



After the Tragedy in the Indian Ocean:

A time to remember, reflect and recommit.

December 2004 through October 2005

Overview

The world has witnessed a seemingly endless stream of recent disasters – including Hurricane Katrina and the earthquake in Pakistan – but the December 2004 tsunami was an unprecedented tragedy. While the day began like any other for coastal residents of the affected countries, it ended with devastation that stunned even seasoned disaster responders. More than 250,000 people were killed without warning and millions of others lost loved ones and all their belongings.

Recovering from a disaster of this magnitude will take years, as people struggle to cope with both physical and emotional losses. That struggle is exacerbated by the extreme poverty that prevailed in many coastal communities before the tsunami struck. At CARE, we are committed to helping these vulnerable communities build back stronger than they were when December 26 dawned.

CARE sees how far communities have come in less than one year. But we recognize how much remains to be done – and we ask the public and our generous donors to do the same. The people whose lives were ravaged by the tsunami need and deserve our continued attention, support and commitment. That is why CARE has pledged to remain in affected areas for at least five years.

We are proud of early accomplishments achieved in partnership with tsunami-struck communities in the 10 months following the disaster.

- Our staff was **on the ground immediately** following the disaster, within 24 hours in most cases.
- In Sri Lanka, we worked with communities to build **quality transitional shelters** that families were able to move into within one month. In total, we constructed more than 2,000 temporary shelters across the region.
- In Thailand, we built **permanent houses** that were completed by April.
- In India, we trained more than 1,000 community members to provide **trauma counseling** to tsunami survivors.
- In Somalia, we provided 491 tons of food to some 5,200 families, who represent about 70 percent of affected households.

- In Indonesia, more than 350,000 people gained access to clean water through CARE's distribution of a safe water solution.
- Throughout the region, we helped more than 12,000 families earn income again through provision of boats and other equipment, grants and training to restart small businesses and cashfor-work programs to clear land and build roads.

Today CARE is assisting more than 600,000 survivors. In hardest-hit areas, like Aceh, Indonesia, people continue to rely on donated food and water for mere survival. In less affected areas, CARE has started building permanent houses and provided training and equipment for people to resume fishing or find other ways of earning an income again. Some 1,500 permanent homes are in various phases of construction, and we plan to build at least 10,000 homes across the affected area over the next several years.

In all countries, we reach the most vulnerable and under-served populations. In Thailand, we advocate for the rights of unrecognized minority groups such as the Moken. In Sri Lanka, we are one of the only agencies with access to areas controlled by the militant Liberation Tigers of Tamil Eelam (LTTE). In Indonesia, we are one of the leading agencies assisting people living on the island of Simeulue.

Below is a summary by country of our recovery progress and future plans.

India

The tsunami battered the southeast coast of India, killing more than 10,000 people and ravaging the lives of at least 2.5 million survivors. CARE tapped into our more than 50 years of experience in India to **create four handbooks to guide humanitarian agencies** in ensuring community participation in the recovery process. These handbooks outline the approach CARE is using to help some 100,000 people in the states of Andhra Pradesh and Tamil Nadu and in the Andaman and Nicobar Islands.

In each location, CARE is reaching the most socially and economically marginalized communities, including households headed by women and lower caste groups. Our response addresses the



variety of needs during recovery: shelter, income, clean water and trauma counseling. We have improved access to clean water and sanitation systems for some 20,000 families by repairing or constructing latrines and showers, desalinating wells, installing pumps and new water systems, and forming community committees to manage these improvements. We built more than 500 transitional shelters and have started to build more than 2,000 permanent disaster-resistant homes with amenities like electricity, parks, health clinics, schools and community centers.

