



Cyclone REMAL

SITREP # 05

West Bengal, India

13:00 hrs IST, 14.06.2024

unicef 

Highlights

Cyclone Remal made landfall on 26th May 2024, compounded by heavy unseasonal rainfall in the affected area.

Seven people have lost their lives and nearly 100 people were injured, according to media reports.

Inter-Agency Group, UNICEF and Sphere India jointly led the Joint Rapid Need Assessment (JRNA) across 144 villages, covering 205 households.

Around 2,500 houses have been destroyed which house 147,500 people including approximately 33% children, while 27,000 others have suffered partial damage.

Incidence of skin diseases is increasing due to insufficient clean water for personal hygiene, and there is a high risk of diarrhoeal and other water-related disease outbreaks.

The JRNA identified WASH, Health, Livelihood, Food supply, School infrastructure repair, and specialised support to disabled children as the priority areas which need focus and attention.

UNICEF has planned a health care response to support a population of 341,560.

Distribution of sanitation and hygiene kits by UNICEF will reach 17,000 to 18,000 most vulnerable people in the impacted areas.

Initial response was expected by the government, however based on the government documents in the public domain, government in India has not made any additional provision for response or recovery for this cyclone.

Situation in numbers

23,267,617 people have faced the impact which includes **7,335,642** children.

South 24 Parganas and East Midnapore are most impacted.

In South 24 Parganas:

1952395 people impacted.

331554 girls (0-18) impacted.

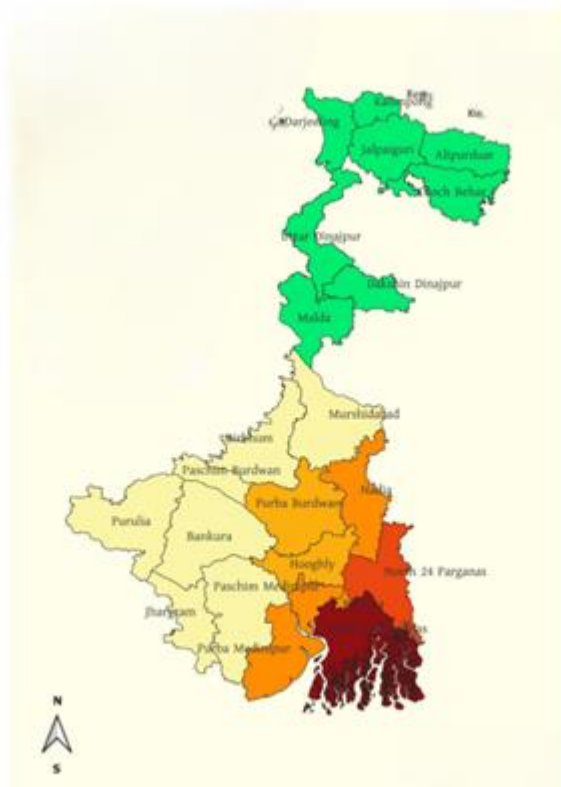
346750 boys (0-18) impacted.

30 cases of a skin disease are reported (IAG partner)

400 Integrated Child Development Services centres are damaged.

Very limited availability of water for any type of use

Impacted districts in West Bengal (source: Indian Meteorological Department, Government of India)



Situation on ground

WASH

East Midnapore and South 24 Parganas have reported damaged toilets in the impacted area. Based on the information from local civil society organisations, approximately 4,500 toilets are unfunctional in the South 24 Parganas, the most impacted district, because of the cyclone. In the same district 52% people have resorted to open defecation. The unavailability of safe drinking water is a concern with 46% of people across East Medinipur and South 24 Parganas. 15.5% people from these two districts have reported limited or no access to water storage containers with lids. Privacy in bathing areas is a concern for 8% in both South 24 Parganas and East Medinipur.

To address the urgent needs in the WASH sector, the following actions are required:

- Linking up people in need to the existing WASH related schemes of the government and other responders to strengthen the existing systems.
- Immediate repair and restoration of damaged water supply infrastructure.
- Additional provision for water (drinking and for personal hygiene) to meet the acute needs.
- Address disparities in filtered water access by distributing filtration systems to areas with lower adoption rates, ensuring safer drinking water post-disaster.
- Urgent establishment of handwashing stations with soap and water accessibility, particularly in areas reporting limited or no facilities. Enhanced focus on soap provision and water availability to promote proper hygiene practices.
- Influence the local government administration for reinforcement of waste disposal systems, including designated disposal areas and organized waste collection services.

