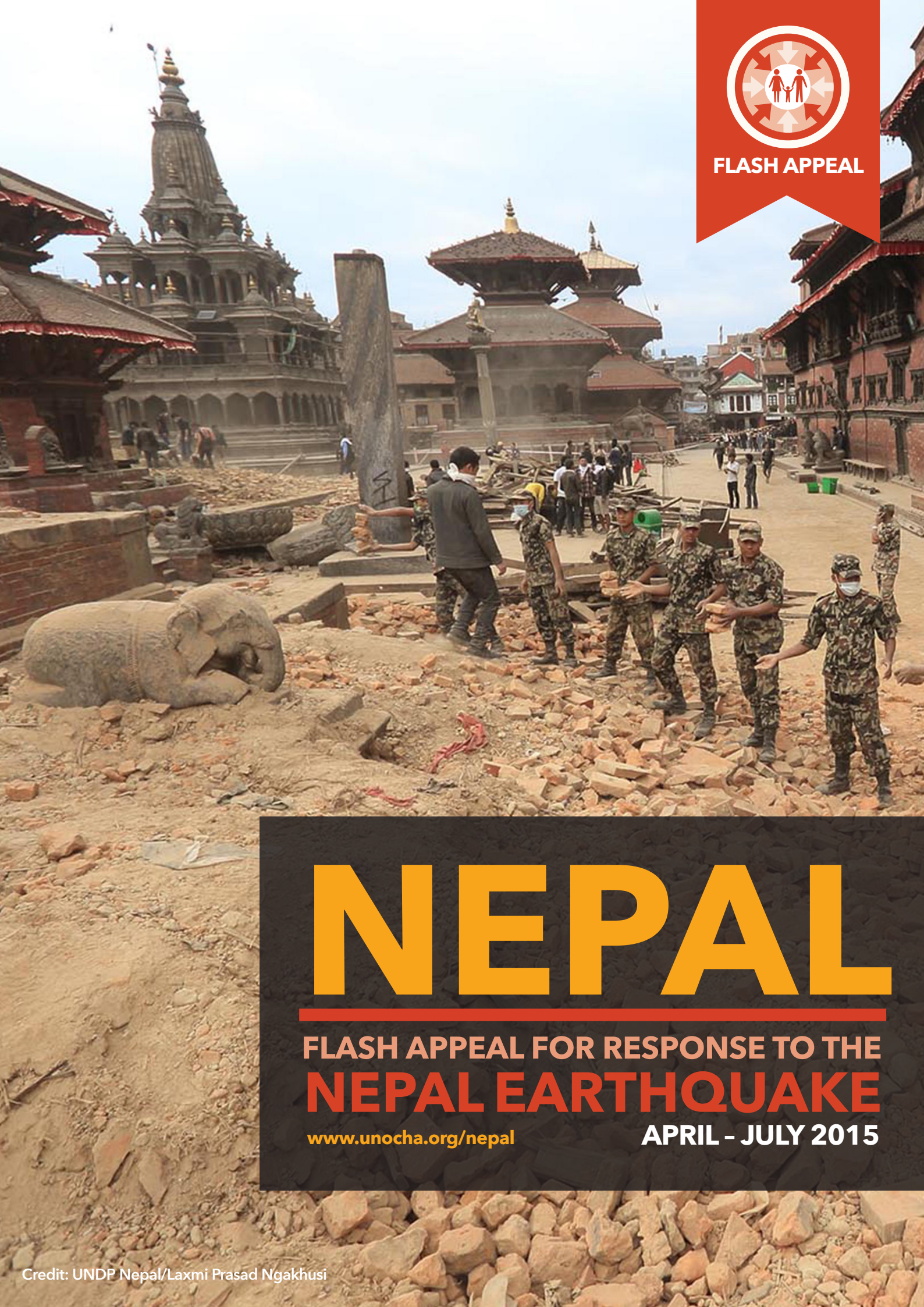




FLASH APPEAL



NEPAL

FLASH APPEAL FOR RESPONSE TO THE
NEPAL EARTHQUAKE

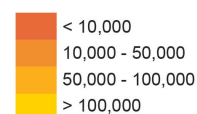
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APRIL - JULY 2015

NEPAL EARTHQUAKE HUMANITARIAN SNAPSHOT

On 25 April, a 7.8 magnitude earthquake struck Nepal, with the epicenter in Lamjung District (north-west) of Kathmandu. Dozens of aftershocks followed, including a 6.7 magnitude earthquake on 26 April.

