all other district branches.

At the state branch flag hoisting, garlanding of the statue of Henry Dunant, free Medical Camp where medicines and pathological services, X-Ray, ECG & Ultra Sound facilities were provided free of cost to 700 beneficiaries, blood donation camp” and “Distribution of Appreciation Awards/Certificates” to Medical Officers, Red Cross Volunteers, Principals of various Colleges / Higher officials from Educational Department for their humanitarian services towards Red Cross Movement was done.

TRIPURA

Red Cross Day was observed by organizing a seminar on the theme that was inaugurated by Shri Tathagata Roy, Hon’ble Governor of Tripura (President, Indian Red Cross Society, Tripura State Branch). Patrons, Vice-Patrons, Life Members and Life Associate Members were also present in this programme. A Blood Donation camp was held in which 28 units of blood was collected. The branch
also held a workshop on “Healthy Ageing” on that day in which 20 participants of various age groups participated.

UTTARAKHAND

A medical camp was held by the Dehradun district branch in which 215 patients were treated. Children were felicitated for their winning entrees in the competition and a seminar on the theme was organized.
Strategic Development Plan 2030

Indian Red Cross Society, NHQ, hosted a two-day consultation meeting on 29th and 30th August 2017 to obtain the final inputs from the State and Union Territory Branches for the IRCS Strategic Development Plan 2030.

Mr. Avinash Rai Khanna, Vice-Chairman IRCS, in his address to the participants conveyed his priority of first-aid training throughout the country and effective disaster management programme for speedy delivery of relief & services to the needy.

The Head of the ICRC Regional Delegation, Mr. Jeremy England, the Head of the IFRC Country Cluster, Mr. Leon Prop, Mr. Manish Choudhary, Joint Secretary I/C, IRCS and Dr. Mukesh Kapila, Consultant for the Strategic Document spoke about the importance of a strategy for IRCS and the challenges that need to be identified and addressed as the country was diverse and almost like a continent.

During this Secretaries Conference, several problems being faced by the IRCS at present came up for discussion. It was felt that through mutual efforts and sincere approach improvements can be made. It was also opined that through the active participation and cooperation of the IFRC and ICRC, several steps need to be taken to address the challenges being faced.

The inputs received from the branches were incorporated.
Induction of National Managing Body Members

IRCS, NHQ hosted a two-day induction programme for the Managing Body members which included the recently elected 12 members as well as the 6 Presidential nominees. Twelve members were elected from the four zones in the elections held on 28 of July, 2017 as per the IRCS Act and Rules, as amended from time to time.

The Induction Programme was inaugurated by Shri Avinash Rai Khanna, who solicited the cooperation of all the members in ironing out the issues faced by the Society and devise ways to make the Indian Red Cross more relevant and contemporary. He welcomed the newly elected members and shared his experiences of the visits made by him to the State and Union Territory branches. He expressed his keenness to make the Managing Body meetings more fruitful and useful for the community.

Head of the ICRC Regional Delegation, Mr. Jeremy England and Head of the IFRC Country Cluster, Mr. Leon Prop were the main facilitators of the programme. Dr. Mukesh Kapila, former Under Secretary General of the IFRC and voluntary consultant for the IRCS National Society Development Plan for India was also present. In his address he said, “One prime responsibility of the governance is that you must ensure that all branches are looked after without any favors”.

The speakers, during their presentations, provided the insight to the members on the intricacies of the governance and methods to provide good leadership to a National Society. They also shared their experiences of several other National Societies where such inductions are organised on a regular basis.

Such an induction programme was earlier held about 14 years ago. It was felt that the members of the Managing Body of the IRCS would be benefitted if they are well aware of the national and international statutes, rules and code of conduct.

The members expressed their happiness on this opportunity and promised to take the Society from strength to strength through their active participation and commitment.
During the year office of the Indian Red Cross Society, National Headquarters shifted from 1st to 5th Floor of the same building. This movement of office generated a lot of energy as the office was being moved nearly after four decades with work stations, equipments, office files, documents and other necessary records. The Indian Red Cross, lobby is surrounded by lively images of its volunteers and beneficiaries. This visual delight arrests the attention of any visitor arriving at the Red Cross. This effort is expected to attract partnerships and enhanced staff motivation. With this shift, the Indian Red Cross is able to present a contemporary image to all visitors. These small changes are needed to keep staff and organisation in good spirits. The work stations of the staff have been given a neat corporate look. This arrangement allows the staff to interact with each other seamlessly and thus speed up the work.

