













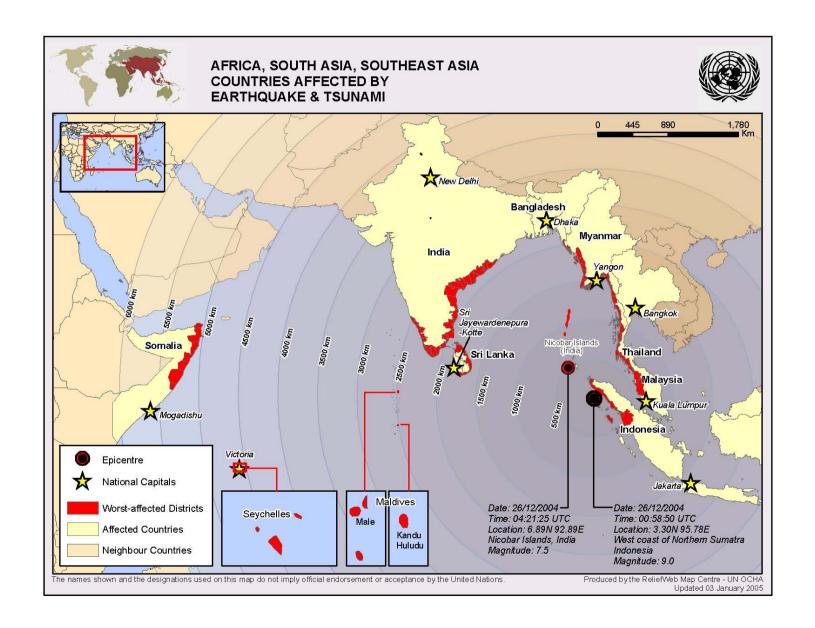


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## **EXECUTIVE SUMMARY**

In the early hours of the morning of Sunday 26 December 2004 a massive earthquake measuring 9.0 on the Richter scale struck the west coast of northern Sumatra. The epicentre was some 30 kilometres under the seabed and 250 kilometres south-southwest of Banda Aceh. The first quake was followed by aftershocks ranging from 6 to 7.3, themselves large enough to destroy thousands of lives and livelihoods. The quake triggered powerful tsunamis reaching ten metres in height, and these moved through neighbouring parts of the Indian Ocean at over 500 kilometres an hour wrecking coastal areas in India, Indonesia, Sri Lanka, Thailand and Maldives, as well as in Myanmar, Seychelles, and Somalia.

The tsunamis flooded coastal areas and wiped away homes and buildings, roads and bridges, water and electricity supplies, crops, irrigation and fishery infrastructure, food and fuel networks. To date, an estimated 139,000 people lost their lives and some 18,000 still are missing. In the affected areas economic life has ground to a halt; businesses have collapsed. Millions of people have seen their families and communities torn apart. The trauma caused by this devastating catastrophe cannot be underestimated.

The disaster predominantly affected poor communities where people lived on marginal land. Their livelihoods have been destroyed and they have been stripped of the few assets they possessed. External assistance is essential to provide the basis for recovery.

Worldwide solidarity with the affected populations has been swift and generous, and must continue well beyond the immediate disaster period. This flash appeal reflects the efforts of some forty United Nations (UN) agencies and non-governmental organisations (NGOs) to plan and implement a strategic, efficient, and coordinated response to the needs of some **5 million people**. Programmes focus on keeping people alive and supporting their efforts to recover, for example in the agriculture, education, health, food, shelter, or water and sanitation sectors. Reaching isolated communities is a serious challenge because of the destruction of transport infrastructure and communication systems. This requires the establishment of complex logistics and operations platforms. Strong coordination with Governments and between Governments and the international aid community will ensure that assistance is efficient and reaches the people who need aid most.

This Flash Appeal focuses on supporting people in Indonesia, Maldives, Myanmar, Seychelles, Somalia and Sri Lanka from January to the end of June 2005, and calls for **US\$ 977 million to fund the critical work of some forty UN agencies and NGOs**. The breakdown of financial requirements by country and sector follows.

## Financial Requirements - By Country and By Sector

Sector	Indonesia	Maldives	Seychelles	Somalia	Sri Lanka	Regional	Grand Total
AGRICULTURE	10,400,000			1,925,000		1,600,000	13,925,000
COORDINATION AND SUPPORT SERVICES	14,854,203	7,460,000	300,000	5,401,369	21,159,491	93,411,200	142,586,263
ECONOMIC RECOVERY AND INFRASTRUCTURE	17,250,000	11,652,000	7,500,000		48,960,475	24,400,000	109,762,475
EDUCATION	12,330,000	8,064,000			5,525,340	1,100,000	27,019,340
FAMILY SHELTER AND NON-FOOD ITEMS	177,160,000	19,100,000	1,100,000	496,000	23,160,000	1,000,000	222,016,000
FOOD	3,000,000			1,869,000		209,900,000	214,769,000
HEALTH	69,610,000	10,605,000		275,220	28,600,000	12,700,000	121,790,220
MINE ACTION					4,232,000		4,232,000
MULTI-SECTOR	21,850,000			212,829	4,942,000	2,710,000	29,714,829
PROTECTION/HUMAN RIGHTS/RULE OF LAW	15,100,000	1,520,000			5,634,000	4,887,500	27,141,500
SECURITY	3,000,000					200,000	3,200,000
WATER AND SANITATION	27,000,000	8,096,000			24,722,840	1,000,000	60,818,840
Grand Total	371,554,203	66,497,000	8,900,000	10,179,418	166,936,146	352,908,700	976,975,467

## **REGIONAL PROGRAMME**

## 1. INTRODUCTION

The regional scope of the tsunami disaster – up to 12 countries affected, many of those registering deaths and displacement in the thousands – requires a response in part on a regional scale. Logistics, procurement, coordination, information systems, resource allocation, and management that are conducted at a regional level, with full information and economies of scale, will significantly improve the efficiency and effectiveness of the aid response. The projects that will operate on a regional plane comprise food aid, joint logistics and air services, coordination, regional health, technical support, early warning systems, management, monitoring and evaluation, protection and human rights, capacity-building, and security for humanitarian operations.

The funding requested for regional-level aid activities amounts to US\$ 352,908,700

# Flash Appeal for Indian Ocean Earthquake - Tsunami 2005

Summary of Requirements - by Sector and Country of Destination as of 5 January 2005 http://www.reliefweb.int/fts

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Sector Name	Requirements
Regional	
AGRICULTURE	1,600,000
COORDINATION AND SUPPORT SERVICES	93,411,200
ECONOMIC RECOVERY AND INFRASTRUCTURE	24,400,000
EDUCATION	1,100,000
FAMILY SHELTER AND NON-FOOD ITEMS	1,000,000
FOOD	209,900,000
HEALTH	12,700,000
MULTI-SECTOR	2,710,000
PROTECTION/HUMAN RIGHTS/RULE OF LAW	4,887,500
SECURITY	200,000
WATER AND SANITATION	1,000,000
Total	352,908,700

#### 2. RESPONSE PLANS

## 2.1 Coordination and Support Services

## **Coordination**

For an optimally effective and efficient aid response that confronts the regional extent of this disaster, coordination will have to operate on a regional plane. Logistics, coordination, information systems, resource allocation, and management that are conducted at a regional level, with full information and economies of scale, will significantly improve the efficiency and effectiveness of the aid response. Agencies therefore seek support to establish or reinforce regional support systems, to enhance field-level coordination of relief activities, keep the international community informed of the situation and needs in affected countries, and avert gaps in response to the disaster for a period of six months. Throughout these activities, agencies aim at ensuring a smooth transition to the recovery and reconstruction phase, and at monitoring the implementation of projects contained in this appeal. Agencies also aim at strengthening response preparedness, including contingency planning and early warning mechanisms.

#### **Objective**

• Ensure that humanitarian action in tsunami-affected countries is supported and coordinated for optimal efficiency, effectiveness, and speed.

#### **Activities**

#### OCHA will:

- Maintain and strengthen its support to the UN country teams in Indonesia, Maldives, Sri Lanka and Somalia. To support Aceh, Indonesia, which suffered serious human loss and damage in coastal areas difficult to access, OCHA will establish an area support office in Sumatra and an Humanitarian Information Centre (HIC) for Aceh;
- Establish and strengthen its Regional Support Office in Bangkok to support the above countries and other disaster-affected countries, promoting regional cooperation. A sub-office will also be established near the most affected countries to provide logistic support;
- At headquarters level, strengthen OCHA's Special Taskforce for the tsunami Disaster in Geneva
  to support the field and regional relief activities. It will also strengthen its response capacity based
  on lessons learnt from this disaster. In New York, OCHA will advocate and promote the concern of
  the international community about this disaster in cooperation with the UN Headquarters in New
  York.

#### UNICEF will:

- Provide coordination and support on programme areas and functions including water and sanitation, health and nutrition, child protection, and education;
- Provide technical guidance and support at the global and regional levels for the sectoral leadership roles undertaken by UNICEF at country level;
- Provide coordination, support and guidance on emergency response, advocacy and communication, and operational responses;
- Provide support to ongoing monitoring and evaluation of UNICEF-assisted emergency response;
- Ensure that UNICEF's emergency response at country level is gradually mainstreamed in the country's recovery and development strategy;
- Strengthen knowledge management systems and networks to ensure lessons are learned and incorporated into ongoing response.

#### **Expected Impact**

- Beneficiaries and the implementing agencies working with them will benefit from more rapid, efficient, comprehensive response using coordination mechanisms and services;
- Substantial technical support for coordination of emergency response, programme delivery, and monitoring and evaluation will be available in the short and medium term.

#### **Regional Logistics Support Services**

#### **Objectives**

- Establish in Male, Banda Aceh (Indonesia) and Colombo (Sri Lanka) an inter-agency staging area for the coordination, call-forward and on-forwarding of humanitarian aid, including a passenger air service on behalf of UN agencies and NGOs where commercial services are insufficient;
- Optimise and complement the logistics capabilities of cooperating agencies during the initial phase of humanitarian operations;
- Provide inter-agency telecommunications services.

#### **Activities**

- On behalf of UN agencies and NGOs, provide aircraft to supplement those currently provided by donor governments; establish five movement control teams at key air terminals to manage and redistribute aid by air; establish a humanitarian air transport staging facility for the receipt and onward transmission of humanitarian aid to the affected countries in the region; and set up a passenger service on behalf of UN agencies and NGOs;
- Provide, through UNJLC, general logistics coordination services with both humanitarian and other
  actors, including logistics information management, movement coordination, air coordination
  through the recently established air cell and nodes, fuel information, logistics-related civil military
  coordination, and customs / immigration support;
- Upgrade, staff and maintain the existing Inter-agency Telecommunications Network in the affected areas to provide the infrastructure for inter-agency communications necessary for coordination and operational management.

## **Expected Impact**

- Food and non-food relief items of UN agencies and NGOs delivered;
- Effective and cost-efficient communications;
- Decongestion of airports and other logistics infrastructure to allow for faster, more efficient provision of assistance to those in need by humanitarian organisations.

#### **Early Warning**

## **Objectives**

- Rapid boosting of the capacities for action and planning by public authorities:
- Linking the available technical capacities on tsunami with humanitarian and emergency management capacities.

#### **Activities**

Quickly assess the tsunami warning capacities of the region, establish interim networks among practitioners and authorities, conduct regional meetings of relevant practitioners for both training and coordination aims, develop interim information materials for practitioners and community leaders, and provide necessary coordination and support for the affected countries.

The first phase of activities (focusing on the evaluation, preliminary meetings, a main conference and interim support) will be concluded in a period of 6 months. Further phases aiming at strengthening technical capacities at regional, national and local levels, including training, awareness raising, institutional development and equipment to be provided to national and local institutions, will require another 18-20 months.

## **Expected Impact**

Improved public confidence and security, authoritative information products provided to the humanitarian community, and a sound basis for coordination and informed implementation of tsunami warning systems in the region.

## 2.2 Economic Recovery and Infrastructure

A multi-pronged strategy that addresses immediate humanitarian needs and lays the groundwork for sustainable recovery, reconstruction, and development is urgently needed. An important component of such a strategy will be measures that will help prepare communities for future disasters and help minimise their impact.

In order to support the recovery effort at the scale and depth required, UNDP seeks to complement the national and inter-agency initiatives with Regional Disaster, Recovery and Reconstruction Planning Support. This support, with an initial duration of six months, will provide high-level technical assistance and operations support to the national recovery teams in: 1) coordinating information on disaster damages and recovery needs; 2) preparing and providing multi-hazard risk assessment information and assisting countries to develop safety standards accordingly; 3) meeting a variety of emergency capacity needs of countries in the region; and 4) establishing (in collaboration with ISDR) an early-warning system for the Indian Ocean.

#### **Objectives**

- To ensure effective coordination of recovery and reconstruction planning efforts at the regional, national and local levels;
- To ensure that recovery and reconstruction initiatives contribute to enhancing safety standards in the affected areas, and are based on sound hazard, risk and damage assessments;
- To contribute to rapid recovery through livelihood restoration:
- To build national and regional capacities for disaster preparedness and risk reduction.

#### **Activities**

- Establish recovery coordination facilities in Bangkok and Delhi to collect, collate and disseminate information on damage assessment and recovery priorities;
- Monitor progress, disseminate good practices, and lessons learnt throughout the region;
- Compile a roster of experts, consultants and operations support staff, to support UNDG agencies, GOs, NGOs and recovery teams in all countries affected;
- Undertake multi-hazard risk analysis to serve as the basis for enhanced safety standards in the recovery and reconstruction effort, taking into consideration the complete hazard profile of the affected areas;
- Assist in the development of criteria for acceptable levels of risk for each country;
- Provide targeted capacity-building activities at the regional level, including restoration of livelihoods and income-generating activities; provision of shelter and reconstruction of built environment; development/implementation of elementary early warning systems, especially at the community level; formulation/revision of national and local disaster preparedness plans, hazard and risk mapping; general training and human resource development activities for recovery, reconstruction planning and risk reduction;
- Assist in the development and implementation of an early warning system for the Indian Ocean.

## **Expected Impact**

- Coordination mechanisms established in the emergency relief phase are maintained and enhanced;
- Successful approaches to recovery are documented and shared;
- National capacities are augmented where needed;
- Recovery and reconstruction criteria are developed on the basis of a general hazard profile of the affected communities and not only on this extreme event;
- Safety standards in reconstruction and ensuing development are adopted and/or improved;
- Livelihoods are restored for severely affected populations;
- Early warning system is functioning and complementary capacity building activities are in progress.

#### 2.3 Food

Large numbers of people lack access to food and need immediate food assistance. Governments used their immediate food stocks to support those affected, while international relief began to arrive soon after the disaster struck.

WFP's response through a Regional Emergency Operation (EMOP) seeks to meet relief needs of the most affected and support initial rehabilitation efforts. The operation will cover the worst hit countries of Sri Lanka, Indonesia and the Maldives, who have appealed for further food assistance from WFP and the international community at large. Needs in some other affected countries such as Somalia and Myanmar will also be covered. In addition, there is a contingency for any increased needs in the region as the situation continues to develop.

This EMOP will be supported by two Special Operations: logistics augmentation in support of regional EMOP; and ii) regional air support for inter-agency humanitarian operations. In addition, WFP has taken the lead in establishing the United Nations Joint Centre (UNJLC) for interagency logistics coordination, including the coordination of air assets.

#### **Objectives**

- To save lives and prevent a deterioration in the nutritional status of vulnerable children and mothers:
- To promote the rehabilitation of housing, community infrastructure and livelihoods;
- Re-constitute and maintain a reliable transport capacity in affected countries in the region to support the delivery of food and other essential humanitarian relief items;
- Provide base camps for other UN agencies and NGOs.

#### **Activities**

Given the scale of devastation in the affected areas WFP is providing relief rations to all populations in internally displaced camps and targeted populations in severely affected communities. In addition WFP is providing supplementary rations to vulnerable groups especially children under five, and pregnant and lactating women. Relief food distribution is organised either as on-site feeding or takehome rations depending on the situation. As displaced people return to their homes and fishermen, farmers and other poor families re-establish their livelihoods, the operation will shift to support the rehabilitation of farmland, community infrastructure and housing. Although this is a Regional operation, the specific modalities of implementation have been designed and planned separately for each country.

## **Total Food Needs and Beneficiaries by Country**

	Sri Lanka	Maldives	Indonesia	Contingency/ Other Countries*	TOTAL
Beneficiaries	750,000	50,000	1,000,000	200,000	2,000,000
Total MT	61,225	4,230	95,940	7,920	169,315

<sup>\*</sup> The total of beneficiaries includes an estimated 30,000 people each in Somalia and Myanmar and some 140,000 for the contingency.

#### Indonesia

WFP will implement the operation through BAKORNAS, the Government disaster response group who are coordinating all relief aid. Continuing existing arrangements, BAPPENAS (Social Ministry) and Local Red Crescent will be in charge of identification of beneficiaries and distribution of food. In addition, local and international NGOs will be WFP's main cooperating partners.

#### Sri Lanka

WFP will implement the operation through the Ministry of Relief, Rehabilitation and Reconciliation and coordinate closely with the National Relief Operations Unit of the CNO, and with District and Divisional Disaster Management Authorities. In the Northeast, WFP works with the Tamil Rehabilitation Organisation (TRO) and other LTTE authorities. Food distribution at community level is organised through Multi-purpose Cooperative Societies. WFP will partner with international and national NGOs including OXFAM, WVI, SCF, ACF in addition to the ICRC and IFRC in several areas, particularly the Northeast, to implement distribution and monitoring.

#### **Maldives**

Food distribution is organised by the Government Emergency Rescue Centre in Male. Food is despatched to the Atoll chiefs (centralised distribution centres), who subsequently distribute the food to the islands through island chiefs.

## **Expected Impact**

- Avoidance of deterioration of the nutritional status of the most affected vulnerable population especially women and children;
- Rehabilitation of housing, community infrastructure and livelihoods.

#### 2.4 Health

Human survival and health are both the objective and the barometer of the success of all humanitarian work. Urgent action is now needed to address the critical public health needs of more than five million people in the Southeast Asian region affected by the earthquake and tsunamis. They lack access to basic needs like clean water, adequate shelter, food, sanitation and health infrastructure and this will have a significant impact on their near and long term health. Therefore, the global response to this public health crisis will be a critical indicator of the success of the overall relief and recovery effort.

WHO's Emergency Programme for Southeast Asia will be implemented by WHO Country Offices in the region and managed by the WHO South East Asia Regional Office (SEARO) in New Delhi, in partnership with the Department for Health Action in Crisis at WHO Headquarters in Geneva. Technical expertise throughout the global WHO network from technical departments, other regional and country offices, and partner organisations have been mobilised to assist this emergency programme. This regional appeal will support and complement the various country-specific appeals that are part of this flash appeal. WHO will provide a speedy, credible and appropriate emergency response to countries that have been severely affected and also work with the national authorities of those less badly affected.

The core elements of this programme have been developed in order to have an effective impact on urgent life-saving measures, and medium and longer-term recovery efforts in seven South East Asian countries. These include: 1) prompt set-up of disease surveillance and response efforts through early warning systems and the Global Outbreak Alert & Response Network; 2) co-ordination of health actors at local, national and international level; 3) guidance on addressing all major public health issues in the region and filling critical gaps; 4) assessment of health infrastructure and the quality of services in hospitals and health centres; and 5) monitoring of the effective and efficient functioning of medical supply chains. WHO is requesting a total of US\$ 60.3 million for the successful implementation of tsunami-related emergency programmes, including this regional-level programme. As more detailed assessments are undertaken and if it is found that there is a substantial deterioration in the structures, then it is highly probable that health needs will escalate.

SEARO serves 11 Member States populated by 1.5 billion people, representing 25% of the earth's population and some of the world's poorest. Its technical and administrative capacity are already stretched to the extreme and hence significant scale up in staff is required to manage and run the emergency programme while also maintaining the ongoing health projects in the countries.

A regional operational platform has been put in place to implement the emergency response activities over the next 6 months. Operations Rooms (OP) have been established at the Regional Office to support the Emergency Taskforce established under the leadership of the Regional Director and Deputy Regional Director. Skilled mobile 'response' teams consisting of technical experts in epidemiology, surveillance and early warning systems, environmental health, health infrastructure, logistics, communications, security, finance and administration will be deployed in the affected countries to work with national authorities to strengthen or help re-establish public health systems.

Hundreds of staff, health kits, medical equipments and technical support materials have to be mobilised to deliver a credible, timely and meaningful programme of work in a diverse and demanding, and in some areas, high security risk operational environment. Managing the scale and complexity of a programme of this magnitude requires expertise in logistics, coordination, and administration. Effective management at the regional level is essential to ensuring that the delivery of this programme is efficient and it meets the needs of the affected population so as to save lives and reduce suffering now and in the future.

A regional support office will be established in Bangkok to ensure connectivity with the Joint Task Force and the CORE group. Regional-level planning will be carried out so that WHO can integrate the emergency plan with the long-term WHO Plan of Work in the countries to ensure the continuum from relief to recovery and development. WHO will also support the Ministry of Health of each affected country for conducting in-depth assessments of the recovery and reconstruction needs of the health sector, building on its expertise accumulated in Sudan, Liberia, Afghanistan and Iraq. This will ensure that programmes like disease surveillance and health information systems will persist after the emergency phase.

Looking forward, there is a need to organise lessons learnt exercises to determine how the UN system and the health sector reacted to the unprecedented disaster. Critical evaluation of the response to this disaster by the humanitarian community will be conducted in the affected areas.

## **Objectives**

The overall objective is to support national health authorities to protect the health of survivors and other vulnerable people affected by the disaster. Also:

- To monitor public health to provide early warning of emerging health threats and to enable the timely organisation of any necessary response;
- To work with the Ministries of Health and other agencies to support the health sector response to the disaster and to assist in the recovery and rehabilitation of the country's health system, including replacement of lost assets and provision of technical expertise.

#### **Activities**

- Prompt set-up of a disease surveillance system to monitor the public health situation, provide early warning of emerging health threats to enable the timely organisation of necessary response;
- Support Ministries of Health in coordination of the health sector activities to help ensure the best use of available resources and avoid duplication of activities;
- Manage the mobilisation and coordination of technical staff, health supplies and medical equipment;
- Establish a functioning OP at the regional office and support the emergency joint task force in back-stopping of assessment and coordination activities;
- Develop a strategy that will integrate the relief work into WHO's long-term plan of work;
- Organise a lessons learnt exercise and conduct critical evaluation of the emergency relief work.

## 2.5 Protection, Human Rights, Rule of Law, Integration and Livelihoods

The devastation that communities have experienced in the wake of the earthquake tsunami in Asia and Africa is unprecedented. While the focus of the response is rightly on saving lives and delivering immediate relief, these must build toward a comprehensive strategy for longer-term reconstruction and development. The approach taken in the current relief efforts will set the foundations for the healing and rebuilding of shattered communities, economies, and capacities. In two of the worst hit areas, the province of Aceh in Indonesia and Sri Lanka – as well as in Somalia – the current devastation converges with the complex consequences of decades-long civil war and, in some places, severe poverty. These forces have generated division and deprivation. But they have also led to the emergence of survival systems and mutual-aid networks, including among internally displaced and refugee communities. And women have been at the forefront of many of these. So, as the international community organises to provide much needed assistance, it must prioritise the mobilisation and support of women's networks that are crucial for emotional, social, and economic recovery.

In Aceh, which suffered two-thirds of the total death toll of the disaster, women are renowned for their central role in society, and have for years been at the heart of community networks. With the out-migration of men to neighbouring provinces and countries since the 1980s, seeking both protection and economic security, it is estimated that women comprise up to 70% of Aceh's population of four million. Through years of conflict, the multiple roles women played came to form the lifeline of their communities: heading households, sustaining subsistence economies, raising children, and caring for the sick, wounded, and elderly. In this province and elsewhere, women have been at the forefront of developing survival strategies, struggling to keep communities and their economies alive, even while bearing the violence of war and the burden of poverty.

Within two days of the tragedy, women's organisations that UNIFEM has been working with in Indonesia, Sri Lanka and Somalia began sending stories and information from women affected by the disaster. The women home-based workers in Sri Lanka that UNIFEM has been supporting for the past 3 years are losing their primary livelihoods. Women's groups in Sri Lanka have already reported incidents of rape and molestation of women and girls in rescue operations and in temporary shelters. In Aceh, where aid operations are taking place under the framework of continuing civil emergency, women volunteers have reported facing harassment and intimidation. Women who are now heads of households and have lost male family members are particularly vulnerable. To ensure that the relief and reconstruction effort in Indonesia, Sri Lanka and Somalia take fully into account the human rights, protection, livelihood and leadership of women and women's organisations, UNIFEM is proposing to

mobilise its networks and experience in support of a coordinated effort toward a gender-responsive emergency-response and long-term reconstruction.

#### Activities

The project will build on UNIFEM's long history of work with women's organisations and networks worldwide. It will highlight quick impact projects, building on existing women's associations and networks, as well as initiatives to build capacity to better protect and promote women's human rights during the first year of relief and reconstruction. It consists of the following activities:

## Leadership and mobilisation of women's organisations

- Rapid appraisal/mapping of women's associations, organisations and networks in the affected communities, as well as other support organisations in the country;
- Quick Impact Funds channelled to existing women's organisations and associations who have concrete projects and ideas for responding to the crisis (including support to trauma counselling and other efforts to address the psycho-social repercussions of the tsunami);
- Capacity-building for members of women's organisations particularly widows and those without male family members – so that they can participate in mainstream initiatives to re-build communities:
- Advocacy with government, UN and international NGO efforts to ensure that women's associations and networks are part of mainstream relief and development efforts;
- Mobilisation of media professionals (e.g., video, radio, etc.) in the affected countries to follow the
  path of women who are taking key roles in reconstruction to highlight their efforts and produce a
  series of multi-media training materials that can be used in tsunami recovery, as well as in future
  responses to natural disasters.

#### Livelihoods

- Build on UNIFEM's previous support to home-based workers' groups in Sri Lanka to assist them to re-generate their livelihoods and expand their numbers, targeting internally displaced widows and women headed-households;
- Create a 'solidarity' network that will train and link women producer groups to export markets, building on the outpouring of support and interest in supporting tsunami-affected areas;
- Monitor mainstream economic development initiatives being put into place for reconstruction and advocate to ensure that internally displaced women have equal opportunities and capacities to benefit from these.

### **Protection**

- Provide training and resource materials to relief and reconstruction workers in existing UN guidelines related to protection of women and girls from violence and other human rights abuses;
- Work with UNHCR, UNFPA and UNICEF to devise and implement a strategy for preventing, monitoring, and responding rapidly to exposure of women and girls to violence in shelters, food distribution programmes and other relief efforts;
- Work with OHCHR and qualified national and international NGOs to provide training to 'monitors' to document and disseminate information about abuses of women's human rights;
- Support local NGOs to work with informal women's networks in IDP communities in order to facilitate linkages to humanitarian assistance and promote women's security.

