

OPERATIONS UPDATE



International Federation of Red Cross and Red Crescent Societies
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

ASIA: EARTHQUAKE & TSUNAMIS FOCUS ON FIRST QUARTER

15 April 2005

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 181 countries.

In Brief

Revised Preliminary Appeal No. 28/2004; Operations Update no. 52; Period covered: 26 December 2004 – 15 April 2005; Appeal coverage: 154.7% ([Click here to view the provisional contributions list attached; also available on the Federation's website](#)).

- This update, in addition to containing the most recent operational developments, provides a detailed account of the first three months of the International Federation's emergency response in tsunami-affected countries in *Asia* and *East Africa*. The Indonesia section includes an update on activities related to the 28 March earthquake off the northern Sumatra coast.
- Budgets and plans of action are being finalized for the International Red Cross and Red Crescent Movement's emergency and recovery activities to the end of 2005 with indicative plans for 2006-2010. This document will be available next week.
- Casualty figures in the table on page 2 have been updated and contact details on page 59 now reflect personnel changes at the Secretariat in Geneva. Links below lead directly to individual country reports:
 - [Indonesia](#) (pages 3 to 27)
 - [India](#) (pages 43 to 46)
 - [Malaysia](#) (pages 52 to 54)
 - [Thailand](#) (pages 55 to 58)
 - [Seychelles](#) (pages 60 to 62)
 - [East Africa region](#) (pages 62 to 65)
 - [Sri Lanka](#) (pages 27 to 43)
 - [Maldives](#) (pages 46 to 52)
 - [Myanmar](#) (pages 54 to 55)
 - [Somalia](#) (pages 58 to 60)
 - [Contributions list](#) (pages 67 to 79)

In the first three months of the Federation's operation in tsunami-affected countries:

- 18 emergency response units (covering water and sanitation, health care, aid distribution, telecommunications, and logistics/transportation sectors) were deployed to Sri Lanka and Indonesia in January; those that remain are integrating activities into national society/Federation programmes.
- All Movement components agreed to a regional strategy and operational framework at the Tsunami Response Forum in Hong Kong (3-5 March) which defines coordination mechanisms to meet the short- and long-term recovery needs and rebuild and reinforce the capacities of the host national societies.
- Service centres were opened in Jakarta and Banda Aceh (Indonesia) and Colombo, Sri Lanka to provide administrative and logistics support for PNS and Federation personnel.
- Delegations and offices were established or reinforced in Indonesia, Sri Lanka, Maldives and Myanmar and technically supported by regional delegations in South and Southeast Asia and East Africa.
- Over 500,000 people received food parcels or relief items.
- Each day 140,000 people living in camps and in tsunami-affected communities receive clean water.
- 2,800 wells have been rehabilitated and latrine construction activities are helping to improve poor sanitation conditions in accommodation centres.
- 98,000 people have received preventative or curative health care through ERU or mobile clinic services.

Appeal history:

- Preliminary appeal launched on 26 December 2004 CHF 7,517,000 (USD 6,658,712 or EUR 4,852,932) for 6 months to assist 500,000 beneficiaries.
- Disaster Relief Emergency Funds (DREF) allocated: CHF 1,000,000.
- Revised Preliminary Appeal issued on 30 December 2004, for CHF 67,005,000 (USD 59,152,246 or EUR 53,439,988) for 2 million beneficiaries for 6-8 months.
- The Preliminary Appeal was originally launched titled “Bay of Bengal: Earthquake and Tsunamis”. The title was subsequently changed to “Asia: Earthquake and Tsunamis” in the Revised Preliminary Appeal launched on 29 December 2004.
- Operations update No. 16 revised the Revised Preliminary Appeal 28/2004 budget to CHF 183,486,000 (USD 155,286,000 or EUR 118,669,000) with programme extensions for particularly Sri Lanka, Indonesia, the Maldives and East Africa.

[Click here for contact details related to this operation](#)

Background

The magnitude 9.0 earthquake that struck the area off the western coast of northern Sumatra on Sunday morning, 26 December 2004, at 7:59 am local time (00:59 GMT) triggered massive waves, or tsunamis, that inundated coastal areas in countries all around the Indian Ocean rim – from Indonesia to Somalia. Sri Lanka, the Indonesian province of Aceh, four states of southern India, the Maldives, and coastal areas of Thailand, Malaysia, and Myanmar were the most severely affected. The earthquake epicentre was located at 3.30N, 95.78E at a depth of 10 kilometres. The area is historically prone to seismic upheaval due to its location on the margins of tectonic plates. However, waves of this magnitude are rare and therefore the level of preparedness was very low.

Summary of the human toll caused by the tsunami as of 15 April

| Countries | Dead | Missing | Displaced | Homeless | Sources |
|--------------|----------------|---------------|----------------------|--------------------|------------|
| Indonesia* | 126,915 | 37,063 | 400,062 | n/a | Government |
| Sri Lanka | 31,147 | 4,115 | 519,063 | 480,000 | Government |
| India | 10,749 | 5,640 | 647,599 | 20,000 | Government |
| Maldives | 82 | 26 | 21,663 | n/a | Government |
| Thailand | 5,395 | 2,932 | n/a | n/a | Government |
| Myanmar | 61 | 10 | n/a | 3,200 | Government |
| Malaysia | 68 | 12 | n/a | 4,296 | Delegation |
| East Africa | 312 | 158 | 2,320 | n/a | Government |
| Total | 174,729 | 49,956 | >1,590,707 | >507,496 | |

* The International Federation relies on official government sources for update of the casualty figures in this table and does not bear responsibility for accuracy. Those listed as missing will be officially declared as dead in most countries a year after the disaster. Note: East Africa covers tsunami-affected countries of Kenya, Madagascar, Seychelles, Somalia and Tanzania.

Thousands of staff, relief and medical personnel, and volunteers of the Red Cross and Red Crescent societies of the tsunami-affected countries have provided a vital initial response, in search and rescue, clean-up, providing temporary shelter and immediate relief assistance, emergency medical services, psychological first aid and tracing. It is estimated that over 22,000 Red Cross and Red Crescent volunteers and 76 relief and medical teams were mobilized in the disaster-affected areas.

The Federation immediately launched a Preliminary Emergency Appeal on the day of the disaster with a focus on Sri Lanka, Indonesia and the Maldives. On 3 January 2005, the ICRC launched budget extensions additional to its 2005 Emergency Appeal for Indonesia and Sri Lanka. Along with initial support from the country and regional delegations, the Federation deployed within 24-72 hours three [Field Assessment and Coordination Teams \(FACT\)](#) and 18 [Emergency Response Units \(ERU\)](#) in the sectors of water and sanitation, health care, aid distribution, telecommunications, and logistics/transportation to Sri Lanka, Indonesia and the Maldives.

A total of 285 relief consignments (232 by air and 53 by sea) have now arrived in Indonesia, Sri Lanka, the Maldives and Myanmar and a further 13 are in the relief pipeline, making a total of 298 relief consignments coordinated through the Federation through 14 April.

Indonesia

Overview

The 28 March earthquake, measuring 8.7 on the Richter scale, brought a second round of destruction, disruption and loss of life to the traumatized region of Northern Sumatra. While loss of life was relatively low compared to the 26 December 2004 cataclysm, numbering less than 1,000 at last count, the islands of Nias, Simeulue and the Banyak Island group off the western coast of Sumatra suffered significant structural damage to buildings, roads, and ports. On 7 April, the government's Planning Minister stated that Indonesia will need USD 326.4 million to rebuild towns and villages damaged in the Nias earthquake.

Humanitarian relief agencies were quick to respond with the provision of relief items to both Nias and Simeulue, however distributions on both islands remained difficult because of the damaged infrastructure and population movements to higher ground and off the islands, compounded by bad weather and stormy seas. People remained traumatized by frequent and strong aftershocks. The Indonesian vice president expressed concern over the rising rate of exodus by earthquake survivors from Nias Island and western coastal areas of Sumatra. It was estimated that 34,000 people had fled their homes and refused to return on rumours of aftershocks and tsunamis.

The World Food Programme (WFP) estimated some 720,000 people were affected by the Nias earthquake, with food requirements in the short-term approximated by the UN Joint Logistics Centre to be 600 metric tons per week. The World Health Organization (WHO) reported that the central government is still welcoming medical and logistical support for the victims of the Nias quake.

Meanwhile, the government reduced its estimate of the number of people missing after the 26 December tsunami from 93,458 to 37,063, with a revised figure of confirmed dead at 126,915 as of 9 April. While the downward revision of missing will have no effect upon the ongoing relief and recovery operations, experts say that this dramatic adjustment in the count is not unusual for major natural calamities, especially where original census data may have been uncertain, and where there were large population movements after the event. Indonesian officials noted that many previously missing had since been identified among the approximately half million people currently residing in the temporary living centres.

On 7-8 April, a senior representative of the International Federation participated in an anti-corruption conference in Jakarta hosted by the Organization for Economic Cooperation and Development, the Asian Development Bank, and Transparency International. The conference was convened to discuss safeguards for ensuring that the large amounts of money donated for tsunami relief will be managed effectively.

In its annual *Asian Development Outlook* published on 7 April, the Asian Development Bank estimated that an additional two million people have been reduced to poverty as a consequence of the economic disruption caused by the tsunami. Although the macro-economic impact on the affected countries is limited – because neither major population nor industrial centres suffered significant damage from the 26 December earthquake and tsunamis – the livelihoods of subsistence fishing and farming populations living along the shores of the countries directly in the path of the wave were severely affected. In Aceh and Northern Sumatra provinces, an estimated one million people were added to the ranks of the poor, thereby increasing the poverty rate in the country's population by half a percentage point to 18.7 per cent.

On 11 April, the President of Indonesia announced the creation of a disaster response task force to improve the country's emergency preparedness, with representation from all relevant ministries. The task force is charged with creating standard operating procedures to increase efficiency and effectiveness whenever and wherever natural disasters happen in the country.

In mid-April, the government released its blueprint for the reconstruction of tsunami-stricken Nanggroe Aceh Darussalam and North Sumatra provinces, entitled 'Master plan for Aceh Recovery'. The Indonesian language version of the document was posted on www.e-aceh.org, with an English version expected shortly thereafter.

Coordination

January

From the very start of the emergency operation, the Federation has supported the Indonesian Red Cross (Palang Merah Indonesia/PMI) response to the tsunami disaster. The core delegation's disaster management delegate was the first person to become actively involved, working with the key PMI staff responsible for the Red Cross relief efforts. The regional programme coordinator from the Federation's regional delegation for Southeast Asia in Bangkok, who was in-country at the time serving as acting head of delegation, took on the role as head of operations for the Indonesia tsunami response activities, a responsibility he continued to exercise until mid-April, with his assignment unexpectedly extended by the 28 March Nias earthquake.

Federation support was further increased upon arrival of the field assessment and coordination team (FACT), initially deployed to the PMI coordinating centre in Medan, and then onwards to Banda Aceh.

Communication between PMI and the Federation remained constant and effective at all levels of coordination; at Jakarta headquarters, where the country delegation office is based in the national headquarters building, in Medan – which was quickly established as the logistics base for the operation – and in Banda Aceh, where the FACT team leader held daily coordinating meetings with the Banda Aceh chapter leadership, in addition to the continuous face-to-face and mobile phone contact between Federation and PMI staff in the midst of the intense activity of those early days.

By mid-January, Medan was well-established as a key staging area for logistics and emergency relief purposes of the organizations involved in the tsunami response, and within that first two-week timeframe, the Federation had a full logistics team and warehousing facilities in place at Medan to support PMI efforts.

Later in January, the initial assessments began to be compiled on requirements for organizational development capacity building for PMI in Aceh. This review included reconstruction and rehabilitation requirements of chapter and branch buildings and their programmes throughout northern Sumatra.

Meanwhile, FACT team members were attending the UN coordinating meetings, firstly in Medan, and then in Banda Aceh, while the Jakarta office maintained ongoing contact with UN and other agencies based in the capital.

On 19 January, a recovery assessment team, with expert members from a number of sister national societies, began three weeks of travel throughout the tsunami-affected area. The team's mission was to undertake a review of short- and medium-term needs in the disaster zone. Comprised of an eight-person, multi-disciplinary group, the ICRC, the Federation and PMI, the team was tasked with reviewing rehabilitation/recovery needs in affected communities and determining relevant recovery programming for components of the International Red Cross and Red Crescent Movement over the subsequent 12-month period. The assessment aimed to build on the lead role of PMI, based upon its skills and experience, and to provide input for a clear plan that linked emergency relief with longer-term programmes focusing on disaster risk management activities.

A milestone coordinating event took place at the end of January. Representatives of PMI, the Federation and ICRC met to formulate a framework agreement to coordinate the activities of all Movement entities already active in the country, as well as to help integrate all partner national societies (PNS) expressing interest to initiate multi-lateral and bilateral projects for the emergency relief phase or for the pending recovery and rehabilitation phases over the mid- and long-term. That framework agreement was signed by all three parties on 31 January 2005.

February

A Movement Coordinator charged with overseeing the realization of the coordination framework began working in Jakarta on 1 February.

As the first direct outcome of the framework agreement, a Movement partnership task force (MPTF) was formed to oversee and monitor the response of the Red Cross and Red Crescent Movement to the changing humanitarian needs in Indonesia following the 2004 tsunami disaster, to coordinate the consequent activities of the Movement, and to identify opportunities for possible project contributions of RCRC partners.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

The MPTF comprises all three Movement components: PMI, ICRC and the Federation. In addition, all PNS who have chosen to participate in the tsunami operation in Indonesia are entitled to representation on the MPTF.

The first initiative of the MPTF was to collaborate on the creation of a *Movement Plan of Action for Indonesia* in regard to post-tsunami activities 2005-2010. This document is since being utilized as a guide to enable Movement partners to allocate their proportionate support (human, financial, and material) to the PMI in the six identified sectoral programme areas:

1. Health and social services: to provide health services, blood and ambulance services, hygiene promotion, psychological support, community-based prevention and health promotion, HIV/AIDS, as well as possible other health and care-related services.
2. Water and sanitation: to facilitate handovers by emergency response unit (ERU) water and sanitation teams, water infrastructure rehabilitation, latrine construction, wastewater/solid waste management, regional emergency response capacity, and ensure links with the global water and sanitation policy.
3. Reconstruction: including medium-term shelter solutions (family tents, temporary houses), temporary housing settlements, policy development on shelter provision/standard designs, rehabilitation/improvement of education and health services, provision of social meeting forums, rehabilitation/reconstruction of PMI offices and other facilities, assistance to displaced people to return to former locations, distribution of cleaning/construction tools and materials, and rehabilitation of communities and schools.
4. Disaster management/risk reduction: including disaster response capacity of the national society's rapid response field action (SATGAN) teams, disaster management capacity, community-based disaster management and risk reduction activities, information and reporting management systems/structures, community-based risk reduction activities/enhancing community resilience, and stock replenishment.
5. Livelihood and economic security: including "one-off assistance" packages, engaging livelihood expertise/livelihoods coordinator position, fisheries, agriculture, commerce, food security, nutrition, and food aid.
6. Organizational development and capacity building: Governance and management development, rehabilitation of chapter and branch offices, chapter and branch support and development, volunteer development and training, financial management development, human resource development, resource development, national office renovation, training centre, study visits/exchange (chapter and branch people).

The Movement's plan of action was included as an integral part of the PMI action plan submitted upon request to the Indonesian authorities for inclusion in the government's coordinated plan for tsunami recovery activities.

The recovery assessment team completed its assessment on 7 February 2005 with a report of its findings. That document has to a large extent added operational guidelines to the coordination framework by outlining specific opportunities for engagement of Movement partners in the short- and longer term recovery period.

In order to provide a process for practical implementation of the framework agreement, a series of technical working groups (TWG) were created, aligned to the six identified sectoral programme areas, and with representation from all PNS working within the coordination framework. The TWG mandates are to address the recovery needs of the identified populations, to coordinate common programming modalities and standards based upon PMI's *Strategic Plan 2005-2009*, as well as policies and regulations of the Indonesian Government, and in the context of international standards, and to establish cross-cutting standards for all approved projects.

The first concrete outcome of the framework agreement was the creation of tsunami recovery service centres in Banda Aceh and in Jakarta close to PMI offices. These two facilities will provide administrative and logistic support services for PNS and Federation personnel involved with tsunami-related programme activities.

The publication of a weekly 'Cooperation Bulletin' began on 24 February to provide information on the progress of the service centres, on the activities of personnel involved in the tsunami operations, and with news relevant to events and developments surrounding this large and complex operation.

By mid-February, the daily coordination meetings in Banda Aceh between Federation and PMI were taking place every two days to discuss ongoing operations and forward planning in and around Aceh province.

From 28 February to 3 March, the first technical working group meetings took place in Banda Aceh. These first sessions served as an introduction to the Movement framework intent and process. As well, the first groups of PNS project consortia were agreed.

On 28 February, PMI's plan of action for tsunami-related activities was formally presented to the Indonesian Government.

March

The position of deputy head of delegation, based in the Jakarta service centre, was created to oversee all tsunami operations, and the designated person began exercising that role as of 1 March.

As well, a head of operations was identified to replace the regional programme coordinator from the Bangkok delegation's office who had been fulfilling that role from the first days after the tsunami. It was decided to base that new incoming delegate in Banda Aceh.

By mid-March, the first 10 PNS had moved into the Jakarta service centre. The Federation's Medan office was relocated into the PMI chapter office. Logistics and procurement remain the main activities of the Medan office.

The second series of technical working group meetings took place 15-18 March in Banda Aceh. At these meetings, the first round of project proposals were presented and discussed, and the serious planning and budgeting process began among the PMI, PNS, ICRC and Federation representatives.

Subsequently, the first set of concrete project proposals were tabulated and presented for approval at the Movement partnership task force meeting which took place in Jakarta on 24 March.

On the operational front, PMI named six counterparts to work with the Federation's team in Banda Aceh (for logistics, reporting, finance, coordination, relief and health).

Most recent developments

The third series of technical working group meetings took place 11-13 April in Medan. Representatives from 19 PNS were in attendance, along with representatives of the Federation, ICRC and the host national society. Of the 52 proposals discussed during the six sectoral meetings, 44 were approved, with the remaining eight awaiting further details.

With in-depth discussions between all TWG participants, engaged in cordial but frank and forthright dialogue, a process of consensus continued to be built among the Movement partners, as the value of this coordination effort became ever more obvious to those involved. In addition to a substantial review of all the project documents before them, the group also focused on ways to improve the framework concept even further, and considered ways to create standard formats for project proposals, for plans of action, and for combining PNS consortia around common programming intents.

Coordinating meetings have continued actively between PMI and Federation counterparts on planning matters relating to the forthcoming Emergency and Recovery Appeal and budget, and for the ongoing activities in the emergency phases of both the tsunami recovery and, more recently, the Nias earthquake response.

Security

January

From the outset of this emergency operation, all incoming delegates are required to read and sign a current version of the ICRC's *General Security Rules*.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

As of the second week in January, the Indonesian military requested all foreign aid workers to seek clearance and escorts when moving outside Banda Aceh, and to report their movements to military and police authorities. Immediately in response, the Banda Aceh office through PMI and ICRC began to provide daily lists of delegates' movements in the Federation's field of operations.

While this edict applied to all foreign nationals, it is noted that the Federation's relationship and communications with TNI and local government and police authorities in all operational areas has remained transparent and proactive since the commencement of activities after 26 December.

In the first part of January, and considering the long history of conflict in the tsunami-affected area, rumours were rife about threats of potential or imminent hostilities. No incidents of harm to aid workers were ever substantiated, and PMI/Federation personnel enjoyed relatively unfettered mobility in the exercise of their humanitarian activities in Aceh Province.

February

Early in February, the Indonesian national police tsunami task force visited the Federation's office in Banda Aceh to make photo identity tags for all of the delegates.

In a continuing pattern of facilitation by the government, the requested radio frequencies were allocated for PMI and Federation field activities. Subsequently, a comprehensive radio network began to be set up in coordination with PMI and ICRC.

A Federation security delegate, based in Banda Aceh, joined the tsunami relief efforts.

March

Federation and PNS working in field operations continued to operate within the security parameters defined by ICRC. As well, the Federation's security delegate continued to evaluate security information, all the while keeping delegates in the field and responsible parties briefed on security matters related to ongoing Red Cross and Red Crescent activities.

High-frequency (HF) radio training began in mid-March for PMI and Federation personnel working in Aceh province.

As a result of scientific reports (since proven correct on 28 March) of another possible earthquake, Federation delegates and PMI volunteers were briefed, in coordination with ICRC, on contingency safety evacuation and relocation plans.

Most recent developments

Within the current reporting period, and in response to delegates who had been asking for training materials to be made available in the Bahasa/Indonesian language, a translation of the *Movement Security Rules* was distributed for use by Federation local staff and for PMI staff and volunteers.

As well, an *Earthquake evacuation plan* and a *Contingency relocation plan* have also been circulated to Federation staff working in Indonesia

Red Cross and Red Crescent action

Since the last operational update covering Asia (no. 50 published on 23 March 2005), the earthquake on 28 March that shook the islands of Nias, Simeulue and the Banyak Islands group has been a main focus of activity.

PMI and Federation mobilization was swift, as a consequence of the logistical and resource capacities built up after 26 December. Federation delegates were deployed immediately from Banda Aceh and from Meulaboh, together with a regional disaster response team (RDRT) comprised of Red Cross Red Crescent personnel from surrounding countries to assist PMI in its emergency response.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

In the first few days following this second calamity, relief operations were hampered by heavy rains, high seas, impassable roads, damaged port infrastructure, lack of suitable marine transport, and large movements of the populations on Nias and Simeulue, who were traumatized by a continuing and frequent series of large aftershocks. Their stress was compounded by unfounded rumours of imminent tsunami inundation and even of the possibility that the islands would sink.

Although local authorities tried to quash the chatter of misinformation, citizens have been leaving their homes in large numbers, either to higher ground or off the island to Sumatra and as far away as Batam Island, located in the Malaka Strait east of Sumatra and just south of Singapore, seeking safe haven from the psychological burden of perceived imminent doom and the physical hardship of their disrupted lives and livelihoods.

Meanwhile, PMI/Federation operational set-up has continued, with a logistics base established at Sibolga on the west coast of Sumatra across from Nias' port capital of Gulung Sitoli, in the capital, and a third on southern Nias in Teluk Dalam.

To date, the Federation transported 3,100 family tents, 25,000 tarpaulins, 25,000 blankets, 13,700 food parcels, 25,000 kitchen sets, 21,200 hygiene kits, 20,000 jerry cans and 20,000 impregnated mosquito nets to Nias and Simeulue. Due to the constant movement of the population, accurate distribution figures are not yet available.

It was decided between PMI, the Federation and PNS involved in the Nias response that all related operations will be coordinated from Meulaboh. Once the search and rescue activities and the emergency phase are over, Nias will be established as another base of operations within the general relief and recovery programme in Aceh province.

In the ongoing tsunami response operation, the Spanish, German, Austrian and French Red Cross emergency response units in Aceh province are producing a combined total of 880,000 litres of water a day, providing approximately 105,000 beneficiaries with clean water (each beneficiary receives 15 litres of water a day). As well, a Federation water and sanitation team has assisted the British Red Cross to assess the water and sanitation needs at Berueh island, north of Banda Aceh. The initial assessment showed there are suitable processing sites in two villages on the island. The Federation is currently planning preparatory earthwork on the island.

Following an extensive hands-on training with the Spanish Red Cross' water and sanitation ERU in Meulaboh, PMI is now well prepared to treat and distribute safe and clean water during, especially in emergency situations.

The German Red Cross has treated 5,892 patients to date in their basic health care unit (BHCU) at Teunom.

The ration card registration programme all along the western coast of Aceh province is nearing completion, after which the accuracy and timeliness of the relief and recovery distribution programme is expected to improve considerably.

Overall Goal: Up to 100,000 internally displaced and otherwise affected families (approximately 500,000 people) in western Aceh receive adequate and timely emergency humanitarian assistance over the next six months.

Objective 1 (emergency relief): Basic supplementary food and non-food needs of the 500,000 IDP and most vulnerable beneficiaries are met so that they can start rebuilding their future.

Progress/Achievements

January

In January, at the very height of the initial emergency phase, PMI was completely absorbed with the deployment of SATGANA teams drawn from all over the country to assist in the evacuation of bodies throughout the disaster zone. Of the 45,000 tsunami victims retrieved and transported by PMI volunteers, the majority of those were handled during January.

Also during January, a huge quantity of relief items donated by sister national societies and through Federation channels were received at the temporary logistic facilities provided to PMI by the owner of a Toyota dealership. In

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

those early days, getting food, water, hygiene kits, cooking sets, medical supplies and other emergency relief items into the hands of those in most need as quickly as possible superceded the keeping of distribution records, although all incoming goods received were logged before being loaded onto trucks for delivery where accessible by land and by small boats along the devastated western coast of Aceh province.

Additional warehousing facilities were subsequently secured at the Banda Aceh airport, as well as pre-positioning facilities arranged at Batam Island and in Medan. Warehouse capacity was also expanded at PMI headquarters in Jakarta with the erection of a Rubb Hall provided, transported and assembled by Danish Red Cross.

Simultaneous with the quickly initiated relief distributions, a Federation FACT team was deployed first to Medan and then onwards to Banda Aceh, to work with PMI on ground and air assessments of the tsunami-affected territory. Comprised of the Federation's essential technical functions, including relief, health, water and sanitation, logistics, telecom/IT, information and reporting, the FACT team spearheaded what was to rapidly evolve into a major operation comprising dozens of delegates, and then PNS staff, across a broad expanse of northern Sumatra.

Within days of the arrival of the FACT team, it was determined to deploy a series of ERUs, and in quick succession, a Spanish and a French Red Cross water and sanitation ERU had both arrived and began to set themselves up in locations identified by the FACT team and PMI assessments; the Spanish team in Meulaboh and the French water and sanitation ERU in Sigli and in Samalanga (with thanks to ICRC for their detailed knowledge of northern Sumatra's east coast). As well, basic health care units of the German and Japanese Red Cross societies began to provide emergency health services in Teunom and in Meulaboh, respectively.

Within that first hectic month, relief logistics hubs, consolidated by the erection of Danish Red Cross Rubb halls, were established in Medan, Banda Aceh, Meulaboh, to be followed by Lam No, Teunom and Calang. A steady arrival of relief and logistics delegates continued to build strength and capacity to support the constantly-expanding operation.

Before January was over, the first set of field distribution reports had itemized the delivery of tents, tarpaulins, jerry cans, blankets, hygiene and family kits, and kitchen sets.

Considering the historic challenges met by PMI and Federation staff and volunteers faced with the widespread destruction and damage to road and port infrastructure, and the sparse logistics chain in the start-up phase of the operation, there were considerable accomplishments in meeting the immediate needs of survivors. The humanitarian community that responded to this crisis is widely credited with preempting further loss of life that may well have occurred from untended injuries and by the spread of water-borne diseases.

Special mention must also be made of the pre-existing relationship enjoyed by PMI with governmental and military authorities in Indonesia. Where other actors in the field were contained and constrained in their travels by TNI, given the history of conflict in Aceh province, PMI and Federation personnel maintained proactive and transparent communications with TNI and with local government officials, which resulted in unhampered access to beneficiary populations during this critical early period.

February

By mid-month, 1,648 PMI volunteers had assisted in the retrieval of 43,985 bodies from tsunami-stricken areas of Aceh province.

During the entire month of February, some 125,000 beneficiaries in Banda Aceh, Aceh Besar, Biren, Pidie, Lhokseumawe, Lam No, Calang, Teunom, Meulaboh and Simeulue Island received non-food relief items from either pre-positioned stocks or from resources mobilized through the Appeal. As well, PMI distributed pre-positioned and locally donated food items to 345,000 people.

Procurement also began for supplementary food parcels to cover 17,800 families for two months. The food parcels contained corned beef, green beans, sugar, iodized salt, dry red chillies, black pepper kernels and black leaf tea, and were prepared for distribution to communities along the west coast, with subsequent distributions on the east coast in the planning stage.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

A revised relief plan is designed to accommodate the continuing movement of internally displaced persons (IDPs) and disaster-affected people within the region. Relief forward planning, the logistics pipeline, warehousing and onward transportation are all working together to ensure an adequate delivery of appropriate goods based on PMI-led assessments.

March

The relief programme begins a significant expansion of its coverage area to include communities along Aceh province's northeast coast – including IDPs and host families. Initial estimates put the expanded distribution at some additional 40,000 families, more than doubling the previous relief programme to reach a total estimated 77,000 families or over 385,000 beneficiaries. This is a large increase of the original revised relief plan of action, which had targeted 17,800 families along the west coast.

Preparations for the distribution of complementary food parcels and community recovery tool kits continue. A system of ration cards begins to be implemented across the region, proving useful in tracing items being distributed and in verifying the identity of internally displaced persons. Card registration will continue until PMI has recorded all families currently being assisted as well as those who have recently moved into the areas.

By month's end, distribution of supplementary food parcels and community recovery tool kits began and are being well received within the recipient communities. The integrated PMI/ Federation assessments and distribution system are proving to have the required flexibility in meeting the needs of a very transient IDP population, as well as needing to expand to cover spontaneous settlements and host families as required.

The Federation's response to the 28 March earthquake, in support of PMI, included provision of food parcels, tents, tarpaulins, kitchen and hygiene kits, and air and ship transportation. Delegates deployed to the disaster zone together with a regional disaster response team assisted PMI in the assessment and in coordinating relief distributions.

Summary total distributions by month

| Month | families | population | tents | tarps | kitchen sets | hygiene kits | blanket | terr cans | family kits | baby kits | stoves | mos nets | food parcels | recovery kits |
|---------------|---------------|----------------|--------------|---------------|--------------|---------------|---------------|---------------|---------------|--------------|--------------|---------------|--------------|---------------|
| January | 8,437 | 42,185 | 1,072 | 7,962 | 889 | 5,146 | 19,601 | 15,693 | 62 | | | | | |
| February | 13,784 | 68,920 | 1,608 | 11,446 | 598 | 6,116 | 24,130 | 25,638 | 8,921 | 3,029 | 178 | 15,022 | | |
| March | 24,256 | 121,280 | 681 | 17,637 | 999 | 21,420 | 41,614 | 12,463 | 8,520 | 1,786 | 7,337 | 20,026 | 7,992 | 31 |
| Totals | 46,477 | 232,385 | 3,361 | 37,045 | 2,486 | 32,682 | 85,345 | 53,794 | 17,503 | 4,815 | 7,515 | 35,048 | 7,992 | 31 |

Most recent developments

To date, the emergency relief phase of the operation has served 52,588 families, representing 262,940 beneficiaries, with food and non-food items in Aceh province. The relief programme continues to expand its coverage area to include the north and east coast areas of Aceh province and is in the process of widening its coverage to Aceh Daya, south of Nagan Raya district. In addition, Nias, Simeulue and Singkil district have been targeted with relief activities in response to the 28 March earthquake (with relief reporting being done by the operational team in Nias).

The ration card registration process is well underway, which will soon provide a more accurate picture of beneficiary numbers on the ground. The continuing improvement of road access along the western coast of Aceh province from Banda Aceh all the way to Meulaboh has increased ability to distribute relief supplies by land.

The relief team was reinforced in the last few weeks with the addition of three locally-hired field officers. One is assisting the relief delegate in Lhokseumawe, and the other two have been based in Banda Aceh, where they will be focusing on assisting the PMI branches in Aceh Besar, Banda Aceh and Pidie district.

The Federation has also gained the support of a trainee relief delegate from the Danish Red Cross who has been positioned in Meulaboh to provide support to the PMI relief activities in Meulaboh, Nagan Raya and Aceh Daya.

Please note that the relief reporting system has been adjusted. Henceforth, bi-weekly reports will provide a breakdown of total relief distributions and families served *by district*. Therefore those areas that were previously

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

reported on separately will now fall within their respective districts (e.g. Lam No, Calang and Teunom all fall within Aceh Jaya district).

Relief distributions and families served by district

Distributed to Date

| | Tents | Tarps | Kitchen Sets | Hygiene Kits | Blankets | Jerry Cans | Family Kits | Baby Kits | Stoves | Mosquito Nets | Food parcels | Recovery Kits | Families Distributed |
|-----------------|--------------|---------------|--------------|---------------|---------------|---------------|---------------|--------------|--------------|---------------|--------------|---------------|----------------------|
| Banda Aceh | | | | 2,263 | | | | | | | | | 2,263 |
| K. Sabang | | | | 989 | | | | | | | | | 989 |
| Aceh Besar | 35 | | | 4,427 | 50 | 48 | | | | 150 | | | 7,350 |
| Aceh Jaya | 2,050 | 17,036 | 1,126 | 14,112 | 42,541 | 35,846 | 7,618 | 4,815 | 5,238 | 21,314 | 3,082 | 33 | 20,354 |
| Aceh Barat | 741 | 12,205 | 584 | 3,068 | 30,575 | 12,993 | 7,479 | | 1,163 | 8,196 | 2,060 | | 8,808 |
| Nagan Raya | 592 | 7,710 | 1,192 | 3,294 | 12,368 | 3,950 | 2,828 | | 1,122 | 5,392 | 3,266 | | 3,081 |
| Aceh Barat Daya | | | | | | | | | | | | | 0 |
| Simeuleue | | 1,807 | | 1,482 | 967 | 967 | | | | | | | 2,731 |
| Pidie | | | | 1,900 | | | | | | | | | 900 |
| Bireuen | | | | 905 | | | | | | | | | 905 |
| Lhokseumawe | | | | | | | | | | | | | 0 |
| Aceh Utara | | | | 1,037 | | | | | | | | | 1,037 |
| Aceh Timur | | | | | | | | | | | | | 0 |
| Aceh Tamiang | | | | | | | | | | | | | 0 |
| Aceh Tengah | | | | | | | | | | | | | 0 |
| Total | 3,418 | 38,758 | 2,902 | 33,477 | 86,501 | 53,804 | 17,925 | 4,815 | 7,523 | 35,052 | 8,408 | 33 | 48,418 |

* Figures reflect families served under the current PMI/Federation relief plan and Federation appeal stocks.

