Odisha Floods Rapid Joint Needs Assessment Report

In the aftermath of the floods in Odisha - July & August 2014 (2nd Spell)
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1. Executive Summary

Odisha is a flood prone state, and as a result communities have become resilient and government response efficient to manage immediate rescue and relief operations. The flooding began with heavy rainfall on the 21st of July and further intensified as a result of two more low-pressure systems that moved over the state and was exacerbated by subsequent release of water from the Hirakud Reservoir.

Organizations capitalized on learning from the 2013 Cyclone Phailin assessments to strengthen coordination and assessment processes. To better understand the impact of the flooding, agencies, coordinating through the Odisha IAG and Sphere, carried out village level assessment in 8 of the most affected districts, covering 41 villages, using the newly developed Joint Rapid Need Assessment (JRNA) format. Clear humanitarian needs have emerged from this process.

Major findings as evidenced by the data presented in this report:

1. The flooding has caused major damage to agricultural land and disruption to agricultural based livelihoods and earning potential for households dependent on provision of labour.

2. The loss of food stocks in the flooding, spiraling of food prices, and reduced access to markets has lead to reductions in food access and consumption at the household level.

3. Access to safe drinking water is a major challenge as a result of widespread damage to water points and contamination of drinking water sources. Waterlogging and poor sanitation practices meant that the community is vulnerable to water borne or vector borne diseases.

4. The flooding has caused widespread damage to shelters and lead to a long period of displacement for more than 60,000 households. They are reporting concerns particularly regarding exposure to rain, mosquitos and snakes, limited lighting and fuel for cooking.

5. Access to health facilities is being hampered and most schools are currently not functioning in flood-affected villages.
6. Assessment teams identified protection concerns in a context where there is limited privacy for women for breastfeeding, sanitation and bathing, incidences of sexual and gender based violence were documented, and communities indicated risks relating to trafficking and exploitation. Households will also face major challenges resulting from the loss of legal documents. Children under 18, especially adolescent girls are at risk due to lack of privacy. Similarly, other age groups of children: under 5 nutrition, 6-14 years boys and girls who suffer due to lack of peer to peer support and engagement; etc. would be risks that get accentuated.

### 2. Background

Rainfall in the state of Odisha for 2014 so far has been 18% above normal rates, despite there being a rainfall deficit in the rest of India. Heavy rains started in around 21st of July 2014 and quickly resulted in flooding in the riverine (low lying) areas, immersing roads and farmland, and damaging embankments and bridges. Further heavy rainfall took place on the 31st of July and on the 5th of August 2014. The situation became more severe as authorities began releasing water from the Hirakud Reservoir from the 6th of August as the water level touch 628 feet, against the maximum level of 630, and to release excess inflow caused by heavy rainfall in the catchment areas. As per an official estimate 5 lakh cusecs of water/second was being released from 30 gates. The release of water led to massive flooding. As per the preliminary estimation of the government that 41,801 houses were damaged. As of the 13th of August 2014, 46 persons have died as a result. The flood has affected 3,612,712 persons from 5,441 villages in the state

![Map showing affected areas](image)

[1] SRC - State Relief Commissioner - Odisha
in 23 districts were affected (1,427 GP’s). Reports indicated that 209 villages remained marooned (Puri 115, Kendrapara 52, Bhadrak 5, Cuttack 1, Dhenkanal 19, Jagatsinghpur 6, Khordha 9) leaving approximately 203,473 people stranded. 63,000 people were taking shelter on roads, embankments and safer places. In the worst-hit coastal districts of Kendrapara and Puri thousands of villagers have taken refuge on river embankments, in high-rise buildings and cyclone shelters. More than 129 livestock were killed and over 3.2 million hectares of rice paddy were destroyed.

The IMD predicts that rainfall will continue in these places in the coming days, although the flood situation had started improving and it would take at least three days for complete discharge of flood waters from the low-lying areas in Bhadrak, Puri, Cuttack and Kendrapara district of Odisha in areas where the outflow of water is not impeded. All the major rivers were now flowing much below the danger level and receding fast. Besides, the water level in the Hirakud reservoir had reduced to 618 feet against a maximum water level of 630 feet. It has been reported that the Mahanadi, Devi, Kushavadra, Brahmani, Baitarani, Vansadhara and Jalaka rivers are flowing below the danger level (15th August).

