from RELIEF to RECONSTRUCTION
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InterAction is the largest alliance of U.S.-based international development and humanitarian nongovernmental organizations. Its 165 members operate in every developing country to overcome poverty, exclusion and suffering by advancing social justice and basic dignity for all.

Sixty-two of InterAction’s members who solicited funds received $1.775 billion in cash and gifts-in-kind from an extraordinarily generous American private sector to respond to the needs of those who survived the tsunami that struck eleven countries in the Indian Ocean area on December 26, 2004. This report details how these agencies spent the funds donated by individuals, corporations and foundations in the United States through September 30, 2005. The report supplements that published by InterAction in May 2005 describing how our members spent funds contributed by the American private sector during the first 90 days following the tsunami. Both reports are published in recognition of the obligation to provide the American public with a transparent accounting of how its donations are being used.

226,000 men, women and children are estimated to have lost their lives in one of history’s most devastating natural disasters. Throughout the affected area, the past nine months have been a period of grieving and recovery. Thanks to the efforts of local populations and authorities, supplemented by the programs of the international community, the horrific loss of life resulting from the tsunami has not been compounded by epidemics or famine. Though hundreds of thousands of lives remain gravely disrupted, with large numbers of people in the affected countries still suffering from trauma, without permanent shelter, and still looking for adequate employment, reconstruction of physical and social infrastructure is well underway. In Indonesia, a longstanding civil war has been ended by a peace accord.

The pace of recovery has not been smooth. In several nations the capacity of the local authorities and civil society to engage in rehabilitation was undercut by high loss of life among civil servants and community leaders, as well as by massive destruction of transport links and vital infrastructure. Delays in reaching some key policy decisions, particularly regarding land use in the most affected areas, inhibited permanent resettlement activities. Despite the emergence of several impressive local government coordination mechanisms, not all assistance and recovery activities were well integrated. In some settings recovery programs became targets of political controversy.

As in every major disaster, recovery from the tsunami takes time. While some InterAction members specialized in humanitarian assistance have completed their activities or are bringing them to conclusion, most of the agencies whose activities are covered in this report are into the first year of multi-year programs. The figures reflect this fact. Of the $1.775 billion they received from private sources in the United States, the agencies included in this account reported they had spent $743 million through September 30, 2005, or 41.9% of the total private funds contributed in the United States. Expenditure rates varied among agencies as they used different mixes of public and private funds, implemented diverse program timeframes, and worked in separate relationships with their partners in multinational coalitions.

The expenditures covered in this report include funds disbursed by the reporting agencies on commodities, services, employee salaries, transportation costs, normal overhead costs, and other direct expenditures related to the delivery of goods and services to those being assisted in the tsunami-affected countries. The report does not include the many programs members undertook using funds received from the United States government, United Nations agencies, other foreign governments, and their overseas affiliates. In most cases more detailed information regarding the full range of members’ activities is available on their web sites.
"Tsunami One Month Later: Recovery in India --- Concrete facades are the only structures to remain standing in the afternoon of the one-month anniversary of the Tsunami disaster in Nagapattinam, India, Wednesday, January 26, 2005. Nagapattinam was the hardest hit area by the Tsunami in December in southern India (State of Tamil Nadu). Over 6,000 are confirmed dead in the area. Many villagers are still worried that another Tsunami will hit them again soon. Photo by Jiro Ose / Redux Pictures.
Action Against Hunger-USA’s (ACF - USA) mission is to save lives by combating hunger, physical suffering and situations of distress, which endanger the lives of men, women and children. Action Against Hunger-USA’s involvement usually begins with emergency relief in response to a crisis. Relief is always reinforced by longer-term programs enabling victims to regain their autonomy and the means to live independently without relying on external aid. In carrying out its activities, Action Against Hunger-USA abides by the following principles: independence, impartiality, nondiscrimination, free and direct access to victims, professionalism and transparency. All members of Action Against Hunger-USA around the world adhere to these principles and undertake to comply with them.

ACF-USA raised $1,494,103 for tsunami response. Funds raised in the United States have been combined with those raised by the other Action Against Hunger affiliates to finance the recovery and reconstruction phase of the tsunami response. These efforts have built upon the relief response that was financed by the other ACF affiliates. The rehabilitation programs are to restore food security and economic independence to the people affected by the tsunami while avoiding the creation of dependency. Private funds raised by ACF-USA are being used to fund water infrastructure reconstruction and programs to help farmers, fishermen, and others restart normal livelihoods. Emergency Kits, CPI sent valuable shipments of medications to partners in Sri Lanka. Counterpart is also rebuilding and rehabilitating an elementary school in Pottuvil in the Ampara District, and equipping it with computers in order to facilitate a cross-cultural exchange between the elementary school and schools in the United States that donated to the school reconstruction initiative. Counterpart is interested in creating long-term school-to-school relationships, which can yield significant two-way cultural, geographic, and environmental understanding and awareness learning opportunities through distance learning mechanisms.

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ADRA works to improve the quality of life for people in developing countries through integrated community-based development and emergency management activities that incorporate its five core portfolio activities: Food Security, Economic Development, Primary Health, Emergency Management, and Basic Education. ADRA is the humanitarian agency of the Seventh-day Adventist Church. As such, ADRA fulfills its objectives without regard to ethnicity, biographic origin, age, gender, or political or religious association.

COUNTRY SPECIFIC INFORMATION:

INDIA

Following the tsunami, ADRA International provided 7,250 internally displaced people (IDPs) with emergency food aid in Tamil Nadu, as well as with two water-purifying systems. On the Great Nicobar Island and the Andaman and Nicobar Islands, ADRA provided 5,000 temporary prefabricated housing units, a health center, a school, prefabricated toilets, and a rainwater harvest system. ADRA’s long-term development projects in India focus on Reconstruction and Infrastructure Rehabilitation through the construction of permanent family and public structures. The housing will replace intermediate prefabricated housing and provide adequate shelter and sanitation facilities for families. The community structures will serve as health centers and school classrooms. Health projects include camps in targeted communities providing primary health care, including immunizations for children, health education and awareness, prenatal and reproductive health care for women, provision of services directed at women’s sexual and reproductive healthcare and concomitant rights, the formation of women’s self-help groups, and the provision of trained counselors who perform individual and group therapy sessions. Pumping, repairing, cleaning, and flushing existing wells are the focus of ADRA’s water and sanitation recovery efforts. ADRA is also constructing immediate community sanitation facilities to be used until permanent facilities are built as well as conducting sanitation, hygiene, and safe water education programs. ADRA is providing boats, nets, and equipment for preparing, processing, and storing fish. ADRA is also working to restore agricultural land and is forming self-help groups to manage community loan funds, which serve as funding mechanisms. ADRA is also providing training on loans and loan management, giving members of women’s groups a “hand up.” Total Private Funding for India Projects: $2,318,773.

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Total Private Donations
$4,449,753

Total Expenditures
$4,449,753
**INDONESIA**
Immediately after the tsunami, ADRA coordinated teams of medical experts from regional hospitals to provide medical services along the coast near Banda Aceh. In addition, they partnered with a local nongovernmental organization (NGO) and recruited local volunteers to help deliver food, water, medical supplies, and essential nonfood items to camps for internally displaced persons (IDPs). ADRA was one of only two organizations working in Meulaboh on the west coast of Aceh province. ADRA was the first NGO in Aceh Barat after the disaster, and took the initiative as the lead agency for education coordination in collaboration with UNICEF. ADRA is now working on the reconstruction of an estimated 53 schools, and has provided ongoing teacher training, psychosocial awareness training for teachers and students, pedagogy skills to boost the styles of teaching, and initial teaching resources for the school. ADRA will also assist in the establishment of a Community Development Committee that will be trained to take on a greater role in caring for the overall developmental needs of the community. ADRA is providing a psychosocial support officer to develop crosscutting materials and strategies to remove the stigma involved with or perceived by those suffering trauma and post-traumatic stress disorders from the tsunami. ADRA will also help in upgrading local hospital facilities in the Aceh Province and Nias Island. It is very likely that further health training will be delivered to IDP communities. Total Private Funding for Indonesia Projects: $596,718.

**SRI LANKA**
In Sri Lanka, ADRA operated water purification units that produced more than 34,000 gallons of clean water per day, in addition to providing 300,000 water purification tablets. ADRA also helped to remove and bury scattered bodies, and imported 200 foggers to clean and deodorize bodies and areas where they had decomposed. ADRA distributed medical aid to 10,000 people in Hambantota district. ADRA is in the process of implementing a Transitional Water Project, which is being conducted at a number of locations throughout Sri Lanka. This project will provide 1,000 households, with septic tanks, waste pipes, running water, elevated water tanks, and associated pipe work. ADRA will also provide shower blocks for 1,000 households, including health and hygiene education for all participants. ADRA is utilizing its existing 30 water disinfection units to provide a clean water supply for up to 50,000 relocated and IDP households in Hambantota and Ampara districts, for over a span of up to three years. ADRA will train local community members to manage the 30 water disinfection units on a daily basis. ADRA has also established a vocational training center based in Hambantota district. Each student graduates with a nationally recognized vocational qualification. ADRA is providing a Psychosocial Support Officer who is developing appropriate materials and training resources for ADRA personnel to use in their main activities. In addition, ADRA is conducting training sessions with ADRA personnel to sensitize them to psychosocial issues, to develop their skills for recognizing psychosocial issues in a local community, and to help them learn how to deal appropriately with such issues, whether by direct intervention or by referral to another service provider. Total Private Funding for Sri Lanka Projects: $1,408,454.

**THAILAND**
In Thailand, ADRA provided protective wear for workers assisting with the retrieval, transportation, and storage of bodies. ADRA coordinated resettlement of IDPs by providing needed essentials, including housing. ADRA has established 23 operational water systems to provide safe drinking water for Phang Nga province and adjacent provinces. Additionally, ADRA has established 23 water management committees, which facilitate the water systems and maintain them for the communities. To assist in community recovery, activities are occurring on a continual basis using local labor to reestablish infrastructure, such as water supplies, halls, canals, piers, bridges, and access roads. A fund has been established for each village to manage, which provides for the essential recovery needs that are not being met for households. The funds are granted to provide support for unemployment, restore market crops destroyed by the saltwater that rushed ashore, replace fishing equipment and boats, and provide educational support to children. Within three years, at least 20,000 people affected by the tsunami along the coastal area of southern Thailand will have improved physical and mental health, and at least 2,000 people will have resettled in strengthened communities, regained a satisfactory livelihood, successfully reestablished their independence, and strengthened their resilience to future disasters. Total Private Funding for Thailand Projects: $125,808.
Air Serv International is a humanitarian organization that uses aircraft to bring relief workers and supplies into some of the most desperate situations in the world. Air Serv is one of the few air carriers that is both nonprofit and non-governmental. The primary objective is to provide safe, dependable and cost-effective air transportation to agencies involved in relief and development. We specialize in small single- and twin-engine aircraft in remote locations. Our ability to immediately respond and operate in difficult environments is the result of a highly committed and trained team of professionals. Air Serv managers, pilots, mechanics, dispatchers, and other field staff are truly international, with Canadians, Africans, Europeans, Australians and Americans making up the team. Launched in 1984 as Africa entered one of its worst humanitarian crises, Air Serv has played a crucial role in humanitarian response by giving quick access to those who are critically isolated from emergency aid. Growing out of our early focus area on the African continent, Air Serv has or is also providing humanitarian flight services in Central America, the former Soviet Union, Iraq, Afghanistan, the Caribbean and Indonesia.

Following the earthquake and tsunami, Air Serv International responded with several aircraft, including smaller single- and twin-engine airplanes and helicopters. Air Serv’s aircraft brought relief workers and supplies to hard-to-reach areas of southeast Asia, including Sumatra and Sri Lanka. There, Air Serv works with a number of relief organizations including World Vision, Save the Children and others. Air Serv remains in the area today, sling-loading supplies to help the rebuilding effort.

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Regional Activity

Total Private Donations
$214,456

Total Expenditures
$214,456
The American Friends Service Committee (AFSC) is a Quaker organization that promotes peace, social justice, and humanitarian service while assisting victims of war and other social, economic, and political oppressions. From its beginning in 1917, AFSC staff and volunteers have assisted people in need, without regard to their national origin or their political beliefs. In 1947 the AFSC and British Friends Service Council (now known as Quaker Peace and Social Witness) received the Nobel Peace Prize on behalf of Quakers worldwide for their “silent help from the nameless to nameless.” The AFSC currently has programs in 22 locations worldwide, including Latin America, the Middle East, Asia, Africa and Eastern Europe. Holding to the Quaker testimonies of peace, equality, and simplicity, the AFSC seeks to affirm the dignity and promise, as well as the cultural and philosophical value, of every individual.

COUNTRY SPECIFIC INFORMATION:

INDONESIA:
Initial AFSC relief efforts were focused on the area around Meulaboh. AFSC worked with the Indonesian organization, Society for Health Education Environment and Peace, to send Indonesian volunteer teams to 17 villages. By mid-January more than 8,500 displaced people had been served by a health post and mobile medical group. Staff and volunteers have focused on water, sanitation and housing in seven villages, as well as income generation activities and special programs for children. In April 2005, AFSC began assisting 15 tsunami-affected communities in North and East Aceh and North Sumatra, in more inaccessible areas heavily affected by conflict as well as the tsunami. Working through local organizations, AFSC is providing medical assistance, supplying water and sanitation facilities, and developing income generation activities with villagers. An additional project supports 535 orphans in six coastal communities to document their own stories. From April 2005 through October 2005 the AFSC-supported physicians in East Aceh have been seeing 800 patients per week. AFSC’s work in response to the tsunami in Indonesia will continue for at least five years.

THAILAND
AFSC is working with several local organizations to address the issues related to the status and needs of Burmese migrant workers. Specific activities include: registration of Burmese migrant workers; building a network among the workers; documentation of dead and missing, which includes assisting the families and relatives to find their loved ones and to properly bury their deceased relatives; and establishment of trauma healing centers in tsunami-affected areas that will focus on training local spiritual and grassroots leaders on spiritual based counseling and trauma healing skills.

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The total private donations amount is less than that reported in the 90-day report, as AFSC has received approval from certain donors to reprogram tsunami-specific donations.
Since 1914, the American Jewish Joint Distribution Committee (JDC) has aided Jewish communities in need around the world. Through its non-sectarian program, development and disaster relief projects have been carried out in 45 countries, many of which have experienced severe dislocation due to extreme poverty, war, natural disaster or political instability. Beneficiaries include populations that are among the most vulnerable, such as children, the elderly, people with disabilities, and refugees. Projects offer professional training that enables local partners to sustain project accomplishments long-term. In addition to conducting its own disaster responses, JDC-IDP coordinates the 46-member Jewish Coalition for Disaster Relief, which carries out unified Jewish responses during times of crisis on a non-sectarian basis.

JDC raised $18.5 million for its tsunami response program, which is being carried out in four severely affected countries of Indonesia, Sri Lanka, Thailand and India. Projects are implemented in partnership with local and international organizations, and in coordination with local authorities. JDC’s work in tsunami-affected areas has been focused on the areas of emergency assistance to the internally displaced, re-establishing livelihoods, children’s assistance, and rehabilitating communities.