Distribution data by latest available reporting week

| Week no. | week ending | families | population | tents | tarps | kitchen sets | hygiene kits | blanket | jerry cans | family kits | baby kits | stoves | mos nets | food parcels | recovery kits |
|----------|-------------|---------------|----------------|--------------|---------------|--------------|---------------|---------------|---------------|---------------|--------------|--------------|---------------|--------------|---------------|
| 1 | 16-Jan | | | 491 | 2,685 | 307 | 1,228 | 7,390 | 2,048 | 62 | - | - | - | - | - |
| 2 | 23-Jan | | | 39 | 5,509 | 193 | 1,292 | 10,641 | 11,473 | - | - | - | - | - | - |
| 3 | 30-Jan | | | 542 | 794 | 389 | 3,164 | 1,801 | 2,172 | - | - | - | - | - | - |
| 4 | 6-Feb | | | 672 | 1,951 | 410 | 1,416 | 6,390 | 6,107 | 850 | - | - | 3,049 | - | - |
| 5 | 13-Feb | | | 708 | 2,171 | 161 | 661 | 4,422 | 2,995 | 2,615 | 20 | 90 | 3,957 | - | - |
| 6 | 20-Feb | | | 110 | 3,589 | 27 | 1,319 | 5,716 | 10,516 | 3,416 | 341 | 1 | 5,017 | - | - |
| 7 | 27-Feb | | | 118 | 4,827 | - | 2,437 | 9,187 | 7,735 | 2,040 | 2,668 | 87 | 2,999 | - | - |
| 8 | 6-Mar | | | 72 | 4,594 | - | 3,881 | 14,595 | 3,142 | 3,041 | 489 | 663 | 2,373 | - | - |
| 9 | 13-Mar | | | 12 | 4,044 | - | 3,091 | 11,631 | 1,800 | 2,483 | 658 | 153 | 1,411 | 84 | - |
| 10 | 20-Mar | | | 8 | 4,019 | 45 | 7,157 | 4,855 | 1,858 | 2,780 | 313 | 3,332 | 2,496 | 1,652 | - |
| 11 | 27-Mar | | | 208 | 988 | - | 3,480 | 8,643 | 1,570 | 546 | - | 119 | 9,521 | 2,632 | 9 |
| 12 | 3-Apr | | | - | 2,075 | 776 | 1,187 | 1,263 | 190 | 155 | - | 5 | 932 | 2,215 | - |
| To date | | 52,588 | 262,941 | 2,980 | 37,246 | 2,308 | 30,313 | 86,534 | 51,606 | 17,988 | 4,489 | 4,450 | 31,755 | 6,583 | 9 |

Complementary food parcels are currently being distributed in coordination with PMI along the western coast of Aceh province from Lam No south to Nagan Raya district (south of Meulaboh). Registration with ration cards is being finalized for Aceh Besar, Pidie, Bireuen, Kota Lhokseumawe, Aceh Utara, Aceh Timur, and Aceh Tamiang.

Upon completion of registration, beneficiary families will be provided with two-month complementary food parcels, with a current estimation of 40,000–50,000 families, pending results of the registration. This estimate is expected to be clarified in time for the next reporting period and should include IDP and host family populations.

Lam No

The construction of additional Rubb halls has increased storage space and improved organization of relief supplies. The PMI relief team now includes 19 local Lam No-based volunteers. The PMI coordinator has communicated PMI intentions to establish a chapter in Lam No, which will include a youth department. Registration of IDPs and host families continues, with food parcels and community recovery tool kits currently being distributed to beneficiaries in the area.

Calang

Distribution of food parcels continues, in conjunction with the registration of beneficiaries in Calang from Sampoinet to Panga. Community recovery tool kits have been distributed in Lhok Buya, Rigaih and Sayeung. The earthquake on 28 March delayed distributions to Setia Bakti because the bridge to the north in Rigaih collapsed. Eight volunteers from PMI Jakarta have finished their terms of service during this period, leaving seven PMI

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

volunteers from Calang area. According to a report from the relief delegate working in Calang, additional volunteer support is needed.

Teunom

Assessment in seven blocks of barrack camps (blocks A through G) have been completed, with information collected on numbers of families and respective family members, originating villages, and relief goods received to date. As of 8 April, 413 families were living in the barracks built for 420 families. Many IDPs are returning to their original villages – from inland to the coastal villages. Consequently, renewed assessments are also being carried out in those areas, e.g. Alue Ambang, Gambang Baro, Keude Teunom.

Distribution of recovery kits started on 8 April with two kits sent to Paya Baro for some 60 families, who are scheduled to clean up rubble and evacuate remaining corpses from within and under the debris. Night guards were employed on 6 April on a week-to-week basis after some items in the family kits were recorded as missing.

Meulaboh (including Nagan Raya)

Altogether, 11 PMI staff and 15 volunteers are involved in ongoing Red Cross programmes in the district. The main activities are the distribution of relief items, the ongoing recovery and burial of bodies, and the continuing supply of safe water. The water supply system was developed by the Spanish Red Cross in cooperation with the Indonesian Ministry of Public Works. PMI is also involved in assessments, logistics, health and tracing activities.

A total of 4,569 bodies have been found in the district since the December tsunami, with a further 86 deceased being discovered during the last week alone.

During this reporting period, relief distributions included sarongs, burkas, t-shirts, blankets, tarpaulins, family kits, kitchen kits and kerosene stoves.

Thirty-three new volunteers just received a four-day training course for disaster response operations. They were given an orientation about PMI and received international humanitarian law (IHL) dissemination. They were also trained in the basics of water and sanitation, psychological support, tracing, needs assessment and tracing.

Relief delegates are no longer required to obtain a 'letter of movement' from TNI for planned distributions. The new system includes a permit from the police to be carried in case of getting stopped en route.

Only small distributions have taken place since 28 March due to the emptying of the warehouse for the Nias relief response. Replenished supplies are being transported from Medan, and distributions recommence as of 11 April.

In Meulaboh city, PMI has trained 29 new local volunteers, 10 of whom are designated to help with distributions.

Plans are progressing to coordinate relief activities with Aceh Daya PMI branch, where an estimated 3,000 additional families will be assisted.

The arrival of extra trucks in Meulaboh for use by PMI/Federation has substantially increased the capacity to distribute relief supplies.

Northeast coast

ICRC has distributed, on the behalf of the Federation, a total of 3,802 hygiene parcels and 35 tents in the districts of Banda Aceh, Aceh Besar, Pidie, Bireuen and Aceh Utara. Training for registration of beneficiaries was held with PMI branches along the northeast coast, covering Pidie, Bireuen, Aceh Utara, Kota Lhokseumawe, Aceh Tamiang, and Aceh Timur districts. Ration cards have been distributed and registration is ongoing, with distributions planned to commence imminently.

The arrival of new field officers has greatly improved the capacity of the Federation to implement the relief activities. However, the northeast team could benefit from additional human resources, especially qualified field officers from the local area.

Lhokseumawe

A relief delegate of the Federation has been permanently posted to Lhokseumawe, covering the districts of Kota Lhokseumawe, Aceh Utara, Bireuen, Aceh Tamiang and Aceh Timur. The delegate is setting up strategies and systems to support the PMI branches in providing relief support for vulnerable persons affected by the tsunami disaster.

In preparation for the implementation of registration and distribution programmes in this area, several coordination meetings and support activities have been designed and then convened with the PMI chapter in Banda Aceh.

Coordination of relief activities continues between the Federation and ICRC representatives based in Lhokseumawe.

Constraints

Assessments and ongoing relief operations in Nias and Simeulue Islands following the 28 March earthquake required a major shift in focus of logistics activities, which temporarily delayed planned relief activities. In addition, the current tsunami relief programme is supporting the Nias response effort with two rotations of relief delegates and field officers diverted from their other responsibilities.

Relief activities on the northeast coast were temporarily slowed due to an internal restructuring of roles and responsibilities of the PMI national office, the provincial chapter and the branches.

The movement of IDPs continues to create difficulties in obtaining reliable estimates of the number of beneficiary families to be covered in the upcoming relief distribution programme in the northeast. Reliable data will be obtained only with the completion of the registration process.

Weather conditions continue to affect road and bridge access in areas along the western coast of Aceh, and there have been mechanical problems with M-6 trucks at several sights. There have also been difficulties experienced in the unloading and warehousing of damaged goods delivered by boat due to bad weather conditions.

Objective 2 (logistics): PMI will have a strengthened supply chain capability and capacity to ensure timely transport of material and human resources to the areas of operation.

Progress/Achievements

January

The logistics chain spearheaded by the Danish Red Cross' logistics ERU was very difficult to establish in the early days, given the extent of the destruction, difficulty of accessing the widespread area of damage, and crowded facilities at all staging points.

By the end of January, the transport capacity included a Hercules C-130 fixed wing, as well as a Sikorski and two Bell AN-12 rotary wing aircraft, which gave the operation a combined total of 23 tons carrying capacity to Banda Aceh and up to 30 tons to Medan. However, these aircraft still proved insufficient for enabling the logistics team to clear the backlog of items – which did not even account for the handling of unsolicited relief items.

As of 28 January, the Batam Island hub had 300 tons of high priority goods on hand, including medical kits, hygiene packs, tents and tarpaulins, and about 100 tons of lower priority items, including blankets, bed sheets and kitchen sets. The Batam logistics hub also had the use of a large warehouse at Batam port. Day labourers were recruited to help with the loading/unloading of goods from aircrafts.

Banda Aceh continued to act as the key relief distribution hub for the province.

Coordinated by a full complement of logistics delegates in place, the Federation's logistics team had by end of January the capability to deliver and store 1,000 metric tons (MT) of relief goods, as well as ERU equipment and support materials, using both air and sea routes.

February

The logistics team focused on the handling requirements for complementary food distribution to 100,000 families over a period of up to six months.

As of 4 February, seven containers had been dispatched to Medan and four were received at Batam. On 8 February, the Hercules C-130 flew its last mission. Batam logistics hub shifted its activities towards the use of containerized sea cargo. Cooperation and coordination with PMI continued to work well, in particular with the clearance of customs goods in and out of Batam.

Supply lines were established to four distribution points (Lam No, Calang, Teunom and Meulaboh) through two marshalling areas (Meulaboh and Banda Aceh), supported by a national and international hub (Medan and Batam).

However, unannounced deliveries to the various hubs, in particular Medan and Banda Aceh, continued to stretch the optimum use of warehouse space and challenged the efficiency of the operations.

The immediate and urgent operational needs during February kept both Federation and PMI logistics staff from fully focusing on the requirements of the relief effort and delayed them from initiating discussions regarding the strengthening of PMI capacity in this tactical area.

In this first formal month of implementing a relief plan, the Federation's logistics team had managed to realize 90 per cent of the material objectives.

Warehousing was now available at all designated locations, thanks to the arrival of the Rubb Hall in Lam No, with total warehousing capacity now at 8,360 square metres.

The last week of February saw Medan dispatching 84 trucks of relief goods (nearly 1,000 tons) to Meulaboh and Banda Aceh for onwards distribution.

Three German Red Cross logistics delegates provided their support to the Federation's operations in Teunom, Calang and Lam No.

March

All ICRC-donated kitchen sets for Calang and Lam No were delivered and 80 per cent of relief supplies destined for Meulaboh arrived successfully via Medan according to plan. Additionally, 2,000 food parcels from Japanese Red Cross arrived in Meulaboh and were integrated into the overall Federation distribution programme.

Truck convoys to Teunom began. Additional areas to the south of Meulaboh began to receive relief distribution by boat from Banda Aceh and by road over the mountains from Medan. Due to increased operational efficiency by road, the helicopter fleet was reduced to the one Sikorski.

Small landing craft, better suited for distributions to Calang and Lam No, were sourced to replace the 500-ton boat that saw extensive use previously.

By the end of February and the first week of March, relief distributions were expanded to cover affected communities south of Meulaboh, as well as along the northeast coast.

The remaining 44 M6 trucks donated by the Norwegian Red Cross were released from customs in Medan. These trucks will be dispatched for use in Meulaboh, Banda Aceh and along the northern coast.

Most recent developments

The tsunami logistics team is now supplying the PMI/Federation relief operations on the west coast, on Nias and Simeulue Islands, and is preparing to provide for the east coast as well. Simultaneously, the team is supporting operational PNS in the area and is involved in the establishment of the service centres in Banda Aceh and Jakarta.

Currently, there are 13 logistics delegates in the field, including the transport support package. In addition, there are three Danish ERU logisticians and two Norwegian technicians. The organizational matrix is getting

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

increasingly complex, as more logistics bases are being established. The team continues to staff Banda Aceh, Meulaboh, Medan, Batam, and Jakarta based on the original post-tsunami set-up, and now Sibolga and Nias are operational, with Lhokseumawe on the east coast of Sumatra most likely to be staffed by an additional delegate.

The delivery of 20,600 family food parcels to Banda Aceh is in the final stages of preparation. Due to handling and transshipment constraints in Medan, some delays in delivery to Meulaboh are being experienced.

Logistic support has begun for the distribution of stocks, including hygiene kits and baby kits, to 40,000 families on the east coast. The specified items are currently being forwarded from Medan to operational areas in accordance with requisitions. Socks remaining at the end of the operation will be transferred to designated disaster preparedness warehouses in accordance with the approved plans.

With regard to air operations, major activities during this period included the continued utilization of the Sikorski and SusiAir, mainly for the Nias earthquake operation, and the C160 Transall on lease until 18 April, again for the Nias emergency relief operation. One MI-8 aircraft is now operating out of the Sibolga logistics hub to do sling (under-carriage nets) distributions for Nias. One Super Puma provided to PMI by the French Red Cross is being shared with the Federation on Nias, and one Casa 212 is under lease to the French Red Cross and being operated by Federation's for Nias earthquake response as well.

The Federation has been providing the transport support package in Meulaboh district with 24 five-ton trucks. There are 20 trucks in Meulaboh, three in Teunom, two in Calang and two in Lam No. These trucks are used to deliver relief items to the tsunami and earthquake-hit areas. In addition to these trucks, there are two fuel tankers and two trucks equipped with all the necessary workshop tools. A truck maintenance workshop has been set up in Meulaboh and another in Banda Aceh.

Apart from transportation for the relief programme, the logistics team hires and trains local drivers and mechanics.

Procurement (quarterly summary)

Procurement activities for the period of January to March 2005 in Indonesia centred mainly on the sourcing and purchasing of supplementary food parcels for Banda Aceh (80,600), Meulaboh (24,000) and, at a later stage, Lhokseumawe (40,000) and then hygiene parcels (50,000) for Banda Aceh. During the same timeframe, a large number of clean-up recovery kits were purchased and distributed, as well as kerosene stoves. Preliminary research into availability of toilet, shower, kitchen, office and other portable utility containers and cabins was pursued, in anticipation of needs related to settlements of displaced people.

In addition to support field operations, a re-evaluation of future and current utilization of helicopter and light fixed-wing aircraft was made, with short tenders issued based on extensive market research in the region, to better evaluate the market for this type of aircraft and to begin considering possible alternatives. This exercise was later expanded to include heavy-lift helicopters and transport aircraft in response to the Nias earthquake.

In support of the operational set-up, tenders were also issued for quantities of IT and office equipment (desktop PCs, printers, fax machines and copiers among other items) as well as for IT networking services, set-up and installation. For IT needs, informal negotiations were begun with global brand PC manufacturers to explore options for a regional agreement to supply standard Federation computers to the operations in Asia Pacific, in order to mirror an existing ICRC global supply agreement.

On a similar note, and in view of the difficulties encountered in importing vehicles (as well as other equipment) into Indonesia, talks were carried out with an automobile manufacturer's representatives concerning the possible supply of tax and duty free standard Federation vehicles assembled in-country.

For the most part, activities during the current reporting period have been focused on the emergency response to the Nias earthquake. Sourcing of helicopters and boats, drafting of agreements and contracts, plus ad hoc purchases to support the establishment of the Nias base camp, were the key activities. In addition, standard tasks related to ongoing operations continued (equipping the service centres and supporting the expanding relief operations on the east and west coast.

Impact

The logistics team has managed to maintain a steady pace in support of the west coast operation; Meulaboh, Lam No, Calang and Teunom. Re-positioning of delegates to meet the increased demand has enabled the team to support the Nias and Simeulue operation. Deployment of the Danish logistics ERU has added vital capacity. Support from the Norwegian Red Cross with two technicians, generators and 12 Rubb halls added essential logistics capacity with regards to the Nias response.

The original logistics team has increased its workload substantially, while showing a commendable willingness and flexibility so that the Federation could respond in a timely and adequate manner. Excess stocks in Medan proved useful and allowed the Federation to be able to respond early and with impact.

Constraints

The 28 March earthquake resulted in landslides that temporarily interrupted the transport routes between Medan-Meulaboh, Medan-Singkil and Medan-Sibolga, delaying relief distributions. The key roads were cleared, and then re-opened as of 9 April. However, these roads remain vulnerable in case of new tremors or quakes.

The Nias earthquake posed a multi-faceted challenge to the Federation's tsunami logistics team. Human resources were overstretched and undermanned. The human resource capacity was designed to cater the needs of the well-assessed tsunami recovery operation. Key requested positions remained unfilled, considering an expansion of operations to the east coast, illness and routine end-of-mission departure of delegates, which taxed the logistics response on yet another difficult front.

There was not a pre-established infrastructure and presence in the main affected areas (the islands of Nias and Simeulue). As well, operations were initially constrained by a lack of additional, adequate transport resources; fixed-wing helicopters and marine landing craft. Bad weather made both sea and air operations initially hazardous. Difficulties were compounded by a shortage of fuel on both islands, as well as in the main areas identified as transit hubs for relief items and personnel.

Fleet management, HR management and coordination need emphasis as the logistics capacity continues to expand.

Objective 3 (health): primary health care service provided to the tsunami-affected communities and potential epidemics are prevented or adequately addressed.

Progress/Achievements

January

Following the disaster, two basic health care units (BHCUs) from the Japanese and German Red Cross societies were set up in Meulaboh and Teunom, respectively, as they were the most affected population centres along the west coast. At the outset, these two BHCUs served as operational bases as well, enabling teams to pursue ongoing assessments in the surrounding communities to identify IDPs requiring medical assistance and relief supplies.

In mid-January, with support from the Norwegian Red Cross, ICRC set up a referral hospital in Banda Aceh with an inpatient capacity of 100 beds, to ease the burden on overwhelmed Banda Aceh hospitals and to act as a referral hospital for patients in outlying areas of the west coast. To provide shelter and follow-up medical services, ICRC also set up camps for up to 400 discharged IDP patients and their relatives.

By the end of January, PMI had established 15 health posts and 11 mobile clinics in Aceh, providing health care to an estimated 70,000 people since the disaster.

The Banda Aceh branch was active in disinfection and vector control programmes. PMI also dispatched additional volunteer medical teams to affected areas.

With support from a British Red Cross health delegate, together with a member of the Federation's FACT team stationed in Meulaboh, PMI actively participated in the ministry of health/UNICEF measles vaccination campaign.

RCRC health activities in January

| RCRC | Communities served | Activities | Beneficiaries | Constraints/Comments |
|--|--|--|---|---|
| German RC ERU BCHU (active from 10 January) | Teunom | Basic health care services | Serving a population of up to 20,000 75 patients/day (ODP), cumulative to 30 Jan: 2,519 | Team rotation now complete |
| Japanese RC ERU BCHU (from 4 January) | Meulaboh and outlying communities (Aceh Barat, Nagan Raya) | - Medical support to Cut Nyak Dhein hospital (ICU, ER, OT) - BHCU in IDP camp - Needs mapping in outlying villages - Mobile health clinic to IDP camps - Measles and tetanus vaccination | - Up to 300 patients/day overall at the hospital - BHCU in IDP Total patients (25-30 Jan): 324 - Vaccinations (from 1–27 Jan): tetanus: 1,602 measles: 214 | Health assessment being carried out on Simeulue Island |
| ICRC Hospital (from 16 January) | Banda Aceh | Referral hospital | - 2,500 OPD (16-30 Jan) + average of 44 admitted patients/day | Also setting up camp for discharged patients (up to 400) |
| PMI | Banda Aceh, Lam No, Calang, Simeulue Meulaboh | - Mobile health teams - 34 doctors and 28 paramedics/nurses - Doctors working with BCHU + 30 PMI volunteers | - Estimated cumulative total of 70,000 patients (as of 27 January) | Eight to 12 teams operational at any one time. Other teams deployed directly by PMI chapters to affected area. |

Meulaboh (BHCU of Japanese Red Cross)

Japanese Red Cross focused its activities in the following four areas:

1. hospital support activities – mainly surgical (from 4 January)
2. mapping of surrounding villages in coordination with local authorities, identifying IDPs and providing basic health care
3. mobile health clinics to IDP camps (from 8 January) as well as the established BHCU in the expanding Meulaboh IDP camp (from 25 January)
4. tetanus and measles vaccination campaigns (from 18 January)

The Japanese RC BHCU ERU filled in the gaps in medical care in Meulaboh by working together with the town hospital's medical team, supporting the intensive care unit, emergency room and operation theatre. On 8 Jan, the Japanese ERU team ran a mobile health clinic for IDP camps, providing medicines and medical supplies, public health surveillance and triage in IDP camps (focusing on vaccinations and the most vulnerable). Additionally, 1,602 people were vaccinated for tetanus and 124 for measles by the end of January.

Between 25 and 30 January, the BHCU in Meulaboh saw a total of 324 patients, an average of 100 patients per day coming in for treatment.

Teunom (BHCU of German Red Cross)

The German Red Cross' ERU team arrived in Banda Aceh on 6 January, and set up its equipment and facilities in Teunom on 10 January, based on field assessments results and recommendations. By 12 January, the ERU was operational and fully deployed, supported by two local doctors and a team of 30 PMI volunteers.

The Teunom health clinic, which was totally destroyed, had functioned as a focal point for health care in the surrounding area, serving a population of approximately 20,000 people.

By 30 January, a total of 2,519 patients had been treated by the German Red Cross' BHCU.

ICRC

Since setting up its hospital with 100-bed capacity, providing surgery and maternity delivery, medical and surgery wards, a children's ward and an ICU, the ICRC hospital provided outpatient treatment averaging 120 to 200 cases a day and treating an average of 44 admitted patients per day.

February

The PMI health centre saw an average of 200-250 patients a day. It was reported by mid-February that patient numbers and diseases were appearing to stabilize. The most common diseases recorded were respiratory infection, skin irritation and trauma, or depression. Most cases were indirectly related to the after-effects of the tsunami, including unhygienic, unsanitary living conditions and unclean water.

By mid-February, the PMI health clinic faced a possible shortage in priority drugs needed to treat these diseases, while at the same time dealing with a surplus of seldom-used medical items, such as emergency health kits and infusion packs.

Meulaboh (BHCU of Japanese Red Cross)

The Japanese Red Cross has continued to play a significant role in the general coordination of hospital activities in close collaboration with the authorities. However, its activities began being increasingly taken over by national hospital staff. Up to the week of 6 February, only two orthopaedic surgeries were performed by the Japanese, with an average of nine admitted orthopaedic patients per day.

The Japanese Red Cross and PMI coordinated their mobile health clinics activities, covering 29 locations in total. The Japanese team continues to give tetanus vaccinations where appropriate.

Simeulue Island (BHCU of Japanese Red Cross)

The Japanese Red Cross carried out a follow-up assessment. Clinics were undertaken for two days on a trial basis and a total of 137 patients were seen. The PMI health team on the island implemented a weekly rotating four-day boat clinic schedule.

Teunom (BHCU of German Red Cross)

Between 30 January and 5 February, a total of 741 patients were seen through the out-patient department, and an average of 11 to 12 patients were admitted per day. Patients for referral were transferred by helicopter to the ICRC hospital in Banda Aceh.

Through 5 February, German Red Cross had treated a cumulative total of 3,032 patients at its BHCU. By the end February, the number of patients treated had reached 4,154.

ICRC

Up to 7 February, the total number of cumulative outpatients was 2,774, with admissions reaching 166 patients and averaging 46 admitted patients per day.

RCRC health activities in February

| RCRC | Communities served | Activities | Beneficiaries | Constraints/Comments |
|--|--|---|---|---|
| German RC ERU BCHU (as of 10 January) | Teunom | - Basic health care services | -75-100 patients/day (outpatient) – cumulative (up to 20 Feb): 4,154 | |
| Japanese RC ERU BCHU (as of 4 January) | Meulaboh + outlying communities (Aceh Barat, Nagan Raya) | - BHCU in IDP camp - Mobile health clinics - Vaccinations | - BHCU – Total patients (up to 12 Feb): 1,258 - Vaccinations (up to 12 Feb): 2,492 | Health assessment and mapping programme + vaccination campaign. Cut Nyak Dhein hospital support activities being handed over to local staff |
| PMI/ICRC Hospital (as of 16 January) | Banda Aceh | - Referral hospital | - 4,353 OPD (up to 19 Feb) + average of 58 inpatients/day (total admissions: 304) | Also setting up camp for discharged patients (up to 400) |
| PMI | Banda Aceh, Lam No, Calang, Simeulue Meulaboh | - 5 health posts and 11 mobile health teams | - Estimated 70,000 patients treated by the end of January | Eight to 12 teams operational at any one time. Other teams deployed directly by PMI chapters to affected area. |

March

The PMI mobile clinics continued to conduct their rounds on a regular basis. In the last week of March, they visited 20 villages in 15 sub-districts of Aceh Besar.

The measles immunization programme recorded around 80 per cent coverage of IDPs. The Federation's field delegates, however, indicated that many locations seem to have had poorly organized campaigns, which, combined with the population movement, made the figure somewhat doubtful.

Teunom (BHCU of German Red Cross)

Numbers of outpatients treated by the German Red Cross' ERU remained constant at between 60-100 patients a day. The total number of patients seen in the out-patient department had reached 5,820, with most admitted patients being treated for malaria.

Meulaboh and Simeulue Island (BHCU of Japanese Red Cross)

A total of 2,779 patients had been seen by the Japanese Red Cross' BHCU to date.

RCRC health activities as to the end of March

| RCRC | Communities served | Activities | Beneficiaries | Constraints/Comments |
|--|--|---|--|--|
| German RC ERU BCHU (as of 10 January) | Teunom | - Basic health care services | -60-100 patients/day (outpatient) – cumulative (up to 19 March): 5,820 | |
| Japanese RC ERU BCHU (as of 4 January) | Meulaboh + outlying communities (Aceh Barat, | - BHCU in IDP camp - Mobile health clinics | - BHCU – Total patients (up to 19 March): 2,779 - Vaccinations (up | Health assessment and mapping programme + vaccination campaign. Cut Nyak Dhein |

| | | | | |
|--------------------------------------|--|---|---|--|
| | Nagan Raya) + Simeulue Island | - Vaccinations | to 19 March): 2,826 - Mobile clinics: approx 2,900 cumulative | hospital support activities being handed over to local staff |
| PMI/ICRC Hospital (as of 16 January) | Banda Aceh | - Referral hospital | - 6,199 outpatients (up to 21 March) + average of 60 inpatients/day (total admissions: 597) | Also setting up camp for discharged patients (up to 400) |
| PMI | Banda Aceh, Lam No, Calang, Simeulue Meulaboh | - 5 health posts and 11 mobile health teams | - Estimated 70,000 patients treated by the end of January | 8 to 12 teams operational at any one time. Other teams deployed directly by PMI chapters to affected area. |

Most recent developments

Within the current reporting period since the publication of the last operations update, there has been no change in the general morbidity and mortality status. There have been some suspected measles cases reported in Lam No, Aceh Jaya and Aceh Besar. Acute respiratory infection still remains the main health complaint.

An earthquake in the area on 28 March, centred mainly on Nias and Simeulue Islands, followed by an ongoing series of aftershocks, spread panic among the communities in the most populated centres, with many fleeing to mountainous areas. Circulating rumours of more quakes only increased the worry and fear.

Project planning in support of the TWGs continued, with the main obstacle being delays in receiving required information from both the ministry of health and PMI. Some progress was made at PMI's provincial level through a series of meetings. Assessments in 12 districts, per the PMI plan, commenced during week 14, and three doctors were sent from PMI Jakarta to assist with these surveys. The main focus of the assessments will be to look more closely at community needs and the existing services, and to establish extent of requirements for mobile clinics and health posts, as proposed in the PMI plan of action. Also, an assessment of PMI branch capacities is being conducted in each district, in relation to existing and required human resources, as well as in regard to the level of current health programme activities.

Regular meetings and information sharing continue with PMI. There are indications that the PMI health coordinator may stay for a number of months rather than the one month which was originally planned. This will help ensure programme continuity. A PMI deputy health coordinator has been appointed as well. Meetings will be held with both the medical coordinator and deputy to help align roles and responsibilities between PMI and the Federation's delegates.

Mobile health clinics continued working in Aceh Besar and Banda Aceh, and the five static clinics in these areas remain operational.

Bilaterally, the Singapore Red Cross has been working with PMI in Meulaboh for two months, running mobile clinics. Each working day, the Singapore Red Cross' medical team, which comprises a doctor and two paramedics, joins the PMI team, made up of a doctor and two nurses, to visit the places identified by PMI. One of the Singapore team speaks Bahasa, which means that person can communicate with the local populace. The team provides medical treatment and medicines to 60-70 people on average at each clinic. The combined team provides children and mothers with baby milk, and performs minor surgical operations as required.

In the afternoons, when the medical team does not run a mobile clinic, the Singapore Red Cross' team helps at the emergency ward or the operations theatre of Meulaboh hospital. So far, the activities of Singapore Red Cross have been limited to Meulaboh district.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

During the reporting period, the Danish Red Cross, which is the Movement's PNS lead in psycho-social support in Indonesia, has provided specialized services in Calang and Kreungsabee districts. Danish Red Cross staff delivered a three-day workshop for 15 PMI youth volunteers, aged 15-18. In addition, psycho-social information sessions have been conducted in six schools and psycho-social activities for children were carried out in three locations.

The Danish Red Cross is providing psycho-social services based on assessments made by UNICEF, in addition to its own surveys. The Danes are also producing disaster information pamphlets that explain what natural disasters are and how to prepare oneself for and how to respond after disasters.

The outgoing Federation health coordinator left Banda Aceh on 26 March. Two new health delegates arrived on Saturday 2 April. One will be based out of Banda Aceh and the other will work in and from Meulaboh.

Teunom

The health situation in the area remains stable. The cumulative number of patients treated in the BHCU since 10 January is 6,111. The doctor and staff left the BHCU to work in the Teunom Puskesmas (health clinic) on 21 March. A clean-up around the *puskesmas* is ongoing and ERU equipment is slowly being moved there. One more doctor and 12 paramedics arrived from Banda Aceh on 22 March.

Meulaboh and Simeulue Island

The Japanese Red Cross completed its ERU deployment on 19 March and had a handing-over to PMI ceremony on 26 March. All of the ERU's medical equipment and stock was donated to the PMI, to Cut Nyak Dhein Meulaboh Hospital and to a local health centre. The Japanese team left on 26 March but quickly returned and went to Nias following the quake there on 28 March.

Nias

Due to communication difficulties that led to a lack of coherent health information about the situation on Nias, both the health coordinator and a health delegate went to the island for a two-day assessment in order to get up-to-date information on the situation.

The emergency phase is beginning to wind down, a decision which has been endorsed by the governor of Nias. There remain a number of medical evacuations for earthquake-related injuries; however, the numbers of remaining untreated injuries are now very low. Previously evacuated patients to Medan are now returning to the island. Also, the presence off the coast of an American and an Australian hospital ship means allows for closer destination of evacuated patients. Information from WHO indicates that disease prevalence is about the same as pre-quake, however the health situation will be closely monitored in the coming weeks.

The health delegate remained on Nias in order to accompany PMI volunteers doing mobile health clinics, to assist at the clinics, and to assess the extent of continuing needs.

Constraints

There was a delay in receiving information from the MoH with regard to the location of clinics in need of repair, and the medical logistician position continues to remain unfilled.

Objective 4 (water and sanitation): the spread/outbreak of infectious diseases is prevented through water and sanitation interventions.

Progress/Achievements

January

Rapid assessments of three IDP camps in Banda Aceh were carried out within the first three weeks of the month. It was noted that the sanitation situation needed to be addressed on an urgent basis.

By month's end, the Spanish Red Cross' ERU in Meulaboh was producing mass water at a daily rate of 240,000 litres, and supplying specialized water to 4,000 families and to four IDP camps. The German Red Cross' ERU was producing 36,000 litres for BHCU teams in Teunom and an additional 5,000 litres daily for local consumption by

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

the end of January. The French Red Cross' ERU on the eastern coast received an additional twenty 3,000-litre storage tanks for installation throughout their service area.

At the end of January, water was being supplied by Red Cross Red Crescent personnel and equipment to approximately 76,000 people on a regular basis throughout the affected areas of Aceh province.