Ambience speaks silently and generates positive vibes in any office. The redesigning of the lobby and the shifting of the IRCS office on to the fifth floor has brought in fresh energy and vibrancy into the staff.
International Co-operation

ICRC Vice President visits IRCS

Much decorated Vice President of the International Committee of the Red Cross, Ms Christine Beerli, visited the Indian Red Cross Society on December 04, 2017.

Having worked for Red Cross & non Red Cross actors and represented the Swiss Parliament is in itself an achievement but Mrs Beerli’s role in ICRC is quite large and important including inculcating external relations for ICRC. Ms Beerli was impressed with the coordination in the Movement partners in India.

Sh. Manish Choudhary, officiating Joint Secretary, IRCS informed her that the IRCS has prepared the Strategy 2030 which is ready for launch.

President Italian Red Cross in Delhi

President of the Italian Red Cross Mr Francesco Rocca accompanied with Ms Emilie Goller, Advisor visited India from 27 - 29 August 2017. They had a meeting with the IRCS Vice Chairman, Shri Avinash Rai Khanna, on 27 evening. Mr Khanna briefed him about the activities and achievements of
On 28 August the IRCS organized a meeting in his honour in which the IFRC Country Cluster head, Mr Leon Prop, former Under Secretary General of the IFRC and Voluntary Consultant for the Strategic Development Plan 2030, Dr Mukesh Kapila and officers of IRCS and ICRC participated.

The President also visited Central Training Institute and Central Warehouse at Bahadurgarh. Mr Rocca assured IRCS of Italian Red Cross support to make the training institute operational.

The Italian Red Cross President also interacted with the State/UT Branch Secretaries on 29 evening, who had come to Delhi to attend the Secretary’s Conference on IRCS Strategic Development Plan.

**Post Graduate Diploma in Disaster Preparedness & Rehabilitation**

The IRCS strives to protect human life and is actively engaged in Disaster Response, Relief, Preparedness, Health Care and Blood Services in the community. It runs a Disaster Management Centre at its National Headquarters, which serves as the hub for Disaster Management activities.

Since 2006, the Indian Red Cross Society is running a part time Post Graduate Diploma Course in Disaster Preparedness and Rehabilitation for working professionals and others. The course focuses on the development of skills and abilities of human resources that match the best practices available in the field today. The course is affiliated to the Guru Gobind Singh Indraprastha University, Delhi and is being conducted at the Disaster Management Centre, IRCS (NHQ), 1- Red Cross Road, New Delhi – 110001 from 6:00 PM – 8:00 PM on Mondays, Wednesdays and Fridays and 10:00 AM – 1:00 PM on Saturdays. During the last 12 years, it has trained 350 managers who in turn can empower the community in planning, managing and coping with disasters in a planned, scientific and systematic manner.
In 11th batch (2017-18) 21 students were admitted.

Ham radio practical during course, field trip to Ghaziabad and rescue demonstration by NDRF battalion were some of the practical exposures given to students.

On 1st March 2017 first alumni meet of PGDDP&R was organized. On the same day second Nityanand Gupta Memorial Oration was also held. The meet/oration was organized at Multipurpose Conference hall, Indian Red Cross Society, National Headquarters, New Delhi. Sh. Kamal Kishore, Member, National Disaster Management Authority presented key note address on this occasion. Sh. Kishore, presenting his talk on Changing Nature of Disaster Risk: Role of Civil Society.

Sh. Nityanand Gupta was a student of 7th batch of the course and was on deputation to NDRF. Sh. Gupta, succumbed in an IAF helicopter crash which was on relief mission during the Uttarakhand Flash Floods 2013.
The Indian Red Cross Society, with the support of Department of AYUSH, M/o H & F.W, Government of India, and in collaboration with Central Council of Research in Ayurvedic Sciences (CCRAS) & Moraraji Desai National Institute of Yoga (MDNIY) is conducting a certificate course on “Health Promotion through Ayurveda & Yoga” (50 hours, part time certificate course) in English medium. The classes are held twice a week, on Tuesdays & Thursdays from 6-8 PM, for the duration of three months. The course is being run since Feb, 2010. So far 25 batches (total 1200 students) have completed the course. During the 25th batch 46 participants attended the course.

The course participants joined IRCS staff and other invitees to celebrate the 4th International day of Yoga by performing asanas at the National HQ under the close supervision of faculties from Moraraji Desai National Institute of Yoga.