Estimated number of people suffering housing damage



Risk assessment based on housing data and population from the 2011 Census and MMI estimates from the USGS



Map Sources: UNCS, Nepal Survey Department, USGS
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Map created on 25 April, 2015



NEPAL FLASH APPEAL

\$415 million

required to reach over 8 million people with life-saving assistance and protection in the next three months

This document is produced by the United Nations Office for the Coordination of Humanitarian Affairs in collaboration with the Office of the Humanitarian Coordinator and humanitarian partners. It covers the period from 25 April to 31 July 2015 and is issued on 29 April 2015.

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NEPAL: AN OVERVIEW OF THE DISASTER

A 7.8 magnitude earthquake struck Nepal on 25 April at 11:56 local time creating large scale damage and many casualties. The epicenter was located 81 km northwest of the Nepali capital Kathmandu in Lamjung District at a depth of 15 km. The earthquake has caused a number of landslides and avalanches.

Strong aftershocks, including a 6.7 magnitude quake on 26 April, continue to threaten the lives of thousands of people and to further damage buildings and infrastructure. Many people are afraid and have slept outside for several consecutive nights, in spite of the falling rain.

According to initial estimations and based on the latest earthquake intensity mapping, over 8 million people are affected in 39 of Nepal's 75 districts. Over 2 million people live in the 11 most critically hit districts.¹

According to the government and as of 29 April, the earthquake caused 5,006 deaths, most of them in Bhaktapur, Kathmandu and Lalitpur. Over 10,194 people have been injured. These figures are expected to increase as more areas are reached and information becomes available.

The Central and Western Region, including the Kathmandu Valley districts, are the worst affected. The full impact of the earthquake in mountainous and hilly areas is still being determined. Dhading, Gorkha, Rasuwa, Sindhupalchowk, Kavre, Nuwakot, Dolakha, Kathmandu, Lalitpur, Bhaktapur and Ramechhap are the most affected. In these areas, many families live in fragile and vulnerable homes with outer walls and/or foundations constructed from poor quality materials.

Displacement in urban and rural areas has an immense impact on daily life. Afraid of returning to their homes, many people have stayed in makeshift tents along road sides or in friends and neighbours' gardens in Kathmandu. Displacement estimates have not been verified but secondary data analysis and earthquake intensity mapping suggest that over 600,000 houses have been damaged and that 2.8 million people have been displaced. The government has identified 16 open spaces in the Kathmandu Valley for the establishment of displacement camps. Cramped situations and a lack of law and order may exacerbate the existing risks and vulnerabilities faced in particular by women and girls.

Strong tremors have damaged infrastructure, including bridges and access roads. Removal of debris will enable access to affected areas so that

search and rescue activities can continue and relief supplies can be delivered.

The government estimates that over 70,000 houses have been destroyed. Over 3,000 schools are located in the 11 most severely affected districts. Up to 90 per cent of health facilities in rural areas have been damaged. Hospitals in district capitals, including Kathmandu, are overcrowded and lack medical supplies and capacity. Many temples and heritage sites have collapsed. The more modern structures have withstood the severity of the quakes.

Among the over 8 million affected people are approximately 126,000 pregnant women, 21,000 of whom will need obstetric care in the coming three months. Additionally, approximately 40,000 women are at immediate risk of sexual and gender based violence. National telecommunications systems and services have been severely damaged throughout the affected area.

Search and rescue teams have assessed collapsed buildings and have saved at least 14 people from the rubble. Teams from over 17 countries have brought people to safety and provided first aid. **Food insecurity is rising.** The Food Security Cluster estimates that 3.5 million people are in need of food assistance. Of these, 750,000 people live near the epicentre in poor quality housing. Impact on agriculture-based livelihoods and on food security is expected to be extremely high. The next planting season starts in June, by which time farmers have to transplant rice to avoid further food insecurity. This is aggravated by the large loss of livestock. Malnutrition rates in certain areas of Nepal are among the highest in the world.

