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# FLOOD RELIEF DRIVE



# Flood Relief Drive Report

October 2025

Organized by: Moitrisanjog Society Coochbehar

Supported by: Mariwala Health Initiative (MHI)

Project Location: Coochbehar and  
Alipurduar Districts, West Bengal

**345+**

**FAMILY WERE  
GIVEN RELIEF**

**930+**

**PEOPLE  
BENEFITED**



The flood of October 2025 was one of the most devastating calamities our district has witnessed in recent years. It struck without warning and washed away not only homes and possessions but also people's sense of stability and safety. The extent of the destruction — physical, emotional, and social — revealed how fragile life can become when nature turns unforgiving.

In these moments of crisis, the true strength of a community is tested. Through our Flood Relief Drive, supported generously by the Mariwala Health Initiative (MHI), we at Moitrisanjog Society witnessed both the pain of loss and the extraordinary resilience of our people. While distributing food, tarpaulins, and essential supplies brought immediate relief, it soon became clear that material aid alone could not address the invisible wounds left by the disaster.

The psychological impact of displacement, uncertainty, and helplessness was profound. Many survivors — particularly women, children, the elderly, female sex workers, and members of the LGBTQ+ community — carried silent trauma that could not be seen in damaged walls or broken roads. Recognizing this, our team prioritized psychosocial support as an equally essential part of relief. Through counselling sessions, group activities, and open conversations, we aimed to restore not just livelihoods but also dignity, hope, and trust. Mental health, too often overlooked in disaster response, proved to be the key to true recovery. Emotional healing gave people the strength to rebuild, reconnect, and reimagine their lives beyond loss. The success of our psychosocial camp reaffirmed our belief that humanitarian work must always include emotional care — for healing minds is as vital as repairing homes.

The impact of this intervention has been both immediate and lasting. It fed the hungry, sheltered the displaced, and calmed the anxious. It also reminded us — as an organization and as a community — that compassion is the foundation of resilience. The unity of volunteers, the courage of survivors, and the solidarity of supporters like Mariwala Health Initiative (MHI) together made this initiative a symbol of collective humanity.

As we look ahead, Moitrisanjog Society remains committed to strengthening community preparedness and integrating mental health into all our future disaster responses. Every act of care, no matter how small, helps rebuild not just structures, but spirits.

— Arindam Sumi Das

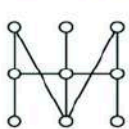
Secretary, Moitrisanjog Society Coochbehar





# Flood Relief Drive

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health  
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**Date : October, 2025**

**Place: Coochbehar, Alipurduar**

# Introduction & Background

In early October 2025, the northern districts of West Bengal, particularly Coochbehar and Alipurduar, experienced unprecedented floods and landslides caused by continuous and torrential rainfall. The calamity resulted in widespread devastation — homes collapsed, farmlands were submerged, and basic civic infrastructure such as roads, bridges, and drainage systems suffered extensive damage.

According to district administration reports, over 12,000 houses were partially or completely destroyed, leaving thousands homeless and without access to food, clean water, or healthcare. Vulnerable communities, including daily wage labourers, small farmers, women-headed households, and the elderly, were disproportionately impacted.

Recognizing the urgency of the situation, Moitrisanjog Society, a community-based organization rooted in Coochbehar, in collaboration with Mariwala Health Initiative (MHI), launched an immediate Flood Relief Drive. The intervention aimed to address both immediate humanitarian needs and psychosocial well-being of affected populations through direct field engagement and transparent resource utilization.

## Implementation Strategy

The project adopted a two-pronged approach combining material aid distribution and mental health support. Coordination with local volunteers, community leaders, and administrative bodies ensured transparency and equitable outreach.

### Planning and Coordination

- A rapid needs assessment was conducted in Natabari, Khagrabari, Palpara, and Ghughumari blocks.
- Local volunteers helped map vulnerable families who had lost homes, belongings, and identification documents.
- Procurement of relief materials was done locally to ensure timely delivery and to support small-scale traders affected by the flood.

### Relief Distribution Mechanism

- Relief kits were distributed in small, community-level gatherings while maintaining fairness, safety, and dignity of recipients.
- Beneficiary data and distribution lists were verified to avoid duplication and ensure inclusion of the neediest households.

## Objectives of the Intervention

The Flood Relief Drive was guided by the following objectives:

- 1.To provide emergency food and essential supplies to flood-affected families to ensure short-term food security.
- 2.To supply temporary shelter materials for families who lost their homes.
- 3.To extend psychosocial support and counselling services to individuals and families dealing with trauma and emotional distress.
- 4.To identify and assist vulnerable families who lost vital personal documents and were thus excluded from formal government relief mechanisms.
- 5.To foster community resilience through compassionate, inclusive, and coordinated action.