3. Relief Measures – GO & NGO

The Government of India deployed 11 National Disaster Response Force (NDRF) teams and 30 ODRAF in different districts to assist the administration in rescue and relief operations. 184 boats were deployed to distribute relief items to the cut-off villages. According to SRC report more than 100,000 people had made their way to government relief camps where they were receiving shelter and cooked meals. Apart

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2 IMD- India Meteorological Department
from free kitchens running, dry food including 4,899 quintals of flattened Rice, 404 quintals of Jaggery and 70,772 quintals of rice were distributed. 1,422 polythene rolls were distributed. 328 medical teams were deployed and 20 veterinary teams\(^3\). 63,000 persons in 55 relief camps were given free cooked food and provided medical care special mobile medical units. NGO and Aid agencies have responded in operational areas.

### 4. Inherent Capacities Traditional Knowledge

Communities in Odisha are resilient and generally well prepared to protect themselves in the event of floods, cyclones and other disasters, relying on past experience. The assessment team observed that many in the affected population remained in their houses by constructing higher shelves inside the flooded houses. Many were not willing to evacuate to relief camps as the camps are quite far from the villages. Some of the women and children were sent to relative’s homes on higher ground. Small country boats and banana rafts are being used by the community for their movement. Most of the livestock (Cows, goats, pigs etc.) were brought to the roadside and are being kept in the open. People are taking refuge by constructing temporary shelters on embankments, the resilience building measures like raised hand pumps and raised homestead have enabled vulnerable communities to cope with the sudden stress of disasters like the floods. The Odisha Govt.’s. Early warning information’s related to floods helped Communities especially near the embankments to move to higher areas and safeguard lives and property to some extent.

When a disaster strikes, the poor and marginalized households have few assets to fall back on and face extreme difficulty in meeting basic needs, rebuilding their homes, restoring their livelihoods, and regaining a sense of normalcy and security. The intensity of the floods was severe and resulted in devastating damage to such communities. In many cases, the impact was beyond local coping capacities. The agricultural damages have been substantial and in the days to come, the financial security of the communities would be severely tested with fledging markets and defunct infrastructure.

### 5. Field Assessment

The Joint Rapid Needs Assessment (JRNA) covered 41 of the worst affected villages with a total population of 42,449 (Disaggregated data: 6,924 - 16.8% children, 14,205 - 34.5% women and 4,988 - 12.1% SC/ST, 435 - 1% pregnant and lactating women, 354 - 0.8% persons with disability). Teams reported that 98% of the Wards are affected, and 87% of the population in the survey area. 25.5% of the affected people are displaced. Water entered the houses in 32 of the villages, and in 50% of the villages the community expect the water to remain for more than three days. Water levels were more than three feet above the HFL (high flood line) in 27 of the villages.

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\(^3\) SRC Odisha
6. Sector wise needs

The following bar chart shows some of the major findings of the JRNA that offer an overview of some of the major impacts of the flood on the community. This represents the percentage of villages where the challenges were observed.
6.1-Food Security and Livelihoods

Situation Analysis

- Food security concerns are serious as 350,000 hectares of agricultural land was flooded.
- There is a direct impact on availability of agricultural labor for communities that are dependent on the agriculture based livelihoods as standing crops have also been affected.
- PDS shops are partly functional due to flood and high rains.
- Government has provided three to seven days of cooked food to affected population.
- 11,75,408 livestock and 2,99,384 poultry population of 76 Blocks of 17 districts have been affected by the recent flood till 12th Aug 204
- 44 Large Animals, 13 Small Animals and 4120 poultry birds have been reported to be dead / washed out

![Cook food, staple food, PDS](chart)

- % of households able to cook food/boil water since the disaster: 40%
- % of households who are not having enough supports to cook/make food: 50%
- % of population using Rice as staple food, (before/after): 100%
- % of PDS shop functional in the village and operational with stocks: 42.5%

![Key Indicators-food in the market, damage, crops damage](chart)

- % of availability of food stocks in the market (chart only): 50%
- % of severity of damage of the major crop/crops: 97.5%
- % of villages told Paddy crops damaged: 100%
- % loss of livelihood assets/agriculture implements (Severe loss): 25%