Federation/PMI played a significant role in the critical days immediately following the tsunami in preventing the spread of water-related diseases.

Total litres of water produced in January: 451,000 litres daily (not counting 120,000 litres of specialized water produced daily by the French Red Cross); 58,000 IDPs plus 4,000 families benefited from this water distribution.

RCRC water and sanitation activities in January

| ERU Team | Location | Distribution (in litres) | Beneficiaries | Constraints/Comments |
|------------------------------|-----------------|---|--|---|
| Spanish RC (as of 5 January) | Meulaboh | <ul style="list-style-type: none"> • 246,000 litres (L) daily • 4 million litre mark reached 27 Jan | 4,000 families + 35,000 IDPs in four camps | Population moving back to traditional areas, need to have rehabilitation work complementary to the water distribution |
| French RC (as of 10 January) | Samalanga | 170,000L daily | 20,000 IDPs at 21 sites | Demand steadily increasing |
| German RC (as of 10 January) | Teunom | 35,000L daily | Min of 2,000 IDPs | |
| TOTAL | | 451,000L daily | 57,000 IDPs + 4,000 families | |

February

By the start of the month, over five million litres of safe water had been produced and distributed by PMI and the Federation. The water being supplied was well received by the local population. Approximately 80,000 people were benefiting from daily access to potable water.

Water and sanitation assessments were conducted on Simeulue Island 14 and 15 February. The Simeulue district authority allocated the northern half of the island (sub-districts of Simeulue Barat, Alafan and Salang) exclusively to PMI, and the southern half to other agencies.

Following field assessments throughout Aceh province, a plan of construction was recommended for latrines, for the rehabilitation of damaged water systems, the building of water facilities in areas without a pre-existing water provision network, and for PHAST-based (Participatory Hygiene and Sanitation Transformation) promotion and education based on the needs of each sub-district.

The PHAST participatory approach to water and sanitation projects is designed to promote hygiene, sanitation improvements and community management of water and sanitation facilities. Research and practice shows that involving communities in projects at all levels leads to much more successful projects.

Under PHAST, community groups are involved completely in discovering the routes of water-borne diseases, analyzing their own behaviours in light of this information and then planning how to block contamination routes. PHAST can help communities decide what they want from hygiene and sanitation projects, how these should be set up and paid for and how to ensure sustainability.

The Federation sent 150 PHAST manuals and posters in Bahasa Indonesian to UNICEF, who then distributed them to NGOs interested in the training of trainers' programme that began in March. A PMI facilitator was identified to conduct the training series.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

The constraints in the water and sanitation programme that the Federation/PMI faced during February were primarily caused by a lack of road access between districts. The Federation/PMI also faced difficulty in gaining access to the affected community along the west coast, particularly in Calang. The ongoing movement of IDP population caused significant difficulty as well for orderly planning to provide stable water and sanitation services.

Total litres of water produced in February: 580,000 litres daily (not counting 120,000 litres specialized water produced daily by the French Red Cross); 42,000 IDPs plus 4,000 families benefited from this water distribution.

RCRC water and sanitation activities in February

| ERU Team | Location | Distribution (in litres) | Beneficiaries | Constraints/Comments |
|--|-----------------|--|---|---|
| Spanish Red Cross (as of 5 January) | Meulaboh | Up to 350,000L daily | 4,000 families + estimated 20,000 IDPs in 4 camps | Rehabilitating town water network |
| French Red Cross (as of 10 January) | Samalanga | 180,000L daily | 20,000 IDPs at 23 sites | PMI running ops on a 15-test period as most of French team exited |
| German Red Cross (as of 10 January) | Teunom | 525,000L produced to date | Min of 2,000 IDPs | |
| Swedish/Austrian/Macedonian Red Cross (from 9 Feb) | Banda Aceh | 50,000 to 100,000L a day | Min of 4,000 families | |
| TOTAL | | 580,000L a day + 525,000L produced to date | 42,000 IDPs + 4,000 families | |

March

According to UNICEF, the major issues in IDP camps included the ratio of people to latrines, poor refuse collection and septic tank overflows.

A three-day PHAST training of trainers took place during the month. PMI/Federation provided 12 PMI participants, while other NGOs sent their own attendees, who in turn will be able to train their own volunteers working in the temporary living centres in the PHAST methodology. Upon recommendation from field assessments, the PHAST training topics included hand washing, the proper use of sanitation facilities, the protection of clean water, and proper disposal of rubbish to avoid health system breakdowns.

Total litres of water produced in March: 907,500 litres daily; 105,000 beneficiaries (82,000 IDPs and 23,000 local residents) benefited from this water distribution.

RCRC water and sanitation activities in March

| ERU Team | Location | Distribution (in litres) | Beneficiaries | Constraints/Comments |
|-----------------------------|-----------------|-------------------------------------|----------------------------------|--|
| Spanish RC (from 5 Jan) | Meulaboh | Up to 300,000L daily | Estimated 45,000 IDPs in 4 camps | |
| French RC (from 10 Jan) | Samalanga | 280,000 – 300,000L daily | 30,000 IDPs | PMI volunteers on board. French RC providing support to the operation. |
| German RC (from 10 Jan) | Teunom | 27,500L | 15,000 (of which 7,000 are IDPs) | |
| Swedish/Austrian/Macedonian | Banda Aceh | 300,000L daily | 15,000 | |

| | | | | |
|-----------------|--|----------|--|--|
| RC (from 9 Feb) | | | beneficiaries | |
| TOTAL | | 907,500L | 82,000 IDPs + 23,000 beneficiaries | |

Most recent developments

Activities continued concerning improvement of the water and sanitation conditions in and around the temporary living centres in Banda Aceh. The dense population in the city and ongoing population movements continue to make assessments a challenge. However, in the last two weeks the Federation, along with staff representatives from the provincial public works assessed four temporary living centres in the Ladong area of Banda Aceh. The various water and sanitation ERUs in Meulaboh, Sigils and Teunom have been entering into agreements with the public utility (PDAM) to assist with water and sanitation provision to selected temporary living centres. The Federation has been meeting with Oxfam and CARE to discuss water tankering in Banda Aceh, with the Federation having developed a coordination body for all tankering.

The Federation also assisted the British Red Cross to assess the water and sanitation needs at Berueh Island, north of Banda Aceh, where tests were made to ensure two villages on the island will be provided with safe, clean drinking water. Next, the British Red Cross will propose how they would like to integrate water and sanitation activities into their livelihood programme on Berueh Island. Currently, the Federation is planning for earthworks when the heavy machinery arrives, as well as assisting PMI to set up its own camp to provide the necessary aid to the communities of the island. With regards to hygiene promotion, the Federation has started the PHAST training of trainers (ToT) with the PMI volunteer training division. The groundwork for locating and securing venues for that training has been completed.

The consequences of the Nias earthquake brought more agencies forward to discuss the water and sanitation needs on Nias, Simeulue and the Banyak group of islands. One water and sanitation delegate was conducting assessments on Nias Island during the reporting period.

Banda Aceh

One more Berkefeld filtration unit was acquired in order to increase the water treatment and production process to 25 cubic metres per hour. This acquisition, coupled with the addition of ferrous sulphate to quicken flocculation, added to good water production rates and retention time in the process. PDAM water supply was used as the source for this water production. The ERU in Banda Aceh is still supplying agencies such as OXFAM GB.

Teunom

The training of local workers in filtration and water distribution has continued. To date, the total water production is 1,440,000 litres, with the German Red Cross producing approximately 27,500 litres per day. About 103,000 litres have been distributed in 14 bladder tanks used by some 7,000 IDPs and local residents. There has been an increased movement of IDPs, with some returning to their homesteads and setting up tents. Many others have moved into the temporary living centres.

Meulaboh

The Spanish Red Cross' water and sanitation ERU will stay and continue its work in Meulaboh. A strategy for eventually closing this activity will be coordinated with the Federation and PMI. During a wind-down period, the ERU will sustain the average daily production of water. Spanish Red Cross will reduce its tankering while constructing communal wells in the villages to supply displaced people with water.

The Spanish ERU is currently distributing water to more than 150 tanks that have been installed in the city and surrounding areas of Meulaboh. Also, in collaboration with the Indonesian Ministry of Public Works, the Spanish Red Cross also repaired some wells and sank new ones, depending on the needs of the local populace.

Sigli and Samalanga

The French Red Cross' ERU completed the training of PMI volunteers in Pidie district, who are now working under supervision of a French engineer and a locally-employed treatment plant manager. The French Red Cross' team has also been helping Oxfam by providing clean water to two temporary living centres. The team is currently formalizing its exit strategy from this area.

Nias Island

The Spanish Red Cross has identified four water and sanitation locations on Nias Island. The first is a resort at the top of the highest hill near Gunung Sitoli, where hundreds of people have taken refuge. The water supply at the resort relies upon a rainwater collection system. It was evident that there was a shortage of water for these displaced people.

The second IDP location is a group of houses near the road by a river, where the locals take spring water coming from two different sources in the immediate hills. The locals do not need any special attention since their water and sanitation conditions have not changed after the earthquake.

The third location is in an outer neighbourhood of Gunung Sitoli, near to the harbour, where the water sources are shallow wells and some springs. There is a river crossing near the harbour, however it is used as a sewer. A well will be dug for potable water distribution.

The fourth location is in the centre of Gunung Sitoli, where local residents subscribe to the PDAM water network. This water distribution system has been damaged at several points, from the intake treatment plant through to the urban network.

Simeulue Island

The Australian Red Cross visited Simeulue to conduct assessments on the island following the 28 March earthquake while the Federation's water and sanitation coordinator surveyed the island's water and sanitation situation.

Summary of water and sanitation activities - 24 March 2005 to date

| Water and sanitation ERU/PNS | Distribution/litres | Means of Distribution | Beneficiaries | Constraint/Comments |
|--|--|--|--|--|
| French RC (Sigli and Samalanga) | 2 water treatment and pumping stations are delivering 280,000 – 300,000 litres per day | 8 tanker trucks. 80 x 3000l tanks and 6 x 10,000-litre tanks used for distribution points | 60 Camps of 30,000 IDPs, PMI volunteers are on board and provide support the operation | |
| Spanish RC (Meulaboh) | Up to 245,000 litres / day. 7 Mobile Water Plants (MWP) produce 4,000lt/day working 15 hrs/day | 21 tankers (5 from water company-PDAM, 3 from Spanish RC, 3 from OXFAM, 5 from Waskita., 1 from TIN (army), 1 truck (Trakindo) | Estimated 45,000 IDPs in 4 camps + specialized water to Japanese RC BHC team. | <i>Met the acting Representative, discussed their plan for Meulaboh and outlying towns and villages.</i> |
| German RC (Teunom) | Produce about 27,500 l per day | 14 bladder tanks set up in town, and the IDPs settlement | At least 15,000 (7,000 IDP) and local residents from the water as well as the BHC site | <i>Will soon end mission as ERU but continue to operate with trained PNS staff and volunteers .</i> |
| Austrian/Malaysian/Macedonian RC (Bandar Baru) | 300,000lt/day Operational in the Banda Aceh City and its environs also | 23 Tank and Distribution points, water trucked to | 15,000 people | |

Impact

The capacity of PMI has increased, especially in the areas of procuring, treating and distributing safe and clean water during emergency and rehabilitation phases. The number of people and agencies benefiting from water produced by the Red Cross is steadily increasing, resulting in additional production facilities being set up in Banda Aceh (40,000 litres per hour filtered). It is now estimated that water is being provided to approximately 105,000 beneficiaries (inclusive of IDPs) on a regular basis.

Constraints

- Many of the temporary shelters were built with poor latrine design and water sources. The Federation is assisting PMI to address these problems beginning with the distribution of clean water to the temporary settlements and temporary living centres.
- PMI counterparts still need to be appointed.
- IDP movements present a very fluid working environment, making assessments a challenge. This also relates to the situation on Nias Island.
- Damaged roads presents a challenge for the Spanish water and sanitation team to distribute water on Nias, particularly in the capital of Gunung Sitoli.

Objective 5 (telecommunications): fast and reliable means of communication is secured in the areas of the relief operation.

January

After preparing temporary facilities for PMI and the FACT team in Medan during the first week following the tsunami, the working environment in the Toyota dealership in Banda Aceh was set up during the second week with laptops, printers and a wireless broadband Internet connection. These two installations were followed by the establishment of telecom and IT facilities in Meulaboh.

A pool of satellite telephones provided critical communications in Banda Aceh when the mobile phone network was clogged with traffic generated by the great numbers of NGOs arriving on the scene. Mobile phones were also put into service on an alternate phone system active in areas where the GSM network was either overloaded or not present.

Radio license negotiations, represented by PMI, commenced with the Indonesian Ministry of Communications. VSAT negotiations and contract signing took place for extended Internet service in Banda Aceh and Meulaboh. Telecommunications and IT support of ERUs continued in the PMI/Federation operational areas.

February

A Federation-controlled VSAT Internet connection was set up in Banda Aceh. VHF and HF radio licenses were granted to PMI/Federation by the government.

The installation of a fully functioning office setup was completed in Meulaboh and in Banda Aceh, and radio usage training for PMI and Federation staff took place in Banda Aceh. The initial installation of VHF and HF radios for PMI went ahead.

March

A VSAT Internet connection was set up in Meulaboh. Office facilities with a leased-line Internet connection were installed in Medan and in the Jakarta service centre. Agreements for local procurement of computers and office equipment were negotiated.

Local IT staff were hired and trained in Jakarta and in Banda Aceh. In the last days of March, the Nias operational office was set up in Gunung Sitoli.

Most recent developments

Achievements in this reporting period include a rapid completion of the Nias office setup. Immediately following the Nias earthquake, one telecom delegate was sent with the assessment team to Nias, and after a preliminary survey, a second telecom delegate joined the team on Nias to set up the office equipment and a means of communications.

The Spanish Telecom ERU arrived on Nias on 7 April and took over the telecom support and installations on Nias. On Nias, the Federation's telecom delegate is currently supporting the telecom and IT needs of fellow delegates, PMI staff, ERU personnel and PNS representatives. Coordination and sharing of equipment between the different actors continues to be a necessity at this emergency stage of the operation.

The service centre facilities in Jakarta and in Banda Aceh have been set up with high-speed wireless Internet

connection, printers, Internet access kiosk computers, file server services, and general IT support is now available in both locations.

HF and VHF radios have been installed in Banda Aceh all-terrain vehicles, and repeaters and base stations are being set up in Nias, Meulaboh and Banda Aceh. A network of HF and VHF radios is also being installed for coordination of PMI and Federation activities on Nias and in Aceh.

Sri Lanka

Overview

On 26 December 2004, the world witnessed the most devastating natural disaster of modern times when an earthquake in the Bay of Bengal triggered tsunamis that swept across the Indian Ocean. In Sri Lanka over 31,000¹ people lost their lives, 21,000 were injured and 5,000 remain missing. More than 500,000 were forced from their homes. Latest government figures as of 14 March put the total number of IDPs at 519,063, with 96,646 living in 267 different camps and 422,417 staying with family and friends.

The nature of the destruction in Sri Lanka distinguishes it from other disasters. Rather than one large area being affected, the tsunami hit a narrow coastal strip, presenting a unique challenge to relief agencies. Up to 70 per cent of the coast was damaged; however the impact varies dramatically over very short distances, with the waves reaching from 50 metres to one kilometre inland. In the areas affected, the tsunami decimated much of the population, infrastructure and natural environment. The influx to adjacent districts of traumatized survivors in need of humanitarian assistance has also taken its toll. The longer-term impact on employment in tourism and related industries will be considerable.

Red Cross Red Crescent Response

In the hours following the tsunami, the Sri Lanka Red Cross Society (SLRCS) was first on the scene providing immediate assistance. Over 5,000 SLRCS volunteers, of which 1,850 were trained in first aid, distributed relief items, food and water, administered basic first aid, helped recover bodies and trace the missing, managed accommodation of displaced people in welfare centres, and provided psychological support to a traumatized population.

A Red Cross and Red Crescent Movement (the Movement) tsunami task force chaired by SLRCS was immediately set up in Colombo, as a preliminary coordination and information sharing body for the national society, the International Federation of Red Cross Red Crescent Societies (the Federation), the International Committee of the Red Cross (ICRC) and other national societies. The Federation responded with the immediate deployment of eight ERUs. These fully equipped, self-contained units provided specialist support in the areas of health, water and sanitation, relief, logistics, and telecommunications to the overall relief operation. ICRC mobilized additional delegates and began expanding its operations to meet the needs of the tsunami-affected population. Immediate additional support was provided in the fields of tracing and messaging, medical support, relief distributions and water and sanitation.

Three months on, the Movement is well on the path to assisting the recovery and rehabilitation of the most vulnerable tsunami-affected communities. The focus now is to provide medium- to long-term support to improve the lives of those affected, through both disaster response and initiating disaster preparedness and risk reduction programmes to minimize the impact of future catastrophes.

Post-tsunami recovery and rehabilitation is not without its challenges. The sheer scale of the destruction calls for a complex recovery and rehabilitation response. The Movement is operating within the framework of the largest known international aid operation. Over 70 national societies contributed to the post-tsunami relief efforts and more than 30 are directly involved in the relief and recovery operations. The Movement must ensure that an appropriate, sustainable workforce and mechanisms are in place to coordinate the massive mobilization of support and to guarantee accountability at every step to the donors and beneficiaries.

¹ TAFREN Rebuilding the Nation action plan www.tafren.gov.lk

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

The disaster rendered over 230,000 families homeless, creating a vast housing shortage. The government has imposed a 'buffer zone' prohibiting reconstruction within 100 – 200 metres of the coastline which raises issues of resettlement and compensation for a displaced population that is dependent on its proximity to the sea for its livelihood. Over 90 health structures sustained physical damage and loss of staff and equipment. SLRCS and the Federation have committed to build 15,000 houses and rehabilitate at least 34 health infrastructures but there is a recognized chronic shortage of skilled labour, as well as concern about a potential shortage of materials. Water and sanitation facilities, including wells and latrines, were damaged or destroyed by the flood waters. Displaced populations, many of whom lost most or all of their household possessions, are placing additional strain on the infrastructure in areas not directly affected by the tsunami.

For maps and reports on the general background of the disaster in Sri Lanka please refer to <http://www.lk.undp.org/ndmc>.

Coordination

The Sri Lanka government set up the Centre for National Operations (CNO) on 29 December to oversee the emergency phase of relief operations. The CNO was closed on 4 February and the Task Force for Relief (TAFOR) was established in partnership with the various government ministries to take over the relief operation and related functions of the CNO. Within TAFOR is the Task Force for Rebuilding the Nation (TAFREN), to ensure smooth progress on the reconstruction and rehabilitation work in the tsunami-affected areas. TAFREN's objectives are to facilitate and assist government institutions and agencies in the construction and rehabilitation of required infrastructure and other facilities to ensure accelerated economic development and to assist people and organizations to rapidly overcome the effects of the disaster. The national government recognizes the key role the Movement has to play in reconstruction and rehabilitation and has specifically requested the assistance of Red Cross Red Crescent disaster management experts to advise on how to set up community-based disaster management networks. A focal point has been identified within TAFREN to facilitate liaison between the task force, government departments and the Movement to support the Movement's reconstruction and rehabilitation programme.

At the same time, all components of the Movement are involved in regular coordination and information sharing meetings in Colombo and at the field level with UN agencies and other local and international relief organizations participating in the post-tsunami response.

Red Cross Red Crescent Coordination

The Secretary-General of the Federation called the earthquake and tsunamis "the most devastating natural disaster in modern times". The response to the disaster is on the same massive scale, particularly as a result of the extraordinary generosity demonstrated by local and international communities, aid agencies and governments. The complexity and time-span of the recovery operation call for strong coordination between Movement partners, other aid organizations, UN agencies and governments. From the initial stages, cooperation and coordination mechanisms for all Movement partners were in place, as outlined below:

January

Regular coordination meetings hosted by SLRCS were held for all Movement components. The Movement tsunami task force chaired by the national society was immediately set up in Colombo, as a preliminary coordination and information sharing body for SLRCS, the Federation, ICRC and other national societies.

The Federation, ICRC and SLRCS conducted coordinated assessments across affected areas. Primary assessment missions included deployment of the Federation's FACT in December and the recovery assessment team (RAT) in January. Both teams comprised specialist representatives of SLRCS, the Federation and ICRC.

National societies and delegations in the South Asia region responded immediately to assist SLRCS in its post-tsunami operation:

- **Bangladesh Red Crescent** immediately sent 7,800 family kits from Bangladesh disaster preparedness stocks and the society's director, a disaster management expert, participated in the Red Cross Red Crescent rehabilitation assessment team in Sri Lanka.
- **Nepal Red Cross** deployed three disaster management staff members in their capacity as RDRT members and provided significant support to the SLRCS in running its relief department.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

- **The Federation's delegation in Afghanistan** sent one staff member to Sri Lanka as a RDRT member to provide support in warehouse management for the relief operation.
- **The Federation's delegation in India** sent the head of delegation and construction coordinator to participate in the rehabilitation assessment team in Sri Lanka.
- **South Asia regional delegation (SARD)**: the disaster management manager participated in the rehabilitation assessment team in Sri Lanka; the programme coordinator helped support operations, examine rehabilitation issues, etc. Delegates from the Finnish, German, Spanish and American Red Cross societies based in India were also involved in the relief operation in various countries.

February

- On 18–19 February, the Movement's coordination meeting on the rehabilitation and reconstruction phase of the ongoing tsunami operation took place in Colombo to confirm mechanisms for coordination and cooperation in Sri Lanka; findings were presented of the Federation's recovery and reconstruction assessment team following its comprehensive assessment of the situation and potential Red Cross Red Crescent participation in the rehabilitation in Sri Lanka; the potential sectoral and divisional support of partner national societies working in Sri Lanka over the mid- to long-term was mapped as well.
- The Movement organizational framework was formally endorsed by SLRCS, the Federation and the ICRC in February 2005.

March

- SLRCS, Federation, ICRC and PNS participated in the Red Cross Red Crescent Tsunami Response Forum in Hong Kong from 3-5 March.
- The Movement organizational framework became functional, consisting of the following components:
 - the Movement platform which brings together senior governance and management of the three parts of the Movement (SLRCS, Federation and ICRC) to identify and oversee the Movement's strategies, policies and priorities at country level;
 - the Movement partnership task force which consists of operational managers and coordinators from SLRCS, Federation and ICRC to coordinate and monitor the Movement's humanitarian response. The task force consults and reviews decisions with the PNS through a weekly consultation meeting in addition to having the individual SLRCS, Federation and ICRC task force members ensuring that task force decisions incorporate the results of consultations with their own bodies and the PNS; and,
 - the technical committees with programme managers and technical specialists or consultants from the SLRCS, the PNS, the Federation and ICRC whose responsibilities are to adopt and promote coherent approaches to common operational challenges within each programme sector.

The Movement platform is focusing on avoiding duplication of rehabilitation work and maximizing the resources available. Tsunami-affected areas have been grouped geographically. Central areas have been divided similarly. PNS have been advised to concentrate on activities in two geographical areas at the start of operations. The following areas have been earmarked by PNS; multi-lateral proposals will be submitted by the Federation delegation's technical departments and processed in the same manner as for PNSs:

Table of geographical areas/interests of PNS across tsunami-affected areas in Sri Lanka

| Geographical areas | | PNS interest |
|---------------------------|---|---|
| North | Jaffna, Killinochchi, Mullaittivu | Danish, Australia, Canadian, German, Austrian/Swiss, Belgium – Luxembourg, multi-laterals |
| East | Batticaloa, Trincomalee, Ampara | Japan, Austrian/Swiss, Sweden, Norwegian, British, French, Hong Kong branch of China Red Cross, Saudi, German, Finnish, Danish, Italian, multi-laterals |
| South | Hambantota, Matara, Galle | American, Netherlands, Spanish, Turkish, British, French, Canadian, Saudi, Norwegian, multi-laterals |
| West | Colombo, Gampaha, Puttalam and Kalutara | Japan, Belgium-Luxembourg, Spanish, multi-laterals |

Representation

Given the scope of the disaster and corresponding international and national response, a number of high-profile visitors have travelled to Sri Lanka to see the SLRCS, Federation, ICRC and PNS providing post-tsunami assistance. These visitors include: former Presidents of the USA; the President of the International Federation; HRH the Prince of Wales; and HRH the Crown Princess of Sweden.

Red Cross Red Crescent Response

Overall Goal: Up to 40,000 families (about 200,000 people) in the south of the country receive immediate relief, shelter, health and care, and community support over the next six months.

Objective 1 (water and sanitation): Adequate sanitation and water supply provided to a selected number of temporary shelters/welfare centres, and water and sanitation systems to serve the affected population.

The tsunami damaged or destroyed an estimated 45,000 toilets/latrines and polluted 76,000 ring wells. The establishment of up to 300 temporary settlements housing 100,000 displaced people put additional pressure on the government for provision of water sanitation facilities. However, by February 2005, government reports indicated that there were no major water shortages in affected areas along the south coast of Sri Lanka. Pipelines were re-connected where possible by the local water board, which continues to provide water tankers where there is a gap in water supply.

Sanitation in the north, east and south remains a problem especially in camps for internally displaced persons. However, given the fluid nature of the situation and the lack of clarity regarding relocation plans (when and where people will be moved), it has been harder to plan for these facilities. Well cleaning activities are ongoing in the south and east; it is clear that it may be some time before these wells can be used again as the surrounding grounds are saturated with salt. It is still unclear if the government's 100-metre buffer zone is going to be fully implemented and, therefore, to what extent affected houses and sanitary and water facilities need to be rehabilitated.

Coordination

Throughout December 2004 to March 2005, coordination meetings were held between the Federation, PNS and other organizations to optimize water sanitation operations and interventions in Sri Lanka. The Federation, together with other international non-governmental organizations, attends national-level weekly (changed to bi-weekly in February) coordination meetings with the ministry of urban development and water supply and the national water supply and drainage board. Specific discussions on rebuilding the water supply and sanitation facilities have been divided into three stages: 1) immediate requirements; 2) restoration of services (end of 2005) and 3) expansion of services (up to 2010). The Federation also participates in sub-committees on hygiene education and sanitation.

Weekly sectoral meetings have also been held at district level, essential for the allocation of water and sanitation projects which is being done at district level according to the government's current coordination mechanism. Coordination meetings also take place at the SLRCS headquarters in Colombo. In the past weeks several PNS have conducted water and sanitation assessments in the southern part of the country. Feedback from the Netherlands and the Australian Red Cross societies indicated possible short-, medium- and long-term water sanitation interventions, ranging from sanitation hygiene assessments to supporting local medical officers to monitor water quality.

In the Movement, the technical committee for Red Cross Red Crescent water and sanitation activities started functioning in March. SLRCS, Federation and ICRC are joined by an average of eight PNS for the weekly committee meetings which discuss coordination issues, relevant activities and planned programmes.

Red Cross Red Crescent capacity

SLRCS: Since 26 December, SLRCS has been involved in distribution of clean drinking water to affected populations, and ensuring sustainable access to water and sanitation through activities such as well cleaning. SLRCS capacity in the field of water and sanitation has been increased via on-the-job training of SLRCS volunteers in operating well cleaning and water purification equipment. The SLRCS has experience in well

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

cleaning following major floods in Ratnapura in 2003. In February the SLRCS started recruitment to expand capacity at branch and headquarters levels.

Federation: The Federation deployed two water sanitation ERUs (German and Swedish Red Cross) in January which worked closely with SLRCS to provide access to clean water and sanitation through water purification systems, cleaning wells and building latrines. These ERUs have been providing clean water to an average of 35,000 people daily since the tsunami struck. However, the number of beneficiaries has fluctuated depending on the water source and the number of IDPs in the area. The Swedish ERU closed in March, and the German ERU will become an integrated part of Federation activities in mid-April.

As of February, the Federation's delegation in Colombo has two water and sanitation experts working to support SLRCS. In March the Federation's water and sanitation delegate attended a global water and sanitation meeting in Dubai, organized by the Secretariat in Geneva for 12 participants from Africa, Americas, Asia and from national societies to share information, follow up on water and sanitation programmes, discuss the launch of the Global Water and Sanitation Initiative (GSWI) in Geneva last week, prepare a manual to include the PHAST approach within the Red Cross and Red Crescent context and other global water and sanitation-related issues.

In March, the Federation was preparing to take over operation of the ERUs. By 15 April, all the ERUs are expected to be fully integrated into the Federation's operation. Two gully bowsers (for emptying sewage tanks) are now operating in Pottuvil.

Month-by-month details of the **water and sanitation** programme are included in the table s below.

| <i>Activities in January 2005</i> | |
|---|--|
| German Red Cross' water sanitation ERU | <ul style="list-style-type: none"> Set up in Komari, Ampara on 3 January, this six-member ERU trained 10 SLRCS volunteers to produce up to 110,000 litres clean drinking water daily for 20,000 people in 12 IDP camps between Komari and Pottuvil. By 25 January, 150,000 litres daily was reaching 30,000 people, including an additional 14,000 in Arugam bay. |
| Swedish Red Cross' water sanitation ERU | <ul style="list-style-type: none"> Based in Ampara, the ERU set up nine Oxfam water tanks with a capacity of 11m³ each to store water supplied by the German Red Cross' ERU via MoH tanker trucks. The unit planned to clean 2,810 wells via five teams of four people cleaning 50 wells per month and planned to construct 100 permanent latrines in Pottuvil. Supported the German Red Cross' ERU with two extra bowsers to pump water. Provided Finnish Red Cross' health ERU with a bathhouse, latrines and water tank (5 m3 bladder tank with tap stand). |
| French Red Cross' bilateral | <ul style="list-style-type: none"> Based in Arugam bay, set up water purification system with equipment left behind by a French military medical unit in Pottuvil for 10 days. Produced 40-50 m³ daily for 20,000 people, meeting local needs of 20 m³ per day and supporting the French health ERU needs. On 26 January, the water source in Pottuvil was contaminated by salt, and a water treatment system moved north to Ampara. The German Red Cross' ERU continues to provide water to the area previously served by the French Red Cross team. Helped SLRCS to clean 1,500 wells between Kalmunai and Maruthaimenai and repair the water network in these areas, although well cleaning was delayed in January due to heavy rains and burial of many people next to wells. |
| Italian Red Cross bilateral | <ul style="list-style-type: none"> Deployed a mobile water purification line capable of producing up to 75,000 litres of high quality water which can be distributed either in one-litre plastic bags or directly into water tanks. The water plant is now operating in the SLRCS local branch premises in Batticaloa. The purified water is distributed to hospitals, schools and camps throughout the district. On the request of the district water and drainage board authority (DWDBA), relocated the water plant to Valichchnai, north of Batticaloa, to cover all the needs of the northern area. SLRCS will provide 10 volunteers who will be trained in order to operate and maintain the water purification unit equipment which will be transported back to Batticaloa at the end of the project. SLRCS will also allocate two water bowsers in Valichchnai for continuing the |

| | |
|-------------------|---|
| | water distributions in the area. |
| Spanish Red Cross | <ul style="list-style-type: none"> Cleaned 200 wells for 8,000 beneficiaries in Hambantota, with assistance from 20 SLRCS volunteers. Belgian Red Cross also cooperated with well cleaning. Cleaning debris in Galle and Kalutara districts for 700 beneficiaries, with assistance from 1,000 SLRCS volunteers. By 3 February more than 600 houses were cleaned. |
| SLRCS | <ul style="list-style-type: none"> SLRCS provided 12 water bowsers (trucking water) operating in Matara, Trincomalee, Ampara, Galle, Batticaloa, Kalutara, Kilinochchi, and Mullaitivu. Cleaned 318 wells in Matara (1,590 beneficiaries); 180 wells in Hambantota (900 beneficiaries). Installed 20 water tanks (2,000-litre capacity per tank) in Kalutara. Installed 65 water tanks (2,000-litre capacity per tank) in Bentota, Galle. Cleared debris at household and community levels in Galle and Kalutara; 7,000 beneficiaries (Affected people get cash-for-work to support their livelihood). |
| ICRC | <ul style="list-style-type: none"> Cleaned wells, provided latrines, water distribution systems and washing facilities in transit camps and welfare centres, supplied national water supply and drainage board with 480 tons of aluminium sulphate to purify drinking water. |

Activities in February 2005

| | |
|--|--|
| German Red Cross water sanitation ERU | <ul style="list-style-type: none"> The ERU location was moved when the existing water source dried up. Identifying and establishing the new site took place in a record one day with no pause in water purification and distribution. |
| Swedish Red Cross water sanitation ERU | <ul style="list-style-type: none"> By 16 February, 562 of the wells were cleaned, benefiting 2,810 people. The ERU also provided an additional 70m³ tank and a 5m³ bladder for water storage. |
| French Red Cross bilateral | <ul style="list-style-type: none"> Set up water treatment plant to provide 40 m³ of water daily in Northern Ampara. |
| Italian Red Cross bilateral | <ul style="list-style-type: none"> Continued activities as in January. |
| Spanish Red Cross | <ul style="list-style-type: none"> Continued activities as in January. |
| SLRCS | <ul style="list-style-type: none"> Continued activities as in January. |
| ICRC | <ul style="list-style-type: none"> Continued activities as in January. |

Activities in March 2005

| | |
|---|---|
| German Red Cross' water sanitation ERU | <ul style="list-style-type: none"> In response to serious water needs in the north of Ampara, a second team, with 10 SLRCS volunteers set up water purification systems in Kalmunai, providing 453,000 litres of clean water in its first week of operation. The equipment was provided by Red Cross and Red Crescent warehouse stores in the Mullaitivu district. The area was previously provided with water, at a rate of 200 m³ daily, by the Canadian army which withdrew in March. ERU team in Pottuvil produced up to 200,000 litres water daily. ERU has requested 500 kg of lime from the Federation for water purification. |
| Swedish Red Cross' water sanitation ERU | <ul style="list-style-type: none"> By 16 March all 2,810 wells were cleaned. Each well serves five people for a total of 14,050 beneficiaries. 300 latrines were built; each latrine serves five families, total number of beneficiaries is 7,500. Swedish ERU team leaves Sri Lanka. One staff member joins the Federation as a water and sanitation delegate. |
| French Red Cross bilateral | <ul style="list-style-type: none"> The water source in Northern Ampara dried up, creating problems. By 2 March the team in Northern Ampara was providing and distributing 70,000 litres of water daily from a new water source. |
| Italian Red Cross bilateral | <ul style="list-style-type: none"> Problems with the water unit operating at the new location in Valichchnai due to worsening condition of the water source. Relocation to Kattankudy due in April to start producing 25,000 litres daily, directly into tanks and via 1-litre packaged water. |
| SLRCS | <ul style="list-style-type: none"> Continued activities as in January and February. |

| | |
|------|--|
| ICRC | <ul style="list-style-type: none"> Continued activities as in January and February. |
|------|--|

Objective 2 (shelter): Temporary shelter provided to up to 15,000 families (about 75,000 people) whose houses have been destroyed and have no extended family to live with.

