CYCLONE MICHAUNG

JOINT RAPID NEED ASSESSMENT REPORT
TAMIL NADU

DECEMBER 2023
Acknowledgment

This Joint Rapid Needs Assessment (JRNA) would not have been possible without the cooperation and constant support of volunteers, local member organizations of HCL Foundation, ADRA India, Goonj, BSSSG, OfERR, MEI Trust, Slum Children STEDS, Grey Sims Learning Foundation, district and village officials, and communities from affected areas. We are indebted to all of them, exigencies of space and time constraints limit us from naming/mentioning each one of them here.

However, we would like to acknowledge with deep gratitude, the guidance, cooperation, and support extended by AUM Education Seva Trust, HCL Foundation, UNHCR for mobilizing the volunteers to collect real-time information, provide valuable inputs, and coordinate the assessment process. We would also like to acknowledge the sectoral experts, report writers, and editors who contributed their valuable time in reading and editing this report.

And, above all, the communities of affected areas of Tamil Nadu who, even amidst the adversities took out time and patiently provided answers to all the questions put to them, without any reservations.

Sphere India
12th December 2023
About JRNA and Disclaimer

As per Sphere India Standard Operating Procedures, adapted to address the emergency situation, a Joint Rapid Needs Assessment (JRNA) was conducted across the cyclone affected areas of Andhra Pradesh and Tamil Nadu; data collection was conducted through secondary sources, field visits, personal interviews, observations, and information provided by local authorities and CBOs. The organizations engaged in response have also shared their observation notes to incorporate in the report. Also, on-ground information was collected using smart phones through a data collection mobile application and collated by the core team taking due consent from the villagers. The aim was to gather information on the impact of cyclone on the community members and understand their recovery needs, collate, and analyze the findings, and disseminate the information to the State, National, and international agencies.

Disclaimer

The interpretations, data, views, and opinions expressed in this report are collected from various sources including Government led institutions, line departments, field assessments by volunteers, and team members deployed by Organizations who took initiative in Humanitarian Assistance activities and from secondary media sources. It does not necessarily carry the views and opinions of Sphere India or any humanitarian organization as a collective directly or indirectly. It is interpreted only for assessment purposes.

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EXECUTIVE SUMMARY

Cyclone Michaung made landfall in Bapatla, located between Nellore and Machilipatnam in Andhra Pradesh, on December 6th, emerging as a super cyclonic storm. Widespread heavy rains resulted in inundation across various regions in Andhra Pradesh, Puducherry, and Tamil Nadu over the past week. Cyclone Michaung has had a significant impact on 6 million individuals, with an estimated 2.1 million experiencing severe consequences. The recovery for these affected populations is anticipated to require a minimum of two years for a return to their pre-cyclone circumstances. The districts most heavily affected include Chengalpattu, Chennai, Thiruvallur, and Kancheepuram in Tamil Nadu. In response to the flood, relief and response efforts were initiated in Tamil Nadu and Andhra Pradesh by government and humanitarian agencies. The primary focus of these initiatives was to provide immediate assistance and support to the affected population. This included the provision of essential supplies such as food, clean water, medical aid, and temporary shelter for those who had been displaced. As per the guidance of Inter-Agency Coordination Committee, Joint Rapid Needs Assessment (JRNA) was conducted to determine urgent priorities for response and relief efforts.

SECTORAL FINDINGS AND URGENT NEEDS

**Food Security and Livelihoods**: Cyclone Michaung has wreaked havoc in the affected areas, causing widespread damage to agricultural crops, food stocks, and livelihoods. The cyclone’s impact has disrupted food production and supply chains, leading to limited access to nutritious food for the population. As a result, food insecurity and malnutrition risks have been further exacerbated, putting the affected population at greater risk. The cyclone’s destructive force has not only affected agricultural lands, crops, and livestock, but also businesses and industries, resulting in the loss of livelihoods for farmers and daily wage earners.

*Immediate measures are crucial to address food and nutrition challenges and support the revival of livelihoods.* Providing emergency food assistance and ensuring access to nutritious food should be prioritized. Efforts should focus on restoring agricultural activities, market infrastructure and supply chains, for reviving economic activities and enhancing self-sufficiency. This includes providing farmers with seeds, tools, and fertilizers to restart agricultural activities, along with financial assistance and training to recover their losses. Facilitating access to schemes such as MGNREGA, Agriculture/ livelihood related schemes under NRLM and SRLM etc., TPDS, PM-Poshan and other state specific social protection schemes.

**Health**: The cyclone has had a significant impact on the health sector. Health facilities, including hospitals and clinics, have been damaged, hindering access to healthcare services. The destruction of infrastructure and disrupted transportation has further limited the availability of
medical care. The cyclone's aftermath has also increased the risk of waterborne diseases and vector-borne illnesses due to contaminated water sources and stagnant water.

*Medical teams need to be deployed, and essential medicines and supplies must be provided. Temporary health clinics and mobile units can be established in the affected areas to ensure healthcare access. Public health campaigns are crucial to promote hygiene practices and prevent the spread of diseases. Additionally, psychosocial support and counseling services should be made available to address the mental health needs of the affected population.*

**Education:** The aftermath of Cyclone Michuang has left a devastating impact on the education sector, with a majority of schools non-functional due to reasons such as power shortages, schools being converted into relief camps and inundation. Classrooms and educational materials have faced destruction, disrupting the learning process and forcing the closure of educational institutions. The cyclone's consequences have further displaced teachers and students, posing significant challenges, particularly for vulnerable groups such as children with disabilities and those residing in remote areas. Urgent action is essential to repair and reconstruct damaged schools, resuming normalcy, and providing temporary learning spaces and materials to ensure the continuity of education in the affected regions.

**Shelter:** The respondents in the surveyed areas of Tamil Nadu are currently residing in various locations, including their own homes, relatives' houses, and relief camps. Unfortunately, the devastating impact of the cyclone has exacerbated the housing situation, leading to widespread destruction. Many houses, and toilets have either completely collapsed or suffered partial collapse, rendering them uninhabitable. *Urgent provision of temporary shelters, equipped with essential items such as blankets, mattresses, clothing, cots, hygiene products, tarpaulins, sanitary pads, cooking stoves, and utensils, is required for families.*

**WaSH:** The cyclone has had a severe impact on Water, Sanitation, and Hygiene conditions in the affected areas. Water sources have been contaminated due to flooding and damaged sanitation systems. This has resulted in limited access to clean drinking water, increasing the risk of waterborne diseases. Inadequate sanitation facilities, including toilets and handwashing stations, pose significant challenges. Displaced populations living in crowded conditions lack access to proper WaSH facilities. *Immediate measures are necessary to address the WaSH challenges. Providing clean drinking water through water treatment and distribution systems is crucial. Restoring damaged water supply and sanitation infrastructure is a priority. The construction of temporary latrines and handwashing facilities is essential to ensure proper sanitation.*

**Protection:** The Protection Sector analysis reveals critical protection issues, including security concerns due to damaged shelters, limited access to security mechanisms, family separations, power outages, privacy challenges, inadequate bathing/toilet facilities, limited access to menstrual hygiene products, and exclusion of SC/ST and PwD communities from relief camp services. *Urgent actions are required to ensure the protection of affected individuals. Establish safe spaces and shelters for vulnerable individuals, especially women and children, along with strengthened community-based protection mechanisms to provide support and assistance.*
IMPACT OF MICHAUNG CYCLONE ON REFUGEES

The survey conducted on Sri Lankan refugees in Chennai, Tiruvallur, Kanchipuram, and Chengalpattu districts following the Michaung Cyclone yielded insightful data from 33 respondents. A significant 24 respondents reported disruptions in their food supply, with 18 indicating damage to their food materials, and 32 estimating that their current supplies would last no more than 1-2 weeks. Health issues, including flu, fever, and conjunctivitis, were reported by 19 respondents among their family members post-disaster. Housing was significantly impacted, with 26 respondents citing damage to their homes, 11 reporting inundation, and 9 stating partial damage. Temporary relocations to friends' or relatives' places or relief camps were reported by 19 respondents, and 17 expressed a need for assistance in house repairs. The top three non-food item needs were identified as medicine (14 respondents), mosquito nets (11 respondents), and tarpaulin (10 respondents). Livelihoods were affected for 20 respondents, and the primary protection concern for 20 respondents was the lack of evening light due to power shortages. Urgent relief needs prioritized food, medical/health support, shelter repair, and drinking water. The most crucial recovery need emphasized by respondents was house repair or reconstruction.
2. BACKGROUND

2.1 Situation Overview

The development of Cyclone Michaung, the fifth cyclone to manifest in the Indian Ocean this year and the fourth to originate in the Bay of Bengal, has precipitated a series of impactful events in the southern regions of India. The India Meteorological Department initially forecasted the development of Cyclone Michaung in the Southwest Bay of Bengal on Sunday, December 3, with a projected landfall along the coast of Andhra Pradesh by December 5.

The cyclone’s impact became evident on the night of December 3 and December 4 when heavy rains hit the coast of Tamil Nadu, leading to extensive flooding in various areas of Chennai. The cyclonic storm made landfall in the afternoon on December 5 in Bapatla between Nellore and Machilipatnam in Andhra Pradesh. It had earlier impacted Chennai and the adjacent areas of Tamil Nadu with maximum force on December 4. Heavy rainfall in northern districts of Tamil Nadu, including Chennai, caused road inundation and disruptions in daily life. Chennai reported 17 casualties due to rain-related incidents, prompting the closure of the airport on December 4 after a submerged runway. Operations resumed at 9 am on December 5.