![% of nutrition services not accessible](chart)

- Supplementary nutrition provided by ICDS centers: 60%
- Growth monitoring and identification of SAM child: 60%
- Referral mechanism of SAM: 67.5%
- Facility based management of SAM/Nutrition Rehabilitation center: 75%
- NOOne (YES/NO): 32.5%
Assessment Findings (based on the 40 villages assessed)

- Food security is severely affected as the communities have lost their crop, belongings, and assets.
- In the assessment (40) villages - 60% of assessed population were not able to access Angawadi nutritional programmes.
- Only 40% of assessed population able to cook food or boil the water since the disaster struck which has a strong bearing on the nature of water being used for drinking and cooking needs—thus 60% of communities are drinking water without boiling/ safeguards.
- Almost 50% of the respondents said that the markets are running low on food stocks.
- 97% of paddy crops has been fully/ partly damaged – this is expected to have an impact in coming days on availability of food stocks in market and prices.
- The unavailability of food stocks coupled with spiraling prices may lead to less consumption of nutritional food, especially on women and children.
- Most of the farmers have lost their kharif crops which is serious concern for the people.
- 18% people have reported security concerns over livestock.
- Respondents reported 10% of livestock affected in Marsaghai Block of Kendrapara.
- In most of the assessed villages—the grazing lands are under water posing threat of starvation for the livestock.
- Most of the livestock have take shelter along with their owners on river embankments.
- Paddy straws used as roofing materials for human settlements are being fed to the livestock.
The food consumption score\(^4\) for the present situation (post emergency period) is 34 which falls under the borderline category. The FCS scores in the assessed areas are mainly contributed by government or other external food aid.

FCS Categories: 0-21 = Poor Category; 21.5 – 35 = Borderline Category; > 35 = Acceptable Category
- Average food consumption score in normal time- 57
- Average food consumption score after disaster 34

- The food aid consisted of two food groups (Staple food & pulses) which have maintained the borderline food consumption score. This further gives us an analysis that affected community
- is yet not facing severe problem regarding availability of food, but there is a high chance of further drop in food consumption score to poor category (0-21) if food relief is stopped, which might bring a situation of food crisis affecting dietary diversity, frequency of availability of food and nutrition.

**Urgent Needs**
- Need to increase liquidity in the affected areas through support initiatives as principal livelihood options are affected presently
- There is a need for meeting nutritional requirements as people have reported less consumption of cereals, pulses and vegetables which would have impact on the nutritional status of the children, women, and ill health and old age people with special needs.
- There is an urgent need of fodder and safe shelters for the livestock in almost all flooded rural areas

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\(^4\) The Food consumption score (FCS) is calculated on the basis of dietary diversity, food frequency, and relative nutritional importance of different food groups of flood affected community of last 7 days.
• Families are not able to cook as their “chullhas” are wet, and may need another week or more to dry. Presently they are cooking in open and there is an acute need for cooking fuel.

<table>
<thead>
<tr>
<th>DISTRICTS</th>
<th>Cost of food has increased</th>
<th>Markets not functioning</th>
<th>Markets without stocks</th>
<th>Markets inaccessible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bargar</td>
<td>100%</td>
<td>20%</td>
<td>20%</td>
<td>0%</td>
</tr>
<tr>
<td>Bhadrak</td>
<td>83%</td>
<td>33%</td>
<td>83%</td>
<td>83%</td>
</tr>
<tr>
<td>Cuttack</td>
<td>71%</td>
<td>43%</td>
<td>71%</td>
<td>86%</td>
</tr>
<tr>
<td>Jajpur</td>
<td>17%</td>
<td>17%</td>
<td>50%</td>
<td>33%</td>
</tr>
<tr>
<td>Kendrapara</td>
<td>100%</td>
<td>0%</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>Kendujhar</td>
<td>100%</td>
<td>0%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Khordha</td>
<td>0%</td>
<td>0%</td>
<td>33%</td>
<td>0%</td>
</tr>
<tr>
<td>Puri</td>
<td>100%</td>
<td>0%</td>
<td>100%</td>
<td>40%</td>
</tr>
<tr>
<td>Average</td>
<td>71%</td>
<td>14%</td>
<td>47%</td>
<td>35%</td>
</tr>
</tbody>
</table>