However, true recovery involves more than houses or jobs. So CARE undertook a unique partnership with India's National Institute for Mental Health and Neurological Sciences. Together, we carried out an extensive training program that equipped 1,200 people - including teachers, village health workers and other community members with the skills to provide trauma counseling. We will soon develop community support groups and life skills education classes to expand this critical

Speaking about the pace of the tsunami recovery, Eric Schwartz, former U.S. President Bill Clinton's deputy United Nations special envoy for tsunami recovery said, "It's hard to say to somebody, 'be patient,' but I think it's better to get it right than to get it fast. Building back better does not mean building back faster and it's a tremendous challenge. I look at some of these housing sites in areas far away from the coast and I think that in 10 years, are these going to be communities or are these going to be abandoned houses? The answer to that question I am firmly convinced is going to be a function of how deliberate the planning effort is in terms of identifying beneficiaries who want to be in those places, creating services ... having confidence the people who are there can get jobs."

– excerpted from an article titled "Don't Rush Tsunami Rebuilding, UN Envoy Cautions" that appeared on alertnet.org(http://www.alertnet.org/thenews/newsdesk/COL186548.htm).

component of recovery. Other components of CARE's holistic recovery process include training in ecological restoration and disaster preparedness.

After 500 poor-quality temporary shelters caught fire in Tamil Nadu in June, CARE organized a meeting of aid agencies to address the issue of standards. As a result, a vulnerability assessment was conducted and shared among the agencies. CARE is part of a steering committee to raise awareness of the internationally-accepted Sphere standards¹ for emergency response, and has organized training for senior government staff in Tamil Nadu.

As of October 2005, CARE had spent \$4.6 million on our tsunami response activities in India. We plan to spend a total of \$9 million by the end of calendar year 2005.

Indonesia

The coastline of Indonesia was closest to the epicenter of the earthquake that triggered the tsunami. Of the more than 250,000 people killed, more than half were in Indonesia. Working there since 1967, CARE currently is assisting some 350,000 survivors in Banda Aceh and Aceh Besar, and on the island of Simeulue, which was struck by a second earthquake in March. We have distributed more than 1 million bottles of a solution to purify water for hundreds of thousands of Indonesians. We have also distributed some 700,000 one-month rations of food. By cleaning, repairing and drilling wells, building latrines and delivering clean water, we have improved living conditions for more than 100,000 people. We have also provided more than

Dennis O'Brien, CARE's director in Indonesia, reflects on the need for a five-year recovery period:

"Five years to rebuild communities does seem like a long time. But in fact it's not. It takes a long time to recover. If one can imagine the utter devastation, losing everything, losing your house, your means of livelihood, not having a bank account, and having to restart - it's not a matter of a month or two, or six months, or even a year. It is going to take five years we believe for the majority of people affected by the tsunami to recover, to get back on their feet, to be in a situation where they're strong enough to resist another shock in the future. CARE is taking that long-term

We are first and foremost helping people recover from the immediate disaster, so we continue to ensure that health services and clean water and food are available. And at the same time we're working carefully with communities and the government to ensure that the



livelihood strategies of people are being reestablished, and this is going to take time. All of these things cannot happen at once. So a certain amount of scheduling and planning has to take place. And because of that, it is going to take several years. I would also ask you to put yourself in the situation of the people here, and imagine if this had happened in Atlanta or New York or Montreal, how quickly would you be able to recover?

Would everything be back to normal in six months to a year?

I'm humbled by the fact that CARE has the responsibility and the opportunity to provide help. This is the biggest thing we've ever had to cope with. But I'm confident that we can, and I believe we've made very good progress since December 26. Every week, every month, we're making more progress, so I'm confident CARE is up to the challenge."

60,000 days of paid employment to support more than 1,500 families. In Lambada Lhok, for example, 80 villagers have cleared debris from the harbor so that fishing boats are now able to pass.

CARE is also helping communities rehabilitate mangroves destroyed by the tsunami, restoring critical habitat for juvenile fish and the basis for fishing livelihoods. We will build several thousand homes in Banda Aceh, Aceh Besar and Simeulue. CARE has invested significant time and effort to meet with affected communities to plan and review the designs to ensure that they are fully satisfied with where they will live. We are also rebuilding four community health centers and improving health clinics in 25 villages. CARE continues to track diarrhea cases and provide treatment in 45 locations, covering 45,000 displaced people. Pregnant women are receiving antenatal care and family planning services are being provided. Future plans in our five-year strategy focus on agricultural training, transitional and permanent shelter construction, disaster education, psychological support systems and health services.

