Salient Points

- Three weeks after torrential rain and river overflow in Honiara, Guadalcanal, Malaita and Isabel Provinces caused massive flooding, damages and displacement on 3 and 5 April 2014, destruction or serious damage has been widespread to families, residential and business communities, farming and other livelihoods, and to infrastructure, including water sources, and schools.
- Out of the nearly 11,000 original persons displaced from their homes, approximately 8,500 displaced people remain in 14 evacuation centres in Honiara and Guadalcanal, Province (GP).
- Water trucking continues in Honiara, but an estimated 60% of people in affected areas of Guadalcanal have no access to clean water.
- Guadalcanal Province Health Department's assessment results: 10% of communities with clean water; 28% with functional toilet; 4% with adequate food; 29% of births attended by skilled staff.
- Reporting from the National Referral Hospital show a sharp increase in diarrhoea (case load doubling each of the last two weeks) (WHO SitRep 4, 24 April).
- A large scale nutrition screening of children under age five is planned, along with immunization against measles, rubella and polio, and distribution of Vitamin A and de-worming tablets.
- 60 out of 196 primary and secondary schools and 25 out of 88 ECCE centres were damaged by the flooding, another seven schools are still being used as evacuation centres; another seven need cleaning and rehabilitation after departure of displaced persons.
- OCHA has approved funds for the Government to pay for food distribution at evacuation centres and school feeding.
- The Humanitarian Action Plan includes both relief and early recovery work its initial estimate is for USD 24 million for 68 activities across seven clusters, of which about USD 21 million is funded.
- CERF proposal has been drafted for health and nutrition, WASH and protection activities.

Solomon Islands Flooding

52,000 People affected of which 26,000 are children

8,500 People in capital city of Honiara in 14 evacuation centres

85 Schools affected

UNICEF Needs*
USD$ 450,000
*subject to revision after Humanitarian Action plan complete
UNICEF and Partners Response to Date

**UNICEF Solomon Islands** is designated by the Ministry of Health and Medical Services as their Supporting Agency for the coordination of WASH response, under the Welfare and IDP Cluster.

**Water**
At present, water to most evacuation centres is still supplied by WASH cluster partners through water trucks. There are 3 Nomad water purification units in operation, with two in Honiara and one in GP. 800,000 litres of water has been delivered to Honiara by Solomon Islands Red Cross and 76,000 litres has been delivered to Guadalcanal Province (GP) by World Vision.

A chlorination trial will be conducted at Holy Cross and all water to clinics will be chlorinated.

**Sanitation and Hygiene**
Soap and basic hygiene items have been distributed but replenishment is needed at all sites, and in Guadalcanal particularly for infants, adolescent girls and women. The distribution of hygiene kits continued in the Western Region of Guadalcanal Province with about 463 households receiving kits. UNICEF will continue this week with the distribution of 50,000 antiseptic soaps for personal hygiene and 3,000 water purification tablets. Dignity kits have been distributed by UNFPA. Additional supplies from UNICEF will arrive by ship on 5 May.

The SIRC/RWSS constructed 20 latrines in FOPA – one of the main evacuation centers. Cleaning of evacuation centres has improved thanks to Honiara City Council, with funds from NZ MFAT.

The cleaning of wells has started in GP with 6 teams. To date 40 wells that have been cleaned.

**Health**
125 communities have been assessed for health needs covering at least 50% of the affected population in Honiara and Guadalcanal (OCHA Situation Report 19 April). An assessment of vaccination and cold storage capacity is also underway.

UNICEF and Government EPI managers have prepared a plan and budget for a supplementary immunization activity against measles and rubella that would also include deworming and Vitamin A.
There is an ongoing assessment of post-disaster risk and potential impact of an epidemic of a number of diseases. The Health cluster is in the process of creating a response plan and strengthening the early warning and response system (EWARS). Mosquito nets have been distributed to evacuation centres and residents living in dengue/malaria transmission areas. Spraying around evacuation centres and at-risk communities is also ongoing (HAP).

The Health Promotion Division of the Ministry of Health and Medical Services has heightened its health campaigns and dissemination of key messages to flood-affected communities. Messages include breastfeeding practices, food safety issues, hygiene and sanitation, red eye, diarrhoea, Acute Respiratory Infection (ARI and dengue fever) are being promoted by UNICEF and will be broadcast on radio at least 6 times a day and will remain for the next 3 weeks. Health and hygiene training is being held at evacuation centres. A health promotion forum and training of volunteers was conducted on 23 April 2014 (HAP and WHO Health Sit Rep 24 April). UNICEF is printing 10,000 (5,000 English and 5,000 Pidjin) pocket guides with key messages and 10,000 hands with promotional health and WASH messages.