## **Expected Impact**

- Women's grassroots organisations and networks in tsunami-affected areas are equal participants in and shapers of the emergency response and reconstruction efforts in Indonesia, Sri Lanka and Somalia;
- Mainstream organisations are able to easily access and incorporate the skills and networks of women's grassroots associations in their programmes;
- Women particularly widows and other heads of households are able to re-generate their livelihood options, and economically benefit from solidarity worldwide by expanding markets for products of women producer groups from affected areas;
- Successful model generated and implemented to support a coordinated approach to preventing violence against internally displaced women in disaster situation;
- Mainstream economic development programmes prioritise involvement of women particularly those most vulnerable – in both traditional and non-traditional skill areas;
- Capacity of local NGOs to monitor and disseminate information about women's human rights expanded.

## 2.6 Security

United Nations personnel responding to a crisis of this magnitude require a 24-hour safety net for all staff members in all locations. Locations of UN/INGOs operations must be continuously assessed and the Security Teams must maintain ongoing contact with local authorities in order to keep abreast of the evolving security situation and inform staff accordingly. Clearly, as the number of operations in accessible areas continues to increase, the tasks of the Security Teams multiply accordingly. The provision of timely and accurate threat and risk assessments is essential to maintaining staff and operational safety. Humanitarian agencies depend upon the Security Teams to relocate staff from insecure areas to safety, to provide medical evacuations for staff members who become ill or are injured in the field, and to perform search and rescue operations for staff that become lost or stranded. The constant provision of these services is a pre-requisite for all other programme interventions in response to the tsunami Crisis.

#### Objective

Ensure the safety and security of UN and NGO partners' staff working in response to the tsunami Crisis.

#### **Activities**

- Ensure the availability and dissemination of accurate threat and risk assessments with regard to programme activities in the region;
- Ensure that all staffs are briefed on security measures and receive security training based on the circumstances in the field:
- Ensure that staffs are provided with; and proficient in the use of, safety equipment, including communications equipment, required in the field;
- Promote a dynamic and appropriate security communications network;
- Provide close supervision for the security of all operations, road and air included;
- Ensure appropriate professional liaison with local authorities responsible for security;
- Collect, analyse and disseminate security information to all concerned parties.

#### **Expected Impact**

- Effective security management plans, mitigation of risks and management of critical security incidents:
- Number of staff trained in security awareness;
- Efficient security tracking and communication systems established;
- Fully deployed and functional Area Security Management system in place;
- Safe delivery of assistance to the affected population.

## 3. ROLES AND RESPONSIBILITIES

Sector	Lead UN Agency	Government Counterpart	Other Agencies Involved in the Sector
Food	WFP	Various	WFP, Red Cross/Crescent, NGOs and private sector
Coordination	OCHA	Various	UNJLC, UNICEF, UNHCR, other UN Agencies, Red Cross/Crescent and NGOs
Logistics & Support Services	WFP	Various	UNJLC, UNICEF, UNHCR, OCHA, other UN Agencies, Red Cross/Crescent and NGOs
Early Warning	ISDR	Various	OCHA, UNDP
Health	WHO	Various	UNICEF,
Economic Recovery and Infrastructure (Recovery and Reconstruction Planning)	UNDP, in partnership with UNDG members	Ministries of Planning, Government Crisis Tasks Forces, Local Government authorities	NGOs

# 4. PROJECT TABLES

COOR	RDINATION / SUPPORT S	ERVICES / LOGISTICS	US\$					
	Beneficiaries:	Partners:	1,205,000					
	Aid agencies operating	Governments;						
	in the region in	NGOs (international and local);						
	response to tsunami,	UN Agencies						
00114	and their beneficiaries							
OCHA	in turn							
TSU-REG-	Project Title: Inter-Agency Telecommunications Network							
05/CSS07-REGION		maintain the existing Inter-agency Tele						
		provide the infrastructure for Inter-Agen						
	necessary for coordination and operational management. Harmonise activities between							
	the humanitarian community and its Government counterparts to ensure effective communications while avoiding duplication of systems. Maximise the use of local							
		maintenance and future reconstruction						
	Beneficiaries:	Partners: Governments;	5,323,000					
	Aid agencies operating	NGOs (international and local);						
ОСНА	in the region in	UN Agencies						
	response to tsunami, and their beneficiaries							
TSU-REG-	in turn							
05/CSS04-REGION		l Humanitarian Coordination for tsunami	Posponso					
		itarian action in tsunami-affected coun						
		efficiency, effectiveness, and speed.	tiles is supported and					
	Beneficiaries	Partners:	19,583,200					
	Total: Millions of		10,000,200					
	women and children	NGOs (international and local						
UNICEF	affected by the	UN Agencies						
ONIOLI	tsunami disaster in	- City igoliolog						
TSU-REG-	Indian Ocean countries							
05/CSS03-REGION	Project Title: Coordination & Support Services for tsunami Affected Countries and for							
	UNICEF's Global and Re	egional Response.						
	Aim: To ensure provis	ion of effective coordination and su	upport to tsunami affected					
	countries and to UNICEF	s global and regional response.						
		Partners: UN agencies, Red	4,000,000					
	Beneficiaries: NA	Cross/Crescent, NGOs, civil and						
UNJLC		military authorities						
		nent of a UN Joint Logistics Centre in						
TSU-REG-		cs & Movement Coordination and Aug	gmentation to Humanitarian					
05/CSS02-REGION		ponse to the Indian Ocean tsunami						
	the initial phase of huma	plement the logistics capabilities of coo	perating agencies during					
	the initial phase of huma	Partners: Local community	12,500,000					
	Beneficiaries:	organisations / volunteer groups;	12,300,000					
	Affected governments	national Government departments						
UNV	and local communities	and NGO bodies within affected						
ONV	in Asia region	areas						
TSU-REG-	Project Title: United Nat	tions Volunteers Support to Local Com	nmunities for tsunami					
05/CSS05-REGION								
		ncy relief and recovery assistance to o	communities affected by the					
	Asia tsunami crisis; medium and longer term recovery and reconstruction, including micro-							
	grant assistance to local	government / non-government entities						
		Partners: UN agencies, Red	42,500,000					
WED	Beneficiaries: NA	Cross/Crescent, NGOs, civil and						
WFP		military authorities						
TSU-REG-		peration for WFP Air Support of Human	nitarian Relief Operations in					
05/CSS01-REGION	Response to the Indian (							
	<b>Aim:</b> Coordinate the reception and forwarding-on of relief assistance to beneficiaries in							
		assenger air service for UN agencies a						

	US\$					
	Beneficiaries:	Partners: Secretariat of the	8,000,000			
	National Governments	International Co-ordination Group				
	and practitioners in the	for the tsunami Warning System in				
UN/ISDR	12 affected countries	the Pacific (ICG/ITSU, based at				
Coordinated by	by the tsunami,	UNESCO/IOC); WMO, UNEP,				
the International	focusing on disaster	UNDP, Asian Disaster Reduction				
Strategy for	management	Centre (ADRC), US/NOAA, Japan				
Disaster	agencies, local	Meteorological Agency (JMA) and				
Reduction	authorities and	national focal points.				
(ISDR), through	scientific-technical					
its Platform for	institutions.					
the Promotion of		ion and strengthening of Early War				
Early Warning		mber 2004 tsunami in South East and				
(PPEW).		confidence and security, a rapid boo				
		r early warning by public authoritie				
TSU-REG-	products needed by the humanitarian community, and a sound basis for coordination and					
05/CSS06-REGION	Informed implementation of todinami warning systems in the region, to assist countries with					
		g systems, by planning a roadmap to				
		rs and facilitate coordination among e				
	and early warning systen	ns; and provide overall organisational a	assistance.			

EC	US\$			
UNDP TSU-REG- 05/ER/i01-REGION	Beneficiaries: National and local authorities, NGOs, local communities, regional organisations  Project Title: Emergence	Partners: Ministries of Planning, Government Crisis Tasks Forces, Local Government authorities, NGOs	Project total Component 1 Coordination Component 2 Risk assessment info Component 3 Capacity building support Component 4 Early warning system g for Recovery and I	22, 000,000 1,000,000 1,000,000 10,000,000 10,000,00
				gion and others affected, nergency capacity building
	and technical support for			lengency capacity building

	FOOD			
	Beneficiaries:	Partners: Government authorities,	185,500,000	
	2,000,000	NGOs/Red Cross/ Crescent		
WFP		Societies/civil society organisations		
	Project Title: Regional	EMOP "Assistance to tsunami Victims	in Indonesia, Sri Lanka, The	
TSU-REG-05/F01-		ntries in the Indian Ocean Region"		
REGION		prevent deterioration in the nutritional		
	and mothers; and prom	note the rehabilitation of housing, co	ommunity infrastructure and	
	livelihoods.			
	Beneficiaries: 2	Partners: National authorities of	24,400,000	
	million	various effected and donor		
WFP		countries; private sector		
	Project Title: Logistics A	Augmentation in support of WFP Indian	Ocean tsunami Emergency	
TSU-REG-05/F02-	Operation			
REGION	Aim: Re-constitute and maintain a reliable transport capacity in affected countries in the			
	region to support the delivery of food and other essential humanitarian relief items. In			
	addition, WFP is providin	g base camps for other UN agencies a	and NGOs.	

	HEALTH			
	Beneficiaries: Survivors and persons affected by the effect of the	Partners: Ministries of Health of affected countries; UNICEF, UNFPA and NGOs active in the health sector	12,200,000	
WHO	earthquakes and tsunamis in South Asia			
TSU-REG-05/H01- REGION	Project Title: Enhancing capacity to respond to health threats at regional level supporting health coordination			
	Aim: To support national health authorities to protect the health of su vulnerable people affected by the disaster, to provide early warning of emerg threats and to enable the timely organisation of any response, to work with the Health and with partners in the coordination of the health sector response.			

PROTECTION, HU	JMAN RIGHTS, RULE OF LA	AW, INTEGRATION AND LIVELIHOODS	US\$	
	Beneficiaries: Internally	Partners: Women's grass roots and	3,587,500	
	displaced women –	advocacy NGOs; relevant government		
	especially those who have	ministries; UN partners, especially		
	lost male family members	UNHCR, OCHA, OHCHR, UNFPA,		
	<ul> <li>and their families in</li> </ul>	UNICEF and UNDP		
UNIFEM	Indonesia (Aceh), Sri			
TOUREO	Lanka and Somalia			
TSU-REG- 05/P/HR/RL01- REGION	<b>Project Title:</b> Women's Leadership and Livelihoods in Relief and Reconstruction in tsunami-affected Communities			
REGION	Aim: To protect and promote women's rights to livelihoods and safety in the relief and reconstruction of tsunami-affected areas in Indonesia, Sri Lanka and Somalia;  To increase the capacity and leadership of women's grass-roots and advocacy organisations to participate in and influence mainstream relief and reconstruction efforts in Indonesia, Sri Lanka and Somalia			

	SECURITY			
	Beneficiaries	Partners: UN System and NGO	200,000	
	Over 15,000 UN Staff and	partners		
	Dependants in the region			
UNSECOORD	plus beneficiaries of			
	UN/NGO Programmes			
TSU-REG-05/S01-	5/S01- Project Title: Reinforcement of the Regional Field Security Coordination Structure			
REGION	support of United Nations assistance to tsunami affected countries.			
	Aim: to provide security services to United Nations agencies funds and programmes and			
current NGO Partners, operating in the affected region, in accordance with				
	UNSECOORD established	procedures		

	CHILD PROTECTION		
	Beneficiaries:	Partners:	1,300,000
	Total: 20,000 families	- MoPH; MoSDHS	
	Women: over 20,000	WV Foundation of Thailand (WVFT);	
	Children: over 50,000	NGOs	
UNICEF		- Six Provincial SDHS and Public	
J		Health Offices	
TSU-REG/THAI-	Project Title: Child Protection		
05/P/HR/RL02-	Aim: Provide psycho-social support to social service care providers (such as teachers,		
REGION	health and community workers); Strengthen capacities for psycho-social care and support		
		s in the affected population; and specialised	d psycho-social care
	and support for traumatised children and families.		
	Identify any separated and	I/or unaccompanied children and ensure	the systems are in
	place to reunite them with the	neir families (immediate or extended).	

EDUCATION			US\$
	Beneficiaries:	Partners:	1,100,000
	Total: 20,000 families	- MoE; NGOWV Foundation of	
UNICEF	Women: over 20,000	Thailand (WVFT)	
	Children: over 50,000	- Six Provincial Education Office	
TSU-REG/THAI-	Project Title: Emergency Education		
05/E01-REGION	Aim: Support getting children back into school for the 4 January opening (or as close as		
	possible to this date) and sustain children's attendance in schools as a contribution to a		
	return to normalcy.		

WATER AND ENVIRONMENTAL SANITATION			US\$		
	Beneficiaries:	Partners:	1,000,000		
	Total: 20,000 families	- MoOH; NGOs			
UNICEF	Women: over 20,000	<ul> <li>Six Provincial Education Office</li> </ul>			
	Children: over 50,000				
TSU-REG/THAI- Project Title: Water and Environmental Sanitation					
05/WS01-REGION	Aim: Ensure adequate safe water and safe excreta disposal for tsunami-affected				
	population in Thailand to prevent water- and excreta-related diseases, with an emp				
	the most vulnerable.		•		

	HEALTI	1	US\$	
	Beneficiaries:	Partners:	500,000	
	Total: 20,000 families	MoSDHS; MoPH; MoI; NGOs, CBOs,		
	Women: over 20,000	Local Government structures		
UNICEF	Children: over 50,000			
TSU-REG/THAI-		t to Thai local authorities for multi-sectoral e		
05/H02-REGION	assistance (at least 10 distri	cts) in health, nutrition, and livelihoods of cl	nildren	
00///02 / 120/01/		response for multi-sectoral support and pr		
	disease outbreaks. In close	collaboration with districts, monitor Thai Go	vernment response	
	to this emergency.			
	Beneficiaries:	Partners:	860,000	
LINIOFF	Total: 20,000 families	MoSDHS; MoPH; MoI; NGOs, CBOs,		
UNICEF	Women: over 20,000	Thai Local Government structures		
TSU-REG/THAI-	Children: over 50,000			
05/CSS08-	Sos Project litie: Direct support to Thai local authorities for multi-sectoral emergency			
REGION	assistance (at least 10 districts), including assessment, monitoring, emergency logistics,			
	communications and recovery cost			
	Aim: Provide logistics, comi	munications and assessment support		

SHELTER			US\$
UNDP  TSU-REG/THAI- 05/S/NF01- REGION	Beneficiaries: 4,000 households Women: Over 1,000 Children: Over 1,000  Project Title: Support to Sa Thailand Aim: To provide safer housi	Implementing Partners: National Housing Authority, Ministry of Social Development and Human Security Ministry of Interior Community Organisation Development Institute (CODI) Local Governments Associations NGOs UNHABITAT Inter Housing Initiatives for the Six tsunami-Aing to the six tsunami-affected provinces through the six t	1,000,000

	LIVELIHOODS AND BASIC NEEDS				
IOM TSU-REG/THAI-	Beneficiaries: Total: 10 000 households Women: Children:	Partners: Ranong Provincial Public Health Office, MOPH, WHO	550,000		
05/MS01-REGION		placed undocumented migrant workers and alth care, shelter, and basic needs.	d other mobile		
IOM/ UNICEF/ UNFPA	Beneficiaries: Total: 500 families Women: Children:	Partners: Thailand Ministry of Social Welfare, World Vision	1,100,000		
TSU-REG/THAI- 05/MS03-REGION	Project Title: Voluntary return and reintegration of displaced migrant workers from Myanmar Aim: Voluntarily repatriate estimated 500 displaced families from Ranong province to Myanmar and reintegrate them in their respective home communities in Myanmar				
UNDP/ CODI TSU-REG/THAI-	Beneficiaries: 20 coastal communities Total: 20 000 households Women: Children:	Partners: CODI, NGOs, CBOs, Local Government structures	1,100,000		
05/ER/I02- REGION	Project Title: Emergency Alternative Livelihoods systems  Aim: Recovery of livelihoods systems of poorer Thai communities affected by the disaster				

	LIVELIHOODS AND BASIC NEEDS			
	Beneficiaries:	Partners:	400,000	
	20 coastal communities	CODI, NGOs, CBOs, Thai Local		
LINDO	Total: 20 000 households	Government structures		
UNDP	Women:			
TSU-REG/THAI-	Children:			
05/ER/I03-	Project Title: Support to con	mmunity-based recovery planning and disas	ster resilience	
REGION		habilitation and support community recover		
	Aim: Expand existing project with provincial public health office, Thailand MOPH, WHO to			
		n access to health care and provide tempora	ary shelter to	
	vulnerable migrants			
	Beneficiaries:	Partners:	200,000	
UNFPA/	Total: over 1,000	<ul> <li>World Vision Foundation of Thailand</li> </ul>		
WORLD VISION	Women: over 500	(WVFT)		
WORLD VISION	Children: over 500	- Ranong and Phuket Provincial Public		
TSU-REG/THAI-		Health Offices		
05/MS02-REGION	Project Title: Emergency Relief for Ranong and Phuket Provinces			
COMMODE REGION	Aim: To provide emergency relief on food, shelter and medical services to tsunami victims			
	in Thailand especially women and girls at Ranong and Phuket Provinces			

	AGRICULTURE/FISHERIES			
FAO/ UNDP	Beneficiaries: Tsunami-affected fisherfolk Total: 10,000 households Women: Children:	Partners: Ministry of Agriculture and Cooperatives	1,200,000	
TSU-REG/THAI- 05/A01-REGION	<b>Project Title:</b> Emergency Assistance to the tsunami-affected fishing communities in Southern Thailand			
	Aim: Project will provide tsunami-affected fisherfolk with fisheries inputs, along with necessary technical guidance, training and supervision to support them to quickly restore production and re-establish their livelihood.			

	AGRICULTURE/LIVESTOCK		
	Beneficiaries:	Partners:	400,000
	tsunami-affected farmers	Ministry of Agriculture and	
	Total:	Cooperatives	
FAO	Women:		
	Children:		
TSU-REG/THAI- 05/A02-REGION	<b>Project Title:</b> Emergency A production in Southern Thai	Assistance to the tsunami-affected farmers tall	to restart agricultural
		nami-affected farmers with agricultural/lives idance, training and supervision to support stablish their livelihood.	

NATUR	AL RESOURCES AND ENVI	RONMENT REHABILITATION	US\$	
	Beneficiaries:	Partners:	900,000	
UNDP/	Communities in 6	Thai Ministry of Natural Resources and		
FAO/	provinces affected by the	Environment;		
UNEP	disasters	Academic team from local universities;		
		Local government		
TSU-REG/THAI-	Project Title: Responsive Assistance on the Rehabilitation of Natural Resources and			
05/ER/I04-	Environmental Damages in the Affected Areas of Thailand <b>Aim:</b> Recovery of natural resources and people awareness to protect natural resources as			
REGION				
	preventive measures to redu	ice damages from the disasters		

COORDINATION			US\$	
LINDD	Beneficiaries:	Partners:	300,000	
UNDP	Affected populations in the	UNCT, OCHA, MFA		
TSU-REG/THAI-	region			
05/CSS09-	Project Title: Support to Thailand UNRC/HC			
REGION	Aim: To provide support to UNRC/HC in interagency coordination, government liaison,			
TEGION	logistics support to UNDAC teams, office costs, and additional person-power			

## **INDONESIA**

## 1. INTRODUCTION

The devastating tsunami of 26 December 2004 affected primarily the Aceh region, sweeping debris and sea water into homes and buildings, crushing them in its path, up to 5 kilometres inland, and damaging roads and bridges, telecommunications, water and electricity supplies, crops, irrigation and fishery infrastructure, food and fuel outlets. Some 80,000 Indonesians lost their lives. A large number of people were directly affected by the crisis; it is currently estimated that as many as 2,000,000 people are in need as a result of the wider impact of the disaster.

Some 1,000,000 people require immediate assistance and many more will require longer-term rehabilitation assistance to recover from the effects of the quake and tsunami.

Effectively reaching the affected populations will require significant resources as all systems of storage, transport and neighbourhood organisation require rebuilding. The debilitating trauma caused by the events will mean that large numbers of people from outside the region are needed to start and support the initial phase of the relief operation.

Affected communities are highly vulnerable to the lack of clean water and food, epidemics of communicable diseases, lack of basic medical attention, and mental health problems associated with witnessing numerous scattered dead bodies and losing family members. Normal activities have completely ground to a halt including service provision, schooling, business and trade. Most inhabitants of areas such as Banda Aceh are living in makeshift shelters wherever space is available.

Both the Government and the international community have been swift and generous in the initial response to the disaster. Specialised logistics, operations and coordinated planning forums have been established. Aid has rapidly commenced to flow to people who, due to their isolation and the destruction of transport and communications systems, have been hard to reach.

The United Nations, together with its partners, is committed to assist victims and to support Indonesia in the massive effort that is required to meet immediate humanitarian needs and to plan for and address longer-term recovery and rehabilitation requirements. This appeal represents the integrated and consolidated requirements of UN agencies and NGOs currently operating in Indonesia, most of which have considerable experience in providing aid and development assistance in the Aceh region. The funds requested amount to US\$ 371,554,203 (plus a further US\$ 102,000,000 for food, shown under "Regional Programmes" below).

# Flash Appeal for Indian Ocean Earthquake - Tsunami 2005

Summary of Requirements - by Sector and Country of Destination as of 5 January 2005
http://www.reliefweb.int/fts

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Requirements

3,000,000

27,000,000

371,554,203

**Sector Name** 

SECURITY

Total

WATER AND SANITATION

Indonesia		
AGRICULTURE	10,400,000	
COORDINATION AND SUPPORT SERVICES	14,854,203	
ECONOMIC RECOVERY AND INFRASTRUCTURE	17,250,000	
EDUCATION	12,330,000	
FAMILY SHELTER AND NON-FOOD ITEMS	177,160,000	
FOOD	3,000,000	
HEALTH	69,610,000	
MULTI-SECTOR	21,850,000	
PROTECTION/HUMAN RIGHTS/RULE OF LAW	15,100,000	

#### 2. CONTEXT AND HUMANITARIAN CONSEQUENCES

## 2.1 Context

A massive earthquake occurred off the west coast of northern Sumatra on Sunday 26 December 2004 at 07:58 with a magnitude of 9.0 on the Richter scale (according to US Geological Survey measurements). The epicentre was some 250 kilometres south-southwest off Banda Aceh and 30 kilometres under the seabed. The first quake was followed by aftershocks ranging in magnitude from 6–7.3. The quakes triggered powerful tsunamis up to 10 meters in height, which hit coastal settlements on nearby Nanggroe Aceh Darussalam (Aceh) and North Sumatra provinces in Indonesia (and throughout the Indian Ocean). Destruction and human casualties were catastrophic. President Susilo Bambang Yudhoyono immediately declared that Indonesia was facing a national disaster.

An estimated 80,000 Indonesians were killed. The tsunami swept debris and sea water into homes and buildings, crushing them in its path, up to 5 kilometres inland, and damaged roads and bridges, telecommunications, water and electricity supplies, crops, irrigation and fishery infrastructure, food and fuel outlets. The worst affected areas are Banda Aceh, the capital of Aceh province, and the northwest coastline and islands off the coast, where hundreds of villages remain isolated and cut off from land transport and communication.

Local authorities in Aceh estimate that over 1,000,000 persons require immediate assistance and that up to 2,000,000 persons will require longer term rehabilitation assistance to recover from the impact of the quake and tsunami, in an area of Indonesia that had already suffered population displacement and destruction of basic services caused by the separatist insurgency waged over the last 27 years.

The Coordinating Minister of People's Welfare Office has stated that tents and shelter, household utensils, food, including baby food, medicines and health supplies, clothes, blankets, women's hygiene products, clean water and generators are urgently required.

Search and rescue, burials, and some initial medical and food assistance distribution has been conducted by functional neighbourhood committees, the Indonesian Red Cross (PMI) and the military, which has reduced its military operations against the insurgency in Aceh, and diverted some effort towards assisting with humanitarian activities. The population however is still dazed from the events and is desperately in need of more substantial and targeted assistance. Reaching the affected populations effectively poses a tremendous challenge in the immediate term and requires significant resources as all systems of storage, transport and neighbourhood organisation require rebuilding. The debilitating trauma caused by the events will mean that large numbers of people from outside the region are needed to start and support the initial phase of the relief operation.

## 2.2 Humanitarian consequences

Affected communities are highly vulnerable to the lack of clean water and food, epidemics of communicable diseases, lack of basic medical attention, and mental health problems associated with witnessing numerous scattered dead bodies and losing family members. Normal activities have completely ground to a halt including service provision, schooling, business and trade. Most inhabitants of areas such as Banda Aceh are living in makeshift shelters wherever space is available. Most families in the worst hit areas have lost some members; in many cases young children have lost both parents. While communal bonds are strong and children are usually supported, care will need to be provided and extended families traced.

According to a joint UN and international NGO assessment team that travelled to Aceh Province from Jakarta on 29-31 December, critical needs include supplies to assist with the clean-up effort, water purification products, drinking water, basic foodstuffs including infant foods, hygiene products, medical supplies, shelter and sleeping materials (including mosquito nets) and household supplies. As the weeks wear on, assistance will be needed to bolster effective distribution of supplies; health surveillance and disease prevention measures will need substantial support, as water-borne and mosquito-borne diseases such as dysentery and malaria pose a serious threat. More permanent shelter, schools, communications, fuel outlets, electricity, road clearance and markets will also require early revitalisation.

At this stage, sectoral priorities for the international community include: health, water and sanitation, food, coordination and support services, shelter and non-food items (NFI), protection, education, and economic recovery including infrastructure rehabilitation.

### 3. RESPONSE PLANS

Overall Goal: To minimise the suffering and the further spread of disease, malnutrition and other threats to the coastal population of northern Sumatra and initiate early recovery to kick-start the economy.

#### 3.1 Health

**Objective 1.1**: Assist the Government in providing treatment for acute medical problems to some 1,000,000 people throughout the affected areas.

**Objective 1.2:** Rapidly establish an early-warning communicable disease surveillance and response system for the early detection and control of outbreaks of communicable diseases among the affected populations during the emergency phase. Such system is to be developed and implemented through local health partners.

**Objective 1.3** Using a phased approach, enhance capacity to develop a disease surveillance mechanism as a component of an emergency health information system.

**Objective 1.4**: Position sufficient stocks of medical supplies, deploy health staff at strategic locations, and implement a range of disease prevention strategies including childhood immunisation, hygiene information messages and vector control programmes.

#### **Expected Impact**

- Early treatment for acute injuries and medical conditions is available to the majority of the affected.
- Mortality and morbidity from outbreaks of diarrhoeal diseases of water-borne diseases are reduced, and larger epidemics are prevented.
- Disease spikes associated with greater environmental risks, reduced medical care and disrupted health programmes minimised.

## 3.2 Water and Sanitation

Objective 2.1: Provide clean water to 1,000,000 persons.

**Objective 2.2:** Provide information and material resources to 1,000,000 people for the appropriate disposal of human excreta and general household discard.