The aftermath of Cyclone Michaung in Chennai is marked by widespread devastation across all 15 zones, with particular severity noted in zones such as Thiruvotriyur, Manali, Madhavaram, Tondiarpet, Royapuram, Thiru Vi Ka Nagar, Ambattur, Teynampet, and Perungudi. The cityscape bears witness to the fall of 1,442 trees, and the economic impact is stark, affecting around 3,000 companies and 10,000 MSME units. Meanwhile, in Tiruvallur district, the agricultural and horticultural sectors are grappling with the complete destruction of 25,581.18 hectares of crops. The repercussions extend beyond Chennai, encompassing 12 blocks in Tiruvallur, 5 blocks in Kancheepuram district, and 8 blocks in Chengalpattu districts in Tamil Nadu.

Furthermore, the south coast of Andhra Pradesh, encompassing areas near Prakasham, Bapatla, Machilipatnam, Patnam, and EastWest Godavari, is poised to face heightened risks of flooding due to anticipated heavy downpours.
2.2 Relief Measures GO & NGO

The Government and Non-Government actors have initiated their relief efforts. Along with active coordination among like-minded civil society organizations over social media, GO-NGO coordination has also been established. Sphere India, a national coalition of humanitarian agencies which coordinates the humanitarian organizations in the country has been releasing regular sitreps and activated the Unified Response Strategy, the mechanism with SOP for inter-agency coordination during such emergencies.

2.2.1. Government Response

- Prime Minister instructed the release of the central share of the second installment of State Disaster Response Force (SDRF) for Andhra Pradesh (Rs 493.60 crore) and Tamil Nadu (Rs 450 crore), with the first installment already released.
- Approval of the first urban flood mitigation project (Rs. 561.29 crore) for the 'Integrated Urban Flood Management activities for Chennai Basin Project' under the National Disaster Mitigation Fund, including Rs 500 crore in central assistance.
- Seven teams of the National Disaster Response Force (NDRF) have been deployed in Tamil Nadu.
- The Railway Ministry has established an emergency control cell in Chennai and a war room in New Delhi to coordinate and respond to the situation.
Tamil Nadu Government

- Health advisory issued by Tamil Nadu's Health and Family Welfare Department to prevent the spread of communicable diseases during floods.
- Contribution by ministers, DMK MPs, MLAs, and members of the Tamil Nadu IAS Officers’ Association, Indian Forest Service Association, and IPS officers to the Chief Minister’s Public Relief Fund (CMPRF).
- Tamil Nadu Chief Minister seeking interim financial assistance of Rs 5,060 crore due to the heavy damages caused by cyclone Michaung in Chennai and its neighboring districts.
- The TN government declared a public holiday on Monday and Tuesday in Chennai, Kanchipuram, Tiruvallur, and Chengalpattu districts.
- To address electricity disruptions, nearly 8,590 electricity board personnel, supervised by the electricity minister, are engaged in restoration works in the rain-affected districts of Tamil Nadu.
- To assist residents in low-lying areas, the Tamil Nadu Chief Minister stated that 350 boats are prepared for rescue operations, and 4,320 doctors are deployed to provide treatment and curb the spread of rain-related diseases.
- The TN government has set up a total of 411 relief camps across eight locations, providing food, water, and other basic amenities to 41459 people.
- More than 1,200 sanitary workers, panchayat secretaries, and block-level staff have been enlisted for massive relief work in inundated areas of Greater Chennai Corporation limits, especially its extended areas like Ambattur and Villivakkam zones, for at least the next three days.
- In Tiruvallur, 1200 Differently abled persons were provided with relief packages containing essential provisions along with bedsheets and sanitary items,
- Special camps are being organized for issuing fresh certificates to those who have lost them, and funds allocated for schools for cleaning the class rooms, toilets, water tank etc in affected districts
- Relief packages, including essential provisions, bedsheets, and sanitary items, were distributed to 6,000 affected families in Chengalpattu, 16,000 in Tiruvallur, 10,000 in Kancheepuram, and 60,000 in Chennai.
- Relief measures have been announced for all affected districts in the aftermath of the cyclone. The kin of those who lost their lives will receive a solatium of Rs 5 lakhs, while Rs 8,000 will be provided to repair damaged huts. Families experiencing loss of livelihoods will receive Rs 6,000 in assistance.
- Paddy farmers facing crop damage exceeding 33 percent will be compensated with Rs 17,000 per hectare, while the compensation for perennial crops and trees loss stands at Rs 22,500 per hectare. Additionally, Rs 8,500 per hectare will be granted for the loss of dry crops, and for the loss of cows/buffaloes, the compensation is Rs 37,500. Loss of goats and sheep will be compensated with Rs 4,000 each.
2.2.2 Humanitarian Response

- NGOs from Chennai (members of IAG) have provided relief materials directly to affected families/persons worth Rs 10,00,000/- so far.
- Caritas India, WVI, ActionAid, Seeds India, Aum Education Seva Trust, Society For Integrated Rural Development (SFIRD) and Society for National Integration through Rural Development are monitoring the situation.
- Goonj, Dream India Cyclone Relief Team, and Dreamz Foundation Trust have appealed for assistance, while Hero Insurance Broking assures swift help for vehicle damage during turbulent weather.
- KAIFA, a pioneer in disaster management, is in Thanjavur, extending support to Chennai Corporation and the Government of Tamil Nadu for flood restoration.
- ICDM is conducting chlorination activities and offering support by providing dry rations in Tiruvallur and Kanchipuram districts in Tamil Nadu.
- ADRA volunteers are engaged in cleaning cyclone-affected areas in Tiruvallur district and concurrently providing dry rations in Chennai.
- HCLF and its partners, including Ramakrishna Mission Students Home and Grey Sim Learning Foundation, are actively involved in providing relief materials and basic essentials in Chennai, Tiruvallur, and Kanchipuram districts.
- COSCO, in collaboration with Green Trust and Real Charitable Trust, is providing essential items in the Chennai district.
- Sphere India, with the support of responding agencies and state IAGs, has initiated a joint rapid need assessment as per the guidance of the IAC committee. Assessment Timelines: http://tiny.cc/Cyclone-Michaung_JRNA.
- Agencies already responding or planning to respond are updating their information in the Sphere India URS matrix for mapping of who is doing what and where. The link to the matrix is http://tiny.cc/URSMatrix_CycloneMichaung

2.3 Humanitarian Coordination

Three essential meetings were conducted in response to the aftermath of the cyclone that affected Tamil Nadu and Andhra Pradesh.

Firstly, Sphere India initiated an Inter-Agency Committee (IAC) meeting to assess the current situation, gather updates from responding organizations, and plan the forward course of action. (Minutes of Meeting)

In addition to the IAC meeting, a preparedness meeting was convened as part of the response efforts to Cyclone Michaung. This gathering aimed to evaluate the existing situation, foster collaboration among stakeholders and humanitarian agencies, discuss ongoing preparedness
activities, gather insights into potential impacts, and explore collective strategies to address challenges in the aftermath of the cyclone. (MoM)

Furthermore, in the ongoing efforts to coordinate the Cyclone Michaung Response in Tamil Nadu, Sphere India, in collaboration with HCL Foundation and other partners, facilitated an Emergency Coordination Meeting. This meeting brought together various non-governmental actors from across Tamil Nadu at the Arumbakkam Police Boys & Girls Club in Chennai and through Zoom. (MoM)

3. OVERVIEW OF JOINT RAPID NEEDS ASSESSMENT REPORT

3.1 Timeframe

In close coordination with other responding agencies, Sphere India has been actively monitoring the situation since the 3rd of December 2023. Three Situation Reports have also been released during this period. In light of the challenging circumstances, Sphere India facilitated two meetings with State Inter-Agency Groups and local responding agencies. Furthermore, an emergency Inter-Agency Committee (IAC) meeting was convened on the 5th of December 2023, with representatives from the Inter-Agency Group in Andhra Pradesh and other responding agencies. During this meeting, the IAC committee made the decision to activate the Unified Response Strategy (URS) and initiate the Joint Needs Assessment (JRNA) Process.

TABLE 1: TIME FRAME OF JRNA

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Activity</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Inviting Interest from Members for nomination of staff and volunteers for participation in data collection and Report writing</td>
<td>05-Dec-23</td>
</tr>
<tr>
<td>2</td>
<td>Finalisation of roster of data collection and WhatsApp group of all Volunteers and agencies</td>
<td>06-Dec-23</td>
</tr>
<tr>
<td>3</td>
<td>Contextualisation of Existing Tools</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Finalization of sample size, area of coverage</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Orientation to Volunteers on data collection and safety protocols</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Dissemination of Secondary Data Analysis Report</td>
<td>07-Dec-23</td>
</tr>
<tr>
<td>7</td>
<td>Release of Expression of Solidarity</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Finalisation of roster of Report Writing Team and WhatsApp Group of the Team</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Data Collection and uploading from the Field by the volunteers</td>
<td>07-12-2023</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10-12-2023</td>
</tr>
<tr>
<td>10</td>
<td>Data cleaning and compilation by Sphere India</td>
<td>11-Dec-23</td>
</tr>
<tr>
<td>11</td>
<td>Data Analysis to be shared with Report writing team</td>
<td></td>
</tr>
</tbody>
</table>
3.2 Methodology:

Based on the emergency situation, the Inter agency Coordination committee coordinated with responding NGO partners working in the affected districts of Tamil Nadu. A Joint Rapid Needs Assessment was conducted from 07th December 2023 to 10th December 2023 to identify the urgent, mid-term and long-term needs of affected community for the essential sectors of Food & Nutrition, Health, Water Sanitation and Hygiene (WaSH), Education, Shelter, Livelihood, and Protection. This would help flag the vulnerability of affected community to access basic services and entitlements in Tiruvallur, Chennai, Chengalpattu districts of Tamil Nadu.