As of October 2005, CARE had spent \$16.2 million assisting tsunami survivors in Indonesia. By the end of December 2005, we plan to spend \$22 million.

Somalia

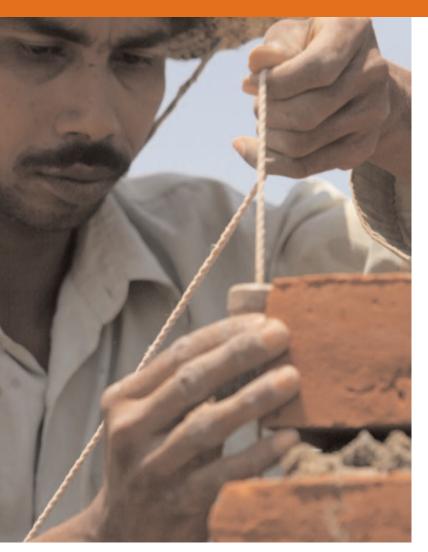
The tsunami extended as far west as Africa's eastern coast, including Somalia, where some 300 people died and 44,000 people were affected. Despite the serious toll here, most of the world's attention was on Asia. With 25 years of experience working in Somalia, we knew the poverty-stricken communities of coastal Puntland could not rebound from this disaster on their own. CARE is working with six local organizations to meet the needs of approximately 32,000 people. We distributed 491 tons of food to these families, who represent about 70 percent of those affected.

CARE initially planned to provide boats, engines, nets and ropes to help some 2,300 fishermen get back out to sea. We soon realized we were the only agency present with the



reach, experience and resources to assist on the scale that was required. We are now expanding our livelihoods program to support more than 5,700 households - at least 75 percent of the affected population. Activities will include forming and/or strengthening fishermen's associations, and conducting training to preserve marine resources, promote the consumption of local fish and improve the processing of fish products. We also will build 200 houses in two of the worst-hit villages. Our plans include spaces for roads, schools, fish markets, health facilities and





community centers.

The tsunami destroyed nearly all of the shallow wells in the coastal area, resulting in an acute shortage of drinking water. In response, CARE delivered water to more than 3,300 families in 45 communities. As a long-term solution, we are drilling deep boreholes to reach fresh, unsalinated water and building private latrines.

CARE spent \$1.4 million (as of October 2005) to deliver aid to tsunami-affected communities in Somalia. We plan to spend \$5.1 million for the tsunami response through December 2005.

Sri Lanka

The tsunami devastated Sri Lanka, killing at least 30,000 people and displacing more than half a million people. CARE's response began just moments after the first waves came ashore when our staff - acting as community members and neighbors - began rushing to help. Because CARE

is a name they have trusted since 1956, survivors turned to our staff in their hour of most urgent need.

We distributed food and essential relief items to 32,000 families in the immediate aftermath. Today, our recovery efforts are focused on the districts of Ampara, Batticaloa, Galle, Jaffna, Hambantota, Mullaitivu and Trincomalee, where we are helping some 160,000 people put their lives back together. With the involvement of affected and neighboring communities, we built more than 1,500 high-quality transitional shelters - some of which were ready to be lived in one month after the tsunami. These included water and sanitation facilities for some 7,700 people. Overall, our efforts to provide clean water and proper latrines for 24,000 families have helped prevent disease and keep people healthy.

With our continued support through training, tools and equipment, and cash-for-work programs, some 2,000 families – including farmers, fishermen and small traders - have started to earn an income again. In Hambantota, the government asked CARE to rebuild a destroyed market area and assist 49 merchants with building permanent stalls for their goods. After building the stalls, CARE will help the merchants and others who have been affected improve their income through training in business management, marketing and sales.