## **Expected Impact**

- Water-borne disease threat minimised.
- Environmental disease vectors controlled, thereby reducing disease threat.

## 3.3 Food and Nutrition

**Objective 3.1:** Assist the Government to provide required food and nutritional assistance to 500,000 affected persons.

**Objective 3.2:** Provide appropriate material support and foster community-based initiatives to identify and carry out activities to restore food production systems for 500,000 persons.

## **Expected Impact**

- Threat of malnutrition and social anarchy reduced.
- Economic self-sufficiency restored as quickly as possible.

#### 3.4 Protection

**Objective 4.1**: Develop activities with local partners to reduce children's exposure to violence and abuse and their exploitation; ensure children are not unnecessarily separated from their extended families and provide psycho-social and counselling support to those who have suffered from the loss of family members or are distressed by the crisis.

#### **Expected Impact**

• Children's rights are protected and distressed persons are assisted in the recovery process from the emotional and psychological effects of the crisis.

#### 3.5 Education

**Objective 5.1**: Provide schooling to 60,000 children and appropriate learning facilities, materials and training in psychosocial support for teachers.

#### **Expected Impact**

• Children's lives are normalised as quickly as possible and they have opportunities to recover from the distress that many of them have been exposed to.

## 3.6 Coordination and Support Services

**Objective 6.1**: Effectively coordinate with the Government and bi-lateral partners the international response to the crisis and ensure efficient and timely delivery of supplies to those affected.

**Objective 6.2**: Develop and maintain a comprehensive information network with donors, various relevant sections of the Government, media, international agencies, civil society groups, UN agencies and regional structures to inform stakeholders of daily humanitarian conditions, resource-targeting priorities, appropriate types and means of assistance, and progress made against the consolidated and coordinated action plan.

**Objective 6.3**: Offer support to staff adversely affected by the traumatic effects of the crisis and maintain a controlled and safe working environment for humanitarian staff working in affected areas.

## **Expected Impact**

- Effective and timely delivery of supplies and services to affected persons.
- Stakeholders are able effectively to target, integrate and ensure complementarity and even coverage of resources.
- Protection and effectiveness of staff enhanced.

## 3.7 Shelter and Non-food items

**Objective 7.1:** Provide basic temporary shelter, sleeping equipment (including mosquito nets), essential household items (especially hygiene products) and clothing to some 300,000 affected persons.

**Objective 7.2:** Provide immediate support to communities to rebuild houses through a participatory process, using local building materials and local building skills; clear rubble from settlement sites and access roads

**Objective 7.3:** Train building workers in disaster resistant building construction and support settlement planning, with a view to mitigating the impact of future possible tsunamis.

## **Expected Impact**

- Disease vectors reduced and some normality re-established in the lives of disaster victims.
- Immediate housing needs of affected families are addressed.
- Foundation laid for longer-term rehabilitation and reconstruction of the housing sector with reduced vulnerability to future hazards.

## 3.8 Economic Recovery and Infrastructure

**Objective 8.1:** Rapidly restore the capacities of NGOs, community-based organisations, and local governments whose facilities and operations have been adversely impacted by the tsunami; rapidly enhance the capacity of relevant local government departments and agencies to plan and implement disaster recovery programmes.

**Objective 8.2:** Restart the market economy with cash for work through labour-intensive rubble clearance and restoration of infrastructure critical to the recovery of fisheries and of the non-farm micro-enterprises sector.

**Objective 8.3:** Facilitate the recovery of local economic activities such as fisheries and non-farm micro-enterprises, and provide opportunities for a temporary source of income for affected families.

#### **Expected Impact**

- Capacities of local government and district offices and of a large number of local organisations built to plan and implement disaster recovery programmes.
- Families in affected areas provided with access to credit to enable them to re-establish their livelihoods or temporary source of income.
- Local food markets restored and market economy kick-started.

## 4. ROLES AND RESPONSIBILITIES

At the national level, the response will be coordinated by the Inter-Agency Standing Committee (IASC) Country Team. This team will take primary responsibility for monitoring the response with the Government, the Red Cross movement and major bilateral and multilateral donors.

Existing coordination mechanisms, such as UN, NGO and donor coordination forums in Jakarta and Aceh, as well as sectoral meetings by lead agencies, will serve as fora to discuss progress and provide opportunities for strengthening collaboration and adjustment to the appeal if needed.

Unfortunately, the safety of staff and humanitarian actors implementing the relief effort cannot be guaranteed. There are a number of threats to staff in the conduct of their efforts to provide assistance to those in need. The UN will make substantial provisions to ensure that these risks are reduced to the minimum possible, whilst still remaining effective in assessing, targeting and delivering assistance.

The participation of the Government in the development of this appeal has been instrumental in ensuring complementarity between assistance policies and strategies.

# 5. PROJECT TABLES

	FOOD AND NUTRITION		US\$
ISLAMIC RELIEF	Beneficiaries:	Partners: local NGOs	1,000,000
INDONESIA	Total: 50,000 households		
TOU IND OF/E04	Project Title: FAST (Food	Assistance)	
TSU-IND-05/F01- INDONESIA	•	es from hunger and weakne	•
SAVE THE	Beneficiaries:	Partners: local NGOs,	2,000,000
CHILDREN	Total: 12,000 households	community health	
omesite.	Children: 24,000	volunteers, Puskesmas	
TSU-IND-05/F02-	Project Title: Meeting Bas		for for the second second second
INDONESIA	meals to children under five		for families, and ready-to-eat
	Beneficiaries – affected	Partners:	4,480,000
	populations (1.2 million) -	World Food Programme	
	Supplementary feeding,	(WFP);	
	de-worming and iron	Ministry of Health (MoH);	
	Estimated numbers: Women: 123.000	Local Governments; NGOs (international and	
	(pregnant & lactating)	local)	
	Children: 180,000 under	iocai)	
UNITED NATIONS	five years with		
CHILDREN'S FUND	malnutrition		
(UNICEF)			
(5.115_1)	Beneficiaries in Aceh		
TSU-IND-05/H01-	and other affected areas		
INDONESIA	in Sumatra (4 million) -		
	Vitamin A		
	Children under 15: 1.7		
	million (including some		
	560,000 under five		
	years)  Project Title: Nutrition imp	rovement	
	Aim: To ensure adequate	te nutrition intake of vuln	erable populations, especially
	malnourished children und	er-five, pregnant and lactati	na women
	Beneficiaries:	Partners: Indonesian	(Cost reflected in Regional
	Total: 1,000,000 persons	Red Cross (PMI),	Operations)
		International Federation	
		of Red Cross and Red	
		Crescent Societies	
WFP		(IFRC), WFP stand-by	
		partners and other	
	Dunings Tisles Towns	cooperating partners	alde Affected by Fauthania
	Northern Indonesia	rood Assistance to Househ	olds Affected by Earthquake in
		ament in providing assistan	ce to approximately 1,000,000
		ctims in Aceh and Northern	
	Earthquake and touliann vi	cums in Acen and Northern	Julialia.

	AGRICULTURE		US\$
FOOD AND	Beneficiaries: Total: 50,000 households (250,000 persons)	<b>Partners:</b> Ministry of Agriculture	5,000,000
FOOD AND AGRICULTURE ORGANIZATION (FAO)	<b>Project Title:</b> Emergency proinputs for the rapid re-start communities.	of small-scale food crop proc	luction in tsunami-affected
TSU-IND-05/A01-INDONESIA	Aim: To provide the 25,000 and other essential agricultur food crops by themselves. A the displaced persons will regardens. FAO will also provide facilities.	ral inputs necessary to rapidl An additional 25,000 families ceive seeds and other esser	y restart the production of and communities hosting tial inputs to set up home
FAO	Beneficiaries: Total: 25,000 households of affected fisherfolks	<b>Partners:</b> Ministry of Marine Affairs and Fisheries	4,000,000
TSU-IND-05/A02-	<b>Project Title:</b> Emergency provision of essential inputs to tsunami victims for the rapid start of small-scale fisheries activities.		
INDONESIA	Aim: To provide the most communities to restart fishery will also provide support to ini	y activities and reduce depe	ndency on food aid. FAO
	Beneficiaries: Total: 60,000 households with livelihoods based on agriculture and fishery	Partners: Ministry of Agriculture, Ministry of Marine Affairs and Fisheries	1,000,000
FAO TSU-IND-05/A03-INDONESIA	Project Title: Support to the of Staple Food Production by Fishery	Coordination of Emergency	
INDONESIA	Aim: To facilitate and coordinate the provision of agriculture/fishery related emergency and recovery assistance and provide technical assistance to the Indonesian authorities, respective technical departments and humanitarian actors To start the provision of agricultural and fishery extension services.		
ISLAMIC RELIEF	Beneficiaries: Total: 7,500 households	Partners: local NGOs and communities	400,000
JALOIA	Project Title: Agriculture		
TSU-IND-05/A04- INDONESIA	Aim: To support communities provision of seeds and fertilise		ural activates through the

	HEALTH		US\$
	Beneficiaries:	Partners: local NGOs	
CARE	Total: 40,000 households	INGOs, loca	ıl
CARL	(200,000 persons)	communities,	
TSU-IND-05/H12-		Government o	f
INDONESIA	B. C. ATOL E.	Indonesia	11
	Project Title: Emergency r		
			nd emergency medical care
HELEN KELLER	Beneficiaries:	Partners: UNICEF	1,700,000
INTERNATIONAL	Total: 120,000 Women: 20,000		
(HKI)	Children: 100,000		
	Project Title: Supplementa	tion with micronutrients (S	1 IM)
TSU-IND-05/H13-			reduce mortality from and the
INDONESIA	incidence/severity of diarrho		
	Beneficiaries:	Partners: to be	
	Total: 350,000 persons in	identified	
INTERNATIONAL	Aceh Besar		
MEDICAL CORPS	Project Title: Health En	nergency Assistance an	d Relief for tsunami-Affected
TSU-IND-05/H14-	Populations (HEART)		
INDONESIA			am to provide medical services
			d food for children and drinking
	water, and to distribute hyg		· · · ·
INTERNATIONAL	Beneficiaries:	Partners:	1,550,000
RELIEF AND	Total: 30,000	Muhammadiyah	
DEVELOPMENT (IRD)	Women: 20,000 Children: 15,000		
,	Project Title: Health Infras	ructuro Pobabilitation Pro	ioct
TSU-IND-05/H15-			health clinics in the affected
INDONESIA	communities.	re-supply 400 community	rieatti ciinics iii the anecteu
INTERNATIONAL	Beneficiaries:	Partners: to be	2,500,000
· — · · · · · · · · · · · · · ·			2.300.000
RESCUE COMMITTEE	Total: 30.000	identified	2,300,000
RESCUE COMMITTEE (IRC) / The	Total: 30,000  Project Title: Primary Heal	identified	2,300,000
(IRC) / The Consortium for	Total: 30,000 Project Title: Primary Heal	identified	2,300,000
(IRC) / The Consortium for Assisting the		identified	2,300,000
(IRC) / The Consortium for Assisting the Refugees and	Project Title: Primary Heal	identified th Care	
(IRC) / The Consortium for Assisting the Refugees and Displaced in	Project Title: Primary Heal  Aim: To provide emerg	identified th Care	
(IRC) / The Consortium for Assisting the Refugees and	Project Title: Primary Heal	identified th Care	are to the disaster affected
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)	Project Title: Primary Heal  Aim: To provide emerg	identified th Care	
(IRC) / The Consortium for Assisting the Refugees and Displaced in	Project Title: Primary Heal  Aim: To provide emerg	identified th Care	
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)	Project Title: Primary Heal  Aim: To provide emerg communities.  Beneficiaries:	identified th Care	are to the disaster affected
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI) TSU-IND-05/H16- INDONESIA	Project Title: Primary Heal  Aim: To provide emerg communities.	identified th Care ency primary health ca	are to the disaster affected
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF	Aim: To provide emergicommunities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serv	identified th Care ency primary health care  Partners: local NGOs and communities ices	are to the disaster affected
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Service Aim: To address the need	identified th Care ency primary health care  Partners: local NGOs and communities ices s of those who have beer	are to the disaster affected
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and contents.	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases	are to the disaster affected  300,000  n wounded and to protect them
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and con Beneficiaries:	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry o	are to the disaster affected  300,000  n wounded and to protect them
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and communities: Total: 50,000	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases	are to the disaster affected  300,000  n wounded and to protect them
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17- INDONESIA	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and communities: Total: 50,000 Women: 20,000	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry o	are to the disaster affected  300,000  n wounded and to protect them
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17- INDONESIA  PROJECT CONCERN	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and communities: Total: 50,000 Women: 20,000 Children: 20,000	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry o	are to the disaster affected  300,000  n wounded and to protect them
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16-INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-INDONESIA  PROJECT CONCERN INTERNATIONAL	Project Title: Primary Heal  Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons  Project Title: Medical Serve Aim: To address the need from further injuries and communities: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry o Health, Civil Society	are to the disaster affected  300,000  n wounded and to protect them  2,000,000
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17- INDONESIA  PROJECT CONCERN	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency Fig. 10,000 Project Title: Emergency Fig. 20,000	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry o Health, Civil Society	are to the disaster affected  300,000  n wounded and to protect them  2,000,000
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16-INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency Representations of the project Title: Emergency Representations of the project Title: Primary Health Primary Health Project Title: Primary Health Primary	identified th Care  ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16-INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-INDONESIA  PROJECT CONCERN INTERNATIONAL	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency Foliaster Aim: To alleviate suffering	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential health.	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17- INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency Foliaster Aim: To alleviate suffering Aceh that have been affected	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential head by the earthquake and its content of the conten	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in tsunami through the provision of
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17- INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency For Disaster Aim: To alleviate suffering Aceh that have been affected medical services, medical services.	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential head by the earthquake and supplies, clean drinking was	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in tsunami through the provision of other systems, women's kits, mid-
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17- INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency For Disaster Aim: To alleviate suffering Aceh that have been affected medical services, medical services.	ency primary health care  and communities  ices  s of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential head by the earthquake and supplies, clean drinking was emergency shelters, nutri	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in tsunami through the provision of other systems, women's kits, mid-
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16-INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-INDONESIA	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency For Disaster Aim: To alleviate suffering Aceh that have been affected medical services, medical	ency primary health care  and communities  ices  s of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential head by the earthquake and supplies, clean drinking was emergency shelters, nutri	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in tsunami through the provision of tter systems, women's kits, mid- titional supplements, household
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16- INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17- INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum English (Consum English) (Consum	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential head by the earthquake and supplies, clean drinking was emergency shelters, nutring agriculture items.  Partners: District health authorities, Puskesmas	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami tealth services to populations in tsunami through the provision of tter systems, women's kits, mid- tional supplements, household  500,000
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16-INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-INDONESIA	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum English (Consum English) (Consum	ency primary health care  Partners: local NGOs and communities ices sof those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential health supplies, clean drinking was emergency shelters, nutrind agriculture items.  Partners: District health authorities, Puskesmas Community Health	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in tsunami through the provision of tter systems, women's kits, mid- tional supplements, household  500,000
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16-INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-INDONESIA  SAVE THE CHILDREN  TSU-IND-05/H19-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum English Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency For Disaster Aim: To alleviate suffering Aceh that have been affected medical services,	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential head by the earthquake and supplies, clean drinking was emergency shelters, nutring agriculture items.  Partners: District health authorities, Puskesmas Community Health Committees	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in tsunami through the provision of tter systems, women's kits, mid- tional supplements, household  500,000
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16-INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-INDONESIA	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency Beneficiaries: Total: 50 puskes medical services, medical se	ency primary health care  Partners: local NGOs and communities ices s of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential head by the earthquake and supplies, clean drinking was emergency shelters, nutring agriculture items.  Partners: District health authorities, Puskesmas Community Health Committees of Health Needs	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in tsunami through the provision of ater systems, women's kits, mid- titional supplements, household  500,000
(IRC) / The Consortium for Assisting the Refugees and Displaced in Indonesia (CARDI)  TSU-IND-05/H16-INDONESIA  ISLAMIC RELIEF INDONESIA  TSU-IND-05/H17-INDONESIA  PROJECT CONCERN INTERNATIONAL (PCI)  TSU-IND-05/H18-INDONESIA  SAVE THE CHILDREN  TSU-IND-05/H19-	Aim: To provide emerge communities.  Beneficiaries: Total: 50,000 persons Project Title: Medical Serve Aim: To address the need from further injuries and consum Beneficiaries: Total: 50,000 Women: 20,000 Children: 20,000 Men: 10,000 Project Title: Emergency Beneficiaries: Total: 50 puskes medical services, medical se	ency primary health care  Partners: local NGOs and communities ices so of those who have been municable diseases  Partners: Ministry of Health, Civil Society  Health Service Provision for and provide essential head by the earthquake and supplies, clean drinking was emergency shelters, nutrind agriculture items.  Partners: District health authorities, Puskesmas Community Health Committees community Health Committees community Health Committees community agency and results and result	are to the disaster affected  300,000  n wounded and to protect them  2,000,000  or the Aceh Quake and tsunami ealth services to populations in tsunami through the provision of tter systems, women's kits, mid- tional supplements, household  500,000

	HEALTH		US\$
UNITED NATIONS POPULATION FUND	Beneficiaries: Total: 1,000,000 persons	Partners: Ministry of Health, World Health Organization (WHO), BKKBN, NGOs	8,000,000
(UNFPA)		health services in emergen	
TSU-IND-05/H09- INDONESIA	safe delivery, prevention obstetric care; provide trai	of sexually transmitted d ning support for governmen	nd supplies in order to ensure liseases (STDs), emergency nt and NGO staff involved in
		vels, as well as technical ass ort of referral mechanisms ar	sistance, initial rehabilitation of
UNFPA	Beneficiaries: Total: 1,000,000 persons	Partners: Local NGO (Pulih), local government, Ministry of Women's Empowerment, international and	2,000,000
UNFPA		national NGOs, WHO,	
TSU-IND-05/H10- INDONESIA		UNICEF, united Nations Development Fund for Women (UNIFEM)	
		f Mental Health Services	through Trauma Centres for
			unselling to the victims of the NGO, Pulih. The Centres will
		and deal with violence agair	nst women and girls.
	Beneficiaries: Total: 5 million	Partners: WHO, UNFPA;	10,080,000
LINICEE	Children: 1.7 million (6 months to 15 years	Ministry of Health; Local Governments;	
UNICEF TSU-IND-05/H11-	old)	NGOs (international and local)	
INDONESIA		orimary health care services	
	communicable diseases (m diarrhoea, and water-borne	neasles and other vaccine-p	mmon water and airborne preventable diseases, malaria,
	Beneficiaries: Total: 1,000,000 Women: 350,000	Partners: Ministry of Health, provincial and district health authorities,	2,000,000
wно	Children: 300,000	UN agencies and NGOs	ystem in the Disaster Affected
TSU-IND-05/H02-	Area		
INDONESIA	affected area through rapid equipment, human resource	assessments of the condition ses needs, and other essent e system, the drug supplies	health system in the disaster- ons of infrastructure, essential tial system components such and distribution systems and
	Beneficiaries:	Partners: Ministry of	3,500,000
WHO	Total: 1,000,000 Women: 350,000 Children: 300,000	Health, provincial and district health authorities, UNICEF, UNFPA	
TSU-IND-05/H03-INDONESIA  Project Title: Establishment of an Integrated Health Emerge Response			
	<b>Aim:</b> To establish a health emergency operations unit in Aceh and North Suma and in the Ministry of Health in Jakarta, including an integrated emergency health information system to coordinate health sector activities and health related reports.		
WHO	Beneficiaries: Total: 1,000,000 Women: 350,000 Children: 300,000	Partners: Ministry of Health, provincial and district health authorities, UNICEF, NGOs	8,000,000
	Aceh and North Sumatra		saster Affected Population in
TSU-IND-05/H04- INDONESIA	and for the treatment of p diseases, and vaccine	prevalent diseases such as preventable diseases thr	evention of disease outbreaks diarrhoea, ARI, insect-borne rough disease surveillance, treatment, and public health

	HEALTH		US\$
	Beneficiaries: Total: 1,000,000 Women: 350,000	<b>Partners:</b> Ministry of Health, provincial and district health authorities,	5,000,000
wно	Children: 300,000	UNICEF, UNFPA, international and	
TSU-IND-05/H05-		national NGOs	
INDONESIA		Emergency Child and Materr	
	health services. The focus		providing child and maternal pport for the provision of care, medical supplies.
wно	Beneficiaries: Total: 1,000,000 Women: 350,000 Children: 300,000	Partners: Ministry of Health, provincial and district health authorities.	10,000,000
TSU-IND-05/H06- INDONESIA		of essential health services,	including the establishment of
INDONESIA	services previously provide		ment to restore the essential s at various levels, including or surgical services.
	Beneficiaries:	Partners: Ministry of	3,000,000
WHO	Total: 1,000,000 Women: 350,000 Children: 300,000	Health, provincial and district health authorities	
TSU-IND-05/H07-	Project Title: Re-establishr	nent of the Health Information	on System
INDONESIA	Aim: To re-build the most essential components of the health information system ar to re-establish the information network in Aceh and North Sumatra for disease surveillance, disease prevention, provision of health services and distribution resources.		
wно	Beneficiaries: Total: 1,000,000 Women: 350,000 Children: 300,000	Partners: Ministry of Health, provincial and district health authorities, UNICEF. international	1,500,000
TSU-IND-05/H08-	•	and national NGOs	
INDONESIA		Mental Health Services in the	
- -		n authorities, including the e	ne mental health services of establishment of a community-

	WATER AND SANITATION		US\$
	Beneficiaries:	Partners: Government,	1,000,000
	Total: 100,000	Indonesian Red Cross,	
0.455	households (500,000	INGOs, local NGOs	
CARE	persons)		
TOLLIND OF AMOOD	Project Title: Point-of-Use	Household Disinfection of I	Orinking Water for Indonesian
TSU-IND-05/WS03- INDONESIA	Families Affected by the Su	matra tsunami	· ·
INDONESIA	Aim: To provide monthly, f	or a six month period, 100,	000 disaster affected families
			a point-of-use product for
	disinfecting household drink	ing and cooking water.	
	Beneficiaries:	Partners: Local	1,000,000
	Total: 30,000 households	communities	
CARE	(150,000 persons)		
	Project Title: Emergency I	Rehabilitation of Water Sup	ply Systems for Communities
TSU-IND-05/WS04-	Affected by the Sumatra tsu		. , ,
INDONESIA	Aim: To carry out rapid wa	ater supply surveys, establis	sh teams to target areas and
			supply systems; to distribute
	soap, towels, bed nets and		,
	Beneficiaries:	Partners:	500,000
	Total: 10,000 households	Muhammadiyah, Church	,
		diocese and other	
		religious centres, in	
		coordination with	
CATHOLIC RELIEF		International Medical	
SERVICES (CRS)		Corps (IMC),	
- ( -,		International Catholic	
TSU-IND-05/WS05-		Migration Commission	
INDONESIA		(ICMC) and Jesuit	
		Refugee Service (JRS)	
	Project Title: Disease conti	rol and hygiene support	
	Aim: To supply immediat	e disease prevention mate	erials and services to crisis
			giene kits, cleaning materials,
	garbage and vector control	items.	
INTERNATIONAL	Beneficiaries:	Partners:	1,500,000
INTERNATIONAL RELIEF AND	Total: 30,000	Muhammadiyah	
DEVELOPMENT	Women: 15,000		
DEVELOPMENT	Children: 10,000		
TSU-IND-05/WS06-	Project Title: Rehabilitation		
INDONESIA		mall-scale water and sanita	ation facilities in 40 disaster-
	affected communities.		
INTERNATIONAL	Beneficiaries:	Partners: to be identified	3,000,000
RESCUE	Total: 30,000		
COMMITTEE/CARDI	Project Title: Environmenta	al Health	
	Aim: To ensure that the	targeted disaster-affected	communities have sufficient
TSU-IND-05/WS07-	access to potable water and	sanitation facilities	communities mays sumoism
INDONESIA	•		000.000
ISLAMIC RELIEF	Beneficiaries:	Partners: local NGOs	200,000
INDONESIA	Total: 50,000	and communities	
·	Project Title: Water and Sa		
TSU-IND-05/WS08-			ation of a minimum of 25 non-
INDONESIA		the provision of 2,500 water	er containers, and to construct
	100 communal pit latrines		

	WATER AND SANITATION		US\$	
UNICEF TSU-IND-05/WS01-	Beneficiaries Total: about 2 million Children: about 220,000 under five years.	Partners: Ministry of Public Works, Ministry of Health, WHO, Local governments, international and local NGOs	16,800,000	
INDONESIA	Project Title: Provision of Clean Water Supply and basic sanitation facilities  Aim: To ensure that children and women have access to clean water and basis sanitation facilities and use good hygiene practices in Aceh and other affected area of Sumatra, especially at Internally Displaced Persons (IDP) camps, hospitals, healt centres and schools.			
WHO TSU-IND-05/WS02-	Beneficiaries: Total: 1,000,000 Women: 350,000 Children: 300,000	Partners: Ministry of Health, provincial and district health authorities, UNICEF, international and national NGOs	3,000,000	
INDONESIA	Area	partners, to rehabilitate the	tems in the Disaster Affected water supply and sanitation	

FAMILY	SHELTER AND NON	-FOOD ITEMS	US\$
	Beneficiaries: Total: 500,000	<b>Partners:</b> Bakornas, Satkorlak, Muhammadiyah,	25,000,000
INTERNATIONAL		United Nations High	
ORGANIZATION FOR		Commissioner for Refugees	
MIGRATION (IOM)		(UNHCR), United Nations	
		Development Programme	
TSU-IND-05/S/NF04-		(UNDP)	15 11
INDONESIA		orary shelter, IDP management a	
	relief goods, includin	g shelter; to set up a family reuni	
	Beneficiaries:	Partners: Bakornas,	20,000,000
	Total: 500,000	Satkorlak, Muhammadiyah,	
IOM		WFP, WHO, UNICEF,	
		UNHCR.	
TSU-IND-05/S/NF05- INDONESIA	Project Title: Emerg		· · · · · · · · · · · · · · · · · · ·
INDONESIA			non-food items such as water,
			poots, masks, body bags, power
INTERNATIONAL	Beneficiaries:	and diesels to the affected popul	
RESCUE	Total: 30,000	Partners: to be identified	2,000,000
COMMITTEE/CARDI		ood Commodity Distribution	
OOMINIT TEL/OARDI	-	•	
TSU-IND-05/S/NF06- INDONESIA	Aim: To enhance the of emergency non-fo		d communities through provision
	Beneficiaries:	Partners: local NGOs and	300,000
ISLAMIC RELIEF	Total: 12,500	communities	
INDONESIA	households		
	Project Title: Shelte		
TSU-IND-05/S/NF07-			100 Islamic Boarding Schools to
INDONESIA			ons, together with tents, sarongs
	and kitchen equipme		
NORWEGIAN	Beneficiaries:	Partners	5,500,000
REFUGEE COUNCIL	Total: 11,000		
(NRC)/ CARDI	persons	To be identified	
TSU-IND-05/S/NF09-	Project title: Emerg	ency shelter and reconstruction	
INDONESIA	Aim: Provide housing	ng for affected population in Aceh	Province.
	Beneficiaries:	Partners: local NGOs	1,000,000
SAVE THE	Total: 12,000		.,223,000
CHILDREN	households		
			l .
TOLL IN ID. 05/0 11 1500	Project Title: Meetin	ng the Basic Needs of Household	IS
TSU-IND-05/S/NF08- INDONESIA		ng the Basic Needs of Household ecessary temporary shelter and	is d non-food household kits and

FAMILY	SHELTER AND NON	-FOOD ITEMS	US\$		
	Beneficiaries:	Partners: Ministry of Public	60,000,000		
	Total: 40,000				
	households	Indonesian Society for			
UNDP		Disaster Management and			
	Duning Title : A colo I	other relevant NGOs			
TSU-IND-05/S/NF01-		Housing Rehabilitation Project			
INDONESIA			ected communities through the		
			e construction of houses and		
			roads and other amenities for		
			strate risk reduction practices in		
	Beneficiaries:	undations for future recovery.  Partners: For temporary	60,000,000		
	Total: 175,000	shelter and non-food items,	00,000,000		
	Women: 43,750	local NGOs, the Indonesian			
	Children 87,500	Red Cross (PMI);			
	Offiliateri 07,000	For Shelter Reconstruction,			
		UNDP, government			
UNHCR		institutions, and a civil			
		engineer agency, registered			
TSU-IND-05/S/NF02-		Engineers for Disaster Relief			
INDONESIA		(RedR)			
	Project Title: Provi	<b>Project Title:</b> Providing temporary shelter, non-food items (in particular blankets,			
	kitchen sets, mattres	sses, stoves and plastic sheeting	) and reconstructing the houses		
		y the earthquake and tsunamis.			
	Aim: To meet the ba	asic needs and alleviate the suff	ering of the persons affected by		
	the natural disaster.				
	Beneficiaries:	Partners:	3,360,000		
	Total: 35,000				
UNICEF	families in Aceh				
	and North Sumatra				
TSU-IND-05/S/NF03-	provinces	Governments	<u> </u>		
INDONESIA		ion of Non-Food Items to Affecte			
	Aim: To provide affected families with shelter and non-food items to maintain a				
	minimum level of daily basic activities.				