The JRNA is the result of joint efforts from member organizations facilitated by Sphere India and with field support from local NGOs, Government led institutions, and line departments to provide the required data and information.

58 volunteers were oriented to carry out data collection using household, camp incharge, and camp inmate’s tools in these affected districts. The collected data got analyzed by the Sphere India team, and the draft report was reviewed by the respective sectoral experts. The reviewed and revised report also incorporates the inputs and insights shared by the Sectoral Committee Leads.

During JRNA, urgent needs of affected communities have been identified through direct data collection from the field, damage assessment reports prepared by the government, pre-disaster information from respective line departments, and secondary data from various sources, media reports and discussions with grassroot functionaries. Data was collected according to the listed indicators available on the specific tools/questionnaires deployed during the interviews/discussions. The methodology was based on:

a) Structured one-to-one interviews with affected households (ensuring prioritizing of random 152 households from most affected villages giving equal representation to all sections of the local community).

b) Secondary data from various media sources with observation and fact checking.

3.3 Rationale behind the Sampling for Assessment

The sample size was determined based on secondary data information available from government reports and media sources. Affected areas were chosen from different districts of Tamil Nadu. The areas were selected based on the impact data, vulnerability, heavy rainfall and in consultation with the local NGOs aware of local situations and event impact. The households
for the survey were selected to ensure the participation and response from vulnerable groups like migrants, elderly people, PwDs, children and marginalized communities living in low-lying areas, near drainage areas, slums, etc.

3.4 Primary Data Collection

The primary data collection process included household surveys and key informant interviews at the affected areas to cover households and local administration. The questions were designed to grasp the needs and challenges in the sectors of Food and Nutrition Security, Shelter, Protection, Health, Livelihood, Education, and WaSH. Household level questionnaires designed by national experts, and suggestions from local humanitarian actors were filled through the KoBo Collect Tool. To keep the assessment neutral, unbiased, and reflective of the ground reality, local volunteers were engaged, physically visiting, and recording responses from the affected population.

**TABLE 2: RESPONDENTS DATA**

<table>
<thead>
<tr>
<th>District</th>
<th>Respondents</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHENALPATTU</td>
<td>46</td>
<td>28</td>
<td>18</td>
</tr>
<tr>
<td>CHENNAI</td>
<td>30</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>TIRUVALLUR</td>
<td>76</td>
<td>21</td>
<td>55</td>
</tr>
</tbody>
</table>

Of all the affected villages and households, 3 districts and 152 households were taken as a sample for most affected community and have been assessed and documented based on the instruments/tools/questionnaires.

**Quantitative Data Analysis**

Once data was collected, Sphere India team carried out data cleaning and analysis using Microsoft Excel. The key findings were analyzed and highlighted in the form of graphs and charts to provide a better understanding of the emerging trends to the readers.

4. SECTORAL ASSESSMENT & RECOMMENDATIONS

4.1 Respondents Profile

This JRNA presents a comprehensive analysis of the survey data collected from respondents in Chengalpattu, Chennai and Tiruvallur districts of Tamil Nadu. The survey includes a total of 152 respondents, with Tiruvallur having the highest number of participants at 76, closely followed by Nellore at 56 and Chennai with 30 respondents. The distribution across these districts ensures a diverse range of perspectives from different geographical areas.
The survey data shed light on the gender distribution among the respondents. Out of the total participants, 61% (93 individuals) identified as female, while the remaining 39% (59 individuals) identified as male.

The survey revealed that the majority of respondents, accounting for 77.6% of the total, fell within the 18-60 age range. This group represents individuals in their working-age, making their opinions highly relevant for decision-making processes concerning employment, education, and societal development. Their inclusion in the survey allowed capturing their preferences, needs, and experiences, enabling policymakers to address their specific requirements effectively.

Additionally, respondents over the age of 60 constituted 9.2% of the total, and respondents below 18 years of age constituted 13.2% of the total, forming a smaller but critical segment of the surveyed population. Despite their lower representation, their insights are essential in understanding the unique perspectives and requirements of this demographic. The experiences of elderly population can provide valuable guidance for policy formulation in crucial areas such as healthcare, and social support. Including their perspectives ensures that policies and programs are designed to cater to the needs of this age group, acknowledging their contribution to society and addressing their specific challenges effectively.
GRAPH 2: AGE OF RESPONDENTS

By encompassing a diverse range of age groups, the survey ensures a comprehensive understanding of the diverse viewpoints of the population and needs across different generations. This holistic approach to data collection and analysis allows for the formulation of well-informed recommendations and decisions that encompass the requirements of individuals in their working-age as well as those above the age of 60.

The respondents belong a diverse range of socio-economic backgrounds. A major share of Scheduled Castes (SC) respondents were from Tiruvallur (58%) followed by Chennai (13%) and Chengalpattu (7%). Chennai had the highest share of Other respondents at 53%, followed by Tiruvallur (21%), and Chengalpattu (4%). The highest representation of OBC population was in Chengalpattu (52%), followed by Chennai at 13%. Scheduled Tribes (ST) were also represented in Tiruvallur (16%). General category respondents were majorly from Chengalpattu (37%) followed by Chennai (20%) and Tiruvallur (5%).

GRAPH 3: CASTE OF RESPONDENTS

The average household size in Tamil Nadu is 3.75 persons per household. The average number of males per household is 1.38 followed by number of females (1.19), number of boys (0.66) and girls (0.48).
The dominant family occupation in majority of the households is Daily Wage Labour within the affected districts of Tiruvallur (71%), Chennai (40%), and Chengalpattu (37%). This is followed by Agricultural Labour in Chengalpattu (7%) and Tiruvallur (5%). Many of the households also belonged to Vendors in Chengalpattu (33%) and Chennai (7%). Other occupations include as Domestic Help, Drivers, Business, Construction workers, etc.

Many of the surveyed households had People with Disabilities (PwD). A majority of the households with PwDs reported from Chengalpattu (28) followed by Tiruvallur (07) and Chennai (03).

The type of disabilities included visual impairment, physical disability, hearing impairment, mental disability, speech impairment, intellectual learning disabilities and others.

With respect to the current place of stay of the respondents, majority of the respondents in Chennai (97%), Tiruvallur (84%), and Chengalpattu (46%) stated that they reside in their homes. In Chengalpattu, 48% of the respondents are staying in relief camps followed by 16% in Tiruvallur and 3% in Chennai residing in relief camps. Seven percent of the respondents in Chengalpattu were staying on the roads. Addressing their immediate safe and secure shelter needs is significant for quick recovery.
4.2 FOOD SECURITY AND LIVELIHOODS

Overview

The assessment provides an overview of the food security and livelihood conditions of people living in the districts affected by the cyclone, highlighting the impact of the disaster on their nutrition and livelihood needs. It assesses the extent of damage caused by the cyclone, identifies the immediate FNS and Livelihood requirements of the affected population, their current places of stay, and proposes necessary interventions to address these needs.

During the assessment of the cyclone's impact, the situation analysis highlighted insufficient food and nutrition availability in the affected districts, characterized by inadequate food supply, limited cooking facilities, disrupted market access, financial constraints, and loss of crucial documents. The most pressing concern identified on livelihoods was the impact on daily labor work, affecting a significant majority of the population and highlighting their vulnerability. Overall, the situation analysis depicted that the affected districts are facing extensive challenges
in agriculture, livelihoods, and finances, emphasizing the need for immediate attention, support, and focused efforts to facilitate recovery and build resilience in the affected districts.

Assessment Findings

While analysing the disruption in food supply across the affected districts of Tamil Nadu due to Cyclone Michaung, it was observed that Chengalpattu, Nellore, Chennai, and Tiruvallur faced significantly severe disruptions in food supply, with over 50% respondents from each district suggesting disruption in food supplies. In Tiruvallur, 91% of the respondents suggested that they experienced disruption in food supply in the aftermath of the cyclone while 87% respondents in Chennai faced disruptions.

While understanding the reasons for disruption in Food Supplies, it was observed that in Chengalpattu and Tiruvallur districts of Tamil Nadu, non-functioning of Public Distribution Systems was the primary reason causing disruption in food supplies. In Chennai district, the major reason, as suggested by the respondents were inaccessibility to food supplies because markets were not functioning. In Tiruvallur, respondents shared that since markets were not functioning, PDS systems became inaccessible. Overall, inaccessibility has been suggested as the third major reason causing disruption in food supplies. While some respondents have suggested that Cooking Utensils were not available in the aftermath of the cyclone causing significant disruption to the affected families.
To understand the impact of the disaster on the consumption levels of the affected population, an analysis was conducted by comparing the daily meal intake before and after the calamity. This assessment aimed to determine the changes in the number of meals consumed per day by the respondents following the disaster. As per the responses received, it was observed that respondents of the affected districts of Tiruvallur and Chennai, were having 3 meals per day on an average, before the cyclone. An approximate of 48% respondents in Changalpattu, shared they were able to consume only two meals per day. Few respondents shared they were consuming more than 3 meals in a day, before the disaster impacted the district.

Post disaster, significant impact was observed in the number of meals intake. Chennai district of Tamil Nadu), where majority respondents were consuming 3 meals per day were reduced to two meals per day. While in Tiruvallur (Tamil Nadu), earlier majority respondents were consuming 3 meals per day, after the disaster, majority respondents were consuming only one meal per day. In other affected district of Chengalpattu, majority respondents continued to consume 2 meals...
per day, after the disaster. Thus, it can be inferred that post disaster per day consumption rates were majorly impacted in Tiruvallur district of Tamil Nadu.

