



Vanuatu Red Cross volunteers offloading IOM's hygiene and tool kits, which were one of the first to arrive, at Port Vila docks. © IOM 2015

## OVERVIEW

Cyclone Pam, a category-5 tropical cyclone, struck Vanuatu on the evening of 13 March. According to the latest assessments, around 166,000 people have been affected by Tropical Cyclone Pam on 22 islands. The capital Port Vila on Efate island in Shefa Province, experienced widespread damage, with an estimated 90% of buildings either damaged or destroyed. Around 65,000 people are in need of emergency shelter. The are



Displaced families adapting to new conditions in Port Vila.  
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## HIGHLIGHTS

IOM Displacement Tracking Matrix (DTM) is rolled out in 19 Evacuation Centres in Shefa Province following the completion of trainings for enumerators.

IOM undertook **public health assessments in tandem with DTM implementation** at ECs.

IOM has formalized and convened **the first meeting of the Centre Management Agencies Group (CMAG)** which began coordinating the delivery of relief items to ECs.

As of 21 March, there are **36 operational ECs** hosting **3,852 displaced individuals**.

further reports of mass displacement in other remote areas and vulnerable groups in temporary shelter. The relief effort has moved from assessment and planning phase to delivery and distribution. IOM continues active involvement in the areas of CCCM, Shelter and Health. Almost all communication lines in the islands are damaged and 80% of power lines are out.

IOM is intensifying efforts in data collection on displacement and formulating the exit strategy for ECs. The newly created Central Management Agencies Group

(CMAG) has started coordinating humanitarian assistance to ECs and streamlining the distribution of food, WASH and NFI kits. Humanitarian priorities are being systematically communicated to respective clusters. As the situation on the ground is highly fluid and constantly changing, new displacement patterns are emerging.

### DISPLACEMENT PATTERNS

As of 21 March, 36 evacuation centres are operational while another six have been vacated with 440 that have returned to their areas of origin. 3,852 internally displaced persons are still hosted in ECs.

IDP movement remains fluid, with large numbers of individuals leaving ECs in the day to repair damaged homes, and returning at night to receive food and NFI distributions and overnight shelter.

Many more displaced individuals are staying with host families, however, accurate numbers have yet to be assessed. It has also been observed that some IDPs are beginning to return home.

Host community tensions are beginning to rise as targeting of aid towards the EC families is perceived as marginalization of those outside ECs in need of assistance.

As co-chair of the EC Working Group, IOM is collaborating with the National Disaster Management Office and partner humanitarian organizations, and in particular the Shelter Working Group, to link shelter solutions at place of origin to facilitate the voluntary return of people to rebuild their homes.

### IOM RESPONSE

#### SHELTER AND NON-FOOD ITEMS (NFIs)

IOM's 650 hygiene and 25 shelter tool kits arrived in Port Vila and being shipped to Sheppard Island which was badly affected, identified needs include lack of water and hygiene supplies. An additional 275 shelter tool kits will be shipped as soon as transport arrangements are finalized.

IOM is supporting IFRC in coordination and co-chaired today's Shelter Cluster meeting and supported the mapping of stocks and intended areas of intervention by each organization, as a preliminary 3W.

IOM is focusing on shelter support at areas of origin, which will also help to reduce any friction and tension between IDP communities in ECs and host communities, which could quickly build if shelter distributions are only distributed at ECs.

### CAMP COORDINATION AND CAMP MANAGEMENT

IOM has formalized and convened the first meeting of the CMAG, which started coordinating the delivery of relief items to ECs.

IOM conducted DTM training for enumerators and has rolled out the DTM in 19 ECs in Shefa Province.

IOM developed an exit strategy of ECs, which was endorsed by EC cluster and the Shelter Cluster. Shelter was identified as the most critical gap that could facilitate the exit strategy for ECs and encourage durable solutions.



IOM staff conducting DTM training to local enumerators. © IOM 2015

### HEALTH

There is a fear that health issues common in overcrowded shelter situations may emerge. IOM is liaising with and providing regular information on ECs and displacement to the Ministry of Health and the public health working group. In this regard, IOM undertook public health assessments at the ECs. IOM has been liaising with Vila Central Hospital, the major tertiary referral centre for the country, regarding needs to support discharge and referrals. Currently there are 2 patients that may need assistance to return home. IOM will monitor the situation and provide assistance as required. IOM assisted camp management agencies with investigation and recommendations of management of health issues within evacuation centres including a mis-identified case of measles.

A dedicated Health Cluster coordinator is now in-country which will improve functioning and coordination of health activities. IOM has recommended coordination between Health and Protection clusters to help ensure comprehensive Mental Health and Psychosocial Support services are integrated and linked.



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