**COUNTRY SPECIFIC INFORMATION:**

**INDIA:**
As part of JDC’s emergency assistance to the internally displaced in India, JDC partnered with various local NGOs in Kerala, Andhra Pradesh and Tamil Nadu. Work with the Disaster Mitigation Institute (DMI) provided emergency items, shelter, and re-established livelihoods. Over 500 shelters were constructed in three districts of Tamil Nadu. Temporary shelters were reinforced in 12 villages to ensure that they withstand the monsoon season. In cooperation with Vardhman Sanskar Dham, JDC provided shelter to 567 families in Aayampettai Village, Cuddalore. A partnership with Caritas/Catholic Relief Services provided 750 families in Vypen Island, Kerala with food, and 500 families with kitchen utensils. Food was provided to 4,000 families in Pondicherry, Tamil Nadu, and Vijayawada, Andhra Pradesh and an additional 500 families in Visakhapatnam, Andhra Pradesh that took part in community rehabilitation activities. Five hundred children were given school kits, uniforms, exercise books and bags. To assist in re-establishing livelihoods in India, JDC and the DMI are implementing a “cash for work” program to fortify the economic security of 1,200 families in 10 villages. Local experts are training young women for occupations in skill sectors such as basket weaving, tailoring and candle-making, as well as in marketing techniques. Additionally, JDC’s support to Caritas/Catholic Relief Services and the Pondicherry Multipurpose Service Society has established computer centers in...
two fishing villages in Pondicherry and one in Cuddalore. Over 400 young men and women are being trained. JDC is helping to rebuild Indian communities by collaborating with the Meenakshi Mission Hospital to provide health care and pharmaceuticals through mobile clinics in the state of Tamil Nadu. With JDC and Magen David Adom support, a partnership with Brit Olam/Topaz enabled fourteen Israeli medical volunteers to work alongside their Indian colleagues from the hospital for three months. The project reached approximately 60,000 individuals in nearly 350 villages. Total Expenditures for India: $344,488

INDONESIA
In Indonesia, JDC began its partnership with the Dwiyuna Jaya Foundation in Aceh to provide emergency supplies such as mattresses, bed sheets and water containers. Two ambulances were donated to a local hospital. JDC and the Dwiyuna Jaya Foundation are now restoring clean water, repairing roads, and upgrading facilities for 20,000 persons residing in Bakoy, Lambaro, Blang Bintang, and Lhoong Raya displaced persons camps. Assistance is also being provided to 4,000 persons in neighboring villages and 13,000 in other camps. JDC and the Dwiyuna Jaya Foundation are distributing school uniforms, and children’s playgrounds are being constructed for use by IDP camp residents. JDC is also partnering with the International Rescue Committee (IRC) in Aceh to provide psychosocial support services. Total Expenditures for Indonesia: $3,251,210

SRI LANKA
In Sri Lanka, JDC is working primarily with the local organization, Sarvodaya, in the districts of Ampara, Kalmunai, Batticaloa, Matara and Galle. JDC and Sarvodaya are addressing the psychosocial and economic needs of tsunami survivors in 20 villages. “Empowerment activities” provide psychosocial support and skills training in areas such as sewing, handicraft production and gardening. Over 47,000 individuals will benefit from these activities. In partnership with Rotary/Sri Lanka, JDC is rebuilding and equipping a primary school (grades 1-5) in Galle that was completely destroyed. The 800 students currently receive their lessons in makeshift huts on the grounds of a Buddhist temple, which has donated land for the new school. JDC and Sarvodaya have also provided school kits to 2,000 children from 20 villages. The uniforms were sewn by members of the local community through a cash-for-work program. JDC has also committed to constructing three preschools in Galle. Through the “Rehabilitating Homes in Galle, Sri Lanka” project, JDC and Sarvodaya are assisting 100 lower-middle class families by providing furniture, bedding, kitchen utensils, cutlery and linens so that they can return to their homes. By assisting those who provide the services that allow communities to function—police officers, soldiers, teachers, postmen—JDC and Sarvodaya are helping entire villages return to a more normal life. Unemployed women are hired to sew the bedding for these families. Additionally, planning has begun with Sarvodaya for the construction of five multi-purpose community centers (MPCCs) along the tsunami-ravaged southern coast. A total of 5,000-7,000 tsunami-affected residents will utilize these centers. JDC is also providing a mobile “rapid reaction” medical unit to be operated by Sarvodaya that will serve as a health facility, providing laboratory services and disease management in IDP camps and communities. Total Expenditures for Sri Lanka: $1,080,697

THAILAND
In Thailand, a partnership with the Prince of Songkla University and Mom Dusdi Paribatra (President of the Asia Europe Association) allowed JDC to organize two trauma relief seminars led by Israeli trauma experts in the hard-hit area of Phuket. These five-day workshops utilized a “helping the helpers” approach to train local professionals in post-disaster support. While the majority of the 185 participants were from Thailand, teachers, social workers and psychologists from Malaysia, Indonesia and Singapore also took part. JDC is also partnering with the renowned local Thai organization Population and Community Development Association (PDA) to conduct seven two-day workshops in which teachers learn how to provide psychological support to their students in Krabi and Phang Nga Provinces. JDC and PDA are also conducting 10 one-week “healing camps” for 500 Thai youth from the south who will take part in activities such as hiking and swimming, and attend classes on topics such as the dangers of drug use. Israeli and local mental health professionals conduct camp activities. JDC, PDA, and community leaders are rehabilitating the village of Bang Pat in Phang Nga Province. School scholarships, meals, clothes, and supplies were distributed and income-generating activities are being restored. Total Expenditures for Thailand: $807,789
American Jewish World Service (AJWS) is committed to supporting long-term rehabilitation efforts in the tsunami-affected regions, building upon the initial relief stages. Working with over 50 organizations, AJWS will remain in the area for at least the next five years, partnering with local, community-based organizations whose commitment and dedication to their communities extends well beyond the reach of the disaster.

In India, Sri Lanka, Thailand and Indonesia, AJWS has provided direct material relief to the poorest families in affected areas. Within the first 36 hours after the disaster, AJWS began supplying food, water storage containers, temporary shelters, and cooking, bedding and school supplies through local grassroots partners. Shifting from relief to recovery, AJWS is continuing to support long-time partners in the region and has acquired new ones to provide rehabilitation and reconstruction for many years to come in Asia and in tsunami-affected Somalia as well. This aid includes trauma counseling for children and surviving parents and family members. And, because many fishing communities have lost their means of livelihood, AJWS is replacing boats and fishing equipment, and is providing income generating programs and job-skills training.

**COUNTRY SPECIFIC INFORMATION:**

**INDIA:**
AJWS is partnering with 14 non-governmental organizations (NGOs) to rebuild livelihoods by repairing boats, providing nets and establishing self-help groups and revolving loan funds; setting up community task forces for first-response to future emergencies; mitigating future natural disasters by replanting mangroves using community members as caretakers; and providing long-term psychosocial support to men, women and children in tsunami-affected communities.

**INDONESIA:**
AJWS is partnering with 14 NGOs on participatory assessments of internally displaced persons’ needs and community mapping to ensure that relief and reconstruction is well-coordinated and fairly implemented. AJWS partners are also giving psychosocial services to those affected by the tsunami, particularly children; strengthening the role and participation of women in the process of psychosocial recovery; offering interest-free loans for income generation; and providing emergency shelter, water supply and sanitation, medical interventions and supply of emergency non-food items.
SOMALIA
AJWS is partnering with five NGOs on infrastructure reconstruction, environmental rehabilitation and cash-for-work labor that both promotes the rehabilitation of the fishing industry and coastal communities, as well as agricultural and pastoralist communities connected to the coastal economy. AJWS also funds NGOs that are providing psychosocial support, improving sanitation and establishing income-generation projects in tsunami and war-affected communities.

SRI LANKA
AJWS is partnering with 10 NGOs to build and repair infrastructure, housing, boats and community centers for tsunami-affected communities; develop new livelihoods for women (particularly widows) through women’s resource centers, self-help groups and micro-credit funds; provide livelihood training to fisherfolk; and form women’s collectives that provide psychosocial and general support to relief camp communities.

THAILAND
AJWS is partnering with four NGOs to provide boats, nets and revolving loan funds to fisherfolk collectives; offer arts opportunities and vocational training to youth in the entertainment and tourism industry; and rebuild housing and provide emergency relief to the most vulnerable communities. AJWS partners are also connecting community members to pro bono legal services and the national Human Rights Commission to investigate and protect land claims.

“Millions in Asia, Africa, and even in far away countries, are suffering unimaginable trauma and psychological wounds that will take a long time to heal… the disaster was so brutal, so quick, and so far-reaching, that we are still struggling to comprehend it.”

U.N. Secretary-General
Kofi Annan
The American Red Cross is a humanitarian organization led by volunteers and guided by its Congressional Charter and the Fundamental Principles of the International Red Cross and Red Crescent Movement. The American Red Cross works with the global network of Red Cross, Red Crescent and equivalent societies to restore hope and dignity to the world’s vulnerable people by helping people prepare for, prevent, and respond to emergencies. Through the International Red Cross and Red Crescent Movement, the American Red Cross provides relief to disaster victims and improves the basic living conditions of those in chronically deprived areas of the world. Through its efforts to relieve human suffering and develop the capacities of people around the world to help themselves, the American Red Cross strives to remain one of the nation’s most respected providers of high-impact relief and sustainable development services for vulnerable people around the world.

COUNTRY SPECIFIC INFORMATION:

EAST AFRICA
In Tanzania, the American Red Cross and its Measles Initiative partners (the United Nations Foundation, the Centers for Disease Control and Prevention, the World Health Organization, and the United Nations Children’s Fund) have immunized 6.6 million children against measles, and have also provided vitamin A, de-worming medication, and insecticide-treated bed nets (ITNs).

In Somalia, the American Red Cross and its Measles Initiative partners are conducting measles and polio vaccination campaigns, as well as providing vitamin A, de-worming, and ITNs, targeted to reach 3.5 million children by the end of 2005.

An experienced American Red Cross water and sanitation expert has begun work in East Africa. Together with the local Red Cross and Red Crescent National Societies, the American Red Cross is designing water and sanitation programs to benefit East African tsunami-affected countries.

INDONESIA
In Indonesia, the American Red Cross is working together with the International Federation of Red Cross and Red Crescent Societies and the Indonesian Red Cross Society in the areas of community health and disease control, community restoration and rebuilding, and disaster preparedness.
Community Health and Disease Control

• Through a partnership with the World Food Programme (WFP), the American Red Cross has provided food to more than 1.2 million survivors in Indonesia. The American Red Cross also procured and transported to Indonesia more than 140,000 non-food relief items, including family tents, tarps, ITNs, family hygiene kits, and cooking sets.

• In early 2005, the American Red Cross and its Measles Initiative partners immunized 1.2 million Indonesian children against measles and polio and also provided vitamin A and de-worming medication. Further polio campaigns continue and are expected to reach 23.4 million children by the end of 2005. The American Red Cross has also helped to provide emergency stockpiles of malaria control materials. Additional measles and malaria campaigns are planned for 2006.

• The American Red Cross has begun a program to help 140 villages—more than 86,000 people—throughout Aceh province by rehabilitating and reconstructing wells and latrines and promoting hygiene. The American Red Cross is also providing water and sanitation infrastructure for 11,000 transitional shelters—including 5,000 shelters funded by the American Red Cross—that are being constructed by the International Organization for Migration (IOM) in Aceh province. This water and sanitation infrastructure will serve homes, schools, and health clinics, benefiting approximately 77,000 people.

• Through a comprehensive psychosocial support program, the American Red Cross will assist more than 216,000 people in 172 communities in the Banda Aceh and Aceh Besar districts. American Red Cross psychosocial experts are also working with the Indonesian Red Cross Society and institutions of higher learning to design a nationwide psychosocial curriculum to be implemented by Indonesian Red Cross Society employees and volunteers with technical assistance from the American Red Cross.

Community Restoration and Rebuilding

• The American Red Cross is working in partnership with IOM to build 5,000 transitional shelters, including schools and medical clinics, to assist approximately 35,000 people in Aceh province.

• Together with the Indonesian Red Cross Society, the American Red Cross has implemented cash-for-work community clean-up programs in 19 Aceh villages. Each village—with participation from all parts of the community—designs projects based on its own needs assessment and receives training in how to set and evaluate goals. The programs provide a short-term influx of much-needed funds into the community while at the same time helping to remove debris left by the tsunami.

• In Aceh, the American Red Cross is beginning a partnership with Community, Habitat and Finance International (CHF) to construct 16 public market facilities to benefit suppliers—such as fishermen—as well as traders, vendors, and customers.

• In partnership with the World Wildlife Fund (WWF), the American Red Cross is exploring other livelihood support programs in Indonesia.

Disaster Preparedness

• The American Red Cross has completed disaster preparedness assessments throughout Aceh province and is now beginning an integrated, community-based risk reduction program for western Indonesia. This program will help reduce economic losses and improve resilience from natural disasters in 150 Aceh communities. It will help establish community disaster committees and plans, provide public education on household-level risk reduction, and build the Indonesian Red Cross Society’s disaster preparedness capacity.

MALDIVES

Through a partnership with the WFP, the American Red Cross has provided food to more than 42,000 survivors in the Maldives. The American Red Cross also distributed 4,000 family hygiene kits.

• Together with its Measles Initiative partners, the American Red Cross is conducting measles and rubella vaccinations targeted to reach 150,000 children in the Maldives.

• Immediately following the tsunami, the American Red Cross sent water and sanitation staff to the Maldives to help the water board and Ministry of Health assess the needs of the affected communities. To address immediate needs, the American Red Cross
communities. To address immediate needs, the American Red Cross procured and transported 200 water tanks of 5,000-liter capacity and 100 water tanks of 10,000-liter capacity. The American Red Cross has begun a partnership with national water board and Ministry of Health staff, local contractors, and villagers to rehabilitate, construct, and maintain sewage systems and water supplies. As part of this program, the American Red Cross will work to control rodent-borne diseases and implement a hygiene promotion program expected to benefit approximately 3,000 people.

- The American Red Cross has established the Maldives' first community-based psychosocial support program, with at least one teacher from every school in the country receiving training in psychological first aid. More than 300 teachers have been trained to provide psychosocial support to nearly 90,000 students. Approximately 60 counselors and volunteers on 27 islands were trained to provide support to more than 22,000 people. Further long-term psychosocial support programs are beginning in the Maldives.

SRI LANKA
In Sri Lanka, the American Red Cross works together with the International Federation of Red Cross and Red Crescent Societies and the Sri Lanka Red Cross Society in the areas of community health and disease control, community restoration and rebuilding, and disaster preparedness.

Community Health and Disease Control
- Through a partnership with the World Food Programme, the American Red Cross has provided food to more than 900,000 survivors in Indonesia. The American Red Cross also distributed non-food relief assistance to more than 300,000 survivors.
- American Red Cross water and sanitation experts have conducted damage and needs assessments that are serving as the basis for programs focusing on rehabilitating wells, constructing latrines, and providing clean water to houses and schools in Hambantota, Matara, Kalutara, and Galle. These activities are designed to benefit approximately 774,000 people over the next four years.
- The American Red Cross has begun a comprehensive psychosocial support program designed to benefit approximately 200,000 people in the southern and western provinces. Together with the Sri Lanka Red Cross Society, the American Red Cross conducts community focus groups; helps plan ceremonial activities that will reestablish a sense of community; establishes psychosocial support programs in schools, villages, and internally displaced persons (IDP) camps; works with the Sri Lankan Ministry of Education to develop a psychosocial curriculum for nationwide use; and trains Sri Lanka Red Cross Society workers, community leaders (including leaders in IDP camps), and more than 2,000 teachers—including all new teachers graduating from the National College of Education—to provide psychosocial support and training to others.

Community Restoration and Rebuilding
- Together with the Sri Lanka Red Cross Society, the American Red Cross has implemented cash-for-work community clean-up programs (also known as “environmental sanitation” programs) in Matara and Hambantota. The programs are expected to provide income to 10,000 people.
- In partnership with the WWF, the American Red Cross is exploring other livelihood support programs in Sri Lanka.

Disaster Preparedness
- In coordination with the International Committee of the Red Cross (ICRC), the American Red Cross is implementing a program that will build the capacity of the Sri Lanka Red Cross Society to restore family links in the event of a disaster. The American Red Cross is providing staff to the ICRC in Sri Lanka to oversee this capacity-building program and is training Sri Lanka Red Cross Society employees and volunteers in disaster preparedness and disaster management.
- Similar to its program in Indonesia, the American Red Cross is beginning a comprehensive disaster preparedness and management program that will benefit approximately 200,000 people in Kalutara, Colombo, Negambo, Hambantota, Matara, and Galle.