Additionally, it was noted that the stock of food items held by the affected individuals was impacted by the cyclone. Over 70% of the respondents from all the three districts of Tamil Nadu shared that the available food stock was affected by the cyclone. To identify the period for which the current stocks will last, it was observed that, Tiruvallur (88%) and Chennai (97%) of the respondents shared that the stock would last for up to 1-2 weeks only. 46% of the respondents from Chengalpattu shared that the stocks might last for up to 2-3 weeks. Only few respondents shared that the stocks might last for more than 4 weeks.

To understand the accessibility of nutrients through fresh vegetables, it was seen that over 75% of the respondents from Tiruvallur in Tamil Nadu, had no access to fresh vegetables. 40-45% of respondents from Chennai and Chengalpattu have shared that they had no access to fresh vegetables.

Disruption were also seen in the supply of government nutrition service to children, adolescent girls, pregnant women and lactating mothers. 33% of the respondents from Chennai shared that they were facing disruptions in supply of government nutrient services. While majority respondents in all the districts shared that they were not facing any disruption in the supply of such nutrients, 48% respondents from Chengalpattu shared they were not entitled to such schemes and services. 27% of respondents from Chennai shared that they were not aware of such services.
Broadly analysing the primary concerns raised by respondents in the Food and Nutrition Security sector, several key issues emerged. These encompassed non-availability of food materials, notably affected due to the cyclone’s impact on supply chains. The absence of cooking facilities and utensils compounded the challenges, hindering the preparation of meals even when supplies were accessible. Accessibility to food supply services became a pressing issue, aggravated by disrupted transportation networks. Financial constraints were prevalent, with many lacking the necessary funds to purchase food. Moreover, the loss of ration cards or identification further complicated access to essential food provisions. The crisis also triggered price hikes, fostering black markets and exacerbating the financial strain on affected communities. Online delivery systems faltered, adding to the hurdles in securing food supplies. Overall, these multifaceted challenges significantly hampered the functionality and resilience of the Food and Nutrition Security sector in the aftermath of the cyclone. In all the three districts of Tamil Nadu, non-availability of food material and absence of cooking facilities were the primary concerns.
Livelihood

The cyclone had a significant impact on the livelihood of the affected people in the 3 surveyed districts of Tamil Nadu. 92% of the respondents in Tiruvallur (Tamil Nadu) shared that their livelihood was affected. 65-75% of the respondents from Chennai shared that their livelihood was affected.

To understand the impact of disaster on the livelihoods of the affected population, the average monthly income of the affected respondents was inquired. It was observed in Tamil Nadu, 50% respondents from Tiruvallur and 33% of the respondents from Chennai were earning less than Rs 5,000 per month. While 40-60% of the respondents from Tamil Nadu were earning between Rs 5,000-Rs 10,000 per month.
The primary concerns regarding livelihoods, as identified across the affected districts in Tamil Nadu, centered on several key areas. These encompassed substantial losses in businesses, significant income reductions, particularly affecting daily wage laborers, setbacks in fishing activities, impacts on animal husbandry, and notable losses in agricultural land. These concerns highlighted the wide-ranging effects of the cyclone on various sectors crucial to the economic stability and sustenance of the affected communities in both states.

In Tiruvallur and Chennai (Tamil Nadu), loss of daily wages/income was the primary concern followed by loss of employment. In Changalpattu district of Tamil Nadu, employment loss and losses in business were primary concerns, post the disaster.

In terms of the support received from various sources, in the aftermath of the cyclone, 41% of the respondents from Chengalpattu (Tamil Nadu) suggested that they received livelihood support. While 20% of the respondents from Chennai suggested the same. Only 9% of the respondents in Nellore shared that they received livelihood support. In Tiruvallur, only 7% of the respondents suggested that they received livelihood support.

In terms of availing government schemes related to livelihood, 38% of the respondents shared that they availed PDS scheme. In Tamil Nadu, majority respondents availed MNREGA scheme, particularly Chengalpattu and Tiruvallur. Respondents from Chennai availed PDS scheme primarily and had electricity connections.
Urgent Needs

1. **Urgent Food Supply**: Districts that have least food reserves to survive the disaster should be provided with sufficient food supply, and accessibility to adequate and nutritious food to shall be the priority. Emergency food distribution programs can be implemented to ensure that all affected and vulnerable population have adequate food supplies.

2. **Livelihood Support to Vulnerable Groups**: Of the affected population, persons employed in informal sectors or those working as daily wage labour are the most vulnerable in aftermath of the cyclone and thus require immediate livelihood support. Thus, special attention should be given to the groups without stable income sources.

**4.3 WATER SANITATION AND HYGIENE (WASH)**

**Overview**

The assessment provides an overview of the water and sanitation conditions of communities affected by the cyclone in Tamil Nadu, highlighting the impact of the disaster. It assesses the extent of damage caused by the cyclone, identifies the immediate WaSH requirements of the affected population, their access to safe sanitation facilities and proposes necessary interventions to address these needs.

**Assessment Findings**

In analyzing the pre- and post-disaster sources of drinking water in Tamil Nadu (TN), a notable shift in reliance on various water sources is evident after the disaster. Post-disaster, households in TN predominantly resort to borewells/hand pumps (11% TN) and public taps (38% TN), indicating increased dependence on local groundwater and community water supply systems.
Conversely, reliance on household piped water supply (22% TN) and bottled water (19% TN) reduces post-disaster, possibly due to infrastructure damage affecting delivery systems.

Noteworthy is the emergence of alternative sources post-disaster, like water tankers (13% TN), highlighting immediate relief efforts. Additionally, the utilization of protected rainwater tanks becomes more pronounced as a backup source.

Post disaster usage of borewell/handpump in Tamil Nadu stands at (10%) respectively. The usage of river water (7%) and public tap usage (34%) household piped water supply (2%) open well (3%) and closed well (1%), water tanker usage (25%), bottled water (21%), lake/pond and canal (1%) and others at (9%).

<table>
<thead>
<tr>
<th>PRE AND POST DISASTER SOURCES OF DRINKING WATER</th>
</tr>
</thead>
<tbody>
<tr>
<td>TAMIL NADU POST DISASTER</td>
</tr>
<tr>
<td>Borewell/Handpump</td>
</tr>
<tr>
<td>River</td>
</tr>
<tr>
<td>Public Tap</td>
</tr>
<tr>
<td>Household Piped Water Supply</td>
</tr>
<tr>
<td>Open Well</td>
</tr>
<tr>
<td>Closed Well</td>
</tr>
<tr>
<td>Water Tanker</td>
</tr>
<tr>
<td>Bottled Water</td>
</tr>
<tr>
<td>Lake/Pond/Canal</td>
</tr>
<tr>
<td>Others</td>
</tr>
</tbody>
</table>

GRAPH 20: PRE- AND POST DISASTER SOURCES OF DRINKING WATER

The graph on filtered water consumption post-disaster showcases varying adoption rates across surveyed regions. Tiruvallur demonstrates the highest utilization at 27%, potentially indicating better access to or availability of filtration systems. Chengalpattu follows at 16%, while Chennai exhibits a moderate adoption rate of 11%. The figures suggest disparities in access to filtered water sources, emphasizing the need for increased access or distribution of filtration systems, especially in areas with lower adoption rates to ensure safer drinking water post-disaster.
In Tamil Nadu, close to 4% of the respondents at Chengalpattu, 50% at Chennai and Tiruvallur at 4% reported no access to soap and water. In Tamil Nadu, 7% (Chengalpattu), 7% (Chennai) and 3% (Thiruvallur). In addition, as per respondents who mentioned that facility for handwashing was available but without soap in Tamil Nadu 2% (Chengalpattu), 3% (Chennai) and 1% (Thiruvallur) mentioned facility for handwashing being available without any soap. As per respondents, designated facility being there with no availability of water was reported at 30% (Chengalpattu), Chennai (13%) and 1% Thiruvallur in Tamil Nadu. Lastly, the accessibility to both facility and water for handwashing along with soap was reported by Chengalpattu, (27%) at Chennai and 91% at Tiruvallur in Tamil Nadu.

<table>
<thead>
<tr>
<th>Location</th>
<th>No facility and no designated place for soap and water</th>
<th>No facility but a designated place for soap and water</th>
<th>Yes, but soap not available</th>
<th>Yes, but water not available</th>
<th>Yes, with both soap and water</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamil Nadu Chengalpattu</td>
<td>4%</td>
<td>7%</td>
<td>2%</td>
<td>30%</td>
<td>57%</td>
</tr>
<tr>
<td>Tamil Nadu Chennai</td>
<td>50%</td>
<td>7%</td>
<td>3%</td>
<td>13%</td>
<td>27%</td>
</tr>
<tr>
<td>Tamil Nadu Tiruvallur</td>
<td>4%</td>
<td>3%</td>
<td>1%</td>
<td>1%</td>
<td>91%</td>
</tr>
</tbody>
</table>

Post-disaster, a significant shift in defecation practices is evident in Tamil Nadu (TN). The reliance on household toilets declines (32% TN) while open defecation increases (38% TN), indicating infrastructure damage affecting sanitation facilities. Community toilets witnessed a decrease in TN (30%), possibly due to local infrastructure resilience disparities.
Pre-disaster, both states primarily relied on household toilets (55% TN), emphasizing established sanitation infrastructure. Community toilets were less utilized, yet the practice was more prevalent in TN (41%). Open defecation was notably higher pre-disaster in TN (63%).

<table>
<thead>
<tr>
<th>TAMIL NADU</th>
<th>POST DISASTER</th>
<th>PRE DISASTER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household toilet</td>
<td>32%</td>
<td>36%</td>
</tr>
<tr>
<td>Community toilet</td>
<td>30%</td>
<td>27%</td>
</tr>
<tr>
<td>Open areas</td>
<td>38%</td>
<td>41%</td>
</tr>
</tbody>
</table>

**GRAPH 23: PRE AND POST DISASTER DEFECATION PRACTICE**

In Tamil Nadu (TN), the post-disaster scenario illustrates a substantial shift in garbage disposal practices. There’s a noticeable decrease in designated sweepers’ efficiency in both states post-disaster (TN: 37% to 21%), indicating disrupted waste management systems. Furthermore, a considerable increase in street littering is evident (TN: 12% to 28%), reflecting the breakdown of organized waste collection.