### 6.2-WASH- Water Sanitation and Hygiene

**Situation Analysis**

• The water and sanitation has been substantially hit by the floods across the 8 assessment districts.
• Assessment points towards the severe impact on the drinking water sources having direct repercussions on the availability of safe drinking water in the affected areas.
• The affected villages normally depend on hand pumps, open wells and piped water supply (in some cases) for the drinking water needs and most of them have either been damaged or completely submerged.
• Ponds are being used for meeting the washing and bathing needs which have been contaminated with flood waters.
• Shrinking open spaces and defunct toilets (wherever available) has increased hygiene risk substantially as in many cases; people are forced to defecate in the flood waters posing severe bacteriological threat to the affected communities.
• Usage of contaminated flood waters for bathing, cleaning kitchen utensils and other cleaning needs are quite apparent.
• Unsafe disposal of household solid and liquid waste in the flood waters is adding to the severity of the contamination.
• Water logging in and around the affected villages is posing potential threat of epidemics like diarrhea, malaria and other skin diseases.
• However, there has been no epidemic reported as yet.

**Assessment Findings** (based on the 40 villages assessed)

- Around 87% of assessed communities have suggested hand pumps as preferred means of drinking water
- Some 80% of the water points including open wells, hand pumps, ponds and piped water supply have been found to be defunct or contaminated
- Around 47% of population from the assessment villages lack safe drinking source.
- Unsafe filtration methods like use of cloth has been observed
- Around 38% people have reported that people with disability have reduced water availability
- Approx. 30% of the respondents have suggested short term (one week) availability of drinking water
- Around 97% people have reported open defecation as prevalent practice
- Approx. 87% adolescent girls are using cloth for menstrual hygiene management
- Child excreta are disposed off in flood waters which again increase the risk of contamination of water.
- No separate bathing facility is available for the affected communities in the refuge areas, prior to the floods; the normal practice was to use river waters for bathing and washing needs Management of Solid waste is a problem, as community is disposing all its waste in flood water and water logged fields next to their settlements, allowing growth of vectors.

**Urgent Needs**

- Many people’s utensils have been washed away and they are storing water in plastic bottles. There is need for water storage containers.
- Need for measures to prevent outbreak and spread of water borne diseases like malaria.
- Treatment mechanisms for the drinking water is needed across many pockets
- There are critical personal hygiene needs especially for women and adolescent girls. Women normally use cloth for menstrual purpose and reusing the sanitary cloth is not possible because of non-availability of separate washing areas and cleaning material
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(washing soap). Women expressed an urgent need for sanitary cloth and sanitary napkins along with basic hygiene materials.

- Majority of women are left with just one pair of clothes in Jajpur district, as they could not collect their clothes due to sudden onset of flood water in their villages. Therefore, to wash their clothes women stay inside broken houses till the time their clothes are washed and dried by someone else. Women expressed urgent need of spare clothes.

6.3-Shelter

Situation Analysis

- A large population has lost their shelter with their houses fully damaged or on the verge of collapse. People are taking shelter on roof tops of neighbours pucca houses, relatives houses which have not been damaged or any other nearby safe areas and schools serving as shelters.
- In Cuttack, Pregnant women, younger children and old had taken shelter in neighborhood habitations situated on high land.

<table>
<thead>
<tr>
<th>DISTRICTS</th>
<th>Rains</th>
<th>Cold</th>
<th>Mosquitos</th>
<th>Darkness</th>
<th>Heat</th>
<th>Snakes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bargarh</td>
<td>0%</td>
<td>20%</td>
<td>100%</td>
<td>0%</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>Bhadrak</td>
<td>33%</td>
<td>0%</td>
<td>83%</td>
<td>50%</td>
<td>17%</td>
<td>83%</td>
</tr>
<tr>
<td>Cuttack</td>
<td>29%</td>
<td>0%</td>
<td>71%</td>
<td>86%</td>
<td>0%</td>
<td>71%</td>
</tr>
<tr>
<td>Jajpur</td>
<td>50%</td>
<td>0%</td>
<td>83%</td>
<td>33%</td>
<td>0%</td>
<td>50%</td>
</tr>
<tr>
<td>Kendrapara</td>
<td>40%</td>
<td>0%</td>
<td>100%</td>
<td>80%</td>
<td>0%</td>
<td>80%</td>
</tr>
<tr>
<td>Kendujhar</td>
<td>80%</td>
<td>60%</td>
<td>80%</td>
<td>20%</td>
<td>0%</td>
<td>100%</td>
</tr>
<tr>
<td>Khordha</td>
<td>67%</td>
<td>0%</td>
<td>100%</td>
<td>0%</td>
<td>0%</td>
<td>67%</td>
</tr>
<tr>
<td>Puri</td>
<td>20%</td>
<td>20%</td>
<td>100%</td>
<td>80%</td>
<td>0%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Assessment Findings (based on the 40 villages assessed)

