

INDIA : ORISSA CYCLONE

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period covered: 17th - 26th November 1999

As the full impact of the super cyclone that devastated Orissa one month ago becomes increasingly apparent, relief activities continue to gather pace. While emergency assistance continues, the Government and humanitarian community are now developing rehabilitation programmes and moving towards longer term assistance to the cyclone victims.

Supplies of food and nonfood relief assistance were distributed to over 20,000 families during the initial emergency phase of the Red Cross relief operation. The second phase is proceeding and will continue until the end of December. A third phase, continuing relief assistance, but concentrating more on rehabilitation, is scheduled to begin on 22nd December.

A Federation assessment of the health situation in affected districts reports that while the situation appears to be generally satisfactory, close monitoring should be maintained in the coming months.

The context

A violent cyclone, 05B, struck the coastal region of the Indian state of Orissa on 29 October, causing widespread devastation across eight coastal districts. Winds of up to 260 kmh were accompanied by a 7 metre tidal surge that swept 20 kms inland in some areas. The cyclone caused immense damage to homes, agriculture, electricity supply, transport and telecommunications networks. Thousands lost their lives and almost two million houses were destroyed in the districts of Ganjam, Puri, Jagatsinghpur, Kendrapada, Bhadrak, Balasore, Cuttack and Jajpur.

Latest events

While the death toll is expected to exceed 10,000, the full extent of the damage caused is still being calculated. In the worst affected area, Ersama block in Jagatsinghpur, it is estimated that 35 of the 200 villages were totally destroyed, accounting for 80% of the total death toll from the cyclone. According to the latest government estimates, 1,714,000 houses and 1,678,000 hectares of cropland were destroyed, and 406,000 livestock perished.

Due to a combination of government action and a range of NGOs and local community responses, no major public health disaster has yet materialised, although thousands of cases of diarrhoea have been reported.

While the floodwaters have largely subsided there remain logistical difficulties reaching some villages with relief supplies due to damaged roads and breached embankments connecting inland areas to the main roads. Power lines have only been restored to district towns and over 8,000 villages remain without electricity. In the worst affected areas, the extent of the loss of life and the damage to household and community assets has brought physical and psychological hardship and has possibly wiped out the past 15 years of economic development. The emergency relief efforts will probably continue for the next 2 - 4 weeks after which there will be a gradual shift towards rehabilitation.

Red Cross/Red Crescent action

- ***Relief***

Emergency distributions to 20,000 families have been completed and phase two of the emergency operation has begun. It will provide one month's food rations and some nonfood relief items to 50,000 families living in villages in the immediate vicinity of the 23 Indian Red Cross (IRCS) cyclone shelters in six coastal districts. While this phase of the operation is likely to run until late December, it is estimated that a small group of the most vulnerable beneficiaries, such as families that have lost breadwinners, will require additional food for a further three month period.

Assessments at six of the cyclone shelters indicate that most food reaching the affected areas has come from the Government, supplemented by Red Cross distributions and some from other agencies. However, the unsystematic pattern of food distributions suggests that coordination processes at the local level need improvement. A number of aid organisations are using the IRCS cyclone shelters, which are community focal points in many of the worst affected areas, to organise their relief distributions.

IRCS relief distributions are carried out systematically, directly involving members of the affected communities. Each family receives a Red Cross ration card and distributions are supervised by the chairman of the local disaster preparedness committee and project officers from the IRCS. Each distribution is followed up by a weekly monitoring visit.

Since the cyclone struck, daily food distributions have been carried out and 1000 MT of food items are scheduled to be dispatched and distributed over the coming two weeks. At the same time as the food, nonfood relief items including blankets, clothing, plastic sheeting and kitchen sets are being distributed.

- ***Logistics***

Logistical problems have hampered the relief operation. There have been difficulties securing adequate transportation locally and many routes into distribution sites have until recently been completely or partly inaccessible.

Rice has been purchased locally from the Food Corporation of India. Other commodities such as dal (lentils) are procured from a local supplier. The balance of food needed for the operation will also be purchased locally. The procurement and delivery of non food items will be carried out by IRCS national headquarters in Delhi. Commodities will then be transported via rail to the Orissa state capital, Bhubaneswar.

- ***Staffing***

A Federation relief coordinator and a British Red Cross relief / logistics delegate are providing technical assistance to the Orissa state branch of the IRCS. Two additional staff members from the British Red Cross and a Spanish Red Cross officer are assisting with rehabilitation assessment and planning at the field level.

- ***Monitoring & reporting***

Operational reports will be submitted regularly. Currently the relief co-ordinator is developing monitoring and reporting systems with the IRCS.

- ***Health***

A German Red Cross health delegate has completed a health assessment based on visits to 7 out of 23 villages where the IRCS cyclone shelters are located, plus several other villages in the area. The assessment concluded that while conditions vary from village to village, in general the public health situation is not dramatic.

Relatively few cases of diarrhoea were reported in the villages visited and most villages have access to safe drinking water. It is unlikely that widespread outbreaks of cholera or other waterborne diseases will occur. In the villages surveyed there was a good understanding of the need to boil or chemically purify water from contaminated sources.

The health situation will be monitored closely over the next three months. There is some concern that future rains and reductions in relief food distributions could have serious consequences for the health of vulnerable groups.

