### Situation

At 12.12pm Wednesday 6th February, 2013 a 8.0 magnitude undersea earthquake occurred 33km West-Southwest of the Santa Cruz Islands and generated a destructive tsunami. At 12.23pm the SI Meteorological Service issued a tsunami warning for 5 provinces in Solomon Islands; Temotu, Malaita, Makira-Ulawa, Central and Guadalcanal. By 1.18pm the threat to the 5 Provinces had been assessed and for Guadalcanal and Central Provinces this was downgraded to watch status. The tsunami warning remained in effect for Temotu, Makira-Ulawa and Malaita Provinces until 5pm. Tsunami waves were experienced in Santa Cruz, Temotu Province. 91 aftershocks measuring larger than Magnitude 5 have occurred in the week following the initial event; including four larger than Magnitude 7.
Areas Affected
Coastal villages on Santa Cruz, Malo and Nibanga Noi (The Santa Cruz Islands)

Figure 1

Status (Updated Information in Red)

Geo Hazard Advisors
- Following the Geo Hazard Team’s visit to Nea village yesterday, they have now been deployed to other affected villages to collect geological data. These village visits include informing the community of what happened during and after the earthquake and assurances from the team that the ongoing seismic activity is normal following such an event. Members of the public are being provided with hazard specific awareness material.

Royal Solomon Islands Police Force
Security:
- The general security situation in Lata has improved and there are hopes that the situation will remain calm. Peace has been restored as a result of ongoing information sharing with affected people and the fact that relief distributions have now reached the most affected communities.
Health Sector

1. Update assessment

Cases of medical conditions for Venga and Baenga camp areas (total of 265 people) have been assessed and are tabulated below.

<table>
<thead>
<tr>
<th></th>
<th>ILI</th>
<th>AFR</th>
<th>Prolonged Fever</th>
<th>Chronic Diseases</th>
<th>STI</th>
<th>Mental Illness</th>
<th>Red Eye</th>
<th>Diarrhoea</th>
</tr>
</thead>
<tbody>
<tr>
<td># of cases</td>
<td>11</td>
<td>0</td>
<td>3</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3</td>
</tr>
</tbody>
</table>

- There is an increased amount of cases for several conditions. This could indicate that a larger health problem exists in the areas most directly affected by the tsunami on the West coast, however further analysis of the camp sites in that area is required.
- Pregnant women: 7
- Water and sanitation remain problematic. The majority of people (138 out of 265 surveyed) are still using open water sources.

Toileting and waste disposal within the Venga and Baenga sites is tabulated below:

<table>
<thead>
<tr>
<th>Toileting Location</th>
<th>Waste Disposal Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bush</td>
<td>Seaside</td>
</tr>
<tr>
<td># within camp</td>
<td>13</td>
</tr>
</tbody>
</table>

Food consumption within Venga and Baenga sites are tabulated below:

<table>
<thead>
<tr>
<th></th>
<th>Rice</th>
<th>Cassava/Taro</th>
<th>Banana</th>
<th>Other Vegetables</th>
<th>Fish</th>
</tr>
</thead>
<tbody>
<tr>
<td>Households consuming food item</td>
<td>33</td>
<td>11</td>
<td>7</td>
<td>11</td>
<td>1</td>
</tr>
</tbody>
</table>

Mental Health situation within Venga and Baenga camps are tabulated below:

<table>
<thead>
<tr>
<th></th>
<th>Slightly Affected</th>
<th>Moderately Affected</th>
<th>Greatly Affected</th>
<th>Severely Affected</th>
</tr>
</thead>
<tbody>
<tr>
<td># of individuals affected within camp</td>
<td>5</td>
<td>22</td>
<td>3</td>
<td>8</td>
</tr>
</tbody>
</table>

The priority is to assist those individuals most affected first, as they are in a negative state of mind as result of losing substantial material goods or the loss of someone close to them.
Risk Communication and Public Awareness

- SI Red Cross has been carrying out health education programmes within various camp sites. MHMS staff performing field surveys has also performed basic HP counselling. Health promotion staff are been deployed to boost this very important activity.

Vector Borne Diseases

- 2 confirmed cases of malaria reported on Feb 13.
- MHMS bed nets have arrived in Lata; 51 bales with 50 net each. These have not yet been distributed.
- Oxfam has been distributing nets as part of the relief supply effort. They have not yet fully distributed their nets to the camps as of February 15, 2013.

Case Management

- There are now 15 cases of trauma; including 3 confirmed fractures. Of these 3 fracture cases; 1 has been referred to the NRH for treatment. Dr. Aaron is coordinating the collection of baseline trauma and emergency data from Lata hospital for the 3 months prior to the tsunami.
- Emergency evacuation for a stroke patient was requested February 14, 2013. Evacuation of a post-natal mother with her 1 week old baby was requested February 15, 2013. These are both from Nengu camp.
- 1 Woman with pre-eclampsia is scheduled for referral to NRH February 16, 2013.

