

Ex-Servicemen Medical Aid Group (ESMAG) : The Hidden Force

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Abstract

Natural calamities such as cyclones, floods and earthquakes are common occurrences in the Indian sub continent which require super human effort to contain damage to men and material. Such events put the dedication, endurance capabilities and organizational skills available in the country to a litmus test. It is not surprising therefore, that the Armed Forces are often asked to spearhead the relief work in such disaster situations. So far, the potential for utilization of disciplined and trained ex-servicemen population for such situations has remained untapped due to the lack of an organizational framework. A concept of tapping this large pool of trained manpower is presented.

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Introduction

The Indian subcontinent has been affected by various disasters from time to time. The peculiar geo-climatic condition of the country makes it vulnerable to floods, droughts, cyclones, earthquakes and landslides. According to estimates more than half of the landmass is prone to seismic activity of various intensities. At least 40 million hectares of land is prone to floods, 8% of land

mass to cyclones and 68% to drought. As per the Government of India estimates an average of 4344 people died and about 30 million were affected by various natural calamities in India during the last decade. The India Natural Disaster Profile (Fig.1) estimates that almost the entire country is prone to at least one hazard [1]. The increase in the vulnerability in recent years has been a serious threat to the overall development of the

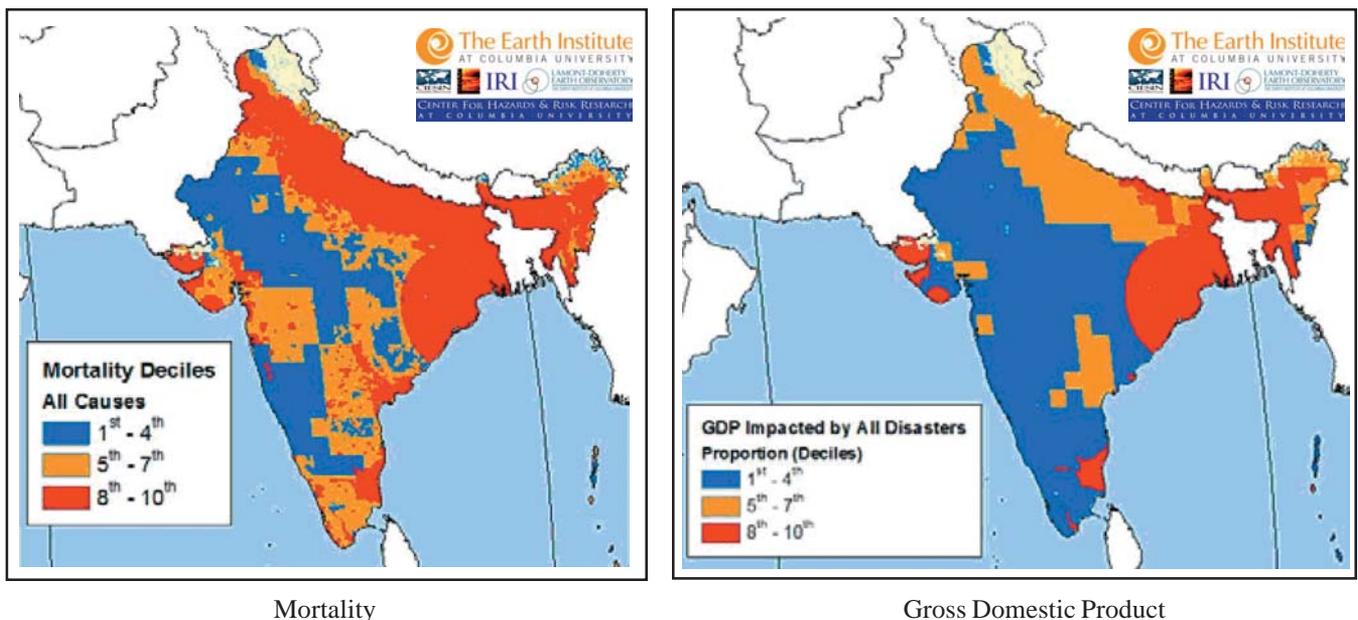


Fig. 1 : Multi-hazard disaster risk hotspots (all hazards combined and weighted by mortality and Gross Domestic Product impacted) [1]

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country. Subsequently, the development process itself has been a contributing factor to this susceptibility. India's vulnerability to various disasters has led to mounting losses of life and property year after year. Such events put the dedication, endurance capabilities and organizational skills available in the country to a litmus test.

Large amounts of financial resources are expended for providing post disaster relief to the victims of floods, cyclones, droughts, landslides and earthquakes. Most disasters cannot be predicted accurately but a systematic approach to disaster preparedness and ability to respond quickly can reduce the loss of life and property to a great extent.

Pitfalls in Disaster Management

The past experience in handling Gujarat earthquake and Tsunami victims have shown the lacunae in immediate post disaster relief operations. The sheer number of casualties clearly overburdened the available resources. A large number of governmental and nongovernmental organisations pitched in to provide relief with massive amounts of relief supplies. However the relief effort was hampered due to lack of a coordination. The communication and logistic support was found wanting at times. The medical aid to remote villages was delayed.