Outstanding needs

Although most villages have now received some food assistance, food rations need to continue on a systematic basis to particularly vulnerable groups. The situation remains chronic in the worst affected areas where people will require subsidised and in some cases free food until March 2000. In addition, distributions of nonfood items such as plastic sheeting, blankets, clothing and kitchen sets are an immediate priority.

The Orissa state branch of the IRCS enjoys a very positive reputation throughout villages in the vicinity of the cyclone shelters. It also has particular competencies in disaster preparedness, community mobilisation and infrastructure development. The IRCS is thus well positioned to operate a limited rehabilitation programme for the most vulnerable.

Phase two of the relief operation will continue until the end of December 1999. The rehabilitation programme is scheduled to run from December 1999 until June 2000 and will be

implemented in parallel with the current relief programme. A plan of action for the rehabilitation programme will be finalised shortly.

Initial analysis from the field has pointed to clear and distinct areas of need related to Red Cross competencies. The most critical area is the re-establishment of household economic assets. The huge loss of livestock, crops, trees, boats, household items and food stocks has meant that many households are having to totally rebuild their economic base in order to achieve any degree of self sufficiency. Broad areas of possible engagement currently under consideration include seed provision, agricultural extension support, limited support to fisheries and a cash for rehabilitation programme. The second area of rehabilitation needs is the rebuilding of destroyed community assets. Options include the construction of shallow tube-wells and the rebuilding of Red Cross dispensaries and government primary schools.

The rehabilitation programme will cover affected communities in the vicinity of 10 Red Cross cyclone shelter sites in the worst affected districts of Jagatsinghpur, Kendrapada and Puri. The cyclone shelters are located at Khurantathuta, Padmapur, Dhanuharbelari, Nuagarh, Nagar, Jamboo, Barakolikhala, Kharanisi, Benakandha and Sarumuhin.

The following key principles will guide the Red Cross rehabilitation programme:

- Prioritising rehabilitation in the most affected areas where there are Red Cross shelters.
- Ensuring basic needs of the most vulnerable are addressed.
- Balancing support to household economies with some support to rebuilding community infrastructure.
- Drawing on local skills and capacities and encouraging community participation
- Carrying out a rapid participatory planning assessment for the programme and producing a detailed plan of action with detailed budget.
- Working on a manageable scale.
- Ensuring co-ordination with others in the areas where the Red Cross is active.

In rural areas some family members have already migrated to neighbouring towns in search of employment and this may continue. However, many people are repairing their homes and are beginning to rebuild their household economies. These efforts are likely to focus upon food production, the sale of trees and fallen timber and reforestation.

For public health and psychological reasons a major effort is required by the Government to dispose of the thousands of animal carcasses littered across the affected districts. Agricultural assessments are under way to establish the degree of saline contamination of cropland and the crop losses (which may be slightly lower than previous estimates).

External relations - Government/UN/NGOs/Media

While the Government remains the key actor in the overall relief operation, state officials in Orissa have decided to end some emergency relief operations in affected areas, although government food distributions will continue to some 500,000 people in eight of the most severely affected districts. The Indian armed forces are now preparing to scale down operations in the affected areas. Most of the main roads have been cleared of fallen trees and helicopter air drops of food will be suspended.

The Government response to date has comprised the supply of 70,000 MT of relief food, 88,938 blankets, 527,255 polythene sheets and 135 MT of medicines. The response has been

very large and broadly successful, although there have been co-ordination difficulties and delays in getting some relief commodities distributed below the administrative block level.

The Government is getting repairs done to the railway and to basic infrastructure through food or cash for work schemes which are just commencing. The state government is also adapting the public distribution system so that food can be made available at subsidised rates to ration cardholders; plans are also underway to subsidise the recovery of the agriculture sector. The state Government is being supported from national budget provisions and by other states in India. For example one state has provided resources and support for the rehabilitation of schools, which has already started in Puri district.

The situation in the affected areas varies quite significantly. The Government along with a large number of local and International NGOs and civil society groups has concentrated on the worst affected areas. One key government intervention in the affected areas is the distribution of hot food, which will probably continue for the next 7-14 days.

At the Bhubaneswar level, co-ordination continues to work well. The co-ordination meetings at the UNICEF offices, once held daily, are now twice weekly. A rehabilitation meeting has taken place and three task forces on livelihoods, habitat and infrastructure have been formed and will report back to the main co-ordination meeting on 30th November. Attention is increasingly focused upon the implementation of food for work schemes and the rehabilitation phase. A consensus has been reached by the Government and all UN/NGO /INGO agencies that any rehabilitation programme will be governed by commonly agreed principles.

One month after the cyclone, the interest of the international media has waned and is now largely confined to sporadic reports from international news agencies (Reuters, AFP, AP) and broadcasters (BBC,CNN). The Indian media's interest in the disaster has also begun to decline.

Contributions

See Annex 1 for details.

Conclusion

Although the overall situation continues to improve, leading the government and humanitarian actors to move increasingly from emergency relief towards food for work schemes and rehabilitation, extensive needs remain among particularly vulnerable groups which must not be overlooked. The Federation is grateful for donor contributions to date, but stresses that further support is required to sustain the operation.

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