

Date: 15 February 2005

**Tsunami Response Report No. 22
Indonesia, Sri Lanka, India, Thailand**

This report covers the operational period spanning from 8 February to 15 February, and is based on information provided by ADRA country offices in Indonesia, Sri Lanka, India and Thailand. Additional information and statistics is received from media reports, the UN, WHO, IFRC and other NGO reports.

SITUATION IN BRIEF:

1. The global death toll from the Asian tsunami has risen to 226,000, after Indonesia's Health Ministry confirmed the deaths of thousands of people previously reported missing.
2. The Red Cross maintains its estimates of 525,000 injured, 1.6 M displaced, and more than 1 M homeless. These figures are expected to increase.
3. The current confirmed figures are as follows:

	AREAS / PEOPLE AFFECTED	DISPLACED PEOPLES	RELIEF	INJURED	MISSING	DEATHS
INDIA	2200 km of coastal land; 300m to 3 km inland and 3 million people	647,556	595 relief camps with 376,171 people. 638,297 people evacuated	6,898	5,551	10,872
INDONESIA*	Aceh: Districts (14 out of 21); 1 million people	417,124 living in spontaneous settlements	103 camps officially listed - numbers and camps remain fluid	1,736 hospitalized	127,749	101,199 buried
MALAYSIA	NW states of Penang and Kedah	8,000	30,000 in 9 camps	73 in-patient/ 694 outpatient	6	68
MALDIVES	20 atolls, 100,000 people affected	10,578		1,313	26	83
MYANMAR	23 villages, 10-15 000 people affected long-term. 5-7000 directly affected	2,592 homeless/ households (537)		43	3	61
SRI LANKA	12 coastal districts and 103 789 affected families	500,668	328 relief camps	15,196	5,644	30,959
THAILAND*	6 provinces on west Thai coast with 308 villages and 12 068 households		47,708 rescue workers mobilized	8,457	3,144	5,332
SOMALIA	Puntland region worst-hit, 650 km of coastline	Approx. 4,000	Many sheltering under plastic sheeting or in branch huts	NA	NA	About 150

4. The World Bank has announced plans to provide an initial \$672 million to help Indonesia, Sri Lanka, and Maldives transition from disaster relief to reconstruction.
5. The World Bank will determine potential support for India after a damage and needs assessment, scheduled for completion next week.

6. According to the World Bank, the most urgent priority in the transition from relief to reconstruction is to provide funds to survivors through activities such as cash-for-work programs.
7. Other immediate goals are repairing or rebuilding damaged schools and health facilities and providing textbooks to children and medicines to clinics.
8. In Banda Aceh, WHO has established a Planning and Management Support Unit to assist the provincial health authorities in rehabilitation work.
9. In India, eight district-level disease surveillance cells in Andhra Pradesh, Kerala and Pondicherry will be strengthened, with medical officers and paramedical staff being trained in 12 districts.
10. A WHO team visited Chennai to assess the situation and identify and consult with partners to implement HIV prevention activities among the tsunami-affected populations in Tamil Nadu.
11. Livelihood restoration is a priority. Re-settlement and land distribution are important issues in Sri Lanka, Indonesia and the Maldives. The affected governments, with assistance from UN and other agencies should focus on housing and coastal/urban planning.

INDONESIA

Situation Report

12. According to the U.N. World Health Organization (WHO), the Indonesian Midwives Association reports that 30 percent of its 5,500 staff in Aceh is missing or dead. Many surviving midwives are affected by stress and trauma and are reportedly unable to work.
13. Field investigations of a previously confirmed case of dengue hemorrhagic fever in Aceh Utara identified four other family members with laboratory confirmed dengue fever.
14. A previously reported suspect case of hepatitis E in Lan Lhum has been confirmed by laboratory testing. A fatal case of acute jaundice was identified in Sua Beukah, Sompuyan.
15. Two to three suspected typhoid cases have also been identified in this area. These isolated cases will be further investigated for disease confirmation and extent of spread.
16. While there have been no cases of cholera in Aceh, plans are being made for a cholera vaccination campaign as a preventative measure.
17. The World Food Programme (WFP) is shifting from a 15-day food distribution plan to a once-a-month food distribution plan.

