

[✉ Email this document](#)

Source: UN Office for the Coordination of Humanitarian Affairs
Date: 1 Jan 2005

Indonesia, Maldives, Seychelles, Sri Lanka, Thailand: Earthquake and Tsunami OCHA Situation Report No. 9

Ref: OCHA/GVA - 2005/0001

OCHA Situation Report No. 9 Earthquake and Tsunami Indonesia, Maldives, Sri Lanka, Thailand, Seychelles

- Ms. Margareta Wahlstrom, the Special Coordinator for Humanitarian Assistance to Tsunami affected communities, arrived in Sri Lanka.
- A consolidated regional UN Flash Appeal is scheduled to be launched on 6 January 2005.
- As of 1 January 2005, USD 982 million has been reported to OCHA as pledged or committed contributions for the victims for the tsunami-affected communities. (This figure does not include planned or announced loans)
- The United Nations Joint Logistics Center (UNJLC) is providing an overview of air operations for this disaster, particularly for Indonesia, Maldives and Sri Lanka. The latest report is available at its website: <http://www.unjlc.org/content/index.phtml/itemId/5478>

(The figures quoted in this report are official government figures).

INDONESIA

Situation

As reported by the Department of Social Affairs, the death toll in Aceh and North Sumatra from the massive earthquake and tsunami has risen up to 80,248 persons and 1,541 are missing. More than a hundred thousand people are living in temporary shelters and camps. The most common diseases suffered by disaster victims are diarrhoea, fevers, skin irritations, respiratory infections, headaches and stomach problems.

Requirements

On 30 December 2004, a quick inter-agency assessment was conducted (JRS, MCI, WVI, IOM, UNICEF, WFP, WHO and OCHA). Only some parts of the city of Banda Aceh were covered as other parts could not be reached due to the severe damage. At this stage, the highest relief priorities for the City of Banda Aceh only are believed to be as follows:

- Increased drinking and washing water supplies for an estimated 100,000 people.
- Emergency latrines for at least 20,000 people.
- Shelter materials to the IDPs in the camps, with a preference for family-size tents.
- Additional nutritionally balanced food.
- Public health monitoring and interventions, especially the provision of psychosocial support.

International Response

A large-scale relief operation is being implemented, which includes:

UN agencies and non-governmental organizations have provided basic food and water, as well as medical support. It is impossible to reach people in the remote areas, so assistance will be concentrated on the collection points and improvised IDP camps.

A UNICEF emergency officer arrived with emergency medical kits and other supplies.

WFP has 18 MT fortified noodles and 12 MT of fortified biscuits on the way. Other flood items are coming soon, as well as 20 trucks and 2 tankers for fuel. WFP will set up a Joint Logistics Centre (JLC) in Jakarta and Banda Aceh to provide a commodity tracking system and manage logistics, and another team will arrive to establish a joint agency telecommunications architecture.

IOM's 38 trucks arrived with fuel for 1 month's operation. IOM is supported by AusAid (medical equipment and supplies, tarpaulins, and ration kits, water and food). IOM is providing the main base for the majority of humanitarian agencies currently working in Banda Aceh, before longer-term facilities can be located and hired or constructed to house the agencies.

A UN base camp will be established in the coming days in Banda Aceh. The International Humanitarian Partnership (IHP) is providing the necessary hardware.

The UNFPA response has included supplying simple provisions for safe child delivery.

Several C-130 aircraft are available for regional airlift in Medan (Australia, Malaysia, US Air Force).

Japan is bringing a 23-person medical team. They will set up a field medical facility at Lam Ara in Banda Raya Sub-district.

40 emergency health kits were delivered by UNICEF to cover for 40,000 people for a period of 3 months (200,000 for approximately 2 weeks). The

first shipment of approximately 2,000 tarpaulins arrived on 31 December 2004 in Jakarta and will be sent to Banda Aceh.