The tsunami displaced over 500,000 people along Sri Lanka's coastline. An estimated 100,000 are still living in 267 temporary shelters across the island. In addition to providing temporary shelter, the government has estimated a need for up to 75,000 new permanent houses.

An interim housing plan was announced by the Sri Lankan government on 20 January, encouraging international and non-governmental organizations to provide pre-fabricated houses for some 50,000 families currently housed in temples and schools in tsunami-affected areas of the country. The government's reconstruction plan will also look at disaster preparedness mechanisms – in particular the Sri Lanka Institute of Architects, responsible for approximately 15,000 houses in the south and east, will aim to incorporate new disaster resistance designs into their plans including high-level platforms within neighbourhoods for local communities to gather in case of disaster.

Red Cross Red Crescent capacity

SLRCS has been involved in distribution of tents since the tsunami struck, and assisted in relocation of displaced families to schools, temples and other public buildings. The Federation responded with the deployment of an American Red Cross relief ERU which continues to distribute tents and tarpaulins. Since the operation began, the Federation/American Red Cross relief ERU has distributed 692 tents and 39,837 tarpaulins. These figures do not include the tents and tarpaulins distributed bilaterally by various PNS.

In response to the government request, SLRCS presented a memorandum of understanding (MoU) to the Sri Lankan president pledging to construct 15,000 permanent houses for victims of the tsunami. However, the Movement is facing a number of constraints in the area of reconstruction. Large numbers of the population are still living in tents which will provide inadequate shelter during the coming monsoon season. For reconstruction of permanent houses, the land allocated is not necessarily suitable for relocation, for example, it is several kilometres inland and unsuitable for fishermen who need to be near the coast; land provided will create congested villages, whereas previously populations lived on long stretches of the coast and are used to spacious surroundings. The government has imposed a buffer zone preventing reconstruction 100-200 metres from the coastline, which will force populations away from the sea and have a strong impact on fishing communities. In addition, Sri Lanka has a general shortage of skilled labour and materials for construction. In an average year 4,000 houses are built on the island – the scale of the tsunami recovery operation is massive in comparison.

The need for tents is declining as time goes on, however the Movement is involved in providing suitable waterproof tents for families currently living in ones that will not withstand the coming monsoon season. The usage of tents has been an issue since the tsunami struck, with the Government of Sri Lanka applying strict guidelines to tent distribution in an effort to prevent 'tent cities' from springing up all along the coastline.

The Federation's construction coordinator joined the delegation on 6 April. The terms of reference for consultancy services and project management of community housing projects have been completed. The next stages in construction of houses will be a preliminary survey and project proposal; architectural plans, designs, specifications, cost estimates; supervision and quality control by SLRCS and Federation.

Month-by-month details of the **shelter** programme are included in the tables below.

| <i>Activities from January-March 2005</i> | |
|---|--|
| Federation/relief ERU | <ul style="list-style-type: none"> Operational in Galle, Matara, Hambantota from 5 January, operational in Ampara from 31 January when two team members moved there. The first round of distributions comprised tents and tarpaulins. In March, the second round of distribution took place. So far, 692 tents and 39,837 tarpaulins distributed. |
| SLRCS | <ul style="list-style-type: none"> SLRCS signed a MoU with Sri Lankan government to construct 15,000 houses for |

| | |
|-----------------|---|
| | <p>tsunami-affected families.</p> <ul style="list-style-type: none"> • SLRCS attended a ceremony to officially announce housing reconstruction project, officiated by the President of Sri Lanka. • Distributed tents and assisted people to pitch and repair tents. • Registered people living in camp in Ampara. • Provided and distributed SLRCS logo banners for publicity. |
| Malta Red Cross | <ul style="list-style-type: none"> • Constructed 65 permanent houses in Rekewa, Hambantota. • Two volunteers on unpaid leave from Malta Red Cross overseeing operation, rotating every month. • Seven contractors worked on building houses. • Three houses completed but still need plastering and painting. • 18 houses half-finished. • Excavation and foundations for remaining houses under way. |
| Swiss Red Cross | <ul style="list-style-type: none"> • Distribution of 4,885 tents, via 15 volunteers working in 15 teams for 47 days helping people to pitch tents. |
| ICRC | <ul style="list-style-type: none"> • Supplied close to 5,000 tents and 10,000 plastic sheets to displaced families |

Objective 3 (immediate livelihood restoration): The minimum livelihood requirements provided for up to 40,000 families (about 200,000 people) whose houses have been destroyed and have lost their belongings.

Red Cross Red Crescent capacity

In an effort to improve the living conditions of those people affected, the Federation/American Red Cross' relief ERU arrived in Sri Lanka and started relief distributions in the south on 5 January. Distributions have since expanded to cover Ampara district in the east (starting at the end of January) and Killinochchi, Kiran and Valaichenai in the north. At the same time, SLRCS, ICRC and various PNS started distributions of both food and non-food relief items, and shelter (please refer to objective two for details on distribution of tents and tarpaulins). So far, distribution of non-food relief items by the Federation/American Red Cross' relief ERU with support from SLRCS has reached over 200,000 individuals. At the same time, SLRCS and other PNS have distributed food and non-food items to tsunami-affected people along the coastline.

Support to livelihoods is ongoing and forms a major part of medium- to long-term programming. In particular, SLRCS and other PNS are assisting affected populations via distribution of boats/fishing equipment; provision of work via cleanup operations. Regarding renewing fishing capacity in the affected regions, the Food and Agriculture Organization (FAO) has stressed that build up of excessive fishing capacity must be avoided to ensure sustainability of the industry. It commented that fishing capacity generally should not exceed the levels that existed prior to the tsunami to guarantee continuing productivity over future generations. Careful coordination is urged among relief agencies.

Up to 120 people will be trained or retrained in carpentry, masonry and electrician skills with the assistance of the national apprentice industrial and technical authority to support the relief effort and replace the huge numbers of skilled workers lost to the tsunami. The trained workers will receive appropriate tools at the end of each course.

The Federation's logistics team has identified a warehouse in Ampara; the Federation's logistics coordinator will finalize this later in April. The Ratmalana warehouse is now closed and the Global Park warehouse is due to close by the end of April. Truck drivers in Ampara have been identified and have signed contracts on 11 April.

Month-by-month details of the **relief** and **logistics** and **telecommunications** activities are included in the tables below.

| <i>Activities in January 2005 for relief</i> | |
|--|--|
| American Red Cross Relief ERU | <ul style="list-style-type: none"> • Operational in Galle, Matara, Hambantota from 5 January, operational in Ampara from 31 January when two team members moved there. Staffed by six team members plus locals. • Distributions conducted by SLRCS volunteers trained by ERU staff. Volunteers received daily allowance and lunch. Poor roads and bad weather hampered the process. All beneficiaries were identified by government and provided with government ration cards. |

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

| | |
|--------------------------|--|
| | <ul style="list-style-type: none"> • Distributed relief goods from 40,000-ft Galle warehouse, set up on 5 January by SLRCS volunteers and British Red Cross' logistics ERU in cooperation with local port authorities. • In Ampara, British Red Cross' logistics ERU set up a second warehouse in Siyambalanduwa. |
| Federation's relief team | <ul style="list-style-type: none"> • Worked closely with American Red Cross' relief ERU to manage distributions. • Disaster management delegate arrived in Trincomalee to support branch capacity development. • RDRT team from Bangladesh visiting all SLRCS branches in affected areas to build reporting and disaster management capacities. • At the request of the Maldives the Federation diverted 150 body bags from its warehouse in Colombo. |
| Korean Red Cross | <ul style="list-style-type: none"> • Provision of insect spraying equipment in Matara. |
| British Red Cross | <ul style="list-style-type: none"> • Work-for-cash programme in Matara, targeting vulnerable populations. • Over 5,000 man hours worked cleaning debris, excavating flooded areas to prevent mosquito breeding. • Communities provided with tools and equipment for cleaning |
| Spanish Red Cross | <ul style="list-style-type: none"> • Purchase and distribution of 25,000 sarongs, 25,000 sarees, and 50,000 school uniforms for school boys and girls, distribution due to take place in April. |
| Turkish Red Crescent | <ul style="list-style-type: none"> • Distribution of relief items. |
| USAID/SLRCS | <ul style="list-style-type: none"> • Distribution of non-food relief items (bed sheets, mosquito nets, sarees, sarongs and soap to 500 families in Galle and Ampara). • Environmental cleanup and cash-for-work programmes – 350 people in Ampara and Galle received cash for environmental cleanup work. Workers managed by SLRCS volunteers. • Reestablishment of livelihoods – purchase and distribution of 20 canoes and 20 large boats and nets for fishing families affected by the tsunami, with assistance of the fisheries and aquatic department. The boats were distributed on a micro-credit scheme, whereby each family will repay a proportion of the boat's initial cost. These funds will be used to support other vulnerable families. |
| SLRCS | <ul style="list-style-type: none"> • Distributions of food and non-food items across all affected areas, and strong involvement in all Federation, ICRC and PNS activities outlined above. • Livelihoods programmes to encourage economic independence. |
| ICRC | <ul style="list-style-type: none"> • Distribution of family kits, cooking utensils for welfare centres, clothing, blankets, kitchen sets, kerosene lamps, supporting provision of monthly hygiene kits to 30,000 families over a six-month period. |

Activities in February 2005 for relief

| | |
|--------------------------------|---|
| American Red Cross' relief ERU | <ul style="list-style-type: none"> • President of American Red Cross and several major donors to Federation/American Red Cross visited SLRCS and ERU team. • Rotation of staff. • Distribution extends to Arugam Bay in Ampara, previously unreachable due to broken bridge. Relief goods are ferried to the bay. • By 11 February distribution extends to Tirrukovil in Ampara, in cooperation with ICRC. • Number of items distributed per family increased due to large volume of relief supplies released from customs. • Excess body bags supplied to Maldives on request. |
| Federation's relief team | <ul style="list-style-type: none"> • In February, Red Cross has been officially requested to provide 1,100 tents for temporary accommodation of IDPs to enable reopening of school buildings/temples currently functioning as temporary shelters in Colombo and Moratewa. Tents were immediately dispatched from the Colombo warehouse to meet these requests. |
| British Red Cross | <ul style="list-style-type: none"> • Continued activities as in January. |
| Spanish Red | <ul style="list-style-type: none"> • Continued activities as in January. |

| | |
|----------------------|---|
| Cross | |
| Turkish Red Crescent | <ul style="list-style-type: none"> • Distribution of relief items. |
| USAID/SLRCS | <ul style="list-style-type: none"> • Continued activities as in January. |
| SLRCS | <ul style="list-style-type: none"> • Continued activities as in January. |
| ICRC | <ul style="list-style-type: none"> • Continued activities as in January. |

Activities in March 2005 for relief

| | |
|--------------------------------|--|
| American Red Cross' relief ERU | <ul style="list-style-type: none"> • Initial beneficiary targets reached. • Second round of distributions took place targeting most severely and moderately impacted as well families who missed the first round of distributions. Delayed due to bad weather and security issues in the east. Some distributions were rescheduled. • The ERU expanded its area of distribution to Kalmunai where an additional 9,000 families will receive hygiene kits. • Federation's pipeline of relief goods expanded to territories in the north and east in cooperation with ICRC and SLRCS. • The Canadian, Swiss and Austrian Red Cross societies distributed Federation hygiene kits in Killinochchi, Kiran and Valaichenai. • The Japanese Red Cross conducted an assessment of hygiene kits needs in the north and as soon as areas for intervention are identified, Federation will release hygiene kits for distribution. • Good coordination ongoing with UNHCR and Project Galle 2005 (local NGO) in identifying families who received non-waterproof tents from other organizations and replacing these with waterproof Red Cross tents to better withstand the rainy season. • Focus groups held with beneficiaries to determine contents of locally-procured hygiene kits. Local tender will take place shortly once total hygiene kit needs are determined. • Approximately 20,000 additional mosquito nets will be distributed in Ampara upon urgent request of MoH and as part of a district wide anti-malaria campaign supported by the Federation's health team. • By 31 March, 345,534 individuals received non-food relief items from the first and second round of distributions. |
| Federation's relief team | <ul style="list-style-type: none"> • ERU was absorbed within Federation by end of March. |
| British Red Cross | <ul style="list-style-type: none"> • Continued the activities in January and February. |
| Spanish Red Cross | <ul style="list-style-type: none"> • Supporting refurbishment of SLRCS headquarters' finance department which is expected to be fully operational in April. |
| Turkish Red Crescent | <p>As of 27 March, the Turkish Red Crescent distributed the following:</p> <ul style="list-style-type: none"> • 12,312 school uniforms in Kalutara • dry food for 7,250 families in Kalutara and Matara • 3,600 hygiene kits in Kalutara, Ampara and Matara • 9,000 school bags in Kalutara, Ampara and Matara • 9,000 stationery sets Kalutara, Ampara and Matara • 1,005 baby food sets in Kalutara • 5,000 mosquito nets in Ampara • 1,567 family kitchen sets in Ampara |
| USAID/SLRCS | <ul style="list-style-type: none"> • Continued activities as in January and February. |
| SLRCS | <ul style="list-style-type: none"> • Continued activities as in January and February. |
| ICRC | <ul style="list-style-type: none"> • Continued activities as in January and February. |

Activities in January 2005 for logistics and telecommunications

| | |
|----------------------------------|--|
| British Red Cross' logistics ERU | <ul style="list-style-type: none"> • Average two plane landings in Colombo daily. • Colombo airport warehouse 'Global Park' provided by authorities free of charge for Red |
|----------------------------------|--|

| | |
|---------------------------------|---|
| | Cross use. |
| Spanish Red Cross' telecoms ERU | <ul style="list-style-type: none"> Ensured proper VHF equipment for communications for all teams. |
| SLRCS | <ul style="list-style-type: none"> Provided mobile phones available for use by affected families in two IDP camps 27 volunteers worked on tracing with ICRC and visited 142 displaced centres in Kalutara, Matara, Galle, Hikkaduwa, Tangalle, Hambantota, Trincomallee and Vanni and Colombo. Volunteers used satellite telephones to allow people to call families and SLRCS established a 24-hour call centre with the help of 15 SLRCS volunteers; on 6 January more than 213 cases were registered and seven displaced persons were reunited with families. |
| ICRC | <ul style="list-style-type: none"> Immediately following the disaster, ICRC set up 12 mobile teams that reunited survivors and their families. Displaced people made over 1,700 satellite telephone calls (mainly overseas) and SLRCS collected 417 "I am alive" messages posted on a special ICRC website and published in the Sri Lankan media. |
| Telecoms | <ul style="list-style-type: none"> <i>Ericsson</i> and <i>Ericsson response</i> (global initiative aimed at responding to human suffering caused by disasters) sent two teams to Sri Lanka to help register VHF frequency. <i>Sony Ericsson</i> donated 500 mobile phones to aid agencies including the Spanish Red Cross' ERU. |

Activities in February 2005 for logistics and telecommunications

| | |
|----------------------------------|---|
| Federation's logistics team | <ul style="list-style-type: none"> Handled registration of vehicles and customs clearance of relief items. Logistics team of more than 100 (50 loaders, 30 truck drivers, 9 storekeepers, 6 drivers, 2 administration assistants, 8 delegates). |
| British Red Cross' logistics ERU | <ul style="list-style-type: none"> ERU started integration with the Federation's delegation. The Federation then paid for all running costs. Receipt of relief items stalled due to problems with tax clearance and government freeze on tax free import status Shared space with ICRC at Ratmalana warehouse. |
| SLRCS | <ul style="list-style-type: none"> Continued activities as in January. |
| ICRC | <ul style="list-style-type: none"> Continued activities as in January. |

Activities in March 2005 for logistics and telecommunications

| | |
|----------------------------------|---|
| Federation's logistics team | <ul style="list-style-type: none"> Convoys starting in north of country in cooperation with ICRC. Nine trucks will travel with 7,000 hygiene kits to Jaffna. One logistics delegate now in Ampara to recruit local drivers, identify new warehouse facilities, assess local procurement possibilities and follow-up on stock movement and cargo dispatch for relief and water sanitation operations. Procurement delegate urgently needed. |
| British Red Cross' logistics ERU | <ul style="list-style-type: none"> ERU departs, remaining staff absorbed into the Federation delegation's logistics team. |
| ICRC | <ul style="list-style-type: none"> Tsunami-related tracing services scaled down as regular communications means returned to normal. In the last two weeks ICRC distributed postal kits allowing families in certain areas to stay in touch. |

Objective 4 (health): A constant, good level of health is ensured for up to 20,000 families (about 100,000 people) through prevention and basic health care, as well as health and hygiene promotion.

The health sector in Sri Lanka was severely affected by the tsunami. More than 30 hospitals and 68 community health posts (CHP) have been partly or completely destroyed. The response by the MoH has been outstanding. A number of CHP have been moved to alternative public buildings and are now operational. Undamaged hospitals are serving extra patients. Support in all medical aspects by local as well as international groups, remains unprecedented. Most of the NGOs registered in the country were and continue to be involved in some kind of

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

medical relief or rehabilitation, at all levels. Rescue workers and volunteers, as well as victims of the disaster, were traumatized and psycho-social support was made available soon after the disaster and will be required for quite some time, especially for vulnerable groups. In the mid- and longer term, rehabilitation and reconstruction of hospitals and health posts will be necessary.

Despite the disaster, the health situation in the country remains stable. According to the CNO, the spread of infectious diseases in tsunami-hit areas of Sri Lanka has been contained because of prompt action and preventative measures by the MoH. Prevalence of communicable diseases was low in many affected areas prior to the tsunami. The MoH and WHO maintain surveillance for communicable diseases.

The MoH has prepared a list of all health facilities which need reconstruction, rehabilitation or improvement. The list includes hospitals which may not have been directly damaged by the tsunami, but are stretched to provide services for patients referred from affected areas.

Coordination

The Movement has been coordinating internally and with external organizations, agencies and the Government of Sri Lanka at local and national levels since the beginning of the tsunami operation. Clear roles and activities were outlined in an inter-agency meeting (please refer to the WHO tsunami situation report 34 for further details <http://www.reliefweb.int/library/documents/2005/who-southasia-08feb.pdf>). Meetings attended by Movement partners include the following:

- Weekly coordination meetings chaired by WHO and attended by all UN and other agencies involved in health programmes.
- Within the Movement, technical committee meetings and working groups for the health and psycho-social support programme held on a weekly basis for all involved Movement components.
- As of April, regular technical meetings held between the Movement and the MoH. Most recently, the possibility of rehabilitating a number of additional health structures was discussed.
- As of April, a working group comprising SLRCS, ICRC, PNS and Federation met to develop a framework for a national SLRCS community-based health programme including first aid, primary health care, control of communicable diseases including HIV/AIDS, blood donor recruitment.
- As of April, an email discussion group of PNS involved in rehabilitation of health facilities was formed. Issues raised are summarized and reported back to the technical committee.

Red Cross Red Crescent capacity

Since the beginning of the tsunami relief operation, SLRCS has been providing first aid to affected populations. The Federation deployed three health ERUs (from the Finnish, French and Norwegian Red Cross societies) providing basic health care along the east coast which have since been integrated into local health facilities. An ERU was deployed by German Red Cross and almost immediately integrated as a referral hospital with ICRC. Various PNS also set up health facilities and distributed medical equipment.

SLRCS, ICRC and the Federation have undertaken to reconstruct, renovate, repair and equip 34 general hospitals, base hospitals, district hospitals, rural hospitals, peripheral units, central dispensaries and teaching facilities in the tsunami-affected areas throughout the island. The project includes health facilities in the districts of Kalutara, Galle, Matara, Hambantota, Batticaloa, Jaffna, Ampara, Trincomalee, Kilinochchi, Mullaitivu, and Puttalam and will include the maintenance for up to five years, according to the MoU signed by the ministry of health care, nutrition and Uva Wellassa development for and on behalf of the government, the SLRCS and the Federation in Colombo on 15 March.

In total, 28 of the 34 health facilities set aside by the ministry of health for the Red Cross and Red Crescent Movement have been allocated to 12 PNS which are in-country while the remaining six have been allocated to multi-lateral donors. Discussions will take place with the MoH to determine requirements for hospitals and other medical facilities to ensure that all reconstruction and rehabilitation meets agreed standards of design, construction and equipment.

Community-based health projects are also being planned. There is a very successful model already being implemented in the northern and eastern districts, as integrated projects with ICRC. The Movement intends to

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

implement similar programmes in the south and west (the non-conflict areas). The Federation and interested PNS are working with SLRCS to develop national SLRCS community-based health programme guidelines/framework. The programme will be implemented in a way that meets the needs of individual branches and communities.

Month-by-month details of the **health and care programme** are included in the tables below.

| <i>Activities in January 2005</i> | |
|--|--|
| Finnish Red Cross' basic health care unit (BHCU) ERU | <ul style="list-style-type: none"> • Location in Komari, Ampara. • Treated 165 people daily plus 50 home visits. • Covered needs for 12 IDP camps between Pottuvil and Komari via one clinic and a satellite clinic in Komari IDP camp. • Staff: 14 Finnish Red Cross members plus 11 local members. • Complaints included mostly respiratory, skin diseases, and injuries. • Satellite clinic and ERU supplies integrated with nearby local ministry of health dispensary that operated as normal on 31 January. |
| French Red Cross' BHCU ERU | <ul style="list-style-type: none"> • Located in Pottuvil, Ampara. • Facilities included consultation room, primary health care room, pharmacy and medical storage room. • Staff: seven French Red Cross members plus seven local members with limited medical knowledge (two interpreters, a pharmacist, two general staff and two security guards). ERU planned to hire and train more local staff. • Treated 60-100 patients daily plus mobile health unit visits to remote areas. • Common complaints included wounds, respiratory and psychological problems. • Hygiene promotion risks of contaminated wells. • Home care counselling visits to people on request. |
| Norwegian Red Cross' BHCU ERU | <ul style="list-style-type: none"> • Treated 200-320 people daily. • Treated 70 inpatients and 16 maternity cases. • Seven ERU staff plus Tamil doctor and two medical students. • ERU included outpatient department, admitted patients (20 people) and maternity ward • Operated from existing new but unfinished and non-operational MoH facility • MoH supply staff and technicians worked to complete building. |
| Italian Red Cross | <ul style="list-style-type: none"> • Field hospital in Vakara, Batticaloa district in the northeast, in cooperation with ICRC and SLRCS. • Hospital was an inflatable, fully air-conditioned tent. • Also used intact rooms of health premises which were mostly destroyed. • Following agreement with MoH, Italian Red Cross rehabilitated two wards of the pre-existing health structure for temporary use and planned to move the paediatrics ward into the restored unit. • Team consisted of eight medical doctors, six nurses, one obstetrician, one pharmacist and 12 logisticians and drivers. • Location identified and assigned by SLRCS and the district health services office. • Also operated five mobile clinics, each with ambulance and gazebo-type tent working in nearby IDP camps providing health care daily. • Number of medical consultations provided through field hospital and mobile clinics steadily increased to average 200-250 per day. • Received equipment for laboratory and x-ray and increased number of services provided to local population. |
| Japanese Red Cross | <ul style="list-style-type: none"> • Pre-tsunami, planned reconstruction of hospital and eyesight recovery programme in Trincomalee, and primary health care in Puttalam. The project will start in April. |
| MDA | <ul style="list-style-type: none"> • On 14 January, MDA set up field camp in Balfitia, south of Colombo, treating 200 patients daily. Mobile team treated people in remote areas. • Provided food through a soup kitchen staffed by four volunteers. |
| German Red | <ul style="list-style-type: none"> • Deployed as ERU but merged with ICRC to form an ICRC/German Red Cross field |

| | |
|-----------------------------|--|
| Cross Basic Health Care ERU | <p>hospital.</p> <ul style="list-style-type: none"> ICRC and German Red Cross (25 staff members) supported a hospital in Puthukkudiyiruppu in the east. |
| ICRC | <ul style="list-style-type: none"> 210 SLRCS volunteers were trained in health education for deployment in welfare centres and transit camps in Kilinochchi and Mullaitivu. Over 50 health care workers paid by ICRC provided health education services for displaced families. Provided medical supplies and teams to health authorities in the north and east. Set up tents in welfare centres and transit camps to be used as medical structures. |
| Turkish Red Crescent | <ul style="list-style-type: none"> Donated medicines to Kalutara hospital. Two mobile ambulances operated by poly-clinic staff working in nearby areas, and conducted needs assessments of health services in nearby villages. |
| SLRCS | <ul style="list-style-type: none"> 10 mobile first aid teams along south and west coastline supported by Federation emergency funds. 59 mobile medical units partly funded by the Federation and deployed in seven coastal districts. A total of 1,850 first aid trained volunteers worked in 13 districts along the coast. Volunteer first aid trained 64 people in Ampara. Distribution of medicines and hygiene kits. Health promotion. Transportation of the dead and injured to hospitals. |
| USAID | <ul style="list-style-type: none"> Distribution in Galle and Ampara of health leaflets in English, Sinhala and Tamil along with 500 family packs on prevention and protection against vector-borne diseases. |

Activities in February 2005

| | |
|--|--|
| Finnish Red Cross' basic health care unit (BHCU) ERU | <ul style="list-style-type: none"> Number of patients treated declined; little need for emergency health care services, which were adequately covered by the local health infrastructures. Emergency patients still admitted, all others transferred to local dispensary or hospital in Pottuvil From 16 February the clinic closed for non-emergency cases, inventory made of medical supplies ready to hand over to local authorities; local nurses ended contract. ERU staff rotation. Rehabilitated damaged hospital in Pottuvil - 9 SLRCS volunteers, supervised by ERU team, cleaned and repainted beds and IV stands; all necessary renovation equipment provided by Finnish Red Cross. Provided hygiene items, dispensary shelves and refrigerator for storage of medicines. Local ERU nurses conducted survey via home visits in IDP camps Komari I and Komari II. Similar survey conducted by local nurses/midwives. Both surveys found main problems were lack of latrines and general poor sanitation. Two health education sessions organized in connection with MoH mother-child healthcare clinic: 23 mothers participated in the sessions covering baby care, breastfeeding, hygiene, prevention and treatment of diarrhoeal diseases. Activity will continue to prevent outbreaks of diarrhoeal diseases in the camps. |
| French Red Cross' BHCU | <ul style="list-style-type: none"> Treated 45-55 people a day. |
| Norwegian Red Cross' BHCU ERU | <ul style="list-style-type: none"> From 19 February, ERU staffed by local staff (two doctors), Norwegian Red Cross doctors were on call 24 hours daily. In general, quality of women's healthcare improved significantly since the arrival of the ERU, with the doctors encouraging open-mindedness and frankness when discussing health problems. ERU staff rotation on 10 February. Number of patients fluctuated due to restricted movement following the death of a leading politician on 8 February. In general, the number of beneficiaries decreased – over 100 daily in the first week of February down to 50 daily by mid-February. |

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

| | |
|------------------------|---|
| | <ul style="list-style-type: none"> • Construction of the outpatient department improved – water pipe and toilet system installed by MoH in the maternity ward to improve hygiene standards; electrical installation and generator installed. • ERU installed a water purification system to supply hospital (no other reliable source available while water tower was being built.) This system was handed over to ICRC for water provision when the ERU departed. • Entire building relied on generators for electricity. Solar panels were mounted for three bulbs and were to be assessed for further use. • Supported ICRC to set up tents in the region. |
| Italian Red Cross | <ul style="list-style-type: none"> • Continued activities as in January. |
| Japanese Red Cross | <ul style="list-style-type: none"> • Continued activities as in January. |
| German Red Cross' BHCU | <ul style="list-style-type: none"> • Continued activities as in January. |
| ICRC | <ul style="list-style-type: none"> • Continued activities as in January. |
| Turkish Red Crescent | <ul style="list-style-type: none"> • Polyclinic staffed by 4 doctors and 5 nurses from Turkish Red Crescent and 4 Sri Lankan medical interns operating in Kalutara since 1 February, treating an average of 250 people daily. • By end of February more than 3,500 patients had been treated. |
| SLRCS | <ul style="list-style-type: none"> • Continued activities as in January. |
| USAID | <ul style="list-style-type: none"> • Continued activities as in January. |

Activities in March 2005

| | |
|--|--|
| Finnish Red Cross' basic health care unit (BHCU) ERU | <ul style="list-style-type: none"> • Longer-term health plans to improve primary health care services in the Ampara district, with emphasis on prevention, especially reproductive health (maternal child health and family planning) and improving the quality of care. |
| French Red Cross' BHCU | <ul style="list-style-type: none"> • Departed in the first week of March. |
| Norwegian Red Cross BHCU ERU | <ul style="list-style-type: none"> • By March, the ERU handed over function to MoH staff. MoH Trincomalee decided on distribution of ERU stocks, signing MoU and inventory lists. • 7 March was the last official day of the Norwegian Red Cross' ERU was present. • Handover and exit strategy also addressed following issues: development of a community health plan (including training of staff and community-based activities); ambulance service plan; preventive health care; water supply, cooperation between local health institutions; collation of health assessments conducted at the district level; Red Cross and Red Crescent Movement plans for future support. |
| Italian Red Cross | <ul style="list-style-type: none"> • Sought, through the SLRCS and local health authorities, specialized local personnel to start working to take over service provision as soon as possible. • Medical and paramedical staff members in the field hospital in Vakaraï fully replaced the previous team although the number of doctors was reduced to five. This was part of planning for integrating local medical staff with Italian expatriates and, in the medium-term, for handing over the hospital to MoH. • Consultations at the hospital and the mobile clinics were at an average of 77 daily. • Batticaloa and Trincomalee local authorities held a celebration/reception on 27 March to express their gratitude to Italian Red Cross for helping the affected population in those areas. • As of April, a doctor and two nurses are now working in the hospital, with transport provided by Italian Red Cross to ease cooperation. Further integration with local staff will take place in an effort to ensure sustainability of the health facility. |
| Japanese Red Cross | <ul style="list-style-type: none"> • Same activities as in January. |
| German Red Cross Basic | <ul style="list-style-type: none"> • Same activities as in January. |

| | |
|-----------------|--|
| Health Care ERU | |
| ICRC | <ul style="list-style-type: none"> • Same activities as in January. |
| SLRCS | <ul style="list-style-type: none"> • Same activities as in January. |
| USAID | <ul style="list-style-type: none"> • Same activities as in January. |

Objective 5 (psycho-social support): The resilience of the affected population and the local relief workers is enhanced through psycho-social support.

The FACT report highlighted the overwhelming need for immediate intervention and ongoing psycho-social support. SLRCS was first on the scene after the tsunami providing psycho-social support to affected families, and continues to do so, with support from various PNS and the Federation. High tides and rough seas often give rise to extra fear among the population that another tsunami is coming. The recent earthquake off Sumatra in Indonesia on 28 March caused great distress and panic among residents along Sri Lanka's coastline, indicating the clear ongoing need for PSP support.

Four delegates will be working in Trincomalee, Batticaloa, Ampara and Hambantota as of April, concentrating on the east and north of country only in accordance with the Federation's guidelines. The American Red Cross will take over activities in Hambantota.