ADRA'S RESPONSE IN INDONESIA:

Meulaboh

18. *No updates.*

Aceh

19. *No updates.*

SRI LANKA

Situation Reports

20. On February 11, Sri Lanka's parliament extended a state of emergency in tsunami-hit areas for one month to give broad powers to security forces to carry out relief operations.
21. On February 10, the UNJLC reported that international NGOs must again show passes at GOSL/Liberation Tigers of Tamil Eelam (LTTE) cross-territory check points.

ADRA'S RESPONSE IN SRI LANKA:

22. *No updates.*

INDIA

Situation Report

23. After one month the government is now sending survivors from the Nicobars back to their islands by ship.
24. As of February 6, there are 4,678 people staying in the relief camps in Campbell Bay.
25. The government is now allowing specific NGO's to enter the southern islands of Nicobars. ADRA India is one of those selected NGO's.
26. There has been a 100% restoration of water supplies in Great Nicobar.
27. The Andaman & Nicobar administration has installed one reverse osmosis plant in order to improve drinking water supplies.
28. Disease surveillance continues to be strengthened in Andhra Pradesh, Kerala, and Pondicherry. Medical officers and paramedical staff are being trained in 12 districts. Following this training, the medical officers will train other health staff.
29. Insecticide-treated bednets are being distributed in relief settlements.
30. In Tamil Nadu, 200 trainers will be trained in psychosocial support beginning 10 Feb 2005.
31. Fifty doctors are currently deployed in the Nicobar Islands. Surgical and emergency health kits have been provided to Kerala, Andhra Pradesh and Tamil Nadu. Requests for additional medical supplies have been received from the Government of Tamil Nadu.

ADRA'S RESPONSE IN INDIA:

Andaman & Nicobar Islands

32. ADRA's assessment team is also currently based in Campbell Bay and is conducting an on-site assessment of the devastation caused by the tsunami.
33. ADRA India is considering constructing pre-fabricated buildings in conjunction with a proposed rehabilitation initiative that aims to provide education, health and water services for the Andaman and Nicobar Islands.

THAILAND

Situation Report

34. According to WHO, the Government of Thailand Health Department officials have identified 10,000 tsunami victims with symptoms of mental-health disorders in the six southern provinces of Phuket, Phang Nga, Satun, Ranong, Trang, and Krabi.
35. WHO reports that victims report symptoms of stress, difficulty eating and falling asleep, and depression.

ADRA'S RESPONSE IN THAILAND:

36. *No updates.*

COORDINATION:

37. All contacts should be addressed to the relevant person as detailed below. Please copy all contacts below for correspondence regarding funding availability.
38. All donors or agencies wishing to assist in the region should notify the coordinating office in order that all aid flows and submissions can be tracked. For banking details please contact the relevant officer indicated below.
39. The coordinating office is in regular contact with all the implementation offices and will revert with further information as it becomes available.
40. Information on the response from the ADRA partners will also be available on the ADRA International website at <http://www.adra.org>.

Telephone: +66 2 381 7130	Fax: +66 2 381 7128	E-mail: communications@adraasia.org
In case of emergency only:	Ph: +66 1 989 9045	
Director:	Ronald Kuhn	(ronald@adraasia.org)
Programs:	Frank Teeuwen	(frankteeuwen1@compuserve.com)
Planning:	Satish Pandey	(satish@adraasia.org)
Finance:	Robyn Mordeno	(robyn@adraasia.org)
Communications:	Lisa Woods	(communications@adraasia.org)
Human Resources:	Peter Howell	(peter.howell@adra.org)