THAILAND
The American Red Cross has water and sanitation staff working in Thailand and, in coordination with the Thai Red Cross Society, is beginning water and sanitation programs. These will include rebuilding and rehabilitating wells and latrines and promoting hygiene and will be carried out in several of Thailand’s most affected southern districts.
“Sri Lanka Tsunami Relief Efforts” - January 2005 - Tricomalee, Sri Lanka - Tricomalee, on the eastern coast of Sri Lanka was one of the hardest hit regions. Over 84,000 have been displaced and there are over 1000 confirmed deaths in the district. The island of Kinniya, near Tricomalee town, was devastated. There are over 20 camps for the displaced on this small island. Relief supplies and aid are beginning to flow into the camps in Kinniya, but the camps are still short on many essential items such as bedding and clean water. Photo: Cassandra Nelson/Mercy Corps
American Refugee Committee (ARC) is a U.S.-based, private, non-profit, nonsectarian humanitarian aid organization working for the survival, health and well-being of refugees, displaced persons and those at risk by providing medical care, water/sanitation, education and capacity building services. ARC strives not merely to provide emergency aid to those in need, but also to enable them to achieve self-sufficiency by providing health training, microcredit/income generation, legal assistance, counseling, repatriation and reintegration, and shelter reconstruction. ARC has been in existence for 25 years and is currently operating in 13 locations in Europe, Africa, Central Asia, and Southeast Asia.

American Refugee Committee Tsunami Response

Through private fundraising efforts ARC secured funding sufficient to provide immediate assistance to three countries - Sri Lanka, Indonesia and Thailand - in the form of deployment of disaster relief specialists and distribution of non-food items and medical supplies. All activities thus far have been funded solely through private funds.

COUNTRY SPECIFIC INFORMATION:

SRI LANKA

In Sri Lanka, ARC is implementing an integrated program for transition from camps to communities that help to develop viable and sustainable communities for both resident and returnee populations. Current programming targets 31,000 people of the Trincomalee district through the development of community infrastructure, microenterprise development, and capacity building with local community based organizations, rural development societies, farming cooperatives, and divisional development authorities. ARC is working to facilitate the development of appropriate community health infrastructure and encouraging the sustainable return of displaced families while creating improved access to preventive and curative health care as part of ARC’s sustainable communities program. Specifically the program is rehabilitating three health facilities in Kuchchaveli Division, offering training programs for affected communities and health care staff/volunteers, developing peripheral outreach program centers and providing basic health and sanitation supplies, specifically targeting women and children. Additionally, ARC is implementing a project aimed at supporting a sustainable return to stable communities for tsunami and conflict IDPs and returnees through savings mobilization, improved access to credit, the provision of small grants, community capacity building, and vocational training. These programs are sustained by grants from the Whitney Foundation and Direct Relief International as well as other private donations. Beyond current funding through January 2006, ARC is pursuing opportunities to provide longer-term assistance through an integrated approach.
program that will encompass four diversified yet integrated areas of intervention: Community Infrastructural Development, Microenterprise Development (MED) with Sustainable Livelihoods Re-alignment and Development of Healthcare Delivery Systems and Local Capacity Building.

THAILAND

In southern Thailand, ARC immediately delivered life-saving emergency medical supplies, dispatched a team of psychosocial trauma counselors to provide assistance in the immediate post-emergency phase and performed rapid assessments, including a psychosocial assessment. Upon learning of the need and desire of those affected by the tsunami to get back to their livelihoods, ARC developed a boat replacement project in 14 villages along the southern coast and established three key boat construction centers for the areas of Suk Sam Ran, Ban Bane and Nam Khem. In participation with local residents impacted by the tsunami disaster, and in recognition of their desire to get back to their fishing livelihoods as soon as they are able, ARC is responding together with affected communities to support their needs and address their challenges in innovative but common sense ways that villagers support. As of September 30, 252 boats have been constructed through the boat replacement project. The impact of the program will be restored livelihoods for affected fishermen’s families and renewed hope and determination of villagers through the process of rebuilding productive lives of dignity and purpose. Funding for this program comes from private institutions as well as individual donations. ARC anticipates the boat construction project to be completed by spring 2006 and will not pursue additional activities in this area.

“You go to little towns like we’ve done and you’ll see a lot of generosity and a lot of caring, and a lot of aid being received and the people are very, very grateful, not just to the United States, but to the world community.”

Former U.S. President George Bush
AmeriCares is a nonprofit disaster relief and humanitarian aid organization that provides immediate response to emergency medical needs, as well as supports long-term humanitarian assistance programs, for all people around the world, irrespective of race, creed or political persuasion. AmeriCares solicits donations of medicines, medical supplies and other relief materials from U.S. and international manufacturers, and delivers them quickly and efficiently to partner organizations around the world. Since its founding, AmeriCares has provided more than $5 billion of aid in more than 137 countries.

COUNTRY SPECIFIC INFORMATION:

INDIA
AmeriCares partnered with the Government of the State of Tamil Nadu to deliver essential medicines and medical supplies to healthcare institutions in the tsunami-affected areas. These relief supplies were distributed to more than 30 hospitals and clinics throughout 11 of the worst affected districts, including Nagapattinam and Cuddalore.

INDONESIA
In the emergency response phase, AmeriCares delivered three airlifts of medicines, medical supplies and water purification treatments into Banda Aceh; AmeriCares was a major supplier for malaria prevention efforts, providing spraying cans, 500,000 rapid diagnostic kits, and combined therapy treatments for 30,000 people; AmeriCares distributed food storage kits that include bowls, cups and large containers to over 20,000 internally displaced families. Reconstruction efforts are focusing on the re-equipping of healthcare facilities in partnership with the Indonesian Ministry of Health and other NGOs. Through these efforts, AmeriCares provided all of the equipment needed to reopen Banda Aceh’s Provincial Health Laboratory, as well as the necessary training for new and existing staff. The Laboratory reopened in September 2005 and is the region’s primary epidemiological surveillance lab. Also in Aceh, AmeriCares continues to provide the equipment for 37 satellite health centers, 13 of which are open and providing patient service. AmeriCares is also equipping 13 primary health facilities; procurement is underway. Moving forward, AmeriCares has renewed its commitment to the malaria prevention and treatment program, providing a cash grant and gifts in kind to support this program. AmeriCares has provided a cash grant to support the creation of the Lampulo Wholesale Market; groundbreaking occurred in September and the market has an expected completion date of early 2006.

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For more information, please visit:
http://www.americares.org

regional activity

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SRI LANKA

On December 29, 2004 AmeriCares’ first airlift of relief supplies landed in Colombo, Sri Lanka, delivering medicines, medical supplies, water purification treatments and other relief supplies. Subsequently, AmeriCares delivered three additional flights of supplies working in collaboration with local authorities and other NGOs. As of November 2005, AmeriCares’ Water Engineering Team has surveyed three districts and conducted assessments on water quality, with the goal of improving access to water and water quality. AmeriCares committed to eight water projects, four of which are now completed. The remaining four are scheduled to be completed in early 2006. AmeriCares also has a full-time water and sanitation officer on board to oversee long-term operation of this project. AmeriCares is also currently engaged in a partnership with the Ministry of Health to re-equip several major hospitals. For the Jaffna Teaching Hospital, AmeriCares has provided two hemodialysis machines and a one-year supply of consumables for this equipment. AmeriCares is moving forward with plans to provide equipment for the Karapitiya Teaching Hospital, which will include equipping the pediatrics, radiology, ENT and ophthalmology departments, as well as donating some general hospital equipment. AmeriCares is also planning a full rehabilitation and upgrade project for the Elipitiya Hospital. This project will involve the physical rehabilitation of the hospital’s infrastructure as well as the construction of several new wards and the full equipping of these facilities.

Three of these countries: Thailand, Sri Lanka and the Maldives...are heavily dependent on tourism. A lot of the tourism facilities are open, but people think they must all be closed because of the tsunami. The more tourists come back and the more quickly they do, the less aid people will need here.”

Former U.S. President
Bill Clinton
Ananda Marga Universal Relief Team (AMURT) is one of the few private voluntary organizations of Third World origin, being founded in India in 1965. Its original objective was to help meet the needs of victims of disasters that regularly hit the Indian sub-continent. Over the years AMURT has established teams in eighty countries, to create a network that can meet development and disaster needs almost anywhere in the world. In 1985 AMURT broadened its goals to include long-term development. AMURT plays a useful role in helping the poor break the cycle of poverty and gain greater control over their lives. For AMURT, development is human exchange: people sharing wisdom, knowledge and experience to build a better world.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
AMURT has completed the construction of 42 brick factories in Neuheun village for 42 families. These factories are now assisting in the housing rehabilitation efforts in the province. In Meulaboh, AMURT’s organic farming project in collaboration with a local NGO is now in its third month of operation. The project involves 348 farmers from two villages and is the only organic farming project in the whole of Aceh province. AMURT is also providing livelihood opportunities for women tsunami victims through cake baking and sewing programs. Fifty women are making 1000 school uniforms in exchange for their sewing machines. Another 120 women are benefiting from the cake baking program. AMURT has completed the distribution of special Eid-Ulfitri food packets for 1100 families in six villages of Baitusalaam sub-district with food donated by the International Organization of Migration (IOM). AMURT is now assessing the needs of 30 villages in another sub-district of Aceh Besar with a view to distributing hygiene kits and kitchen utensils.

INDIA
In the relief phase of the disaster AMURT disposed of dead bodies, helped survivors clean their houses and provided counseling, games and sports for the traumatized children. AMURT is currently reconstructing a children’s park in Nagapattinam.
Baptist World Aid is the relief and development arm of the Baptist World Alliance, and has been caring for those in need, irrespective of their race, creed or color for over 85 years. The hungry have been fed, and the sick healed. The naked have been clothed and the imprisoned visited. Medicines and medical equipment have been provided, and educational, medical and agricultural projects supported.

COUNTRY SPECIFIC INFORMATION:

SRI LANKA
Baptist World Aid has been working with a number of groups in Sri Lanka. Through the local Baptist body, the Sri Lanka Baptist Sangamaya, funds have been given for food distribution and meeting immediate needs of survivors. Temporary housing was constructed to enable survivors to move from the hot tents into more home-like structures. Plans are underway for construction of permanent homes and schools. Baptist World Aid has also supported the additional work being undertaken by the Still Waters Society through their orphanage. Baptist World Aid has also given grants to two ecumenical groups, LEADS and NCRASL, to help with their tsunami relief efforts. Total Expenditures for Sri Lanka: $663,260

INDONESIA
Baptist World Aid has helped the Union of Indonesian Baptist Churches and the Convention of Indonesian Baptist Churches with funding. They have sent medical doctors, nurses and volunteers to the area of Aceh every two weeks. Baptist World Aid continues to work with the Union of Indonesian Baptist Churches and the Asian Baptist Federation with rebuilding efforts especially in Nias following further earthquakes. Baptist World Aid also helped fund a medical team of Hungarian Baptist Aid who worked in the Aceh area. Total Expenditures for Indonesia: $181,100

INDIA
Baptist World Aid has worked with indigenous groups in India. Local Baptist groups such as the Telugu Baptist Fellowship, Serve Trust, NPBSS-Nellore and General Baptists received funding from Baptist World Aid for their relief efforts. Ecumenical groups EFICORE, CASA and ALMA also received Baptist World Aid funds. The Baptist World Aid regional fellowship and the Asian Baptist Federation also received funds for their work in India. Total Expenditures for India: $44,000

THAILAND
The Thailand Baptist Missionary Fellowship has been the channel for relief efforts in Thailand. Total Expenditures for Thailand: $15,000 Total Expenditures for Andaman Islands: $20,000

The private donations amount is slightly less than that reported in the 90-day report, as some international donations were inadvertently included in that total.
Brother’s Brother Foundation’s (BBF) is dedicated to the distribution of donated medical, educational, agricultural and humanitarian response resources to people in need of them internationally in an effective and efficient manner. Since its founding in 1958, BBF has donated over $1.6 billion dollars worth of needed resources, weighing over 75,000 tons to more than 40 million people in over 120 countries on five continents. Over half of this total has been distributed since 1995. The value of shipments for the year 2004 alone is $225 million. All BBF programs are designed to fulfill its mission by “Connecting People’s Resources with People’s Needs.”

COUNTRY SPECIFIC INFORMATION:

SRI LANKA
The gracious support of thousands of individuals and the help of foundations and corporations will make a new $500,000 school building a reality for students in Sri Lanka.

Brother’s Brother Foundation, in conjunction with the Connecticut Association of Schools, the Sri Lankan American Association of Western Pennsylvania and the Rotary Club Colombo of Sri Lanka, is helping to rebuild the Ariyawansa and Bandarawatte Schools in Sri Lanka that were destroyed by the tsunami. The Bandarawatte RCK Vidyalaya School is a primary and secondary grade school with 88 students and 11 teachers. The Bandarawatte School is to be combined with the Ariyawansa M.V. Kalutara School which has over 800 students. The new school building will be able to accommodate 1,500 students. All design work for the project has been completed and the foundation construction is scheduled to commence mid-October 2005.

Shortly after the tsunami, children from the Hosack Elementary School, located in Pittsburgh, raised funds to provide children in Sri Lanka with teddy bears and school supplies. From mid-to-late August Dr. Ananda Gunawardena and his wife Dr. Sriya Gunawardena from the Sri Lankan American Association of Pennsylvania (SLAAWPA) visited Sri Lanka to facilitate the distribution of these items.

BBF also worked with the Sri Lankan American Association of Western Pennsylvania to develop a rain water harvesting scheme for those affected by the tsunami and to help rebuild the Sri Subodha Children’s Home in Sunil, Sri Lanka.

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For more information, please visit:
http://www.brothersbrother.org
INDONESIA

Brother’s Brother Foundation is working with Helen Keller International (HKI) and the H.J. Heinz Company Foundation to provide Vitalita Sprinkles sachets to tsunami affected children ages 6 months-12 years old in the Aceh Province in Indonesia. Sprinkles sachets are an in-home fortificant (powder in daily-use sachet) that contains one recommended daily allowance of 14 vitamins and minerals.

Vitalita Sprinkles are manufactured by the H.J. Heinz Company and have been approved by the Indonesian Food and Drug Administration. To date 2,661,447 sachets have been distributed by HKI and its partner organizations.

INDIA

Brother’s Brother Foundation is working with the Sri Venkateswara Temple in Pittsburg to provide rehabilitation programs throughout India. In Nagapattanam, projects include: provision of two ambulance vehicles, hospital and school renovations, and fishing boat and net purchases.

The organizations have also facilitated fishing boat and net purchases in Cuddalore, India. In Tamil Nadu, India BBF worked with the Tsunami Assistance Project, developed by Peace Corps volunteer Kevin Griffith, to replenish educational and learning materials at the Akkaraipettai Primary School.

Also in Tamil Nadu, BBF sponsored a ten-day mission trip of seven Carnegie Mellon University students. This mission trip allowed the students to help provide humanitarian assistance to the Sarada Sakthi Peetham Orphanage.

Through the Ratna Nidha Charitable Trust, BBF is able to support the purchasing and operating of a mobile clinic in India which performs amputative surgeries and post-operation care. The clinic also distributes tricycles, wheelchairs and crutches to those injured by the tsunami.

Work with Food for the Poor

In all three countries, BBF is working with Food for the Poor to send humanitarian supplies to those affected by the tsunami. To date, BBF has sent 225 containers of food, medical, hygiene and other humanitarian supplies to the region.

With the help and support of BBF’s donors and partner organizations, Brother’s Brother Foundation is able to participate in these projects which are helping to restore and repair the lives of those affected by the tragic December 2004 tsunami.
CARE USA

CARE USA is part of CARE International, a confederation of 12 national members dedicated to fighting poverty in the world’s poorest communities. Last year, poverty-fighting programs largely funded by CARE USA improved the lives of more than 45 million people in 70 countries. CARE tackles underlying causes of poverty so that people can become self-sufficient. Recognizing that women and children suffer disproportionately from poverty, CARE places special emphasis on working with women to create social change. Women are at the heart of CARE’s community-based efforts to improve basic education, prevent the spread of HIV, increase access to clean water and sanitation, expand economic opportunity and protect natural resources. CARE also delivers emergency aid to survivors of war and natural disasters, and helps people rebuild their lives afterward.

CARE USA and other members of CARE International pooled all private funds they received for tsunami response. These funds were allocated to specific humanitarian, recovery and reconstruction activities in a process that does not permit distinguishing the use of contributions received from American donors from the uses made of contributions received from private donors in the other countries where the members of CARE International raised funds.