**Nutrition**

Approximately 40 youth volunteers and 10 team leaders (health workers) were trained on how to do a nutrition assessment which was undertaken on 23 April. In addition to this, supplementing the SIA activities mentioned above, teams will carry out mass screening for malnutrition of children 6-59 months of age in mid-May. The nutrition sub-cluster continues to work on sampling methods for this screening, as it will include evacuation centres, and other affected communities in Honiara and GP.

Micro-nutrient Powder (144,000 sachets) donated by Fiji MOH arrived on 20 April and have already been delivered to the National RCH/Nut and MHMS. Eight mobile clinic team leaders and six health workers from HCC and GP, who are carrying out outreach service to affected communities (including evacuation centres), were briefed on the importance of the multi-micronutrient powder (MNP) intervention for children 6-59 months and school age children (12 years of age). They were also briefed on its proper administration in the home. Distribution to affected areas will begin next week. Leaflets on the use of MNP have been developed and will be distributed to parents with MNP Packs. UNICEF’s shipments of F75, F100 and ReSoMal for severely malnourished children have arrived.

UNICEF supports the Ministry of Education and Human Resource Development (MEHRD) to coordinate the Education Cluster, under the Welfare and IDP Cluster. MEHRD re-opened all schools except flood-affected ones on April 22 and is currently working with the NDMO and other partners to encourage the movement of displaced persons out of seven schools that are still serving as evacuation centres, and the cleaning of those schools. School feeding (i.e. wet feeding/ hot meals in addition to the food distribution in remaining evacuation centres) funds have been approved by OCHA.

UNICEF supplied 2 x 80m2 an 1 x 24m2 tents and 20 tarpaulins to Honiara City Council and has now supplied another two 24m2 tents, two early childhood development kits, two school in a box kits, and recreation kits via the Ministry of Education and Human Resources Development (MEHRD). UNICEF supplies of tent, school in a box and an ECD kit helped MEHRD and Caritas establish child friendly learning spaces at the Holy Cross evacuation centre. Funding is being sought to help more schools and children.

UNICEF is supporting MEHRD and Caritas Australia in setting up 2 child friendly learning spaces at the Holy Cross evacuation center with the supply of 2 (24 square meter) tents, 1 school in a box and 1 ECD kit.

UNICEF is working with the education authorities of Honiara City Council, Guadalcanal and the MEHRD to identify schools that urgently need emergency school kits and tents and will coordinate the delivery of items so that classes can resume. Getting reliable school data from Guadalcanal
province remains a challenge due to the remoteness of many of the schools and destruction of bridges and roads.

The Welfare and IDP Cluster, led by the Ministry of Women, Youth and Culture and the Ministry of Provincial Government, includes Protection and the area of responsibility of Child Protection.

Assessments and monitoring indicate that evacuation site management has improved, through the support of government employees, locally organised volunteers and NGOs. Government has prioritized reducing the number of evacuation centres to fewer than 10.

UNICEF supported the MEHRD to launch child and women friendly spaces for activities (integrating protective and learning spaces) at FOPA evacuation centre on 24 April. Activities on the first day were attended by 130 children from two years old to 18 years old. Inter-agency Teams implementing psycho-social support interventions are made up of MEHRD teachers, SWD, MWYCFA, Save the Children, and World Vision Staff and Volunteers. Mobile CFS activities started on Monday 28 April also at Pavilion centre and progressively will be rolled out to Rove Evacuation Centre. (FOPA and Rove been identified as longer term centre for IDPs who cannot return to their place of origin). UNICEF provided capacity building support for CFS set up and management, three Recreational kits, four ECD Kits and link up of CFS activities with complementary emergency response programs rolled out by other service providers, including CP and GBV prevention and referrals, counselling, reproductive health, health promotion, etc.

Other Cluster news:
A Post Disaster Needs Assessment has been planned with a group of SIG and multi-lateral partners. The New Zealand Government is supplying a temporary bailey bridge in May to replace the old Mataniko Bridge, until Government with Japanese assistance can reconstruct a new bridge next year. ILO and Tear Fund/Ola Fou are supporting cash-for-work activities for household and community level immediate recovery. Other NGOs are distributing livelihood kits, and one NGO is planning to produce seedlings and cuttings for distribution. A three person UN Disasters Assessment and Coordination team is assessing environmental risk at the tailings dam of a flooded mine. There are significant needs for shelter, food security and agriculture and other livelihood recovery; assessments are being conducted by Ministries of Agriculture and Livestock, Commerce, and Fisheries.