Other long-term plans include the construction of thousands of permanent homes; some 350 houses are in various stages of construction and nearly 3,000 building sites have been confirmed. In all cases, CARE has insisted on extensive and intensive consultations with communities so they are hands-on partners in the rebuilding process. Community members have made decisions about the size and placement of doors and windows after surveying model homes, and CARE has helped neighbors who shared child care responsibilities remain neighbors in their new communities.

As of October 2005, CARE had spent \$8.1 million assisting tsunami-affected communities in Sri Lanka. By the end of the calendar year, we expect to spend \$13.5 million on our recovery efforts in the country.

Thailand

For much of the world, the first shocking images of the tsunami's terrible fury came from Thailand. The waves roared ashore on the nation's west coast, an area frequented by tourists. When they receded, at least 5,000 people were dead and more than 35,000 people across three provinces (Phang Nga, Krabie and Ranong) were severely affected. CARE has worked in Thailand since 1979, and our office there is a hybrid, being both a national Thai organization and a member of the CARE International confederation. This unique combination of local and global perspectives helped CARE identify and reach the most vulnerable groups in Thailand, particularly migrant workers and the moken (sea gypsies).

In the immediate aftermath, some 2,400 survivors received food and basic relief items, and 760 displaced people were provided temporary shelter. CARE has been working with people in 50 villages and will soon increase that to 130. Through a revolving loan system, we have helped more than 2,300 families – including fishermen and women, small traders and farmers – start to earn an income again. Loans range from \$500 to \$1,800 and are managed by village committees trained by CARE.

We plan to establish an additional 87 funds over the next several months to benefit another 4,100 families. In Krabie province, several smallboat operators, who had taken villagers around the islands and whose boats were damaged by the

"This House is Going to be a Home"

Kumara lost his home and family business in the tsunami. CARE is in the process of constructing a new home for his family in a community in southern Sri Lanka that will include parks, public buildings and shops. Kumara, 46, recalls what it was like to experience the deadly tsunami on December 26 and his impressions of the recovery progress.

"That day we opened the shop, that day was a holiday. We were watching the TV. One of my younger sons says, 'Mother, there's a big noise, it's going to collapse.' From the seaside we heard a big noise, we'd never heard a sound like that. It was very huge, you cannot imagine that time. It was a very bad feeling, very sad. We saw that people were running. That time, we had no hope. Then suddenly the CARE people came and they give us new hope. They show



us, 'This is the house we're going to build.' They give us the plan, we saw the plan. I told my wife, 'Look, we're going to get the house.' And she says, 'Nice, very nice,' and we built our hopes further, and we thought, 'We have a life.' I'm very happy about this house. Very good construction."

Asked if he thought he would have a house by now, Kumara

responds, "No, it may take a long time to build this house, but we can wait ... I like this plan ... the structure is very strong. We are not in a hurry to get a bad house, cheap house. We need a good house, a quality house. This house is going to be a home, a good home. Me and my three kids and my wife, we love this house."

tsunami, used the loans to repair their vessels and start earning money again. Others have used the loans to restock fish farms or make repairs to their damaged homes. We are also working with 30 villages to train women in income-generating skills that will permit them to support themselves.

In Krabie, a collaborative effort among five villages to clean up local canals and the surrounding bay has resulted in the collection of 70 tons of garbage and has revived the **coastline.** CARE's next step is to help communities replant mangroves, which serve as an important part of the ecosystem and act as a natural buffer from the sea.

CARE has begun constructing two community emergency centers for disaster preparedness training and where future emergency responses will be coordinated. In 10 villages, we have organized groups of young people to share their fears and experiences and get involved in rebuilding their communities.

CARE has spent \$4 million (as of October 2005) to deliver aid to tsunami-affected communities in Thailand. We plan to spend \$5.1 million for tsunami response through December 2005.

Different Ways of Addressing Psychological Trauma

In some of the affected countries, Western forms of counseling are not widely practiced or culturally accepted. So CARE has found alternative ways to help people overcome the trauma caused by the tsunami. In Indonesia, for example, we have organized community cooking and children's activities as a means of having fun and being productive. Some 700 men and women in temporary living centers participated in a day of cooking and shared a communal meal, and another 500 women and girls took part in a series of cooking and baking classes. CARE also helped start a youth volleyball league by repairing a court, providing equipment and organizing 50 youth into teams.