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Lurma Rackley
404-979-9450

For more information, please visit:

**regional activity**

- **total private donations**
  - $55,000,000

- **total expenditures**
  - $7,000,000
Since 1928, Catholic Medical Mission Board (CMMB) has served as the leading U.S.-based Catholic charity focusing exclusively on international healthcare, particularly the well-being of women and children. In FY 2004, total support to CMMB reached over $142 million. That support allowed CMMB to implement healthcare programs and provide more than $128 million in medicines and medical supplies to more than 48 countries worldwide. CMMB works collaboratively to provide quality healthcare without discrimination to people in need throughout the world.

CMMB initially responded to faith-based partners requests for aid in tsunami-affected areas in India, Sri Lanka and Indonesia. Initial efforts included fund raising and planning for immediate relief and longer-term development efforts, as well as solicitation, coordination and distribution of essential medicines and medical supplies.

COUNTRY SPECIFIC INFORMATION:

INDIA
As of September 30 CMMB has programmed $527,000 in grants through faith-based partners in India to procure medicines and supplies, to conduct training in trauma counseling and to upgrade technical skills of practicing physicians in the tsunami-affected region. Coordination of grants incurred costs of approximately $25,000.

Immediate relief grants through March 2005
• Christian Medical Association of India (CMAI) for training teams of workers from faith-based health institutions in trauma counseling
• Christian Medical College (CMC) in Tamilnadu, India for providing medical relief in Tamilnadu, India & Sri Lanka, and upgrading skills of practicing physicians in the regions.
• St. Johns Medical College and Hospital for medical relief in Andaman & Nicobar Islands.
• Sister Doctors Forum of the Catholic Bishops’ Conference of India (CBCI) for medical relief in Tamilnadu, India in partnership with Catholic Health Association of India.
• Verapoly Diocese in Kerala to provide medical relief to those affected in Vypin Island

Long-term development grants through September 30, 2005
• St. Johns National Health Academy, Andaman and Nicobar Islands for tertiary care
• Catholic Health Association of India for community-based psycho-social training
• Christian Medical Association of India for the establishment of 3 orphans’ and vulnerable children’s learning sites
• Christian Medical College, Tamilnadu, for capacity building of private and missionary physicians’ education programs

INDONESIA AND SRI LANKA
CMMB shipped donated medicines and medical supplies valued at $4,716,000 to Sri Lanka and Indonesia. Shipping costs for medicines and medical supplies totaled approximately $125,000.
Catholic Relief Services (CRS) carries out relief and development programs in more than 90 countries around the world. Founded in 1943, CRS is the official overseas relief and development agency of the United States Catholic Conference of Bishops (USCCB). CRS provides assistance on the basis of need, regardless of nationality, race or religion. CRS works towards its mission by responding to victims of natural and human-made disasters; by providing assistance to the poor to alleviate their immediate needs; by supporting self-help programs which involve people and communities in their own development; by helping those it serves to restore and preserve their dignity and to realize their potential; and by helping to educate the people of the United States in ways to alleviate human suffering, remove its causes and promote social justice.

COUNTRY SPECIFIC INFORMATION:

INDONESIA

Working closely with local partners, governments, organizations and members of the affected communities, CRS is engaged in a $128 million recovery and long-term rehabilitation effort that will last a minimum of five years. Ultimately, CRS is working with communities to rebuild complete, dignified living environments with improved infrastructure, access and opportunity. CRS’ goal is to restore communities and, through this process, help them become even stronger than they were before. CRS currently operates offices in the cities of Banda Aceh, Meulaboh and Medan. The organization also manages satellite bases in Pulo Aceh, Singkil, Blang Pidie, Calang and Nias. CRS takes a holistic and integrated approach to its programs, addressing four strategic objectives: Shelter and Reconstruction - helping people to rebuild and improve their houses and community assets; Health - working with families and communities to improve their household health practices, and make greater use of preventative and curative health services; Civil Society and Governance - supporting and working with affected communities and local governments so they may have a positive influence on and contribution to decisions affecting them; and Livelihoods - fostering greater livelihood opportunities and creating more access for families to secure alternate sources of income. As of the end of September 2005, some of the key accomplishments are: sustained nearly 113,000 people with enough food to eat, and equipped more than 135,700 people with basic household needs; 1,476 permanent homes under construction and contracts to build more than 6,000 homes over the next five years; 1,486 temporary shelters under construction; provided productive work for nearly 26,500 people; built a new women and children’s hospital and reconstructed the main government clinic in Banda Aceh; rehabilitated markets; secured contracts to build more than 245 major infrastructure projects, including an...
$11 million project to repair a 62-mile stretch of coastal road, and projects to rebuild bridges, canals, markets, clinics and schools; trained more than 30,000 community health workers, strengthening the frontline of Aceh’s health delivery system; and rehabilitated and built clean water systems and provided a testing equipment system for more than 47,000 people.

**SRI LANKA**

With an initial five year strategy of over $30 million, CRS is working in collaboration with Caritas Sri Lanka, Social Economic Development Center (SEDEC) and partners (i.e. Jesuit Refugee Services (JRS), Community, Habitat and Finance (CHF), Northwest Medical Teams International (NWMTI) and as part of the Caritas Internationalis (CI) confederation. Through these partnerships, CRS/SL is providing essential and comprehensive relief to tsunami victims throughout the country, with a strong focus on transitioning to development. CRS currently operates offices in the cities of Colombo, Galle, Hambantota, Batticoloa and Ampara and will be targeting 100,000 direct beneficiaries in the following program objectives: tsunami-affected families live in a secure and dignified environment through provision of shelter, facilities for water and sanitation, and reconstructed community infrastructure; tsunami-affected families have resilient and secure livelihoods through the provision of skills training and access to credit; and tsunami-affected children are adequately supported in their recovery, learning and development with education and psychosocial support. As of the end of September 2005, some of the key accomplishments in Sri Lanka are: nearly 5,000 temporary shelters have been completed and upgraded – putting us close to completing our first-year target of 5,256 temporary homes; CRS and partners have assisted more than 3,000 people in restarting their trades, exceeding our original goal for the first year; CRS and partners have so far provided some 22,450 packages of education materials and more than 8,500 school uniforms; and 14 temporary classrooms have been constructed and 12 schools rehabilitated. The program recently received 16 contracts with the education ministry to repair schools that housed families immediately following the tsunami.

**INDIA**

In India, CRS is working with local partners and the government to implement a five year strategy of over $36 million with an overall approach to ensure that relief and rehabilitation activities are designed and implemented within a broader integral human development framework which addresses the holistic development needs of the most vulnerable groups. Therefore, while the core interventions would ensure addressing the needs of the tsunami affected communities -- HIV/AIDS, child labor and trafficking, the capacity building and community organization strategy, especially in terms of promoting and strengthening women's groups -- will remain cross-cutting considerations. CRS will also emphasize the well being of the traditionally vulnerable groups such as the Scheduled Castes and Scheduled Tribes, women (especially widows) and children. CRS is currently implementing tsunami programs in Kerala, Andhra Pradesh, Tamil Nadu and the Andaman and Nicobar Islands to achieve the following objectives: 42,500 tsunami-affected families (212,500 persons) have their homes, livelihoods and mental health restored; 1,000 communities (300,000 people) are protecting their women, children and other vulnerable members from trafficking, unsafe migration, child labor, and HIV/AIDS; and 800 disaster-prone communities (280,000 persons) are prepared to respond to natural hazards. As of the end of September 2005, 5,000 people have been given improved temporary homes designed to safely house families for up to two years as progress continues in the rebuilding and construction of new homes, and more than 26,000 families and individuals have been given boats, nets and other tools to restart their fishing trade as well as vocational training to learn new livelihood skills. In this area, CRS and partners are on average more than halfway to meeting – and exceeding – initial first-year goals. Nearly 20,460 tsunami-affected youth and children are now participating in organized group activities that provide psycho-social support, additional educational opportunities and an environment that protects them from exploitation, and 42 of the planned 50 children’s facilities such as schools and other buildings have been constructed and/or repaired.
Christian Children’s Fund (CCF) is an international child development organization which works in 33 countries, assisting 10.5 million children and family members regardless of race, creed or gender. CCF works for the well-being of children by supporting locally led initiatives that strengthen families and communities, helping them overcome poverty and protect the rights of their children. CCF’s comprehensive programs incorporate health, education, nutrition and livelihood interventions that sustainably protect, nurture and develop children. CCF works in any environment where poverty, conflict and disaster threaten the well-being of children.

Working in South Asia since the early 1950’s, CCF immediately responded to the tsunami emergency and has planned a three-year program strategy for recovery assistance. CCF is working in three tsunami-affected countries: Sri Lanka, India and Indonesia. Immediately following the provision of emergency assistance including food, bedding, and other emergency supplies, CCF transitioned to recovery, reconstruction and rebuilding efforts. Initial activities focused on Child Centered Spaces/Child Protection Activities; Water/Sanitation Restoration; Livelihood Interventions; and health campaigns. CCF is now completing many of the recovery projects and is focusing on long-term rebuilding/reconstruction and development efforts in all three countries including: micro enterprise development for livelihood restoration, ongoing construction of schools and community centers, providing health and nutrition training and interventions and continuing child protection efforts.

COUNTRY SPECIFIC INFORMATION:

INDIA
CCF has been working in Chennai, Kanyakumari, Nagapattanam, Karaikal, and Cuddalore providing primary support through Child Centered Spaces (CCS), livelihood interventions, and infrastructure restoration. Immediately following the disaster, CCF established 84 CCS in these districts, assisting 18,000 children. CCF is completing the reconstruction for 12 of 20 preschools and child care centers; was involved in renovation of approximately 15 canals, wells and ponds in four villages; cleaned debris and repaired wells in approximately 15 villages as part of cash-for-work (these numbers reflect the private share portion of grant funded programs). CCF’s livelihood restoration efforts included the repair and construction of more than 400 fishing boats; 260 fish drying platforms and the distribution of fish coolers and fishing nets; and the repair or replacement of long tail diesel engines for fishing boats. CCF continues on-the-job vocational training for youth and is involved in ongoing microenterprise development for families to support petty trade and small business ventures in local communities affected by the tsunami.

For media-related enquiries, please contact:
Toni Radler
(804) 756-2722

For more information, please visit:
http://www.christianchildrensfund.org/tsunami-relief-asia.aspx

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INDONESIA
CCF is working as ChildFund Indonesia at 110 sites in Aceh Barat, Aceh Besar, Aceh Jaya, Banda Aceh, and Bireun. 115 CCS have been established, serving more than 13,000 children. CCF conducted a nutrition assessment of children in 21 CCS. Findings showed that more than 10 percent of children 3-5 years of age were experiencing some stage of malnutrition. CCF has added nutritional supplementary feedings for more than 6,600 children at the CCS to counter the nutritional deficits occurring since the tsunami hit.

CCF is conducting health and nutrition training for parents and community leaders to work with malnourished children and to understand prevention measures for debilitating diseases. CCF mobilized children at its CCS in Bireun so that they would participate in the global measles immunization campaign. CCF is also distributing flip flops to children to keep them from being exposed to infections by worms via their bare feet. CCF is developing livelihood projects to help improve food security in these communities in order to sustain the nutrition programs initiated there.

CCF continues working with local NGOs in cash-for-work programs to continue the goal of rehabilitating and reclaiming specific areas along the coast. CCF is conducting child protection programs through its CCS, focusing on dangers to children, with special attention given to children as they are relocated to temporary housing.

SRI LANKA
CCF continues providing tsunami assistance in the districts of Galle, Hambantota, Matara, Ampara and Trincomalee, through work with the 58 CCS in all five districts, assisting about 7,000 children for both preschool day activities and after school programs. More than 1,250 parents, 560 community volunteers and 30 religious leaders have been trained in child health, child protection, and child well-being programs at the Child Centered Spaces; and 2500 youth in 55 youth clubs trained and conducted clean-up campaigns, organized community festivals and built play areas at CCS.

CCF is focused on long-term Microenterprise Development work by establishing 28 community banks and targeting small business loan groups for women. More than 430 women and families have received low-interest loans for production and sale of local goods to restore their livelihoods.

CCF has completed rebuilding and replacing water/sanitation facilities in three districts, providing families with water tanks and safe water storage containers using community taps; repairing water storage/distribution systems to homes, schools, and constructing pipes from water board meters to 150 houses.

In addition, CCF has rehabilitated 150 household toilets and three school toilet facilities (CCF expenditures reflect the private share portion of grant-funded water and sanitation programs). CCF is continuing work to improve roads and drainage systems in Matara and Ampara districts; civic works projects continue in Hambantota and Matara including improvement to the children’s ward in a local hospital, and construction of student canteens, classrooms and a children’s park.

CCF is conducting community-based health and hygiene promotion campaigns training parents and community volunteers. CCF is working with the Sri Lankan government to support and expand its social services network helping at risk families.
The Christian Reformed World Relief Committee (CRWRC) is a relief, development, and educational ministry of the Christian Reformed Church in North America. CRWRC partners with local agencies that understand local needs. Together, CRWRC and its partners find ways to provide lasting change for people in more than 30 countries around the world.

CRWRC’s mission is to address the needs of persons in distress due to poverty or disaster. CRWRC is present in 30 countries, partnering with more than 200 in-country faith organizations, to help local communities improve their standard of living through emergency aid and food for work; primary health, agriculture, and literacy training; micro-enterprise and credit/loan programs; and socio-economic aid. CRWRC addresses environmental needs, human and land rights, civil society issues, refugee resettlement, child labor, gender equity, and peacemaking.

CRWRC believes that by helping people help themselves, the chains of poverty can be stripped away.

**COUNTRY SPECIFIC INFORMATION:**

**INDONESIA**

CRWRC has four program areas in its Indonesia tsunami response. First, cash-for-work programs provided families with income through river cleaning and land clearing activities. In the distribution of non-food related items, 1,768 individuals received agricultural tools, and others received seeds and fertilizer. Also, four communities received typewriters and teacher assignments, and three middle schools received textbooks, addressing the needs of 2,899 students. In livelihood programs, 20 people received carpentry training. Seventeen becak driver unions (sic, taxi drivers) received motorcycles and sidecar construction training. A becak repair shop was also established. Progress in pre-tsunami sewing groups includes re-establishment of income, especially in the embroidery-making group. The construction of a large fishing boat was completed and another palung boat has been started. The animal husbandry project is in transition due to the Asian bird flu and breeding adjustments are being made. Two communities have planted a total of 2,500 coconut trees. Previously planted chilis were harvested and good income is expected as chili prices rise. A 25-hectare shrimp pond is in progress. Finally, the permanent housing project reports six pilot houses completed and ownership established. The first phase of a 260-house program in five communities began with the first 50 houses to be completed by mid-October. CRWRC anticipates that 136 houses will be completed by the end of December 2005.

For media-related enquiries, please contact:

Beth DeGraff
616-241-1691

For more information, please visit:

http://www.crwrc.org
SRI LANKA

Many temporary shelters were initially provided for a number of communities in Sri Lanka. CRWRC also initially provided pillows and mattresses to an elderly women’s home on the beach in Colombo, as well as an immediate food distribution. CRWRC is now transitioning into permanent housing planning. In the rehabilitation phase, CRWRC is active in seven geographic areas: Boossa, Balipitiya, Angulana, Hikkaduwa, Batticaloa, Matara, and Negambo. Three hundred temporary houses have been built in these areas, with land purchased and being cleared for 194 targeted permanent houses. More than 500 start-up kits, including pots and pans, were distributed. Toilets and washing areas were established and two wells dug. Livelihood generation included masonry, carpentry, and mechanic’s tools; broom- and shoe-making equipment, and sewing machines. A brick-making factory is being built that will provide permanent housing materials and livelihood.

“What happened on 26 December, 2004 was an unprecedented, global catastrophe. It requires an unprecedented, global response.”

U.N. Secretary-General
Kofi Annan
Church World Service (CWS), founded in 1946, is the relief, development, and refugee assistance ministry of 36 Protestant, Orthodox, and Anglican denominations within the United States. Working in partnership with local organizations in more than 80 countries, CWS supports sustainable self-help development, meets emergency needs, aids refugees and addresses the root causes of poverty and powerlessness. CWS provides assistance without regard to race, ethnicity, religion, political affiliation or gender.