- Targeted support for adolescent girls and women, ensuring access to menstrual hygiene products, privacy, and facilities for washing and changing, which is being responded to by UNICEF.

Provision of appropriate storage containers including jerry cans, buckets with lids, and large water storage facilities, addressing the disparities observed across districts to enable proper water storage post-disaster.

Health

About 30 cases of skin disease (unspecific diagnosis) are reported on the islands of Gosaba block of the South 24 Parganas district in the last one week. It may be attributed to insufficient fresh water for personal hygiene due to salinization of water sources. Local NGOs have been advised by UNICEF to refer these cases to the local government dermatologist at the district level health facilities for further diagnosis, which are outside of the islands at the district headquarter.

In the aftermath of the cyclone, 21.5 % of respondents have reported cases of stomach-ache, diarrhoea, cold, cough, fever, lethargy, etc., in their locality in the first five days. The Island blocks currently have very limited medical services due to remoteness of the islands. It is difficult for an outside doctor to reach the island for medical services on daily basis. The local government administration has requested UNICEF to support partial cost and functioning of boat clinics in the island blocks.

To address the urgent needs in the Health sector, the following actions are required:

1. The provision of medical assistance and access to health facilities is of utmost importance. The affected population requires healthcare services to address any chronic health conditions and prevent water-borne diseases. Timely access to medical aid, including medication, medical professionals, and necessary treatments, is crucial for their physical and mental well-being.
2. To address trauma a psychosocial first aid intervention is also needed.
3. Clean water for drinking, bathing and access to toilets is also necessary to maintain personal hygiene and prevent the spread of communicable diseases.
4. Restoration of nearest district health facilities damaged by Cyclone Remal is essential to serve the long-term health needs of the affected community.

Child Protection

23 per cent of girls have lost access to toilets (as per the JRNA), which leaves them vulnerable to threats from anti-social elements. 15 percent adolescent girls have reported that they do not feel safe, as their homes are damaged due to the cyclone. The JRNA reveals notable variations in key protection needs between East Medinipur and South 24 Parganas,

Nutrition

400 anganwadis are nonfunctional and government has started to find alternate places for operations of the Anganwadi services. Due to loss of livelihood which continues even after three weeks, the ability of the most vulnerable people to purchase food has reduced. This may lead to nutritional deficiency in the coming days or weeks.

Critical Needs Based on the JRNA report and local administration / CSOs.

Short-term:

- Drinking water and hand washing facilities needs are highly compromised, which may lead to outbreak of communicable diseases. This needs to be addressed most critically.
- Distribution of menstrual hygiene kits and providing education on menstrual health and hygiene practices to address challenges with menstrual hygiene.
- Urgent needs of added health care support, particularly on the islands which have limited access.
- Conduct awareness campaigns on gender-based violence and establish safe spaces for survivors to seek support and assistance.

Mid-term:

- Collaborate with local authorities and community leaders to develop and implement protocols for addressing domestic violence.
- Establish community-based support groups and helplines to provide counselling and assistance to individuals experiencing family separations or privacy concerns.
- Conduct training workshops for healthcare workers and volunteers on identifying and addressing protection concerns, particularly those related to women and children.

Response

- Following the warnings issued by the Indian Meteorological Department, UNICEF supported by Inter Agency coordination Group (IAG) convened daily coordination meetings of 30 plus agencies from Government, Civil Society Organisations, the district control rooms, the National Disaster Response Force (NDRF), district and state level Ham (informal community radio) communication clubs.
- UNICEF is coordinating with the Government and civil society partners on ground to ensure an efficient and effective response to the needs of the most vulnerable people.
- The Joint Rapid Needs Assessment is completed and formally published by the IAG with support from UNICEF.