The International Rescue Committee (IRC) is deploying mobile emergency response teams consisting of medical, water, sanitation, child trauma and logistics experts. IRC will focus on increasing access to potable water and sanitation facilities, delivering urgent primary health care, distributing emergency supplies and providing psychological aid for survivors.

Jesuit Refugee Service (JRS) will send two trucks from Medan to Banda Aceh. The aid items consist of medicine (for 5,000 patients) and household items. 1,000 body bags have been sent via the Indonesia Red Cross (PMI)

Mercy Corps International (MCI) will focus on water and sanitation, shelter and medical services.

MSF (Belgium) provided four mobile clinics. They received water and sanitation materials (bladders and pipe-work distribution systems, plastic sheeting, clothing, and 12,000 mosquito nets).

Other information

Due to the saturation of the airport capacity in Banda Aceh, OCHA is urging donors to use road transport from Medan wherever possible, instead of air transport.

MALDIVES

Situation and constraints

One third of the population remains severely affected, reliant for water and food on relief assistance. Some 12,200 people have been registered as homeless by the authorities. Of these, about 8,500 people have been evacuated to other islands.

On 1 January 2005, the Telecommunications Authority disclosed that 29 islands are still without direct communication links.

Particular challenges to the provision of assistance, are:

- Population dispersion over 200 islands scattered over 900 kms. Small quantities of aid have to be transported to every island by either boat, sea plane or helicopter.
- On most islands, access is designed for small boats, thereby restricting the amount of supplies and equipment that can be delivered at any one time.
- Inclement weather restricts travel by boat and plane and hampers delivery of aid.

As a result of the above the country and its people remain vulnerable to continuing effects of the disaster.

Requirements

Transport and logistical coordination continue to remain the main priorities of the Government given the dispersion and the difficult conditions to be endured for aid delivery.

International Response

The UNDAC team continues to conduct more missions to damaged islands. The UNEP environmental expert attached to the UNDAC team conducted an assessment of the waste disposal site at Thilafushi Island in Male' atoll on 31 December 2004. It showed two main impacts from the tsunami. The first one was a small oil spill at the waste oil storage. The second was the washing away of a part of the island that contained the waste.

On 30 December, a Japanese Disaster Relief Team arrived in the Maldives with USD 610,000 worth of emergency assistance. According to the Foreign Ministry, a 17 member Australian Medical Team arrived with supplies on 31 December 2004.

Other information

URGENT: The Government's Crisis Task Force urgently requests that manifests for aid shipments be sent to the Government well in advance to ensure more efficient processing and reduce bottlenecks. There is limited warehouse storage capacity at the airport. Please send manifests in advance to the Ministry of Foreign Affairs' Department of External Resources: der@foreign.gov.mv; fax: +960 317 592; copied to the Task Force's Aid Coordination Unit: rshareef@dhivehinet.net.mv and UNDP's focal point for logistics: shaheem.razee@undp.org.

SRI LANKA

Situation

As of 1 January 2005, of the 25 districts in the country, 12 have been severely affected. As of 31 December, the Government is reporting 28,551 deaths, 889,175 people displaced with over 82,320 houses destroyed. The tidal wave has particularly affected the coastal districts of Jaffna, Mullativu, Trincomalee, Batticaloa, Ampara, Hambantota, Matara and Galle. In the most affected districts large numbers of displaced are taking refuge in schools and government buildings and are out in the open on areas of higher ground with little or no access to life sustaining services and facilities. In the immediate term, there are concerns that the death toll will increase in the absence of adequate relief efforts. A summary of the assessment information gathered to date is given below:

Galle: While there is access to the district, there is considerable damage to infrastructure including to roads and bridges. 70 percent of buildings immediately located on the coastline have been completely destroyed and at least 30 percent of structures have suffered damage up to 1 km inland. Of immediate concern is the damage caused to the health centres, in particular the Galle Maternity hospital. There remain fears of potential water and vector borne disease outbreaks. While there has been a disruption to water supply, potable water is available. However, the lack of sanitation facilities is a major concern.