Health Facility Surveys

Dendu RHC:
- 1 nurse, 1 microscopist, 1 nurse aid.
- Uses general admission ward for all inpatients.
- No emergency/accident bed.
- Sinks do not work in any of the rooms. There is an aluminium tank however there is not enough water in it and it is not connected to the health facility.
- There is insufficient power generated from solar panels to meet the needs of the facility.
- There are no working toilets in this facility and there is not enough sanitizer in addition to lack of water.
- The facility does have adequate place to remove rubbish to.
- The roof and gutters of the facility are in very poor condition; there are no insect screens on the windows or doors.
- There is 1 short wave radio and cell phone available for communication; however the only available mode of transport is private vehicles.
- Information on medical supplies has been collected, but analysis of whether this is adequate or not is still to be determined. General supplies are not adequate within the RHC, however there is an option to secure supplies from other facilities.

Nea NAP:
- 1 nurse aid
- 4 beds for general admissions
- No emergency/accident bed
- There are no sinks in any of the rooms. There is an aluminium tank and the supply is connected to
building however there is insufficient water in the tank.
- There is insufficient power generated from solar panels to meet the needs of the facility.
- There is one working toilet at this facility that is refilled using a bucket. In addition, there is sanitizer available.
- The facility has adequate place to remove rubbish to.
- The condition of the facility is adequate; however there are no insect screens on the windows or doors.
- There are currently no methods of communication for this facility; the only mode of transport available is private vehicles.
- Information on medical supplies has been collected, but analysis of whether this is adequate or not is still to be determined. General supplies are not adequate within the NAP, and there is no current method in place to procure more supplies.

**Nutrition**

- Ongoing analysis of dietary intake was conducted which will determine the need for a micronutrient supplement for communities.
- The actual impacts on malnutrition will be reassessed in two weeks.

**Communications Report**

- The HF radio network is very weak. This is a dangerous situation during field level assessments as team members enter camping areas that can be very large and geographically challenging, with no means to communicate with each other.

**Medical Supplies**

- Donation of medical supplies to Lata Hospital from SI Living Memorial Project USA received 15/02.
- AusAID has also donated medical supplies to Lata Hospital.

**Water**

- Nomad water treatment system continues to produce and distribute clean water to the affected communities.
- Water to Lata station was restored and is running well but an electrical engineer will be required to restore the pump to full functionality.

**Fisheries**

- No reports received.

**Agriculture**

- There is a real problem faced by communities in terms of food gardens. The damage includes; exposure of tubers to sun, birds, pests and disturbance of fruit trees harvesting seasons. In order to contain the spread of pests and diseases, importation of planting materials from other islands will be restricted.
- Root crops are being consumed in the camp sites, which indicates their availability in gardens, but this needs to be verified by the detailed sector assessment teams currently out in the field.


**Education**

- No updates available since SITREP-07

**Infrastructure**

- An update will be made available tomorrow.

**Distributions**

- ADRA distributed a total of 9 tanks and accessories to Manoputi, Venga, Nemba and Luova.
- 3 UNICEF tents have been distributed to Luesalemba School.
- Welfare and IDP cluster is continuing to distribute NFI’s to the communities as follows:

<table>
<thead>
<tr>
<th>Village</th>
<th>Shelter Kits</th>
<th>Kitchen Sets</th>
<th>Mosquito nets</th>
<th>Blankets</th>
<th>Water Containers</th>
<th>Hygiene Kits</th>
<th>Clothing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Venga</td>
<td>46</td>
<td>10</td>
<td>56</td>
<td>92</td>
<td>92</td>
<td>46</td>
<td>9</td>
</tr>
<tr>
<td>Nela</td>
<td>45</td>
<td>45</td>
<td>43</td>
<td>43</td>
<td>57</td>
<td>45</td>
<td>9</td>
</tr>
<tr>
<td>Nemba</td>
<td>55</td>
<td>5</td>
<td>110</td>
<td>21</td>
<td>55</td>
<td>11</td>
<td></td>
</tr>
</tbody>
</table>
The following map (Figure 2) below shows relief distribution conducted on 15/02 (Friday).

**Provincial Assistance:**

- A multi-sectoral team has been deployed to assist the PEOC.
- Providing regular updates to the NEOC.