Month-by-month details of the **psycho-social support programme** are included in the tables below.

| <i>Activities from January – March 2005</i> | |
|---|---|
| American Red Cross | <ul style="list-style-type: none"> • Conducted assessment for potential psycho-social support programmes (PSP). • In February, a PSP programme was started in Matara, Galle and Hambantota, providing individual and group counselling for over 1,500 men, women and school children. |
| Belgian Red Cross | <ul style="list-style-type: none"> • Provided cleanup support in Beruwala in the south, cleaning 50 houses with support of three local staff, 30 SLRCS volunteers and families living in/near affected houses, in collaboration with the Spanish Red Cross. • Conducted assessments of psycho-social needs in Kilinochchi and Mullaitivu in the northeast and Beruwala in preparation for implementation of PSP programmes. • Trained SLRCS volunteers in provision of psycho-social support. • 12 SLRCS volunteers participated in a three-day training course. • Volunteers trained on what the Red Cross and Red Crescent Movement is, what psycho-social work means, how to recognize signs and symptoms of stress, and their role in the community. • Volunteers will not work as counsellors, but will provide services such as helping people apply for government rations, documents lost during the tsunami, compensation for damaged goods, etc. • Aim of the project is to empower local communities and reduce stress levels through provision of practical information. |
| Danish Red Cross | <ul style="list-style-type: none"> • Technical leadership for Federation and PNS in PSP activities. • Running successful school-based PSP programmes (conflict-related) in Jaffna since 2003. • Danish Red Cross PSP training manual for programme in Jaffna approved by the ministry of education and is available for use by interested PNSs. • PSP training of SLRCS volunteers from these four locations, on location and travelling to Jaffna for training. Non-trained volunteers only carrying out sports/games related activities. • So far, counselling by Danish Red Cross trained SLRCS volunteers provided to over 2,000 people in IDP camps. • Debriefing/counselling of all volunteers participating in relief efforts. • PSP through provision of toys and games, equipment for welfare/community centres (sewing machines, radios). • Assistance in restarting livelihoods (sewing machines, coir making activities) and general relief distributions (kitchen equipment, kerosene lamps). |

| | |
|----------------------|---|
| | <ul style="list-style-type: none"> • Purchase and distribution of shoes and uniforms for school children in the east and north. |
| Turkish Red Crescent | <ul style="list-style-type: none"> • Three psychologists have been operational in Kalutara since 7 January, providing PSP support to vulnerable people. • Distributed translated brochures including information about coping with the results of disaster and helping children cope with disasters. • Psycho-social team is planning to establish and operate a social centre with the SLRCS branch in Kalutara. • In March, a needs assessment was carried out in Kalutara for the establishment of a local SLRCS community centre for running PSP activities. There is potential cooperation/funding from the Belgian and Spanish Red Cross societies. |
| SLRCS | <ul style="list-style-type: none"> • Volunteers provided PSP support. • Volunteers are also being trained in PSP via programmes funded by PNS, the Federation and ICRC. |

India

Overview

In India the tsunami claimed over 10,749 lives and rendered thousands of people homeless along the 2,200-kilometre coastline of Tamil Nadu, Andhra Pradesh, Kerala and Pondicherry (union territory) and the Andaman and Nicobar Islands. The Indian Red Cross Society (IRCS) and its branches in the affected states responded effectively by mobilizing local resources and volunteers, and provided cooked food, clean water and basic health care to the affected population.

A three-member assessment team comprised of the secretary general of IRCS, the society's joint secretary and the Federation's disaster management delegate reached Nagapattinam (Tamil Nadu) on 27 December 2004. The national disaster response team (NDRT) was deployed on 30 December 2004 to carry out a comprehensive multi-sectoral needs assessment of the affected population in Tamil Nadu.

The emergency response by the IRCS and the needs from transition to recovery eventually resulted in a three-day planning meeting in Chennai, Tamil Nadu, for rehabilitation and reconstruction. This meeting, led by the IRCS headquarters took place 27-29 January 2005 with participation of IRCS branch members in the affected states (Kerala, Andhra Pradesh and Tamil Nadu) as well as some non-affected states (Karnataka and Maharashtra).

Participants included the Federation, ICRC, and representatives of the partner national societies. During the meeting, each state branch presented activities that were carried out during the emergency response phase and their plans for rehabilitation and reconstruction. These plans were discussed with and scrutinized by the Movement partners in different working groups thus streamlining sectors and stages (short-, medium- and long- term). A follow-up meeting led by the IRCS secretary general took place on 31 January with all the Movement partners to discuss and endorse this draft plan so that it may be part of the overall operational framework.

Red Cross Red Crescent action

The national headquarters of the IRCS provided the following relief to tsunami-affected people in the immediate emergency phase:

- Non-food items distributed from existing disaster preparedness stock at the regional warehouses.
- Three water and sanitation units were sent to Tamil Nadu state and five mobile water purification plants were made functional in Port Blair and Dollyganj areas, supplying purified drinking water to 100,000 people.
- Psychological support and family link activities carried out by volunteers at various levels in the affected areas.
- Emergency rations consisting of high-protein biscuits, water, milk and other food and clothing items were also distributed.

The Red Cross branches from various states also mobilized relief supplies and volunteers to support the affected state and district-level branches. Around 300 Red Cross volunteers from the Karnataka state branch were stationed

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

in the affected districts of Nagapattinam, Cudalore and Kanniyakumari in Tamil Nadu during the emergency phase. A medical team of 15 doctors, nurses and technicians from the Karnataka state branch held medical camps in Cuddalore. The state branch of Maharashtra, Bihar and Gujarat mobilized resources and are providing support to the affected state branches.

Andaman and Nicobar Islands

According to a report on 18 January 2005 by the UN Disaster Management Team in India, 1,899 lives were lost and 5,554 persons remain missing in the Andaman and Nicobar Islands. In total, 295,959 people on 30 islands were affected.

The IRCS distributed 6,000 family packs in the Andaman and Nicobar Islands. The family packs were mobilized from the disaster preparedness stock at Salt Lake warehouse, Calcutta and distributed in the relief camps in the town of Port Blair and the islands of Little Andaman, Car Nicobar and Nancowri, assisting a total of 32,000 people. Amul milk packets, mineral water bottles, biscuits, and phenol bottles were also distributed along with the family kits.

The family kits consisted of one kitchen set, one cotton blanket, one bed sheet, one towel, one sari, one dhoti, one plastic sheet and one plastic bucket. The logistic support for the transportation of the relief material was taken from the local administration as most of the affected islands are a large distance away and could be reached by falcon boats only. The IRCS also deployed five mobile water purification plants donated by Spanish Red Cross and a three-member team of engineer, technician and delegates from Spanish Red Cross to install the water and sanitation unit and provide on-the-job training to local people. Once functional, these water purification plants supplied 50,000 litres of clean water to affected people in Port Blair and Dollyganj everyday. Ten metric tons (MT) of bleaching powder 10 metric tons of alum were also made available.

Tamil Nadu

The UNDMT report states that 7,983 people were killed and 896,163 people in 376 villages were affected along 1,000 kilometres of coastline in Tamil Nadu.

The national headquarters sent 13,000 family packs for distribution in the affected district of Nagapattinam (5,000), Kanyakumari (5,000), and Villupuram (1000). Emergency rations containing high-protein biscuits (1,872 kg) and other food and clothing items are also being distributed. 120 MT of bleaching powder donated by DSCL was also sent to the affected areas. The state branch is actively involved in relief operations and is coordinating with other stakeholders present. Local Red Cross volunteers were equipped with surgical masks and gloves. A tracing cell was also set up in Nagapattinam.

Disaster mental health-trained volunteers were actively involved in relief work and provided psychological support at Sirgazhi and Tharangambadi sub-districts. The branch has been mobilizing local resources and volunteers and supplying relief materials such as milk powder, medicines, rice, torches, lights, batteries, biscuits, nutritional drinks, water, utensils, and footwear (*chappals*) to the affected districts of Nagapattinam, Cuddalore, Chennai, Kancheepuram and Kanyakumari. As of 1 February 2005, the state branch had sent relief materials worth approximately CHF 960,000 to the affected district branches. The state branch has received approximately CHF 412,000 worth of donations including the following items:

- Cooked food, bread and milk/tea provided by the IRCS in collaboration with Coca Cola along with 3,500 cases of water (12 litres in each case).
- Nestle India contributed 2,000 cases (12x1000ml) of milk. They also donated 314 cases of uncooked noodles.
- Tetra Pack India, through the Indian Red Cross, donated 6,000 litres of milk for Tamil Nadu.
- DSCL India donated 120 tons of bleaching powder for the affected areas in Andaman and Tamil Nadu.
- Bata donated shoes and sandals and Osho donated 10 cartons of bed sheets.

The Andhra Pradesh state branch sent a truckload of medical supplies to the Tamil Nadu state branch. The Gujarat state branch is supporting the tsunami in Tamil Nadu by supplying saris, dhotis, blankets, bed sheets, and towels, clothes for kids, toothpaste and candles. 950 family kits including the above items have been sent to Tamil Nadu.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

The national headquarters deployed three water purification units donated by USAID to Tamil Nadu, one each to Nagapattinam, Kanyakumari and Cudalore districts and supplied purified drinking water to the affected population. The technical support in terms of personnel and tankers for supplying water is being provided by Coca-Cola India.

Kerala

In Kerala, the UNDMT estimates 171 persons died and 1,300,000 people in 187 villages - along 250 kilometres of coastline - were affected.

The Maharashtra state branch sent relief material including food, clothing and medicines to the Kerala state branch. A team of eight doctors, three paramedics and one administrative officer, nurses and 11 volunteers reached Kollam district in Kerala to provide medical assistance and help in relief distribution. They also sent a large consignment of food, water, medicines, clothes, etc. The Bihar state branch sent 1,000 family kits to the Allapuzha district branch containing dhoti, sari, tarpaulin sheet, bed sheet, steel glasses, beaten rice, dal, jaggery, candles and matchboxes.

Andhra Pradesh

In Andhra Pradesh, 105 people were killed and 11 remain missing. 65 relief camps set up in the aftermath of the tsunami have now been closed. In total, 196,312 people in 301 villages along 985 kilometres of coastline were affected in the state.

The IRCS national headquarters sent 2,000 kitchen sets and 4,000 cotton blankets to the state branch in Andhra Pradesh.

IRCS branches from non-affected states also sent relief supplies to Andhra Pradesh. The Bihar state branch provided 2,000 family kits and the Gujarat state branch supplied saris, dhotis, blankets, bed sheets and towels, clothes for kids, toothpaste and candles packaged into 500 family kits.

In addition to meeting the needs of its own population, the Andhra Pradesh state branch sent 50–100 litres of milk every day to the Sri Lanka Red Cross and medical supplies to the Andaman and Nicobar Islands.

Coordination

The IRCS finalized a country strategy and operational framework (CSOF) for the short-term recovery focusing mainly on livelihood, rehabilitation and branch development in the affected states of Tamil Nadu, Kerala, and Andhra Pradesh. The CSOF was finalized after the Chennai meeting and discussed with the affected state and district branches, PNS and the Federation. A detailed in-depth and multi-sectoral technical assessment will follow for the longer term recovery phase. In addition to the short- and longer-term needs, the Indian Red Cross has prioritized the replenishment of 30,000 as well as pre-positioning of 20,000 family packs of non-food relief items and procurement of 20,000 family tents for further needs as disaster preparedness stock for future emergency response.

The request for assistance from the Movement (to be made available next week as part of the Federation's Emergency and Recovery Appeal) was prepared by the Indian Red Cross Society with technical support from the Federation and will be incorporated into the plan of action for South Asia together with other national societies in the region.

The IRCS disaster mitigation committee met at the society's headquarters on 1 April 2005. The committee unanimously decided that the IRCS should carry out the rehabilitation work in both the short-term recovery and long-term rehabilitation phases.

The former secretary general of IRCS finished her term and an acting secretary general (current director of health services at the Ministry of Health) has been appointed.

The head of the Federation's delegation in India met the acting secretary-general and gained his agreement in principle to the memorandum of understanding which is currently going through an approval process. This

agreement deals with the tsunami short- and long-term recovery programme plans. The acting secretary general has shown positive interest in the document and has referred it to the ministry for consideration.

Maldives

Overview

The tsunami struck the Maldives at 09:20 local time on 26 December 2004, devastating the lives and livelihoods of one third of the population, about 100,000 people living on 69 of the 199 inhabited islands. The disaster impacted the entire country with damage to infrastructure and the two main economic sectors, tourism and fisheries. Some 82 people were killed, and 26 are missing and feared dead. About 20,500 people lost their homes and many people suffered from the trauma of seeing a major part of their lives swept away.

The vital tourist sector was hit with damage to 19 of the 87 resorts and a serious drop in hotel occupancy in the months following the tsunami. Many of the country's public service utilities were damaged or destroyed. The affected islands are spread throughout the archipelago and this has presented a particularly challenging situation, as relatively isolated communities over hundreds of kilometres of water have to be reached.

Within hours of the tsunami, the Government of the Maldives (GoM) declared a state of emergency and set up a ministerial-level task force. A national disaster management centre was established and took a strong coordination role in bringing ministries together with the national and international non-governmental sectors. International aid has been coordinated through the ministry of finance and treasury and regular meetings have been held with all players, as well as at sectoral levels such as health, water and sanitation, and housing.

The Federation responded by sending a four-person RDRT team on 29 December, which was joined on 31 December by a three-person FACT. This joint team assessed the situation in coordination with the GoM and the UN's Disaster Assessment and Coordination (UNDAC) team. The Federation-coordinated emergency relief operation commenced within the framework of a plan of action as per objectives listed below.

The RDRT/FACT completed its task by the end of January and a more permanent Federation delegation, with its own office, was established. As PNS entered the country to establish bilateral projects, they too were given office floor space in the same building with the Federation, much enhancing practical possibilities for coordination.

The GoM signed a legal status agreement with the Federation on 1 March, paving the way for much improved operational facilities, including exemption from tax, capacity to enter into contracts and easing visa formalities for Federation delegates.

As there is no national society in the Maldives, the minister of planning and national development, together with one of his directors, attended the tsunami response forum hosted by the Hong Kong Red Cross on 3-5 March. This afforded an opportunity to build further the understanding between the Red Cross Red Crescent and the GoM. Several important contacts were made with PNS that have gone on to be realized in the form of project assistance.

By the end of March, the American, British, German and French Red Cross societies had established offices in the Maldives. The Australian and Canadian Red Cross societies had representatives assessing project proposals.

Based on the 10 January plan of action, the activities for the first quarter of the year set the framework for reporting the emergency relief phase and the beginning of the recovery phase. A revised plan of action to cover the period to the end of 2005 will be contained in the new appeal to be issued next week.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

Overall Goal: Tsunami-affected families in Maldives receive immediate non-food relief, shelter, electricity, health, water and sanitation services; and a national society is established.

Objective 1 (Shelter): Temporary shelter provided for 3,440 families and permanent shelter material provided for 5,500 families whose houses have been completely or badly damaged.

Progress/achievements

26 December through January

20,500 people were displaced by the tsunami. Some relocated to host families, some moved to Male' and joined other households and some were housed in emergency accommodation such as tents and converted public buildings and factories.

The GoM designed and started building temporary housing blocks. These blocks went through various design stages as there was some reluctance to use the earlier design types because of the layout and lack of private access to facilities. The Federation pledged to provide corrugated iron for the roofing, and latrine and shower blocks, and to cover the cost of the building materials. By the end of the month, a commitment was made to fund the materials for 50 blocks. The GoM planned to build 89 blocks but exact numbers were still not agreed. A total of 21,000 sheets of corrugated iron were ordered from India and 3,600 sheets airlifted to Male' to cover the initial urgently needed requirements.

Concerning the estimated 3,500 damaged houses, the GoM did not have the resources to make a complete survey and to assess how damaged buildings could best be repaired when basic domestic building structures were poor.

February

The balance of the sheets of corrugated iron arrived (21,208 sheets in all) and was handed over to the GoM for the temporary housing. Some 9,174 people on 13 islands were identified for temporary shelter.

A delegation from the French Red Cross made an assessment visit and signed a tripartite letter of intent with the GoM and the Federation to build 500 houses on the island of Gan, Laamu atoll. Later in the month the first French Red Cross delegate arrived to set up an office.

The Federation signed a letter of intent with GoM to build 800 houses for people who had lost their homes in the tsunami. The Federation's senior construction delegate and two consulting engineers visited to discuss plans and concept designs for new houses with the GoM. A particular project to build houses for 3,900 people from the island of Kandholhudhoo in the atoll of Raa, which was totally destroyed, on the uninhabited island of Dhuvafaaru was assessed. It was agreed, in addition to the projected 550 (later adjusted to 600) houses, the Federation would also provide community buildings, sewerage and water reticulation infrastructure.

The consultants could not advise on the involvement in the house repair programme on other islands because of the lack of clarity about an acceptable strategy for the way forward.

March

A memorandum of understanding was signed with the GoM committing USD 1,197,004 for building materials for 85 blocks plus ancillary buildings for an estimated 9,955 IDPs. An initial amount of USD 478,600 was transferred to the GoM for the temporary housing. By the end of the month, 38 of the 85 planned blocks had been completed, housing 3,524 people. Concerns were raised about the possible overcrowding in the blocks and the need to comply with SPHERE standards of 3.5 square metres per person. The GoM immediately addressed this issue and steps were being taken at the end of the month to increase the number of blocks to spread the IDPs out over more rooms.

A construction delegate arrived to take management responsibility for the Federation's permanent housing project. It was agreed that the Federation would build houses by awarding contracts to contractors by following and being involved in the GoM tender board process. The GoM would be the client in the relationship with contractors but all payments would be made directly by the Federation to the contractors, including to consulting engineers that would also be appointed to oversee and monitor the project implementation.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

Tenders were advertised for building 50 houses in Kudahuvadho Island, Dhaalu atoll, and agreement reached with the GoM to use this process to pre-select contractors to bid for 36 houses on Guraidho and 10 houses on Maafushi islands, Kaafu atoll.

A head of mission for the French Red Cross arrived. It was agreed that the French Red Cross would extend its support to building a school, a stadium and extending the regional hospital, plus provide two ambulances to the regional hospital on Gan Island. The Federation agreed in principle to support the installation of a sewerage system and a possible water distribution system for the beneficiaries of the French Red Cross housing project.

The British Red Cross sent an assessment team to explore the possibility of building up to 700 houses and to support the associated restoration of livelihoods in the selected communities.

It was agreed that other parties, including the UN Development Programme (UNDP), would address the needs for repair to damaged housing.

Impact

Temporary housing was provided for over 35 per cent of the IDPs who would otherwise be without adequate housing. The building programme was gathering momentum at the end of the period as materials reached sites and improved designs were adopted. The funding mechanism was in place to assist the GoM to cover costs of materials. SPHERE standards were accepted as a benchmark for determining healthy space requirements.

The Federation made commitments and agreed with GoM the way forward for building new houses and new settlement requirements, such as public buildings, utilities, and water and sewerage infrastructure. By the end of the quarter, the GoM estimated the need for 2,526 new houses. The Federation has accepted to build 967, the French Red Cross 500 and British Red Cross 692, together accounting for 85 per cent of total new housing requirements. In addition, the Federation agreed to build schools, community centres, mosques and other public buildings, plus water and sewerage infrastructure for new settlements. The first tenders to start the building process have been advertised.

Constraints

The designs of the temporary housing did not initially meet the expectations of the IDPs. It took some time to solve this issue and get the building programme started. The floor space required has been underestimated according to SPHERE standards and needs to be rectified by building more blocks.

The Federation and French Red Cross both had difficulties to quickly recruit qualified and experienced construction delegates.

The exact housing allocation to donors and the ability to plan ahead has been partly affected by reallocations of sites among donors according to their preferences. This problem was solved at the end of the month but exact numbers will only be determined as the housing programme progresses and the GoM gets the results of its survey of all households that may be relocated. The survey ascertains households' preferences for relocation and addresses the important need to assure relocation happens on a truly voluntary basis.

The difficulty of managing the repair of damaged houses was underestimated at the start of the period and, though the British Red Cross may repair houses on the islands where they are building new homes, the needs are being essentially met now by the UN and the GoM.

Objective 2 (immediate livelihood restoration): Electric power restored for 30,000 people and the minimum livelihood requirements supported for 2,000 families whose houses have been destroyed or badly damaged, and have lost their belongings.

Progress/achievements

26 December through January

In total, 24 generators were airlifted to Male' during the month and 23 of these were shipped to the islands for installation. By the end of the month, six had been operational and were providing electricity to 3,491 people.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

Relief supplies were brought into the country quickly and by the end of January, the following items had been received and mostly distributed:

| Item | Number |
|-------------------------|---------------|
| Blankets | 5,540 |
| Kitchen sets | 1,280 |
| Torches | 1,053 |
| Batteries | 2,395 |
| Garbage bags | 5,625 |
| Mats | 200 |
| Clothes | 5,000 |
| Beans (tins) | 20,000 |
| Fish (tins) | 10,000 |
| Cooking stoves | 1,000 |
| Hygiene kits | 1,967 |
| Light bulbs | 2,000 |
| School kits | 20 |
| Footballs | 500 |
| Rubb halls | 3 |
| Tents | 100 |
| Dressing kits | 400 |
| Medical kits (Adults) | 85 |
| Medical kits (Children) | 120 |

February

As it became apparent that some generators which had been temporarily repaired after the tsunami were damaged beyond repair because of sea water, another eight generators were requested and airlifted to Male', along with cabling, distribution boxes, spare parts and tools.

A request for 5,000 mattresses, 10,000 pillows, sheets and pillow cases was made, particularly for IDPs.

The Federation rented a heavy lift landing barge to assist the GoM with moving relief supplies around the islands. This contract was for a period of one month.

March

Almost all generators were installed and running by the end of the month. The difficulty of transporting cabling to some islands meant that this project was not completed entirely by the end of the month. It is estimated that 22,000 people have benefited from this project and, very importantly, electricity was the only means to operate desalination plants and produce drinking water for people on some islands.

A request for 20,000 family hygiene parcels was made to cover the needs of all IDPs in temporary shelter, IDPs living with families and the host families for a period of six months. The first consignment of 4,000 parcels arrived at the end of the month.

Impact

The speedy provision of generators was an innovative and much appreciated contribution during the relief phase. It enabled normal life to resume much more quickly on the severely affected islands and to provide much needed water.

Relief supplies arrived quickly and made a timely contribution in assisting people to regain their livelihoods. Support will continue for IDPs while they remain homeless and for those families already housing them.

Constraints

The state owned company (STELCO) responsible for the provision of electricity on 25 islands was tasked with the installation of all Federation-provided generators. They managed this responsibility well, within the limits of their

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

resources. It took longer than expected to get some generators and cabling delivered to some islands, particularly where access was difficult and offloading equipment was unavailable.

A major constraint for the whole operation has been the difficult logistics situation with 69 severely affected islands separated by water and long distances. In some cases, jetties have been destroyed making shipment of goods even more difficult to handle. Existing transportation resources have been stretched and the shipment of goods has had to be prioritized. The national security service has coordinated logistical support and has managed well with the resources at its disposal. It set up seven forward control centres as regional depots for forwarding services and transported goods as expeditiously as possible, even if there were occasional delays.

Objective 3 (health): The physical and mental health of the affected population is ensured through the provision of needed basic medical supplies and psycho-social support.

Progress/achievements

26 December through January

Emergency health and medical kits were received and distributed to health facilities by the ministry of health.

The American Red Cross' psycho-social team arrived in early January and immediately started to work to address the needs for counselling support following the traumatic experience of the tsunami. The team started training trainers for community counsellors to support residents and displaced people on the seven most affected atolls. With the help of six instructors, teacher trainings took place on 19 atolls and a total of 321 teachers were trained to implement activities in schools and on their home islands.

A German Red Cross delegate arrived for consultations with the GoM concerning assistance to damaged health facilities.

February

The psycho-social support programme continued with a total of 59 counsellors trained and emotional support brigades set up, consisting of 15-20 community volunteers.

The German Red Cross signed a MoU with the GoM for support to the ministry of health with the reconstruction, rehabilitation, and re-equipping of 23 of health facilities: two hospitals, five health centres and 13 health posts.

March

With the conclusion of the first phase of the psycho-social support programme, the American Red Cross planned for the longer-term programming and set up of their office in Male' with a workshop for conducting training activities.

Repair and re-equipping of the health facilities began. German Red Cross enjoyed good cooperation with the ministry of health in implementing the programme of repair and re-equipping health facilities.

Impact

The psycho-social support programme was well-received and supported by the psycho-social support unit and medical relief personnel at the national disaster management centre.

Constraints

There was the general constraint of reaching isolated and far flung communities by boat.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

Objective 4 (water and sanitation): About 5,000 people have access to adequate water and sanitation facilities.

Progress/achievements

26 December through January

Water bladders and water and sanitation equipment, including 300 water tanks and 10 submersible pumps, were mobilized after emergency needs were assessed by the RDRT/FACT.

February

The Federation's water and sanitation delegate arrived and started the process of clarifying the role of the Federation with the GoM, the Maldives Water and Sanitation Authority in particular. Other players in the early relief phase included a German volunteer group, THW, and Oxfam. Needs for water harvesting, desalination plants to meet emergency needs, sanitation systems for new housing and waste management were among the areas defined for Federation support. The emergency relief supplies were distributed to the islands according to determined priorities.

March

Discussions took place with the UN Environment Programme (UNEP) concerning a major project for addressing a clean-up of rubbish and debris and setting up a system for managing waste in the islands. Rubbish created by the tsunami compounds an already serious problem of lack of adequate separation, management and disposal of waste. Potential PNS partners for managing this project were identified.

Work was done in identifying the needs for water reticulation and small bore sewerage systems for the new housing projects. The Federation adopted the principle of providing a sewerage system for each new housing project and providing an outfall beyond the outer reef for optimal sewer effluent disposal. The design is to provide the opportunity for existing households to join the outfall facility, thereby making similar services accessible to those in the community not benefiting from a new house. Water reticulation from any desalination plant would be to suitably sited water kiosks for the whole community.

At the end of the month, a consultant was being recruited to advise on the design of the 'metropolitan' systems needed for the larger new housing projects.

Impact

Not measurable at this stage.

Objective 5 (national society development): A national society is established in the Maldives.

Progress/achievements

26 December through January

The Federation's organizational development delegate from the regional delegation in South Asia conducted an assessment mission. It was agreed that background information needed to be gathered, including information about an attempt to form a national society in 2000. Also, it was decided that steps to form a national society should only be taken once the emergency relief phase was over. The environment should be more normalized for the development process to be based on more realistic motivations.

February

The positive profile of the Red Cross Red Crescent led to encouragement from several quarters, including senior GoM officials, to form a national society. The ministry of foreign affairs asked the Federation to postpone any moves until a legal status agreement was in place.

March

A strategy for developing the project was agreed with the regional delegation in South Asia. Further enquiries were made about identifying potential interim leaders who would be independent of the government.

Impact

No impact thus far.

Constraints

Expectations that the Movement can bring considerable resources to support a national society need to be tempered by the realities that will exist beyond the tsunami recovery and rehabilitation operation. Approaches must take account of the need for the national society to be independent, founded on a strong volunteer/member base and having representatives from the atolls/islands participating in the governing structures.

Malaysia**Overview**

On 26 December, five-metre high waves flooded the Penang and Kedah coastlines, killing 68 people (57 in Penang and 11 in Kedah). Penang registered a higher death toll as many were enjoying a weekend on the beach; Kedah experienced a higher level of property damage. A village on the southwest side of Penang Island miraculously avoided much of the disaster, thanks to the 50-metre mangrove swamp barrier. The tourist island of Langkawi also suffered damages. Most of the fishing boats in Penang and Kedah were reported damaged. Local media reported that 12 Malaysians were still considered missing as a result of the tsunami, with six unaccounted for in Malaysia and the rest in Phuket, Aceh and Sri Lanka. About 4,300 people were affected in total. Half of them had their homes partially damaged and 900 houses were destroyed. The government estimated that the tsunami caused about CHF 17 million or USD 14.6 million worth of damage to the national agriculture sector, affecting more than half of some 6,000 fishermen in Penang state.

Within the first week of the disaster, families previously staying in relief centres had already started to return to their ravaged homes. Relief operations were wound down except in Kedah state. Three months after the disaster, Malaysia is now well underway in its efforts of rebuilding lives and property affected by the tsunami. Life has returned to a state of normality in Penang and Kedah. The 2,000 beneficiaries who were staying in shelters catered by the Malaysian Red Crescent Society (MRCS) still seek shelter there for the night but have returned to work and their daily life activities during the day, with relatives taking care of their welfare.

The MRCS, governmental, and other agencies have addressed both the immediate and recovery needs of the affected population in Penang and Kedah. Clearing up and repairs to damaged property have nearly been completed in Penang state. In Kedah state, the district office organized a clearing up operation along the beach in Kota Kuala Muda involving 1,000 personnel with MRCS volunteers taking part. The national housing company will repair houses in Kedah at no cost to owners, while an international company will replace furniture and household equipment. Damage to boats and other means of livelihood are now being assessed by the government in both affected states. Once completed, compensation will be given to affected families.

Red Cross Red Crescent Action***December 2004 through January 2005***

The MRCS was immediately in action upon the onslaught of the tsunami. Five regional disaster response team (RDRT) members were mobilized within a day to coordinate relief activities with the affected chapters.

The Penang branch mobilized four ambulances and 60 volunteers in two hours and transported the injured to the hospital and assisted in evacuation and emergency first aid. The previous emergency response exercises paid off. MRCS distributed USD 10,000 and 550 mattresses to the affected families in Kuala Muda, Penang and sent another 350 mattresses to Kedah.

In Kedah, efforts were less effective because of limited logistics and emergency response capacity. A minivan was loaned to them from the headquarters. Nevertheless, MRCS volunteers were essential in evacuation, first aid, establishing relief centres, registration and mass cooking. MRCS centred its action in the relief centres of Kota Kuala Muda, Kedah, providing mass food distribution and psycho-social support to the camp occupants. Qualified counsellors joined the team of volunteers in providing psycho-social support as well as managing community

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

public health in the relief centres. Red Crescent volunteers also organized recreational activities and provided toys for the children in the relief centres. Group sewing and knitting lessons were also provided for adults. In the earlier days of the relief camp, up to 40 volunteers were on duty at a time on a rotation system.

With the situation well under control within one week of the disaster, the government started to assume all relief activities in the affected areas from NGOs, playing a major role in providing care, shelter, reconstruction and rehabilitation to the tsunami-affected population. MRCS continued to assist the government in relief distributions in Kedah and established a tracing service with technical support from the ICRC.

In the first week of January, the society also assessed post-disaster relief operations in Kedah and Penang. Special attention was given to verify media reports of neglected beneficiaries in Langkawi in Kedah.

The Federation's regional delegation allocated CHF 100,000 to support MRCS's emergency response and has been facilitating the society in reporting and post-emergency planning.

MRCS relief activities were widely covered in the local newspapers. Such positive exposure is bound to aid the national society's volunteer drive. By the end of January, some 3,225 volunteers had registered themselves at MRCS headquarters to assist in packing and organizing relief goods and more than 1,200 families received cash donations and relief items from the MRCS.

The aftermath of the tsunami in Malaysia was well within the capacity of MRCS headquarters and branches to respond to. In the few hours after the tsunami struck, the national society established a tsunami operations room, launching a national appeal for other tsunami-affected countries. On 28 December, the society contributed from its international disaster fund an initial amount of USD 10,000 to the Indonesian Red Cross for its Aceh operations. On the same day, the society deployed a team of five RDRT members consisting of a doctor and four relief and reporting officers to the Aceh province. MRCS has also pledged USD 10,000 for both the Indian and Sri Lankan Red Cross and USD 5,000 to the Thai Red Cross Society.

February through early April 2005

The MRCS Kedah branch continues to cater for the needs of the 2,000 beneficiaries in the Kota Kuala Muda shelter. During February, the Penang branch also assisted this shelter by providing three meals daily for four consecutive days to approximately 1,000 people. For the Chinese New Year celebrations in the first week of February, the Penang branch also distributed over 3,000 cartons of fruit to tsunami-affected people on the island and in the Kota Kuala Muda shelter in Kedah.

During this period, efforts were made to consolidate the Red Cross Red Crescent recovery plan to assist the affected communities. In February, the Federation's regional delegation deployed a delegate to assist the MRCS in assessing needs and identifying programme areas. Key findings are that while MRCS headquarters and branch staff have received disaster management and psycho-social support training, branch staff will benefit from further training in community-based disaster preparedness and response, logistics, and psychological support. Additional relief stocks are also needed for the eastern states which are also prone to flooding. Further to the immediate needs to strengthen community resilience in the affected areas, MRCS will need to conduct a vulnerability and capacity assessment in other hazard-prone areas of the country. This will be an integral part of the continuing community-based disaster preparedness programme to be initiated in the remainder of 2005. In addition to refresher course for its RDRT-trained members, MRCS will need to enhance the capacity of its staff and volunteers with appropriate equipment and materials for emergency response in the long run. The revised tsunami Emergency and Recovery Appeal for Malaysia has incorporated these programme areas.

Coordination

In emergencies such as this, the *national security instruction no. 20* comes into force and guides the activities of the government agencies. An operations centre was established in Alor Setar, the capital of Kedah state, under the control of the national security division of the prime minister's office. There was close collaboration and coordination between the division and MRCS activities. The MRCS also cooperated with a number of governmental agencies during the tsunami operation including the army, security forces, the social welfare department and the civil defence. The society also worked with Mercy Corps in the distribution of medical

assistance in the first two days. The government was very appreciative of the role MRCS continues to play. Coordination between agencies within the camp could, however, have been improved.

Myanmar

Overview

Myanmar suffered less damage than its immediate neighbours, as the force of the waves reaching its coast had already been greatly reduced. However, the disaster claimed the lives of 61 people and the affected population is estimated at between 10,000 and 15,000. The area most affected was the Ayeyarwady delta, particularly the townships of Laputta and Ngaputaw, and the southern Taninthayi division, mainly around Kawthaung, with an estimated total of 854 households losing homes and property, as well as damage to the infrastructure including water sources, roads, bridges and schools.

Red Cross and Red Crescent Response

Myanmar Red Cross Society volunteers were active immediately following the disaster – including participation in the first aid teams that were deployed to provide first aid and distribute emergency relief items to coastal communities affected by the tsunami.