- More than 50% of houses in surveyed area are partially damaged and in need of repair.
- The affected villages visited during the assessment had mostly kuchha/ mud houses with a few Pucca houses which are serving as shelters for the neighbours during night. The damage to shelter varies from one block to another.
- The affected population staying in shelter is exposed to Snakebites, theft and there are no lighting arrangements at a few places so it gets very dark at night.

Urgent Needs

- There is need for Tarpaulins and emergency shelter kits in Kendrapara, Jajpur and Kendujhar
- Approx.10-15% have also expressed the need for utensil kits specially in Marsaghai block in Kendrapara.
- Mosquito nets are required both for displaced population as well as those who are living in their houses.
6.4-Health

Situation Analysis

- Due to poor communication network with water submerged roads are posing a big challenge for the community to receive immediate health care. An overall 50% decline of access to health is reported.
- The assessed villages noted lack of access to health care from PHC, AWC, Rural Health Providers and 72.7% attributed this to movements of health service providers and limited services in terms of the needs of the affected populations.
- As waters recede, the affected population is using infected water for the drinking. Water Contamination concerns are rising especially in water logged areas and were water is being drawn from Tube wells and open wells.

Assessment findings (based on the 40 villages assessed)

- In all the accessed villages 80% water sources were defunct such as Open well, tube wells and piped water for a period of 3 – 8 days during water logging.
- 50-63% villages out of 28 denoted that there is prevalence of Diarrhea, fever with rashes and communicable diseases which is a major health concern.
- Water logging in the field is posing serious problem for the farming community and is likely that water logging will continue in coming weeks.
- While analyzing the data of functional health care system at village level, it was found that 68.4% AWC and 72.7% health care providers are affected due to flood.
- Routine immunization and outpatient consultation, antenatal care is intercepted in 25–30% villages in reference of 40 villages. This poses a serious threat to pregnant women, children (0-6 Months) where 57.5% villages are of the opinion that children are in a streets due to disaster.
- During interaction with community, due to non-availability of boats, the MRCs fail to visit, hence a large number of patients are left unattended in the affected villages.
- In Jajpur district, a government Health Camp was observed in one of the assessed villages which has been monitoring the health situation and any outbreak of communicable disease and they have not found any such outbreak to date.
**Urgent Needs**
- There are special needs on health service restoration in an emergency basis in all the affected villages.

**6.5-Education**
- Disasters have a major impact on children and education systems by destroying their school infrastructure, books, bags, uniform and even taking away the lives of teachers and students.

Quality education in emergencies is still viewed as secondary when compared to the provision of food, water, medical assistance and shelter.

**Situation Analysis**
- Children under 18, specially adolescent girls are at risk due to lack of privacy. Similarly, other age groups of children: under 5 nutrition, 6-14 years boys and girls who suffer due to lack of peer to peer support and engagement; etc would be risks that get accentuated.

**Assessment findings (based on the 40 villages assessed)**
- In all the assessed areas it was reported that the educational institutions are closed as schools are used for temporary shelter, community kitchen and in some places connecting roads are cut off / submerged with flood waters etc.
- 75% villages have reported some sort of loss of educational materials
- 25% assessed villages reported that schools in their localities will not be functional in the next one month
- Teachers have also reported that Teaching Learning Materials, Teaching Aids of 8 schools out of 10 got wet and are not useful.
- In all the affected districts, most of the children, teachers and PRI members reported that the Mid Day Meal has been stopped as schools are defunct which has a huge impact on nutritional status of the children.
Urgent Needs
- Children in the affected areas need text books, note books and school bags.
- Teaching learning materials and teaching aids are needed in the affected schools.