	EDUCATION		US\$
UNICEF TSU-IND-05/E01-	Beneficiaries: Schools: 1,100 School Children: 165,000 Teachers: 6,600	Partners: Ministry of National Education; Local Governments; Muhammadiyah (Local NGO)	10,080,000
INDONESIA	Project Title: Emergend	cy Support for Basic Education	
		hools are quickly opened by p on facilities; to ensure that ch om teachers.	
ISLAMIC RELIEF INDONESIA	Beneficiaries: Total: 12,500 school children	Partners: Local NGOs and communities	250,000
TSU-IND-05/E02-	Project Title: Education	1	
INDONESIA		continuity of basic education schools kits, school clothing ar	•
NORWEGIAN REFUGEE COUNCIL/	Beneficiaries Total: 8000	Partners To be identified	2,000,000
CARDI	Project title: Emergency education and school rehabilitation		
TSU-IND-05/E03- INDONESIA	Aim: Provide stop-gap schools.	education for affected children	and support the reopening of

PROTEC	TION/HUMAN RIGHTS/R	ULE OF LAW	US\$
CHRISTIAN CHILDREN'S FUND (CCF)	Beneficiaries: Total: 100,000 persons Women: 30,000 Children: 50,000	Partners: 5 local NGOs /university/youth organisations 500 volunteers	1,500,000
TSU-IND-05/P/HR/RL04- INDONESIA	child-centred spaces w	endly Space and healthy environment for characteristics here children can benefit from To provide food and non-food i	education, recreational and
UNFPA TSU-IND-05/P/HR/RL02-	Beneficiaries: Total: 1,000,000 persons	Partners: Local and international NGOs local Government, Ministry of Women's Empowerment, Ministry of Social Affairs (MoSA)	5,000,000
INDONESIA	Aim: To advocate for t and distribution of san training on gender-sens		erability through the provision sensitive clothing along with
UNFPA	Beneficiaries: Total: 1,000,000 persons	Partners: Local NGOs	3,000,000
TSU-IND-05/P/HR/RL03- INDONESIA	and Youth Groups/Asso Aim: To promote the a sanitation, food, health outreach programmes p	g Health and Protection at Com ciations ccess of vulnerable population and protection, and prevent provided by women and youth g	s to services including water, violence through community
UNICEF TSU-IND-05/P/HR/RL01-	Beneficiaries: Total: 200,000 persons Women: 40,000 Children: 140,000	Partners: Department of Social Welfare, Department of Women's Empowerment, Department of Education, Muhammedeyah, international and local NGOs	5,600,000
INDONESIA	the immediate family re	Protection, Reunification of and women from violence, absunification of children separate bry of children and their families	use and exploitation, assist in d from families, and promote

ECONOMIC RECOVERY AND INFRASTRUCTURE US\$				
	Beneficiaries:	Partners: Provincial and	7,000,000	
	Total: 15,000 households	district authorities, private		
	·	sector, World Bank, Asian		
INTERNATIONAL		Development Bank,		
LABOUR		UNDP, united Nations		
ORGANIZATION		Educational, Scientific,		
(ILO)		and Cultural Organization		
		(UNESCO)		
TSU-IND-05/ER/I04-	Project Title: ILO Project	for Reconstruction, Employer	oyment Services and Local	
INDONESIA	Economic Development in Ac	eh, Indonesia		
			d employment needs, public	
	infrastructure damages and re	ehabilitation/reconstruction ne	eeds, to carry out employment	
	friendly reconstruction of publ	ic infrastructure, and to provi	de employment services.	
	Beneficiaries:	Partners:	1,750,000	
INTERNATIONAL	Total: 20,000 (5,000	Muhammadiyah		
RELIEF AND	families)			
DEVELOPMENT	Women: 8,000			
	Children: 5,000			
TSU-IND-05/ER/I06-	Project Title: Quick Impact L	ivelihood Security Project		
INDONESIA			ds, agriculture tools, fishing	
	equipment, micro-business m			
	Beneficiaries:	Partners: Ministry of	2,500,000	
LINDD	2,100 fishfolk families	Social Welfare, CRP,		
UNDP		Local CBOs and NGOs		
TSU-IND-05/ER/I01-	Project Title: Emergency Live			
INDONESIA			e through the creation of short	
			truction of infrastructure in the	
	small-scale fisheries sector to			
	Beneficiaries:	Partners: UN centre for	3,000,000	
	8,300 families and their	Human Settlements (UN-		
UNDP	communities in 3 affected	Habitat), Ministry of Public		
O.I.D.	Aceh Districts	Works, Community		
TSU-IND-05/ER/I02-		Recovery Programme		
INDONESIA	But at Title Destanting	(CRP), NGOs		
	Project Title: Restoration of			
			ucture for the commencement	
	of longer-term recovery activity	ries.  Partners: Public Works	2 000 000	
	Beneficiaries: Selected		3,000,000	
	CBOs, local offices of	Department, Provincial		
LINDO	Public Works Department, Municipalities, District	and District Government and NGOs and CBOs		
UNDP	Government and Provincial			
TOU IND OF/ED/ICO	Government and Provincial Government			
TSU-IND-05/ER/I03- INDONESIA		Local Organisations for im	plementing disaster recovery	
"ADOINEOIA		Local Organisations for IIII	ipiementing disaster recovery	
	projects  Aim: To provide immediate support to partner organisations in the coastal areas			
	lost their accommodation, adr		ions in the coastal aleas that	
	Liost their accommodation, aut	mmonation and equipment.		

COO	COORDINATION AND SUPPORT SERVICES		
	Beneficiaries Total: all aid agencies and	<b>Partners:</b> Bakornas, Satkorlak in Aceh,	12,000,000
IOM	500,000 IDPs in Aceh	Medan, Jakarta, Muhammadiyah	
TSU-IND-05/CSS02-	Project Title: Logistic Centre		
INDONESIA	Aim: To organise procurement Medan and Jakarta to Aceh, a areas.		
	Beneficiaries	Partners: Central and	2,854,203
OCHA	Total: affected populations and all aid agencies	provincial authorities, UN agencies, international and local NGOs	
TSU-IND-05/CSS01- INDONESIA	Project Title: Coordination of Humanitarian Assistance		
INDOINEOIA	Aim: To maintain and further coherent and effective delivery		0

SECURITY			US\$
UNITED NATIONS SECURITY COORDINATOR	Beneficiaries: Total: all aid agencies	Partners: Central and local Government, all aid agencies	3,000,000
(UNSECOORD)/UNDP	Project Title: Security Sup	port	
TSU-IND-05/S01- INDONESIA	Aim: To provide support to humanitarian operations in		n and management system for

	MULTI-SECTOR		US\$	
CHURCH WORLD SERVICE (CWS)	Beneficiaries Total: 35,000-45,000 persons	Partners: ACT partners, local NGOs	750,000	
, ,	Project Title: Indonesia ts	unami Earthquake Respons	se ACT (INTERACT)	
TSU-IND-05/MS01- INDONESIA	<b>Aim:</b> To provide immediat assist in recovery with nor and food.	te response to emergency r n-food item distribution, men	needs of tsunami victims and to ntal health support, health care	
CATHOLIC ORGANISATION FOR	Beneficiaries Total: 20,000 persons	Partners: to be identified	2,500,000	
RELIEF AND	Project Title: Emergency	Assistance and initial recove	ery	
DEVELOPMENT (CORDAID) TSU-IND-05/MS02- INDONESIA	services, water/sanitation		e provision of shelter, medical covery assistance through the r systems.	
	Beneficiaries:	Partners: WFP,	1,400,000	
HELEN KELLER INTERNATIONAL	Total: 750,000 persons Women: 250,000 Children: 100,000	international and national NGOs		
TSU-IND-05/MS03-		gency Assessment and Prio		
INDONESIA	(including availability of cluding nutritional status, and to m	ean water, shelter, food, sa ake data available for decis		
INTERNATIONAL CATHOLIC MIGRATION COMMISSION	Beneficiaries: Total: 7,000 persons (plus family members) Women: 3,000 Children: 3,000	Partners: Muhammadiya, Aceh Gender Transformation Working Group (KKTGA), Flower Aceh, Women's Volunteer Team for Humanity (RPUK)	1,200,000	
TSU-IND-05/MS04- INDONESIA	Vulnerable Individuals in A	ceh	Coordination For Extremely	
	individuals and their famil institutions in serving extre			
MERCY CORPS TSU-IND-05/MS05-	Beneficiaries: Total: 150,000 persons Women: 75,000 Children: 90,000	Partners: to be identified	15,000,000	
		sive Assistance for Northern		
Aim: To provide water, sanitation, health care, shelter, household item infrastructure rehabilitation, livelihood assistance and trauma counselling.				
UNITED NATIONS ENVIRONMENT PROGRAMME (UNEP)	Beneficiaries: Total: potentially 2 million Project Title: Post-disaste	Partners: UN Satellite (UNOSAT), UNDP er environmental assessme	1,000,000 ent, risk reduction and recovery	
	support		-	
TSU-IND-05/MS06- INDONESIA	Aim: Identify, assess and		to human health and medium rial sites and natural resources,	

## **MALDIVES**

## 1. INTRODUCTION

The magnitude and scale of the disaster relative to the size and population of the Maldives is unprecedented in living memory. The tsunami inundated the entire country. All of the Maldives' 200 inhabited islands were hit, as were all of its 87 resort islands. The highest elevation in the country being 1.5 metres, and the islands being so small, there was nowhere to run when the tsunami struck. The entire population of the Maldives was affected by the disaster. One-third of the population, some 100,000 people, was severely affected: their homes were destroyed or severely damaged, they have no or very limited access to clean water and food, and they are at risk of disease. Eighty people were killed (3 per 10,000) and dozens remain missing. Nearly 5% of the population (more then 12,000 people) were forced to evacuate their islands. Their homes are destroyed and they remain homeless. Thousands of people are now under serious threat of disease outbreaks as a result of damaged water and sanitation systems, the congested and crowded conditions of the displaced, seawater contamination, and the inability to access appropriate health services.

The Government's initial damage assessment is daunting: more than one third of all inhabited islands are completely or severely destroyed. While the medium-term impact of the tsunami on the economy is still being assessed, initial government reports indicate potentially disastrous effects on the tourism industry and the fisheries and agriculture sectors. More then 20% of the country's 87 tourist islands were severely damaged and hundreds of boats, jetties and harbours were destroyed or damaged.

The Maldives presents great challenges to the distribution of aid. The population is dispersed over 200 islands, 90% of which have communities with less than 500 people. Average island size is only 15 hectares. All of the islands are accessible only by boat or small sea plane and nearly everything, from the most basic food supplies to reconstruction materials, must be delivered. Destruction of jetties and boats, and disruption of transport links undermines food and other vital supply lines. Inclement weather can bring the entire aid operation to a standstill.

Despite these challenges, the Maldivian people responded immediately to the disaster. Within hours, the Government declared a state of natural disaster and a state of emergency and established a ministerial-level Crisis Task Force to assess damage, resume communication and power services, and coordinate the relief effort. Private Maldivians and local businesses self-mobilised *en masse* to help their neighbours, providing water, food, shelter and volunteer time as well as using their personal boats and planes for evacuation and aid delivery. Self-help recovery is already underway. People are returning to their islands and beginning the mammoth task of clean-up and repair.

While the challenges ahead are formidable, there is sound evidence that international aid provided to the Maldives at this time of crisis will make a considerable and immediate impact. The Maldives has a positive record in the effective utilisation of international assistance. The World Bank ranks the country in the top five in terms of aid effectiveness. The country's response to the tsunami, along with rapid socio-economic progress in the past two decades, promises effective and efficient use of international aid.

Through this appeal, UN agencies seek US\$ 66,497,000 to address urgent humanitarian needs and begin the recovery and reconstruction process.

# Flash Appeal for Indian Ocean Earthquake - Tsunami 2005

Summary of Requirements - by Sector and Country of Destination as of 5 January 2005
http://www.reliefweb.int/fts

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

# Sector Name Requirements

Maldives	
COORDINATION AND SUPPORT SERVICES	7,460,000
ECONOMIC RECOVERY AND INFRASTRUCTURE	11,652,000
EDUCATION	8,064,000
FAMILY SHELTER AND NON-FOOD ITEMS	19,100,000
HEALTH	10,605,000
PROTECTION/HUMAN RIGHTS/RULE OF LAW	1,520,000
WATER AND SANITATION	8,096,000
Total	66,497,000

### 2. CONTEXT AND HUMANITARIAN CONSEQUENCES

## 2.1 Context

The magnitude and scale of the tsunami disaster relative to the size and population of the Maldives is unprecedented in living memory. The tsunami struck the Maldives at 0930 hours local time on 26 December, inundating the entire country. All of the Maldives' 200 inhabited islands were hit, as were all of its 87 resort islands. The highest elevation in the country being 1.5 metres, and the islands so small, there was nowhere to run when the tsunami struck.

The Maldives presents great challenges to the distribution of aid, which constrain both the emergency relief operation and recovery and reconstruction efforts. In particular:

- The population is dispersed over 200 islands, 90% of which have communities with less than 500 people.
- Each island is self-contained, with its own health and education facilities and water infrastructures.
   Destruction of these facilities renders the islands virtually uninhabitable and puts the population at risk of disease.
- At the same time, each island is nearly totally dependent on the capital, Male', or regional capitals for its food supply.
- All of the islands are accessible only by boat or small seaplane and nearly everything, from the most basic food supplies to reconstruction materials, must be delivered.
- Many islands are only equipped for small boat access, posing a challenge to the delivery of largescale aid.
- The destruction of jetties and boats and the disruption of transport links undermine food and other vital supply lines.
- Inclement weather can bring the entire aid operation to a standstill.

Despite these challenges, the Maldivian people responded immediately to the disaster. Within hours, the Government declared a state of natural disaster and a state of emergency and established a ministerial-level Crisis Task Force to assess damage, resume communication and power services, and coordinate the relief effort. By day four of the emergency, the government had ascertained preliminary damage in all of the 200 islands; this information, along with updated information on incoming aid, is updated several times daily and posted on the website of the President's Office (<a href="https://www.presidencymaldives.gov.mv">www.presidencymaldives.gov.mv</a>.)

Communities and the local private sector self-mobilised *en masse* to support their neighbours. Island communities absorbed thousands of evacuees into their homes. They use their private boats and sea planes to deliver relief; thousands of volunteers are helping to run displacement centres (four in Male' alone) and to clean up debris on the islands. An indicator of community support is that, by day four of the crisis, the Government's Task Force recorded cash contributions from Maldivians and the local private sector totalling some US\$ 750,000. Thousands of dollars of in-kind contributions of water, food, bedding, clothes, services and other items have been donated by local people and businesses.

Within hours of the disaster, the Government of the Maldives officially requested support from the international community. The UN Country Team immediately established a Disaster Task Force to respond to the crisis, led by the UN Resident Coordinator. A UN Disaster and Assessment Coordination (UNDAC) team arrived in the Maldives on day three of the crisis. The UN has been liasing closely with the Government's Task Force and has regular access to decision-makers, greatly facilitating a coordinated approach to the response. The UN immediately mobilised emergency assistance (such as water, plastic sheeting, health kits, food); the first aid delivery arrived on day five of the crisis.

While the challenges ahead are formidable, there is sound evidence that international aid provided to the Maldives at this time of crisis will make a considerable and immediate impact. The Maldives has a positive record in the effective utilisation of international assistance. The World Bank ranks the country in the top five in terms of aid effectiveness. The country's response to the tsunami disaster, along with rapid socio-economic progress in the past two decades, bodes well for the effective and efficient use of international aid.

## 2.2 Humanitarian consequences

The entire population of the Maldives was affected by the disaster. One-third of the population, some 100,000 people, was severely affected: their homes were destroyed or severely damaged, they have no or very limited access to clean water and food, and they are at risk of disease. Nearly 5% of the population (more then 12,000 people) were forced to evacuate their islands. Their homes are destroyed and they remain homeless.

Six days after the disaster, the death toll stands at 80 persons (3 per 10,000), with 28 persons still missing. Most of the dead are women and children. It is believed that, due to the unique geography of coral reefs surrounding the islands and the deep channels between the atolls, the main physical impact of the tsunami was on the reefs. While this partially explains the relatively low death toll, the reefs did not protect the country from extensive damage to buildings and infrastructure.

The government's initial damage assessment is daunting: more then one third of all inhabited islands are completely or severely destroyed. In particular:

- 20% of the health infrastructure has been badly damaged or destroyed.
- 10% of all inhabited islands (20) are totally destroyed (no structures remain, and infrastructures, including water and sanitation systems, are completely destroyed).
- 26.5% of all inhabited islands (53) are severely damaged.
- 15% of all inhabited islands (30) have no safe water. Water systems (mainly rainwater harvesting) have been destroyed and ground water has been contaminated by salt water and debris.

The impact of the tsunami on livelihoods and the macro economy is still being assessed. Tourism, the Maldives' largest industry, accounts for 33% of Gross Domestic Product (GDP) and more than 60% of the Maldives' foreign exchange receipts. Over 90% of government tax revenue comes from import duties and tourism-related taxes. Fishing and agriculture are the other leading sectors, accounting for around 20% of GDP. Initial government reports as of 31 December give an indication of the potential disastrous effects on the tourism industry and people's livelihoods:

- More than 20% of 87 tourist islands were severely damaged.
- Hundreds of boats and fishing equipment, many belonging to small fisherfolk, were damaged or destroyed.
- Damage to jetties and harbours has rendered some islands inaccessible by boat.
- Many islands are covered with tons of demolition waste, garbage, and rotting fish carcasses, presenting formidable health risks.

The economy of the Maldives is highly dependent on its unique ecosystems of coral reefs and atolls. The reefs provide protection against extreme weather conditions and high swells of the ocean. Preliminary findings indicate that the tsunami most likely led to extensive damage of the fragile reef ecosystem. Sedimentation as well as physical damage has been reported and there are indications that large parts of the reefs might be dying. It is necessary to identify, mitigate and assess the overall environmental damage of the tsunami and predict the impact on the dependent economic sectors.

# 3. RESPONSE PLANS

### 3.1 Water and Sanitation

Water supply on most of the islands is scarce under normal circumstances; the invading tsunami waves destroyed or polluted the water lenses and carried rainwater collection and storage tanks out to sea. An estimated 30-40% of rainwater harvesting equipments has been damaged and ground water wells have been contaminated by sea water. According to the latest reports, fifteen islands have only a one to two week supply of drinking water. Incidence of diarrhoeal diseases has been reported on many islands. Contaminated drinking water, combined with the increased numbers of displaced people in crowded accommodation could trigger cholera and other epidemics.

People urgently need water for drinking, cooking and bathing. The logistically intensive and expensive provision of water supplies to 200 islands is not sustainable even in the immediate term. Therefore, solutions must be found quickly to restore rainwater harvesting systems, clean wells, and properly dispose of excreta.

Access to adequate sanitation is also a major challenge. There is an acute shortage of latrines and very limited solid waste and garbage collection facilities, as many sanitation systems were destroyed or severely damaged. Most of the 12,000 displaced people have not been able to wash since the day of the tsunami. Living conditions are particularly difficult for displaced people as they are cramped into small rooms without adequate access to latrines, toilet supplies, shower and soap. Women and young girls have special needs for hygiene and sanitation. To maintain health and safety, people need hygiene items for daily use and for large-scale disinfection of living spaces, which have been contaminated by waste.

## **Objectives**

- To decrease the likelihood of outbreak of waterborne diseases.
- To ensure access to safe drinking water for all affected populations.
- To minimise the environmental impact of waste removal.

### **Activities**

- Ensure the availability of a minimum safe drinking water supply.
- Provide bleach, chlorine or water purification tablets, and raise awareness on their appropriate
  use.
- Provide jerry cans, or an appropriate alternative.
- Provide soap and disseminate key hygiene messages on the dangers of cholera and other waterand excreta-related diseases.
- Facilitate safe excreta and solid waste disposal.
- Promote the recycling of demolition waste and reduce competition for scarce land use.

# **Expected impact**

- The provision of safe water supplies and the restoration of sanitation services will help prevent deaths from water-borne diseases.
- The population knows about the risks associated with contaminated water.
- Waste is removed according to sound environmental practices.

# 3.2 Health, Nutrition and Reproductive Health

The lack of access to clean water, adequate shelter, food, sanitation and health infrastructure is having a significant impact on the health status of the population. As a direct result of polluted water and seawater contamination, thousands of people are now facing serious threats of disease such as diarrhoea, typhoid, hepatitis, viral fever, and dysentery. Essential cold chain equipment has been destroyed or damaged, thus interrupting planned immunisation activities. Overcrowded environments heighten the risk of measles, influenza and meningitis. Vector-borne diseases also pose significant threats. Vulnerable groups including pregnant women, children and the elderly are particularly at risk. It is essential rapidly to establish an early-warning communicable disease surveillance, verification and response system for the early detection and control of disease outbreaks, including the provision of basic laboratory services for confirmation of outbreaks.

The importance of addressing reproductive health in emergency situations cannot be underestimated. Currently, there are 1,500 pregnant women scattered across the 200 islands who have been affected by the disaster. Within six months 1,000 of these women will deliver. Safe delivery conditions are a major concern as health infrastructure and services have been severely disrupted, and in some cases destroyed.

Malnutrition is a common problem in the Maldives. Approximately 25% of the children under five have stunted growth and it is believed that this disaster will intensify the situation. Anaemia affects 51% of women and is considered an indirect cause of maternal mortality. The Maldives is dependent on the import of most food items. Home gardens, which are used for fruits and vegetables, have been flooded and cannot be restarted in the near future.

### **Objectives**

- The overall objective is to support national health authorities to protect the health of survivors and other vulnerable people affected by the disaster.
- To monitor public health to provide early warning of emerging health threats and to enable the timely organisation of any necessary response.
- To support the health sector response to the disaster and to assist in the recovery and rehabilitation of the country's health system.

### **Activities**

- Assess the general health, nutrition and reproductive health situation of the population and the situation of the health facilities, services, equipment and supplies in the affected islands.
- Promptly set up a disease surveillance system to monitor the public health situation and provide early warning of emerging health threats.
- Support the Ministry of Health in coordinating the health sector activities.
- Replenish and procure essential medical supplies, vaccines, emergency health kits, and safe delivery kits.
- Support the rebuilding of health structures.
- Provide information and increase public awareness to prevent outbreaks.
- Strengthen the capacity of the Ministry of Health to respond to emergencies.

### **Expected impact**

- Disease trends monitored and outbreak response systems put in place to avoid health threats.
- Reestablishment of basic health services in the worst affected areas.
- Timely health care for infants and children, including ORS and zinc tablets for diarrhoea treatment
- Good reproductive health, safe delivery, reduction of complications related to pregnancy and delivery, reduction of the transmission of sexually transmitted infections (STIs) including Human Immuno-deficiency Virus/Acquired Immuno-deficiency Syndrome (HIV/AIDS).
- Good reproductive outcomes in terms of the health and nutrition of the infant.
- Reestablishment of family planning services.

### 3.3 Shelter

According to the Government's preliminary estimates, more than 4,410 houses were damaged, out of which 1,569 houses were totally destroyed and 2,841 partially damaged. As a result, some 12,000 people have been forced to abandon their places of origin and move into large cities such as Male', where they are living in overcrowded and inadequate conditions.

These persons need appropriate temporary housing in the immediate term, and the possibility to rebuild their homes in the medium term. Those whose houses have been partially destroyed need materials to repair their homes.

### **Objectives**

- To address the emergency shelter needs of 1,000 displaced households.
- To repair the partially destroyed houses of 2,000 households in selected areas.
- To replace 600 totally destroyed houses of the most vulnerable households.

### **Activities**

- Provide temporary emergency accommodation for displaced populations.
- Repair partially damaged houses.
- Disseminate information for making the existing housing safer and initiate a public awareness campaign on structural mitigation measures.
- Provide training for local masons and small contractors.
- Undertake in-depth assessment of shelter/housing needs and capacities.
- Undertake capacity analysis and resource mapping to determine the availability of skilled and unskilled labour, institutional capacity, available technical now-how, and building materials within the affected communities.
- Assist in the rebuilding of totally destroyed houses for 600 families.

### **Expected impact**

- The most severely damaged housing stock repaired and rebuilt.
- The immediate and emergency shelter needs of 1,000 displaced families are met.

### 3.4 Food

People need immediate short-term food assistance to cope with the sudden loss of food stocks and the means to acquire food, such as boats and fishing equipment. They also need food aid in the coming weeks while they are dedicating themselves to clean up and initial reconstruction.

In the long run, food aid is not expected to be required in the Maldives. In the immediate term, the Government has requested small-scale food aid because some island's staple food stocks were destroyed. Fisherfolk whose boats and equipment were damaged or destroyed are currently not in a position to fish for food or trading purposes, and their income is expected to decline temporarily.