Interestingly, while designated disposal areas remain consistent in TN (37% pre, 36% post), post-disaster. The practice of burying or burning garbage near homes intensifies in TN (3% post), showcasing a coping mechanism amidst disrupted waste disposal services.

**GRAPH 24: GARBAGE DISPOSAL PREDISASTER & POST DISASTER**

The survey highlights significant challenges faced by adolescent girls and women, revealing disparities in Tamil Nadu (TN). At 24% in TN, showcasing a substantial disparity. Similarly, 29% struggle with unavailability of menstrual hygiene products. Privacy concerns and limited changing
spaces affect 18% in TN. However, TN exhibits higher ease with 30% reporting no difficulties. The disposal hesitancy exists at 6% TN. Notably, a minority face the absence of women/girls in the household 3% TN, impacting access to support networks.

**DIFFICULTIES FACED BY ADOLESCENT GIRLS AND WOMEN**

- No response: 13%
- No women/girls present at household: 3%
- No difficulty: 30%
- Hesitant to dispose the pads/cloths: 6%
- No space to change/privacy concern: 18%
- Unavailability of pads/menstrual hygiene products: 29%
- No water & soap available for washing and cleaning: 24%

**GRAPH 25: DIFFICULTIES FACED BY ADOLESCENT GIRLS AND WOMEN**

The figure reflects a concerning lack of early warning awareness among surveyed areas post-disaster. Chengalpattu stands out with the highest early warning reception (54%), indicating a relatively better-informed community. Contrastingly, Chennai (17%), Tiruvallur (7%) depict significantly lower early warning receipt, signifying inadequate dissemination or accessibility to pre-disaster alerts. Alarmingly, in Chennai, the majority were unaware (80%). Urgent attention is needed to enhance early warning systems and ensure effective communication channels, especially in areas like Chennai, to bolster disaster preparedness and response.

**RECEIVED EARLY WARNING/AWARENESS MESSAGE**

- Chengalpattu: 54% YES, 39% NO, 7% DON'T KNOW
- Chennai: 49% YES, 80% NO, 3% DON'T KNOW
- Tiruvallur: 7% YES, 89% NO, 4% DON'T KNOW

**GRAPH 26: RECEIVED EARLY WARNING/AWARENESS MESSAGE**
The visible solid waste percentages post-disaster is notable across surveyed districts. Chengalpattu (76%) and Chennai (70%) exhibit the highest visible solid waste, signifying potential environmental hazards and sanitation issues. Tiruvallur (34%) shows a comparatively lower percentage but remains affected.

In Tamil Nadu’s district of Tiruvallur 3% of the respondent’s mention having access to jerry cans, 86% utilizing buckets, 61% using buckets with lids and 37% used large water storage facilities. At Chennai 7% mentioned using jerry cans, 37% buckets, 20% buckets with lids 10% large water storage and remaining at none. At Chengalpattu 4% utilizing jerry cans, 80% using buckets for storage purposes, 33% buckets with lids and 7% using large water storage facility.

The data reveals a stark water scarcity post-disaster in surveyed regions: Tiruvallur (70%), Chennai (53%) and Chengalpattu (33%) at the household level.
In Tamil Nadu, the non-availability of safe drinking water affects a significant 63%, highlighting a critical issue. Around 57% face insufficient water quantity concerns. Damage to water supply infrastructure is notable in Tamil Nadu (24%). Privacy in bathing areas is a concern for 5% in TN. Power supply challenges for drinking water schemes impact around a quarter of respondents in both states (22% TN). Damage to waste disposal systems is relatively lower but present. Limited handwashing facilities impact 1% in TN, and damaged toilets affect 9% in TN.

**GRAPH 30: MAIN CONCERNS RELATED TO WASH**

Urgent Needs

To address the urgent needs in the WaSH sector, the following actions should be taken:

- Immediate repair and restoration of damaged water supply infrastructure, particularly in areas heavily reliant on borewells/hand pumps and public taps. This includes a focus
on reviving household piped water supply systems and ensuring access to safe and sufficient drinking water.

- Increased provision of alternative water sources like water tankers and protected rainwater tanks, especially in regions facing acute shortages, such as Tiruvallur.
- Address disparities in filtered water access by distributing filtration systems to areas with lower adoption rates, ensuring safer drinking water post-disaster.
- Urgent establishment of handwashing stations with soap and water accessibility, particularly in areas reporting limited or no facilities. Enhanced focus on soap provision and water availability to promote proper hygiene practices.
- Reinforcement of waste disposal systems, including designated disposal areas and organized waste collection services, to mitigate street littering and hazardous waste practices observed post-disaster.
- Targeted support for adolescent girls and women, ensuring access to menstrual hygiene products, privacy, and facilities for washing and changing.
- Urgent attention to enhancing early warning systems and communication channels, especially in areas with low early warning reception (e.g., Chennai), to bolster disaster preparedness and response.
- Provision of appropriate storage containers like jerry cans, buckets with lids, and large water storage facilities, addressing the disparities observed across districts to ensure proper water storage post-disaster.
- Prioritize addressing critical issues such as safe drinking water scarcity, damaged infrastructure, sanitation, hygiene facilities, and waste management systems based on localized needs assessments in each surveyed district.

4.4 EDUCATION

Overview

The assessment provides an overview of the education conditions in communities affected by the Michuung cyclone, focusing on the districts Chengalpattu, Chennai, and Tiruvallur in Tamil Nadu. It evaluates the status of educational facilities and educational materials, shedding light on the challenges faced. Additionally, the analysis identifies the types of materials or support needed to address the educational needs arising from the impact of the cyclone in these districts. Particularly data analysis provides critical insights into the educational landscape of specific
districts, with a focus on Chengalpattu (46 respondents), Chennai (30 respondents), and Tiruvallur (76 respondents) from the state of Tamil Nadu.

**Assessment Findings**

In Chengalpattu district, only 39% of respondent report that schools are fully operational, with Tiruvallur and Chennai trailing at 37% of respondents and 33% of respondents, respectively. The non-functioning schools cite reasons such as power shortages, schools converted into relief camps in Tamil Nadu, and inundation. Notably, 46% of respondents in Chengalpattu district, followed by 25% in Tiruvallur and 20% in Chennai reported that schools are inactive. Among 152 data points collected in Tamil Nadu, 32% of families reported having no school-going children.

The analysis underscores substantial disparities in school functionality across districts in Tamil Nadu, attributing challenges like power shortages and school conversions to relief camps.

In Chengalpattu district, 41% of the 39 respondents reported damaged education materials, with a similar trend in Chennai, where 23% of the 16 respondents noted damage. In Tiruvallur district, 37% of the 47 respondents expressed concerns about the condition of their educational materials.

The data analysis highlights that Chengalpattu district in Tamil Nadu emerge as the most affected, with 41% of respondents, respectively, reporting damaged education materials. These findings underscore the urgency of targeted interventions in these districts to address the pressing issue of compromised educational resources.
The survey data reveals that in Chengalpattu, 12% of the respondents expressed the need for educational support, followed by 7% in Chennai and 6% in Tiruvallur. These findings underscore the importance of addressing educational support needs, particularly in Chengalpattu district, to enhance the overall educational well-being of the communities.

When questioned about the type of educational support needed, respondents from Tiruvallur emphasized the demand for school supplies, with 26% opting for School Supplies, 24% expressing a need for textbooks, 4% indicating a requirement for transportation, and 1% seeking assistance for persons with disabilities. In Chengalpattu, 20% of the 46 respondents expressed a demand for textbooks, while 9% sought school supplies. In Chennai, 13% of the 30 respondents indicated needs for both textbooks and school supplies. These findings underscore the diverse educational support needs across districts and emphasize the importance of tailored interventions to address
the specific requirements identified in each region. The need for assistance for persons with disabilities in Tiruvallur should be specially noted.

**Urgent needs**

1. **Infrastructure Restoration:** A significant percentage of schools are not fully operational, emphasizing the urgent need to address issues such as power shortages, relief camp conversions, and other factors affecting school functionality.

2. **Damaged Education Materials:** A considerable number of respondents report damaged education materials, indicating an immediate need to address and replenish compromised educational resources.

3. **Educational Support:** There is a notable demand for educational support and need for assistance. Urgent efforts are required to enhance the overall educational well-being of communities.

4. **Need for study materials:** School supplies and textbooks are identified as crucial needs, emphasizing the urgency of ensuring students have access to necessary learning materials.

5. **Persons with Disabilities:** Specific attention is required for the needs of persons with disabilities, highlighting the importance of inclusive educational support programs.

By addressing these urgent needs, it will be possible to ensure equitable access to quality education, expedite the recovery process, and mitigate the long-term impact of the cyclone on the education sector in the affected areas.
4.5. HEALTH

Overview
The assessment provides an overview of the health conditions of communities affected by the cyclone, highlighting the impact of the disaster. It assesses the extent of damage caused by the cyclone, identifies the immediate health requirements of the affected population, and proposes necessary interventions to address these needs.

Assessment Findings
The immediate needs in the affected districts of Tamil Nadu include emergency medical assistance, including emergency medical teams, medicines, and medical supplies, required to treat communicable diseases like fever and cold and limit the spread of waterborne diseases. The restoration of damaged healthcare facilities and provision of mobile medical units are essential currently. Mental health and psychosocial support services should also be made available to address trauma and stress among affected individuals.