Nepal relies on trucking and wells for fresh water. In the aftermath of the quakes transport of water has been interrupted and many wells have been damaged, leading to fears of water borne diseases.

Fuel is running low in many areas. Cars and trucks are lining up at functioning gas stations. Fuel is urgently needed to pump ground water and to maintain services at hospitals and other critical facilities where power outages are frequent. Power is limited throughout the affected area, with most houses and facilities relying on generators.

It is of vital importance to engage with and serve the affected communities. Affected people need to be kept informed about available services and aid and that gender equality and the diversity of affected communities is addressed when engaging the community. Without access to reliable timely, accurate information survivors are unable to make the choices necessary to develop their own survival strategies.

¹ According to estimates relying on data from the 2011 census and other government figures, around 50 per cent of the total population of earthquake-affected districts has been affected.

RESPONSE CONSIDERATIONS

The government is leading the response through the the National Emergency Operations Centre (NEOC) with additional coordination and liaison set up at the airport with the Reception and Departure Centre (RDC), with the Multinational Military Coordination Centre (MNMCC) and at the UN building in Kathmandu. Additional coordination hubs will be required as access to the worst affected areas outside the capital improves. The Humanitarian Country Team has worked closely with relevant authorities in prioritizing response activities.

The humanitarian response will be based on the following considerations: Access to the country and to affected populations is a challenge. Kathmandu International Airport has limited capacity to handle incoming relief flights. Many relief flights have been diverted to neighbouring countries, delaying the arrival of incoming relief, search, rescue and medical teams. The World Food Programme (WFP) has set up a Humanitarian Staging Area to ease the flow of life-saving relief commodities. Airlifts are required to access and deliver aid to rural areas.

Building on pre-existing support programmes, cash will be used as a critical input for food security, livelihoods and other sectors. This will ensure that local markets are not disrupted and most efficient support is provided.

Meteorologists have forecast rain and thunder storms for ten days following the quakes potentially leading to landslides. The monsoon season typically lasts from June to September. The early rain expected

is likely to further weaken the resilience of affected people, and increase the risk of localised flooding and water borne diseases making a timely response ever more urgent.

National and international relief efforts are already underway: to support the national first line of response, member states have generously provided critical personnel, logistical support, funding and in-kind relief. On April 28, Under-Secretary-General and Emergency Relief Coordinator announced an allocation of USD 15 million from the Central Emergencies Response Fund (CERF) to support critical needs.

To scale up these efforts, this Flash Appeal calls for US\$415 million to respond to the most urgent humanitarian needs for the next three months. The level of priority has been based on initial results of assessments, on earthquake intensity mapping and on secondary data analysis. The Nepal Humanitarian Country Team has undertaken a rigorous assessment of operational capacity to deliver against assessed and evolving needs. The Flash Appeal covers all vulnerable groups, including internally displaced persons (IDPs), host communities, ethnic and indigenous groups and other affected people. The Appeal prioritizes life-saving and protection programmes. The targets presented in this document are realistic and are based on partners' assessments and calculations as to what they can actually deliver. Over the next week partners will develop individual projects in support of cluster activities and requirements identified in this Appeal. In four to six weeks from the launch, the Appeal will be revised to reflect the needs arising from detailed assessments.

PEOPLE TARGETED



FUNDS NEEDED

Cluster	Requirements (US\$)
Food Security	128,000,000
Health	75,000,000
Shelter, Non-food items (NFIs) and	50,000,000
Camp Coordination and Camp Management (CCCM)	5,000,000
Water, Sanitation and Hygiene (WASH)	63,000,000
Protection	11,300,000
Nutrition	10,000,000
Education	20,000,000
Early Recovery	16,000,000
Emergency Communications and Technology	2,500,000
Logistics	31,700,000
Coordination	2,694,000
Grand Total	415,194,000

Compiled by OCHA on the basis of information provided by appealing organizations

MAIN HUMANITARIAN NEEDS

Existing information and field observations suggest that the most immediate threats to life are:

Access to safe drinking water and sanitation and hygiene



Safe water, temporary latrines and bathing spaces are urgently needed for the most vulnerable displaced populations and for institutional facilities.