The mission statement of Church World Service is: Christians working together with partners to eradicate hunger and poverty and to promote peace and justice around the world. Through support including technical assistance, material aid and cash awards, CWS supports field offices and indigenous partners with a track record of accountability, integrity and long-term presence in the countries in which they work. CWS works to ensure positive and sustainable changes through emergency response, reconstruction and development programs.

COUNTRY SPECIFIC INFORMATION:

INDONESIA

CWS, operational in Indonesia for several decades, has opened sub-offices in Banda Aceh, Medan, Meulaboh, and Nias Island and is serving Banda Aceh, Aceh Besar, Aceh Barat, Nagan Raya, Aceh Jaya and Meulaboh. CWS is providing assistance to families with children under five years old, those living with host families or in makeshift shelters, female-headed households, and remote rural communities that have little access to assistance. Working through CWS staff and with local organizations and community groups, CWS is providing a variety of services including distribution of relief goods, fortified foods, water and sanitation facilities, shelter, medical care, psychosocial care, livelihood restoration and capacity building. CWS is also monitoring the nutritional status of children under five, providing supplementary feeding when necessary and working with mothers on nutrition education. Relief distributions have covered over 72,000 beneficiaries and include tents, food supplies, jerry cans (for water), health kits, school kits, baby kits, blankets, mattresses, mosquito nets, and tarpaulins. The water program in Meulaboh provides enough clean water for over 21,680 people per day and also provides sanitation facilities for over 15,000 people. While the psychosocial program also assists adults, the focus is on children between 6 and 12 years old and provides outlets through art, song, dance, cultural activities, games and educational activities. Livelihoods activities include providing boats to fishermen, seeds and small animals to farmers, and cash grants to women’s groups for small business initiation. All of CWS’ current activities are planned through 2006 and the organization anticipates revised and continued programming for several years after that.

For media-related enquiries, please contact:

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Contact Information

Regional Activity

Total Private Donations

$14,704,000

Total Expenditures

$13,558,542
SRI LANKA
CWS, working through local partners, has responded in locations throughout the entirety of the tsunami-affected regions of the island. Specific locations include Vanni, Mullaitivu, Batticaloa, Thirukovil, Ampara, Trinco, Muttur, Galle, Matara, Tangalle, Hambantota, Colombo, Lakutara, Wattala, Negambo. Through September 2005, CWS has provided disaster relief supplies including food and water, tents, mats, sheets, mosquito nets, health supplies, kitchen utensils, clothing, and medicine to 56,100 families. CWS' local partner is now focusing on assisting almost 23,000 families through providing basic living supplies, education support for children, psychosocial care, housing repair, clean drinking water, income generation support for fisherman and capacity building activities. Activities are planned through 2006.

INDIA
CWS is providing assistance in Tamil Nadu, Kerala, Andhra Pradesh and the Andaman and Nicobar Islands through local Indian partners. Through September 2005, 50,000 people have been provided with disaster assistance including cooked food and drinking water, dry food rations, clothing, bedding, kitchen utensils, tarpaulins, basic medical aid, and temporary shelter. The current phase of the tsunami response program includes continued relief assistance to those in need as well as longer-term rehabilitation to 70 villages. Activities will include helping families with educational supplies for children; income generation programs including fishing supplies, artisan tools, and traditional farming assistance; providing food-for-work and cash-for-work programs, providing shelter reconstruction assistance, providing water pumps for communities, providing trauma counseling and working to build the capacity of local partners. An additional facet of the program will include disaster preparedness, prevention and mitigation. These activities will continue through 2006.

THAILAND
In Thailand, the CWS response has been two-fold. First, through a local partner working primarily in Phang Nga and Krabi provinces, CWS has supplied food, water, cooking supplies, baby food, hygiene items and other necessary assistance. CWS' partner also assisted beneficiaries who lack identity documents and were unable to access government assistance; these groups include ethnic minorities and migrants from neighboring Myanmar (Burma). The second prong of response was through collaboration with the Royal Thai Embassy in Washington. CWS donated 100 Interchurch Medical Assistance (IMA) medicine boxes to the relief efforts of the Thai Government through the Ministry of Foreign Affairs Coordinating Center which were further donated to the Thai Red Cross for tsunami response activities. Each IMA medicine box holds medicines and supplies sufficient for 1,000 people for 2-3 months.

SOMALIA
The tsunami response program in Somalia targets 28,000 people in Beinda Bela and Eyl districts with water and sanitation programs. CWS' partner will work with 15 villages in the two districts to create water systems that provide drinking water for families and livestock as well as adequate sanitation facilities. This program will be accomplished through community mobilization and participation. The CWS partner has been working in Somalia since 1993 and works on a variety of emergency and development programs including education, HIV/AIDS, rural water development, peacebuilding, food security and others. The tsunami response program is an integrated part of our partner's long-term work.
Concern Worldwide is a non-denominational, international humanitarian organization dedicated to the relief, assistance and advancement of those living in absolute poverty in the least developed countries of the world. Concern Worldwide has 35 years of experience in responding to emergencies, from the famine in Biafra, Nigeria in 1968 to the emergency in Darfur, Sudan. Concern believes in a world where no one lives in poverty, fear or oppression; where all have access to a decent standard of living and the opportunities and choices essential to a long healthy and creative life; and where everyone is treated with equal dignity and respect. Concern’s mission is to enable absolutely poor people to achieve major improvements in their lives, improvements that are sustainable without ongoing support from Concern. To this end, Concern works with the poor themselves and with local and international partners who share the vision of creating just and peaceful societies where the poor can exercise their fundamental rights.

COUNTRY SPECIFIC INFORMATION:

SRI LANKA & INDONESIA

Concern Worldwide is working in Kalutara, Galle, Matara and Hambantota districts and in Trincomalee. Partnering with local organizations — Project Galle 2005, Rural Development Federation, and Sewalanka (an organization with more than ten years of relief and rehabilitation experience), Concern is providing resources and technical support to ensure effective service delivery and access to basic rights and sustainable livelihoods for tsunami-affected households. Immediately after the tsunami, Concern provided emergency relief kits to 4,923 families in the Galle District. By early 2005, Concern and local partner Sewalanka had supplied essential household equipment to 3,919 families and distributed a supply of 60kg of dry rations including rice, daal, flour, tinned fish, sugar, milk powder and tea. Beyond essential relief items, shelter was necessary to provide tsunami-affected people with security, personal safety and protection and to ensure their dignity and self-sufficiency. As of September 30, 2005, Concern and Sewalanka have housed 3,392 families in the southern districts of Galle, Matara and Hambantota. The 3,392 transitional shelters are serviced by latrines, showers and community centers and are in close proximity to schools, medical facilities, places of worship and markets. In total, Concern aims to serve 10,000 tsunami-affected households during the next two years. The remaining unexpended donations will support long-term recovery programs in Sri Lanka and Indonesia.
Counterpart International (CPI) is a 40-year old NGO that works with local communities to build their capacity to identify, accept, prioritize and act on their local problems in their own self-determined ways. Counterpart’s approach is grassroots-based, demand-driven and multi-disciplinary, integrating humanitarian and relief assistance, healthcare, democracy and governance, food security, enterprise and business, and natural resource management programs. Counterpart’s programs are completely transparent, and are designed with the full participation of local stakeholders, an approach that, in turn, fosters local participation in all levels of project decisions. Counterpart International is supported by corporations, individuals, foundations and governments.

COUNTRY SPECIFIC INFORMATION:

SRI LANKA
CPI coordinated an Emergency Kit drive for tsunami survivors living in refugee camps and other temporary housing situations. Donations in cash and kits came from The Maryland Hosanna Methodist Church, Branches of the Church of Christ, Counterpart employees, friends and family, and three elementary schools. As well as Emergency Kits, CPI sent valuable shipments of medications to partners in Sri Lanka. Counterpart is also rebuilding and rehabilitating an elementary school in Pottuvil in the Ampara District, and equipping it with computers in order to facilitate a cross-cultural exchange between the elementary school and schools in the United States that donated to the school reconstruction initiative. Counterpart is interested in creating long-term school-to-school relationships, which can yield significant two-way cultural, geographic, and environmental understanding and awareness learning opportunities through distance learning mechanisms.

Counterpart International is developing projects to respond to the tsunami in Sri Lanka, including housing and infrastructure rehabilitation, natural resource management, food security, micro-enterprise and livelihood restoration, and humanitarian assistance (pharmaceuticals, medical supplies and other essential commodities) procurement, delivery and tracking. Counterpart has been working with international NGOs, companies, freight forwarders, shippers, and airlines to procure, deliver and track pharmaceuticals, medical supplies and equipment and other essential commodities. Counterpart has been able to leverage commodities on a 100:1 basis. Total Expenditure including in-kind donation for Sri Lanka: $2,007,658.
INDIA
CPI acquired and shipped pharmaceuticals (antibiotics, penicillin, oral rehydration salts, etc) to India for relief efforts. Total Expenditure including in-kind donation for India: $1,945,935.

MALDIVES
CPI acquired and shipped pharmaceuticals (antibiotics, penicillin, oral rehydration salts, etc) to Maldives for relief efforts. Total Expenditure including in-kind donation for Maldives $589,134.

SOMALIA
CPI coordinated the creation of 540 emergency kits that were sent to Somalia and distributed in refugee camps. Counterpart also acquired and shipped 30 large, portable shelters to be used in refugee camps. Total Expenditures including in-kind donation for Somalia: $345,428.

“Out of the appalling tragedy of the tsunami has emerged an opportunity to build a new future.”

Australian Prime Minister
John Howard
Direct Relief International was established in 1948 and is a non-profit, non-political, and non-sectarian organization dedicated to improving the health of people living in medically underserved communities and those who are victims of natural disasters, war, and civil unrest. We work to strengthen the indigenous health efforts of our international partners by providing essential material resources – medicines, supplies and equipment. All of our programs are provided in a non-discriminatory manner, without regard to political affiliation, religious belief, or ethnic identity. Our assistance programs have always been tailored to be responsive to our partner organizations’ particular circumstances and needs and to those of people they serve. Our partners typically provide health services to people in rural areas that are poor, lack health infrastructure, and in which severe health challenges exist. In Direct Relief’s fiscal year 2005, we partnered with healthcare facilities and organizations in 53 countries.

In the nine months following the tsunami, Direct Relief has sent 46 shipments of material medical aid, with a combined weight of more than 250,000 lbs. and wholesale value of over $26 million to healthcare facilities and organizations providing critically-needed services to affected populations. In addition, Direct Relief has provided over $6.9 million in direct cash funding to specific healthcare projects in affected regions. With material aid and cash assistance, Direct Relief actively supports healthcare institutions and medically-focused relief projects in India, Indonesia, Sri Lanka, Somalia, and Thailand. Recognizing that recovery will take many years, Direct Relief’s ongoing commitment to the region remains strong. As with our programs across the world, Direct Relief partners with indigenous medical facilities and organizations, and by strengthening them, a lasting contribution to the healthcare infrastructure of South and Southeast Asia is achieved. Since the tsunami, Direct Relief has moved quickly to infuse critically-needed financial resources to emergency relief and reconstruction projects in affected countries. Shipments of material medical aid will continue in support of our partners’ medical response to the long-term increased healthcare needs of affected communities.

COUNTRY SPECIFIC INFORMATION:

SOMALIA
Direct Relief has provided one shipment weighing over 8,000 lbs. to the Hargeisa Teaching Hospital whose mobile outreach activities continue to address the needs of the tsunami-affected people along Somalia’s east coast. The contents of this shipment are sufficient to provide full courses of treatment to over 37,000 people.
INDIA
In the first nine months of relief activities, Direct Relief has provided over 77,000 lbs. of pharmaceuticals, medical supplies, nutritional supplements, and medical equipment to partners serving tsunami-affected populations in Tamil Nadu, Kerala, Pondicherry, and the Andaman & Nicobar Islands. Eight shipments of medical aid, with a wholesale value of more than $11.8 million, have provided medicines and supplies sufficient to treat over 778,000 people.

Recipients of material aid range from large teaching hospitals to village clinics and medical outreach projects, including 34 primary care centers on the Andaman and Nicobar Islands constructed with a $1.7 million grant from Direct Relief.

More than $2.4 million in cash assistance has been provided to support specific medical relief and recovery projects in Tamil Nadu, Kerala, Pondicherry, and the Andaman and Nicobar Islands. Examples include the construction of community health clinics and the purchase of mobile medical units for coastal outreach initiatives.

INDONESIA
Direct Relief has sent 18 shipments of medical aid, weighing nearly 120,000 lbs. with a wholesale value of more than $9.3 million, to healthcare organizations and facilities in Nanggroe Aceh Darussalam Province and Nias Island.

More than 1,550,000 people will receive full courses of treatment from these donated pharmaceuticals, medical supplies, nutritional projects, and equipment, which have been used in relief camps, community clinics, government hospitals, and medical outreach projects. In addition to material aid,

Direct Relief has granted over $1.8 million in cash resources to directly fund specific medical relief projects including the implementation of psychosocial services for tsunami survivors, establishment of community clinics, and improvement of water and sanitation facilities in affected areas. Direct Relief has worked closely with indigenous healthcare organizations as well as international NGOs working in Indonesia.

SRI LANKA
In the nine months since the tsunami, 19 shipments of medical material aid, totaling more than $4.4 million in value, have been sent to Sri Lanka in support of relief-oriented medical services provided by public clinics and hospitals and the outreach initiatives of local organizations, international NGOs, and the Sri Lankan Ministry of Health. Donated pharmaceuticals, medical supplies, nutritional products, and equipment constitute full courses of medical treatment for over 1,040,000 million people.

In order to provide comprehensive support of outreach activities, Direct Relief has provided over $2.4 million in cash assistance to support the medically-focused projects of indigenous and international NGOs working to meet emergency needs as well as ongoing healthcare requirements. Material and cash assistance has focused on Sri Lanka’s affected south and east coasts, from Moratuwa to Batticaloa.

THAILAND
Since the tsunami, Direct Relief has provided $250,000 in cash assistance to the Sustainable Development Foundation, an umbrella organization of Thai NGOs engaged in medical relief and coordination activities along Thailand’s Andaman coast. From this sum, small grants have been disbursed in support of water and sanitation projects, community-based healthcare initiatives, and programs aimed at the rehabilitation of natural resource management.

Direct Relief received approximately $45 million in tsunami-designated GIK. Of this, $22,541,910 was included in shipments to affected areas as of 9/30/05. The remaining product will be provided to tsunami-affected areas as per the requests of Direct Relief partner medical institutions and organizations. In addition, several corporate GIK donors have given permission for as yet unused tsunami-designated product to be sent to Direct Relief partners in other areas of the world.
Doctors of the World-USA (DOW) is a New York-based international health and human rights organization, currently active in Asia, Africa, Eastern Europe and North America. DOW has worked in over 30 countries and communities where health is diminished or endangered by violations of human rights and civil liberties, and has mobilized the health sector - in the United States and internationally - to promote and protect these rights. DOW projects provide essential care and services, but more importantly, focus resources on training and building the capacity of local counterparts to carry on the mission of health at the conclusion of the projects. Services, training, and systems development are combined with appropriate advocacy to ensure that the impact is both broad-based and sustainable. DOW was founded in 1990 by a group of volunteer physicians, including the late Dr. Jonathan Mann, and works within a network of twelve Doctors of the World/Médecins du Monde delegations. Combined, this network is active in over 90 countries.

**COUNTRY SPECIFIC INFORMATION:**

**SRI LANKA**

DOW is working in Matara District (Dickwella and Welligama divisions) and in Hambantota District (Tangalle area) in Southern Sri Lanka to improve accessibility and quality of health services to tsunami-affected populations. The DOW project aims to: 1) Rehabilitate and equip two rural hospitals to provide high quality primary care services; 2) Increase the knowledge and capacity of public health staff in diverse areas of health; 3) Increase awareness among tsunami-affected communities regarding health concerns and health resources in their community; and 4) Develop community health camps that will provide basic medical services to displaced and other persons who have little access to hospitals and clinics. The project is being implemented over the period July 2005 – December 2006. It is estimated that the community health camps will directly target up to 2,157 tsunami-affected families in Matara District and 2,997 tsunami-affected families in Hambantota District for a total of 5,154 families. Indirectly, the reconstruction and rehabilitation of the rural hospitals will target 6,196 tsunami-affected people serviced by these two hospitals in the Tangalle area, and indirectly benefit the 18,235 people that use these hospitals. The health trainings will target 15 health providers.