# INTERVENTION

**Target Beneficiaries: 345+ families (approx. 930+ individuals)**

## Relief Kit Composition

Each family kit was designed to provide a one-week sustenance package with basic food and hygiene items.

## Each kit contained:

| Items Distributed            | Quantity per Family |
|------------------------------|---------------------|
| Rice                         | 30 kg               |
| Musur Dal                    | 2 kg                |
| Cooking Oil                  | 2 litres            |
| Soyabean                     | 1 kg                |
| Potatoes                     | 5 kg                |
| Onions                       | 2 kg                |
| Powdered Sugar, Salt, Spices | Mixed               |
| Bath Soap & Detergent        | Standard pack       |
| Sanitary Napkins             | 1 pack              |

## Shelter Support

In addition to food kits, 40 high-quality tarpaulins were distributed, offering emergency shelter to those whose homes were completely destroyed



# PSYCHOSOCIAL SUPPORT CAMP

The devastation caused by the October 2025 floods in Coochbehar and Alipurduar was not limited to physical damage alone. The sudden displacement, loss of property, and fear of future uncertainty led to widespread emotional trauma among survivors. Families who had lost their homes, livelihoods, and even their personal documents were left with feelings of helplessness and despair. Many individuals — particularly women, children, and the elderly — exhibited visible signs of stress, fatigue, and psychological withdrawal. Recognizing that recovery from disaster extends beyond material relief, Moitrisanjog Society integrated a psychosocial support component into its relief operations. This approach ensured that the affected population received not only food and shelter, but also emotional care and mental health assistance essential for long-term rehabilitation.

## Purpose and Approach

The psychosocial support intervention aimed to:

- Alleviate emotional distress and anxiety among affected individuals.
- Promote community solidarity and restore a sense of normalcy.
- Provide coping mechanisms to help survivors manage trauma and rebuild confidence.
- Identify vulnerable individuals who required further psychological or medical attention.

The camp was organized in close coordination with community leaders, local volunteers, and professional counsellors trained in trauma management. By situating the camp within affected villages, the program ensured accessibility and encouraged participation from all social groups, including those who might otherwise hesitate to seek help.

## Coverage and Locations

The psychosocial support initiative covered approximately 800+ individuals, including men, women, and children from the most severely affected areas.

Camp Locations:

- Block 2: Natabari, Khagrabari
- Block 1: Palpara, Ghughumari

These locations were strategically selected based on the concentration of displaced families, accessibility, and availability of community spaces such as schools and local clubs that could serve as safe gathering points.



## Activities Conducted

A range of structured and informal activities were carried out to cater to the different age groups and emotional needs of participants.

### a) Individual and Group Counselling Sessions

Professional counsellors conducted both one-on-one and group-based therapy sessions.

- Individuals were encouraged to share their experiences of loss and fear in a safe and non-judgmental space.

- Group sessions fostered collective empathy, reminding participants that they were not alone in their suffering.

- These interactions helped rebuild trust and community bonds disrupted by the disaster.

### b) Stress-Relief and Recreational Activities for Children and Caregivers

Children were among the most emotionally affected demographic, having lost not only their homes but also their sense of security and routine.

- Group play was used as therapeutic tools to help them express fear and confusion.

- Parents and caregivers participated in guided breathing and relaxation exercises to manage anxiety.

- These activities fostered emotional stability and brought a sense of joy back into community life, even if momentarily.

### c) Awareness Discussions on Mental Well-being

Open discussions and interactive talks were organized to address myths and stigma surrounding mental health.

- Counsellors explained the psychological effects of trauma in simple language and discussed practical coping strategies.

- Participants learned how to recognize signs of stress, depression, or trauma in themselves and others.

- The sessions emphasized the importance of mutual care — encouraging community members to look after each other's emotional health.

### d) Identification of High-Risk Cases

Several individuals displaying symptoms of severe anxiety, insomnia, or depressive withdrawal were identified during the sessions.

- These high-risk cases were referred to local healthcare providers and mental health professionals for further assistance.

- Follow-up plans were established to ensure ongoing support.



## Outcomes and Observations

The psychosocial support camp had a profound and lasting impact on the affected communities:

- **Emotional Healing:** Many participants reported reduced fear, improved sleep, and renewed hope after attending sessions.
- **Restored Social Bonds:** Group activities reignited a sense of unity, helping survivors rebuild interpersonal connections that were strained by stress and loss.
- **Empowerment Through Knowledge:** Awareness discussions empowered individuals to take charge of their emotional health and to support others in need.
- **Focus on Children and Women:** Women and children, who are often most vulnerable in post-disaster conditions, regained a sense of security and trust through compassionate interaction and creative engagement.