Promotion of hygiene in the wider affected population and limited collection of solid waste in camps for displaced populations is critical to reduce the risk of waterborne disease outbreaks, especially as cholera is endemic.

Food Security



Covering basic food and nutrition needs and stemming further deterioration of nutrition status among vulnerable people and communities.

Ensuring time-critical inputs to re-establish livelihood support for 20,000 households in the nine most food insecure districts.

Emergency shelter and essential items



Damage and destruction of homes has displaced an estimated 2.8 million people. These people urgently need shelter and essential relief items.

Access to medical care



With more than 5,000 people killed and more than 10,000 injured, support for mass casualty management is urgently needed in addition to re-establishment of disrupted life-saving health services for women and children.

Protection of the most vulnerable populations



Protection systems and key inputs are needed to prevent and respond to violence and gender-based violence against children and women, particularly among displaced populations. This includes providing learning activities for children in safe spaces and providing psychosocial support.

STRATEGIC OBJECTIVES

The humanitarian response will be guided by the following strategic objectives and actions:

1 Increase in mortality and morbidity and outbreaks of communicable diseases are prevented through immediate access to basic water, sanitation, hygiene, and health services.

- Mass casualty management and life-saving health care and support referral mechanisms in affected districts are sustained and re-established.
- Vulnerable displaced populations and institutional facilities are provided with safe water, temporary latrines and limited collection of solid waste.
- The affected population has an understanding of essential hygiene practices which reduce the risk of waterborne disease outbreaks.

2 Immediate food needs of earthquake affected populations in worst-affected districts are met and nutritional status of the most vulnerable populations is prevented from deteriorating.

- Affected populations in the 15 worst affected districts receive critical food support through direct food aid, cash or voucher programmes and nutrition programmes (therapeutic, preventative and supplementary).
- Children under-five and pregnant and lactating mothers among displaced populations are reached with nutrition programmes (therapeutic, preventative and supplementary).
- Populations in the nine worst affected districts receive livelihood support to re-establish livestock and prepare for the June-July planting season.

3 Families whose homes have been destroyed or damaged, including those displaced, attain basic, protective shelter solutions.

- Emergency life-saving shelter needs of the most vulnerable populations are covered through a mix of emergency supplies and cash support.
- Durable shelter and settlement solutions for affected populations are initiated, including support to ensure safe housing checks and increased knowledge of safe building standards among affected populations.

4 Strengthened protection of the most vulnerable populations, especially children and women, from violence and gender-based violence

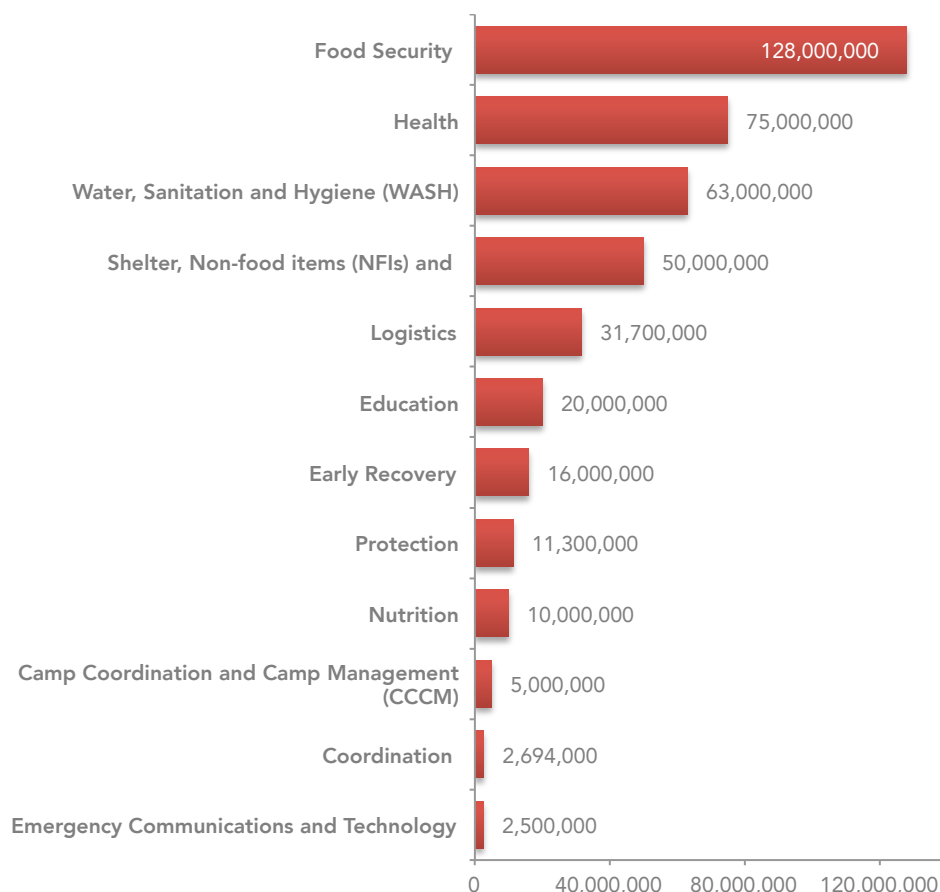
- Support to protection systems and key inputs are provided to prevent and respond to violence and gender-based violence against children and women, particularly among displaced populations.
- Learning activities are provided for school-aged children in safe spaces.