The WFP is prepared to assist the affected population for six months. The current planning figure stands at 50,000 displaced people and other affected persons (subject to changes). The food basket is planned for 3,600 tons of rice, 450 tonnes of canned fish and 180 tonnes of corn-soya blend (CSB).

## **Objectives**

 To ensure that sufficient food inputs, both in calories and nutritionally, are made available to the tsunami victims.

#### **Activities**

- Provision of food aid.
- Monitoring of the situation with the Government and preparing further actions if any new needs arise.

### **Expected impact**

Severely food insecure people have sufficient food.

# 3.5 Education

The school-going population amounts to 106,220, representing 35% of the total population of the country. These children attend 322 schools spread over 200 inhabited islands across the country. The tsunami destroyed 25% of the schools to such an extent that the government has declared them unsafe for use. Of these schools 20% are totally destroyed. As a result, 25,000 children have no place to learn. The reopening of schools for the academic year 2005, scheduled for 9 January, has been postponed by one month. The Ministry of Education plans to work speedily with the international community to set up temporary shelters, repair damage, and re-open schools as soon as possible.

## **Objectives**

- To support the Government to set up temporary learning spaces for children whose schools have been damaged and destroyed.
- To ensure the provision of basic educational equipment and materials.

### **Activities**

- Conduct a rapid assessment of the educational sector to determine what is to be mobilised internally and externally.
- Procure adequate numbers of school-in-a-box kits, recreational kits and early childhood kits.
- Provide essential materials and /or tools to enable the immediate set up of shelters for primary and early learning.
- Support the re-construction or rehabilitation of damaged school buildings with a community participatory approach.

<sup>1</sup> WFP food requirements are presented in the regional section of the appeal.

<sup>2</sup> Ministry of Planning and National Development, Statistical Yearbook 2003.

### **Expected impact**

- All children who are displaced from their homes due to the disaster are able to continue with basic education within a period of one month.
- All children who are in temporary shelters are moved into new or rehabilitated schools within a maximum period of one year.
- All children between the ages 3-5 are able to attend an early learning facility that promotes playbased learning.

### 3.6 Protection of women and children

One major aspect of the vulnerability of women, girls and children lies in their psycho-social needs. There is extensive evidence from previous disasters that due to trauma pregnant women experience premature labour and spontaneous miscarriages. The displacement, loss of security, and destitution often is accompanied by increased levels of gender-based violence and exploitation of women, girls and children. Sharp increases in depression, suicide and various forms of violence, particularly gender- based violence, including rape, can also occur. The psychosocial harm to women, girls and children who experience traumatic disasters is as great as the physical harm. Such experiences have a sustained impact on children's development, as it affects all aspects of a child's well being - physical, mental, social and emotional. Post Traumatic Stress Disorder (PTSD) is experienced on a fairly large scale by people who have been victims of disaster, and requires several immediate steps.

## **Objectives**

- To assist the government in their rehabilitation and recovery attempts through psychosocial interventions.
- To ensure that the affected population, especially women and children do not experience further trauma.
- To strengthen the child's existing care system through advocacy and education.
- To ensure that the children, adolescents and women are protected from abuse and exploitation.

### **Activities**

- Conduct rapid assessments of the situation, with the purpose of identifying both needs and potential threats in the aftermath of the disaster.
- Support the establishment of initial monitoring systems including on trauma, Post Traumatic Stress Disorder, severe or systematic abuse, violence and exploitation.
- Train counsellors and support the provision of psychosocial counselling to the severely affected children, women and men.
- Support information, education and communication campaigns to prevent sexual violence targeting adolescents, especially young girls.

## **Expected impact**

- Reduction of sexual abuse and gender-based violence.
- Children and women in need have access to quality psychosocial services.

# 3.7 Restoration of Livelihoods

The tsunami has had a major impact on the livelihoods of island communities. The disaster is expected to have macro-economic effects as the key productive sectors – fishing, agriculture, and tourism – were all affected. These sectors together account for more than 50% of GDP.

### **Objectives**

- To repair or replace lost or damaged fishing vessels and equipment and rehabilitate basic productive fisheries infrastructure.
- To reclaim affected agricultural land and provide basic inputs to resume farming.
- To restore livelihoods activities of 4,000 small family-based industries, small entrepreneurs and skilled entrepreneurs through credit support.
- To create short livelihood opportunities for 2,000 affected families through engagement in cash for work activities.

### **Activities**

- Provide credit to skilled and semiskilled entrepreneurs to restart their livelihood activities.
- Provide credit to fishermen to repair boats and fishing implements.
- Support small farmers for removal of sand cast in agricultural land, provision of fruit saplings, vegetable seeds, and basic agricultural implements.
- Implement food and cash for work activities for poor families to provide interim livelihoods and food security to families who were employed in the tourism industry.
- Rebuild houses and other public infrastructure and support the reconstruction of public facilities.
- Cleanup and disposal of debris through community mobilisation and participation.

## **Expected impact**

- Restoration of livelihoods of the most affected families.
- Fishing industry partially restored and business resumed.
- Agricultural economy revitalised for small farmers, local fruit and vegetable supply restored, and plantation of coconut trees started.
- Food and livelihood security of tsunami-affected families met and public and private livelihood infrastructure repaired.

## 3.8 Transport, communications, and rehabilitation of related infrastructure

Due to its specific geographic situation and the wide dispersion of the population, the timely delivery of relief and recovery supplies to all affected areas presents a major challenge to both the UN agencies and the Government. Initial government reports indicate that infrastructure facilities related to transportation (e.g., jetties and roads) have been destroyed or severely damaged. A yet undetermined number of boats – the lifeline of the Maldives for fishing, transportation and supplies – have been destroyed or damaged.

### **Objectives**

- To facilitate the efficient and timely distribution of relief and rehabilitation materials to the affected population.
- To repair and rehabilitate key infrastructure.

### **Activities**

- Provide support to the Government to repair jetties, access channels to the islands and clean up debris.
- Repair the island's damaged harbour facilities.

### **Expected impact**

- Efficient and timely delivery of essential supplies, relocation of displaced persons in the affected islands, and restoration of normal business.
- Revitalisation of the local economy through the rehabilitation of local infrastructure.

# 3.9 Vulnerability and Disaster Risk Reduction

The recent tsunami illustrated the extreme vulnerability of the Maldives to natural hazards. Island communities are regularly exposed to geological and/or other hydro-meteorological hazards. The Maldives also faces challenges due to climate change and the rising sea level, as well as the increase in extreme weather events. Communities must be adequately prepared to withstand future disasters.

The economy of the Maldives is highly dependent on its unique ecosystems of coral reefs and atolls. The reefs provide protection against extreme weather conditions and high swells of the ocean. Preliminary findings indicate that the tsunami most likely led to extensive damage of the fragile reef ecosystem. Sedimentation as well as physical damage have been reported and there are indications that large parts of the reefs might be dying. It is necessary to identify, mitigate and assess the overall environmental damage of the tsunami and predict the impact on the dependent economic sectors.

Due to the country's low lying status and the geographical dispersion of the population, mostly in remote islands, disaster reduction management measures, including preparedness and early warning systems, are crucial for saving lives and livelihoods.

### **Objectives**

- To assess the environmental damage of the tsunami to inform future disaster risk reduction strategies.
- To strengthen disaster risk reduction measures and emergency control procedures in the country.
- To establish basic early warning systems and train local communities in concepts of disaster preparedness.

#### **Activities**

- Strengthen the National Disaster Management and Crisis Centre (NDMC) with advanced equipment for early warning and forecast capability.
- Set up emergency operation/crisis management centres in the 20 most populated islands (more than 2,000 people) and other strategic locations.
- Identify gaps in the current state of disaster preparedness and develop a disaster preparedness plan in each atoll.
- Conduct awareness campaigns on disaster preparedness.
- Provide training in management of emergency operations procedures, information management for relief distribution, damage assessment and protocols and standard procedures for the use of warning systems.
- Train island development committees, women's development committees and local youth groups in search and rescue and evacuation techniques and provide basic equipment for removal of debris and search and rescue.
- Initiate discussion within the Government to designate a department for long term disaster management and preparedness activities.
- Provide technical assistance to the Government to do a risk and vulnerability analysis and assess environmental damage to the reefs.

### **Expected impact**

- Appropriate structures and systems for management of natural disasters established.
- Trained personnel with equipment available for evacuation, search and rescue operations and continuing relief and rehabilitation operations.
- Awareness on the need for a long term approach and planning to management of natural disasters created.

# 3.10 Coordination and Support Services

While the UN system will continue to support the Government to coordinate relief and immediate reconstruction efforts, there is a need to provide necessary technical and advisory support for recovery and longer-term reconstruction, including supporting the Government to formulate a post-disaster planning and programming strategy incorporating risk reduction measures.

### **Objectives**

- To ensure dedicated capacity within the office of the UN Resident Coordinator to support coordination of the relief and recovery effort for a period of 6 months.
- To advise and support the Government on the formulation of a recovery framework including a recovery strategy and policy.

### **Activities**

- Support the Government in undertaking an inter-sectoral medium to long term recovery needs assessment.
- Set up a UN Recovery Team of experts to advise and support the Government.

### **Expected impact**

- UN activities in support of the relief and recovery operation are adequately coordinated.
- A national Recovery Framework is prepared.

# 4. ROLES AND RESPONSIBILITIES

A ministerial-level Crisis Task Force was established within 24-hours of the disaster. The Crisis Task Force is comprised of a number of cells composed of ministers responsible for information gathering, identification of priority needs, logistics and transport, aid coordination and aid tracking. The Ministry of Finance and Treasury and the Ministry of Planning oversee the Task Force and are responsible for coordinating relief and recovery planning and operations.

The United Nations works directly with the Task Force and the appropriate line ministries, as well as with the private sector and relevant NGOs. Within the United Nations Country Team, agencies have assumed responsibility for key sectors, as follows:

Sector	UN Agencies	Government Counterpart
Water and Sanitation	UNICEF, UNEP	Maldives Water and Sanitation Authority Ministry of Health
Health, nutrition and reproductive health	WHO, UNICEF, UNFPA	Ministry of Health
Shelter	UNDP	Maldives Housing and Urban Development Board
Food aid	WFP (currently does not have a permanent presence in the Maldives)	Government's Crisis Task Force
Education	UNICEF	Ministry of Education
Protection of women and children	UNICEF, UNFPA	Ministry of Education Ministry of Gender, Family Development and Social Security
Restoration of livelihoods	UNDP	Ministry of Atolls Development, Ministry of Fisheries, Agriculture and Marine Resources
Transport, communications and rehabilitation of related infrastructure	UNDP, UNICEF	Ministry of Transport and Civil Aviation, Ministry of Communication, Science and Technology
Vulnerability and disaster risk reduction	UNDP	Ministry of Planning, Ministry of Environment (MoE)
Coordination	Office of the UNRC	All relevant ministries

# 5. PROJECT TABLES

	WATER AND SANITATION		US\$
UNITED NATIONS ENVIRONMENT PROGRAMME (UNEP)	Beneficiaries: Total: 100,000	Partners: Ministry of Environment, Ministry of Health, UNICEF, Maldives Water and Sanitation Authority (MWSA), UNDP	200,000
TSU-MDV-05/WS02- MALDIVES	Project Title: Emergency w Aim: Clean, separate and re damage to coral reefs and fi	aste management e-use waste, reduce waste be	eing dumped and prevent
UNITED NATIONS CHILDREN'S FUND (UNICEF)	Beneficiaries: Total: 100,000 Women: 50,000 Children: 25,000	Partners: Maldives Water & Sanitation Authority (MWSA), Ministry of Health, WHO, other bilateral agencies, NGOs	7,896,000
TSU-MDV-05/WS01- MALDIVES	affected populations  Aim: To prevent an increa	estoration of essential water se in mortality and morbidity outbreak of waterborne disea	of affected populations by

HEALTH, N	NUTRITION AND REPRODUC	TIVE HEALTH	US\$
UNITED NATIONS POPULATION FUND (UNFPA)	Beneficiaries: Total: 100,000 Women: 25,000 Children: 50,000	Partners: MOH, DPH, NGOs, Regional and Atoll Hospitals.	2,000,000
TSU-MDV-05/H08-		esponse and reconstruction of	
MALDIVES	Aim: To re-establish reprod	uctive health services for seve	
UNITED NATIONS CHILDREN'S FUND (UNICEF)	Beneficiaries: Total: 6,000 Children: 6,000	Partners: Department of Public Health (DPH) Ministry of Health Regional and Atoll Hospitals	930,000
TSU-MDV-05/H09- MALDIVES	Project Title: Restoration of	f Immunisation services	
WALDIVEO	<b>Aim:</b> To ensure that all Programme of Immunisation	Maldivian children are in (EPI) vaccines.	nmunised with Expanded
UNITED NATIONS CHILDREN'S FUND (UNICEF) TSU-MDV-05/H10- MALDIVES	Beneficiaries: Total: 100,000 Children: 50,000 Women: 25,000	Partners: Department of Public Health Ministry of Health Regional and Atoll Hospitals Health Centres Community groups, NGOs	1,590,000
	Project Title: Nutritional sup		
	<b>Aim:</b> To monitor the nutrition action to limit the effects of i	on status of children under fi ncreased malnutrition.	
WORLD HEALTH ORGANIZATION (WHO)	Beneficiaries: Total: 100,000 Women: 50,000 Children: 30,000	Partners: MoH/DPH, UNICEF/ UNFPA/NGOs/CBOs	400,000
TSU-MDV-05/H01- MALDIVES		assessment of the damage to sin order to develop immedia	
WORLD HEALTH ORGANIZATION (WHO)	Beneficiaries: Total: 100,000 Women: 50,000 Children: 30,000	Partners: MoH/DPH, UNICEF/ UNFPA/NGOs/CBOs	400,000
TSU-MDV-05/H02- MALDIVES	<b>Project Title:</b> Support to Min <b>Aim:</b> To assist the Ministry of	nistry of Health coordination of Health in coordinating the h	nealth sector activities.

HEALTH,	NUTRITION AND REPRODUC	TIVE HEALTH	US\$
WORLD HEALTH ORGANIZATION (WHO)	Beneficiaries: Total: 100,000 Women: 50,000 Children: 30,000	Partners: MoH/DPH, UNICEF/ UNFPA/NGOs/CBOs	3,000,000
TSU-MDV-05/H03- MALDIVES	Project Title: Provision of sassets  Aim: To contribute to ensu	supplies and equipment and ring that medical supply chain	·
WORLD HEALTH ORGANIZATION	possible and to respond to the Beneficiaries: Total: 100,000 Women: 50,000 Children: 30,000	ne needs of end-users.  Partners:  MoH/DPH, UNICEF/ UNFPA/NGOs/CBOs	250,000
(WHO) TSU-MDV-05/H04- MALDIVES	Project Title: Technical Sur Aim: To provide technical a	assistance and to coordinate values are sations in disaster affected are	
WORLD HEALTH ORGANIZATION (WHO)	Beneficiaries: Total: 100,000 Women: 50,000 Children: 30,000	Partners: MoH/DPH, UNICEF/ UNFPA/NGOs/CBOs	500,000
TSU-MDV-05/H05- MALDIVES	<b>Project Title:</b> Advocacy and <b>Aim:</b> To organise public outbreaks, and for the treatn	health campaigns for the	prevention of diseases,
WORLD HEALTH ORGANIZATION (WHO)	Beneficiaries: Total: 100,000 Women: 50,000 Children: 30,000	Partners: MoH/DPH, UNICEF/ UNFPA/NGOs/CBOs	1,000,000
TSU-MDV-05/H06- MALDIVES	Project Title: Disease surveillance, verification and response  Aim: To track patterns of life-threatening diseases among those at risk through the prompt set-up of a surveillance and early warning system, with regular epidemiological reports.		
WORLD HEALTH ORGANIZATION (WHO)	Beneficiaries: Total: 100,000 Women: 50,000 Children: 30,000	Partners: MoH/DPH, UNICEF/ UNFPA/NGOs/CBOs	535,000
TSU-MDV-05/H07- MALDIVES	Project Title: Project Manag	gement, evaluation and reporti or and follow-up the health st easures, as necessary.	

EDUCATION			US\$		
UNITED NATIONS CHILDREN'S FUND (UNICEF)	Beneficiaries: Total: 180,000.00 Children: 180,000	Partners: Ministry of Education, Educational Development Centre, Faculty of Education, NGOs	8,064,000		
TSU-MDV-05/E01-	Project Title: Back to School				
MALDIVES  Aim: To ensure that all Maldivian children of school-going age have accesschools.					

	SHELTER		US\$
UNITED NATIONS DEVELOPMENT PROGRAM (UNDP)	Beneficiaries: Total: 3,600 families	Partners: Maldives Housing and Urban Development Board, national development NGOs, local communities	19,100,000
TSU-MDV-05/S/NF01- MALDIVES	vulnerable families will benefit	n needs of the most vulnerable t for assistance for full rebuildi ction; 1000 displaced familie	ng; 2,000 families will

PROTE	PROTECTION OF CHILDREN AND WOMEN US\$					
UNITED NATIONS POPULATION FUND (UNFPA) TSU-MDV-05/P/HR/RL01- MALDIVES	Beneficiaries: Total: 100,000 Women: 25,000 Children: 50,000  Project Title: Protection and Aim: To ensure rehabilitation	Partners: Ministry of Health, Ministry of Gender, Family Development and Social Security, society for Health Education (SHE) I psychosocial support to won and mental well-being with CC campaigns to raise aware	250,000 nen and adolescent girls. a special focus on families			
UNITED NATIONS POPULATION FUND (UNFPA) TSU-MDV-05/P/HR/RL02-MALDIVES	Partners: Ministry of Education, Ministry of Youth and Sports, SHE, Foundation for Women: 25,000 Advancement of Self Help in Attaining Needs (FASHAN) Girl Guides and Boy Scouts					
	Project Title: Life skills based education for adolescents/youth  Aim: To ensure healthy development and reduced risk taking behaviour amongst adolescents/youth. Protection of adolescents and girls through BCC campaigns.					
UNITED NATIONS CHILDREN'S FUND (UNICEF) TSU-MDV-05/P/HR/RL03- MALDIVES	Beneficiaries: Total: 210,000.00 Women: 80,000 Children: 130,000	Partners: Ministry of Education, Ministry of Gender, Family Development and Social Security, Care Society, FASHAN, Society for Health Education, Ministry of Youth Development and Sports, Schools, Health Centres	1,120,000			
	Project Title: Psycho-social support to children and women  Aim: To ensure that all Maldivian children and women have access to quality psychosocial interventions for quick recovery and rehabilitation.					

RI	RESTORATION OF LIVELIHOODS		
	Beneficiaries:	Partners: Ministry of	2,000,000
FOOD AND	100,000 severely affected	Atolls Development,	
AGRICULTURE	people	Ministry of Fisheries,	
ORGANISATION (FAO)		Agriculture and Marine	
, ,		Resources	
TSU-MDV-05/ER/I02-	Project Title: Rehabilitation	of marine fisheries sector and	d agricultural infrastructure
MALDIVES	Aim: To support the affect	ted agricultural and fishing	communities through the
	replacement and/or repair of	small fishing craft and equipr	nent.
LINITED MATIONS	Beneficiaries:	Partners: NGOs in the	3,300,000
UNITED NATIONS	8,000 families	islands and community	
DEVELOPMENT		groups	
PROGRAM (UNDP)	Project Title: To support and	d restart livelihood activities o	f most affected people
TSU-MDV-05/ER/I01-	Aim: To restore major livelil	nood activities of 1000 fisher	men families, 2000 skilled
MALDIVES	labour families, 2000 small entrepreneurs, 2000 families formerly working in the		
1111 1231 123	tourism industry, and 1000 a	gricultural families.	

TRANSPORT, COMM	TRANSPORT, COMMUNICATIONS, AND REHABILITATION OF RELATED US\$ INFRASTRUCTURE				
UNITED NATIONS DEVELOPMENT PROGRAM (UNDP) TSU-MDV-05/ER/103-	Beneficiaries: 45,000 families	Partners: Ministry of Transport and Civil Aviation, Ministry of Communication, Science and Technology, NGOs, CBOs	4,000,000		
MALDIVES					
UNITED NATIONS CHILDREN'S FUND (UNICEF) TSU-MDV-05/ER/I04- MALDIVES	Beneficiaries: Total: 210,000.00 Women: 80,000 Children: 130,000	Partners: Ministry of Foreign Affairs Department of External Resources Task Force Aid Coordination Unit, UNDP, united Nations Joint Logistic Centre (UNJLC), WFP	2,352,000		
		and logistical support for emer			
	<b>Aim:</b> To ensure that emergency assistance for Maldivian children and women can be delivered by sea and air in a timely and cost effective manner				

VULNERAE	BILITY AND DISASTER RISK	REDUCTION	US\$				
	Beneficiaries:	Partners: Ministry of	4,400,000				
	45,000 families	Planning, Ministry of					
		Environment, Atoll					
UNITED NATIONS		Development Offices,					
DEVELOPMENT		Island Offices and					
PROGRAM (UNDP)		women's development					
		committees and youth					
TSU-MDV-05/CSS01-		groups, Ministry of					
MALDIVES		Planning and other					
		related departments					
	Project Title: Vulnerability and Disaster Risk Reduction						
	Aim: To factor in disaster risk reduction in the recovery and rehabilitation processes						
	Beneficiaries:	Partners: Ministry of	750,000				
	Total: 280,000	Environment and					
UNITED NATIONAL		Construction, Ministry of					
ENVIRONMENTAL		Fisheries, Agriculture and					
PROGRAMME (UNEP)		Marine Resources,					
TOU MEN ( 05/00000	Duning Titles Doct discrete	UNDP, UNOSAT.					
TSU-MDV-05/CSS02- MALDIVES	implementing partners	environmental assessment,	and recovery support to				
	Aim: To identify, assess and	I address immediate risks to t used by damage to natural res					

COORD	INATION AND SUPPORT S	ERVICES	US\$			
UNITED NATIONS OFFICE FOR THE COORDINATION OF HUMANITARIAN AFFAIRS (OCHA) TSU-MDV-05/CSS03-	Beneficiaries: Government's Crisis Task Force, UN Agencies, other humanitarian organisations Government ministries involved in relief and recovery	Partners: Governments Crisis Task Force, UN agencies	810,000			
MALDIVES		of UN efforts in response to the	he disaster			
		Aim: To ensure a coordinated response to the crisis.				
UNITED NATIONS DEVELOPMENT PROGRAM (UNDP) TSU-MDV-05/CSS04-	Beneficiaries: Government's Crisis Task Force, UN Agencies, other humanitarian organisations Government ministries involved in recovery and reconstruction	agencies	1,500,000			
MALDIVES	Project Title: Planning the					
	<b>Aim:</b> To advise and support the Government on the formulation of a recovery framework, including a recovery strategy and policy and related institutional framework.					

## **MYANMAR**

## 1. INTRODUCTION

On 26 December 2004, the tsunami reached the south coast of Myanmar after passing through the Andaman Islands and the Myeik Archipelago. The intensity of the wave was reduced but has nevertheless taken over 50 lives, left several thousand people affected, and disrupted basic community services in some of the impacted areas. The overall agreed assessment, however, is that Myanmar has been spared from a large-scale emergency.

The Government of Myanmar has responded to the situation by providing support to affected populations and sharing available information on the impact of the tsunami with the relief community.

Relief agencies have rapidly organised and coordinated assessments in accessible areas and have found needs for safe drinking water, food, medicines, shelter, and non-food items (blankets, clothes, cooking sets, etc). The UN agencies are closely coordinating their response with the international NGOs and the Red Cross movement.

# 2. CONTEXT AND HUMANITARIAN CONSEQUENCES

### 2.1 Context

On 26 December 2004, the tsunami reached the south coast of Myanmar after passing through the Andaman Islands and the Myeik Archipelago. The intensity of the wave was reduced but has nevertheless taken over 50 lives, left several thousand people affected, and disrupted basic community services in some of the impacted areas. The overall agreed assessment, however, is that Myanmar has been spared from a large-scale emergency.

# 2.2 Humanitarian consequences

UN agencies and relief organisations have conducted a series of assessments in costal areas, primarily in the Ayeyawaddy Delta but also in Tanintharyi Division and in Rakhine State. Initial information collected focused on the death and missing toll. Ongoing assessments cover immediate to medium term needs. The hardest hit area is the Laputta Township in the Ayeyawaddy Division, where 34 people are officially reported dead and hundreds of families are without shelter. Initial reports from the majority of islands off the Myanmar shore do not indicate a large-scale impact.

At the time of writing, the UN and its partners have identified some 10,000 affected people in the Irrawaddy delta area and estimate that several thousand more in Tanintheri Division may be in immediate need of food, water, basic health assistance and shelter. Over 50 people are known to have died in the wake of the tsunami. Several hundreds of fishermen of Myanmar origin may have lost their lives off the Thai coast, thus affecting the livelihoods of their families in Myanmar.

In addition, some 200 villages spread over the southern coast of Myanmar may also have suffered from the tsunami disaster. In effect, most of these villages rely on fishing to sustain their livelihoods. Fishermen and fishing equipment such as boats and nets have been the worst hit. Community services including health and education will require some additional support.

## 3. RESPONSE PLANS

The current situation requires agencies to scale up and/or re-direct their existing programmes to tsunami-affected areas in order to provide adequate support for a quick recovery. UN agencies have therefore reallocated existing resources from available in-country funds and supplies as well as called for additional resources through their respective regional appeal mechanisms to cover immediate response. Planning and costing of medium-term recovery and rehabilitation activities will also be submitted based on the results of needs assessments.

In view of the above, in the next three months the UN and its partners will continue assessing the needs of affected populations and step up their activities in the following sectors:

- Water and Sanitation (lead agency: UNICEF). The objective is to protect affected households from water-borne diseases by: providing temporary water supplies, storage and water purification; supporting short- and medium-term rehabilitation of water systems; supplying chlorination equipment; and supporting the provision of basic sanitation and solid waste disposal.
- **Food** (lead agency: WFP). To provide dietary support to the most vulnerable and food-insecure households by distributing food rations.
- Shelter and non-food items (lead agencies: UNDP and UNICEF). To reduce vulnerability caused by the loss of shelter by providing emergency "self-build" shelter materials and equipment to affected families. To ensure the survival and recovery of most affected households by distributing family survival kits (including blankets, clothing, cooking utensils, etc.) and other basic non-food items, especially to special vulnerable groups, as well as income-generating activity material. To support the psychological recovery of vulnerable groups including children, through psycho-social support activities, distribution of recreation and basic education kits, and support to family reunification.
- Health (lead agencies: UNICEF and WHO). To reduce the risk of disease outbreaks and level of
  morbidity by strengthening disease surveillance, providing emergency medical supplies and
  supporting the resumption of child immunisation services, especially measles.
- Coordination and support services (lead: Resident Coordinator/UN Country Team supported by the UN Disaster Management Team). To ensure adequate information gathering and coverage of needs by accessing remote areas and assessing needs.