The highest percentage of household members reportedly facing health issues is in Chennai district at 60%, followed by Chengalpattu (43%), and Tiruvallur (33%) district.

![Graph showing HH Members facing Health Issues](image)

Graph 35: HH Member Facing Health Issue - District Level

Ninety-two percent of the households surveyed in Tiruvallur are suffering from communicable diseases like cold, flu, and conjunctivitis following the cyclone. Chennai also has a high percentage of household members (72%) suffering from communicable diseases. Chengalpattu (45%) also has considerable population suffering from communicable diseases in the aftermath of Cyclone Michaung. Fungal infections have been reported from the surveyed districts with the highest in Chennai (28%), followed by Chengalpattu (10%) and Nellore (4%). Water borne diseases have been reported from Chennai (22%), and Chengalpattu (5%). Mental trauma has been reported from all the surveyed districts with the highest in Chennai (28%) and Tiruvallur (4%). Other health
problems such as body pain, chicken pox, stomachache, nausea, etc. have also been reported from Chennai (22%), Chengalpattu (13%), and Tiruvallur (8%).

In terms of access to the nearest health facility, 93% reported lack of access to nearest health facility in Tiruvallur followed by 77% in Chennai, and Chengalpattu (54%). Thirty-seven of the population reported they were able to access nearest health facilities in Chengalpattu as well as Chennai (10%). The sufficient information on the nearest health facility was reported unavailable in certain instances for Chennai (13%) and Chengalpattu (9%).

Fifty-two percent from Chengalpattu reported that they received health support after the cyclone disaster from various sources. Similarly, Chennai (7%) and Tiruvallur (1%) respondents also stated that they received health support post cyclone.
Urgent Needs

1. Access to Medical Needs and Health Facilities: The provision of medical assistance and access to health facilities is of utmost importance. The affected population requires healthcare services to address any injuries, chronic health conditions and prevent water-borne diseases. Timely access to medical aid, including medication, medical professionals, and necessary treatments, is crucial for their physical and mental well-being.

2. Support for managing psychosocial well-being and combating mental trauma. The traumatic experience endured during the cyclone have taken a toll on the mental health of the respondents, making psychosocial support an essential aspect of humanitarian assistance. Addressing these urgent needs will greatly contribute to the overall recovery and well-being of the affected population.

3. Improved WaSH facilities can also help in improving the health conditions. Clean water for drinking and bathing and access to toilets is critical to maintain hygienic conditions and prevent the spread of communicable diseases.

4. Restoration of Health Facility Centres: Reconstruction and restoration of nearest district health facilities damaged by Cyclone Michaung is essential to serve the long-term health needs of the affected community.

4.6 SHELTER

Overview

The assessment provides an overview of the housing and shelter conditions of communities affected by the cyclone, highlighting the impact of the disaster. It assesses the extent of damage
caused by the cyclone, identifies the immediate shelter requirements of the affected population, their current places of stay, and proposes necessary interventions to address these needs.

**Assessment Findings**

**Housing Typology:** In Chengalpattu district of Tamil Nadu, 59% of respondents reported living in temporary/kutcha houses. In Chennai and Tiruvallur district, 50% and 33% of respondents, respectively, are living in kutcha houses.

**Impact on Shelter due to Cyclone:** 92% of respondents from Tiruvallur, 93% of respondents from Chennai and 54% of respondents from Chengalpattu reported that their house was damaged due to cyclone.

**Current Status of House:** When asked about the status of their houses, those who reported that their house is damaged, 32% of respondents from Chengalpattu, 50% of respondents from Chennai and 31% from Tiruvallur said that their houses were partially collapsed. Additionally, 80% from Chengalpattu, 43% from Chennai and 13% from Tiruvallur reported that their houses were inundated or drowned in water. Furthermore, 9% of respondents from Tiruvallur and 4%
from Chennai stated that their houses were unsafe to live in and needed repair. Moreover, 4% from Chennai and Chengalpattu and 23% from Tiruvallur mentioned that their houses were contaminated with mud and debris. Lastly, 21% of respondents from Tiruvallur and 11% from Chennai reported the loss of household goods due to the disaster.

**CURRENT STATUS OF HOUSE**

- **Lost Household Goods**: 11% in Tiruvallur, 4% in Chennai, and 4% in Chengalpattu.
- **Contaminated by mud and debris**: 23% in Tiruvallur, 9% in Chennai, and 4% in Chengalpattu.
- **House unsafe to live, needs repair**: 4% in Tiruvallur, 4% in Chennai, and 9% in Chengalpattu.
- **House inundated or drowned in water**: 13% in Tiruvallur, 43% in Chennai, and 3% in Chengalpattu.
- **House partially collapsed**: 31% in Tiruvallur, 50% in Chennai, and 32% in Chengalpattu.

**STATUS OF TOILET**

- **Tiruvallur**: 12% all members have access and use it, 22% all members have access but some use it, 64% toilet damaged/inundated, 2% do not have toilet.
- **Chennai**: 1% all members have access and use it, 20% all members have access but some use it, 13% toilet damaged/inundated, 17% do not have toilet.
- **Chengalpattu**: 41% all members have access and use it, 52% all members have access but some use it, 4% toilet damaged/inundated, 2% do not have toilet.

**GRAPH 41: CURRENT STATUS OF HOUSE**

**Status of Toilets:**

In Chengalpattu, 41% of households have all members with access to and using a toilet, while 52% have access, but only some use it. Only 4% reported damaged or inundated toilets, and 2% don't have a toilet. In Chennai, 70% have all members with access and use the toilet, 13% have access but not all use it, 17% reported damaged toilets. In Tiruvallur, 12% have all members using a toilet, 1% have access but not all use it, 22% reported damaged toilets, and a higher 64% don't have a toilet. Overall, Chennai generally has better toilet access, while Tiruvallur faces challenges with damaged toilets and a higher percentage without access to toilets.
Evacuation Status:

In assessing the evacuation status of respondents following the disaster, it was observed that 54% of households from Chengalpattu, 60% from Chennai and 42% of respondents from Tiruvallur temporarily evacuated from their houses due to the disaster. Among those, in Chengalpattu, 28% of households evacuated before the event, 68% during the event, and 4% after the event. Chennai had 17% before, 72% during, and 11% after, while Tiruvallur reported 13% before, 72% during, and 16% after evacuation. Notably, Chengalpattu had the highest evacuation rate during the event, but the lowest after, while Chennai and Tiruvallur showed similar trends in evacuation rates during and after the event.

GRAPH 43: EVACUATION STATUS

In the aftermath of the disaster, accommodation patterns varied across Chengalpattu, Chennai, and Tiruvallur. In Chengalpattu, 72% of respondents reported staying in relief camps, while 28% sought refuge at friends' or relatives' places. Chennai had a different trend, with only 6% in relief camps and a majority of 89% staying with friends or relatives. Similarly, Tiruvallur showed a higher reliance on friends or relatives, with 78%, while 22% shifted to relief camps.

GRAPH 44: ACCOMODATION IN AFTERMATH OF DISASTER
Require support for repairing House:

![Graph: Require Assistance for Repairing House]

In the aftermath of the disaster, the need for assistance in rebuilding houses is evident across Chengalpattu, Chennai, and Tiruvallur. In Chengalpattu, 44% of respondents expressed the need for support in rebuilding, followed closely by Chennai at 43%. Tiruvallur exhibited the highest demand, with a substantial 79% of respondents requiring assistance in rebuilding their houses. These percentages underscore the significant challenges faced by the affected communities in restoring their homes and emphasize the urgent need for external support in these districts.

Power Shortage:

The assessment findings indicate that power shortage has emerged as a significant concern both during and after the days of the cyclone impact. 45% from Tiruvallur, 11% from Chennai and 14% from Chengalpattu reported experiencing issues related to power shortage.

![Graph: Reported Power Shortage]
Top 3 NFI Needs:

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clothing</td>
<td>30%</td>
</tr>
<tr>
<td>Tarpaulin</td>
<td>43%</td>
</tr>
<tr>
<td>Bedding/Blanket</td>
<td>73%</td>
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</tbody>
</table>

In Tamil Nadu, a considerable portion of respondents expressed specific needs following the cyclone impact. Approximately 73% reported a requirement for bedding/blanket, 43% expressed the need for Tarpaulin, and 30% indicated a necessity for clothing.

Urgent Needs

1. Swift provision of blankets, sleeping bags, and mats to ensure that affected families have the necessary bedding materials for a secure and comfortable sleep.
2. Expedited deployment of prefabricated or easily assembled temporary shelter structures to offer immediate and secure housing solutions for those whose homes have been damaged or rendered uninhabitable.
3. Urgent distribution of hygiene kits, including toiletries and sanitation supplies, to maintain health and hygiene standards in temporary shelters and prevent the outbreak of diseases.
4. Provision of portable and rechargeable emergency lighting solutions to ensure visibility and safety in temporary shelters, particularly during the night.
5. Immediate supply of water purification kits to enable access to clean and safe drinking water, addressing a critical need in the aftermath of a disaster.
6. Rapid distribution of emergency repair kits equipped with tools and materials necessary for quick repairs to damaged houses, empowering affected communities to make essential improvements to their living conditions.

4.7 PROTECTION

Overview
The Protection Sector analysis reveals critical protection issues, including security concerns due to damaged shelters, limited access to security mechanisms, family separations, power outages,
privacy challenges, inadequate bathing/toilet facilities, limited access to menstrual hygiene products, and exclusion of SC/ST and PwD communities from relief camp services. Urgent action is needed to address these gaps and ensure the safety, dignity, and well-being of the affected populations.