Ampara: Damage to infrastructure includes six hospitals which has significantly disrupted health services. Public buildings are being used as temporary shelters for those who have lost their homes. Water supplies are generally disrupted and there remains a shortage of clean drinking water. Food supply is adequate and supported by local donations although in the medium term will become an issue.

Matara: Secondary roads are in poor condition and may hamper efforts to bring relief supplies to those affected. Food and water is available to affected communities although concerns remain on the health situation in view of the limited sanitary conditions.

Hambantot: Affected areas are accessible although road clearance remains an issue in some areas. No hospitals in the district were damaged although several health centres have been affected. Electricity and water supplies have been disrupted. 95 % of fishing boats have been lost or destroyed which will have a significant impact on livelihoods. Shelter remains a primary need.

Secondary threat of water and vector borne disease are well recognised as the greatest concern. Further flooding caused by heavy rains in some areas is hampering the relief effort and exacerbating poor sanitary conditions of those displaced.

Requirements

The immediate priority areas of response are for water and sanitation, health, shelter, food and non-food items.

International Response

International response to the needs in Sri Lanka have been considerable. Immediate response from the UN system includes the following:

- Release and distribution by UNHCR of relief items totaling USD380,000
- Release and on going distribution of 5,300MTS of food by WFP with USD500,000 made available for the local purchase of urgently needed food stocks
- 15 UNICEF emergency medical kits (to serve 150,000 population for 3 months) were cleared and handed over to the Ministry of Health. They will allow 15 hospitals to service the needs of 150,000 people for three

months as well as the distribution of shelter and non food relief packages for up to 30,000 people. UNICEF has started procuring and distributing drugs and medical supplies to hospital and health centers in the affected areas. UNICEF procured three 6,000-litre water bowsers for Batticaloa, Matara and Ampara on 31 December.

- Provision of USD150,000 from UNFPA to support assessment of hygiene needs and psycho social support.
- Provision of 900,000 water purification tablets and four emergency health kits sufficient for 10,000 people for 3 months.
- Support from FAO to assess damages to fisheries and agriculture sector.
- Re-deployment of UNVs by UNDP to work with the District Secretaries to assist with the coordination of information at the local level.

There has been an increase in the capacity provided through international NGOs with OXFAM, GOAL, World Vision, Merlin, ACT agencies, AAH, ADRA among others, all significantly strengthening their presence and operations in the country.

Other information

The Government has established a Centre for National Operations under the direct authority of the Prime Minister which serves to coordinate the national and international relief operation. Information is compiled centrally and disseminated through the Government website www.priu.gov.lk/cno. The Centre is directly supported by the Office of the Resident Coordinator and the UNDAC team.

The detailed assessment reports gathered to date are available on the Government website managed by the Centre for National Operations (CNO): www.priu.gov.lk/cno

THAILAND

Situation

The latest figures released by the Government are:

- 4,798 dead (Thai: 2,193, Foreigners: 2,402, Unidentified: 203)
- 6,384 still missing (Thai: 4,314, Foreigners: 2,069, Unidentified: 1)

There is still uncertainty how factual these numbers are. New bodies are still being discovered daily and the number of dead is still believed to be higher. Estimates of up to 11,000 people killed are now being cited.

Assessments in four districts (Phangna and Ranong in the northern part of the affected area and Krabi and Thang in the southern part) confirmed that the focus is still on the retrieval and identification of dead bodies, so provincial

authorities are not yet in a position to provide clear details on to extent of damage to infrastructure and rehabilitation needs.

Requirements

Shelter and recovery of livelihood seem to be priority areas for the local population, however, due to the situation a more in-depth assessment of the situation should be undertaken in the near future.

International Response

A task force for Disaster Victim Identification (DVI) has been established and is chaired by Deputy Chief of the Royal Thai Police. The contact number for the DVI task force is 076 220 622 or 076 220 610. 18 international DVI teams are active in Thailand at the moment.