There is no shortage of expertise or resources and the issues which need to be addressed for optimum disaster management are planning, mitigation, preparedness, community awareness and training. This has led to a pragmatic shift in the approach to disaster management in our country from post disaster relief and rehabilitation to disaster mitigation, preparedness and community participation.

Government of India Initiative

Disaster management requires an integrated multi pronged pro active approach for any meaningful outcome. The geophysical layout of the country makes it prone to various kinds of disaster. It may not be possible to avoid them entirely but various measures to mitigate and reduce the impact of such disasters on the community and the country should be undertaken with a renewed vigour. The thrust should be on mitigation, prevention, training, capacity buildup, infrastructure, communication, early warning system and coordination. Prevention, mitigation, preparedness and relief are four interlinked elements in any disaster management.

The Government of India initiative has addressed these problems in the form of a National Disaster Management Framework under the aegis of Home Ministry [2]. The revised approach has institutionalised disaster

management with appropriate legal, financial and administrative powers at the level of centre, state and the district level. A concept of periodic multi hazard mapping of the country through Indian Institutes of Technology, India Meteorological Department and Council for Scientific and Industrial Research has been incorporated to generate dynamic and realistic data for fine tuning the disaster management programme. As a step towards disaster mitigation, a risk and vulnerability awareness campaign through electronic media, school curriculum and non governmental agencies (NGOs) has been launched to augment community participation.

The implementation of Disaster Risk Management Programme with the assistance from United Nations Development Programme, United States Agency for International Development and European Union in 169 most hazard prone districts in 17 states is a concrete step in this direction. Disaster Management Committees consisting of elected representatives, civil society members, civil defence volunteers and government functionaries have been constituted at all levels including the village/urban local body/ward levels. Disaster Management Teams constituted in villages are being imparted training in basic functions of first aid, rescue, evacuation and related issues.

Human resource development at all levels is critical to institutionalization of disaster mitigation strategy. The National Institute of Disaster Management has been entrusted with the task of developing training modules at different levels, undertake training of trainers and organize training programmes for planners, administrators and command functionaries. The institute will also develop national information database on disaster management policies, mitigation measures, formulation of disaster management code and provide assistance to various states in strengthening their disaster management systems.

The concept of Incident Command System as practiced by the US Coast Guard has been introduced in the country [3]. This system envisages a specialised unit of emergency response team with a commander and a group of officers trained in various aspects of incident management namely logistic support, communications, planning operations, emergency first aid and evacuation. The incident command system is being implemented by integrating the existing systems and procedures with the available resources in the country.

The National Disaster Management Authority (NDMA) chaired by the Prime Minister is the highest body setup for disaster management in the country. It is responsible for laying down the policy framework while the Ministry of Home Affairs is the nodal agency

for the disaster management at the national level [2]. The chief secretary of the state heads a state level committee which is overall in charge of the relief operations in the state. The district administration is the focal point for implementation of all governmental plans and activities. At the village level Panchayati Raj institutions have been entrusted with the task of tackling disasters through early warning system, relief distribution, providing shelter and medical assistance to the victims. At present the state governments have the basic responsibility of undertaking rescue, relief and rehabilitation measures in the event of natural disasters. The central government supplements the efforts of the states by providing financial and logistic support. The other agencies involved in disaster management are police, para-military forces, home-guards, fire services, ex-servicemen and non government organisations (NGOs).

Role of Armed Forces

The armed forces in our country have traditionally been the first responders to any major disaster. This may be attributed to the fact that they can react quickly in an integrated and self contained manner [4]. They have the core competence to operate under adverse conditions with a range of resources and capabilities at their disposal. The armed forces setup is equipped with the emergency search and rescue capabilities and they have been providing medical aid, communication, food, shelter and the infrastructural requirements for the disaster victims.

Need for a Dedicated Organization

In the post-disaster scenario, the first priority is extending immediate rescue and relief aid to the victims, who need medical care, food and shelter. However in the absence of a dedicated organization, disaster relief tends to be ad hoc and leads to 'crisis management'. A coordinated and synergistic approach at all levels to handle the resources available, along with an efficient communication and logistics network is vital to post disaster relief. It is here that a need exists for an organisation which has the required expertise, dedication and resources to handle this task.

The potential for utilization of disciplined and trained ex-servicemen population for such situations has remained untapped due to the lack of an organizational framework. An "Ex-Servicemen Medical Aid Group" (ESMAG) comprising primarily of retired medical officers, members of military nursing service, paramedical staff of Army Medical Corps, officers of Engineers, Signals and Ordnance Corps could play a vital role in the preparedness and relief of disaster management.

Planning Considerations

The organization of Ex-Servicemen Medical Aid Group could be based on the concept of the Territorial Army. Only a nucleus staff could be employed on permanent basis; the remaining voluntary force would be embodied periodically on as required basis.