6.7-Protection
While rapid assessment considered largely social protection agenda with a few references to children; however, child protection concerns need to be looked at progressively by dedicated experts on child protection in humanitarian crisis.

Situation Analysis
- People have taken shelter on roof tops, schools and high land where men and women are staying together without enough privacy. While in most of the areas, there was no incidence of conflict and violence in the villages but cases of minor disputes were reported during distribution of relief materials by Government.
- Some incidences of theft and molestation have been reported in communities where people evacuated to some other places.
**Assessment findings** (based on the 40 villages assessed)

- In the marooned villages, some of the families were split and relocated in the neighbourhood habitations situated on high land. This mostly included the pregnant women, children, aged and persons with disability. People in some areas have reported lose of legal documents, such as ration card, voter ID card etc.
- Villagers have been seen pro-active in helping each other in spite of the discrimination which is otherwise observed in non-disaster times.
- Lack of access and availability of safe and private latrines, especially for women and girls, have forced them for open defecation and situation is worse during flood as they remain more vulnerable.
- In the villages, where people have taken shelter in school or other safe places, accessibility of toilet and bathing space have been a major problem. Moreover, there is lack of sufficient hygiene materials available for women.
- As schools are closed, either marooned or used as temporary shelter, children remain vulnerable to abuse and exploitation.
- Due to large scale displacement, children do not have access to school; hence, remain cut off from their peers. This creates stress and increases burden from psycho-social aspects. Parents too cannot afford to leave their children unattended / uncared; hence, poses a huge challenge in clearing the debris and restoring their homes and livelihoods back.
### 7. Recommendations

<table>
<thead>
<tr>
<th>NEEDS</th>
<th>IMMEDIATE</th>
<th>Mid Term (3-6 months)</th>
<th>Areas of Multi Sectoral Assessment</th>
</tr>
</thead>
</table>
| Food Security and Livelihoods | Cooked Food through community kitchens or ready to eat dry rations for 15 days  
For affected children and mothers there is a need for nutrition supplements at least for 15 days  
Fuel/wood and cooking equipment for those who have lost equipment  
Conditional and unconditional Cash transfers for landless laborers, migrant workers and unemployed youth and farmers | Cash for work programs for income to Farmers and landless laborers for 30-50 days  
Restoration of ICDS centers to address nutrition needs of the children  
Seed support for paddy, vegetables and pulses for Rabi season and restoration of kitchen garden  
Tools and implements for livelihoods  
Agriculture support for flood resistant cropping practices. | Quantify food stocks and losses  
Detailed estimation of needs for various livelihoods, seasonal calendar and impacts of the flooding, as well as recovery periods for each  
FCS followed by EFSL  
Carry out a gender analysis |
| WASH                          | HH level water disinfection with Chlorine (Halogen) Tablets  
Disinfection of deep and shallow Hand-pumps wherever possible and water has receded.  
Disinfection of Open Water bodies for Vector control.  
Provision of containers for drinking water storage and disinfection.  
Provision of Hygiene kits, and Health and Hygiene promotion (awareness) for prevention of communicable diseases  
Community awareness on sanitation practices  
Clearance of solid waste from settlement sites for vector control | Clearance of solid waste from settlement sites for vector control  
Disinfection of Open Water bodies for Vector control  
Repair, disinfection and restoration of damaged water sources  
Continual monitoring, testing and treatment of the water systems.  
Construction of community latrines and bathing cubicles supported by robust public health campaign | Testing of ALL drinking water sources to ascertain level of contamination and follow up actions to mitigate the risks due to contamination  
WASH mapping of water sources and sanitation sites, defecation zones and analysis of risk to water sources  
Mapping of Vector risks and current practices (organic/vermin-composting)  
Improved WATER systems with integrated DRR features  
KAP study for WASH  
Environmental Sanitation and waste management practices |
| Shelter                       | Distribution of Tarpaulin and Ground Sheets for emergency shelters  
Provide household NFIs like cooking utensils for displaced HH and for host family support | Material or cash support to families with Damaged Mud houses | Shelter damage assessment, identifying reasons for damage or for not being damaged  
Assess resilient features and practices relating to design, location and other factors. |
<table>
<thead>
<tr>
<th>Health</th>
<th>Education</th>
<th>Protection</th>
<th>Livestock</th>
<th>Coordination &amp; Advocacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Set up medical camps for treatment of malaria, diarrhea and skin diseases</td>
<td>Distribute school text books, notebooks, uniform and stationery</td>
<td>Provision of cubicles for women and adolescent girls for privacy during bathing and for menstrual hygiene practices. Creating Child Friendly Spaces to ensure protection of children</td>
<td>Provision of dry fodder for livestock (including small animals like goat and sheep)</td>
<td>Immediate and regular GO-NGO Coordination through IAG Odisha at State &amp; District level for facilitation of immediate response.</td>
</tr>
<tr>
<td>Monitoring the stocks and supply of medicines in PHCs</td>
<td>Provide MDM kitchen utensils to schools to help restart Mid-Day meals</td>
<td>Creating Child Friendly Spaces to ensure protection of children</td>
<td>Veterinary camps for injured or sick animals</td>
<td>Extended Coordination Support to district and State IAG Platform</td>
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<td>Advocacy for Deployment of Doctors to PHCs</td>
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<td>Provide psychosocial counseling services and/or referrals</td>
<td>Provision of temporary shelters for livestock on raised ground</td>
<td>Formation of Sectoral Teams for caring out the Detail Multi Sectoral Assessment</td>
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<td>Distribute Insecticide treated mosquito nets to prevent vector borne diseases</td>
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<td>Ensuring regular veterinary support</td>
<td>Conducting Detail Multisectoral Assessment and report.</td>
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<td>Distribution of ORS packets for diarrhea treatment (with awareness activities)</td>
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<td>Immunization support to the livestock</td>
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<tr>
<td>Document contextual design features of houses that require repair/ rebuild</td>
<td>Document land access and ownership</td>
<td>Secondary data analysis/ baseline data for diseases present in the area</td>
<td>Assess the number of people purely dependent on livestock for their income</td>
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<td>Survey local resources and available materials on the market and analyze local capacities and skills</td>
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<td>Analyze access to medical care, distance, adequacy and security</td>
<td>Analysis on livestock management practices</td>
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<td>Assess level of knowledge about disease prevention</td>
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<td>Identify persons with special needs and chronic illness</td>
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<td>Assess level of coordination between government departments on water supply and health</td>
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Distribution of Torches or solar lamps for night time security