The Federation's head of delegation and disaster management delegate immediately contacted the national society on the day of the disaster and provided technical support to its relief operation and resource mobilization and external coordination efforts.

From its local fundraising efforts and through the Federation's appeal, the Myanmar Red Cross Society received significant response from private and public donors, the diplomatic community and sister societies. In the first few weeks of January, a number of sister societies made direct in-kind contributions to the society, including food and non-food items. Myanmar Red Cross Society was also distributing food donated by the World Food Programme (WFP) in the affected areas.

The national society undertook a series of assessment missions since 1 January 2005 in the Ayeyarwady delta and, together with the ICRC along the Taninthayi coast and islands to identify immediate needs and plan for mid- to long-term recovery interventions.

During the relief phase, Myanmar Red Cross Society mobilized three emergency relief teams and some 200 volunteers for its operations. Relief aid was provided to a total of 3,060 people. Some 150 were assisted with shelter, six with medical care and one with tracing and messaging service.

The Federation allocated CHF 50,000 in the early days of the operation to support Myanmar Red Cross Society in addressing non-food needs of the affected and to initiate the pre-positioning of 10,000 family packs in the warehouse for future disaster. The Canadian and German Red Cross societies and local donors donated household items for restocking. Due to the limited warehousing capacity of MRCS, a larger, temporary warehouse not far from the society's headquarters was rented to store the additional stock donated and purchased. Minor renovation was undertaken and extra equipment was purchased to secure the premise. Existing stocks have been moved to the new warehouse. Immediate restocking of depleted disaster preparedness stocks was carried out, with the needed goods, material and equipment being provided by local and international donors – mainly through the Federation.

More than three months after the disaster, basic supplementary food and non-food needs of the internally displaced population and most vulnerable beneficiaries were met and families and communities have started to rebuild their lives. The effectiveness and efficiency of the Myanmar Red Cross Society's operation is the result of the long-term investment in capacity building, supported by key Red Cross partners. This investment will continue through the tsunami revised Emergency and Recovery Appeal and will complement processes already being supported in the existing programmes.

The Myanmar Red Cross Society and the Federation's delegation also initiated the process to seek approval from authorities to purchase or be granted property on which to construct a central warehouse including facilities for vehicle maintenance, a training centre and accommodation.

In early April, the national society undertook a survey of the number of fishing boats and other equipment needed to restore livelihoods for those seasonal fishing communities affected. All this equipment will be manufactured locally.

Immediate challenges ahead include the need to ensure that affected populations and the internally displaced receive adequate shelter, non-food relief, safe water, and acceptable sanitation facilities. In the short- to medium-term relief stocks need to be further replenished and the needs for livelihood restoration be properly addressed. Longer-term priorities include strengthening the capacities of the Myanmar Red Cross Society in disaster management and scaling up of its activities in health, branch development and disaster management – particularly in disaster-prone areas.

Coordination

During the initial phase of the tsunami operation, both the Federation and the ICRC took an active part in assisting the Myanmar Red Cross Society in the necessary assessments and provided technical guidance. The continued implementation of the tsunami operation will rest with the national society, with the Federation providing technical guidance and support including financial accountability and reporting to donors.

The Federation and the Myanmar Red Cross Society played a lead role in the inter-agency tsunami assistance coordination group set up in the emergency phase, ensuring verification of assessments and data, complementing action and clear communications. The coordination group consists of representatives from ICRC, UN organizations, MSF, World Vision, Care, Save the Children UK, PSI, YOA, and ADRA. The group launched a joint press release on 6 January with consolidated information on affected populations and the death toll. This cleared general uncertainty about the tsunami's impact on the country.

Following this first phase, the relief partners engaged in a second round of assessments of mid- to longer-term needs and a liaison group, jointly chaired by the UN and the Federation, will continue to ensure coordination between the efforts of the different agencies and organizations.

The liaison group held a review meeting on 28 February to evaluate the coordination efforts during the immediate emergency phase. A number of learning points and recommendations were documented for better coordination in future with regards to logistics, assessments, information sharing mechanisms among and with agencies and authorities inside and outside the country, development of early warning systems, and contingency plans. Special working groups will be formed to follow up on these issues.

Thailand

Overview

The 26 December tsunami struck Thailand's six southern provinces: Ranong, Phang Nga, Phuket, Krabi, Trang and Satun. Many foreign tourists and Thai local residents were killed by the tsunami. The latest official death toll was put at 5,395 persons (1,939 Thais, 1,953 foreigners, 1,503 unidentified) with 2,932 missing persons (2,023 Thais and 909 foreigners) and 8,547 injured. The ministry of agriculture estimates that the tsunami destroyed or damaged 19 governmental buildings, eight harbours, 51 roads, three bridges and 11 embankments, 54 schools, 2,400 fishing boats and 6,771 houses, and killed some 54,000 livestock. More than 100,000 people were affected due to loss of family members, properties and/or means of livelihood.

Thai governmental authorities, with the support of public and private sectors, worked very hard to ensure the proper care and treatment of the affected people, and collaborated with the diplomatic community to ensure that the deceased foreigners were identified, their families informed and well assisted. The government also created several websites, hotlines and teams to handle tracing requests for both local and foreign nationals. International assistance in terms of personnel and financial aid poured into Thailand within days. UN agencies and international organizations made their best efforts in relief operations.

One month after the tsunami, the relief operation in Thailand was already well-advanced and the government and some local agencies started a number of recovery initiatives in the affected communities. The mental rehabilitation hub, established in the south for tsunami-affected people, has provided psychological therapy and counselling sessions for around 12,000 patients. Up to 400 psychologically traumatized survivors still require prescription medication or remain hospitalized. About 40-50 psychologists were sent on rotation from around the country to help the survivors. In addition, a two-month evaluation of the ministry of public health found that 1,101 children were orphaned by the tsunami. Children between 8-15 years of age are considered at highest risk of developing problems. The government plans a two-year psychological relief programme for various groups of affected children.

The recent strong earthquake on 28 March put Thailand's coastal areas on high alert and reaffirmed the importance of the soon-to-be installed early warning system.

Red Cross Red Crescent Action

26 December 2004 through January 2005

Since the tsunami struck, the Thai Red Cross Society has actively organized relief operations to assist those affected by the disaster in the six tsunami-hit provinces. The society also immediately dispatched five doctors to Phuket and another medical doctor and nurses to the affected provinces, and established four health centres in Phuket, Krabi, Satun and Phang Nga to distribute food, clothes, drinking water and hygiene items to the affected people. Some 132 medical personnel comprised of surgeons, orthopaedics, anaesthetists, psychiatrists, forensic experts and nurses soon joined the medical team in the south to provide medical care to the injured in the hospitals. From 28 December 2004 to 14 January 2005, five ambulances with nurses had been standing by at the Bangkok airport to care of and transport patients referred from the affected provinces, in coordination with foreign embassies. The Thai Red Cross Society had also coordinated with the ministry of foreign affairs in assisting foreign survivors with passport issues, medical insurance, organizing a webpage and providing transportation for patients. The ICRC supported the Thai Red Cross Society in liaising with the ministry of foreign affairs and monitoring the need for tracing services.

The society also dispatched a disaster relief team to 15 temporary shelters set up in the hardest hit areas to coordinate relief distributions, and medical and psychiatric care to the affected population. About 300 Red Cross packages and other necessities were distributed including blankets, underwear, cooking utensils, bedding and clothing, drinking water and food.

Around 70-120 doctors and nurses worked in four shifts daily at the Thai Red Cross Society's national blood donation centre from 27 December 2004 to 6 January 2005. The centre immediately sent out blood supplies to the affected areas through its branches in the south. An appeal for new blood donations was launched and received tremendous response from both Thais and foreigners. Additional staff members were positioned at the Thai Red Cross Society's temporary relief operation centre to handle medical information.

The Thai Red Cross Society continued to receive substantial local contributions in cash and in kind. Over 100 truckloads (each with a capacity of six to seven tonnes) of food and non-food items, medical supplies and other necessities were transported to the six provinces and a Thai Red Cross Society health station in a nearby province within the first month. Some 11,370 people from the general public, governmental and non-governmental organizations, students, teachers, soldiers, and foreigners offered voluntary assistance in sorting out donated items for transportation, registration and handling inquiries from foreigners at the headquarters, the blood centre and branches. The society provided relief assistance to over 35,460 beneficiaries in the affected provinces during the emergency phase.

Since the onset of the disaster, the Federation's regional delegation was in close contact with the Thai Red Cross Society and facilitated information flow and communications with the international community. An amount of CHF 500,000 was allocated to the Thai Red Cross Society to cover the operational costs of its relief operation. The Federation also deployed a rapid assessment team on 30 December 2004 to the two hardest-hit provinces of Phuket and Phang Nga. The assessment concluded that the Thai Red Cross Society's response was effective and relief needs were being sufficiently addressed. A joint assessment to evaluate longer-term needs was however necessary.

The president of the Federation visited the Thai Red Cross Society on 10 January and met with the leadership to discuss mid- and long-term assistance programmes for the affected communities, stressing the importance of preparedness for future disasters.

Meanwhile, the Federation initiated and hosted a weekly inter-agency meeting, bringing together UN agencies, and local and international organizations based in Bangkok. The objective was to share and update the relevant information in Thailand and regionally in order to strengthen concerted efforts of existing assistance and clarify future planning.

February 2005

As recommended in the January assessment, the Thai Red Cross Society and the Federation sent a joint assessment team to the four severely affected provinces of Phuket, Phang Nga, Krabi and Ranong. The purpose was to scope out the participation possibilities of the Red Cross and Red Crescent Movement in the short- to long-term recovery of the affected communities. Early findings suggested that apart from the government's efforts there were still gaps in both the short- and long-term where the Red Cross could provide assistance, such as in psycho-social support, shelter, livelihoods and community-based disaster preparedness. A key area was to ensure active involvement of the Thai Red Cross Society's chapters and their close cooperation with the headquarters in developing any future plans.

The Federation held the first Red Cross Red Crescent coordination meeting in February with the participation of the Thai Red Cross Society and partner national societies. The purpose of the meeting was to bring all together to discuss possible project areas, share information and ensure no duplication of work among Movement partners.

In addition, ICRC held a regional seminar on 'restoring family links in relation to the tsunami' between 24 and 26 February in Bangkok, participated by all components of the Movement in the region as well as PNS. The purpose of the seminar was to consolidate the Movement's response to tracing needs and document lessons learned. Earlier, ICRC proposed that the Thai Red Cross Society be a focal point in handling missing cases as a result of the tsunami in Thailand. The Thai Red Cross Society addressed its need to set up a tracing system with common best practice. Some PNS expressed their interest in assisting the Thai Red Cross Society in this regard.

March 2005

During 8-9 March, the special representative of the Federation's secretary-general for the tsunami operation, accompanied by the head of regional delegation, visited Phuket to review the recovery progress in the province and discuss Red Cross Red Crescent plans with the Thai Red Cross Society.

The second meeting for Red Cross Red Crescent coordination was held on 21 March in Phuket to discuss the best way of moving forward together. The Thai Red Cross Society shared its five areas of planned implementation in rehabilitation, based on the joint recovery assessment, with focus on livelihoods, assistance to children, health care, shelter, sanitation and environment, and capacity building. It already initiated some activities related to construction of a day care centre, provision of safe drinking water, provision of 350 fishing boats for affected families, and a fish pond pilot project for subsistence agriculture. The Thai Red Cross Society's chapters in the affected provinces also shared their achievements during the relief period and their rehabilitation initiatives. Thematic discussions took place covering several aspects relevant to the Thai Red Cross Society's recovery plans including restoring livelihoods of fishing communities, providing vocational training with gender-based activities, developing community-based disaster preparedness and public education, and undertaking hazard vulnerability and capacity assessment, health safety training, capacity building at different levels and first aid training. A number of PNS indicated their areas of interest in supporting the Thai Red Cross Society.

Most recent developments

Following the two PNS coordination meetings, the Federation's regional delegation presented to the Thai Red Cross Society senior management on 1 and 4 April a partnership framework proposal for the recovery of the tsunami-affected communities in southern Thailand. These proposals, including livelihood and ecosystems, health, water and sanitation, community and children care initiatives, along with the principle modalities of joint coordination were agreed upon and reflected in the revised tsunami Emergency and Recovery Appeal to be launched next week. Several are subsequently in the process of consolidating their project proposals with the Thai

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

Red Cross Society. Discussions are ongoing between the Thai Red Cross Society and the Federation on establishing an autonomous joint management unit to manage the recovery programmes.

East Africa region

January highlights

- Emergency operations are conducted in Seychelles and Somalia
- The *Tsunami Nairobi Initiative* is adopted by East African national societies
- 15 African national societies launch tsunami fundraising initiatives

February highlights

- A six-year plan of action for Somalia, Seychelles and East Africa is developed
- Consultative capacity building/development process intensifies
- African national societies staff-on-loan joins the regional delegation in Nairobi

March highlights

- Team from Africa participates in the Hong Kong Tsunami Response Forum
- Tsunami movement coordination meeting convenes in Nairobi
- African national societies respond to new tsunami alert

Somalia

Overview

As the tsunami struck the northeastern coastline of Somalia on 26 December it left behind around 300 dead or missing people. Staff and volunteers from the Somali Red Crescent Society (SRCS) were the first to provide emergency response in many of the most affected areas in the Bari, Nugal and Mudug regions. Trained volunteers were mobilized both from the inland and coastal districts. Health staff from the national society's clinics and branches was instrumental both in the disaster health and sanitation response and in assessments. The initial work of first aid and medical referral quickly gave way in January to distribution of essential drugs and oral rehydration solution (ORS), chlorination of households and water sources, treating eye, skin and other infections, environmental hygiene and cleanup campaigns, psychological support, and health and sanitation awareness activities, all of which continued through February.

Partnerships with other operational organizations were essential during this phase, and SRCS staff worked closely with UNICEF and WHO in particular (both longstanding partners for the SRCS integrated health care programme) to coordinate and complement relief efforts. Through its office in Bossaso, UNICEF had significant supplies of relief and medical items pre-positioned in the region, which SRCS worked with and distributed. The impact of the national society, both during the immediate aftermath and later on, is evident from the testimonies of members of affected communities and has been publicly acknowledged by OCHA and the President of Puntland amongst others, and their continued engagement has ensured continuity of support.

From the beginning, Movement coordination was very well conducted, with daily meetings between SRCS, Federation and ICRC and regular updates to interested PNS. Periodic meetings in Nairobi brought all partners together to review action so far and decide future direction. The Federation participated in the OCHA coordination forum in Nairobi, and SRCS in the field-level coordination in Garowe. A tremendous response from African national societies and individuals demonstrated a great solidarity within the continent, major examples being the South Africa, Ethiopia, Kenya and Mozambique Red Cross societies. Other support was pledged from old and new Movement partners for Somalia, including the national societies of Hong Kong, Saudi Arabia, Luxemburg, Britain, Germany and China to name just a few.

Today, the lifesaving and emergency phase is over. The structure of the emergency teams has transformed into a more standard Red Crescent volunteer approach, with newly recruited and trained teams of volunteers in place among the communities themselves. The focus has shifted into enhancing and expanding the core areas in which

the society has developed as a leader in providing services to vulnerable communities in those areas – principally through the provision of primary health care and activities promoting health and hygiene. Outreach services to remote tsunami-hit communities from the mother and child/outpatient departments (MCH/OPD) clinics are being expanded. Community awareness in water and sanitation and training activities that complement the hardware inputs of other actors will be developed, and the water and sanitation facilities of the SRCS clinics themselves will be upgraded to make them a strong focus and example for sound practices within their catchment populations. The primary health facilities in Bari region, which SRCS had left to other actors and public authorities, have deteriorated over time. The Somalia Red Crescent is now in a position to expand its services to that region in agreement and coordination of the health ministry and other partners active within the Somali aid coordination body (SACB).

Red Cross and Red Crescent Action

Objective 1 (health): The health conditions among the most affected people in Somali coastal regions of Alula, Iskushuban (Hafun), Bender Beila, Eyl and Jariban have improved and the outbreak of epidemics and waterborne diseases prevented.

Outreach activities were carried out in the affected coastal areas of Badey under Eyl district (Nugal region) and Gara'ad and Kulub in Jeriban district (Mudug region). Following the tsunami, the only operational health facilities of the SRCS recorded an increase in cases of eye, skin and respiratory infections. The increase was attributed to the contaminated water sources and climatic changes. Therefore, in addition to the routine clinic activities, a total of 718 patients were treated through outreach activities between January and March. Breakdown is as follows:

January - 445 people (167 under five years and 278 above five and adults)

February – 86 children (45 under five years and 40 above five - outreach conducted in Badey only)

March - 187 children (101 under five years and 86 above five - outreach in Gara'ad area only)

The branches of Garowe and Galkayo are in the process of fine tuning the outreach plans for the year. This will lead towards more structured outreach activities on a continuous basis with at least a monthly visit to the affected communities at the coastal areas.

In total, 70 volunteers were active in Bari region – 20 in Alula district, 30 in and around Hafun (the single worst hit site) and 20 in Beyla district. Some 30 other volunteers were active in Nugal and Mudug. The logistical constraints were enormous – the affected stretch of coast is one of the least accessible parts of the country, with no road infrastructure in most areas and often no possibility to travel along the coast without going back inland first. Supplies to Hafun, for example, could only get there by four-wheel-drive vehicles and using limited windows of time between tides to access the town.

In December and early January, the initial emergency health response included first aid and medical referral by both volunteers and the health staff of Nugal and Mudug regions. One team that included the SRCS Galkayo branch health officer and SRCS Balibusle clinic staff was able to reach the badly affected sites of Gara'ad, Kulub and Ilfhoshe, and treated 311 sick and injured people, as well as carried out a nutrition survey. Even by the end of January, a number of people were found to still be nursing open wounds and injuries.

An SRCS/Federation review team identified persistent diarrhoeal diseases, eye and skin infections as well as upper respiratory tract infections attributed to poor environmental conditions and hygiene practices. This phenomenon was observed in most areas visited except Eyl where - thanks to water availability through seasonal rivers and springs - the general environmental hygiene remained acceptable. Through organized medical camps the SRCS treated a total of 785 patients living in remote communities up to the end of January.

A significant impact of SRCS work has been to prevent any major disease outbreaks occurring in any of the worst hit areas. The combination of promotional and curative health work, coupled with sanitation activities, allowed communities to start to piece their lives together without the added burden of coping with widespread disease outbreak.

Objective 2 (capacity building): The disaster response capacity of national societies in the East Africa region is strengthened.

In December, the Federation trained a number of Somalia Red Crescent branch staff members in contingency planning and vulnerability and capacity assessment (VCA). Trainees included key staff and volunteers from the Garowe and Galkayo branches who were able to put these skills into action during the assessment and initial response. To build on and accelerate this process, disaster preparedness activities will include further VCA and contingency planning exercises to be carried out across the country, extending the process that had already started in Garowe and Galkayo branches. By year's end, with the Federation's technical and financial support at both country and regional levels, a national VCA and disaster management strategy and plan will lead to community-based risk reduction activities and other disaster preparedness and response mechanisms such as early warning systems, disaster preparedness stocks access and active national as well as branch disaster response teams.

The volunteer mobilization was assisted by the recently established Red Crescent sub-branches. In the Bari region, for example, all districts now have volunteers active at this level, with an increasing number trained in first aid and basic disaster management. During the emergency phase, volunteers were supported with protective gloves and materials provided through the Federation. Other protective and sanitation materials were provided or pledged by UNICEF. The Federation will assist the national society in ensuring its relatively new volunteer management guidelines become fully operational, support a full branch development review, and participate in the development of a national strategy in the second quarter of 2005.

An operational review in January/February undertaken by SRCS/Federation, involving an information officer generously loaned from the Uganda Red Cross, reviewed the work carried out to date and mapped the plans for future mid- to long-term interventions. The findings were endorsed by a later inter-agency assessment led by OCHA and the food security assessment unit (FSAU).

The operation has highlighted the need for additional human resources or functions within SRCS. A national disaster management coordinator and additional branch health officers in Puntland will be recruited with Federation support.

The Federation's regional IT team also began to upgrade the communications infrastructure in the Somali Red Crescent branches of Garowe, Galkayo and Bosaso which were at the forefront of the response. In March, a subsequent follow-up IT mission installed radios in all the branch outreach and monitoring vehicles, and upgraded or purchased computers in Garowe and Bossasso branches.

Seychelles

Overview

Following the effect of the tidal waves that hit the Seychelles on 26 December and the aftermath of the heavy rain which followed the next day, as many as 500 houses were either damaged or destroyed along the coastline of Mahé and two other islands, Praslin and La Digue. The most affected districts are in the northern part of Mahé, and the central and southwest coastline of the same island. Entire households were either washed away or destroyed forcing many families to evacuate their houses. Boats were also damaged or destroyed as well as fishing items and equipment.

Due to the risk of more rain, the government was forced to evacuate some 75 families and place them in Berjaya Beau Bay hotel, Beau Vallon until the situation became stable; the families are now back in their houses. Their houses were not damaged, but the evacuation was a precautionary measure. The government has also assisted the affected people financially to meet their immediate food needs.

The Seychelles Red Cross had seen its premises inundated and operated throughout the emergency from an improvised office in a private house situated on higher grounds. Staff and volunteers used their private vehicles, mobile telephones and even food reserves to assist those affected by the tsunami. Today, the national society is part of a national disaster preparedness and response committee working closely with the authorities to design better intervention schemes.

Red Cross and Red Crescent Action

Objective 1 (immediate livelihood restoration): Essential livelihood rehabilitation activities supported for selected families in the Seychelles.

The Seychelles Red Cross Society is the only humanitarian organization assisting the authorities in responding to the needs of the most vulnerable; they have been able to respond using available resources and assistance provided by the local community.

On 26 December, all available volunteers and trained disaster response team members were alerted and placed on standby upon receipt of the alert from the meteorological office. A crisis cell was immediately created. The Praslin branch volunteers assisted the authorities in evacuating people who were on the beaches, communicating with people living on low-land areas and providing ambulance services. They also assisted in removing debris on the roads and in houses. A radio appeal for non-food items such as mattresses, bed sheets, and kitchen utensils was well received by the local public enabling the national society to increase its rather limited resources.

The La Digue branch volunteers were also involved in working closely with the emergency brigade in removing debris on the main roads. They assisted the ministry of health in the relocation of the La Digue hospital. Red Cross volunteers were part of the post disaster stress management committee set up by the ministry of social affairs and also provided psychological assistance to those in need.

The national society has received and distributed mattresses, bed sheets, kitchen sets and tinned fish donated by the local community to 100 families. Affected fishermen required support to recover their livelihoods. The Seychelles Red Cross headquarters office in Mahé was flooded, reducing the ability of the national society to coordinate and communicate; there were difficulties faced in assessment and coordination with national authorities.

The regional logistics unit procured 90 mattresses and 60 kitchen utensil sets for the Seychelles Red Cross through the Federation's office in Dubai. These were airlifted to Seychelles directly from Dubai in January. Funds were also transferred from the Federation to the Seychelles Red Cross for relief item procurement.

The Red Cross has been reporting and providing operational updates from the Indian Ocean Platform for Rapid Intervention Ocean (PIROI) and the Federation's regional delegation.

The national society and the Rotary Club of Victoria in coordination with the Sri Lankan consulate launched an appeal for donation of clothes for the people affected by the tsunami. Volunteers and expatriates living in Seychelles, especially Sri Lankans, Kenyans and Taiwanese were also engaged in collecting, sorting and bailing of clothes which were consequently sent to Sri Lanka.

Severe weather events have been on the increase in the Seychelles in recent years and the cyclone season is likely to bring further severe storms, landslides and flooding. The national society needs to assess and plan its disaster preparedness programme, conduct further disaster management training and pre-position relief items.

Objective 2 (capacity building): The disaster response capacity of national societies in the Eastern Africa region is strengthened.

During January the Federation's regional delegation transferred funds to the Seychelles Red Cross to facilitate provision of essential electrical power and water pumping equipment for the national headquarters offices, and equipping 60 national disaster response team and local volunteers with basic tools and personal protection items.

The regional logistics unit in Nairobi has procured 50 sets of kitchen utensils, 20 family tents, 10 office tents, 50 tarpaulins (6 x 4m) and 50 blankets from the Federation's office in Dubai for the Seychelles Red Cross' disaster preparedness stock.

A one-day learning review was held on 18 January to reflect on the lessons learned in Somalia, Seychelles, Kenya and Tanzania. This meeting helped to focus on new ways of working in the future and to design a longer-term

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

disaster preparedness programme. The participation of the Red Cross Red Crescent Network for East Africa (RC-Net) and the Federation Secretariat's representatives gave the meeting a regional perspective.

The Federation's meeting was followed by a learning review of the operation organized by the Seychelles government. The national society was asked to facilitate the process in which it used the experience of the Cyclone Gafilo learning review conducted by the regional delegation in June 2004.

The recent recruitment of an experienced head for the Federation's Indian Ocean sub-office was welcomed by the national society as well as PIROI. There is continuity demonstrated in this decision as the organizational development delegate has functioned as focal point for the sub-region for the last three years.

Preparations for a VCA exercise and disaster management and psycho-social support training are ongoing.

Africa Region

Overview

Following the unique impact and consequences of the earthquake and tsunami in the Indian Ocean, leaders of the affected national societies in Eastern Africa and other East African national societies represented by RC-NET, together with representatives from PIROI, PNS based in the region, ICRC and the Federation's Secretariat in Geneva, and the field met in Nairobi on 18 January 2005.

The meeting reviewed national societies' and the Federation's response to the tsunami disaster and took into consideration proposals for regional preparedness measures. It concluded with the adoption of the *Nairobi Initiative* a 10-point document outlining disaster preparedness and early warning priorities for the national societies in the eastern African region.

In February the regional delegation assisted the Somali Red Crescent and the delegation for Somalia in conducting a tsunami operation review. The outcomes of the mission – which highlighted the importance of strengthening health services in the affected area – were similar to the conclusions of a UN OCHA-led evaluation mission conducted a month later.

The *Nairobi Initiative* was immediately put into practice through the development of a tsunami plan of action spanning over five years. The process involved key resources from the regional delegation as well as all the national societies in the region.

It became rapidly clear that the amount of interest and sympathy generated by the tsunami as well as the complex environment, especially in Somalia, required intense Movement coordination. In March, the secretary-general of the Ethiopian Red Cross finally joined the regional delegation as regional Movement coordinator. Shortly after, he and a larger team for Africa brought together the head of regional delegation, senior delegates and national society representatives to attend the Tsunami Response Forum in Hong Kong on 3-5 March.

Each of the team members was involved in the various working groups, thereby ensuring that the African perspective is well represented in the final documents. The *Nairobi Initiative* was seen as a useful African contribution and inspired the Hong Kong meeting's declaration. The African team presented participants with a comprehensive information kit including its draft short- and long-term plan of action covering the period 2005-2010. As a part of the plan of action, the regional strategy and operational framework (RSOF) developed for the East Africa region is supported by a matrix which provides an overview of concrete plans and aspirations for the Movement for the next year and the period beyond.

The budgets presented by the African team were appreciated as correct and relevant to the objectives and activities set in the plan of action. The Hong Kong meeting also provided a platform for developing intercontinental relationships between Asian and African national societies with the South Korean Red Cross expressing its intention to be involved in the tsunami activities in Africa.

An IT and telecommunications delegate to assist with the tsunami recovery and disaster preparedness activities has already joined the regional delegation in Nairobi. The recruitment of a francophone disaster management delegate has been reopened after the preferred candidate declined the job. The recent recruitment of an experienced head for the Federation's Indian Ocean sub-office was welcomed by the national society as well as PIROI.

While focusing on the need for accelerating the development and implementation of such disaster management measures that will benefit the population living in high-risk areas in the eastern African region, the regional delegation remains determined to continue to assist and advocate the general and often forgotten vulnerabilities that are overshadowed by disasters that make the headlines.

Red Cross and Red Crescent Action

Objective 1 (capacity building): The disaster response capacity of national societies in the Eastern Africa region is strengthened.

In December, the Federation trained a number of Somalia Red Crescent branch staff members in contingency planning and vulnerability and capacity assessment. Trainees included key staff from the Garowe and Galkayo branches that were able to put these skills into action during the assessment and initial response. The regional disaster preparedness programme had developed a pool of RDRT-trained personnel who were deployed at national level for this response in Somalia, Seychelles and Kenya.

Throughout the initial response the regional delegation in Nairobi and the delegation in Somalia maintained constant contact with the national societies affected, communicated information on the disaster impact and response operations as they emerged, and coordinated with other members of the Red Cross Red Crescent Movement, UN agencies and NGOs.

Operational support was given to the Seychelles Red Cross to arrange air transportation of relief supplies and disaster preparedness stocks. The Somalia Red Crescent received advice on assessments and technical responses.

The procurement of relief items including 60 kitchen sets, 90 mattresses transported by airlift from Nairobi on 18 January, meant that the national society was able to respond swiftly to most of the needs of newly identified beneficiaries. The 80 volunteers received specialized kits, ensuring that they have adequate clothing and equipment to respond to future natural disasters. The kits include helmets, boots, gloves and rain coats.

The disaster management department initiated the process of procuring disaster preparedness stocks for a population of 5,000 families consisting of 10,000 tarpaulins, 10,000 blankets, 5,000 kitchen sets, 5,000 jerry cans, 10,000 mosquito nets, one new emergency health kit, one new cholera kit and one new water sanitation kit. Discussions were initiated with the French Red Cross in Reunion to have disaster preparedness stocks for 5,000 to 10,000 families. A formal request was sent to the ICRC in Nairobi for assistance in the management of disaster preparedness stocks for the Federation in Nairobi.

A comprehensive plan of action including response, rehabilitation and preparedness for Somalia, Seychelles and the East African region was designed. Two additional positions have been requested – a francophone disaster management delegate and an IT and telecommunications delegate. Terms of reference have been discussed with the British Red Cross for review of RDRT including a British Red Cross-funded consultant.

In February the disaster management department coordinated planning meetings to develop an integrated six-year plan of action and budget (the RSOF) for tsunami recovery that was built on the *Nairobi Initiative*. All national societies were contacted for their input for the regional logistics review process. Questionnaires were sent to all national societies to solicit logistics support requirements, local procurement possibilities and capacities.

An experienced IT and telecommunications delegate started his mission. Interviews were held for the recruitment of a francophone disaster management delegate. The recruitment process for the Movement coordinator position was also initiated and this resulted in the contracting of a senior national society leader. Technical support was also provided to the Sri Lanka delegation's logistics unit.

In March the IT and telecommunications manager went on a much needed technical support mission to Somalia that provided HF radio installation support to the Galkao, Garowe and Bosaso branches in the tsunami-affected region.

Three sub-regional meetings were held in March in the Indian Ocean islands and in Nairobi to engage all national societies and further define planning. The Indian Ocean islands national societies and PIROI met with the regional disaster management coordinator to review sub-regional plans for 2005-2010 from 1-3 March in Reunion. On 19 March the secretaries-general of the five East African national societies reviewed the East Africa plan of action and on 23 March senior staff from the Horn of Africa national societies met to review their sub-regional plans. The revised appeal was coordinated involving review and support for 10 budgets and logical frameworks and three appeal texts.

A British Red Cross consultant and a national society disaster preparedness staff member have been contacted to evaluate the success of the East African RDRT mechanism. The review has started with telephone interviews. It is planned for the team to visit the Ethiopia and Eritrea Red Cross societies in April. This review will focus on the next training and exercise event in June 2005. Kenya, Tanzania and Uganda participants to a Lake Victoria Red Cross meeting, held in Dar-es-Salaam in March, requested that the next RDRT be organized in Tanzania. It is worth noting that during a meeting in Nairobi in January, the Tanzania Red Cross recognized that the tsunami disaster highlighted that its disaster management capacity needed improvement.

The region responded quickly to the Indonesian earthquake that struck on 28 March at 17.09 GMT (19.09 Kenya Standard Time). The head of the regional delegation in Nairobi mobilized senior staff of the delegation, the focal point for Indian Ocean islands and the head of the delegation in Somalia. The team put national societies on the Indian Ocean islands coast on alert. Within 90 minutes of the first call, national societies in Somalia, Kenya, Tanzania, Djibouti, Mauritius, Seychelles, Comoros and the French Red Cross PIROI in Reunion had been informed. No communication was possible with the Madagascar Red Cross. The national societies were able to quickly communicate with their governmental counterparts and telephone their branches on the coast. In Somalia, BBC Somalia news service was contacted and the SRCS secretary-general was interviewed concerning the need for communities to be aware of the risk and take avoiding action.

The regional delegation contacted the regional and Somalia offices of UN-OCHA and closely coordinated with UN agencies. Early the following morning the only reported impact was in Mauritius where a 1.5-metre high wave washed up on the coast of Mauritius mainland but did not cause notable damage or casualties. The rapid response to fears of another tsunami resulting from the recent Indonesian earthquake by all concerned was attributed to the experience of the 26 December tsunami, the 18 January learning review in Nairobi and the commitment to early warning and disaster preparedness in the 10-point *Nairobi Initiative*.

The regional delegation in Nairobi continues to offer support and assistance to those countries in its region, and is coordinating the substantial interest and support from other African national societies and non-Movement partners. Preparedness measures are being stepped up in anticipation of the 2005 cyclone season.

Objective 2 (advocacy): The humanitarian needs of the disaster affected and the work of the national societies are advocated for.