**National Assistance:**

- On-going coordination and oversight of the Response/Relief Phase by the NDC
- Activation of the N-DOC Clusters
- NECOM remains activated around the clock and is coordinating the response and coordination of agencies/DM stakeholders at the national level whilst the PEOC is coordinating provincial level efforts. These two teams are maintaining regular contact.
- The RSIPF patrol boat has been deployed under the Initial Response and Assessment Cluster. It will remain on Santa Cruz for at least 14 days, assisting in assessments and emergency relief missions.
- The Ministry of Health has deployed a National Health Response Team to Lata and is currently conducting assessments and carrying out other health/medical and clinical tasks with the Provincial Health Sector.
- SI Red Cross, World Vision, Oxfam, Save the Children, ADRA and other NGOs have deployed their national staff under the Initial Response and Assessment Cluster and also under the Welfare/IDP Cluster.
• The MV Arnavon cargo ship will deliver additional emergency relief items from various sources and departed Honiara at 10pm yesterday (15/02).
• The Chinese Association, the Forest Association and an Adventist Women’s group have donated food, clothing, and hygiene supplies and mixed household items.
• An additional doctor (general practitioner) and a protection specialist (Oxfam) were sent to Lata today.
• A flight has been chartered for tomorrow (Sunday 17/02) to transport:
  ▪ Medical teams to relieve those personnel sent last week
  ▪ IDP/Welfare Cluster Co-Chair
  ▪ Public Service Cluster Chair
  ▪ MID civil engineer *
  ▪ 2 architects *
  ▪ 1 quantity surveyor *
  ▪ 1 asbestos removal expert *
  ▪ UNOCHA’s Regional Disaster Response Advisor
  ▪ SPC/SOPAC’s GIS specialist

*As per PEOC’s recommendations from yesterday

Future Operations:

• Complete emergency relief operations
• Conduct gaps analysis for future request by PEOC/NEOC/Clusters and International Partners
• Conduct the Detail Sector Assessment by respective sectors.
• Compile the Initial Damage/Needs Assessment and the Detail Sector Assessment Reports.
• Deployment of additional personal under the NEOC, Welfare/IDP, Infrastructure and Response Clusters to relief the current National Team on the ground.
• An updated gap analysis of items received in Lata and distributed to communities is underway.
• Commence drafting the Multi-Agency Humanitarian Action Plan to outline and coordinate activities for a 60-90 day timeframe.

Recommendations:

1. Syndrome surveillance system should be implemented.
2. Support health promotion activities within the camp sites.
3. Vector Borne Disease Control Program staff are required in order to provide assistance regarding logistics and control of vector borne diseases.
4. Request mental health staff to assess mental health service requirements within the camp sites.
5. Health facility assessments should continue in parallel with field assessments.
6. An electrical engineer is required to conduct a full assessment of the Lata water pump.
7. Micro nutrient supplements for affected communities are required.
Evaluation:

Based on analyses, it is worth noting that the rate of progress of which the assessments and relief activities has been conducted is slow but improving. This has been due to many factors including the on-going tremors/after-shocks that have hampered assessment and relief distribution efforts as the safety of humanitarian responders is paramount to this operation. This factor is expected to be less of a challenge given that the seismic activity around Santa Cruz appears to be weakening and occurring less frequently.

The two priority areas based on the supplied information are the issue of the provision for clean water for drinking and other consumption, and the issue of the Internally Displaced People (IDPs).

NEOC Activation:

- NEOC remains on full activation around the clock.
- The Initial Response and Assessment, Logistics and Support, Infrastructure and Welfare/IDP Clusters have all been formally activated by the N-DOC with approval of the NDC.
- All Organizations regarded as DM Stakeholders (SI Govt, I/NGOs, UN Agencies and the Province) have activated their respective response arrangements that complement the SI DM Arrangements.

Assessment:

Assessments of ‘Initial Damage and Needs’ have now been completed in most villages. Various sectors are currently conducting ‘Detailed Sectoral Assessments’. However, the logistics in terms of availability of transport (vehicles/boats) has caused delays in deployment of teams. Household and population data, including statistics for damaged and destroyed households, should be known in the next few days. Data entry and verification is still in progress as more information becomes available.

The information below shows tsunami and earthquake impacts in mapped areas. Assessments are still underway currently for other parts of the island which includes Luasalemba, Kala Bay and others along the North Coast of Santa Cruz; these areas have reported houses damaged by the earthquake.
Tabulated below are the updated Assessment Datas.

<table>
<thead>
<tr>
<th>No</th>
<th>Village</th>
<th>Associated Village</th>
<th>Adult Male</th>
<th>Adult Female</th>
<th>Youth &amp; Children</th>
<th>Total Pop</th>
<th>Total HH</th>
<th>HH Not affected</th>
<th>HH partially affected</th>
<th># of HH destroyed</th>
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<tbody>
<tr>
<td>1</td>
<td>Nela</td>
<td></td>
<td>67</td>
<td>63</td>
<td>88</td>
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<td>58</td>
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<td>12</td>
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Feedback to Original Station

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<th>SENDER DETAILS</th>
<th>RECEIVER DETAILS</th>
</tr>
</thead>
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<tr>
<td>Name: Pearson Simi_ NEOC HQ</td>
<td>Name: N-DOC &amp; NDC Chairs, P-DOC &amp; PDC Chairs</td>
</tr>
<tr>
<td>Contact: 27937 or 955</td>
<td>Contact: NDMO &amp; MECDM, Temotu Provincial Govt</td>
</tr>
<tr>
<td>Time: 2230Hrs</td>
<td>Time: 1800 Hrs</td>
</tr>
<tr>
<td>Signature: PS</td>
<td>Signature: LY &amp; CI,</td>
</tr>
</tbody>
</table>