Although DOW does not plan to work in Sri Lanka past 2006, the projects are designed to improve the long-term health services available to tsunami-affected communities as DOW will link patient demand with health services available. By uncovering gaps among patient demand and the services being offered at existing facilities, local treatment options will be expanded to provide more efficient and effective treatment to the populations that need them the most. Furthermore, efforts will be made by DOW-USA to build health education programs to address community concerns relating to maternal health and chronic illnesses.
Episcopal Relief and Development (ERD) saves lives and builds hope in communities around the world. ERD works with Anglican and Episcopal partners to provide emergency assistance, such as food, water, and shelter, in times of disaster. ERD rebuilds devastated communities after the immediate crisis is over. Through food security and primary health programs, ERD offers long-term solutions to help people sustain safer, healthier, and more productive lives.

**COUNTRY SPECIFIC INFORMATION:**

**SRI LANKA**

ERD’s partner in Sri Lanka, the Diocese of Colombo, has approximately 25,000 members with 124 clergy and 30 lay leaders. The Diocese of Colombo opened a tsunami disaster relief office staffed by a coordinator for direct assistance and three regional coordinating centers for long term rehabilitation efforts in Amparai, Batticaloa, Galle, Hambantota, Jaffna, Mataara, and Valenchena. Projects in Sri Lanka are focused in seven areas: emergency aid -- shelter, food, rescue and medical care in the initial weeks after the tsunami reached 5,000 persons; fishing rehabilitation -- three boat yards have been established in Hambantota, Valaichenai and Jaffna, providing employment, producing canoes and flat bottom fiberglass boats, boat repair and replacement of fishing equipment such as nets and freezers with 2,682 fishermen total beneficiaries; housing -- 71 new homes have been rebuilt and 289 homes are being repaired in Batticaloa and Arugam Bay, with 1,445 beneficiaries; other livelihood recovery -- more than 1,800 grants and loans have been provided to individuals and families to restart small businesses, replacement tools and equipment and some vocational training have been provided to masons, carpenters, seamstresses and cooks, with 18,160 total beneficiaries; children -- Provisions for renovation and repairs of school buildings, school supplies, scholarship support, housing and board for completing exams, and a limited number of funds to ensure completion of education through university have been provided in the North and East, with 19, 311 total beneficiaries; trauma counseling -- 40 community-based counselors are participating in a two year practicum-based professional training course, with 15,248 total adult and child beneficiaries of short or long term counseling services; and other community interventions -- water purification for 17 temporary housing clusters in the north, human rights monitoring in partnership with the Diriya Foundation, replacing damaged hospital equipment and medical supplies, providing dry rations to 418 families in temporary housing, and repairing two damaged Buddhist temple properties. Program activities will continue through 2006, especially in areas of counseling support, housing repair and reconstruction, and livelihood recovery.
**SOUTH INDIA**

In Tamil Nadu and Andhra Pradesh states, ERD’s partner is The Church of South India (CSI). CSI is a union of churches, comprising 22 dioceses, with approximately million members of varying traditions. The CSI Synod office in Chennai coordinates activities through development officers in each affected diocese. ERD is supporting projects across seven dioceses including Krishna-Godavari, Madras, Trichy-Tanjore, Madurai, Tirunelveli, Thootakudi, and Kanyakumari. Projects in South India are focused in nine areas: emergency aid -- approximately 14,000 persons received some form of temporary community care such as food, shelter assistance and clothing in the immediate days after the emergency, and another 14,424 received relief supplies later in the year; fishing rehabilitation -- a total of 85 day and multi-day boats have been distributed, 30 boats have been repaired, and 165 fishermen have received replacement nets and other supplies, with the total fishermen beneficiaries coming to 1,187; housing -- 200 homes will be completed in 2005, and 450 temporary shelters, for 3,250 total beneficiary families; other livelihood recovery - loans and grants to Self Help Groups and individuals restarting businesses have reached 1,475 families, and the CSI Enterprise Development Program has established a loan fund of $180,000 in 2005 (additional funds to be added in 2006) to support local business development training and start up funds; children -- five school hostels were repaired, 453 school kits distributed, and long term support funds were established for 300 orphans and semi orphans to guarantee housing, medical care and food through the age of 18. 150 children are receiving tutoring and meals in after-school programs with 1,903 total beneficiaries; medical care -- in Packiapuram, Thorapakkam, Etipower, Madurai and Tuticorin, five health centers were established or re-established, three other centers received medical supplies, and 450 persons received hygiene kits, for a total number of 54,450 persons benefiting from health centers or mobile clinics; water and sanitation -- 900 families in Thorapakkam and Mamalapuram, reaching a total of 15,208 beneficiaries; trauma counseling - 35 persons are in training for long term community care response at Vellore Counseling Center, reaching a total of 6,225 beneficiaries, including 800 children; and other community interventions - 90 elderly persons who lost care givers have long term housing, food and medical care.

**NICOBAR ISLANDS**

ERD’s partner in the Andaman and Nicobar Islands is the Church of North India (CNI), a union of churches of varying traditions that comprises 26 dioceses with 1.5 million members. CNI’s Program Office in Port Blair is coordinating rehabilitation efforts on five major islands - Car Nicobar, Kamorta, Katchal, Nan Kovry and Teresa. ERD and CNI are implementing an integrated community development program, working directly with the Tribal Council as the local governing authority in this protected tribal area. A communal culture means that livelihood recovery strategies are based on cooperatives, shared farms and community centers. CNI has also interfaced closely with the Indian authorities in Port Blair to expedite shipping permits, and advocate for shelters and assistance which reflect the cultural priorities and preferences of the tribal groups. Projects in the Nicobar Islands are focused in seven areas: emergency aid -- CNI teams supported relief operations in 15 villages of Car Nicobar and distributed relief materials to 85 different relief camps, emergency food aid was provided to more than 8,000 people, nonfood items were distributed to over 3,000 people, and 750 units of baby food, dry food, chocolate and biscuits were distributed to children in Car Nicobar; housing -- CNI successfully advocated for more cost effective and culturally acceptable temporary shelters, and 257 houses have been rebuilt with local materials and 132 semi-permanent shelters have been provided reaching a total of 1,958 beneficiaries; livelihood recovery -- a total of eight poultry and pig farms have been restocked, and 15 self groups will receive start up funds in late 2005/early 2006, totaling eight beneficiary villages (approximately 8,600 persons); children -- community study centers are operating in 11 villages, providing education and recreation as well as one nutritious meal per day. Eight schools, primary though post secondary, have been rebuilt on Car Nicobar, and four more will be built in 2006, with 7,500 total direct beneficiaries and 18,000 indirect beneficiaries; water -- 250 families received 1,000 liter water storage tanks; trauma counseling - 41 persons from 13 villages have been professionally trained to facilitate community-based counseling services, with regular professional supervision.
for a total of 14,000 beneficiaries; and other community interventions -- four architects and engineers are in residence on Car Nicobar to oversee construction projects, local residents are hired for all other labor, and at the request of community leaders, three churches are also being rebuilt.

THAILAND
In Thailand, ERD has facilitated a partnership between Episcopal Churches in the US and Christ Church Bangkok, to provide assistance to communities in Phang Nga, Phuket, and Ranong Provinces. Christ Church Bangkok is involved in the tsunami disaster through the Thai Protestant Committee, an umbrella organization for Christian Churches in Thailand. Projects in Thailand are focused in five areas: emergency aid -- emergency response included food distribution and replacement of practical items such as household goods and furniture, small appliances, bicycles and school supplies with 4,100 total beneficiaries; fishing rehabilitation -- provided 13 new large boats, repaired 12 boats, supplied 52 engines, and supported the repair of nets and squid pots for a total of 50 beneficiary families; other livelihood recovery -- loans were provided to restart small businesses, including a grant to establish a cooperative bakery business for women previously involved in fishing for 30 beneficiary families; children -- seven community-based care workers monitor the status of families who have taken in orphans, and provide families with assistance and counseling support, with 180 total beneficiaries, and two preschools and two playgrounds/parks have been established or coordinated, benefiting more than 500 children; trauma counseling - - a care center in Khao Lak, Phang Nga provides support and training courses for volunteers and staff, both foreign and Thai workers, to understand how to recognize the signs of trauma, receiving 20 to 40 people every day.

“I am convinced that we will only do the millions of people affected by the tsunami justice if we involve communities on the ground in the decision-making process. And we must never forget that when we rebuild the physical infrastructure, we must do so in a way that is protective to the most vulnerable -- the displaced, the women and the children.”

Erskine Bowles
Food for the Hungry has 34 years of experience responding to emergency relief situations. Food for the Hungry is a Christian organization founded by Dr. Larry Ward and currently impacts individuals in more than 45 countries providing emergency relief and implementing development programs throughout the world. This includes its field programs, exploratory programs and presence of local-country offices (National Organizations). The group helps the world’s most disadvantaged people through child-development programs, agriculture and clean water projects, HIV/AIDS education, health and nutrition programs, micro-enterprise loans and education, and through teaching communities to become self-sustaining.

Food for the Hungry has been recognized repeatedly as one of the most efficient charitable organizations in America. Our annual budget exceeds $96 million and, in 2004, 93 percent of total income, including commodities, went directly to field programs.

COUNTRY SPECIFIC INFORMATION:

INDIA
Immediately following the tsunami disaster of December 26, 2004, Food for the Hungry provided staff members from north India, Ethiopia and the US to assist EFICOR with assessment and project planning. Food for the Hungry worked in the Tamil Nadu Region with local partners EFICOR and ESAF to provide food rations, hygiene supplies, clothes and on-site trauma counseling to more than 4000 households. Food for the Hungry and partners built 40 temporary shelters, 60 latrines and 18 bathrooms throughout the region. Food for the Hungry and EFICOR facilitated the rehabilitation and strengthening of community assets through a cash-for-work (CFW) program. Food for the Hungry and EFICOR initiated its CFW on January 29 in the eight villages where we already are active in emergency relief. In June, 4,222 families in 20 villages had directly benefited from CFW, and a total of 103,056 person-days of work had been accomplished. Food for the Hungry and EFICOR also provided the basic assets needed by trades people and small business owners through an Asset-for-Work program, in order for them to re-establish their livelihood activities. EFICOR completed the screening and selection of families for participation in the program on April 30. There were 400 families who registered to receive small-business assets. Distribution of livelihood assets took place May 15.
**INDONESIA**
Initially, Food for the Hungry provided life-saving relief in Banda Aceh, partnering with the Church of the Holy Christ Indonesia, to provide food packages and medical teams in refugee camps throughout the province, the area hardest hit and closest to the epicenter of the earthquake. Food for the Hungry's development work is now focused in Meulaboh, the West Coast of Aceh Province and Banda Aceh. Food for the Hungry has designed and is implementing four initial rehabilitation programs in Meulaboh: cash-for-work, livelihood, agriculture and education, as well as a focus on agriculture programming in Calang. Permeating each of these programs is a focus on working with women and providing psychosocial care. Other relief and development programs focused on the following sectors: infrastructure -- cash-for-work programs for IDPs, with over 500 direct beneficiaries and more than 2000 indirect beneficiaries; education -- working with provincial and local leaders with a special emphasis on educating women and children, there are 100 direct beneficiaries and 400 indirect beneficiaries from these projects with a program duration of 10 years; livelihoods -- rehabilitation of the non-fishing sector of livelihoods, and financial stewardship training with 403 direct beneficiaries, and 1,612 indirect beneficiaries the program duration is through the end of 2006; agriculture -- providing tools for cultivation, chainsaws, fencing materials, the distribution of hand tractors, seed for planting and the distribution of vegetable seed packets to 1000 farming households, in an 18-month project duration.

**THAILAND**
Food for the Hungry's assessment team was on the ground in Thailand within 24 hours after the Tsunami hit distributing water, food and clothing to more than 3,000 people throughout Phuket, Phan-nga, KohNok, and Nam Khem. Food for the Hungry also spearheaded the 'We Love Thailand' (WTL) coalition which has benefited 20,500 individuals and implements close to 200 projects across 22 communities through emergency response, livelihood restoration, family and children programs, homes and construction projects and care and counseling support.

**SRI LANKA**
Two days after the tsunami, Food for the Hungry provided financial support to partners in Sri Lanka to provide medical assistance, food and water distributions, well pumps and blankets to meet the needs of 10,000 families. Furthermore, Food for the Hungry sent a shipment of life-saving supplies valued at $368,000 to partner Pentecostal Assemblies of Sri Lanka.
Gifts In Kind International partners with businesses and nonprofit organizations to provide quality products and services that improve lives in communities around the world. Gifts In Kind International is the world leader in product philanthropy and the third largest product and service philanthropic provider in the United States. Its network of 450-plus Gifts In Kind® programs provides nonprofits access to million of dollars annually in product and service donations from companies worldwide—over $800 million in 2004. Today’s top manufacturers and retailers, including 44 percent of the Fortune 500 and thousands of other companies, rely on Gifts In Kind International to design and manage the donation process.

During the first 90 days, Gifts in Kind International contacted all major donors and over 5,000 other companies within the first two days; developed database of needs from approximately 40 major NGOs; developed website communications with information about Gifts In Kind International’s role; developed the UPS free shipping system and outreach to other transportation providers; completed on-site assessment mission to Indonesia and Sri Lanka; participated in InterAction facilitated meetings; communicated through the media - CNN, MSNBC, and Belo-TV DC bureau; undertook business association outreach and presentations; and facilitated 35 shipments of donations by partner charities.

COUNTRY SPECIFIC INFORMATION:

LONG-TERM COMMITMENT IN INDONESIA
Gifts In Kind International maintains a Global Affiliate Program in Jakarta, Indonesia with the United Way International program called Yayasan Mitra Mandiri and intends to strengthen partnerships with this organization. Gifts in Kind has also established a new partnership with the international NGO International Relief and Development (IRD) to expand product donation distribution into western Sumatra to reach people in need in areas affected by the tsunami. Gifts in Kind has established a ‘Kits for Kids’ program to generate donations of school supplies, personal care items, and footwear packed in individual backpacks to be distributed to school age children in western Sumatra in partnership with IRD and Yayasan Mitra Mandiri.

LONG-TERM COMMITMENT IN SRI LANKA
Gifts in Kind has established a partnership with IRD to distribute product donations in Sri Lanka. Additional discussions with IRD have been aimed at establishing a Gifts In Kind International Affiliate Program in Sri Lanka to develop indigenous programs of corporate philanthropy to accompany the existing relationship with the United Way of Jakarta, Indonesia.

The total private donations amount is less than that reported in the 90-day report, as GIK has received approval from certain donors to reprogram tsunami-specific donations.
Habitat for Humanity International, based in Americus, Ga., is an ecumenical Christian ministry dedicated to eliminating poverty housing. Habitat has built more than 200,000 houses, providing shelter for more than one million people and positively impacting the lives of families in more than 100 countries.

Habitat for Humanity International’s tsunami recovery efforts in South Asia focus on four of the hardest-hit countries: Indonesia, Sri Lanka, Thailand, and India. The organization is building new houses for tsunami-affected families as well as renovating and repairing houses damaged in the disaster. Family members often help with the construction, working alongside national and international volunteers and local skilled workers.

Before the completion of its tsunami-recovery project, the organization plans to benefit at least 35,000 families through housing, training in construction and materials manufacturing and other technical assistance. Habitat is working with other NGOs and organizations to provide a holistic approach to community recovery.