5 Logistics, access, telecommunications and local coordination capacity are strengthened to support effective access and response in affected areas

- An inter-agency common service is established so that affected people have access to information and are able to provide feedback to ensure a more effective humanitarian response.

PRIORITY ACTIONS AND REQUIREMENTS

FINANCIAL REQUIREMENTS PER CLUSTER (US\$ million)



\$415 million
total requirements

Health

Contact information Dr.Edwin Salvador (salvadore@who.int)

Hospitals in Ramechap, Nuwakot and Sindhulipalchowk are reported to be damaged. Hospital capacity has been overwhelmed with no intensive care unit (ICU) beds available in hub hospitals. People are being treated on the roads. Managing dead bodies has been challenging and surgical facilities are overwhelmed. Many hospitals near Kathmandu have reportedly run out of medicines. This does not bode well for the situation in more rural areas.

Post-earthquake diseases are concerning. Diarrhoea is already an issue in the Kathmandu Valley.

There is a need for medical supplies and capacity including surgeons, orthopaedics, paramedics, and logistics support. Drugs and consumables are needed immediately.

\$75 million
required to reach
4.2 million people including
1.7 million children

Priority Actions

- 1: Support mass-casualty management in coordinating hub-hospitals in Kathmandu valley; eight highly affected districts identified by the Ministry of Health and Population (MOHP), including provision of trauma kits, drugs, medical and surgical supplies and ambulance services.
- 2: Provide integrated primary health care (PHC) services, including mental health care.
- 3: Provide life-saving maternal, newborn and child health, including antenatal, delivery and postnatal care for mothers; newborn care; routine immunization to prevent outbreak of vaccine preventable diseases; screening and treatment of illnesses in children; and prevention and treatment of HIV, through health facilities, outreach and mobile services, all accompanied by social mobilization activities.
- 4: Medically evacuate the most critically injured who cannot receive effective trauma treatment in country.
- 5: Provide life-saving reproductive health care and services including Mobile RH medical camps, support to maternity wards in health facilities.
- 6: Provide health care to migrants and third-country nationals.

Water, Sanitation and Hygiene (WASH)

Contact Information: Antti Rautavaara (amrautavaara@unicef.org)

Based on initial available information, an estimated 4.2 million people are urgently in need of water, sanitation and hygiene support. The cluster seeks to cover 20 per cent of these needs with this appeal, to assist approximately 840,000 people.

Government and humanitarian agencies have started water trucking, water storage and distribution for persons whose houses have been damaged or completely destroyed. The installation of temporary toilets at locations where people are gathering has also commenced. Similar support is in progress for health care centres, where thousands of people wounded in the earthquake are taking temporary shelter.

\$63 million
required to reach more than
4.2 million people

Priority Actions

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_12082