During the crisis, media coverage, advocacy activities and promotion of national society work was mainly done by the regional information delegate and the heads of regional and Somalia delegations. Interviews and briefings were given to the BBC radio (English and French services), ITN TV news (UK), Reuters (local and European offices), AFP (Agence France Presse), DPA (German News Agency), Radio Canada, South African radios, RFI (Radio France International), as well as the Independent newspaper. Support was also given to national societies who launched national appeals (notably Kenya and Uganda Red Cross).

An unprecedented wave of sympathy and generosity was raised by the tsunami disaster across the African continent. With 15 African national societies having launched appeals or initiated fundraising activities to supplement the global Federation appeal for the tsunami victims, it is a new dynamic transformation for Africa from an aid recipient to an aid providing continent. Both the public and the corporate sector also responded generously.

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

Most noticeable is the South Africa Red Cross' contribution which managed to raise some ZAR 30 million (approximately CHF 5.7m) towards the Federation's global appeal. The national society and the Federation's representative organized a 'Thank You Africa' event on 22 March in Johannesburg. The Red Cross is sending thank you letters and certificates to its major donors; over 20,000 deposits were made in their bank account African donations are slowing down slowly and the South Africa Red Cross is now focusing on fundraising for local disasters such as floods which currently affect the country.

The working relationship between the media units in Geneva and Nairobi and both national and international media houses was highlighted as an important support given to the operation in general and the fundraising effort in particular.

Three national society information officers – Rwandan, Ugandan and Tanzanian Red Cross staff - were seconded to the regional delegation to assist with preparation of operations updates, interviews and press releases to attract media attention on the plight of the people made vulnerable by the disaster. The Uganda Red Cross' information officer was successfully deployed to the affected areas in Somalia and wrote feature articles and news stories.

These are part of a regional exchange and learning programme for national societies which is spearheaded by the regional communications forum of the RC-NET. There are also plans to conduct joint visits with Red Cross and Red Crescent counterparts to the national society operations areas as appropriate.

Outstanding Needs

Human Resources

The recruitment of Federation delegates for Sri Lanka and Indonesia continues, and the 22 posts below remain to be filled.

| Place of assignment | Positions to be filled |
|--|--|
| Sri Lanka | Transport/fleet delegate, finance development delegate, IT delegate, psycho-social programme delegate, disaster management delegate, procurement delegate, information delegate, legal delegate. |
| Indonesia – Banda Aceh operations centre | IT delegate, recovery programme coordinator, water and sanitation delegate, reconstruction delegate, administration delegate, livelihoods delegate, 2 logistics delegates. |
| Indonesia – Medan sub-office | Medical logistics delegate. |
| Indonesia – Nias island | Health delegate, logistics delegate, IT/telecommunications delegate. |
| Maldives | Programme coordinator, logistics delegate. |

Asia: Earthquake and Tsunami: Focus on first quarter; Appeal no. 28/2004; Operations Update no. 52

For further information specifically related to this operation please contact:

In Asia:

- *India, New Delhi: Bob McKerrow, Head of Regional Delegation, phone: +91.98.1000.1534; Azmat Ulla, Head of Delegation, phone: +91.98.1039.9650.*
- *Sri Lanka: Alisdair Gordon-Gibson; Head of Delegation; phone: +94.77.755.7001*
- *Indonesia: Ole J Hauge, Head of Delegation; phone: +622.1791. 91 841; mobile: +628 11 824 859; fax: +622 1 79180 905; email: ifrcid01@ifrc.org and Latifur Rahman, Disaster Management Delegate; phone: +62.811.82.6624; fax: +62.217.18.0905 email: ifrcid05@ifrc.org*
- *Maldives: Jerry Talbot, Head of Delegation, phone: +960 791 435 email: ifrcmv02@ifrc.org*
- *Myanmar: Joanna Maclean, Head of Delegation, phone: +95.1.383686 email: ifrcmm01@redcross.org.mm*
- *Malaysia: Dr Selya Johti, National Disaster Management Chairman, Malaysian Red Crescent Society; phone: +60.2.6138.2325, mobile: +60.1.2234.0310; fax: +60.3.6138.2325*
- *Thailand: Lt. Gen. Amnat Barlee, Director of Relief and Community Health Bureau, Thai Red Cross; phone: +66.2.251.7853 ext. 2202/251.7442, fax: +66.2.252.7976; email: abarlee@webmail.redcross.or.th*
- *Thailand, Bangkok: Dr. Ian Wilderspin, Head of Disaster Risk Management Unit, phone: +662.640.8211; fax: +662.661.8220; email: ifrc22@ifrc.org and Bekele Geleta, Head of Regional Delegation; mobile: +66 18215495; email: ifrc23@ifrc.org*

In Africa:

- *Nairobi Regional Delegation; Anitta Underlin, Federation Head of Eastern Africa Regional Delegation, Nairobi; email: ifrc203@ifrc.org; Phone: +254.20.283.51.24; Fax +254.20.271.84.15; Steve Penny, Regional Disaster Management Coordinator; Phone: +254.20.283.5117; Fax: +254.20.271.8415; email: ifrc278@ifrc.org*

In Geneva:

- *Gert Venghaus, Head of Tsunami Operations Coordination., Geneva; +41.22.730.4258, email: gert.venghaus@ifrc.org*
- *Charles Evans, Southeast Asia Desk., Geneva; phone: +41.22.730.4320; fax:+41.22.733.0395; email: charles.evans@ifrc.org*
- *Suzana Harfield, South Asia desk (Sri Lanka and Maldives), Geneva; phone: +41.22.730.4353 ; email: suzana.harfield@ifrc.org*
- *Penny Elghady, Tsunami Grants Officer, Geneva; phone: +41.22.730.4864; mobile: +41.79.205.1959; email: penny.elgadhya@ifrc.org*
- *Jagan Chapagain, South Asia Regional Officer (India, Bangladesh), Geneva; phone: +41.22.730.4316; email: jagan.chapagain@ifrc.org*
- *Josse Gillijns, Regional Officer for Eastern Africa, Africa Dept.; phone: +41.22.730.42.24; email: josse.gillijns@ifrc.org;*
- *Media Department, Sian Bowen, phone: + 41.22.730.4428; email: sian.bowen@ifrc.org*
- *Logistics Department for mobilization of relief items, Mauricio Bustamante, logistics officer for Sri Lanka, Maldives and Myanmar, Geneva; phone: +41.22.730.4267; email: mauricio.bustamante@ifrc.org and Isabelle Sechaud, focal point for Indonesia and general coordination of tsunami operations logistics cell, Geneva; phone: +41.22.730.4367; email: isabelle.sechaud@ifrc.org; Bjarne Godfredsen, procurement officer, Geneva; phone: +41.22.730.4873; email: mailto:bjarne.godfredsen@ifrc.org. Chloé Bitton, senior logistics assistant for tsunami logistics cell, Geneva; phone: +41.22.730.4928; email: chloe.bitton@ifrc.org.*

All International Federation assistance seeks to adhere to the [Code of Conduct](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) in delivering assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in these or other countries, or for a full description of the national society profiles, please access the Federation's website at <http://www.ifrc.org>.

[Contributions list below; click here to return to the title page](#)

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|-------|----------|----------|------|-----------|------|---------|
|-------|----------|----------|------|-----------|------|---------|

CASH

| REQUESTED IN APPEAL CHF -----> | 183,486,000 | | | TOTAL COVERAGE 154.7% |
|------------------------------------|-------------|-----|-----------|---------------------------------|
| AFRICAN UNION | 100,000 | USD | 113,200 | 06.01.05 EAST AFRICA |
| ALBANIA - RC | 130,000 | USD | 147,160 | 27.01.05 |
| ALGERIA - PRIVATE DONORS | | | 2,555 | 24.01.05 |
| ANDORRA, PRINCIP. - GOVT | 60,000 | EUR | 92,580 | 21.01.05 |
| ANDORRA, PRINCIP. - PRIVATE DONORS | | | 3,086 | 12.01.05 |
| AUSTRALIAN - RC | 2,400,000 | AUD | 2,119,200 | 30.12.04 |
| AUSTRALIAN - RC | 7,300,000 | AUD | 6,445,900 | 31.12.04 |
| AUSTRALIAN - GOVT | 4,800,000 | AUD | 4,238,400 | 02.01.05 |
| AUSTRALIAN - RC | 3,000,000 | AUD | 2,647,500 | 24.01.05 |
| AUSTRALIAN - RC | 3,000,000 | AUD | 2,647,500 | 25.01.05 |
| AUSTRALIAN - GOVT | 562,000 | AUD | 495,965 | 02.01.05 FAMILY SUPPORT PROGRAM |
| AUSTRALIAN - PRIVATE DONORS | | | 2,919 | 01.03.05 |
| AUSTRIA - GOVT/RC | 450,000 | EUR | 696,825 | 10.01.05 HYGIENE PARCELS |
| AUSTRIA - RC | 1,500,000 | EUR | 2,314,500 | 27.01.05 |
| AUSTRIA - PRIVATE DONORS | 2,080 | EUR | 3,221 | 01.02.05 |
| AUSTRIA - PRIVATE DONOR | 20,331 | EUR | 31,942 | 30.03.05 |
| AZERBAIJAN - PRIVATE DONORS | | | 102 | 18.01.05 |
| BAHRAIN - PRIVATE DONOR | 50,000 | USD | 56,600 | 06.01.05 |
| BANGLADESH - RC | 428,737 | BDT | 8,275 | 11.01.05 |
| BARBADOS - RC | 118,490 | USD | 134,131 | 03.02.05 |
| BELGIUM - RC/GOVT | 7,186 | EUR | 11,089 | 31.12.04 |
| BELGIUM - RC | 500,000 | EUR | 771,500 | 01.01.05 |
| BELGIUM - RC | 600,000 | EUR | 925,800 | 20.01.05 |
| BELGIUM - RC | 100,000 | EUR | 154,900 | 24.01.05 |
| BELGIUM - PRIVATE DONOR | 23,676 | EUR | 36,662 | 07.02.05 |
| BELGIUM - PRIVATE DONOR | 4,508 | EUR | 6,941 | 10.02.05 |
| BELIZE - RC | 24,659 | USD | 27,913 | 11.01.05 |
| BOLIVIA - RC | 5,356 | USD | 6,063 | 24.01.05 |
| BOSNIA & HERZEGOVINA - RC | 176,948 | EUR | 274,092 | 21.01.05 |
| BRAZIL - PRIVATE DONORS | | | 2,998 | 18.01.05 |
| BRAZIL - PRIVATE DONOR | 9,980 | USD | 11,297 | 09.02.05 |
| BRAZIL - RC | 200,000 | USD | 226,400 | 28.01.05 |
| BRAZIL - RC | 150,000 | USD | 169,800 | 18.02.05 |
| BRAZIL - RC | 150,000 | USD | 169,800 | 23.02.05 |
| BRUNEI - PRIVATE DONORS | 30,285 | USD | 34,282 | 05.01.05 INDONESIA |
| BRUNEI - PRIVATE DONORS | 3,600 | USD | 4,075 | 04.01.05 |
| BULGARIA - PRIVATE DONORS | 10,000 | EUR | 15,430 | 14.01.05 |
| CAMBODIA - GOVT/RC | 10,000 | USD | 11,320 | 05.01.05 |
| CAMBODIA - PRIVATE DONOR | | | 7,901 | 22.02.05 |
| CANADIAN - GOVT | 3,465,000 | CAD | 3,336,795 | 31.12.04 |
| CANADIAN - GOVT/RC | 990,000 | CAD | 953,370 | 26.12.04 |
| CANADIAN - RC | 200,000 | CAD | 192,600 | 27.12.04 |
| CANADIAN - RC | 5,000,000 | CAD | 4,815,000 | 29.12.04 |
| CANADIAN - RC | 8,000,000 | CAD | 7,520,000 | 20.01.05 CAD 500'000 EVALUATION |
| CANADIAN - PRIVATE DONOR | 100,000 | USD | 113,200 | 06.01.05 |
| CANADIAN - PRIVATE DONORS | | | 663 | 17.01.05 |
| CHILE - PRIVATE DONOR | 20,000 | USD | 22,640 | 24.01.05 |
| CHINA - HONG KONG - RC BRANCH | | | 6,400,346 | 04.01.05 INDONESIA |
| CHINA - HONG KONG - RC BRANCH | | | 3,866,627 | 29.12.04 SRI LANKA |
| CHINA - HONG KONG - RC BRANCH | | | 1,588,844 | 01.01.05 RELIEF ITEMS MOB TABLE |
| CHINA - HONG KONG - RC BRANCH | | | 593,246 | 13.01.05 MYANMAR |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|------------------------------------|----------|-----------|------|-----------|----------|---|
| CHINA - HONG KONG - RC BRANCH | | | | 3,050,000 | 09.02.05 | INDIA, DISASTER PREPAREDNESS STOCK, |
| CHINA - HONG KONG - RC BRANCH | | | | 69,133 | 22.02.05 | MALDIVES |
| CHINA - HONG KONG - PRIVATE DONORS | | | | 4,112 | 04.01.05 | |
| CHINA - MACAU - RC BRANCH | | | | 500,000 | 26.12.04 | INDONESIA |
| CHINA - MACAU - RC BRANCH | | | | 280,000 | 30.12.04 | SRI LANKA |
| CHINA - MACAU - RC BRANCH | | | | 780,000 | 14.01.05 | INDONESIA, MALDIVES, SRI LANKA, EAST AFRICA |
| CHINA - RC | | 300,000 | USD | 343,500 | 28.12.04 | |
| CHINA - RC | | 3,000,000 | USD | 3,396,000 | 06.02.05 | |
| CHINA - PRIVATE DONORS | | | | 243 | 25.01.05 | |
| COLOMBIA - RC | | 19,326 | USD | 21,877 | 28.01.05 | |
| COLOMBIA - PRIVATE DONOR | | 1,979 | USD | 2,241 | 22.02.05 | |
| COOK ISLANDS - RC | | 41,474 | EUR | 64,222 | 13.01.05 | |
| COOK ISLANDS - RC | | 1,814 | EUR | 2,809 | 24.02.05 | |
| COOK ISLANDS - PRIVATE DONORS | | 659 | EUR | 1,016 | 12.01.05 | |
| CROATIA - RC | | 7,292,172 | HRK | 1,500,000 | 30.12.04 | INDIA, SRI LANKA, INDONESIA, THAILAND |
| CYPRUS - RC | | | | 26,540 | 11.01.05 | |
| CYPRUS - RC | | | | 424,741 | 07.02.05 | |
| CZECH REP. - PRIVATE DONOR | | | | 3,491 | 20.01.05 | |
| CZECH REP. - PRIVATE DONORS | | | | 54 | 28.01.05 | THAILAND |
| CZECH REP. - PRIVATE DONORS | | | | 1,283 | 04.02.05 | INDONESIA |
| DENMARK - GOVT | | | | 564,692 | 24.01.05 | INDONESIA |
| DENMARK - GOVT | | | | 660,332 | 24.01.05 | SRI LANKA |
| DENMARK - PRIVATE DONORS | | | | 3,431 | 20.01.05 | |
| DENMARK - PRIVATE DONOR | | 10,000 | USD | 11,320 | 18.01.05 | |
| DJIBOUTI - PRIVATE DONOR | | 5,000 | USD | 5,660 | 14.01.05 | |
| ECHO | | 3,000,000 | EUR | 4,629,000 | 26.12.04 | |
| ECUADOR - RC | | 65,663 | USD | 74,331 | 10.03.05 | |
| EGYPT - PRIVATE DONORS | | | | 661 | 14.01.05 | |
| EL SALVADOR - RC | | 15,909 | USD | 18,009 | 30.03.05 | |
| ESTONIA - GOVT | | 999,560 | EEK | 97,407 | 28.12.04 | |
| ESTONIA - RC | | | | 287,449 | 07.03.05 | |
| ETHIOPIA - RC | | 25,000 | USD | 28,300 | 04.01.05 | SOMALIA, SEYCHELLES |
| ETHIOPIA - PRIVATE DONORS | | | | 1,475 | 16.02.05 | |
| ETHIOPIA - JAPANESE COMMUNITY | | 4,015 | ETB | 534 | 01.04.05 | |
| FINLAND - RC | | 1,575,000 | EUR | 2,430,225 | 05.01.05 | |
| FRANCE - PRIVATE DONORS | | 2,710 | EUR | 4,182 | 04.01.05 | |
| FRANCE - PRIVATE DONOR | | 10,000 | USD | 11,320 | 11.01.05 | |
| FRANCE - PRIVATE DONORS | | | | 17,376 | 19.01.05 | |
| FRANCE - PRIVATE (OECD STAFF) | | 10,000 | EUR | 15,430 | 05.01.05 | |
| FRANCE - RC | | 1,000,000 | EUR | 1,543,000 | 26.01.05 | |
| GEORGIA - PRIVATE DONORS | | | | 494 | 16.03.05 | |
| GERMANY - RC | | 1,000,000 | EUR | 1,543,000 | 18.01.05 | |
| GERMANY - PRIVATE DONORS | | | | 20,377 | 30.12.04 | |
| GERMANY - PRIVATE DONOR | | 7,750 | EUR | 11,958 | 19.01.05 | |
| GERMAN - PRIVATE DONOR | | | | 17,147 | 31.03.05 | |
| GREAT BRITAIN - DFID/RC | | 400,000 | GBP | 865,600 | 30.12.04 | INDONESIA |
| GREAT BRITAIN - DFID/RC | | 1,177,150 | GBP | 2,567,364 | 05.01.05 | |
| GREAT BRITAIN - RC | | 100,000 | GBP | 216,400 | 28.12.04 | |
| GREAT BRITAIN - DFID/RC | | | | 840,642 | 30.12.04 | SRI LANKA |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|--------------------------------------|----------|-------------|------|------------|----------|--|
| GREAT BRITAIN RC | | 1,000,000 | GBP | 2,181,000 | 25.01.05 | |
| GREAT BRITAIN - PRIVATE DONOR | | 20,000 | EUR | 30,860 | 30.12.04 | |
| GREAT BRITAIN - PRIVATE DONOR | | 75,000 | USD | 84,900 | 07.01.05 | |
| GREAT BRITAIN - PRIVATE DONOR | | 20,000 | USD | 22,640 | 04.01.05 | |
| GREAT BRITAIN - PRIVATE DONORS | | | | 2,181 | 20.01.05 | INDONESIA |
| GREAT BRITAIN - PRIVATE DONORS | | | | 44,205 | 25.01.05 | |
| GREAT BRITAIN - PRIVATE DONOR | | 10,000 | GBP | 21,810 | 24.01.05 | |
| GREAT BRITAIN - CHARITIES AID FOUND. | | 158,961 | GBP | 346,693 | 19.01.05 | |
| GREAT BRITAIN - VODAPHONE GROUP F. | | 250,000 | GBP | 545,250 | 30.12.04 | |
| GRENADA - RC | | 6,000 | XCD | 2,692 | 14.03.05 | |
| HELLENIC - RC | | 50,000 | EUR | 75,825 | 27.12.04 | |
| HELLENIC - RC | | 200,000 | EUR | 308,600 | 05.01.05 | |
| HELLENIC - PRIVATE DONORS | | 100 | EUR | 154 | 03.01.05 | |
| HELLENIC - PRIVATE DONORS | | | | 566 | 12.01.05 | |
| HELLENIC - PRIVATE DONOR | | 15,000 | USD | 16,980 | 19.01.05 | |
| HELLENIC - PRIVATE DONORS | | | | 196 | 09.02.05 | |
| HONDURAS - RC | | 5,197 | USD | 5,883 | 28.03.05 | |
| HUNGARY - PRIVATE DONORS | | | | 1,054 | 24.01.05 | |
| ICELAND - GOVT | | 5,000,000 | ISK | 88,000 | 26.12.04 | |
| ICELAND - RC | | 12,000,000 | ISK | 211,200 | 26.12.04 | |
| ICELANDIC - RC | | | | 60,000 | 01.01.05 | ORGANISATIONAL DEVELOPMENT DELEGATE |
| ICRC - BISHEK MISSION | | 517 | USD | 586 | 04.02.05 | |
| INDONESIA - PRIVATE DONOR | | 10,000 | USD | 11,320 | 08.02.05 | INDONESIA |
| IRELAND - GOVT | | 750,000 | EUR | 1,155,750 | 29.12.04 | |
| IRELAND - RC | | 3,000,000 | EUR | 4,629,000 | 31.12.04 | |
| IRELAND - PRIVATE DONORS | | 10,000 | EUR | 15,430 | 06.01.05 | |
| IRELAND - PRIVATE DONORS | | | | 4,017 | 19.01.05 | |
| IRELAND - PRIVATE DONORS | | 10,000 | USD | 11,320 | 21.01.05 | |
| ITALY - RC | | 288,615 | EUR | 444,756 | 29.12.04 | EUR 150'000 FOR INDIA |
| ITALY - GOVT | | 103,291 | EUR | 159,378 | 20.01.05 | SRI LANKA |
| ITALY - PRIVATE DONORS | | | | 6,542 | 10.01.05 | |
| ITALY - PRIVATE DONOR | | 10,000 | USD | 11,320 | 18.01.05 | |
| ITALY - PRIVATE DONOR | | 10,000 | USD | 11,320 | 19.01.05 | |
| ITALY - PRIVATE DONOR | | 10,000 | USD | 11,320 | 20.01.05 | |
| ITALY - AUTON. PROVINCE OF BOZEN | | 20,000 | EUR | 30,970 | 20.01.05 | |
| ITALY - PRIVATE DONOR | | 13,300 | EUR | 20,595 | 18.02.05 | |
| ITALY - PRIVATE DONOR | | 20,000 | EUR | 30,790 | 25.02.05 | |
| ITALY - PRIVATE DONOR | | 18,675 | EUR | 28,928 | 18.03.05 | |
| JAPAN - RC | | 100,000,000 | JPY | 1,109,500 | 28.12.04 | |
| JAPAN - GVT | | 15,000,000 | USD | 16,980,000 | 17.01.05 | SRI LANKA, INDONESIA, MYANMAR, THAILAND, INDIA, SEYCHELLES, MALDIVES, SOMALIA |
| JAPAN - RC | | 75,000,000 | JPY | 832,125 | 28.03.05 | |
| JAPAN - HYOGO PREFECTURAL ASSEMBLY | | 1,000,000 | JPY | 11,095 | 28.03.05 | |
| JAPAN - PRIVATE DONOR | | 9,657 | USD | 10,932 | 14.01.05 | |
| JORDAN - PRIVATE DONORS | | | | 16,929 | 04.01.05 | |
| KAZAKHSTAN - PRIVATE DONORS | | | | 10,434 | 04.01.05 | |
| KENYA - PRIVATE DONOR | | 9,985 | USD | 11,303 | 12.01.05 | |
| KOREA, REPUBLIC - RC | | 200,000 | USD | 226,400 | 07.01.04 | |
| KOREA, REPUBLIC - RC | | 500,000 | USD | 566,000 | 20.01.05 | |
| KOREA, REPUBLIC - PRIVATE DONOR | | 13,000 | USD | 14,716 | 20.01.05 | |
| KOREA, REPUBLIC - PRIVATE DONOR | | 5,703 | USD | 6,456 | 22.02.05 | |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|-------------------------------|----------|-----------|------|-----------|----------|--|
| KUWAIT - PRIVATE DONORS | | 1,683 | USD | 1,905 | 12.01.05 | |
| LATVIA - RC | | 28,400 | EUR | 43,821 | 13.01.05 | |
| LATVIA - PRIVATE DONORS | | 20,000 | USD | 22,640 | 03.01.05 | |
| LEBANON - PRIVATE DONORS | | | | 16,166 | 13.01.05 | |
| LEBANON - PRIVATE DONORS | | 10,000 | USD | 11,320 | 13.01.05 | |
| LIBYAN - RC | | | | 25,000 | 06.01.05 | |
| LIBYA - PRIVATE DONORS | | | | 566 | 13.01.05 | |
| LIECHTENSTEIN - RC | | | | 20,000 | 29.12.04 | |
| LITHUANIA - RC | | 200,000 | EUR | 309,800 | 10.01.05 | SRI LANKA, INDONESIA, GENERAL |
| LUXEMBOURG - GOVT/RC | | 250,000 | EUR | 385,750 | 05.01.05 | |
| MACEDONIA - RC | | | | 188,000 | 28.02.05 | |
| MADAGASCAR - PRIVATE DONOR | | | | 1,132 | 24.03.05 | |
| MALAYSIA - RC | | 8,227 | MYR | 2,592 | 24.02.05 | |
| MALAYSIA - PRIVATE DONORS | | 200,000 | MYR | 60,500 | 03.01.05 | |
| MALAYSIA - PRIVATE DONORS | | 2,200 | USD | 2,490 | 04.01.05 | |
| MALAYSIA - PRIVATE DONORS | | | | 2,615 | 19.01.05 | |
| MALTA - PRIVATE DONORS | | 5,000 | EUR | 5,660 | 12.01.05 | |
| MALTA - PRIVATE DONORS | | 14,455 | USD | 16,363 | 01.02.05 | |
| MAURITIUS - GOVT | | 50,000 | USD | 56,600 | 13.01.05 | |
| MAURITIUS - RC | | 100,000 | USD | 113,200 | 08.03.05 | SECHEYLLES 10% |
| MAURITIUS - PRIVATE DONORS | | 15,000 | USD | 16,980 | 14.01.05 | |
| MEXICO - PRIVATE DONORS | | 10,000 | USD | 11,320 | 14.01.05 | |
| MEXICO - PRIVATE DONORS | | | | 1,851 | 24.01.05 | |
| MICRONESIA - RC | | 8,286 | FJD | 5,717 | 10.01.05 | |
| MICRONESIA - GOVT | | 10,000 | USD | 11,320 | 02.02.05 | |
| MONACO - RC | | 100,000 | EUR | 151,650 | 28.12.04 | |
| MOROCCO - RC | | 250,000 | MAD | 36,330 | 29.12.04 | |
| MOROCCO - PRIVATE DONORS | | | | 77 | 27.01.05 | |
| MOZAMBIQUE - GOVT | | 100,000 | USD | 113,200 | 06.01.05 | |
| MOZAMBIQUE - PRIVATE DONOR | | 4,971 | USD | 5,627 | 11.02.05 | |
| MYANMAR - PRIVATE DONOR | | 10,000 | USD | 11,320 | 26.01.05 | MYANMAR |
| MYANMAR - PRIVATE DONORS | | | | 1,532 | 26.01.05 | MYANMAR, INDONESIA, THAILAND, INDIA, SRI LANKA |
| MYANMAR - PRIVATE DONORS | | 800,850 | MMK | 1,473 | 26.01.05 | MYANMAR |
| MYANMAR - PRIVATE DONORS | | 3,835 | USD | 4,341 | 26.01.05 | |
| MYANMAR - PRIVATE DONOR | | 2,400,000 | MMK | 447,840 | 23.02.05 | |
| NAMIBIA - RC | | | | 20,900 | 10.02.05 | |
| NEPAL | | 1,200,000 | NPR | 19,920 | 04.03.05 | |
| NETHERLANDS - RC | | 1,000,000 | EUR | 1,516,500 | 29.12.04 | |
| NETHERLANDS - PRIVATE DONORS | | 2,110 | EUR | 3,267 | 05.01.05 | |
| NETHERLANDS - PRIVATE DONOR | | 10,000 | EUR | 15,430 | 12.01.05 | |
| NETHERLANDS - PRIVATE DONOR | | 50,000 | EUR | 77,425 | 31.01.05 | |
| NETHERLANDS - PRIVATE DONOR | | 15,764 | EUR | 24,410 | 07.02.05 | |
| NETHERLANDS - PRIVATE DONOR | | | | 33,350 | 17.02.05 | |
| NETHERLANDS - PRIVATE DONOR | | 25,536 | EUR | 39,313 | 10.02.05 | |
| NEW CALEDONIA - PRIVATE DONOR | | 2,638 | FJD | 1,899 | 02.02.05 | |
| NEW ZEALAND - GOVT | | 500,000 | NZD | 406,500 | 30.12.04 | |
| NEW ZEALAND - GOVT | | 60,000 | NZD | 48,840 | 30.12.04 | |
| NEW ZEALAND - RC | | 1,900,000 | NZD | 1,546,600 | 31.01.05 | |
| NEW ZEALAND - GOVT | | 1,100,000 | NZD | 895,400 | 31.01.05 | |
| NEW ZEALAND - PRIVATE DONORS | | | | 840 | 01.03.05 | |
| NIGERIA - PRIVATE DONOR | | 10,000 | USD | 11,320 | 18.01.05 | |
| NIGERIA - PRIVATE DONORS | | | | 1,104 | 09.02.05 | |
| NORWEGIAN - GOVT/RC | | 2,112,664 | NOK | 395,068 | 02.01.05 | SRI LANKA |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|-----------------------------------|----------|------------|------|-----------|----------|--|
| NORWAY - GOVT/RC | | 313,697 | NOK | 58,818 | 02.01.05 | |
| NORWEGIAN - RC | | | | 1,000,000 | 25.01.05 | |
| NORWEGIAN - RC | | 3,000,000 | NOK | 561,000 | 19.01.05 | DISASTER MANAGEMENT/ RISK REDUCTION, ORGANISATIONAL DEVELOPMENT/CB, HEALTH & CARE |
| NORWEGIAN - PRIVATE DONORS | | | | 3,989 | 12.01.05 | |
| OMAN - PRIVATE DONORS | | | | 899 | 24.01.05 | |
| OPEC FUND | | 1,200,000 | USD | 1,358,400 | 29.12.04 | USD 600,000 INDONESIA; USD 200,000 SRI LANKA; USD 200,000 INDIA; USD 100 ,000 THAILAND; USD 100,000 MALDIVES |
| PAKISTAN - PRIVATE DONOR | | 9,965 | USD | 11,280 | 15.02.05 | |
| PALAU - RC | | 15,689 | USD | 17,760 | 10.03.05 | |
| PANAMA - PRIVATE DONORS | | 126 | USD | 143 | 30.12.04 | |
| PANAMA - PATTON | | 5,000 | USD | 5,660 | 04.01.05 | |
| PAPUA NEW GUINEA - RC | | 200,000 | PGK | 78,000 | 03.02.05 | |
| PAPUA NEW GUINEA - RC | | | | 64,155 | 01.04.05 | |
| PNG - SRI LANKAN COMMUNITY | | 40,683 | PGK | 15,460 | 20.01.05 | |
| PARAGUAY - RC | | 5,000 | USD | 5,660 | 11.01.05 | |
| PHILIPPINES - PRIVATE DONOR | | 9,985 | USD | 11,303 | 03.01.05 | SRI LANKA |
| POLAND - PRIVATE DONORS | | 200 | EUR | 309 | 13.01.05 | |
| PORTUGAL - RC | | 150,000 | EUR | 231,450 | 04.01.05 | |
| PORTUGAL - RC | | 200,000 | EUR | 308,600 | 26.01.05 | |
| PORTUGAL - RC | | 350,000 | EUR | 540,050 | 24.01.05 | |
| PORTUGAL - RC | | 150,000 | EUR | 232,275 | 26.01.05 | |
| PORTUGAL - PRIVATE DONORS | | 1,050 | EUR | 1,616 | 25.01.05 | |
| PRIVATE ON LINE DONATIONS | | | | 7,936,194 | 24.01.05 | |
| QATAR - PRIVATE DONORS | | | | 2,377 | 13.01.05 | |
| ROMANIA - PRIVATE DONOR | | 10,000 | USD | 11,320 | 18.01.05 | |
| ROMANIA - RC | | 880,674 | EUR | 1,364,164 | 17.01.05 | |
| RUSSIA - PRIVATE DONORS | | | | 2,612 | 28.01.05 | |
| SAUDI ARABIA - GOVT | | 500,000 | USD | 566,000 | 30.12.04 | INDONESIA |
| SAUDI ARABIA - GOVT | | 300,000 | USD | 339,600 | 30.12.04 | SRI LANKA |
| SAUDI ARABIA - GOVT | | 200,000 | USD | 226,400 | 30.12.04 | THAILAND |
| SAUDI ARABIA - GOVT/RC | | 2,000,000 | USD | 2,290,000 | 30.12.04 | |
| SAUDI ARABIA - GOVT | | 200,000 | USD | 226,400 | 30.12.04 | MALDIVES |
| SAUDI ARABIA - GOVT | | 100,000 | USD | 113,200 | 30.12.04 | SOMALIA |
| SAUDI ARABIA - GOVT | | 200,000 | USD | 226,400 | 30.12.04 | INDIA |
| SAUDI ARABIA - PRIVATE DONORS | | | | 2,995 | 13.01.05 | INDONESIA |
| SAUDI ARABIA - PRIVATE DONORS | | | | 290 | 13.01.05 | SRI LANKA |
| SAUDI ARABIA - PRIVATE DONOR | | 26,632 | USD | 30,147 | 14.01.05 | |
| SINGAPORE - JAPAN TOBACCO INTERN. | | 30,000 | USD | 34,350 | 28.12.04 | SRI LANKA, MALDIVES, INDONESIA |
| SINGAPORE - RC/GOV. | | 2,000,000 | SGD | 1,396,600 | 03.01.05 | INDONESIA, SRI LANKA, INDIA, THAILAND, MALDIVES , BANGLADESH, MYANMAR |
| SLOVAKIA - RC | | 50,000 | SKK | 1,925 | 27.12.04 | |
| SLOVAKIA - GVT | | 115,000 | EUR | 177,043 | 07.03.05 | INDONESIA |
| SLOVENIA - RC | | | | 32,148 | 30.12.04 | |
| SLOVENIA - RC | | | | 257,723 | 06.01.05 | |
| SLOVENIA - GOVT | | | | 124,622 | 11.01.05 | |
| SOUTH AFRICA - RC | | 2,500,000 | ZAR | 488,250 | 06.01.05 | |
| SOUTH AFRICA - RC | | 4,000,000 | ZAR | 785,200 | 11.01.05 | EAST AFRICA |
| SOUTH AFRICA - RC | | 3,500,000 | ZAR | 701,750 | 10.01.05 | EAST AFRICA |
| SOUTH AFRICA - RC | | 10,000,000 | ZAR | 2,005,000 | 14.03.05 | ASIA AND SOMALIA |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|-------------------------------|----------|-------------|------|------------|----------|---|
| SOUTH AFRICA - PRIVATE DONOR | | 15,126 | USD | 17,123 | 20.01.05 | |
| SOUTH AFRICA - PRIVATE DONOR | | 50,000 | USD | 56,600 | 31.01.05 | |
| SOUTH AFRICA - PRIVATE DONOR | | 130,000 | ZAR | 26,065 | 23.03.05 | |
| SPAIN - RC | | 100,000 | EUR | 154,100 | 29.12.04 | |
| SPAIN - RC | | 100,000 | EUR | 154,100 | 31.12.04 | |
| SPAIN - RC | | 1,000,000 | EUR | 1,548,500 | 31.01.05 | |
| SPAIN - PRIVATE DONORS | | | | 15,632 | 12.01.05 | |
| SPAIN - PRIVATE DONOR | | 18,900 | EUR | 29,163 | 17.01.05 | |
| SRI LANKA - PRIVATE DONOR | | 75 | USD | 85 | 27.12.04 | |
| SURINAME - RC | | 22,850 | USD | 25,866 | 08.03.05 | |
| SWEDEN - GOVT/RC | | 1,250,000 | SEK | 212,500 | 28.12.04 | |
| SWEDEN - GOVT/RC | | 17,000,000 | SEK | 2,890,000 | 29.12.04 | |
| SWEDEN - RC | | 120,000,000 | SEK | 20,520,000 | 11.01.05 | |
| SWEDEN - RC | | 2,000,000 | SEK | 342,000 | 11.01.05 | |
| SWEDEN - RC | | 230,000 | SEK | 39,330 | 01.04.05 | |
| SWEDEN - RC | | 130,000 | SEK | 22,230 | 01.04.05 | |
| SWEDEN - PRIVATE DONOR | | 150,000 | EUR | 231,450 | 05.01.05 | |
| SWITZERLAND- GOVT/RC | | | | 15,938 | 31.12.04 | |
| SWITZERLAND - GOVT/RC | | | | 300,000 | 29.12.04 | INDONESIA |
| SWITZERLAND - GOVT | | | | 200,000 | 05.02.05 | SEYCHELLES |
| SWITZERLAND - PRIVATE DONORS | | | | 38,995 | 05.01.05 | |
| SWITZERLAND - WHO/VERF | | 5,839 | USD | 6,700 | 30.12.04 | |
| SWITZERLAND - WHO/VERF | | | | 2,300 | 28.02.05 | |
| SWITZERLAND - PRIVATE DONORS | | | | 1,200 | 30.12.04 | INDIA |
| SWITZERLAND - PRIVATE DONORS | | | | 2,000 | 30.12.04 | SRI LANKA |
| SWITZERLAND - PRIVATE DONOR | | | | 10,000 | 26.01.05 | |
| SWITZERLAND - PRIVATE DONOR | | 100,000 | USD | 113,200 | 28.01.05 | |
| SWITZERLAND - PRIVATE DONORS | | | | 472 | 15.02.05 | THAILAND |
| SWITZERLAND - PRIVATE DONOR | | 68,775 | USD | 77,853 | 14.02.05 | |
| SWITZERLAND - PRIVATE DONOR | | | | 11,500 | 14.02.05 | |
| SWITZERLAND - PRIVATE DONOR | | | | 34,677 | 08.02.05 | |
| SWITZERLAND - PRIVATE DONOR | | 10,808 | EUR | 16,639 | 24.02.05 | |
| SWITZERLAND - PRIVATE DONOR | | | | 57,516 | 08.03.05 | |
| SWITZERLAND - PRIVATE DONOR | | | | 4,545 | 08.04.05 | |
| SYRIA - PRIVATE DONORS | | 10,000 | USD | 11,320 | 13.01.05 | |
| TANZANIA - PRIVATE DONOR | | 12,218 | USD | 13,830 | 18.02.05 | |
| THAILAND - PRIVATE DONORS | | 2,486 | USD | 2,814 | 05.01.05 | INDONESIA, SRI LANKA |
| THAILAND - PRIVATE DONOR | | 1,000,000 | THB | 29,200 | 03.01.05 | |
| THAILAND - PRIVATE DONORS | | | | 1,061 | 25.01.05 | INDONESIA |
| TAIWAN RED CROSS ORGANISATION | | 3,000,000 | USD | 3,396,000 | 02.01.05 | INDONESIA, SRI LANKA |
| TONGA - RC | | | | 15,562 | 15.02.05 | |
| TRINIDAD - PRIVATE DONOR | | 13,185 | USD | 14,925 | 02.02.05 | |
| TUNISIA - PRIVATE DONORS | | | | 3,248 | 11.01.05 | |
| TURKEY - RC | | 40,000 | USD | 45,280 | 04.01.05 | INDIA, BANGLADESH, MYANMAR, MALAYSIA |
| TURKEY - PRIVATE DONOR | | 25,000 | USD | 28,300 | 07.01.05 | |
| UGANDA - RC | | 3,145 | USD | 3,560 | 28.02.05 | |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|---------------------------------------|----------|-----------|------|-----------|----------|-------------------------------------|
| UKRAINE - PRIVATE DONORS | | | | 1,000 | 05.01.05 | |
| UKRAINE - PRIVATE DONOR | | 15,000 | USD | 16,980 | 20.01.05 | |
| UKRAINE - RC | | 920 | USD | 1,041 | 11.03.05 | |
| UKRAINE - RC | | 45,797 | USD | 51,842 | 09.03.05 | GENERAL, THAILAND |
| UNITED ARAB EMIRATES - PRIVATE DONORS | | 1,485 | USD | 1,682 | 30.12.04 | |
| UNITED ARAB EMIRATES - RC | | 20,000 | USD | 22,900 | 27.12.04 | |
| UNITED ARAB EMIRATES - RC | | 150,000 | USD | 171,750 | 28.12.04 | MALDIVES |
| USA - PRIVATE DONORS | | 12,009 | USD | 13,594 | 28.12.04 | SRI LANKA |
| USA - PRIVATE DONOR | | 100,000 | USD | 113,200 | 29.12.04 | |
| USA - PRIVATE DONOR | | 5,000 | USD | 5,660 | 31.12.04 | |
| USA - PRIVATE DONOR | | 50,000 | USD | 56,600 | 28.12.04 | |
| USA - PRIVATE DONOR | | 25,000 | USD | 28,300 | 28.12.04 | |
| USA - PRIVATE DONOR | | 25,000 | USD | 28,300 | 29.12.04 | |
| USA - PRIVATE DONOR | | 25,000 | USD | 28,300 | 05.01.05 | |
| USA - PRIVATE DONOR | | 10,000 | USD | 11,320 | 06.01.05 | |
| USA - PRIVATE DONOR | | 10,000 | USD | 11,320 | 06.01.05 | |
| USA - PRIVATE DONOR | | 10,000 | USD | 11,320 | 04.01.05 | |
| USA - PRIVATE DONORS | | | | 416,667 | 17.01.05 | |
| USA - PRIVATE DONOR | | 20,000 | USD | 22,640 | 18.01.05 | |
| USA - PRIVATE DONOR | | 20,000 | USD | 22,640 | 20.01.05 | |
| USA - PRIVATE DONOR | | 100,000 | USD | 113,200 | 25.01.05 | |
| USA - PRIVATE DONORS | | | | 1,654 | 31.01.05 | INDONESIA |
| USA - PRIVATE DONORS | | | | 287 | 31.01.05 | THAILAND |
| USA - PRIVATE DONOR | | 8,667 | USD | 9,811 | 31.01.05 | |
| USA - PRIVATE DONOR | | 12,808 | USD | 14,499 | 31.01.05 | |
| USA - PRIVATE DONORS | | 12,000 | USD | 13,584 | 02.02.05 | INDONESIA |
| USA - PRIVATE DONOR | | 20,000 | USD | 22,640 | 31.01.05 | |
| USA - PRIVATE DONOR | | 9,115 | USD | 10,318 | 28.01.05 | |
| USA - PRIVATE DONOR | | 22,770 | USD | 25,776 | 15.02.05 | |
| USA - PRIVATE DONOR | | 10,000 | USD | 11,320 | 01.02.05 | |
| USA - PRIVATE DONOR | | 100,000 | USD | 113,200 | 07.02.05 | |
| USA - PRIVATE DONOR | | 301 | USD | 341 | 22.03.05 | |
| USA - PRIVATE DONOR | | 42,223 | USD | 47,796 | 17.03.05 | |
| USA - PRIVATE DONOR | | 17,317 | USD | 19,603 | 15.03.05 | |
| USA - PRIVATE DONOR | | 50,000 | USD | 56,600 | 06.04.05 | |
| USA - PRIVATE DONOR | | 10,000 | USD | 11,320 | 05.04.05 | |
| USA - PRIVATE DONOR | | 83,500 | USD | 94,522 | 01.04.05 | |
| USA - PRIVATE DONOR | | 114,558 | USD | 129,680 | 12.04.05 | |
| USA - BP FOUNDATION | | 1,000,000 | USD | 1,132,000 | 29.12.04 | INDONESIA, MYANMAR, THAILAND, INDIA |
| USA - BP FOUNDATION | | 1,850,000 | USD | 2,094,200 | 21.03.05 | |
| USA - FIRST DATA WESTERN UNION F. | | 1,000,000 | USD | 1,132,000 | 02.02.05 | |
| USA - MOTOROLA FOUNDATION | | 1,000,000 | USD | 1,132,000 | 02.02.05 | |
| USA - AMGEN CORPORATION | | 1,000,000 | USD | 1,132,000 | 02.02.05 | |
| USA - DISCOVERY INC. | | 135,495 | USD | 153,380 | 07.02.05 | |
| USA - RENT A CAR FOUNDATION | | 250,000 | USD | 283,000 | 10.02.05 | |
| USA - LEHMAN BROTHERS FOUNDATION | | 625,000 | USD | 707,500 | 10.02.05 | |
| USA - SCHERING PLOUGH | | 60,000 | USD | 67,920 | 10.02.05 | |
| USA - TERRACOTTA CORPORATION | | | | 1,000,000 | 04.01.05 | |
| USA - ACCENTURE FOUNDATION | | 900,000 | USD | 1,018,800 | 15.02.05 | |
| USA - CATERPILLAR FOUNDATION | | 125,000 | USD | 141,500 | 15.02.05 | |
| USA - MELLON BANK | | 112,011 | USD | 126,796 | 15.02.05 | |
| USA - MOTOROLA INC. FOUNDATION | | 550,703 | USD | 623,396 | 15.02.05 | |
| USA - NYKE FOUNDATION | | 125,000 | USD | 141,500 | 15.02.05 | |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|----------------------------|----------|-----------|------|-------------|----------|---|
| USA - /NY PRIVATE DONORS | | 87,286 | USD | 98,808 | 15.02.05 | |
| USAID/OFDA | | 4,000,000 | USD | 4,560,000 | 28.12.04 | |
| USAID/OFDA | | 2,100,000 | USD | 2,377,200 | 29.12.04 | INDONESIA |
| USA - AMCROSS | | 5,000,000 | USD | 5,660,000 | 13.01.05 | INDONESIA: PROCUREMENT, TRANSPORT AND DISTRIBUTION OF EMERGENCY FOOD PARCELS |
| URUGUAY - PRIVATE DONORS | | 7,980 | USD | 9,033 | 14.01.05 | |
| VANUATU - RC | | 9,961 | USD | 11,275 | 01.03.05 | |
| VENEZUELA - PRIVATE DONORS | | 10,000 | USD | 11,320 | 25.01.05 | |
| WESTERN SAMOA - RC | | | | 34,651 | 01.02.05 | |
| SUB/TOTAL RECEIVED IN CASH | | | | 199,000,640 | CHF | 108.5% |