## Impact Assessment

- 345+ families received immediate food and shelter assistance.
- 680+ individuals accessed psychosocial counselling and emotional support services.
- Households reported restored sense of safety and stability post-distribution.
- Beneficiaries appreciated the transparent and compassionate approach of field volunteers.
- The psychosocial camp helped reduce anxiety, restore hope, and re-establish social connections.

### Focus on Vulnerable Populations

A critical focus was placed on families who lost identity and land documents, making them ineligible for state compensation. The initiative ensured such families were not left behind, thereby bridging a vital gap in relief access.



## Challenges Faced

- Inaccessibility of certain areas due to damaged roads delayed transportation of supplies.
- Verification of beneficiaries without documentation required additional community validation.
- Emotional distress among survivors made initial engagement sensitive and time-consuming.

Despite these challenges, timely coordination and the dedication of volunteers ensured effective delivery and community trust

## Sustainability & Follow-up Actions

Moitrisanjog Society plans to build upon this intervention through:

- Continued documentation recovery support for families who lost essential papers.
- Establishing community resilience cells for disaster preparedness training.
- Strengthening collaboration with local administration for long-term rehabilitation efforts.



## Conclusion

The Flood Relief Drive – October 2025 demonstrated a compassionate, accountable, and community-driven model of emergency response. With a modest budget, the initiative succeeded in combining immediate relief with mental health care, ensuring a holistic humanitarian response.

The collaboration between Moitrisanjog Society and Mariwala Health Initiative (MHI) highlighted the strength of grassroots partnerships in addressing disasters where government aid may not reach promptly. Through transparent resource use, inclusive targeting, and human-centered care, this intervention not only alleviated immediate suffering but also restored dignity, hope, and resilience among the affected communities of Coochbehar and Alipurduar.



# VOICES FROM THE COMMUNITY

The flood of October 2025 left behind not just physical destruction but also emotional and social scars that will take time to heal. The voices below, collected during relief distribution and psychosocial sessions, reflect the pain, endurance, and gratitude of those who lived through the disaster.

**Rekha Das (Khagrabari Block 2)**

*“The water came without warning. Within hours, everything was gone — our clothes, ration card, Aadhaar, and the papers of our house. My children cried for food, and we had no dry place to sleep. When Moitrisanjog Society came, they gave us rice, oil, soap, and a tarpaulin. That night we slept under a roof again. It may have been plastic, but it gave us dignity.”*

**Abdul Karim (Natabari, Small Farmer)**

*“The flood washed away my farmland and the tin house I built with ten years of savings. My wife fell sick after staying in water for two days. We lost all our papers — land deeds, identity cards — everything that proved who we are. The volunteers told us not to worry and helped us write down what we remembered. Their words gave me courage.”*

**Riya (10 years old, Khagrabari)**

*“Our books floated away. I miss my school bag. We lived in a tent for many days. Aunties came and gave us food and soap and told us to draw what we feel. I drew my house before the flood. They said it was beautiful.”*



# Flood Relief Drive

**Sunita Roy**  
(Palpara, Homemaker)

*“The hardest thing was watching my children tremble every time it rained again. They were afraid the flood would return. The counsellor’s talked to them gently, gave them drawing sheets, and let them speak about their fears. I had never seen anyone take children’s feelings so seriously. The food kit helped us, but their care healed us.”*

Impact:

Psychosocial sessions with children reduced fear and anxiety among younger members of flood-affected families.

**Haripada Mondal**  
(Elderly Beneficiary, Alipurduar)

*“My medicines got washed away, and I was shivering in the cold water. I thought no one would come because my house is far from the main road. But they came — with food, a tarp, and warm words. I felt seen and remembered.”*

Impact:

Relief distribution teams made special efforts to reach elderly and immobile residents through local volunteers.

**Sabina Khatun**  
(Ghughumari, Widow with Two Children)

*“I lost my husband years ago. The flood took the rest — my hut collapsed, and I hurt my leg while trying to save my children. I could not walk for days. I had no documents to show the government people, so they skipped my name. When the Moitrisanjog Society team gave me the relief kit, they didn’t ask for papers, only asked how I was. That kindness is rare.”*

Impact:

Sabina’s family was among those prioritized for unconditional aid — ensuring inclusion of women-headed and document-less households.

**Local Teacher – Sukla Dey**  
(Natabari Primary School)

*“After the flood, many children were coughing and weak. The camp organized by the relief team helped spread awareness about hygiene and safe drinking water. It wasn’t just about food — it was about protecting health when hospitals were far and water was still dirty.”*

Impact:

Hygiene education during the camp reduced post-flood infections and raised awareness about water safety.

**Community Volunteer – Ranjit Barman**  
(Youth Leader, Ghughumari)

*“People were not only hungry; they were broken inside. Many said, ‘We have nothing left to prove we exist.’ That’s how deep the loss of documents and identity went. The psychosocial team listened — not like officials, but like friends. It made people stand again, mentally.”*

Impact:

Local volunteers became critical emotional connectors, bridging relief workers and affected families.