Based on the information from ground zero, UNICEF modified its joint response plan and limited it to two sectors viz. Health and WASH in 10 most affected blocks of the South 24 Parganas: Canning-1, Basanti, Baripur-1, Joynagar-1, Mathurapur-1, Gosaba (largest cluster of islands), Kakdwip, Namkhana, Sagar and Pathar-Pratima

WASH intervention:

UNICEF is distributing Emergency WASH hygiene and dignity kits which includes supplies for personal hygiene, culturally appropriate menstrual hygiene, household water filters, chlorine tablets, installation of community water tanks and portable water chlorinators. WASH supplies will reach nine administrative blocks of the district of South 24 Parganas with the help of community volunteers and local inter agency group (IAG) partners to 3,000 most vulnerable families. To provide safe drinking water UNICEF will also distribute and facilitate the installation of 50 units x 1000 litre water tanks which will be installed in villages. This will improve availability and access to clean water to cater to hygiene needs of approximately 4,000 people daily.

Health:

The UNICEF health response is planned jointly with local government, targeting 341,560 people including 4,237 pregnant women, 4,032 infants and 16,928 children between the ages of 1-5 years in the most impacted district of South 24 Parganas. UNICEF will provide outpatient services to the areas that is covered by 70 health sub centres¹.

¹ Health sub-center is a government primary health care system which is operated by the Auxiliary Nurse Midwife (ANM) who are community volunteers with basic health care training.

The UNICEF health response is targeting 341,560 people in the three most impacted blocks of the south 24 Parganas district with outpatient services.

It will be partially supported by the government that will provide medical supplies for the boat clinics, the cost hiring the boat, paying the daily allowance to the medical professionals will be borne by UNICEF will in West Bengal Doctor's Forum (WBDF), a medical professional led CSO, to organize boat clinics and medical camps in the areas affected by the cyclone in riverine blocks of Gosaba, Patharpratima and Namkhana of South 24 Parganas district. The following activities are planned for a period of six months:

1. Medical Team building and training activities: A pool of medics and nursing professionals from West Bengal Doctor's Forum (WBDF) and district team will be selected and oriented on the following areas:

- Antenatal and postnatal care: Conducting bedside clinics, measurement of vital, per abdominal examination, point of care investigation and need based referral.
- Management of childhood illnesses: assessment of sick children, setting up of ideal Zinc-ORS corner, indication and preparation of pre-referral dose of antibiotics and nebulization
- Counselling: Home based Kangaroo Mother Care, Exclusive breast feeding, timely initiation of complementary feeding, monitoring of growth chart and timely referral of the defaulters. Other areas of Counselling will be Family planning and choice of contraceptives, vaccine hesitancy and fear of Adverse events following immunisation.

2. Operation of Boat clinic: Monthly, 34 boat clinics will be planned in the cyclone affected areas in the riverine Gram Panchayats of Gosaba and Pathar Pratima block which is expected to reach an estimated 4,237 pregnant women and 4,032 infants

3. Execution of Medical camp: At Bagdanga-Mousuni Public Health Centres, currently no medical officer is posted, therefore, bi-weekly medical camps will be organized to reach an estimated 432 pregnant women and 314 infants in the island.

Social mobilizations activities: To support the WASH (in 40 intervention Gram Panchayats/village administration and health interventions, particularly on promoting positive change behaviours and practices for use of hygiene and dignity kits, menstrual hygiene, household water filters, chlorine tablets, installation of community water tanks and portable water chlorinators and antenatal care - postnatal care. It also includes information for demand uptake on availability, access and use of boat clinics and the demonstration sites for WASH and Health. Community level activations will also include rallies, Street dramas, mobile hoardings and banners, wall writing along with posterings, distribution of clear and concise messages through group and interpersonal communication.

Leadership and Coordination

- ✓ UNICEF is actively engaged with all departments of the state government concerned with UNICEF linked sectors to ensure that any needs coming from the communities are communicated and appropriate solutions reach the ground through the departments of the government. UNICEF's response is coordinated with Government and will be finalised once there is clarity on resources and scope.
- ✓ UNICEF is leading the IAG coordination along with CASA, the secretariat of IAG coordination with 60 plus local CSOs, the CSOs become the voice of the most vulnerable in these communities and help them get relief / assistance from the world outside (both government and other agencies).
- ✓ The IAG, Sphere India and UNICEF have jointly published the JRNA report.
- ✓ UNICEF has also initiated partnerships with local NGOs for a long-term response plan with a focus on Health and WASH needs.

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