KIND AND SERVICES (INCLUDING PERSONNEL)

| DONORS | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|--------------|-------------------|-----------|--------|-----------|-----------------|---|
| AUSTRALIA RC | DELEGATE(S) & SOL | | | 240,200 | | |
| AUSTRALIA RC | FACT | 3 | 12,000 | 36,000 | 27.12.04 | |
| AUSTRIA RC | DELEGATE(S) & SOL | | | 42,800 | | |
| AUSTRIA RC | ERU | 750,000 | EUR | 1,157,250 | 1.5430 17.01.05 | INDONESIA : WATER TREATMENT & WATER DISTRIBUTION |
| AUSTRIA RC | GOODS & TRANSPORT | 600,000 | EUR | 923,700 | 18.01.05 | VARIOUS GOODS - IKD-05-0005 (INDONESIA: HYGIENE PARCELS) |
| BELGIUM RC | GOODS & TRANSPORT | 1,243,471 | EUR | 1,914,324 | 1.5395 | VARIOUS GOODS - IKD-04-0277 (INDONESIA/SRI LANKA: BEDSHEETS, JERRYCANS, KITCHEN SETS, TARPULINS, TENTS) |
| BELGIUM RC | GOODS & TRANSPORT | 261,508 | EUR | 402,592 | 1.5395 | VARIOUS GOODS - IKD-05-0022 (MALDIVES/SRI LANKA: PLASTIC BAGS, TORCH, GENERATOR, BEDSHEETS) |
| BELGIUM RC | GOODS & TRANSPORT | 187,873 | EUR | 289,230 | 1.5395 | VARIOUS GOODS - IKD-05-0043 (SRI LANKA - MOSQUITO NETS) |
| BELGIUM RC | GOODS & TRANSPORT | 4,406 | EUR | 6,783 | 1.5395 | VARIOUS GOODS - IKD-05-0059 (MALDIVES - GENERATOR SPARE PARTS) |
| CANADA RC | DELEGATE(S) & SOL | | | 213,000 | | |
| CANADA RC | FACT | 2 | 12,000 | 24,000 | 27.12.04 | |
| CANADA RC | GOODS & TRANSPORT | 4,872,437 | CAD | 4,799,353 | 0.9850 | VARIOUS GOODS - IKD 04-0283 |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | | DATE | COMMENT |
|-----------------------------|-------------------------|-----------|--------|------------|--------|----------|--|
| CANADA RC | GOODS & TRANSPORT | 520,607 | CAD | 512,792 | 0.9850 | | VARIOUS GOODS - IKD 04-0299 |
| CANADA RC | GOODS & TRANSPORT | 411,497 | CAD | 405,325 | 0.9850 | | VARIOUS GOODS - IKD 05-0003 |
| CANADA RC | GOODS & TRANSPORT | 924,733 | CAD | 910,862 | 0.9850 | | VARIOUS GOODS - IKD 05-0017 |
| CANADA RC | GOODS & TRANSPORT | 51,493 | CAD | 50,721 | 0.9850 | | VARIOUS GOODS - IKD 05-0038 |
| CANADA RC | GOODS & TRANSPORT | 6,503,280 | CAD | 6,405,731 | 0.9850 | | VARIOUS GOODS - IKD 05-0040 |
| CANADA RC | GOODS & TRANSPORT | 470 | USD | 564 | 1.1990 | | VARIOUS GOODS - IKD 05-0048 |
| CANADA RC | GOODS & TRANSPORT | 374,630 | CAD | 369,011 | 0.9850 | | VARIOUS GOODS - IKD 05-0057 |
| CHINA - HONG KONG RC BRANCH | DELEGATE(S) & SOL | | | 54,200 | | | |
| DENMARK RC | FACT | 2 | 12,000 | 24,000 | | 27.12.04 | |
| DENMARK RC | DELEGATE(S) & SOL | | | 137,200 | | | |
| DENMARK RC | GOODS & TRANSPORT | 906,704 | USD | 1,087,138 | 1.1990 | | VARIOUS GOODS - IKD 04-0281 |
| DENMARK RC | GOODS & TRANSPORT | 1,414,275 | USD | 1,695,683 | 1.1990 | | VARIOUS GOODS - IKD 04-0290 |
| DENMARK RC | GOODS & TRANSPORT | 663 | USD | 795 | 1.1990 | | VARIOUS GOODS - IKD 05-0049 |
| DENMARK RC | ERU LOGISTICS | 321,660 | USD | 385,670 | | 27.12.04 | |
| FINLAND RC | ERU HEALTH | 329,001 | EUR | 509,622 | | 27.12.04 | IKD-04-0282 |
| FINLAND RC | DELEGATE(S) & SOL | | | 30,600 | | | |
| FINLAND RC | GOODS & TRANSPORT | 204,000 | EUR | 315,996 | 1.5490 | | VARIOUS GOODS - IKD 05-0282 |
| FRANCE RC | ERU HEALTH | 422,000 | EUR | 651,146 | 1.5430 | 27.12.04 | SRI LANKA - BHC ERU |
| FRANCE RC | ERU WATSAN | 1,025,000 | EUR | 1,581,575 | 1.5430 | 30.12.04 | INDONESIA - WSAN ERU |
| FRANCE RC | FACT | 2 | 12,000 | 24,000 | | 27.12.04 | |
| FRANCE RC | GOODS & TRANSPORT | 97,000 | EUR | 149,671 | 1.5430 | | VARIOUS GOODS - IKD 05-0001 |
| GERMANY - RC | DELEGATE(S) & SOL | | | 42,600 | | | |
| GERMANY RC | ERU WATSAN + ERU HEALTH | 1,475,000 | EUR | 2,275,925 | | 30.12.04 | INDONESIA - ERU BHCJ, ERU SPECIALISED WATER EQUIPMENT, PERSONNEL, VEHICLES & TPT |
| GERMANY RC | ERU WATSAN | 646,000 | EUR | 996,778 | | 30.12.04 | SRI LANKA - ERU SPECIAL WATER EQUIPMENT, VEHICLES & TPT |
| GERMANY RC | FACT | 2 | 12,000 | 24,000 | | 27.12.04 | |
| GERMANY RC | GOODS & TRANSPORT | 500,666 | EUR | 775,533 | 1.5490 | | VARIOUS GOODS - IKD 04-0287 |
| GERMANY - RC | GOODS & TRANSPORT | 179,335 | EUR | 277,800 | 1.5491 | | VARIOUS GOODS - IKD 05-0006 |
| GERMANY - RC | GOODS & TRANSPORT | 752,750 | EUR | 1,166,010 | 1.5490 | | VARIOUS GOODS - IKD 05-0020 |
| GERMANY - RC | GOODS & TRANSPORT | 6,459,948 | EUR | 10,006,461 | 1.5490 | | VARIOUS GOODS - IKD 05-0025 |
| GERMANY - RC | GOODS & TRANSPORT | 751,361 | EUR | 1,163,866 | 1.5490 | | VARIOUS GOODS - IKD 05-0041 |
| GREAT BRITAIN RC | DELEGATE(S) & SOL | | | 234,400 | | | |
| GREAT BRITAIN RC | ERU - LOGS | 241,039 | GBP | 525,706 | | 28.12.04 | SRI LANKA : LOGS ERU PERSONNEL, & EQUIPMENT |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | | DATE | COMMENT |
|------------------|-------------------|-------------|--------|-----------|--------|----------|--|
| GREAT BRITAIN RC | FACT | 1 | 15,756 | 34,364 | | 10.01.05 | MALDIVES : FACT, CASH & EQUIPMENT |
| GREAT BRITAIN RC | GOODS & TRANSPORT | 1,288,626 | GBP | 2,900,704 | 2.2510 | | VARIOUS GOODS IKD-04-0276 |
| GREAT BRITAIN RC | GOODS & TRANSPORT | 270,074 | GBP | 607,937 | 2.2510 | | VARIOUS GOODS IKD-05-0018 |
| GREAT BRITAIN RC | GOODS & TRANSPORT | 34,804 | GBP | 78,344 | 2.2510 | | VARIOUS GOODS IKD-05-0033 |
| GREAT BRITAIN RC | GOODS & TRANSPORT | 1,039,321 | GBP | 2,339,512 | 2.2510 | | VARIOUS GOODS IKD-05-0034 |
| GREAT BRITAIN RC | GOODS & TRANSPORT | 77,971 | GBP | 175,513 | 2.2510 | | VARIOUS GOODS IKD-05-0036 |
| GREAT BRITAIN RC | GOODS & TRANSPORT | 142,274 | GBP | 320,259 | 2.2510 | | VARIOUS GOODS IKD-05-0037 |
| GREAT BRITAIN RC | GOODS & TRANSPORT | 141,411 | GBP | 318,316 | 2.2510 | | VARIOUS GOODS IKD-05-0053 |
| GREAT BRITAIN RC | GOODS & TRANSPORT | 53,846 | GBP | 121,207 | 2.2510 | | VARIOUS GOODS IKD-05-0054 |
| GREECE | DELEGATE(S) & SOL | | | 36,400 | | | |
| ICELAND | DELEGATE(S) & SOL | | | 4,400 | | | |
| INDIA | DELEGATE(S) & SOL | | | 9,600 | | | |
| IRAN RC | GOODS & TRANSPORT | 132,250 | USD | 158,570 | 1.1990 | | VARIOUS GOODS IKD-04-0278 |
| IRELAND | DELEGATE(S) & SOL | | | 30,800 | | | |
| JAPAN RC | FACT | 1 | 12,000 | 12,000 | | 27.12.04 | |
| JAPAN RC | ERU HEALTH | 151,050,164 | JPY | 1,690,251 | 0.0112 | 27.12.04 | IKD-04-0291 |
| JAPAN RC | GOODS & TRANSPORT | 196,618,005 | JPY | 2,181,478 | 0.0111 | | VARIOUS GOODS IKD-05-0052 |
| JAPAN RC | GOODS & TRANSPORT | 18,500,000 | JPY | 205,258 | 0.0111 | | VARIOUS GOODS IKD-05-0064 |
| JAPAN RC | GOODS & TRANSPORT | 4,250,000 | JPY | 47,154 | 0.0111 | | VARIOUS GOODS IKD-05-0067 |
| KOREA REP. RC | GOODS & TRANSPORT | 22,960 | EUR | 35,565 | 1.5490 | | VARIOUS GOODS IKD-04-0293 (INDONESIA : BLANKETS) |
| LUXEMBOURG RC | GOODS & TRANSPORT | 182,380 | CHF | 182,380 | 1.0000 | | VARIOUS GOODS IKD-05-0047 |
| NETHERLANDS RC | DELEGATE(S) & SOL | | | 66,400 | | | |
| NETHERLANDS RC | GOODS & TRANSPORT | 232,046 | EUR | 359,440 | 1.5490 | | VARIOUS GOODS IKD-04-0274 |
| NETHERLANDS RC | GOODS & TRANSPORT | 1,261,909 | EUR | 1,954,700 | 1.5490 | | VARIOUS GOODS IKD-04-0279 |
| NETHERLANDS RC | GOODS & TRANSPORT | 89,685 | EUR | 138,922 | 1.5490 | | VARIOUS GOODS IKD-04-0298 |
| NETHERLANDS RC | GOODS & TRANSPORT | 2,326,122 | EUR | 3,603,163 | 1.5490 | | VARIOUS GOODS IKD-05-0004 |
| NETHERLANDS RC | GOODS & TRANSPORT | 110,572 | EUR | 171,276 | 1.5490 | | VARIOUS GOODS IKD-05-0021 |
| NETHERLANDS RC | GOODS & TRANSPORT | 2,892,452 | EUR | 4,480,418 | 1.5490 | | VARIOUS GOODS IKD-05-0035 |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | | DATE | COMMENT |
|----------------|-------------------|-----------|--------|-----------|--------|----------|-----------------------------|
| NEW ZEALAND | DELEGATE(S) & SOL | | | 113,600 | | | |
| NEW ZEALAND RC | FACT | 1 | 12,000 | 12,000 | | 27.12.04 | |
| NORWAY | DELEGATE(S) & SOL | | | 222,200 | | | |
| NORWAY RC | ERU HEALTH | 2,654,604 | NOK | 501,720 | 0.1890 | 27.12.04 | IKD-04-0292 |
| NORWAY RC | GOODS & TRANSPORT | 3,351,510 | NOK | 633,435 | 0.1890 | | VARIOUS GOODS IKD-04-0280 |
| NORWAY RC | GOODS & TRANSPORT | 2,088,075 | NOK | 394,646 | 0.1890 | | VARIOUS GOODS IKD-04-0292 |
| NORWAY RC | GOODS & TRANSPORT | 8,761,126 | NOK | 1,655,853 | 0.1890 | | VARIOUS GOODS IKD-05-0014 |
| NORWAY RC | GOODS & TRANSPORT | 2,565,349 | NOK | 484,851 | 0.1890 | | VARIOUS GOODS IKD-05-0031 |
| NORWAY RC | GOODS & TRANSPORT | 229,936 | NOK | 43,458 | 0.1890 | | VARIOUS GOODS IKD-05-0046 |
| QUATAR RC | GOODS & TRANSPORT | 271,336 | CHF | 271,336 | 1.0000 | | VARIOUS GOODS IKD-05-0007 |
| SLOVENIA RC | GOODS & TRANSPORT | 10,404 | CHF | 10,404 | 1.0000 | | VARIOUS GOODS IKD-05-0023 |
| SPAIN RC | DELEGATE(S) & SOL | | | 56,000 | | | |
| SPAIN RC | ERU TELECOM | 40,604 | EUR | 62,896 | 1.5490 | 27.12.04 | IKD-04-0288 |
| SPAIN RC | ERU WATSAN | 431,300 | EUR | 668,084 | 1.5490 | 30.12.04 | IKD-04-0296 |
| SPAIN RC | FACT | 1 | 12,000 | 12,000 | | 27.12.04 | |
| SPAIN RC | GOODS & TRANSPORT | 190,064 | EUR | 294,412 | 1.5490 | | VARIOUS GOODS IKD-04-0288 |
| SPAIN RC | GOODS & TRANSPORT | 1,681,144 | EUR | 2,604,092 | 1.5490 | | VARIOUS GOODS IKD-04-0296 |
| SWEDEN RC | DELEGATE(S) & SOL | | | 127,400 | | | |
| SWEDEN RC | ERU WATSAN | 2,349,981 | SEK | 401,847 | | 27.12.04 | |
| SWEDISH RC | GOODS & TRANSPORT | 5,747,550 | SEK | 977,084 | 0.1700 | | VARIOUS GOODS IKD-05-0010 |
| SWEDISH RC | GOODS & TRANSPORT | 5,747,550 | SEK | 977,084 | 0.1700 | | VARIOUS GOODS IKD-05-0011 |
| SWEDISH RC | GOODS & TRANSPORT | 2,873,775 | SEK | 488,542 | 0.1700 | | VARIOUS GOODS IKD-05-0013 |
| SWITZERLAND | DELEGATE(S) & SOL | | | 161,000 | | | |
| SWISS RC | GOODS & TRANSPORT | 300,241 | CHF | 361,360 | | | VARIOUS GOODS - IKD-04-0289 |
| SWISS RC | GOODS & TRANSPORT | 950,242 | CHF | 217,250 | | | VARIOUS GOODS - IKD-05-0045 |
| USA AMCROSS | DELEGATE(S) & SOL | | | 18,400 | | | |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | | DATE | COMMENT |
|-------------------------------------|-------------------|-----------|--------|------------|--------|----------|-----------------------------|
| USA AMCROSS | ERU RELIEF | | | 171,000 | | 30.12.04 | SRI LANKA |
| USA AMCROSS | FACT | 2 | 12,000 | 24,000 | | 27.12.04 | |
| USA AMCROSS | GOODS & TRANSPORT | 2,055,223 | USD | 2,464,213 | 1.1990 | | VARIOUS GOODS - IKD-04-0301 |
| USA AMCROSS | GOODS & TRANSPORT | 3,081,284 | USD | 3,694,459 | 1.1990 | | VARIOUS GOODS - IKD-04-0302 |
| USA AMCROSS | GOODS & TRANSPORT | 894,000 | USD | 1,071,906 | 1.1990 | | VARIOUS GOODS - IKD-05-0044 |
| USA AMCROSS | GOODS & TRANSPORT | 153,600 | USD | 184,166 | 1.1990 | | VARIOUS GOODS - IKD-05-0050 |
| USA AMCROSS | GOODS & TRANSPORT | 276,200 | USD | 331,163 | 1.1990 | | VARIOUS GOODS - IKD-05-0074 |
| USAID | GOODS & TRANSPORT | 113,880 | CHF | 113,880 | 1.0000 | | VARIOUS GOODS - IKD-05-0055 |
| SUB/TOTAL RECEIVED IN KIND/SERVICES | | | | 84,930,682 | | CHF | 46.3% |

ADDITIONAL TO APPEAL BUDGET

| DONORS | CATEGORY | QUANTITY | UNIT | VALUE CHF | | DATE | COMMENT |
|---------------|---------------|-----------|------|-----------|--|----------|---|
| AUSTRIA RC | SUPPORT TEAMS | 142,103 | EUR | 219,265 | | 03.01.05 | |
| AUSTRIA RC | | 700,000 | EUR | 1,080,100 | | 03.01.05 | 2 TRANSPORTS 60 MT. MEDICAL RELIEF GOODS & MEDICAMENTS |
| CHINA - RC | | 50,000 | USD | 56,500 | | 31.12.04 | THAILAND RC DIRECT |
| CHINA - RC | | 100,000 | USD | 113,000 | | 31.12.04 | SRI LANKA RC DIRECT |
| CHINA - RC | | 100,000 | USD | 113,000 | | 31.12.04 | INDONESIA RC DIRECT |
| CHINA - RC | | 20,000 | USD | 22,600 | | 31.12.04 | MYANMAR RC DIRECT |
| CHINA - RC | | 50,000 | USD | 56,500 | | 31.12.04 | INDIA RC DIRECT |
| CHINA - RC | | 20,000 | USD | 22,600 | | 31.12.04 | MALDIVES DIRECT |
| CHINA - RC | | 20,000 | USD | 22,600 | | 31.12.04 | MALAYSIA RC DIRECT |
| FIJI - RC | | 400,000 | FJD | 276,000 | | 21.01.05 | DIRECT CONTRIBUTION TO INDONESIA RC, SRI LANKA RC, INDIA RC, THAILAND RC |
| FIJI - GOVT | | 250,000 | FJD | 177,400 | | 03.02.05 | DIRECT CONTRIBUTION TO INDONESIA RC, SRI LANKA RC, INDIA RC, THAILAND RC |
| KUWAIT - RC | | | | | | 28.12.04 | BILATERAL FOR SRI LANKA : 3500 PCES BLANKETS, 500 PCS KEROSENE LAMPS, 1000 PCES FOOD CANS, 1'095 CART. FOOD |
| MALAYSIA - RC | | 30,000 | USD | 34,200 | | 30.12.04 | BILATERAL FOR INDONESIA , SRI LANKA, INDIA |
| SPAIN - RC | | 240,000 | EUR | 370,536 | | 28.12.04 | BILATERAL |
| SAUDI ARABIA | | 2,000,000 | USD | 2,264,000 | | 30.12.04 | INDONESIA VARIOUS SUPPLIES DIRECT |
| SAUDI ARABIA | | 800,000 | USD | 905,000 | | 30.12.04 | THAILAND VARIOUS SUPPLIES DIRECT |
| SAUDI ARABIA | | 1,200,000 | USD | 1,358,000 | | 30.12.04 | SRI LANKA VARIOUS SUPPLIES DIRECT |
| SAUDI ARABIA | | 500,000 | USD | 566,000 | | 30.12.04 | MALDIVES VARIOUS SUPPLIES DIRECT |

Asia - Earthquake and Tsunamis

ANNEX 1

APPEAL No. 28/2004

PLEDGES RECEIVED

19/04/2005

| DONOR | CATEGORY | QUANTITY | UNIT | VALUE CHF | DATE | COMMENT |
|----------------------------|-------------|----------|------|-----------|----------|---|
| UNITED ARAB EMIRATES - RC | | 500,000 | USD | 572,500 | 28.12.04 | BILATERAL FOR SRI LANKA, PURCHASE OF RELIEF ITEMS |
| UNITED ARAB EMIRATES - RC | | 610,000 | USD | 698,500 | 28.12.04 | BILATERAL FOR INDONESIA, PURCHASE OF RELIEF ITEMS |
| UNITED ARAB EMIRATES - RC | | 400,000 | USD | 458,000 | 28.12.04 | BILATERAL FOR INDIA, PURCHASE OF RELIEF ITEMS |
| UNITED ARAB EMIRATES - RC | | 120,000 | USD | 137,400 | 28.12.04 | BILATERAL FOR THAILAND, PURCHASE OF RELIEF ITEMS |
| UNITED ARAB EMIRATES - RC | | 41,625 | USD | 47,661 | 28.12.04 | BILATERAL FOR SRI LANKA: BLANKETS, CLOTHES |
| USA AMCROSS | RELIEF TEAM | 1 | | 114,000 | 30.12.04 | INDONESIA |
| TOTAL ADDITIONAL TO APPEAL | | | | 9,685,362 | | CHF |