**Assessment Findings**

In Tamil Nadu, 65% of respondents reported security issues due to shelter damage, and 38% identified challenges related to power supply. Moreover, 18% of respondents expressed concerns about domestic violence, and 16% were worried about limited access to security mechanisms. There were no articulated concerns regarding the accessibility of relief camps for transgender individuals. Only 1% of respondents expressed concerns about the accessibility of relief camps for SC/ST and PwD.

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**GRAPH 48: KEY CONCERNS REGARDING PROTECTION**

In the examination of the sense of insecurity among children and women in cyclone-affected areas, the assessment reveals notable concerns. In Chengalpattu district, 54% of respondents reported that women and children are experiencing feelings of insecurity. Similarly, in Chennai district, 27% of respondents echoed these concerns. Furthermore, 13% of respondents in Tiruvallur reported instances where children and women feel unsafe. These findings emphasize the pervasive nature of the perceived lack of safety among women and children in various cyclone-affected regions.
As per assessment findings, 61% of respondents indicated a pressing need for food provisions for children, underscoring a significant concern. Additionally, 48% of respondents in Tamil Nadu identified the imperative requirement for safety and security measures for children, while 38% emphasized the necessity for educational support, 39% of respondents reported need of healthcare for children. These assessment findings underscore the diverse and immediate needs pertaining to children's well-being in Tamil Nadu, necessitating targeted interventions in the areas of food security, healthcare, education, and safety measures.
In Tamil Nadu, 76% of respondents expressed apprehension regarding general safety and security, illustrating a widespread sentiment of unease. Additionally, 57% of respondents articulated concerns about access to protection services, highlighting a perceived deficit in available safeguards. Furthermore, 18% of respondents voiced specific concerns about the safety and security of women, while 8% reported similar apprehensions regarding children's safety. Notably, a relatively lower percentage of respondents, specifically 5%, expressed concerns about the psycho-social well-being of individuals in Tamil Nadu.

**Top Protection Need: Tamil Nadu**

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<tr>
<th>Need</th>
<th>Percentage</th>
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<tr>
<td>Safety and security for children</td>
<td>8%</td>
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<tr>
<td>Psycho-Social well-being</td>
<td>5%</td>
</tr>
<tr>
<td>Safety and security for women</td>
<td>18%</td>
</tr>
<tr>
<td>General safety and security</td>
<td>76%</td>
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<tr>
<td>Access to protection services</td>
<td>57%</td>
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</table>

**GRAPH 51: TOP PROTECTION NEEDS OF COMMUNITY**

**Urgent Needs**

Based on the provided information, the urgent needs in the protection sector for addressing the impact of Cyclone Michaung in Tamil Nadu includes:

1. Recognizing the widespread concern, urgent measures are required to enhance general safety and security, addressing the apprehensions of 76% of respondents in Tamil Nadu.
2. There is a pressing need to enhance access to protection services, as indicated by concerns raised by respondents in Tamil Nadu.
3. Tailored interventions and safeguards are urgently needed to address specific concerns regarding the safety and security of women in the region.
4. Targeted initiatives to address psycho-social well-being are crucial, acknowledging the expressed concerns in the state.
5. Urgent coordination efforts are necessary among various stakeholders, including government agencies, NGOs, and community leaders, to ensure a comprehensive and holistic approach to protection in Tamil Nadu.
4.8 RELIEF AND RECOVERY NEEDS

Assessment Findings

The most critical urgent relief needs requested by respondents include food assistance in Tamil Nadu (72%) to address immediate food security challenges. The provision of shelter was also brought up as a significant concern, with 66% of respondents expressing an urgent need for safe and secure housing. Clean drinking water and sanitation are also pressing needs for the affected population with 52% of the respondents citing the same Tamil Nadu. Medical and Health Support is also listed by respondents as urgent relief needs.

The most important recovery needs for the affected areas include housing repair and reconstruction in Tamil Nadu (34%). This is followed by livelihood support (28%). Safety (17%) is also cited as an important recovery need by respondents. Addressing these relief and recovery needs is crucial to effectively support the affected populations and facilitate their recovery process.
5. RECOMMENDATIONS

LIVELIHOOD

Short-term:

- Dry ration food kits including nutrition kits to be provided to meet ration shortage/fill the gap of inability to purchase the food.
- Special provision of nutrition kits to be created for pregnant women, lactating mothers, children, sick and elderly.
- Provide immediate cash-for-work programs, converged with MGNREGA, and increase the wage rate to compensate for wage loss, creating employment opportunities for affected individuals with primary focus on debris clearance, infrastructure repair, and restoration activities.
- Distribute agricultural inputs and livestock support to farmers and pastoralists to revive agricultural activities and ensure food security.
- Expedite ex-gratia assistance as per SDRF norms and provide special provisions for families who have lost key earning persons, enabling them to initiate new livelihood activities and rebuild their sources of income.

Mid-term:

- Detailed nutrition assessment of the affected communities especially focusing on infant and young children, adolescent girls, pregnant/lactating mothers, and elderly, PWD, single women headed households in a conflict scenario.
- Design and enrollment of GO-NGO partnership for recovery of food security and nutrition and livelihoods of the affected population utilizing governmental support mechanisms and resources.
- Facilitate access to microfinance and credit facilities, including providing access to public credit, for small businesses and entrepreneurs without guarantees and assets for enabling the affected population to rebuild and diversify local economies.
- Daily wage workers are numerous in the areas, and they can be engaged in the various capacities related to cyclone recovery. This is an opportunity for skill development units to run short team course to convert them into skilled human resource to diversify their income sources.
- Form livelihood committee at village and create pooled funds to provide support to affected communities to restart their livelihoods.

Long-term:

- Encourage the establishment of community-based cooperatives and value chains to enhance market linkages and improve income generation prospects.
Advocacy with Government and linkages with food security social protection schemes of the government.

Linkage with MGNREGA, Rastriya Krishi Vikas Yojana (RKVY) for all round development of agriculture and allied sectors for food security.

Promote sustainable and climate-resilient livelihood options such as eco-tourism, agroforestry, and renewable energy projects.

Veterinary department should ensure seasonal vaccine and veterinary care to the injured and remaining livestock.

Strengthen vocational training and technical education programs to equip the workforce with skills in emerging sectors and promote economic diversification.

**HEALTH**

**Short-term:**

- Conduct health assessments and provide emergency medical care, including mobile clinics and medical supplies, to address immediate health needs.
- Mobile Van Health Facilities should be provided in hard-to-reach areas.
- Awareness about basic hygiene promotion hand washing is critical to help prevent the spread of illness and disease.
- Implement disease surveillance systems and early warning mechanisms to monitor and prevent outbreaks of waterborne diseases, vector-borne illnesses, and other health risks.
- Provide mental health and psychosocial support services to individuals and communities affected by the cyclone. Grief and shock are normal in the immediate aftermath of a natural disaster; psychological counselling support is required.
- Special care should be given to people with disability, elderly, pregnant women, and children in terms of accessibility to health services.
- Removal of sludge and other waste should be done properly to reduce risk of long-term diseases. The contamination of water with faeces, silt and debris are likely to affect the areas, leading to rise in cases of diarrhoea, dysentery, and other water-borne diseases. Vaccines are recommended for people, where poor sanitation and unsafe water are common.
- Women/adolescent girls on their period are at greater risk especially the ones who are relocated. No access to clean cloth or sanitary napkins as absorbents of menstrual blood can be there in shelter homes. Awareness of safe and easy access to sanitation, supply of water, free distribution of sanitary napkins/ culturally appropriate sanitary towels to be ensured. Provision of sanitary napkins as essential items.
- Chlorination/disinfection of the water sources at the health facility can be recommended.
- Bed nets can be made available for the indoor patients in mosquito breeding zones.
Mid-term:

- Strengthen and upgrade health facilities and infrastructure in affected areas, ensuring access to quality healthcare services for the long term.
- Enhance capacity-building initiatives for healthcare workers, including training on emergency response, trauma care, and psychosocial support.
- Communication strategy needs to be developed for creating massive awareness among the community on safe health and hygiene practices during disaster. IEC materials need to be adequately distributed among the affected population for awareness purpose.
- Improve access to essential medicines, vaccines, and medical equipment, establishing robust supply chains and emergency stockpiles.
- Doctors can be deployed for medical checkups after few months of the disaster which will give us an understanding of any post cyclone diseases prevailing in the community.

Long-term:

- Develop community-based health promotion programs, focusing on preventive measures, health education, and awareness campaigns.
- Strengthen primary healthcare systems, ensuring comprehensive and accessible services, including maternal and child health, nutrition, and preventive care.
- Alternative arrangement for power supply (generator, fuel etc.) in Health facilities/Institutions should be made as a sustainable option.
- Invest in healthcare workforce development, including recruitment, training, and retention of qualified healthcare professionals in the affected areas.

**SHELTER**

Short-term:

- Provide emergency shelter materials, such as tents, tarpaulins, and temporary shelters, to displaced families and individuals.
- Provide shelter kits based on the local construction practices along with the quick guide on repairs.
- Creation of teams of masons at Gram Panchayat level in coordination with local administration to support affected households.
- Establish community-led shelter management committees to coordinate the distribution of shelter materials and ensure equitable access to temporary shelter.
- Advocacy with government for owner-driven reconstruction process for reconstruction of houses.
Mid-term:

- Repair and rehabilitate damaged houses, using disaster-resilient construction techniques and materials, to provide safe and durable shelter options.
- Training of construction workers on cyclone resistant features and safe construction practices.
- Strengthen the capacity of local communities in disaster-resistant construction practices through training programs and technical support.
- Develop transitional housing solutions to accommodate displaced families during the reconstruction phase, ensuring access to essential services and livelihood opportunities.
- Preparation of database of vulnerable housing stock should be prioritized for retrofitting or new construction under government support using AI based model and ground verification.

