



# Minutes of REACT Meeting 29 January 2013

## Crisis Management Center of the Committee of Emergency Situations and Civil Defense

Chair:	Col -General Khairiddin Abdurahimov, Chairman of the Committee of		
	Emergency Situations and Civil Defense (CoES)		
Participants:	REACT partners ( <u>Annex IV - attached</u> )		

#### 1. Introduction:

After welcoming the participants the Chairman stated that considering numerous discussions and suggestions by various REACT partners regarding improvement of REACT mechanism the first meeting in 2013 is dedicated to review REACT and to reach some possible consensus on how REACT can be improved. The Chairman proceeded that since his appointment as head of CoES and observing the work of REACT his personal recommendations are in favor of REACT since an advance preparation/forecast of disasters and having an effective mechanism of response can always significantly decrease the impact of the disaster and in this sense REACT is an effective tool for those involved in Disaster Risk Management (DRM).

Sharing his personal observations of the latest disasters the Chairman stated that the first 10 days after the disaster are the most crucial ones when intervention of government and INGO's is imperative to reduce the burden of the disaster and to support the affected population which is in in a state of shock and without any coping mechanisms. After this period populations slowly recovers using all possible ways to recover.

In terms of cooperation between CoES as the main actor in Disaster Risk Management (DRM) and international agencies the Chairman proposed the following recommendations:

- All projects dealing with DRM must be agreed with CoES to avoid duplication of projects. CoES has an extensive knowledge of the country and can assist the agencies in effective implementation of their projects.
- Most items used during relief/response operations such as tents are reusable and can be collected from affected population after a particular period to be used during future disasters. This will significantly reduce the dependency of the country on international relief.
- It is up to the head of CoES to decide which employee of CoES should accompany INGO's during field trips and requests for specific staff members should be avoided in future.





• CoES will determine which region is in need of support and projects by INGO's must be developed accordingly.

Madina Aliberdieva from Oxfam raised the point that an extensive work is done in the fields and communities are trained however nothing can guarantee sustainability of these projects. Therefore probably review of legislations is required and some motivations should be created for such category of people to ensure sustainability.

The Chariman responded that financial aspect of these problems should be analyzed and only after that it is possible to propose to the government some concrete proposals. He referred to a project in Zarafshon when a large number of tools/equipment was handed to population. He suggested that if those tools would have been handed to CoES they could have been used anywhere else as CoES can ensure maintenance of these tools.

Nashir Karmali from Focus suggested that it would be useful if CoES can identify the priority areas and the forms of interventions annually and INGO's can see how they contribute.

## 2. REACT review, Vadim Nigmatov, UN OCHA

The presentation highlighted that REACT is existing for almost five years and review of its mandate and procedures will have an impact of its further performance as most of the documents including the Statement of Common understanding are outdated. Vadim briefly went through the Statement and the list of documents which regulate the work of REACT. He suggested establishment of working group to review the necessary documents and proposed some possible stages to implement the process of the review. The suggested review process listed number of activities versus a time frame and if started in February-March, the entire process might be completed by June 2013 when the reviewed statement can be approved by REACT partners.

Commenting on the presentation Madina Aliberdieva from Oxfam stated that reviews are done almost every year and the latest review of the steering committee was done by an international consultant a year ago but no visible actions were taken.

Shahlo Rahimova from UNDP DRMP clarified that the review of the Steering committee and provision of a report was not initiated by UNDP but by the committee itself. Despite several attempts by REACT secretariat, the committee never came together to discuss the report. The main document of REACT is the statement which includes preparedness, response and recovery activities all together. REACT partners need to decide what the statement must include and if all partners suggest that it should be only about response, we can accept it.

In terms of National Platform (NP) Shahlo stated that it is a document which approved on a government level and we cannot include all REACT members in to the list of participants which





can attend the meetings of NP. However CoES is presenting REACT interests at the NP meetings.

Marcel Vaessen from UNOCHA Almaty stated that after five years of operations it's timely to review the work of REACT and to introduce changes if it is necessary. He referred to the case of REACT in Kirgizstan which replicated the work of Tajik REACT. One of the changes introduced is that currently senior management of REACT meets every three months and the new changes contributed to improvement of general performance of REACT.

**3.** Risk Reduction for Health Facilities Through a Collaborative Approach, Valijon Ranoev, UNDP DRMP

The presentation was describing a joint project initiated by WHO, UNDP DRMP and Ministry of Health (MoH) to conduct safety assessment of hospitals and DOT centers throughout the country which resulted in assessment of 33 Central District Hospitals (CDH) and selection of hospitals in Tavildara and Maschoh districts as the most vulnerable facilities which require immediate rehabilitation. Detailed structural risk assessment of the hospitals was done by Institute of Geology, Earthquake Engineering and Seismology. Currently both projects are almost completed and not only the structure of buildings of the selected hospitals were reinforced, but also the buildings are now more energy efficient with improved irrigation, water and electricity supply system. The project was described as successful example of cooperation between two UN organizations, an example which is worth to be replicated in future.

To the question of Madina Aliberdieva regarding the role of MoH in the project, Rahima Muqairishoeva from WHO replied that the actual assessment was coordinated and done by MoH. MoH is also providing technical assistance in terms of what should be taken in to account during such projects.

Nashir raised the question of the status of the remaining 31 hospitals to which Charles Kelly, international consultant working for DRMP replied that the two hospitals were selected as pilot project however the assessment revealed that there remaining hospitals are still in need of support. Some major work was done in terms of assessment of these projects and if REACT partners have resources, support can be rendered to continue the project.

## Follow up actions:

- REACT partners in cooperation with CoES should nominate candidates for the Working Group (WG) which will focus on review of REACT status.
- The WG will work on development of a survey to identify the view of REACT members in terms of what areas or REACT work must be changed and how
- The survey should be provided to all REACT members.
- Result of the survey must be presented during REACT meeting, once completed.





#### <u>Annexes</u>

I. <u>React Review.</u>	II. <u>Обзор РЕАКТ.</u>
REACT Review	Обзор РЕАКТ
DRMP UNDP Tajikistan	ПРООН ПУРСБ Таджикистан
III. <u>Risk Reduction for Health</u> <u>Facilities Through a</u> <u>Collaborative Approach</u>	IV. <u>Снижение риска</u> <u>стихийных бедствий в</u> <u>области здравоохранения</u> <u>путем совместных усилий/</u>
Risk Reduction for Health Facilities Through a Collaborative Approach	Коронски стихийных бедствий в области здравоохранения путем совместных усилий ПУРСБ ПРООН Васедание РЕАКТ, Душанбе 2013 г.
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