Raising the plinth of the houses and incorporation of other flood and cyclone resistant measures

Facilitation health assistance for the people who need slightly longer term health support

Continual facilitation in terms of support to the regular functioning of PHCs

Restore flooded schools through Cash for Work program.

Creating Temporary Learning Centres in villages where schools are defunct

Support to families that have lost their legal documents in the flood by organizing camps

Assist with family level preparedness kits to protect important documents during future floods

Ensuring regular veterinary support

Immunization support to the livestock

Age, Gender and Diversity Mapping

Protection assessment

Formation of Sectoral Teams for caring out the Detail Multi Sectoral Assessment

Conducting Detail Multisectoral Assessment and report.
<table>
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<tr>
<th>Assessment and GIS mapping of Unmet areas &amp; sectoral need in consultation with local government and block administration.</th>
<th>Early Warning mechanism for IAG Odisha through mobile APPs in partnership with GoO.</th>
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<tr>
<td>Advocacy for Health, WASH, Protection, Livelihood, Education, NREGA &amp; Social protection Schemes</td>
<td>Advocacy for Social Inclusion, Persons with Disability, Pension &amp; IAY/Mo Kudiya</td>
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<td>Common information &amp; knowledge sharing digital platform for IAG Odisha needs to be facilitated soon</td>
<td>Convergence of Go-NGO activities and organizing camps for distribution of lost documents at Panchayat level.</td>
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<td>Common IEC Materials for wide circulations especially for WASH &amp; Health</td>
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</table>
8. The Government Response

Immediate Relief and Response

Emergency Relief distributed (in Quintals as on 13th Aug 2014)

- Rice 70772
- Flattened Rice (Chuda) 4899
- Gur 404.6
- Polythene in Roll 1422

Immediate Response

- 11 National Disaster Response Force (NDRF) teams and 30 ODRAF teams have been deployed in different districts to assist the administration in rescue and relief operations.
- 26 No of free kitchen opened and serving 166997 Beneficiaries in the marooned villages.
- 605 Boats deployed in the 40 breach affected areas