# Community Reflections and Acknowledgements

Throughout the intervention, people expressed both their grief and their gratitude. While the loss of homes, documents, and livelihoods was devastating, the compassion and presence of the relief workers became a symbol of hope.

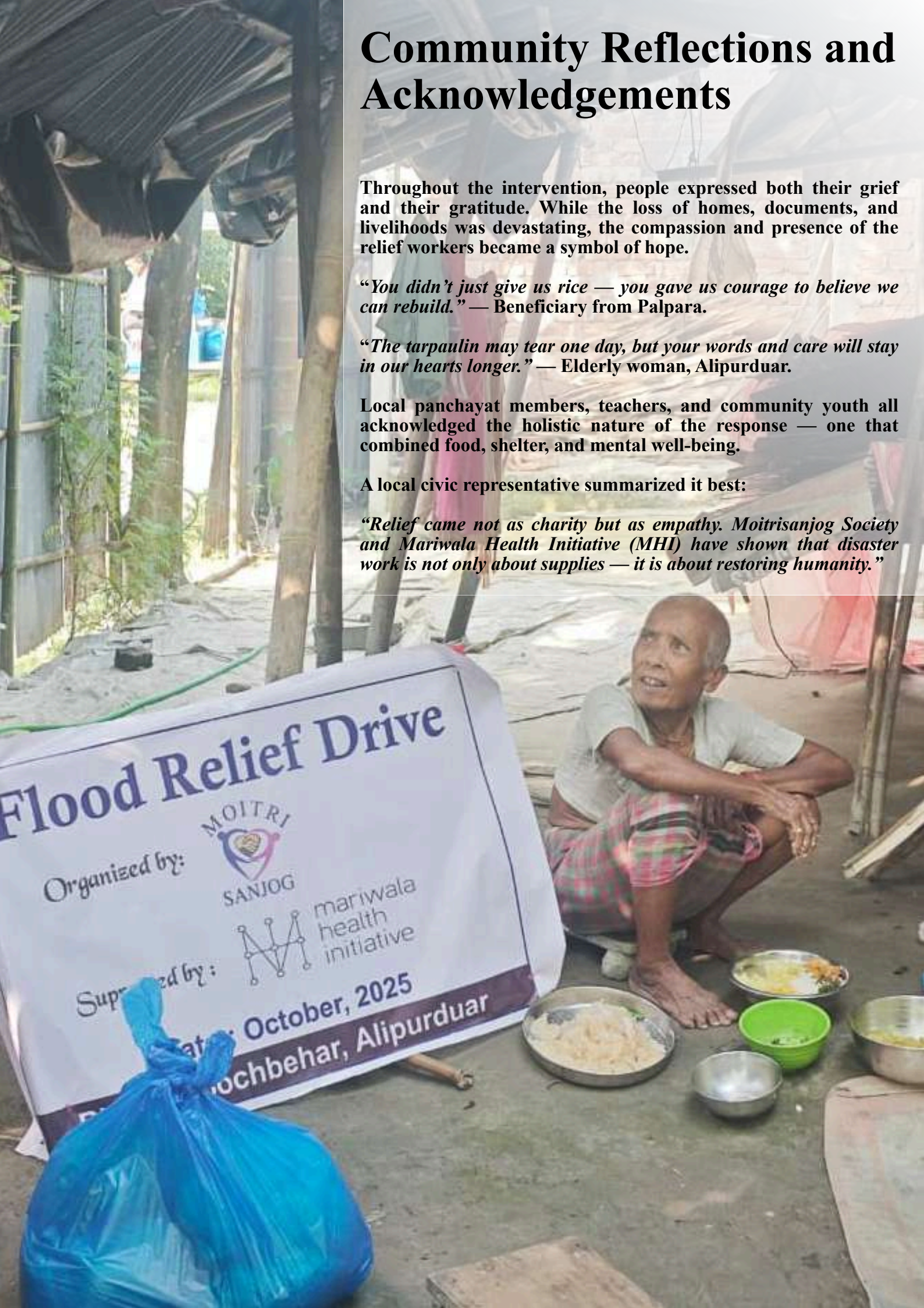
*“You didn’t just give us rice — you gave us courage to believe we can rebuild.”* — Beneficiary from Palpara.

*“The tarpaulin may tear one day, but your words and care will stay in our hearts longer.”* — Elderly woman, Alipurduar.

Local panchayat members, teachers, and community youth all acknowledged the holistic nature of the response — one that combined food, shelter, and mental well-being.

A local civic representative summarized it best:

*“Relief came not as charity but as empathy. Moitrisanjog Society and Mariwala Health Initiative (MHI) have shown that disaster work is not only about supplies — it is about restoring humanity.”*



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October, 2025  
Kochbehar, Alipurduar