ESMAG project could be developed in two phases. In phase I the organization would be raised in five zones i.e. East, West, North, South and Central. The hallmark of each zonal unit would be flexibility in terms of personnel (may do with whatever manpower is available) and response (depending upon the magnitude of disaster, the whole unit need not be moved, only compliments could move). The proposed structure of this organization is shown in Fig.2. Once this scheme is successful, similar facility may be extended to state level ESMAG services. The data bank of ex-servicemen who volunteer for ESMAG would be maintained centrally (at ESMAG Headquarters), and in each zone. Requisite man power for ESMAG would be made available from this data bank at short notice.

ESMAG will arrange medical camps twice in a year in each zone during its periodic embodiment to provide medical facilities to civil population in remote areas. During national calamity, ESMAG would be mobilized along with technical and supporting elements to the disaster site. The medical aid group would carry the disaster medical relief bricks consisting of expendable and non expendable medical stores. The number of bricks to be carried to the disaster site would depend on the preliminary information available about the quantum of casualties anticipated. The aid group would have the capability to provide life and limb saving measures and holding the casualties till further evacuation.

The emergency communication between the disaster site and the Zonal Headquarters through satellite and high frequency communication system could be setup by the signals group. The task of navigating the obstacles, clearing the approach roads, debris and building bridges

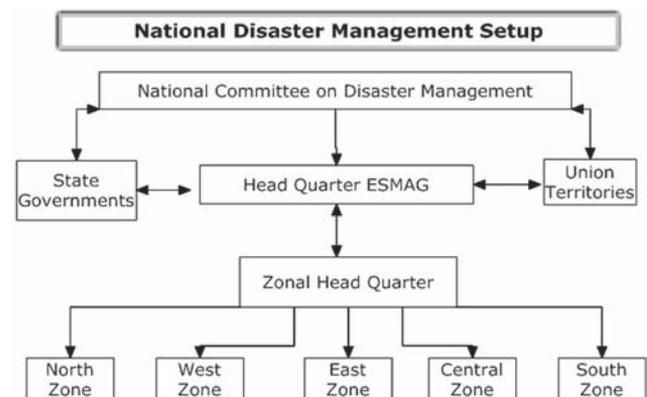


Fig. 2 :

can be effectively carried out by the engineers with the available expertise and resources in the post disaster scenario. The engineers would also be entrusted with the task of post disaster rehabilitation by rebuilding roads, restoring electricity, water and disaster relief shelters.

Mobilisation

On receiving request for aid from the central / state government or in anticipation of such request the ESMAG Zonal Group would inform ESMAG Headquarter, and after obtaining its concurrence proceed to contact its volunteers by fastest available means including mobiles, print media and television requesting its members to report for duty. The coordination of disaster relief operations would need to be maintained between the civil authorities, armed forces and ESMAG at all levels through a joint operation center.

Training

Disaster management requires training of very high order. Selected medical officers of ESMAG would be trained at Disaster Management Institute at Nagpur and at College of Military Engineering, Pune utilising the concept of Incident Command System[3], which offers standardised flexible response to various disaster scenarios. They will be utilized in turn for training of the ESMAG volunteers during periodic annual embodiment. Training and refresher courses would be organized during this period for personnel empanelled for relief teams at the ESMAG zonal units. These embodiments would normally be for a period of one month or more. During this period certain welfare activities (medical camps) would be carried out in remote areas. The embodiment of zonal ESMAG units will be in sequential order, so that at any given time there is at least one

ESMAG unit ready to move at short notice.

Financial Support

Additional funds will have to be provided from national resources. This will include capital budget for initial establishment and revenue budget for maintenance of equipment, stores and regular payment to the nucleus staff. The remaining ESMAG volunteers will be paid only during embodiment/mobilization.

Conclusion

The concept of Ex-Servicemen Medical Aid Group (ESMAG) is unique and needs to be implemented in our country, which is prone to disasters in various forms. This voluntary, trained, experienced and dedicated group could play an important part in providing medical aid during relief and rescue operations at times of major disasters.

Conflicts of Interest

None identified

References

1. Dille M, Chen RS, Deichmann U, Lerner-Lam AL. Natural Disaster Hotspots: A Global Risk Analysis. Washington DC: World Bank, 2005.
2. Government of India, Ministry of Home Affairs. National Disaster Management Framework. (cited 10 Oct 2007). Available from <http://www.ndmindia.nic.in/EQProjects/Disaster%20Management%20in%20India%20-%20A%20Status%20Report%20-%20August%202004.pdf>.
3. US Coast Guard. Incident Command System. (cited 10 Oct 2007). Available from <http://www.uscg.mil/hq/g-m/mor/Articles/ICS.htm>.
4. Singh RK. Envisaged role of IAF in disaster management. Abstracts: Thematic Session-Role of Armed Forces. (cited 10 Oct 2007). Available from http://www.nidm.net/idmc/IDMC_Abstract/D5-Role%20of%20Armed%20Forces.pdf.