## 4. ROLES AND RESPONSIBILITIES

In order to ensure information sharing and effectiveness during the initial response phase and to tap into existing networks in the affected areas, the UN agencies are part of the coordination forum chaired by the International Federation of the Red Cross in Myanmar. This forum brings together UN agencies, the Red Cross movement including International Committee of the Red Cross (ICRC), and the major international NGOs operational in the country. Within the UN family, the UN Disaster Preparedness and Management Group (UNDPMG), composed of all operational agencies and chaired by WFP, is coordinating the UN's response to the disaster.

Both UN and international NGOs are exchanging information and coordinating their response with the national and local authorities. The Ministry of Social Affairs is the responsible central authority for disaster response. Assistance efforts are also coordinated through the Ministry of Health at the national and local levels.

# **SEYCHELLES**

## 1. INTRODUCTION

On 26 December 2004, the tsunami triggered by earthquakes off the west coast of northern Sumatra hit the coasts of the inner granitic islands of Seychelles causing considerable damages. At 13.00 hours, tidal waves ranging from 2.5 to 4.0 metres hit the east coast of Praslin and Mahe Islands.

The extreme tidal movement caused severe flooding and considerable damage to infrastructures, such as bridges and roads, as well as the fishing port, jetties, hotels, public utilities, houses, water and sanitation on coastal areas on Mahe and Praslin Islands, and to a lesser extent on certain coastal parts on La Digue and Cerf Islands. The loss of human life was limited to one individual.

The Government and other national agencies have taken the necessary steps to assist those who have been affected. Some minor repair works are already being carried out on essential public infrastructures to render them temporarily operational so as to support livelihoods.

The costs of the damages have been estimated at US\$ 30 million by the National Disaster Committee in Seychelles. This appeal calls for US\$ 8.9 million in order to implement the most urgent rehabilitations, restore livelihoods and alleviate suffering of populations on the main islands of Seychelles.

# Flash Appeal for Indian Ocean Earthquake - Tsunami 2005

Summary of Requirements - by Sector and Country of Destination as of 5 January 2005 http://www.reliefweb.int/fts

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Sector Name	Requirements
Seychelles	
COORDINATION AND SUPPORT SERVICES	300,000
ECONOMIC RECOVERY AND INFRASTRUCTURE	7,500,000
FAMILY SHELTER AND NON-FOOD ITEMS	1,100,000
Total	8,900,000

### 2. CONTEXT AND HUMANITARIAN CONSEQUENCES

## 2.1 Context

The tidal wave hit the coasts of Seychelles on Sunday 26 December 2004 at 13.00 hours. Waves ranging from 2.5 to 4 metres hit the east coast of Praslin (Seychelles' second largest inhabited island) and the main island of Mahe, la Digue and Cerf Islands. The effects of the wave, which affected the coast from the north to the south of Mahe, was felt over a 30-minute period. Refracted waves hit the west coast of Mahe and Praslin at around 14.00 and 14.30 hours after the east coast was hit. Another tidal wave occurred at 17.00 hours, followed by two smaller ones at 22.00 hours and at 0500 hours of 27 December 2004.

Following news of the disaster in Seychelles, the office of the UN Resident Coordinator in Mauritius contacted the UN staff posted in Seychelles (Indian Ocean Tuna Commission and WHO Liaison Office), as well as the Ministry of Foreign Affairs, the Ministry of Environment and the Natural Disaster Committee to obtain an assessment of the damages. Based on information received from the Seychelles, the office of the UN Resident Coordinator prepared the appeal and informed the authorities that it would coordinate the provision of international assistance.

## 2.2 Humanitarian consequences

While Seychelles did not suffer heavy human casualties, the massive waves caused substantial damages to infrastructure and private houses. Much of the coastal road network including bridges, the fishing port and around 500 houses and 5 schools were affected on Mahe and Praslin Islands. Affected populations were relocated into temporary shelters. On La Digue Island, the only jetty suffered structural damages and several of the ferries and schooners, which provide the only means of transport to this island, were hit.

The artisanal fishing sector was extensively affected along the coastal areas on Mahe, Praslin and La Digue. A great number of fishing vessels were damaged or lost. The two fish processing plants and cold storage facilities located in the Fishing Port in Victoria were also affected. Four farms on Mahe and three on Praslin lost all their crops, while the Farmers Training Centre reported heavy flooding that destroyed crops, fertilizers and animal feed. The public utilities reported extensive damages to the water supply infrastructure, sewerage networks, and electricity distribution on Mahe. Three hotels on the second largest island (Praslin) had to close down resulting in an immediate loss of 700 beds and employment.

The Seychelles Government is doing everything within its means to assist the most affected people and to mitigate the damages caused by the tsunami. However, additional resources from the international community are needed.

## 3. RESPONSE PLANS

The immediate priority areas of response are:

- Shelter and non-food items;
- Quick assessment mission to evaluate damages and draw up a rehabilitation plan in terms of infrastructure as well as environmental issues along the coastal zones.

Following response in the areas above, assistance is needed in:

- Rehabilitation of infrastructure (roads and transportation, housing, water and sanitation and fisheries):
- Establishment of an Early Warning System for the Seychelles.

### 3.1 Shelter and non-food items

### Objective

 To provide relief materials to Seychelles and bring assistance to the affected population who have lost their dwellings.

### **Activities**

- Assessment of required assistance to 500 affected dwellings and families.
- Provision of construction materials and technical assistance.
- Restoration works on affected dwellings through community mobilisation and voluntary work.

### **Expected Impact**

Repairs to dwellings of 500 families.

## 3.2 Rehabilitation of Infrastructure

### **Objectives**

 To repair and rehabilitate essential infrastructure for the transport of good and people, water and sanitation.

### **Activities**

- Urgent rehabilitation of critical road networks;
- Technical assessment of rehabilitation requirements for roads and bridges;
- Emergency imports of construction materials, pipes and fittings;
- Civil works, rehabilitation design and supervision of roads and bridges rehabilitation;
- Rehabilitation of water and sanitation infrastructures, technical assistance and mobilisation of community self-help.

## **Expected Impact**

Restoration of critical infrastructure to support livelihoods.

## 3.3 Rehabilitation of artisanal fisheries

### **Objectives**

 Restoration of sustainable livelihoods in the fisheries sector through the rehabilitation of artisanal fisheries.

## **Activities**

- · Loss assessment and design of rehabilitation measures;
- Repair and replacement of fishing vessels and landing facilities.

### **Expected Impact**

 Domestic supply of fish and agricultural supply are restored. Basic fishery infrastructure and livelihoods are rehabilitated.

# 3.4 Establishment of Early Warning System

### **Objectives**

- Build the local capacities of the Natural Disaster Committee, NGOs, community-based organisations, and government agencies on integrating disaster risk reduction into development policies and planning;
- Develop a wider and increased understanding of disaster risk reduction practices and early warning;
- Provide easy and affordable access to technical information and networks for disaster reduction.

### **Activities**

- Capacity building in disaster reduction at individual, institutional and systemic level to plan and implement national disaster reduction and disaster recovery programmes;
- Integration of disaster risk management issues into sectoral plans and programmes;
- Participation in systematic observation networks on early warning;
- Integration of disaster risk management issues into sustainable development;
- Establishment of national generic standards and guidelines for disaster reduction;
- Prioritisation of disaster risk reduction activities;

- Identification of existing capacity gaps and creation of synergies with existing capacity assessment programmes;
- Definition of benchmarks and other indicators that can be used to monitor efforts and assess progress in disaster risk reduction;
- Sharing of knowledge through participation in regional and global networks.

## **Expected Impact**

The project will help to build capacity at all levels in the Seychelles for disaster risk reduction. The process will draw from existing practices, institutional and policy-making/planning processes. It will mobilise all the national stakeholders including the international community in the development of a comprehensive national disaster reduction framework.

## 4. ROLES AND RESPONSIBILITIES

The National Disaster Committee (NDC) recently established under the President's Office is playing the lead role in coordinating the response at the local level. Among the international actors, UNDP will provide main logistical and technical support to the NDC.

# 5. PROJECT TABLES

INFRASTRUCTURE			US\$
FAO	Beneficiaries	Partners: OCHA, BCPR,	2,500,000
	Approx 500	UNDP	
TOU SEV 05/ED/102	Project Title: Rehabilitation of Artisanal Fisheries		
TSU-SEY-05/ER/l02- SEYCHELLES  Aim: To restore sustainable livelihoods in fisheries sector through the reh of artisanal fisheries.			

SHELTER			US\$
UNDP/BCPR	Beneficiaries 2,500 people	Partners: N/A	1,100,000
TSU-SEY-05/S/NF01- SEYCHELLES	Project Title: Provision of affected population that have Aim: To repair the dwellings		les and assistance to the

ASSESSMENT MISSION			US\$
LINIDD/DODD	Beneficiaries	Partners: N/A	50,000
UNDP/BCPR	Republic of Seychelles		
TSU-SEY-05/CSS01-	Project Title: Damage Assessment Mission after tsunami in Seychelles		
SEYCHELLES	Aim: Evaluate the situation both in terms of infrastructure damages as well as		
3LTOTILLES	environmental damages along the coastal zones.		

INFRASTRUCTURE			U	JS\$		
LINED/DODD	Beneficiaries	Partners: OCHA			5,000,0	00
UNDP/BCPR	Republic of Seychelles					
TSU-SEY-05/ER/I01-	Project Title: Rehabilitation	of Infrastructure				
SEYCHELLES	Aim: Restoration of basic	infrastructure to	support	sustainable	livelihoods	in
	Seychelles.					

CAPACITY BUILDING		US\$	
LINIDD	Beneficiaries	Partners: OCHA	250,000
UNDP	Republic of Seychelles		
TSU-SEY-05/CSS02-	Project Title: Establishment of Early Warning system in Seychelles.		
SEYCHELLES	Aim: To build capacity at all levels in the Seychelles for disaster risk reduction,		
GET GITEELEG	preparedness and mitigation.		

## **SOMALIA**

## 1. INTRODUCTION

On 26 December 2004, the tsunami struck the Somali coastline. Northeastern Somalia was the worst affected, particularly a stretch of around 650 km between Hafun (Bari region) and Garacad (Mudug region). The damage reportedly extended to other parts of the Somali coast, including the Lower Juba area. The tsunami led to the loss of life, destruction of shelters, houses and water sources, and loss of productive assets. Many parts of Somalia have already been suffering from four years of consecutive drought and periodic floods, in addition to chronic insecurity. The tsunami therefore represents a further assault on an already vulnerable population.

The livelihoods of many people residing in small villages along the Somali coastline, particularly in the northeastern regions, were devastated. Reports suggest that 150 lives were lost and 18,000 households were directly affected and in need of urgent humanitarian assistance.<sup>3</sup> The full needs are yet to be assessed, however. In addition, a large number of fishing boats and equipment was also lost. The fact that this time of the year coincides with the peak of the fishing season increases the number of those affected.

The most urgent needs include drinking water, food and medication, as well as support for the construction and/or rehabilitation of houses and shelter. Within days, operational agencies such as UNICEF, WFP, WHO and *Médecins Sans Frontières* (MSF)-Holland, mobilised immediate assistance, including food, non-food items, medical assistance, water and shelter materials. Given that the majority of the affected communities rely on fishing as their primary source of income, support for the restoration of livelihoods through the provision of fishing boats and fishing equipment is essential. The remoteness of many coastal communities due to poor road infrastructure, the lack of reliable baseline information, the limited presence and capacities of implementing partners and government counterparts in the affected areas have, together, hindered the assessment process and increased the difficulties of providing relief to the victims.

This flash appeal is meant to address the immediate life-saving needs of the affected population while taking into account the urgency of providing and ensuring the rehabilitation of housing and community infrastructure and the restoration of livelihoods to a population highly dependent on fishing. The United Nations is spearheading and coordinating the relief effort through its Humanitarian Coordinator and the Office for the Coordination of Humanitarian Affairs, in collaboration with an Emergency Disaster Response Group established by the Somali Prime Minister. The total amount requested is US\$ 10,179,418 to provide assistance to an estimated 54,000 persons.

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<sup>3</sup> Household size is normally calculated using 6 persons per household. However, the lack of accurate baseline data on the permanent population, the December-January peak fishing season with its presence of migratory fishing population, render it prudent to use conservative estimates. A working figure of 3 persons per household (half of the average) is used for this appeal. The total affected population is estimated at 54,000 persons.

# Flash Appeal for Indian Ocean Earthquake - Tsunami 2005

Summary of Requirements - by Sector and Country of Destination as of 5 January 2005 http://www.reliefweb.int/fts

 $\label{lem:complete} \text{Compiled by OCHA on the basis of information provided by the respective appealing organisation.}$ 

Sector Name	Requirements
Somalia	
AGRICULTURE	1,925,000
COORDINATION AND SUPPORT SERVICES	5,401,369
FAMILY SHELTER AND NON-FOOD ITEMS	496,000
FOOD	1,869,000
HEALTH	275,220
MULTI-SECTOR	212,829
Total	10,179,418

### 2. CONTEXT AND HUMANITARIAN CONSEQUENCES

### 2.1 Context

On 26 December 2004, the tsunami struck the Somali coastline. Northeastern Somalia was the worst affected, particularly a stretch of around 650 km between Hafun (Bari region) and Garacad (Mudug region). The damage reportedly extended to other parts of the Somali coast, including the Lower Juba area. The tsunami led to the loss of life, destruction of shelters, houses and water sources, and loss of productive assets. Many parts of Somalia have already been suffering from four years of consecutive drought and periodic floods, in addition to chronic insecurity. The tsunami therefore represents a further assault on an already vulnerable population.

On 27 December 2004 the Puntland authorities declared an emergency and the Prime Minister of the Transitional Federal Government of Somalia appealed to the international community to extend assistance to the affected population. Under the leadership of the acting Humanitarian Coordinator, a tsunami task force was established in Nairobi to coordinate humanitarian assistance. The task force comprises UN agencies, NGOs, donors and international organisations. In parallel, the Somali Prime Minister established an Emergency Disaster Response Group to coordinate government efforts. UN agencies and NGOs on the ground initiated interagency assessment missions to the areas reportedly affected. The assessment missions were constrained however by the limitation of reliable baseline data, especially for coastal regions, and by the remoteness of the affected sites. The extent and magnitude of the emergency is still unclear. Some of the UN agencies have already mobilised incountry resources to provide some immediate response. For example, WFP immediately started to deliver food to the affected areas, while UNICEF has delivered relief kits, shelter materials and cooking utensils to victims. The agency is preparing itself for extensive work in both water and sanitation, while concurrently mobilising health supplies and education kits. WHO is planning health interventions including immunisation and emergency health care.

Due to the limited logistical capacity of the Somali authorities, on 30 December 2004 the UN facilitated an interagency aerial assessment to explore the magnitude of the damage in the three worst affected areas, Hafun, Beinder Beila and Garacad. While the extent of the emergency appeared more limited than initially feared, aerial assessments have strong limitations and should be corroborated by field assessments.

# 2.2 Humanitarian Consequences

The livelihoods of many people residing in small villages along the Somali coastline, particularly in the north-eastern regions, were devastated. Reports suggest that 150 people lost their lives and 18,000 households were directly affected. In addition, a large number of shelters were both damaged or destroyed, wells were washed away, and many fishing boats and equipment were lost. The fact that this time of the year coincides with the peak of the fishing season increased the number of those affected.

The most urgent needs include drinking water, food and medication as well as support for the construction and/or rehabilitation of houses and shelter. Given that the majority of the affected communities rely on fishing as their primary source of income, and given the remoteness of the areas and the absence of alternative coping mechanisms, support for the restoration of livelihoods through the provision of fishing boats and fishing equipment is essential.

The operational context in this area of Somalia is challenging, due to the lack of reliable baseline information, accessibility constraints, and the limited presence and capacities of implementing partners in affected areas.

### 3. RESPONSE PLANS

The immediate response has focused on the needs of persons living in and around the affected communities. To this end, emergency food, medicines and non-food items have been dispatched to the affected areas. As relief and assessment teams reach the affected villages, a clearer picture of the humanitarian needs is emerging. In many of the affected villages, the population is unable to meet its basic needs in terms of clean drinking water, shelter, and non-food items. The majority of the affected

populations were fishermen, whose main source of livelihoods has been destroyed or damaged. The remote terrain and impassable roads have hampered the delivery of relief items, especially to the more inaccessible fishing villages along the coast. Assessment teams are unable to reach many of the affected populations to ascertain needs and plan appropriate responses. As a more comprehensive picture of the needs emerges, these responses may in turn need to be adjusted to reflect the reality on the ground.

### 3.1 Food

The main objective is to provide emergency food assistance to the worst affected persons in the area along the coast from Hafun to Garacad, with a view to save lives and contribute to improving the nutritional status of vulnerable groups. WFP will provide assorted food items to a total of 30,000 beneficiaries for a period of six months. Furthermore, Cooperation and Relief Everywhere (CARE) will provide some food and cash relief to a total of 10,0000 households for a period of four months. World Concern International will undertake an emergency food distribution to 1000 households in the Lower Juba area.

### 3.2 Shelter

The immediate objective is to provide shelter for households whose houses were washed away or destroyed by the tsunami. UNICEF has already dispatched nearly 500 family relief kits to Hafun. UNHCR will provide emergency shelter and non-food items (including cooking utensils, jerry cans, blankets and clothing) to 5000 households. In addition, World Concern International will address the shelter needs of 1000 households in the Lower Juba region.

## 3.3 Water and Sanitation

The most urgent need for the affected population is drinking water. Water purification items should complement the immediate provision of drinking water. UNICEF currently has the capacity to deal with the identified needs, and is currently assessing water sources contaminated by salt water, rehabilitating shallow wells and bore holes wherever possible, trucking safe water to affected communities, chlorinating water sources, and creating sanitation facilities to prevent outbreaks of water-borne diseases.

## 3.4 Health

Emerging health concerns include an increase in acute respiratory infections (ARIs), colds, coughs and diarrhoea in several locations. Furthermore, direct injuries arising from the tsunami waves have been reported. In addition to emergency assistance from MSF-Holland and medical kits already dispatched by UNICEF and WHO, WHO will provide nine additional emergency kits and is mobilising three regional teams for a period of six months. These teams will be involved in enhancing assessments and building the capacity of national staff and the promotion of health awareness within the affected communities. World Concern International will provide medicines to affected families in the Lower Juba area.

## 3.5 Agriculture

The immediate response will focus on providing the most affected fishing communities along the coastal area with the necessary production means to enable them to restart their productive activities and to restore their livelihoods. FAO will target 2,000 fishermen for a period of six months through the provision of cash, fishing boats, equipment, and training on improved fishing techniques and boat building.

## 3.6 Coordination and Support Services

OCHA will coordinate and support humanitarian operations on the ground. In addition, it is requesting further contributions to the Humanitarian Response Fund, so as to provide some flexibility to meet new needs as they may arise. The enhancement of the security environment for humanitarian actors is also envisaged.

### 4. ROLES AND RESPONSIBILITIES

The division of tasks among the operational agencies involved in this appeal closely mirrors agencies' sectoral expertise, mandates, and capacities on the ground.

- **Food:** overall coordination will be provided by WFP, with implementation being ensured by CARE and other local partners.
- **Shelter:** UNHCR will have overall responsibility for this sector, given its presence on the ground. It is expected that it will work through local partners. UN-HABITAT will also assist in this sector.
- Water and Sanitation: This sector will be led by UNICEF, owing to its presence on the ground and expertise in this domain. It is expected that other international agencies and nongovernmental organisations will also participate.
- **Health:** WHO will coordinate this sector, with implementation being ensured by international and local organisations on the ground.
- Agriculture: FAO will lead this sector.
- Coordination and Support Services: This sector will be led by OCHA under the overall guidance
  of the UN Humanitarian Coordinator.

## 5. PROJECT TABLES

SHELTER			US\$
UNITED NATIONS	Beneficiaries:	Partners:	496,000
HIGH COMMISSIONER	Total: 5 000 Households	Local and international	
FOR REFUGEES	Children: 15 000	NGOs, counterparts and	
(UNHCR)	Women: 5 000	local communities	
,	Project Title: Provision of	emergency shelter and no	on-food items to affected
TSU-SOM-05/S/NF01-	households	-	
SOMALIA	Aim: To provide emergency	shelter and basic household	items for affected families.

COORDINATION AND SUPPORT SERVICES			US\$
	Beneficiaries:	Partners: UN agencies,	141,369
	Population affected by the	international NGOs and	
	tsunami	the Red Cross Movement	
UNITED NATIONS			
OFFICE FOR THE	<b>Project Title:</b> Coordination S	Support Services	
COORDINATION OF	Aim: To strengthen field co	ordination; enhance humani	tarian space and security;
HUMANITARIAN	and improve information mar	nagement.	
AFFAIRS (UNOCHA)	Beneficiaries:	Partners: UN agencies,	2,260,000
	Communities affected by	international NGOs and	
TSU-SOM-05/CSS01-	the tsunami	the Red Cross Movement	
SOMALIA			
TSU-SOM-05/CSS02-	Project Title: Humanitarian	Response Fund for Somalia	
SOMALIA	Aim: To provide a strategic	contingency fund for human	itarian operations that can
COM LED C	be disbursed rapidly and flexibly to implementing partners.		
TSU-SOM-05/CSS03-	Beneficiaries: Populations	Partners:	3,000,000
SOMALIA	Affected by the tsunami		
	Project Title: Emergency Humanitarian Intervention Fund		
	Aim: To provide humanitarian agencies with a flexible fund for the identification of		
	needs and the appropriate logistical support for delivery of humanitarian assistance.		

AGRICULTURE			US\$
FAO TSU-SOM-05/A01-	Beneficiaries: Total: 2 000 households of fishermen Children: 8 000 Women: 2 000	Partners: Local and international NGOs, counterparts and local communities	1,925,000
SOMALIA	Project Title: Support to fishing communities affected by the tsunami		
OOMALIA	<b>Aim:</b> To restore the livelihoods of the fishing communities affected by the tsunar waves, providing them with the means to purchase, build or repair lost or damage fishing boats and fishing equipment.		

FOOD			US\$
	Beneficiaries:	Partners: Ten Local	1,869,000
CARE	10,000 families, 42,000	Partner NGOs operational	
INTERNATIONAL	Children, 18,000 Women	in different Somalia	
SOMALIA		regions	
	Project Title: Improving Hou		
TSU-SOM-05/CSS01-	Aim: To meet the immediat	e food and other essential I	ivelihood needs of 10,000
SOMALIA	disaster-stricken households	for a 60-day period in the re	egions of Bari, Nugal, and
	Mudug of Somalia.		
	Beneficiaries:	Partners: Local	Cost reflected in
	Total: 30,000	government and	Regional Operations
	(Total food aid planned:	communities, UN	
	2,700 MT)	agencies, international	
WORLD FOOD		and local NGOs	
PROGRAMME (WFP)	<b>Project Title:</b> Emergency assistance for the tsunami-affected population in Somalia		
	along the Indian Ocean coast		
	Aim: To save lives and prevent deterioration in the nutritional status of vulnerable		
	children and mothers. To restore livelihoods and enhance resilience to furth shocks.		

MULTI-SECTOR		US\$	
WORLD CONCERN	Beneficiaries:	Partners: AFREC	212,829
INTERNATIONAL	6,000 people		
	Project Title: Kismayo Emergency Relief Project		
TSU-SOM-05/MS01-	Aim: To save lives and alleviate the suffering of at least 6,000 people affected by		
SOMALIA	the tsunami in the southern coast of Somalia, Kismayu district.		

HEALTH			US\$
	Beneficiaries:	Partners: UN Agencies,	275,220
WORLD HEALTH	Tsunami Affected	NGOs, Singapore Red	
ORGANIZATION	Population in Bari, Nugaal	Cross Society (SRCS),	
(WHO)	and Mudug Regions in	MOSA	
, ,	North East Somalia		
TSU-SOM-05/H01-	Project Title: Support outreach health response activities to tsunami affected areas		
SOMALIA	Aim: To reduce morbidity and mortality from the impact of tsunami-related disease		
	To prevent and provide an early response to epidemics in the affected areas		

## **SRI LANKA**

## 1. INTRODUCTION

On 26 December 2004, the tsunami triggered by earthquakes in the Indian Ocean reached Sri Lanka at 8:00 in the morning local time, causing extensive loss of life and destroying coastal areas. According to government sources, the tidal waves killed more than 30,000 people and displaced over 860,000. The population of the entire country is struggling to come to terms with the magnitude of the loss and the trauma that it has caused.

Many people were swept into the sea and drowned by the strong currents, while others were trapped in buildings, buses and trains. The majority of those who lost their lives were women and children who were unable to escape the force of the waters. In coastal communities houses were destroyed, fishing boats lost, bridges and roads washed out. The majority of the displaced are living in camps or in public buildings, having lost their homes and their possessions.

The Government of Sri Lanka has declared a state of emergency and requested international assistance to complement national efforts. In response to this request, the UN and its partners have begun to mobilise a massive relief effort to respond to the immediate survival needs of the population. This appeal requests funding support to provide food, potable water, health services, sanitation, shelter, and non-food items such as hygiene and cooking kits to the displaced as well as to those most critically affected by the tsunami.

The UN and its partners are requesting US\$ 166,936,146 to provide urgent assistance to the Sri Lankan people for a period of six months in order to save lives, alleviate suffering and begin the process of restoring livelihoods.

# Flash Appeal for Indian Ocean Earthquake - Tsunami 2005

Summary of Requirements - by Sector and Country of Destination as of 5 January 2005 http://www.reliefweb.int/fts

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Sector Name	Requirements
Sri Lanka	
COORDINATION AND SUPPORT SERVICES	21,159,491
ECONOMIC RECOVERY AND INFRASTRUCTURE	48,960,475
EDUCATION	5,525,340
FAMILY SHELTER AND NON-FOOD ITEMS	23,160,000
HEALTH	28,600,000
MINE ACTION	4,232,000
MULTI-SECTOR	4,942,000
PROTECTION/HUMAN RIGHTS/RULE OF LAW	5,634,000
WATER AND SANITATION	24,722,840
Total	166,936,146

# 2. CONTEXT AND HUMANITARIAN CONSEQUENCES

## 2.1 Context

The tsunami hit the coasts of Sri Lanka on 26 December 2004 at 8:00 local time. The wave surge swept the eastern coastline, destroying shorefronts up to a kilometre inland. Wave action curled around the southern and northern coasts, causing damage along these heavily populated areas. More than 12 of the 25 districts of Sri Lanka were severely affected.

The tidal wave affected the coastal districts of Jaffna, Mullativu, Trincomalee, Batticaloa, Ampara, Hambantota, Matara and Galle. Areas in the North and East of the country had already been affected by serious monsoon floods in previous months, leading to displacement and infrastructure damage. Five of the districts affected by the tsunami have large quantities of anti-personnel landmines left over from the years of civil war. The tsunami has changed the coastal landscape considerably, which may increase the risk of casualties from remaining landmines. The effects of the disaster will set back the country's efforts of rehabilitation and reconstruction, already challenged by years of civil war.