There are still some problems in moving forensic teams from Phuket to the different working places by helicopters. The Australian team has provided a liaison officer to coordinate the transport of teams.

The morgue administration has been a critical area with thousands of bodies rapidly decomposing in the warm climate. Temples are used as morgues and in the largest one more than 3,000 bodies are collected. Cold storages are now being organised and will hopefully be in place within the next two days.

The majority of the tourists that survived the tsunami have already been repatriated to their countries of origin. There are still injured people remaining in the local hospitals.

Transport capacity has been enhanced by the arrival of helicopters from Singapore, Japan and US.

A team of five specialist pediatricians and five nurses were dispatched by UNICEF to provide psychosocial care and support to affected children in affected provinces.

SEYCHELLES

Situation

There has been extensive infrastructural devastation on coastline areas, widespread damages to roads, bridges, public utilities and houses in the south and west of the main island, Mahe, as well as in areas on the second and third largest islands of Praslin and La Digue. The waves also caused flooding in the capital, Victoria, and severe damage to both the commercial and fishing ports.

Requirements

A preliminary estimate from the Government is that the tidal waves resulted in

damage amounting to USD 30 million.

National and International Response

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

A United Nations Disaster Assessment and Coordination team (UNDAC) will be sent to the Seychelles in the coming days to evaluate the situation.

PLEDGES – CONTRIBUTIONS

OCHA is prepared to serve as a channel for unearmarked cash contributions to be used for immediate relief assistance, in coordination with relevant organizations in the United Nations system. For banking details, please contact the desk officers indicated below. OCHA provides donors with written confirmation and pertinent details concerning the utilization of the funds contributed.

Updates on contributions to this disaster may be found on the Financial Tracking Service (<http://www.reliefweb.int/fts>; or, click “Financial Tracking” at the top of the ReliefWeb page for this disaster). Donors are requested to verify this table and inform OCHA Geneva of corrections/additions/values. Donors are encouraged to notify OCHA Geneva of their contributions to this disaster using the OCHA Standardized Contributions Recording Format, available electronically on the above-mentioned FTS website.

Together with further information on other ongoing emergencies, this situation report is also available on the OCHA Internet Website at <http://www.reliefweb.int>.

The map of the region hit can be found at ReliefWeb Map centre - Indian Ocean: Earthquake/Tsunami Impact and Assistance

[MAP - South Asia: Earthquake and Tsunami - Situation map #4](#)

[Contributions report](#) (pdf* format - 63.5KB)

Telephone: +41-22-917 12 34

Fax: +41-22-917 00 23

E-mail: ochagva@un.org

In case of emergency only: Tel. +41-22-917 20 10

Desk Officers:

Mr. Erik Haegglund/Mr. Soichi Nakajima

Direct Tel. +41-22-917 32 99/ 4034

Mr. Rudi Müller/Ms. Caroline Péguet
Direct Tel. 41-22-917 3131 / 1836

Press contact:

(GVA) Ms. Elisabeth Byrs, direct Tel. ++41-22-917 26 53

(N.Y.) Ms. Stephanie Bunker, direct Tel. +1-917 367 51 26

(N.Y.) Mr. Brian Grogan, direct Tel. +1-212-963 11 43

[Top](#)

With the exception of public UN sources, reproduction or redistribution of the above text, in whole, part or in any form, requires the prior consent of the original source.

Related Documents:

Latest Emergency Updates: [South Asia: Earthquake and Tsunami - Dec 2004](#)

Latest By Country: [Indonesia](#); [Maldives](#); [Seychelles](#); [Sri Lanka](#); [Thailand](#)

Other ReliefWeb documents by: [UN Office for the Coordination of Humanitarian Affairs](#)

Source URL: <http://www.reliefweb.int>

Soe Hai

Home Page: www.reliefweb.int
[Comments](#)