We have taken a similar approach in Thailand, where we have helped 670 young people form support groups. This will give them a comfortable space to share their experiences and help them identify ways to support the recovery of their communities. Prior to the tsunami, many youth earned money working in the tourism industry and are worried about finding new sources of income. CARE is helping them choose skills they would like to learn and research potential markets for new products. At their request, CARE also is planning a conference to be held in 2006 enabling young people from different regions to come together to exchange ideas and experiences.

In India, CARE has successfully trained 1,200 people to counsel and support traumatized survivors. Those



trained include teachers, who learn how to be patient with their students as they settle back into the school routine and how to recognize signs of depression. Sabamathy, a teacher trained by CARE, came up with new games that include all students and leave no time for brooding.

One of Sabamathy's young students, Chinnaraja, comes from a tribal family that had been resettled by the government close to the sea. Then the tsunami came, claiming their modest home, their few belongings and many of their neighbors. Chinneraja is glad to still have his best friend and his teacher, Sabamathy. "It is comforting to know that she cares for us so much. Because of her, my tribe has let the children come back to school where we laugh like we used to." Sabamathy recently took the children to play on the beach, where they overcame their fear of the sea and built houses in the sand together.

The Big Questions

1. What is CARE doing to improve coordination?

Coordination was difficult in the beginning because of the magnitude of the disaster and communication challenges, but the situation has improved. In all of the affected countries, CARE is involved in groups that are coordinating efforts, preventing duplication and striving to deliver aid as efficiently as possible. In India, we produced four handbooks that have been shared with other humanitarian organizations to ensure community participation in the recovery process. In Indonesia, we co-founded the inter-agency working group. Another example is in a Sri Lankan village, where CARE is working with Oxfam and World Vision to meet the needs of tsunami survivors. CARE and World Vision collaborated on building shelter units, while Oxfam filled the gaps in water and sanitation provision.

2. Why are people still in tents and temporary shelters?

In each country there are complex factors affecting the pace of reconstruction. In Indonesia, for example, there is not a sufficient supply of legally-sourced timber. In Sri Lanka, CARE waited for the government-prepared beneficiary lists so the people displaced by the tsunami could be involved in the planning of their new homes. In every country there are challenges related to skilled labor, coastal buffer zones and proof of land/home ownership. We are working with communities to build what they need as fast as we can.

3. How much money has CARE spent?

Early on, we knew it would take at least five years for the region to recover. Helping people rebuild their lives isn't just a matter of spending money, but of talking to communities about their needs, getting the land allocated for houses, finding skilled labor for reconstruction, procuring construction materials and other prerequisites. At the end of October, CARE had spent \$36 million on water, shelter, health, sanitation, nutrition and income-generation projects. CARE worldwide raised \$178 million to support tsunami survivors and we will spend at least \$50 million – more than a quarter of total funding – by the end of the first year of our five-year rebuilding effort.

4. Are the governments doing enough?

CARE has long-standing relationships with governments where we work and this has helped us be more effective in our response. As a result of this disaster, governments have worked to develop new early warning systems and responses to future emergencies. CARE supports the local and national governments as they try to move as fast as possible. There are many reasons for delays, but we all share credit for the progress and all bear responsibility for getting people in houses as quickly as possible.

5. What has CARE learned from the tsunami?

No matter how heroic the effort, emergency relief never goes exactly as planned. We have already begun analyzing our response to the tsunami and we will find ways to make our future efforts even more effective. One thing we have learned is the importance of addressing the psychological needs of people who have survived such a violent disaster. The victims' emotional well-being is critical to their recovery, as we are seeing not only in the tsunami-affected countries but also in Pakistan, where survivors from the October 2005 earthquake are exhibiting the same signs of emotional distress. CARE plans to strengthen our programming in this area. As another example, CARE is drawing on the learnings from our earlier post-disaster work in the Indian states of Orissa and Gujarat to select local organizations as partners in the reconstruction effort and to guide the design and spacing of houses.