Situation Overview & Humanitarian Needs

Two weeks after flash flooding on 3-5 April, flood waters have begun to recede, leaving behind acres of mud and debris. Logistics and mobility have improved, however it will take quite some time to repair many bridges and roads. A specialist environmental assessment of a flooded mine is planned. Honiara City and Guadalcanal Province have the largest recovery challenges, although damage to food gardens, plantations and water sources also occurred in Malaita and Isabel Island Provinces. Guadalcanal Province has a population of 93,613, of which the estimated number affected is 52,000, including in the capital city of Honiara (population: 64,609). The areas affected in Honiara are Tuvaruhu, Vara Creek, Koa Hill, No 3, Varamata, Fijian Quarter in Central Honiara, White River, Rove in West Honiara, and Henderson, Burns creek and some parts of Ranadi Industrial area in East Honiara (HAP).

The internally displaced number is now about 8,500 with people in 14 evacuation centres, reduced from over 10,000 in 21 centres (OCHA Sit Rep 27 April). Return and re-location of displaced persons began on Saturday 20th April and has continued every day. Evacuees who are unable to return to their homes and communities are being relocated to FOPA and Police Club. As of April 22, five evacuation centres have reportedly been emptied: Koale CHS, Mbuva Valley, Kukum Catholic Hall, Mbokona, and Bishop Eppalle (HCC Sit Rep 8 -22 April).
Following surveys of displaced people, the Government expects approximately 80 per cent (6,800) to return home, with the remaining 20 per cent (1,700) requiring longer term emergency shelter for at least two months due to destroyed homes and communities (HAP).

In Guadalcanal Province, there is an estimated 40,000 people affected to varying degrees. In addition to immediate food aid, women, men, girls and boys will require varying levels of assistance due to destroyed and damaged homes, damaged food gardens, and the loss of household items and personal effects. The Government is planning an assistance package to most affected communities, including food and non-food items. The areas affected are North, Northeast, Central and Southwest Guadalcanal (HAP). In Guadalcanal, all water sources assessed in Burns Creek, Mosquito, Tanakake Valley and Rice Farm are contaminated

A major effort by Government and partners has ensured food distribution to evacuation centres. However, resources are over stretched, and the food distributed does not fulfil nutritional needs particularly for complementary feeding of children aged 6-23 months, and for pregnant and lactating mothers (Inter agency protection cluster assessment).

On 21st April, UNICEF joined the protection monitoring team conducting rapid assessments in areas of return (i.e. Burns Creek). Representatives included staff from MWYCFA, MEHRD, UNICEF, OXFAM, ADRA and World Vision (as part of a broader inter-agency rapid assessment mission including MHMS RWSS, Ministry of Land, Housing and Survey, Ministry of Agriculture and Livestock and SIRC). Key needs and gaps in the areas of Health, WASH, Nutrition, Livelihoods, Security, Protection, and Psychosocial Support has been documented and shared within Welfare IDP Cluster and with other Clusters. Burns Creek is a challenging response area due to the presence of squatter settlement prior to emergency. Inter-agency assessments will continue over the coming 2 weeks in areas of return and broader affected areas in Guadalcanal province

Reporting from the National Referral Hospital show a sharp increase in diarrhea, with the case load doubling each of the last two weeks (WHO SitRep 4, 24 April). There are reports of an influenza-like and dengue-like illness on the rise at the National Referral Hospital (OCHA Sit Rep 27 April and Ministry of Health and Medical Services Surveillance Report 14-20 April). There have been 564 reported cases of diarrhea in Honiara and GP (OCHA Sit Rep 27 April).

60 out of 196 primary and secondary schools and 25 out of 88 ECCE centres were damaged by the flooding, another seven schools are still being used as evacuation centres; another seven need cleaning and rehabilitation after departure of displaced persons.

UNICEF is supporting MEHRD in preparing an assessment template, which will be used to collect information on the affected schools in both Honiara and Guadalcanal. Close to 50% of the schools visited by MEHRD and GP education authority officers have already handed in the assessment forms. The findings of the education cluster needs assessment found that 60 of the 196 primary and secondary schools and 25 of 88 ECCE centers were damaged to varying degrees in Guadalcanal and Honiara. Initial estimated cost of recovery for all affected primary, secondary schools and ECCE centers is about SBD 8.95 million.