District authorities and local communities reacted immediately, but were quickly overwhelmed by the magnitude of the disaster. On 26 December the Sri Lankan Government officially requested international assistance. The international community was quick to respond by sending assessment teams, providing in-kind donations, and pledging financial assistance.

Under the leadership of the Resident/Humanitarian Coordinator and with the assistance of an UNDAC Team, a series of coordinated assessments of all affected areas was undertaken in partnership with key bilateral donors and NGO partners. The assessments provided a broad overview of the magnitude of the crisis and pinpointed the priority areas of interventions. Working in close collaboration with the Government at the national and the district level, it is now possible to quantify and target assistance. The early and proactive use of the UNDP-sponsored National Disaster Management website has facilitated the identification of needs and the offers of assistance.

### 2.2 Humanitarian consequences

The overwhelming loss of life has left the entire country in a state of shock and trauma. Those closest to the impact have of course suffered most, losing friends family and loved ones. Many households are left with nothing and those displaced have only their clothes on their back.

The most immediate concerns have been to identify and burying the dead, and evacuate the wounded and the displaced. As at 3 January 2005, over 860,000 persons are displaced. Many are living in camps and public buildings where water and sanitation conditions are poor and where potable water and health supplies are limited. In many areas wells have been infected by dead bodies, animals or sea-water. In some areas, although water supplies are still potable, distribution systems have been disrupted, so that many households do not have access to water.

More than 91,000 houses have been completely destroyed, with thousand others partially damaged. Many children are still missing and the number of unaccompanied children is rising.

The impact on the health sector has been significant. Several major hospitals have been damaged, and a large number of peripheral and smaller health units have been completely or partially destroyed. Sri Lanka's free health service has been stretched by the scale of the emergency, with medical and hospital supplies reported to be very low. Public health needs in most districts include provision of safe drinking water and adequate wash water, sanitation and garbage disposal, vector control, medical supplies, prevention of communicable diseases, and management of outbreaks.

Coastal roads, railways, and distribution lines have been damaged. Transport of relief supplies to affected areas remains a major challenge.

The majority of coastal inhabitants subsist on small-scale fishing activities. 80% of the boats in the districts of Colombo, Negombo, Jaffna, Kilinochchi, Mullaitivu, Trincomalee, Batticaloa, Ampara, Hambantota, Matara, Galle and Kaluthara have been destroyed or seriously damaged. These are mainly small, non-motorised traditional boats operated by the poorest sections of the fishing

<sup>4</sup> It should be noted that this document has been prepared in advance of the detailed and formal publication of the results from the district and sectoral needs assessments.

community. Ten out of the twelve main fishery harbours have been devastated, with loss of essential infrastructure.

Damages to agriculture land include destruction of water reservoirs, bunds and dykes, irrigation and drainage facilities and destruction of water streams/linkages to the sea, and protection infrastructure against sea/salt intrusion. There has been loss of farming capital, including buffaloes, chickens, hand tools and other farming implements.

## 3. RESPONSE PLANS

The immediate priority areas of response are:

- Food Security
- Water and Sanitation
- Health and Nutrition
- Shelter and Non-food items
- Protection and psycho-social support
- Coordination of Humanitarian Assistance

Following response in these areas, assistance is needed in:

- Restoring livelihoods
- · Rehabilitation of critical minor infrastructure
- Emergency education
- Environmental protection
- Mine Action
- Capacity Building (Strengthening Local Organisations and Disaster Risk Reduction)

### 3.1 **Food**

### **Objectives**

- Provide emergency food aid to the most affected population to save lives and protect nutritional status, with special attention to women and children;
- Support reconstruction efforts that promote recovery.

### **Activities**

- Immediate relief through food distribution to displaced persons and severely affected communities.
   This assistance will be scaled down after the first three months;
- Targeted food distributions, particularly to vulnerable women and children, through supplementary feeding activities;
- Food for recovery activities, particularly for fishing communities, to support reconstruction of infrastructure and rehabilitation of damaged agricultural land in coastal areas.

### **Expected Impact**

Household income levels are stabilised and food availability is re-established. The nutritional status of the affected population is stable, as measured by the prevalence of acute malnutrition in children under-5 years.

### 3.2 Water and Sanitation

## **Objectives**

- To provide safe drinking water, hygiene and sanitation to 1 million displaced and affected persons;
- To improve the strategic response of the water and sanitation sector in situations of emergency.

### **Activities**

- Support renewed Government focus on effectively improving water and sanitation services in the poorest areas and on introducing strategic technologies;
- Provide communities with access to safe drinking water through the deployment of water bowers, water storage tanks and water purification tablets;

- Strengthen community involvement in developing and maintaining local water and sanitation facilities:
- Construct new community sanitation facilities, rehabilitate existing facilities and promote safe hygiene practices, including through the distribution of educational materials advocating for handwashing and water purification;
- Ensure that the specific sanitation needs of girls and women are addressed;
- Rehabilitation of damaged water and sanitation systems in communities, primary schools, primary health care facilities, and IDP camps;
- Build the capacity of local authorities to rehabilitate and reconstruct community water and sanitation facilities and enhance emergency preparedness and response to natural disasters;
- Complete needs assessments and planning for rehabilitation as well as emergency preparedness;
- Facilitate coordination of the overall response on water and sanitation at a national, provincial and district level.

# **Expected Impact**

Access to safe drinking water for affected populations is restored. The system to respond to water and sanitation requirements in emergency situations is improved. Sanitation facilities are constructed and rehabilitated. Safe hygiene practices are promoted, particularly in IDP camps, schools and health centres. Outbreaks of water-borne diseases are prevented, particularly among women and children. Local authorities are able rapidly to address the priority water and sanitation needs.

### 3.3 Health and Nutrition

### **Objectives**

- To assess the health needs of affected people and the impact on health services and facilities in tsunami-affected districts;
- To co-ordinate the health sector;
- To provide direct support to re-establish health sector functions including disease surveillance, outbreak prevention, and control and provision of essential medical supplies and equipment to protect the health of the displaced living in camps and of communities in affected districts;
- To restore reproductive health services in 12 disaster-affected districts. To arrange for emergency reproductive health services to be implemented immediately;
- To establish growth surveillance system for children under five years in affected districts.

### **Activities**

- Conduct rapid health assessments in conjunction with the UN and the Ministry of Health; conduct assessments of peripheral health units and other technical assessments as needed;
- Fill gaps in medical supplies, technical expertise, equipment, technical guidelines, public health information material, multi-disease surveillance, and communication networks;
- Strengthen the capacity of the Ministry of Health for health sector coordination, assessments and response in crisis management;
- Provide orientation to health care providers on improved responsiveness to Sexual and Gender Based Violence (SGBV);
- Assist community-based centres to support girls and women survivors/victims of SGBV, including counselling, referral and rehabilitation;
- Re-establish reproductive health services including for safe deliveries, emergency obstetric care, and provision of psycho-social support;
- Rehabilitate affected hospitals and affected health centres to provide emergency health services for children and women, including provision of emergency drug supplies and oral dehydration salts:
- Reduce micro nutritional deficiencies for mothers and their children through the provision of micronutrients including iron, folate, vitamin C and mebendezole in all affected districts;
- Promote health and nutrition practices through an effective communication mechanism;
- Re-establish the cold chain system to enable vaccinations to be provided as required;
- Strengthen health logistics and management to ensure effective and efficient delivery of assistance;
- Strengthen preventative, disease and nutrition surveillance systems in affected areas;
- Establish growth monitoring system based in public health care centres.

## **Expected Impact**

Epidemics and outbreaks are prevented. The health system resumes operation in affected districts. The capacity of the Ministry of Health in health crisis management is strengthened. Women and children affected by the tsunami are provided with basic health care. Emergency obstetric care services for children and women are re-established. Micro nutritional deficiencies for women and children are prevented. The nutrition status of women and in particular young children is improved and malnutrition rates decreased. Coordination is improved within the health sector.

## 3.4 Shelter and Non-Food Items

## Objective

To increase the physical security of extremely vulnerable displaced individuals by providing them with shelter material and non-food items.

#### **Activities**

- Selection of vulnerable individuals needing assistance;
- Provision of tents, tarpaulin and other shelter materials to displaced families;
- Provision of cooking items, lanterns, buckets, clothing and other basic household items to displaced and other affected children;
- Community mobilisation for the clearance of rubble and the erection of shelters;
- Monitoring and evaluation.

### **Expected Impact**

Over 20,000 displaced vulnerable families receive basic shelter material to construct emergency dwelling or to repair their dwelling to a minimum standard. 200,000 individuals receive non-food assistance in a timely manner. Health and security conditions are improved by providing access to cooking implements. Affected persons have access to basic services to ensure minimum living standards and a life with dignity.

## 3.5 Coordination

#### **Objective**

To ensure the effective coordination of humanitarian response of UN agencies and their partners in pursuit of the priorities of the Government.

#### **Activities**

- Support and strengthen national coordination mechanisms and operational support at the central and district levels;
- Strengthen data collection and information management systems;
- Support coordinated needs assessments to identify relief gaps and rehabilitation requirements;
- Support district and regional end-use monitoring of relief items:
- Enhance operational and strategic coordination.

#### **Expected Impact**

Accurate needs assessment and effective targeting of assistance. Recovery and rehabilitation opportunities are strengthened through ongoing monitoring and reporting of needs and required responses.

## 3.6 Restoring Livelihoods<sup>5</sup>

## **Objectives**

 To rehabilitate the agriculture sector to enable resumption of production including fishing, livestock production and crops;

To provide temporary income for affected families.

<sup>5</sup> The following activities are intended to prepare the ground for the full recovery of affected communities. Activities undertaken during this period are likely to go beyond the period of the appeal and will dovetail with the reconstruction phase.

#### **Activities**

- Replacement or repair of destroyed, lost, or damaged fishing craft and gear;
- Rehabilitation of fishery harbours and anchorages;
- Rehabilitation of basic productive fisheries infrastructure (cold rooms, ice plants, etc.);
- Reclamation of affected agriculture land;
- Provision of basic inputs to resume agricultural farming;
- Provision of short-term employment opportunities through the construction or reconstruction of small-scale fisheries infrastructure;
- Financing of direct restoration of damaged infrastructure and facilities for small enterprises;
- Training for alternative livelihoods for people not able to resume their former livelihood activities and for those whose former facilities are being rehabilitated.

### **Expected Impact**

Sustainable livelihoods are restored for affected people. Domestic fish and agricultural supply is continued. Basic fishery infrastructure is restored. Temporary sources of income are provided to affected families. Local food markets are restored. Families are provided with micro-credit, financing, and training.

## 3.7 Restoration of Critical Minor Infrastructure<sup>6</sup>

### **Objectives**

- To increase liveable housing in tsunami-affected coastline areas;
- To restore critical minor infrastructure at the community level that is essential for initiating local recovery processes.

#### **Activities**

- Provide assistance for the rehabilitation of small access roads and community water supply systems;
- Rehabilitate 5,000 partially damaged houses and reconstruct 20,000 destroyed houses;
- Urgently rehabilitate critical urban services including the removal of waste, animal carcasses and debris, and the cleaning of drains.

### **Expected Impact**

Community water supply systems, small fisheries facilities, and minor irrigation infrastructure are restored in areas of medium damage. The targeted delivery of humanitarian aid is improved through the clearance of small access roads.

## 3.8 Education

## **Objective**

To support the restoration of basic education for approximately 200,000 affected school-aged children.

#### **Activities**

- Provision of 'school-in-a-box' to 200,000 children in approximately 2,500 schools to equip teachers and students with teaching aids, stationery, pencils and toys;
- Psychosocial support for school children and their teachers;
- Provision of school bags for 200,000 primary and secondary school students;
- Rehabilitation and repair of approximately 100 damaged schools:
- Complete needs assessments and planning for rehabilitation as well as for emergency preparedness;
- Ensuring that girls continue to attend and complete schooling especially in vulnerable family situations;
- Capacity building of education authorities to rapidly respond to the education requirements at the local, district and national level and to enhance emergency preparedness;
- Facilitation of improved coordination of the education response to affected communities and the restoration of education services.

<sup>6</sup> The following activities are intended to prepare the ground for the full recovery of affected communities. Activities undertaken during this period are likely to go beyond the period of the appeal and will dovetail with the reconstruction phase.

## **Expected Impact**

The response to education requirements in emergency situations is enhanced. 200,000 children are given the opportunity to attend classes and participate in organised recreational and play activities in schools or temporary classroom settings. Children do not miss schooling for long periods of time, thus reducing the risk of children dropping out of school. The psychosocial state of children improves by attending school, which returns a sense of normalcy to their lives. 100 damaged schools are rehabilitated and furniture is replaced or repaired in affected schools.

#### 3.9 Protection

### **Objectives**

- To provide protection to vulnerable individuals who have been displaced;
- To provide psychosocial support to affected women and children;
- To assist in the reunification of unaccompanied children who have been separated from their families due to the tsunami;
- To provide information and services to women and girls on sexual and gender-based violence.

## **Activities**

- Provide emergency psychosocial care focusing on strengthening the coping mechanisms of children and on developing recreational activities in displaced communities;
- Disseminate communication and education messages on child protection and on how to help children cope with trauma;
- Assess the situation of unaccompanied children and support a coordinated response to tracing family members;
- Support the fostering of unaccompanied children with extended families;
- Provide emergency psychosocial support to girls and women facing sexual and gender-based violence.

### **Expected Impact**

Emergency psychosocial care will help to alleviate any lasting negative impact of the trauma experienced by children and their families. Support to unaccompanied children will avoid further trauma and institutionalisation of children who have lost or have been separated from their family.

## 3.10 Mine Action

## **Objectives**

- To reduce the risk posed by landmines and unexploded ordnance (UXO) in the affected areas as a result of the disaster;
- To enable safe relief, rehabilitation and resettlement of affected areas;
- To raise awareness of how to cope with changes in the threat of land mines and UXOs as a result of the disaster;
- To mitigate against the future impact of flooding on mined areas.

#### **Activities**

- Conduct a detailed mine action assessment in the affected districts;
- Train, equip, and deploy additional technical survey teams to meet increased demand;
- Provide material to re-mark and fence areas from which markings have been washed away;
- Conduct mine risk education (MRE) to raise awareness of how the threat of landmines/UXO has, and has not, changed as a result of the disaster;
- Clear as many high- and medium- priority minefields as possible in coastal areas and those prone
  to flooding before the next seasonal rains.

### **Expected Impact**

Immediate recovery, relief and rehabilitation is possible. An enabling environment for resettlement of the displaced is made possible. Local mine action capacity for technical surveys is enhanced.

#### 3.11 Environment

## **Objectives**

To assess the damage to natural resource systems in some of the worst affected areas and to undertake immediate short and medium term actions for the recovery of degraded natural resource systems.

#### **Activities**

- Conduct a detailed damage assessment of the environment and of the impact of the tsunami on the socio-economy of the affected area through remotely sensed imagery;
- Prepare land-use plans to support and plan for medium- to long-term reconstruction and development activities;
- Provide initial financing to restore natural resources such as fish stocks, mangroves and coastal forests:
- Provide policy advice and technical support to environmental authorities for recovery and reconstruction planning, and for building capacity for costal zone management planning and for establishing early warning mechanisms.

## **Expected Impact**

- Risks identified and rehabilitation strategies in place;
- Access to high quality cartographic information; all cartographic activities are coordinated between agencies;
- Environmental issues integrated into the recovery and reconstruction process in order to avoid further risks to human health and the environment and improve land-use planning.

## 3.12 Transport and Logistics

## **Objectives**

- To co-ordinate the logistics capabilities of the UN system and co-operating humanitarian agencies during the relief operation;
- To facilitate the immediate humanitarian relief efforts.

## **Activities**

- Logistics information management;
- Infrastructure assessment;
- Creation and management of a strategic Air Coordination Cell;
- Movement coordination:
- Storage and distribution of relief items.

#### **Expected Impact**

- Cost effective, time efficient delivery of humanitarian aid;
- Coordinated use of available logistics assets.

## 3.13 Capacity Building

## **Objectives**

- To rapidly restore the capacities of local NGOs, community-based organisations and local governments whose facilities and operations have been adversely impacted by the tsunami;
- To rapidly enhance the capacity of local NGOs, Community Based Organisations (CBOs) and relevant government departments and agencies to plan and implement disaster recovery and undertake risk reduction programmes;
- To create a platform for sharing information on different aspects of disaster recovery and risk reduction efforts with the affected people;
- To provide easy access to easily understandable and appropriate technical information on disaster risk reduction practices to ensure that the disaster recovery processes do not rebuild risk.

## Activities

- Provide material support to local organisations to restore their basic infrastructure so that they become fully functional for implementing recovery programs and projects;
- Train staff of local administrations and local organisations to plan and implement local-level disaster recovery projects;

- Use broadcast media to develop programmes that disseminate timely and appropriate information on different aspects of disaster recovery to the affected people;
- Provide technical assistance to strengthen advocacy on relief recovery and risk reduction;
- Provide training on disaster management, mitigation and preparedness to the affected communities and local authorities.

## **Expected Impact**

- The capacities of a large number of NGOs and CBOs to plan and implement disaster recovery programmes are developed. Awareness is created among the affected population on different aspects of the government's recovery programs as well as on disaster risk reduction practices;
- Capacities are strengthened at the national, district, divisional and village level for effective implementation of relief and recovery as well as risk reduction programmes;
- Capacities and facilities within the government structures are strengthened for national policy coordination with respect to relief and recovery.

## 4. ROLES AND RESPONSIBILITIES

The Presidential Secretariat is playing the lead role in coordinating the response. A multi-agency and multi-sectoral Centre for National Operations (CNO) has been set up at the Presidential Secretariat. The Centre provides a central coordinating points for the work of all Government Ministries, the Police and the armed forces, and as well as a vital interface between central and local Government bodies; it therefore serves as a clearing house for information to and from the affected areas. The centre is supported by representatives of the UN as well as national and international NGOs. Regular updates on the situation and relief activities are being released by both the CNO and UNIC. All information coordinated by the Government is made available through the CNO website <a href="http://www.priu.gov.lk/CNO">http://www.priu.gov.lk/CNO</a>

As concerns international actors, under the overall supervision of the Resident Coordinator the UNDAC team, the UN Joint Logistic Centre and UNDP are providing the main logistical and technical support to the CNO. The UNDAC Team is coordinating and disseminating the outputs of various assessment missions that have been deployed across the country. The Office of the Resident Coordinator is supporting the Ministry of Foreign Affairs in coordinating bilateral donations of relief commodities that are arriving at Colombo airport. UNJLC has been providing regular updates on the arrival of relief goods at Colombo airport and on the status of their distribution, and is supporting the coordination of the logistics operation. This task includes an interface with military providers of logistic support.

While sectoral coordination of the relief effort is the direct responsibility of the Government, relevant UN agencies are providing guidance and leadership in key areas such as health emergency, water and sanitation, child protection, and emergency education.

## 5. PROJECT TABLES

	FOOD SE	CURITY		US\$
WFP	Households in Asia (S Beneficiaries: Total: 750,000 Women: 255,000 Children: 245,000	Partners: Ministry of Relief, Rehabilitation and Reconciliation, UNICEF, World Vision (WF) International, OXFAM	Districts: Ampara, Batticaloa, Puttalam, Galle, Hambantota, Matara, Mullaitivu, Jaffna, Kalutara, Trincomalee, Vavuniya, Kilinochchi	See Regional Programme section
	<b>Aim:</b> To save lives and protect the nutritional status of affected populations, with special attention to women and children; support reconstruction efforts that promote recovery.			

WATER AND SANITATION				US\$
	Project Title: Rebuilding		hy environments	1,983,000
	Beneficiaries:	Partners: N/A	Districts:	1,000,000
	Total: 10,000 families (50,000 persons) Women: 10,000		Ampara, Galle, Hambantota, Trincomalee.	
CHRISTIAN	Children: 30,000 (50% girls)		Matara	
CHILDREN'S FUND	Aim:			
TSU-SRL-05/W02-SRI LANKA	water system manage and health issues relations are to provide access to	ement, environmenta ated to malaria, deng safe water and sanit	ue, etc.	
		d chlorinate existing	and new water and	
	Project Title: Énsuring s	afe drinking water ar	nd sanitary care	250,000
FOUNDATION FOR COEXISTENCE	Beneficiaries: Approximately 15,000 persons	Partners: District networks and local government	<b>District:</b> Ampara	
TSU-SRL-05/W04-SRI		authorities		
LANKA	Aim: To provide safe dri disaster victims in 50 cam		itary care to tsunami	
	Project Title: Ensuring sa	afe drinking water an		250,000
NATIONAL ANTI WAR FRONT	Beneficiaries: Total: 500 family units (approx. 3000 persons)	Partners: District networks	District: Matara	
TSU-SRL-05/W03-SRI LANKA	<ul> <li>Aim:</li> <li>To clean 500 drinking</li> <li>To supply safe drink to 3000 affected pers</li> </ul>	ing water and ensur	e sanitary conditions	
	Project Title: Provision of by the tsunami	of water and sanitation	n to families affected	22,239,840
UNICEF TSU-SRL-05/W01-SRI LANKA	Beneficiaries: Total: 1 million displaced person incl. 300,000 displaced persons in 781 camps. Women: 500,000 Children: 360,000 (36%)	Agents (GAs).	Board, Government	
	<b>Aim:</b> To provide safe dri million displaced persons and 500,000 women.			

	HEALTH			US\$
	Project Title: Promoting	Primary, Preventive	and Curative Health	200,000
	Care	T = .	I <b>m</b>	
	Beneficiaries:	Partners:	Districts:	
FOUNDATION FOR	Approximately 3000 persons living in camps	District networks,	Batticaloa,	
FOUNDATION FOR COEXISTENCE	and affected villages	NGOs and state health authorities	Ampara and Trincomalee	
COEXISTENCE	and anected villages	nealth authorities	in the eastern	
TSU-SRL-05/H05-SRI			province	
LANKA	Objective: To promote	primary, preventive	and curative health	
	care by training communi			
	in transit camps and affe			
	order to prevent the spre			
	health conditions through			
	Project Title: Restoration		alth services	6,500,000
	Beneficiaries: Women & Girls:	Partners:	Ministry of Momon's	
LINEDA			Ministry of Women's	
UNFPA	500,000 <b>Aim:</b>	Affairs, and NGOs		
TSU-SRL-05/H03-SRI	To re-establish reproduc	tive health services	through immediate	
LANKA	implementation of the Mi			
	provide for safe deliveries			
	STI and HIV transmiss			
	consequences of sexual v		-	
			IDPs and capacity	1,000,000
	building of Ministry of Hea			
	Beneficiaries:	Partners:	of \\/amam'a	
	Total: 750,000 Women and Girls:	MoH, Ministry Empowerment ar		
	500,000	NGOs, WHO and U		
	000,000	Troop, write and t	SITIOLI	
UNFPA				
TO O.D. O.T O.D.	Aim:	l		
TSU-SRL-05/H04-SRI LANKA		tion to health servi	ce providers on the	
LANKA	psycho-social needs	of women and girls	and communities	
			social issues and on	
		rvices to relief worke		
			youth networks for	
		sycho-social needs o		
	•	•	violence with psycho	
		ces for girls and wom		9 400 000
	<b>Project Title:</b> Restoration and children affected by the state of the		induluon loi wonien	8,400,000
	Beneficiaries:	Partners:		
	Total: 1 million affected		Board, Government	
UNICEF	persons incl. 300,000	Agents, WHO, NG		
	displaced persons in			
TSU-SRL-05/H02-SRI	781 camps.			
LANKA	Women: 500,000			
	Children: 360,000 (36%)			
	Aim: To provide basic h			
	communities focusing or	n women and child	ren, and to prevent	
	disease outbreaks.			

	HEALTH			US\$
	Project Title: Health sec in Sri Lanka	ctor response for sur	vivors of the tsunami	12,500,000
wнo	Beneficiaries: Total: 750,000 Women: (estimated 35%) Children: (35%)	Partners: Ministry of Health (at central, provincial, and district local levels), UNICEF, UNFPA, MSF, IOM, Sarvodaya	1 - , ,	
TSU-SRL-05/H01-SRI LANKA	To coordinate the he     To set up an surveillance system     To assess the health impact of the tsunant     To ensure access to     To identify and fill cr     To contribute to effunctions as efficienter			

	SHELTER AND NON-FO	OD ITEMS		US\$
	<b>Project Title:</b> Providing essential household utensils	semi-permanent l s.	nousing and most	300,000
FOUNDATION FOR	Beneficiaries:	Partners:	District:	
COEXISTENCE	Total: Approximately 3000	District networks	Trincomalee	
	persons	and victims		
TSU-SRL-05/S/NF03-SRI		groups		
LANKA	Aim: To provide minimum			
	to supply essential house	ehold utensils to 5	500 victims in the	
	Trincomalee district.			
	Project Title: Emergend		nce to extremely	6,400,000
	vulnerable individuals affect			
INTERNATIONAL	Beneficiaries:	Partners:		
ORGANIZATION FOR	Total: 100,000		its, Sri Lanka Red	
MIGRATION (IOM)	Men: 20%	Cross, Sarvoda	•	
	Women: 20%		and Ecological	
TSU-SRL-05/S/NF01A- SRI LANKA	Children: 60%		ety (SEEDS), local	
SKI LANKA	Aire Te servide servers	CBOs and NGOs	h -	
	Aim: To provide emergen	cy and snort-term s	neiter assistance to	
	displaced families.	v Chaltar Assista	noo to outromoly	6 400 000
	<b>Project Title:</b> Emergend vulnerable individuals affect		nce to extremely	6,400,000
	Beneficiaries:	Partners:		
UNHCR	Total: 25,000 families	Ministry of Relief,	Rehabilitation and	
	(100,000 persons)		overnment Agents,	
TSU-SRL-05/S/NF01B-			(BAJ), Sarvodaya,	
SRI LANKA			gee Council, and	
		other NGOs		
	Aim: To increase the phy			
	displaced individuals by pro			
	Project Title: Non-Food R		xtremely vulnerable	
	individuals affected by the to			
	Beneficiaries:	Partners:	Fault and A. M. C.	
UNHCR	Total: 100,000		Forbundet Mot	
TOU OD! OF/C/NEO2 OD!			an (League against	2,500,000
TSU-SRL-05/S/NF02-SRI LANKA		intoxicants, FORU	T) and other NGOs	
	Aim: To address the imme	l vdiate humanitarian i	needs of individuals	
	displaced by the tsunami.		iccus of individuals	
	diopiaced by the touridini.			

	SHELTER AND NON-FOOD ITEMS			
	Project Title: Shelter and n	on-food relief items	7,560,000	
	Beneficiaries:	Partners:		
	Total: 1 million displaced	Local authorities, NGOs, UNDP		
UNICEF	person incl. 300,000			
	displaced persons in 781			
TSU-SRL-05/S/NF04-SRI	camps.			
LANKA	Women: 500,000			
	Children: 360,000 (36%)			
	Aim: To provide essentia			
	affected communities.			