Fishermen and Women are Grateful to CARE for Getting Back to Their Livelihoods

Ranong Province, Thailand – Standing on a fishing pier in his village of Baan Tayang in tsunami-struck southern Thailand, Abdula Lae-Sum states matter-offactly, "It was all destroyed in one day. If CARE hadn't helped, we would have nothing. CARE was the first organization to help our village, the only organization to give us anything."

Abdula, a young 53 years old, has been the secretary of his village's fishermen association for the past nine years. He has earned the affectionate nickname Bang Dol, which means "older person." Fortunately no one from the village died in the tsunami, which Abdula describes as a "huge wave, very quiet unlike a regular wave." Yet more than 100 members of his association lost their boats, nets and/or fish farms, which are the source of their daily income.

As Abdula explains, it was easier for the owners of the big fish farms to meet the government's criteria for emergency aid, so the smaller fishermen are dependent on organizations like CARE for assistance.

To date, CARE has provided up to \$750 each to 60 people in Baan Tayang to replace or make repairs to their fishing gear and homes.

Pagamas, 43, used the money she got from CARE to fix her boat and buy a new fishing net. Without

pausing from her work picking through a net to remove the debris and separate the fish, Pagamas acknowledges that if she and her husband, who is also a fisherman, had not received help from CARE, they would not have fished anymore.

"We would have to do something else, maybe work in the fields. I don't know what else we could do. Before, we used to earn as much as \$24 a day. Now it is less than \$5 and the price of gas [for the boat] has increased."

The timing of the tsunami has challenged the pace of recovery here, where the rainy season limits access to prime fishing spots between October and May.

Abdula notes, "Even when we got the funds from CARE, we couldn't start right away [with the repairs and replacement of equipment] because it was the monsoon season. And also people were too sad after the tragedy and also feared another tsunami."

Still, Abdula and Pagamas are resilient and even optimistic about the future.

"I'll be here for the rest of my life, and now we will be able to earn an income again," a grateful Abdula asserts.

Adds Pagamas, "With the help from CARE, my husband and I are able to earn enough to feed ourselves and are able to remain fishermen."





Summary of CARE's Tsunami Spending through October 2005

mergency Relief	\$8,327,075
ood & Supply Distribution	1,316,797
ealth	6,351,666
later & Sanitation	1,441,914
helter	1,731,857
ivelihoods	932,738
ommunity Micro-Projects/	
evolving Funds	4,197,329
ulti-Sector* (includes psycho-social)	10,524,875
ther	792,066
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^{*}Multi-sector projects include activities in several of the sectors listed above, none of which is predominant.

Conclusion

Much of what the tsunami took is irreplaceable. However, we know that through hard work and the generosity of donors, we can turn this tragedy into an opportunity. Together, we will rebuild safer homes, create better jobs and foster stronger communities. CARE is committed to doing this in a way that empowers people by putting the decision-making in their hands and making them the architects of their own futures. Instilling a much-needed sense of purpose is the first step toward restoring hope. This takes time. But CARE is committed to rebuilding right and to making sure that affected communities get the appropriate support and resources. We are grateful to the many donors who have entrusted CARE with their generous gifts to make lasting improvements in the lives of tsunami survivors. We look forward to keeping you updated on the progress of our five-year recovery commitment.

 $^{^{}m 1}$ The Sphere project, or the Humanitarian Charter and Minimum Standards in Disaster Response, was launched in 1997 by a group of humanitarian agencies. Sphere is based on two core beliefs: first, that all possible steps must be taken to alleviate human suffering arising out of calamity and conflict, and second, that those affected by disaster have a right to life with dignity and therefore a right to assistance. Sphere is three things: a handbook, a broad process of collaboration and an expression of commitment to quality and accountability. Please also see www.sphereproject.org

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