COUNTRY SPECIFIC INFORMATION:

INDIA
Commencement of new construction was delayed until government policies were handed down (March 30), but 250 houses so far have been repaired in Kanyakumari, Tamil Nadu. HFH India established a Disaster Response Center in Chennai and plans to build and renovate houses in selected communities of Tamil Nadu, Pondicherry and Andhra Pradesh states. Government of India policy mandates that new houses built for tsunami recovery must be 300-325 sq.ft. (28-30 sq.m.) and be complete in every way, not extendable as is the model for HFH “core” houses. Plans are to provide First Shelter housing for up to 6,000 families in the first building phase. HFH India also plans to build up to six Building and Training Centers (BTCs) as a key part of its tsunami reconstruction activities. Four will be located in Tamil Nadu, Nagappattinam, Kanyakumari, Pondicherry and Tuticorin. HFH India established its tsunami-response centre on the east coast in Chennai, the state capital of Tamil Nadu. Its initial tsunami-recovery activity has been repairs and renovations in four districts of Tamil Nadu and Kerala, on the southern tip of the country. Commencement of construction of new houses had to wait for the government policy on housing for the tsunami-affected areas, which was announced in early April. In partnership with other NGOs, Habitat is now providing the housing component of community reconstruction projects on the east coast. As of September 30, 2005, construction has been completed on 25 new housing units (retrofits), and 1,062 housing units have been repaired, for a total of 1,087 units. Additionally, 144 housing units are under construction, and another 890 are being repaired or renovated.

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Jennifer Lindsey
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For more information, please visit:
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Habitat for Humanity International

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**INDONESIA**

Habitat for Humanity has opened the first Building and Training Center in Medan and plans to open a satellite center in Nias. HFH’s goal is to build 1,000 homes including 300 in Banda Aceh and 300 in Nias, constructing temporary light-gauge steel houses consisting of basic structures and a roof to provide immediate shelter for those left homeless after the tsunami. One model steel-framed house has been constructed in the Tiang area of Banda Aceh and foundations are underway for an additional 80 houses throughout Aceh.

BTCs will be established in Sigli and Meulaboh. Habitat’s tsunami-recovery project operates from building centers in Banda Aceh, Sigli and Meulaboh, with satellite operations in several west coast communities. Habitat has been certified as a tsunami housing provider by the governmental tsunami rehabilitation and renovations authority, the BRR.

The BRR has evaluated Habitat’s projects in Banda Aceh and Sigli and plans to fund Habitat’s repair and renovations projects in those communities. As of September 30, 2005, construction has been completed on 691 new housing units. Additionally, another 1,047 housing units are under construction.

**SRI LANKA**

Within three weeks of the tsunami, Habitat affiliates began building on existing foundations in Galle and Batticaloa. To date, with the help of international teams, 15 houses in Batticaloa are complete or near completion and 84 houses in Galle. These first homes are 250 sq.ft. (23 sq.m.). HFH plans to build 10,000 transitional houses for displaced families in Sri Lanka, and support at least 2,000 additional families through Building and Training Centers.

Habitat’s early post-tsunami building was concentrated in the service areas of existing affiliates in Galle, on the southwest coast, and Batticaloa, on the east coast. East coast involvement now extends north to Trincomalee and south to Kalmanai and Arugam Bay.

Habitat has set up block-making operations to provide materials of the quality and quantity needed and to provide job training and employment for tsunami-affected people. On-the-job training is available to masons and carpenters trained by a partner NGO. More than 800 international volunteers have worked in the tsunami-recovery project in Sri Lanka.

As of September 30, 2005, construction has been completed on 177 new housing units, and nine housing units have been repaired, for a total of 186 units. Additionally, 255 housing units are under construction, and another 20 are being repaired or renovated.

**THAILAND**

Habitat for Humanity has begun building a 20-house development and has a commitment from the government to supply land and infrastructure for 224 more houses. HFH is working with a consortium of Christian international NGOs and Thai Churches to build 1,000 transitional houses and repair an additional 1,000 houses over the next two years, mainly in the Pang Nga and Krabi areas.

Building and Training Centers (BTCs) are expected to support the building and repair of up to 50 houses per month. In BTC Pang Nga, Habitat staff and volunteers are making and stockpiling concrete roof tiles, training local workers on tile production and providing construction expertise to other organizations building schools and other community facilities.

The Krabi BTC expects to undertake similar operations starting later in April. The tsunami-recovery project in Thailand is headquartered in Khao Lak to serve coastal communities both north and south of there. From Phrue Tiaou and Bang Niang in Phan Nga province, Habitat has expanded into Tachatchai in Phuket province as well as communities in Ranong province.

Tsunami-affected locals benefit from employment with roof tile fabrication facilities set up by Habitat. As of September 30, 2005, construction has been completed on 125 new housing units, and 25 housing units have been repaired, for a total of 150 units. Additionally, 15 housing units are under construction, and another 22 are being repaired or renovated.
Heart to Heart International is a global humanitarian organization that inspires, empowers and mobilizes individuals to serve the needs of the poor in their communities and around the world. Heart to Heart accomplishes this mission by forming key partnerships that promote health; alleviate hunger; offer resources, education and hope; and provide opportunities for meaningful service. Since inception, Heart to Heart has maintained an overhead of no more than 2 percent, sending the remaining 98 percent directly to our programs and projects. Founded in 1992, Heart to Heart has quickly become one of the leading humanitarian organizations in the world and regularly delivers aid to more than 50 countries each year. Disaster relief efforts are not new to Heart to Heart. Heart to Heart has been a leader in responding to victims of hurricanes, floods, tornadoes, earthquakes, and man-made disasters around the world.

COUNTRY SPECIFIC INFORMATION:

SRI LANKA
Since early January 2005, Heart to Heart has focused on two areas: Improving healthcare and addressing the needs of widows and orphans in Sri Lanka. Shipments of medical aid have helped the country overcome shortages of essential medicines in the wake of the tsunami. Working with the Adventist Development & Relief Agency, Heart to Heart has constructed a vocational center in Tangalle, along the country’s southern coast. This center will provide job training to local populations of women and children that were widowed and orphaned by the tsunami. Heart to Heart is also working with Community Concern Society north of Colombo to provide water and sanitation, as well as new housing, as part of a family relocation project for ethnic minorities that once lived along the tsunami-affected shorelines of Sri Lanka. Heart to Heart is also planning to recruit medical volunteers that can staff mobile clinics and provide health education as a supplemental activity in 2006 to help Sri Lanka rebuild its healthcare infrastructure.

INDONESIA
Heart to Heart has coordinated three medical airlifts to the Aceh province and Nias region of Indonesia to assist in the relief operations of our humanitarian partners, International Relief & Development and Hope Worldwide. The airlifts included medicines, medical supplies, nonperishable food items and personal-hygiene kits.

THAILAND
Heart to Heart coordinated the procurement, shipping and installation of a water-treatment plant near Phuket. This plant is providing clean drinking water for the entire region around the rural area of Kuk Kak, where people had been living on water rations.
The mission of Helen Keller International (HKI) is to save the sight and lives of the most vulnerable and disadvantaged. HKI combats the causes and consequences of blindness and malnutrition by establishing programs based on evidence and research in vision, health and nutrition. The vision of HKI is to strive to be the most scientifically competent organization in improving vision and nutrition throughout the world.

**COUNTRY SPECIFIC INFORMATION:**

**INDONESIA**

HKI is continuing to provide nutritional supplements to children as part of the tsunami reconstruction efforts in Aceh and other affected areas in Indonesia. Specifically, HKI is supporting the distribution of four vitamin and mineral products: 1) Vitalita® sprinkles, an at-home fortificant; 2) iron-fortified soy sauce; 3) vitamin A capsules; and 4) zinc tablets as an adjunct treatment for diarrhea. As of June 14, 2005, HKI had enabled the distribution of 954,227 Vitalita® sprinkles sachets, 2,040,913 iron-fortified soy sauce sachets, 623,952 vitamin A capsules and 488,340 zinc tablets. In addition, HKI is implementing camp- and school-based Primary Eye Care (PEC) programs in Banda Aceh and Aceh Besar. PEC activities focus on vision screening and provision of eyeglasses in 11 of the 14 tsunami-affected districts. HKI is also identifying early signs of xerophthalmia, dry eye that results from vitamin A deficiency, among Internally Displaced Persons (IDPs) and among those living in the broader community with families or outside official IDP camps. As of June 14, 2005, HKI had conducted 2,471 vision screenings, provided 1,253 pairs of eyeglasses, issued 116 referrals for cataracts or other eye pathologies and identified four visually impaired or blind persons. Ongoing monitoring is also being conducted to determine coverage of and need for micronutrient supplements and eye care. The current reconstruction project will be carried out through May 2007. HKI has had an active presence in Indonesia since the early 1970s and will continue its long-term commitment to vitamin A deficiency control, nutrition surveillance, cataract outreach services and tsunami reconstruction.
INMED Partnerships for Children is a non-profit 501(c)(3) global development organization dedicated to inspiring communities in the United States and fostering their ability to develop healthy, educated children with increased opportunities for the future.

During the first 90 days after the tsunami, INMED provided needed products to support organizations that have projects on the ground in the tsunami-affected regions. As a result of partnerships with Counterpart International, the National Cancer Coalition and our suppliers, INMED has been able to secure valuable pharmaceuticals, medical supplies, shelters and various other items that were listed as needed commodities for the tsunami victims in targeted areas in the affected region. INMED expended all private donations within the first three months after the disaster. For project details related to INMED’s efforts in the tsunami-affected region, please see the InterAction Tsunami Accountability Report at www.interaction.org.
Interchurch Medical Assistance, Inc. (IMA) provides comprehensive technical and material assistance for overseas health programs of partner churches, faith-based development and relief organizations, and public and private agencies with similar goals. Major activities focus on disease elimination and treatment; strengthening health care systems; procurement of medicines, medical supplies and equipment; and serving as liaison between international funding entities and overseas health-related community organizations, with emphasis placed on partnership, technical exchange, training and capacity building. As a member association of twelve Protestant relief and development agencies, IMA works through a worldwide network of faith communities affiliated with its member agencies. IMA’s and its members’ programs serve people in need, without regard to ethnicity, creed, color, gender, national origin, or political affiliation.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
IMA has moved into a disaster recovery phase with a focus on rebuilding and helping tsunami survivors to re-establish their livelihoods. IMA has pledged to use remaining funds donated for tsunami relief in rebuilding of the health care system.

SRI LANKA
IMA has provided 225 IMA Medicine Boxes for Sri Lanka at the request of its member relief and development agencies Church World Service (CWS) and Lutheran World Relief (LWR). Valued at $725,000, the medicines and medical supplies will treat approximately 225,000 adults and children and have been distributed at the disaster sites by CWS Sri Lanka staff and LWR/IMC (International Medical Corps) country partners. IMA anticipates providing additional emergency medicines and supplies through the end of 2005.

THAILAND
IMA has provided 100 IMA Medicine Boxes for Thailand at the request of its member relief and development agency CWS. Valued at $300,000, the medicines and medical supplies will treat approximately 100,000 adults and children and have been distributed through the health ministry of the government of Thailand. IMA anticipates providing additional emergency medicines and supplies through the end of 2005.

INDIA
IMA is supporting Church’s Auxiliary for Social Action (CASA), a nongovernmental organization in India, in its rebuilding activities in the Andaman and Nicobar Islands, particularly with the construction of Health Centres and “Birth House/Death House,” among other health-related recovery projects.
International Aid is a health-focused, Christian relief and development organization that provides for both the physical and spiritual needs of people worldwide. To date it has sent $10.6 million dollars worth of relief and medical supplies, including 14 medical clinics and 17 water filtration systems, to the areas hardest hit by the tsunami. Just over $4 million has been raised in cash donations. International Aid signed a Memorandum of Understanding with the Provincial Health Office of Aceh to establish a Medical Equipment Service Center in Banda Aceh. This is a two-year commitment to assist in repair and maintenance of hospital and clinic equipment in Indonesia. The service center will open in November 2005.

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http://www.internationalaid.org
International Medical Corps (IMC) is a global humanitarian nonprofit organization dedicated to saving lives and relieving suffering through health care training and relief and development programs. Established in 1984 by volunteer doctors and nurses, IMC is a private, voluntary, nonpolitical, nonsectarian organization. Its mission is to improve the quality of life through health interventions and related activities that build local capacity. By offering training and health care to local populations and medical assistance to people at highest risk, and with the flexibility to respond to emergency situations, IMC rehabilitates devastated health care systems and helps restore them to self-reliance.

**COUNTRY SPECIFIC INFORMATION:**

**INDONESIA**

IMC has served 950,000 beneficiaries in Indonesia since the tsunami and March 2005 earthquake, and is providing primary health care services via mobile and fixed clinics in the districts of Banda Aceh, Aceh Besar, Aceh Jaya and Pidie in Aceh Province and Nias Island in North Sumatra. IMC is also developing psychosocial and mental health services in Aceh Province, where few previously existed, to address the grief and bereavement needs of tsunami survivors as well as the mental health burden. IMC has improved access to safe water and sanitation and reduced hygiene-related diseases by promoting community health and hygiene education. IMC is building national health care capacity by facilitating the rehabilitation of health clinics, conducting training and supporting medical and nursing schools in Banda Aceh. IMC is re-establishing survivors’ livelihoods through micro-finance activities for sewing, brick-building, construction and agriculture; micro-credit loans are enabling women’s sewing and embroidery cooperatives to create and sell their work in local markets. IMC’s long-term commitment to tsunami recovery in Indonesia includes west-coast villages in Sampoineiet District of Aceh Jaya, which were previously inaccessible. Activities here will include re-establishing maternal and child health care services, improving the local economy, increasing access to markets and providing safe water. IMC’s target geographic areas for tsunami-recovery activities will continue to include Banda Aceh, Aceh Besar, Aceh Jaya, Pidie and Nias.

**SRI LANKA**

To date, IMC has served 657,751 beneficiaries in Sri Lanka’s North and Eastern Provinces through primary health care activities (including mental health services, pre-natal care, growth monitoring, immunizations and health education) and livelihoods recovery programs. WHO and the Sri Lankan Ministry of Health recognize

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http://www.imcworldwide.org

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**total private donations**

$23,574,407

**total expenditures**

$19,700,388
IMC as the leading mental health agency in Sri Lanka; as such, IMC is currently integrating culturally appropriate mental health services into Kalmunai district’s primary health care system, and also offering community-based psychosocial services throughout Eastern Province. IMC is implementing highly successful cooperative job and business trainings and community micro-finance activities, such as road reconstruction and water/sanitation projects, to regenerate income production. IMC is beginning construction of two new primary health care clinics in Ampara District—one in Sainthamaruthu benefiting 25,000 residents, and one in Karaitivi Town benefiting 23,000 residents. IMC’s long-term tsunami-recovery program in Sri Lanka will improve the affected population’s access to mental health services, regenerate livelihoods and help restore the affected region’s health care system to self-reliance.

After an initial shipment which IMC successfully distributed, a donor who had committed $20 million in gifts-in-kind cancelled subsequent consignments, as a result of customs-related complications.

“An unexpected event like the tsunami has highlighted the vulnerabilities to recurrent hazards of groups of the population already in the lower levels of the development process.”

World Bank-ADB-U.N. Joint Assessment Report
International Orthodox Christian Charities (IOCC), a non-sectarian humanitarian relief and development agency based in Baltimore, MD, is working both independently and with our partners (the Orthodox Metropolitanate of Hong Kong and Southeast Asia and local church officials in Indonesia, Church World Service, and Save the Children) to provide emergency assistance to vulnerable families and individuals affected by the earthquakes and tsunamis in Southeast Asia.

**IOCC Response: 26 December 2004 – 30 August 2005**

During the initial eight-month period of emergency response and recovery efforts, IOCC and its partners have been implementing a number of activities in Indonesia, Thailand, and Sri Lanka, including: distribution of fresh food parcels to IDPs in camps and living with host families in North Sumatera Utara and East Aceh, in cooperation with local Orthodox and Protestant church officials, and Save the Children; provision of school kits to affected children and schools in Sumatera Utara; Airlift supply of urgently-needed humanitarian supplies, including 43,000 soy rice meals and 20 tons of canned meat, to the province of Aceh; airlift supply of 8,000 health, school and baby kits to Aceh; shipping support for containers of mixed commodities, including blankets, baby kits, school supplies, water pumps, and relief kits; shipment of four 40-foot containers of liquid multivitamins for children and adults for distribution in Sri Lanka; airlift supply of approximately 300 medicine and medical supply boxes, each with WHO-approved medical supplies for 1,000 adults and children for up to three months, to Aceh and Thailand; and additional substantial monetary support to Church World Service to provide medical assistance, food and non-food material aid, livelihood recovery and capacity-building, emergency shelter, ongoing psychosocial assistance, and other aid to IDPs in Banda Aceh, Aceh Besar, Aceh Barat and Nagan Raya, and Nias Island, with special emphasis on female-headed households, widows, children, the elderly, and families with limited means of support.