- The government has provided feed for livestock, vaccination to animals as precautionary measures.
- 1 lakh 77 thousand 700 doses of vaccines have been administered.
- 20 Veterinary teams have been deployed to the most vulnerable areas.
- Indents for 2331.25 MT of Cattle Feed for 15 districts have been placed with OMFED[6].
- 1573.05 MT of cattle feed has been supplied by OMFED to flood affected districts.
- 763 animal health camps have been organized and 68,233 animals treated.
- 179 Veterinary Doctors, 660 Para-vets & supportive staff have been engaged.
- 813.5 quintals of green fodder supplied to Cuttack, Kendrapara, Puri, Jajpur, Khurda and Sambalpur districts.

WASH

- As informed by some villagers in Jajpur, government department has started chlorination of submerged hand pumps (government) in their villages.
- Supply of drinking water through tankers for meeting minimum drinking water requirements
- Distribution of halogen tablets and bleaching powder has taken place in some areas but on speaking to the community, it was observed that they do not have the proper capacity (knowledge or tools) to use these items, especially on the concentration and required volume of water for specific to the concentration of the chlorine tablets.

EDUCATION

- There has been limited support from the Government for shelter except for declaring some schools as shelters. One truck with Tarpaulins was sighted in Kendrapada but no distribution as yet.
9. Assessment Methodology

Sphere India Platform in collaboration with Inter Agency Group Odisha introduced and facilitated the process of RJNA during the current Odisha floods 2014. RJNA was taken up to provide a rapid common understanding of the impact of floods in 8 most affected districts, out of total 23 districts affected on following issues

- Identify priority needs of the affected population
- Provide approximate number of affected people
- Identify severely affected geographic areas within 8 district, 16 Blocks & 32 Panchayat
- Mapping critical needs in the immediate aftermath of the extreme event (30 – 90 days)
- Provides general recommendations to inform strategic decisions on resource mobilization and response planning for medium to long term needs

a. **Methodology**

- Training on RJNA
- Identification of Worst affected district from Primary & Secondary information’s
- RJNA Team building and planning
- Identification of Worst affected block/ Panchayat in consultation to District EOC/Emergency Officer/BDO /NGOs
- Team-building exercise with District RJNA formats
- Team leader for the operation and communication standards
- Field Assessments with FGD, interview’s, Geo- tagged pictures
- Debriefing by all the team leaders to the Sphere IAG Platform.
- Analysis and RJNA Reporting
b. **Tools**
   - District RJNA Tool
   - Village RJNA Tool
   - Guidance note on use of the formats

c. **Training:**
   - IAG Odisha member participants

d. **Field Work**
   - No of Districts – 8
   - No of blocks covered – 16
   - No of Panchayat covered – 32
   - No of village covered – 40 (5 villages per Team)

e. **Meeting and Consensus**
   - The meeting culminated with the finalization on the above mentioned assessment processes and related logistical requirements along with the planning on subsequent analysis and report preparation.
   - The following dates were agreed for the action:

f. **Calendar Dates for Odisha Floods – 2014**
   - 9th Aug 2014 - RJNA Tool Training & Planning - IAG Odisha & Sphere India
   - 10th - 12th Aug RJNA by 8 teams in 8 districts, 5 villages will be covered by each team i.e. total 40 villages
   - 13th Aug 2014- Presentation by the teams to the documentation and analysis team
   - 14th Aug 2014 - Sharing of First draft of RJNA Report - documentation and analysis team
## Annexure 1. The GoO Response and Affected Areas Details

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<tr>
<th>Sl.</th>
<th>Name of the districts affected</th>
<th>Blocks Affected (Nos.)</th>
<th>GPs Affected (Nos.)</th>
<th>Villages Affected (Nos.)</th>
<th>Villages remain Marooned (Nos. today)</th>
<th>Population Affected (Nos.)</th>
<th>WBs Affected (Nos.)</th>
<th>Live stock Affected (Nos.)</th>
<th>Human Casualty</th>
<th>Crop area affected (in hect.)</th>
<th>Houses damaged (Nos.)</th>
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