Long-term:

- Develop and enforce building codes and regulations that incorporate disaster resilience and safe construction practices, ensuring the long-term safety of housing structures.
- Promote the construction of safe and affordable housing, considering climate-resilient designs and incorporating community input in the planning process.
- Support the establishment of housing finance mechanisms and access to affordable loans to facilitate the reconstruction and acquisition of permanent housing for affected households.
- Enhance land-use planning and zoning regulations to minimize the risk of future disasters and ensure safe settlement locations.
- Facilitate community-driven approaches to shelter reconstruction, encouraging participation, and empowering local communities in decision-making processes.

EDUCATION

Short-term:

- Plan and implement a comprehensive infrastructure rehabilitation program for damaged schools in Chengalpattu, including electrical systems and drainage to prevent future disruptions.
- Collaborate with local authorities and communities to expedite the reconstruction process.
- Set up temporary learning spaces equipped with essential materials in affected areas and shelters to ensure the uninterrupted continuation of education.
• Provide schools with necessary resources for makeshift classrooms to accommodate displaced students.
• Provide specialized learning materials, school supplies, textbooks and resources tailored to the diverse needs of students with disabilities in affected areas.
• Redistribute excess textbooks and learning material from non-affected districts to the affected schools
• Provide psychosocial support to children and teachers experiencing multiple challenges of cyclone. Use available material for emotional well-being support, and regularly engage with students until schools reopen

Mid-term:
• Roll out a comprehensive school safety program across the state, with special focus on disaster prone districts.
• Train a cadre of teachers and students as education ambassadors – who can spring to action during any disaster
• Plan and implement a comprehensive infrastructure rehabilitation program for damaged schools in the affected areas including electrical systems and drainage to prevent future disruptions.
• Implement structural enhancements to school buildings in disaster-prone areas to withstand the impact of cyclones and flooding.
• Facilitate regular drills and training sessions to familiarize students and teachers with evacuation procedures and emergency protocols, enhancing overall community readiness.
• Establish community-based disaster response committees to enhance local preparedness and resilience.
• Facilitate regular drills and training sessions to familiarize students and teachers with evacuation procedures and emergency protocols, enhancing overall community readiness.

Long-term:
• Integrate disaster preparedness education into the long-term curriculum to equip students and communities with the skills and knowledge needed to respond effectively to future cyclones.
• Train teachers on Education in Emergencies so that continuity of learning in emergencies can be ensures.
• Establish community-based disaster response committees to enhance local preparedness and resilience.

WATER, SANITATION, AND HYGIENE (WaSH):

Short-term:
• All the drinking water sources need to be disinfected immediately to make people access to safe drinking water facilities. Additionally, disinfectants (Halogen tablets/ Bleaching powder etc) may be supplied to the required households in the community.
• Immediately deploy water tankers to areas facing acute shortages, focusing on Tiruvallur, Chennai, and Chengalpattu.
• Provide temporary sanitation facilities like portable toilets and communal bathing spaces in severely affected regions, prioritizing areas with damaged infrastructure.
• Supply hygiene kits containing soap, menstrual hygiene products, and water purification tools to households facing shortages, especially in TN.
• Along with the supply of sufficient Hygiene Kits, there is an immediate need to use the IEC materials on hygiene education, especially on personal hygiene and Menstrual hygiene and use of some such IEC materials.

Mid-term:
• Prioritize restoring damaged water supply and sanitation infrastructure in Chennai, and other highly affected regions to reinstate reliable services.
• Conduct awareness campaigns on water conservation, safe sanitation practices, and hygiene maintenance to promote sustainable habits.
• Implement programs for wider distribution and accessibility of filtration systems, focusing on areas with low adoption rates.

Long-term:
• Implement sustainable WaSH infrastructure projects, such as rainwater harvesting systems and improved sanitation facilities, to ensure long-term access to clean water and sanitation services.
• Strengthen early warning systems, particularly in Chennai, to improve disaster preparedness and response.
• Cleaning, disinfection, and maintenance of village ponds should be taken up jointly to ensure that the ponds serve as emergency water sources and not turn into waste dumping areas.
• Develop water resource management plans to ensure efficient use and conservation of water sources, especially during periods of scarcity.
• Ensure equitable access to safe water and sanitation for all, especially addressing gender-specific needs by providing private sanitation spaces and hygiene support for women and girls.
• Promote community-led initiatives and capacity-building programs to sustain hygiene practices and sanitation standards in the long run.
• Advocating and Influencing Govt to adhere resilient WaSH flagship programs along with proper Operation and Management in Place for community WaSH facilities, (On both drinking water and Sanitation) towards its sustainability.

PROTECTION:

Short-term:

• Enhance the presence of law enforcement in affected areas to deter and respond to potential security threats, ensuring a swift and coordinated response to maintain order.
• Swiftly enhance and deploy protection services to ensure the safety of vulnerable groups, including women and children, addressing immediate security concerns.
• Launch psycho-social support programs to address the emotional and mental well-being of the affected population, providing counseling and support services.

Mid-Term:

• Initiate mid-term plans for rehabilitating critical infrastructure, including housing, roads, and public facilities, to restore normalcy and improve living conditions.
• Implement community-based protection initiatives, involving local leaders and residents, to actively participate in the design and implementation of protection measures, fostering a sense of ownership and resilience.
• Roll out mid-term educational programs and skill development initiatives to ensure continuity in education for children and provide adults with the skills needed for employment opportunities.
• Conduct mid-term training programs for protection workers to enhance their skills in identifying, preventing, and responding to protection issues, ensuring a more effective and empathetic response.

Long-Term:

• Advocate for and contribute to the development of long-term policies that prioritize inclusive protection measures, ensuring the rights and safety of all community members, irrespective of gender, age, or socio-economic status.
• Establish long-term community-led disaster preparedness programs, integrating protection considerations into overall disaster management plans to enhance community resilience.
• Invest in long-term research and data collection on protection issues, ensuring a comprehensive understanding of evolving vulnerabilities and enabling evidence-based decision-making for future protection strategies.
•
Recommendations for Refugees living in Tamil Nadu

• Prioritize prompt delivery of food aid to address disruptions and damage to supplies, ensuring a continuous and sustainable provision for the next 1-2 weeks.
• Deploy medical teams to provide essential health support, focusing on addressing reported flu, fever, and conjunctivitis among affected family members.
• Concentrate efforts on providing materials and support for shelter repair to address extensive damage to houses and accommodate those who have temporarily relocated.
• Prioritize the distribution of essential non-food items such as medicine, mosquito nets, and tarpaulin to meet immediate health and shelter needs.
• Explore programs for livelihood support, including vocational training and income-generating activities, to help affected individuals and families recover economically.
• Address safety concerns by providing temporary lighting solutions in affected areas, especially during the evening, to ensure the security of the population.
• Implement community-based protection measures, in coordination with NGOs working with them, and the establishment of safe spaces, to address security concerns arising from shelter damage.
• Initiate comprehensive programs for long-term house reconstruction to support affected families in rebuilding their homes and achieving stability.
• Implementing these simple and focused recommendations will contribute to an effective and targeted response to the immediate and long-term needs of the affected Sri Lankan refugees in the aftermath of the Michaung Cyclone.

ANNEXURE

JRNA Questionnaire

Household Questionnaire

JRNA Report Writing Team & Contributors

<table>
<thead>
<tr>
<th>Name</th>
<th>Organisation</th>
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<tbody>
<tr>
<td>Ms. Abha Mishra</td>
<td>UNDP India</td>
</tr>
<tr>
<td>Ms. Akila Radhakrishnan</td>
<td>UNICEF India</td>
</tr>
<tr>
<td>Mr. Anjan Bag</td>
<td>Caritas India</td>
</tr>
<tr>
<td>Ms. Divya Gupta</td>
<td>SEEDS India</td>
</tr>
<tr>
<td>Dr. Eilia Jafar</td>
<td>Tanyak</td>
</tr>
<tr>
<td>Mr. Imran Majid</td>
<td>ADRA India</td>
</tr>
<tr>
<td>Ms. Jigisha Maheta</td>
<td>Goonj</td>
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Mr. Mahesh Nathan | World Vision India
---|---
Mr. Mahendra Rajaram | UNICEF India
Mr. Marshal Kumar | HCL Foundation
Dr. Ritu Rana | HelpAge India
Mr. Satchithananda Valan | UNHCR India
Mr. Vijay Rai | WHH
Ms. Tanuja Raghunath | Caritas India
Mr. Vivek Coelho | WFP
Mr. Cyljo Abraham, Ms. Hannah Kezia Jose, Ms. Hephzibah Lakhanpal, Mr. Kennedy Saikhom, Ms. Mishel Mohan, Ms. Nupur Tyagi, Mr. Utkarsh Dwivedi, Mr. Vikrant Mahajan, Ms. Varsha Chaudhary and Mr. Vishnu P. | Sphere India Team: Overall Coordination, Orientation on Data Collection, Data Analysis and Report Writing

### Enumerators

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
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<tr>
<td>Aarathi D.</td>
<td>Slum Children STEDS</td>
</tr>
<tr>
<td>ABISHEK K</td>
<td>HCL Foundation</td>
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<tr>
<td>Andrew Joshua</td>
<td>ADRA India</td>
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<td>Arun prasanth</td>
<td>MEI Trust</td>
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<tr>
<td>BEN DAVIS</td>
<td>ADRA India</td>
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<tr>
<td>Dinesh Kumar</td>
<td>OFERR</td>
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<td>Harishan Mohan</td>
<td>OFERR</td>
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<tr>
<td>Hemanathan kanniyappan</td>
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<td>OFERR</td>
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<td>Kokila</td>
<td>Grey Sims Learning Foundation</td>
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  for every child
- HCLFoundation