CO	OORDINATION OF HUMAN	ITARIAN ACTION		US\$
	Project Title: Registration Batticaloa, Ampara, and Ha		lies in Trincomalee,	600,000
INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM) TSU-SRL-05/CSS01-SRI LANKA	Beneficiaries: Total: 360,000 Men: 90,000 Women: 90,000 Children: 180,000	Partners: Government Agents, Sri Lanka Red Cross, Sarvodaya, SEEDS, local CBOs and NGOs.	,	
	Aim: To register displaced individuals, their resources, and needs, so as to help government and humanitarian agencies to provide effective relief and resettlement assistance as well as provide vital data for post-emergency planning.			
	Project Title: Coordination	of Humanitarian As	ssistance	1,171,991
	Beneficiaries: UN agencies and their partners	Partners: N/A		
OCHA TSU-SRL-05/CSS02-SRI LANKA	<ul> <li>Aim: <ul> <li>To strengthen coordination capacity at the central and district levels.</li> <li>To support the tracking and monitoring of humanitarian needs and response.</li> <li>To strengthen information management and advocacy for humanitarian needs.</li> <li>To strengthen disaster response preparedness at central and district levels.</li> </ul> </li> </ul>			

	RESTORING LIVELIHOODS			
	Project Title: Rehabilitation	on of flood-affected of	communities	2,500,000
CHRISTIAN	Beneficiaries: Total: 18,000 Men: 6,000 Women: 2,000 Children: 10,000 youth	Partners: N/A	Districts: Ampara, Galle, Hambantota, Trincomalee, Matara	
CHILDREN'S FUND TSU-SRL-05/ER/I01-SRI LANKA	<ul><li>amenities.</li><li>To conduct large-sc works.</li></ul>	ale employment gel mic development tional skills.	d rebuild community neration through civic through employment expopulations.	

	RESTORING LIVE	LIHOODS		US\$
	Project Title: Replaceme		, engines and fishing	5,000,000
FAO TSU-SRL-05/ER/I04-SRI LANKA	gear  Beneficiaries: Total: 28 244 Women: 5 648 Children: 11 297  Aim: To resume marine Jaffna, Kilinochchi, Mull Hambantota, Mathara, C Puttalam.	aitivu, Trincomalee,	Kilinochchi, Mullaitivu, Trincomalee, Batticaloa, Ampara, Hambantota, Mathara, Galle, Kalutara, Colombo, Gampaha, Puttalam e districts of Mannar, Batticaloa, Ampara,	
FAO TSU-SRL-05/ER/I05-SRI LANKA	Project Title: Emergend anchorages and production Beneficiaries: Total: 62 500 Women: 12 500 Children: 25 000  Aim: To repair and reh	Partners: Ceylon Fishery Harbours Corporation and Ceylon Fisheries Corporation abilitate fishery harbours	Districts: Jaffna, Mullaitivu, Mannar, Trincomalee, Batticaloa, Ampara, Hambantota, Matara, Galle and Kalutara urs and anchorages	2,950,000
FAO TSU-SRL-05/ER/I06-SRI LANKA	provision of basic inputs districts.  Beneficiaries: Total: 28 000 Women: 6 600 Children: 13 200  Aim: To restore liveling resumption of production Kilinochchi, Mullaitivu, Hambantota, Mathara, Ga	Partners: North East Provincial Council, Department of Agriculture, Department of Animal Husbandry and Livestock  pods and economic acts on of crops in the Trincomalee, Batalle and Kalutara.	Districts: Jaffna, Kilinochchi, Mullaitivu, Trincomalee, Batticaloa, Ampara, Hambantota, Mathara, Galle and Kalutara activities through the districts of Jaffna, atticaloa, Ampara,	1,400,000
FAO TSU-SRL-05/ER/I07-SRI LANKA	Project Title: Establishmagriculture sector  Beneficiaries: Affected populations  Aim: To coordinate the sector (fisheries, livestock)	Partners: N/A e rehabilitation effort		335,475
INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM) TSU-SRL-05/ER/I08-SRI LANKA	Project Title: Livelihood Beneficiaries Total: 15,000 IDPs 55% men 10% women 35% youth Aim: To allow affected person to re-establish livelihood husbandry, fisheries and	assistance  Partners: Government Agents, local CBOs and NGOs  s to be self-supporting ds in the sectors of		2,250,000

	RESTORING LIVEL	IHOODS	US\$
UNITED MATIONS	Project Title: Recovery of Affected Areas	4,000,000	
UNITED NATIONS DEVELOPMENT PROGRAMME	Beneficiaries: 10,000 families	Partners: NGOs, FAO	
TSU-SRL-05/ER/I02-SRI LANKA	Aim: To provide an in through the creation of she reconstruction and constinuitant infrastructure required to markets, fishermen's rest research.		
	Project Title: Sustainable the tsunami Affected Areas	4,000,000	
UNITED NATIONS DEVELOPMENT PROGRAMME	Beneficiaries: 6,000 small enterprises; 1000 individuals	Partners: ILO, FAO, Ministry of Samurdhi & Poverty Alleviation, NGOs/CBOs	
TSU-SRL-05/ER/I03-SRI LANKA	Aim: To strengthen the during the recovery and re expand existing micro-fina for families in the affected equipment.		

RESTO	RATION OF CRITICAL MI	NOR INFRASTRUC	ΓURE	US\$
	Project Title: Immediate Programme			10,000,000
HABITAT  TSU-SRL-05/ER/109-SRI LANKA	affected coastline partially damaged destroyed houses.  To plan relocation	through the urgent houses and the re of a minimum of 5	Galle, Matara, Hambantota, Ampara, Batticaloa, Trincomalee, Mullaitivu, Jaffna  buses in the tsunami- rehabilitation of 2000 construction of 8,000  000 families living in	
HABITAT TSU-SRL-05/ER/I11-SRI LANKA	<ul> <li>To plan relocation of a minimum of 5,000 families living in hazardous areas, and to assist in settlement planning, rebuilding of community capital and reconstruction.</li> <li>Project Title: Urgent Rehabilitation of Critical Urban Services and Commercial Activities</li> <li>Beneficiaries:</li></ul>		1,000,000	

RESTO	RATION OF CRITICAL MI	NOR INFRASTRUCT	ΓURE	US\$
INTERNATIONAL LABOUR ORGANIZATION (ILO) TSU-SRL-05/ER/I12-SRI LANKA	Project Title: Immedi rehabilitation efforts in 4 de Beneficiaries: Total: 160,000 Women: at least half Children: at least 2,000 Youth: at least 5,000  Aim: To provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks to formation of the second provide immediate commercial networks and the second provide immediate commercial networks and the second provide immediate commerc	ate economic, soo of the worst affected Partners: Ministry of Labour, Jobsnet Chambers of Commerce, Universities, Sri Lanka Institute of Local Governance (SLILG), local Pradesha Sabas, local NGOs, National Child Protection Authority, and UN agencies  support for the facilitate economic live	restoration of local elihood activities	8,425,000
UNITED NATIONS DEVELOPMENT PROGRAMME	Project Title: Restoration Beneficiaries: 12,000 affected households	Partners: Local NGOs, dist affected districts,	ed Houses rict administration of Ministry of Housing,	4,100,000
TSU-SRL-05/ER/I10-SRI LANKA	Aim: To provide immed order to restore their hou		fected communities in	

	EDUCATIO	N		US\$
	Project Title: Back to Sc	hool		337,500
CHRISTIAN	Beneficiaries: Children: 45,000	Partners: N/A	Districts: Ampara, Galle Hambantota, Trincomalee, Matara	
CHILDREN'S FUND TSU-SRL-05/E01-SRI LANKA	through the provisio  To contributing to t caretakers' lives children.	on of education mater the normalisation of object of the by restoring education to home committee	affected communities ials. children, parents, and ational well-being of unities and livelihoods	

	EDUCATIO	ON	US\$
	<b>Project Title:</b> Restoration by the tsunami.	5,187,84	
UNICEF TSU-SRL-05/E02-SRI LANKA	Beneficiaries: Children: approx. 200,000 school-aged children and their families  Aim: To support the approximately 200,000 and the support the suppor	Partners: Education authorities at national, provincial and district level.  The restoration of basic education for a second control of the second control	

Beneficiaries: Children: 45,000   N/A   Hambantota, Trincomalee, Matara		PROTECTION			US\$
CHRISTIAN CHILDREN'S FUND TSU-SRL-05/P/HR/RL03- SRI LANKA  Aim:  • To set up child protection and monitoring and response bodies in camps through Child Well Being Committees. • To prevent and adequately respond to situations of child abuse, exploitation, and neglect in camps and host communities. • To contribute to efforts to trace and reunify separated/orphaned children with their families or find other durable solutions in coordination with ICRC.  Project Title: Medical and psychosocial community support to the displaced populations in Trincomalee, Batticaloa, and Ampara districts  Beneficiaries: Total: 20,000 IDPs 25% women 135% women 150% children			ction, Tracing & Reu	ınification	1,350,000
CHILDREN'S FUND  TSU-SRL-05/P/HR/RL03- SRI LANKA  Aim:  • To set up child protection and monitoring and response bodies in camps through Child Well Being Committees.  • To prevent and adequately respond to situations of child abuse, exploitation, and neglect in camps and host communities.  • To contribute to efforts to trace and reunify separated/orphaned children with their families or find other durable solutions in coordination with ICRC.  Project Title: Medical and psychosocial community support to the displaced populations in Trincomalee, Batticaloa, and Ampara districts  Beneficiaries: Total: 20,000 IDPs 25% men 25% men 25% women 50% children CROS and NGOs  Aim: To identify and address the increased mental health problems of the IDP population.  Project Title: Protection of children and women.  Seneficiaries: Total: 1 million displaced person incl. 300,000 displaced person incl. 300,000 displaced person incl. 300,000 children: 360,000 (36%)  Save the Children (SC), Red Cross and other NGOs.  UNICEF TSU-SRL-05/P/HR/RL01- SRI LANKA  Aim:  • To provide psychosocial support for affected women and children and to develop a mechanism to provide psychosocial support in emergency situations.  • To develop a system which ensures that unaccompanied	CUDICTIAN			Ampara, Galle Hambantota, Trincomalee,	
displaced populations in Trincomalee, Batticaloa, and Ampara districts    Partners: Government Agents, Sri Lanka Red Cross, local CBOs and NGOs	CHILDREN'S FUND TSU-SRL-05/P/HR/RL03-	<ul> <li>To set up child p bodies in camps three.</li> <li>To prevent and acceptable abuse, exploitation communities.</li> <li>To contribute to separated/orphaned durable solutions in</li> </ul>	ough Child Well Beindequately responding, and neglect in the conferment of the condition with their coordination with ICI	itoring and response ng Committees. to situations of child n camps and host trace and reunify families or find other RC.	
To identify and address the increased mental health problems of the IDP population.  Project Title: Protection of children and women.  Beneficiaries: Total: 1 million displaced person incl. 300,000 displaced persons in 781 camps. Women: 500,000 Children: 360,000 (36%)  TSU-SRL-05/P/HR/RL01-SRI LANKA  UNICEF  TSU-SRL-05/P/HR/RL01-SRI LANKA  To provide psychosocial support for affected women and children and to develop a mechanism to provide psychosocial support in emergency situations.  To develop a system which ensures that unaccompanied	ORGANIZATION FOR MIGRATION (IOM) TSU-SRL-05/P/HR/RL02-	Project Title: Medical ar displaced populations ir districts  Beneficiaries: Total: 20,000 IDPs 25% men 25% women 50% children	Partners: Government Agents, Sri Lanka Red Cross, local	munity support to the ticaloa, and Ampara  Districts: Trincomalee, Batticaloa, Ampara,	1,400,000
UNICEF  TSU-SRL-05/P/HR/RL01-SRI LANKA  UNICEF  TSU-SRL-05/P/HR/RL01-SRI LANKA  To provide psychosocial support for affected women and children and to develop a mechanism to provide psychosocial support in emergency situations.  To develop a system which ensures that unaccompanied		To identify and address the IDP population.		·	
children are reunited with their families after emergencies and to assist in the reunification of unaccompanied children who	TSU-SRL-05/P/HR/RL01-	Beneficiaries: Total: 1 million displaced person incl. 300,000 displaced persons in 781 camps. Women: 500,000 Children: 360,000 (36%)  Aim:  To provide psycho children and to deve support in emergence To develop a syst children are reunited	Partners: National Child Probation and C Save the Children other NGOs.  social support for elop a mechanism to cy situations. em which ensures d with their families a	Protection Authority, Child Care Services, (SC), Red Cross and affected women and provide psychosocial that unaccompanied after emergencies and	2,884,000

	MINE ACTION	ON	US\$
	Project Title: Mine Action	า	3,000,000
UNITED NATIONS	Beneficiaries:	Partners:	
DEVELOPMENT	Affected communities in	Mines Advisory Group (MAG), Swiss	
PROGRAMME	mined areas	Foundation for Mine Action (FSD),	
PROGRAWINE		Humanitarian Demining Unit (HDU),	
TSU-SRL-05/MA01-SRI		UNICEF and other NGOs	
LANKA		k posed by landmines and UXOs in the	
	disaster affected areas a	and thus enable safe relief, recovery and	
	resettlement of the affecte		
UNICEE	Project Title: Mine Risk Education		1,232,000
UNICEF	Beneficiaries: Partners:		
TSU-SRL-05/MA02-SRI	Affected communities in	Local authorities, NGOs, UNDP	
LANKA	mined areas		
Aim: To scale up mine risk education to affected communities.			

CAPACITY BUILDING				US\$
	Project Title: Return of			337
	Beneficiaries	Partners:	Districts:	500,000
INTERNATIONAL	Total: 100,000 IDPs	Government	Trincomalee,	
ORGANIZATION FOR	20% men	Agents, Sri Lanka	Kinniya, Batticaloa,	
MIGRATION (IOM)	20% women	Red Cross, local		
,	60% children	CBOs and NGOs	and Hambantota	
TSU-SRL-05/CSS07-SRI	Aim:		·	
LANKA	To rapidly repatriate qu	ualified Sri Lankan h	numan resources from	
	abroad so as to expedit	e reconstruction effor	rts of the affected local	
	communities.			
	Project Title: Disaster	Recovery and Risk	Reduction Information	1,000,000
UNITED NATIONS	Dissemination			
DEVELOPMENT				
PROGRAMME	Beneficiaries:	Partners:		
	Affected populations	NDMC. Local Author	orities, NGOs, CBOs	
TSU-SRL-05/CSS03-SRI	Aim: To improve acc			
LANKA	disaster recovery an			
	communities.		3	
	Project Title: Strengthe	ening Local Organisa	tions for implementing	1,000,000
	disaster recovery projec			, ,
	Beneficiaries:	Partners:		
UNITED NATIONS	60-80 CBOs and	NGOs and CBOs		
DEVELOPMENT PROGRAMME	government			
PROGRAMIME	departments			
TSU-SRL-05/CSS04-SRI				
LANKA	Aim:			
	To provide immediate			
	coastal areas that lost	their accommodation	on, administration and	
	equipment.			
	Project Title: Strength			5,000,000
	Village level capacities f			
	Beneficiaries:	Partners:		
	Village, District,		al governments of the	
UNITED NATIONS	Divisional level		ole R Ministry, Ministry	
DEVELOPMENT	administration of the		inistration and the	
PROGRAMME	affected areas and the	Presidential Secreta	ariat.	
	relevant department of			
TSU-SRL-05/CSS05-SRI	the national			
LANKA	government			
	Aim:	nnort to the eduction	trative and transition-	
	To provide capacity support to the administrative and transitional			
	mechanisms at the local, provincial and national levels, enabling			
	them to play an effective role in policy development and implementation with respect to all aspects of relief and recovery.			
	implementation with res	pect to all aspects of	rener and recovery.	

	CAPACITY BU	CAPACITY BUILDING			
	<b>Project Title:</b> Strengthening disaster management capacity in key social service sectors		336,000		
UNICEF  TSU-SRL-05/CSS06-SRI LANKA	<ul> <li>and sanitation se protection sector, e</li> <li>To build capacities disaster preparedre coordination of ong</li> </ul>	Partners: Government Agents, District Authorities, Line Ministries, Centre for National Operations  ation of humanitarian response in the water ctor, the education sector and the child ensuring needs of children are respected to of national and district levels authorities in ness and emergency response, including going humanitarian assistance ing and evaluation of ongoing humanitarian			

	ENVIRONME	ENT	US\$
	Beneficiaries: Affected population	Partners: UNEP, Ministry of Environment & Natural	3,000,000
UNITED NATIONS DEVELOPMENT PROGRAMME		Resources, Ministry of Fisheries & Aquatic Resources, Ministry of Agriculture, Livestock, Land & Irrigation, NGOs, CBOs	
	Project Title: Sustainable recovery of natural resources in the tsunami Affected Areas		
TSU-SRL-05/ER/I13-SRI LANKA	Aim: To undertake immediate short and medium term actions for the recovery of degraded natural resource systems for restoring livelihoods and conserving vital natural resources. To assess damage to natural resource systems in some of the worst affected areas.		

	TRANSPORT AND LOGISTICS			
		ation and logistical support for Emergency	<b>US\$</b> 5,100,000	
INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM) TSU-SRL-05/CSS10-SRI LANKA	Beneficiaries: Total: 100,000 IDPs 25% men 25% women 50% children	Partners: Ministry of Social Services, Ministry of Transport, Government Agents, Sardovaya, Registered Transporters, other NGOs		
LANNA	<b>Aim:</b> In collaboration with the JLC to coordinate the transportation and delivery of shelter and non-food relief materials to beneficiaries of IOM support.			
	<b>Project Title:</b> Emergency Relief Assistance to extremely vulnerable individuals affected by the tsunamis		6,451,500	
UNHCR TSU-SRL-05/CSS08-SRI LANKA	Beneficiaries: Approx. 809,000 persons in 835 welfare centre in all tsunami affected areas in the country  Partners: Ministry of Relief, Rehabilitation a Reconciliation, Government Agen BAJ, Sarvodaya, Norwegian Refugi			
LANIVA	Aim:     To support the immediate humanitarian relief efforts.     To increase the logistical capacities of UNHCR, UN agencies and other humanitarian relief agencies to transport, store and disseminate relief materials.			

	TRANSPORT AND	LOGISTICS		US\$
	Project Title: Establish including an Air Coor Movement Coordination t Asia	rdination Centre pro to Humanitarian Agend	oviding Logistics & cies working in South	See Regional Operations section
UNITED NATIONS JOINT LOGISTICS CENTRE (UNJLC)	Aim: To complement of	Partners: The humanitarian community, national Government, NGOs and donors	Districts: Ampara, Batticaloa, Puttalam, Galle, Hambantota, Matara, Mullaitivu, Jaffna, Kalutara, Trincomalee, Vavuniya, Kilinochchi	
	Aim: To complement and co-ordinate the logistics capabilities of co-operating humanitarian agencies during the relief operation in response to the 26 December 2004 tsunami.			

	MULTI-S	ECTOR		US\$
	Project Title: Holist response	tic and integrated	child-focused emergency	900,000
CHRISTIAN CHILDREN'S FUND	Beneficiaries: Total: 19,500 Women: 4,500 Children: 15,000 (50% girls)	Partners: N/A	Districts: Ampara, Galle, Hambantota, Trincomalee, Matara	
TSU-SRL-05/MS03-SRI LANKA	community child Child Centre Sp • To monitor the mothers, and necessary by fe	Iren of various ages aces (Child Friendly e nutrition and hea expectant mothers, eding children and m	alth situation of children, , and to respond when nedical follow up.	
OXFAM GB TSU-SRL-05/MS02-SRI LANKA	livelihoods of affected districts  To provide the particular supply, as well as	Partners: N/A  ne immediate risks affected populations. copulation with access with means to safe	Districts: Mullaitivu, Kilinochchi, Trincomalee, Batticaloa, Ampara, Matara, Hambantota  s to public health and s in seven of the nine ess to adequate, safe water fely dispose of excreta. e requirements, and to re-	1,900,000
	establish livelih possible.  To provide the	nood assets and s	strategies as quickly as cess to adequate roofing	

	MULTI-S	ECTOR		US\$
	Project Title: Phase	I		2,142,000
	Beneficiaries: Total: 200,000	Partners: Assistant Government Agents (AGAs)	Districts: Ampara, Batticaloa, Colombo, Mullaitivu, Galle, Gampaha, Matara, Kilinochchi, Hambantota, Jaffna, Trincomalee, Puttalam	
WORLD VISION TSU-SRL-05/MS01-SRI	Aim: To provide affected for non-food items.  Project Title: Phase		ncy relief, cooked food and	
LANKA	Beneficiaries: Total: 50,000	Partners: Assistant Government Agents (AGAs)	Districts: Ampara, Batticaloa, Mullaitivu, Galle, Matara, Jaffna, Trincomalee	
	· •		assistance in the form of ions, and basic household	

## **ANNEX I.**

# **SUMMARY OF REQUIREMENTS - BY APPEALING ORGANISATION**

# Flash Appeal for Indian Ocean Earthquake - Tsunami 2005

Summary of Requirements - By Appealing Organisation as of 5 January 2005 http://www.reliefweb.int/fts

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Page 1 of 2

Appealing Organisation	Requirements
CARE	6,869,000
CCF	8,570,500
CORDAID	2,500,000
CRS	500,000
cws	750,000
FAO	26,510,475
FAO/UNDP	1,200,000
FCE	750,000
нкі	3,100,000
ICMC	1,200,000
ILO	15,425,000
IMC	500,000
ЮМ	73,800,000
IOM / UNICEF / UNFPA	1,100,000
IR	2,450,000
IRC/CARDI	7,500,000
IRD	4,800,000
ISDR	8,000,000
MCI	15,000,000
NAWF	250,000
NRC/CARDI	7,500,000
ОСНА	16,765,563
OXFAM UK	1,900,000
PCI	2,000,000
sc	3,500,000
UNDP	157,100,000
UNDP / FAO / UNEP	900,000

# Flash Appeal for Indian Ocean Earthquake - Tsunami 2005

Summary of Requirements - By Appealing Organisation as of 5 January 2005 http://www.reliefweb.int/fts

Compiled by OCHA on the basis of information provided by the respective appealing organisation. Page 2 of 2

Appealing Organisation	Requirements
UNDP/UNSECOORD	3,000,000
UNEP	1,950,000
UNFPA	28,100,000
UN-HABITAT	11,000,000
UNHCR	75,847,500
UNICEF	144,534,880
UNIFEM	3,587,500
UNJLC	4,000,000
UNSECOORD	200,000
UNV	12,500,000
WFP	252,400,000
WHO	67,060,220
World Concern	212,829
wv	2,142,000
Grand Total	976,975,467

## ANNEX II.

## **ACRONYMS AND ABBREVIATIONS**

ACF Action Contre la Faim
AFREC African Rescue Committee
AGA Assistant Government Agents
ARI Acute Respiratory Infection

BAJ Bridge Asia Japan

BAPPENAS National Development Planning Agency
BCPR Bureau of Crisis Prevention and Recovery
BKKBN National Family Planning Coordinating Board

CARE Cooperation and Relief Everywhere
CBO Community Based Organisation
CCF Christian Children's Fund
CNO Centre for National Operation

CONCERN Concern

CORDAID Catholic Organisation for Relief and Development

CRP Community Recovery Programme

CRS Catholic Relief Services
CSB Corn Soya Blend

CWBC Child Well-Being Committees

CWS Church World Service

DPH Department of Public Health

EHI Emergency Humanitarian Initiative

EMOP Emergency Operation

EPI Expanded Programme of Immunisation

FAO Food and Agriculture Organization

FASHAN Foundation for Advancement of Self Help in Attaining Needs

FCE Foundation for Co-existence

FORUT Forbundet Mot Rusgift in norwegian (League Against Intoxicants)

FSAU Food Security Analysis Unit FSD Swiss Foundation for Mine Action

GA Government Agents
GDP Gross Domestic Product

HDU Humanitarian Demining Unit

HEART Health Emergency Assistance and Relief Teams for Tsunami Affected Population

HF High Frequency

HIV/AIDS Human Immuno-deficiency Virus / Acquired Immuno-deficiency Syndrome

HKI Helen Keller International HRF Human Response Fund

IASC Inter-Agency Standing Committee

ICMC International Catholic Migration Commission ICRC International Committee of the Red Cross

IDP Internally Displaced Persons

IFRC International Federation of Red Cross and Red Crescent Societies

ILO International Labour Organization IMC International Medical Corps

IMCIIntegrated Management of Childhood IllnessINTERACTIndonesia Tsunami Earthquake Response ACT

IOM International Organization for Migration

IR Islamic Relief

IRC/CARDI International Rescue Committee / the Consortium for Assisting the Refugees and

Displaced in Indonesia

IRD International Relief and Development

JRS Jesuit Refugee Service

KKTGA Aceh Gender Transformation Working Group

LTTE Liberation Tigers of Tamil Eelam

MAG Mines Advisory Group
MCI Mercy Corps International
MFA Ministry of Foreign Affairs

MISP Minimum Initial Service Package

MoE Ministry of Education
MoH Ministry of Health
MOSA Ministry of Social Affairs

MOSS Minimum Operating Security Standards

MRE Mine Risk Education
MSF Médecins Sans Frontières

MWSA Maldives Water and Sanitation Authority

NAWF National Anti-War Front NDC National Disaster Committee

NDMC National Disaster Management Centre

NFI Non-Food Items

NGO Non-Governmental Organisation
NPA Norwegian People's Aid
NRC Norwegian Refugee Council

OCHA Office for the Coordination of Humanitarian Affairs

OP Operations Rooms
ORS Oral Rehydration Salt

PCI Project Concern International
PMI Indonesian Red Cross
PPEW Promotion of Early Warning
PTA Parents Teachers Association
PTSD Post-Traumatic Stress Disorder

REAP Rapid Emergency Assessment and Prioritisation

RedR Registered Engineers for Disaster Relief

RH Reproductive Health

RPUK Women's Volunteer Team For Humanity

SC Save the Children SCF Save the Children Fund

SEARO WHO South East Asia Regional Office

SEEDS Sustainable Environment and Ecological Development Society

SGBV Sexual and Gender-Based Violence

SHE Society for Health Education

SLILG Sri Lanka Institute of Local Governance

SRCS Singapore Red Cross Society
STD Sexually Transmitted Disease
STI Sexually Transmitted Infection
SUM Supplementation with Micronutrient

TRO Tamil Rehabilitation Organisation

UNCAS United Nations Common Air Services
UNCT United Nations Country Team

UNDAC United Nations Disaster and Assessment Coordination

UNDP United Nations Development Programme

UNDPMG United Nations Disaster Preparedness and Management Group

UNEP United Nations Environmental Programme

UNESCO United Nations Educational, Scientific, and Cultural Organization

UNFPA United Nations Population Fund UN-HABITAT UN Centre for Human Settlements

UNHCR United Nations High Commissioner for Refugees

UNICEF United Nations Children's Fund

UNIFEM United Nations Development Fund for Women

UNJLC United Nations Joint Logistic Centre

UNOSAT UN Satellite

UN RC United Nations Resident Coordinator UNSECOORD United Nations Security Coordinator

UXO Unexploded Ordnance

WFP World Food Programme WHO World Health Organization

WV World Vision

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