A Humanitarian Action Plan has been drafted by national cluster members for a three month period and is with the National Disaster Council for endorsement. A Post Disaster Needs Assessment proposal is also with the National Disaster Council for consideration; sector humanitarian assessments are already indicating large scale agriculture and business, shelter, school, clinic, road, bridge and other infrastructure repairs are needed.

**Humanitarian leadership and coordination**

The Solomon Islands National Disaster Council, with the National Emergency Operations Center and the National Disaster Management Office (NDMO), is leading and coordinating the response, including all Government designated leads and their humanitarian partners on sector or cluster areas. UN OCHA is assisting Government with Coordination, while bilateral and multilateral partners and many NGOs and FBOs are supporting with cash, supplies, staff and services.
UNICEF’s Humanitarian Strategy is guided by its Core Commitments to Children in Humanitarian situations, by its position in the Pacific Humanitarian Team, and by the prioritization of needs and coordination by the Government, including through the Cluster structure. UNICEF’s Solomon Islands Office, located in Honiara, is responsible for both coordination support (lead support to Government in WASH and Education, membership in IDP and Social Welfare Cluster and Health and Nutrition Cluster); and for implementation. UNICEF’s multi-country office in Fiji provides technical oversight and guidance, surge staff, procurement and transaction processing. Our strategy is:

1) Coordinate all assessments, services, resources and information through NDMO, supported by UN OCHA and within agreed SIG disaster coordination and mechanisms. Fulfil commitments for lead technical advice to SIG on coordination of WASH and Education; provide supplementary support in Protection, Health and Nutrition clusters or working groups.

2) Prioritise needs for clean water, sanitation and hygiene in evacuation centres, schools that sustained damages and clinics serving affected people

3) Integration of interventions in WASH, education and protection in support to resumption of regular schooling

4) Supplement supplies and services of SIG and other health partners, with concentration on screening, referral and treatment of malnutrition; special post-disaster immunization plus campaign (measles, rubella, Vitamin A, de-worming); support to pregnant and lactating women, new mothers and newborns

5) Coordinate with the Solomon Islands National Emergency Operations Centre [NEOC], Solomon Island Broadcasting Corporation (SIBC) and the Health Communications Working Group to ensure massive and repetitive promotion on national radio of key family practices for emergencies that keep family members healthy and safe.

6) Implement response through five mechanisms: (i) contingency supplies pre-positioned in Honiara and Port Villa to partner best able to distribute in coordinated, effective way; (ii) procurement, shipping and distribution of additional supplies; (iii) mixed modality of cash advances to government, NGOs and payments to contractors; (iv) technical assistance through staff on ground and deployed surge staff; (v) remote support from UNICEF Pacific in Fiji.

7) Financial accountability for all resources and performance accountability through on site monitoring for achievement of targets agreed with National Disaster Council in the Humanitarian Action Plan (approval pending.)

Human resources

Regular UNICEF staff members in Honiara, Solomon Islands include: A Chief of Field Office, WASH (3), child protection (2), education (1), immunization/logistics (1), maternal and child health (1), communication (1), administration (3). Surge staff currently deployed: emergency coordination (1), education (1) Nutrition (2) supply (1). The Regional WASH in emergencies advisor is on mission, as is a water and sanitation consultant to participate in the PDNA.

Funding

Based on the results of Cluster and cross cutting assessments, and the draft Humanitarian Action Plan, UNICEF Pacific needs USD$450,000 to respond in water, sanitation, hygiene, maternal and child health, protection and education areas. UNICEF Pacific and its sub-office in the Solomon Islands is very grateful to have received/or soon receive funds from: New Zealand government and UNICEF New Zealand; UNICEF Japan; UNICEF Australia, and the UPS Company.

An OCHA-coordinated Consolidated Emergency Response Fund based on the HAP is being prepared that will seek up to USD 2.2 million in Protection, WASH, Health and Nutrition. UNICEF Pacific, on behalf of Cluster implementing partners and for some direct implementation, will likely request up to USD 1.4 million through the CERF.
Next SitRep: 5 May 2014

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Caption: Sifting through what remains of their possessions for whatever they can save.

UNICEF promotes the rights and well-being of every child, in everything we do. Together with our partners, we work in 190 countries and territories to translate that commitment into practical action, focusing special effort on reaching the most vulnerable and excluded children, to the benefit of all children, everywhere.