**IOCC Planned Assistance: 30 September 2005 – December 2006**

In Indonesia, IOCC plans to provide computer and vocational training courses, construct and support a health clinic, and undertake an integrated community recovery program.

In Thailand, IOCC plans to publish a “Women’s Resource Guide,” construct and equip a new health clinic, provide vocational training, educational workshops, summer camp and other activities for tsunami-impacted children and youth, and other educational, psycho-social and community assistance.
International Relief and Development (IRD) is dedicated to improving the quality of life of people in the most economically deprived parts of the world by facilitating and supporting assistance tailored specifically to their needs.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
IRD’s program of emergency response to the Asia earthquake/tsunami disaster is providing emergency water and sanitation in order to meet the immediate needs of those persons most affected by the South East Asia earthquake/tsunami, with 39,913 beneficiaries. In addition to the emergency response, medium term rehabilitation works were undertaken at the Lambaro Water Treatment Plant and Kampung Jawa Sewage Treatment Plant, addressing the water and sanitation needs for over 100,000 people. IRD is also implementing emergency livelihood recovery and income generation activities in the Meuraxa and Kuta Raja sub-districts of Banda Aceh through cash-for-work opportunities, provision of capital inputs to launch small, private businesses in order to offer employment opportunities and to break the cycle of humanitarian aid dependence. Since February 2005, IRD has provided 220,680 person-days of labor under the cash-for-work project in both districts. To ensure sustainable sources of income, IRD is providing business training and capital to launch small business. 2185 people have attended the small business training and 95% of the participants have submitted their business plans. 257 small businesses have been provided with start up capital and 543 people have directly benefited from the grant. IRD has started shrimp pond rehabilitation in six villages (Cot Lamkeuweuh, Gampong Blang, Surien, Lamjabat, Asoe Nanggroei and Gampong Pie) in the sub-district of Meuraxa with the size of 25 hectares. On livelihoods, IRD is working with a local partner, the Yayasan Lamjabat (the Lamjabat Foundation). Since January 2005, IRD has been providing targeted and effective health services to the peoples of Aceh. In partnership with Direct Relief International, IRD is working with 13 local NGOs in Aceh implementing a range of health interventions in three districts (Banda Aceh, Aceh Besar, Aceh Jaya) and 21 sub-districts in Aceh, targeting over 80,000 beneficiaries in returnee communities, IDP settlements and temporary location centers. IRD effectively builds the capacity and the competence of local organizations through targeted trainings, coordination meetings, continuous monitoring, and the provision of small grants. In addition to this, eight shipments of pharmaceuticals, medical supplies and commodities (including 26,500 mosquito nets) were distributed to hospitals, outpatient clinics, and other community health facilities, benefiting over 250,000 vulnerable peoples in the province.

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Elsie Tama
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For more information, please visit:
http://www.ird-dc.org
SRI LANKA
IRD under a World Vision grant is extensively rehabilitating the water sources (wells and river), treatment plants, pumps and distribution lines providing potable water to the coastal cities of Bundala and Kirinda in Hambantota province, which have more than 10,000 persons. Additionally, IRD manages a health grants program in Tricomalee, Ampara and Galle districts funded by Direct Relief International (DRI) for health activities such as the prevention of outbreaks and epidemics of malaria and other mosquito-borne diseases, prevention of outbreaks of diarrheal diseases, rehabilitation and construction of water and sanitation facilities, rehabilitation of health centers, eye care services for children, HIV/AIDS prevention, provision of medical care including reproductive health services for people living in camps as well as other tsunami affected population. During this period, IRD is working with 20 local NGOs.

“We have come together to express our country’s sympathy for the victims of a great tragedy. We’re here to ask our fellow citizens to join in a broad humanitarian relief effort.”

U.S. President
George W. Bush
INTERNATIONAL RELIEF TEAMS

Founded in 1988, International Relief Teams (IRT) is a nonprofit humanitarian organization dedicated to providing critical assistance to victims of disaster, poverty and neglect worldwide.

COUNTRY SPECIFIC INFORMATION:

INDIA
IRT is working with the Catholic Diocese of Kottar, Tamilnadu, India, to rebuild a school. The school serves not only as an education institution for the children, but also serves as a local resource for various community outreach and support services—especially for the provision of aid for tsunami-affected families. There are approximately 500 children in the school, but nearly 12,000 people in the area that benefit from the school (by the school serving as a distribution center for local aid).

SRI LANKA
In collaboration with the Sri Lanka National Association of Counselors, IRT has been implementing a psychosocial training program to train teachers and professional caregivers in effective methods of helping victims, especially children, suffering from post-traumatic stress. IRT is also conducting a training program for professional counselors to help them deal with more severe cases of post-traumatic stress. Since this program focuses on training local professionals who then go out to provide services in the resettlement camps, it is difficult to assess the true impact of this program (in regards to total people reached). A conservative of the number of people served by this program is estimate is 1,000 people. IRT and its partners will assess the need and feasibility of continuing this program in late 2005. IRT is also working with the Estate of Pearl S. Buck to translate into local indigenous languages) The Big Wave, about a village destroyed by a tsunami, and the story of a boy who rebuilt his life. IRT and its partners will distribute 25,000 copies of the abridged and translated book. IRT is also providing assistance to local organizations involved in the rebuilding of 150 homes, and other facilities that sustain community recovery and development. If an average estimate of five people per household were used, the total number of people benefiting from this effort is 750.

IRT’s commitment to the survivors of this unprecedented tragedy remains ongoing. IRT is now concentrating on helping tsunami survivors recover psychologically and economically from the emotional and physical scars left by the disaster.
The International Rescue Committee is a world leader in relief, rehabilitation, protection, post conflict development, resettlement services, and advocacy for people uprooted or affected by violent conflict and oppression. IRC delivers lifesaving aid in emergencies, rebuilds shattered communities, cares for war-traumatized children, rehabilitates health care systems, restores lost livelihoods, and strengthens the capacity of national organizations and communities. IRC responds to natural disasters in areas where it is already present.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
IRC deployed a robust emergency response to the tsunami crisis in Aceh, Indonesia. IRC teams delivered emergency primary health care, urgent water and sanitation interventions to prevent the spread of water-borne diseases, provided support to vulnerable children and delivered over 60 tons of emergency supplies and materials. As Aceh's people begin the long road to recovery, IRC is strengthening communities' coping capacity through supporting people to recover their livelihoods, and delivering innovative revitalization interventions that allow communities to be the drivers of their own recovery. IRC has been present in Aceh since 2001 and plans to continue its commitment to the Acehnese people. IRC is providing assistance to over 120,000 individuals in 160 communities throughout some of the most devastated areas of Aceh Province, focusing on the districts of Banda Aceh, Aceh Besar, Nagan Raya, Aceh Barat, Aceh Jaya and Aceh Utara.

The total private donations figure is different from that noted in the first report as some non-US donations were inadvertently counted.
JRS has a threefold mission of accompaniment, service and advocacy on behalf of refugees and forcibly displaced persons. With a priority to working wherever the needs of forcibly displaced people are urgent and unattended by others, JRS offers a human and pastoral service to the refugees and displaced people and to the communities which host them through a wide variety of rehabilitation and relief activities. JRS advocates the cause of the forcibly displaced and facilitates the response of local churches, Jesuit institutions and other communities and organizations to the needs of refugees.

JRS enjoys an established permanent presence in both tsunami-affected areas of Aceh and Sri Lanka. As of September 30, 2005, local JRS teams have shifted from an emergency phase into a rebuilding lives/communities relief phase. In Aceh, with the support of JRS/USA, local JRS teams have been able to build housing units for tsunami-displaced communities in several island villages of Pulo Aceh, the northernmost region of Indonesia. In summary, as of September 30, 2005, JRS/USA has incurred approximately US$370,000 of total expenditures (primarily in Aceh).

In addition, the first disbursement of funds for the JRS/USA tsunami relief program in Sri Lanka is expected to be completed by mid-January 2006.
Founded in 1945 to provide relief to devastated Europe after World War II, today LWR is an international, nonprofit agency that works with rural communities and local organizations in Africa, Asia, and Latin America to promote disaster recovery, sustainable livelihoods, food security, natural resource management and peace. LWR is also a leader among U.S. faith-based organizations in mobilizing its constituents in action and advocacy for global justice. Through its strong partnerships, its commitment to innovation and long-term, sustainable solutions, as well as its ability to mobilize constituents, LWR is unmatched in designing, monitoring and growing effective and efficient partnerships for change.

Lutheran World Relief and other members of Action by Churches Together (ACT) International alliance pooled all private funds they received for tsunami response. These funds were allocated to specific humanitarian, recovery and reconstruction activities in a process that does not permit distinguishing the use of contributions received from American donors from the uses made of contributions received from private donors in the other countries where the members of ACT raised funds.

**COUNTRY SPECIFIC INFORMATION:**

**LONG-TERM RESPONSE**

LWR is planning a long-term, 10-year response with the following goal: Through strengthening local capacities, LWR will alleviate suffering and build resilient, peaceful communities among the most vulnerable tsunami survivors in Indonesia, Sri Lanka and India. LWR’s priority sectors for long-term response are relief/rehabilitation, livelihoods, risk management, and peace-building/conflict mitigation.
**INDIA**
CPI acquired and shipped pharmaceuticals (antibiotics, penicillin, oral rehydration salts, etc) to India for relief efforts.

Total Expenditure including in-kind donation for India: $1,945,935.

**MALDIVES**
CPI acquired and shipped pharmaceuticals (antibiotics, penicillin, oral rehydration salts, etc) to Maldives for relief efforts.

Total Expenditure including in-kind donation for Maldives $589,134.

**SOMALIA**
CPI coordinated the creation of 540 emergency kits that were sent to Somalia and distributed in refugee camps. Counterpart also acquired and shipped 30 large, portable shelters to be used in refugee camps.

Total Expenditure including in-kind donation for Somalia: $345,428.

“I cannot begin to imagine the horror that went through the families and all of the people who heard this noise coming and then had their lives snuffed out by this wave...The power of the wave...to destroy everything in its path is amazing.”

Former Secretary of State
Colin Powell
MAP International promotes the Total Health of People living in the world’s poorest communities by partnering in the provision of essential medicines, prevention and eradication of disease, and the promotion of community health development.

MAP International defines Total Health as the capacity of individuals, families and communities to work together to transform the conditions that promote, in a sustainable way, their physical, emotional, economic, social, environmental, and spiritual well-being.

MAP International distributes medicines and medical supplies to Christian hospitals, agencies and health care workers in developing nations. It provides emergency medical assistance, assists in health-related community development efforts, and offers grant fellowships for selected senior medical students to work in mission hospitals in the developing world. MAP cooperates with existing Christian missions, national churches and indigenous NGOs to provide the services and programs listed below.

COUNTRY SPECIFIC INFORMATION:

**INDIA**

$1 million worth of donated medicines and medical supplies were sent by MAP for use by International Relief Teams as well as church-related disaster response teams.

The greater need, however, was for trauma counseling, and MAP awarded a grant of $32,520 to the Christian Counseling Center in Vellore for a two year project to study the extent of Post Traumatic Stress Disorder (PTSD) in selected parts of Tsunami-affected Tamilnadu. It will provide psychosocial interventions through a community-based and culturally-sensitive model to a study group of 8,000 persons and will systematically train and prepare teams of community-based leaders and trainers to meet future disaster mental health needs. The study will run from March 2005 – February 2007.

**INDONESIA**

The first phase, the emergency response, consisted of distribution of over $25 million in medicine, and medical/trauma supplies and New Emergency Health Kits (NEHKs) for use in western and northern Sumatra, and the district of South Nias. The second phase, health infrastructure rebuilding, will occur for the next two years.

MAP has hired a recovery site coordinator and a logistics coordinator/pharmacist and has signed a formal agreement with Gereja Bethel Indonesia (GBI), a 20,000 member congregation in Medan, to construct, equip, and supply a 30-bed hospital capacity.
In Pulautello to serve its population of 7,000 as well as those in the 16 other inhabited islands in the Rock Island group of South Nias, North Sumatra. Additionally, MAP and GBI will purchase and equip two mobile clinics and set up regular service circuits for area inhabitants.

MAP has also signed an MOU with Obor Berkat Indonesia (OBI) to rebuild or rehab and expand health clinics and health posts in the Meulaboh area (20,000 service population) and the village of Ligan (7,000), Gleebreuk clinic at Lhoong (10,000-12,000), and the clinics of Ateuk Jawo and Ateuk Pahlawan in Banda Aceh (20,000).

In partnership with World Relief, MAP is training community health workers for Nias, the Rock Island area, and the OBI project areas of Nias.

SRI LANKA

In a six-month period from January through June 2005, MAP International distributed four forty-foot sea containers of medicines and medical/trauma supplies and three New Emergency Health Kits (NEHKs), primarily through International Medical Corps (IMC) and Operation Blessing International. There was no commitment beyond this emergency response window. Emergency medicines went to Kalmunai in the Ampara District for use in Kalmunai, Colombo, and Ampara, and estimated beneficiaries were 25,000. The Ministry of Health assisted in clearing and distributing the medicines, as well as furnishing reports.

“If basic needs…are not urgently restored to all populations by the end of this week, WHO fears that outbreaks of infectious disease could result in a similar number of fatalities as occurred due to the direct impact of the tsunami,”

World Health Organization
MERCY CORPS

Mercy Corps works around the globe amid disasters, conflicts, chronic poverty and instability to unleash the potential of people who can win against impossible odds. Currently, the organization’s 2,100 staff worldwide reach seven million people in more than 35 countries. Mercy Corps is a nonprofit organization with headquarters offices in Portland, Ore., Washington, DC, and Edinburgh, Scotland. Since 1979, Mercy Corps has provided $1 billion in assistance to people in 81 nations. Over 92 percent of the agency’s resources are allocated to programs that help people in need.

COUNTRY SPECIFIC INFORMATION:

INDIA
Using private funding, Mercy Corps partnered with two local Indian organizations to provide emergency relief and long-term development to tsunami-affected villages. The agency has reached over 44,000 people in India to date. Through its partner organization DHAN, Mercy Corps provided support for agricultural activities to over 10,600 people in India’s devastated Nagapattinam district. Agricultural restoration projects include drainage and de-silting of salt-damaged crop fields, rehabilitation of contaminated village ponds, and provision of small livestock such as goats to families. To date, more than 600 acres of cropland have been reclaimed. Mercy Corps and its local partners have also built over 460 temporary shelters and community buildings, including houses, community halls, storerooms and community kitchens. Due to the capacity of the Indian government and local NGOs, Mercy Corps will have phased out its tsunami related activities in India by the end of 2005.

INDONESIA
Mercy Corps’s tsunami response in Indonesia is a multi-faceted program aimed at supporting community and economic recovery focusing on approximately 70 villages around Banda Aceh, Aceh Besar, and Meulaboh. Using private funds, Mercy Corps started a cash-for-work program, which at its peak employed over 18,000 workers and re-built or restored over 300 village facilities to aid people to return to their villages. Using private donations, Mercy Corps’ social revitalization activities have worked to strengthen religious, educational and arts and culture activities in these villages. Mercy Corps’ livelihoods program has assisted approximately 2,500 direct beneficiaries in the sectors of fishing, forestry, livestock and agriculture, and as a result over 200 hectares of rice were farmed in saltwater affected fields that had been restored. With private funding, the Financial Access program has developed strong partnerships with four local formal and informal banking institutions and has facilitated $80,000 worth of loans to 20 small businesses employing 180 workers.

For media-related enquiries, please contact:
Eric Block
503-450-1965

For more information, please visit:
http://www.mercycorps.org

Total private donations $43,937,259
Total expenditures $24,154,420
In August, Mercy Corps held a pivotal strategy session to consolidate our lessons learned in the field, the outcome of which was a strategy for moving from immediate recovery into longer term development to ‘build back better’ within a five year time-line.

SRI LANKA
Mercy Corps’ Sri Lanka tsunami recovery program is working in six coastal districts of Sri Lanka – Trincomalee, Batticaloa, Ampara, Hambantota, Matara and Galle focusing on rebuilding communities and livelihoods, while also working to address local sources of tension. Beginning with private funding that leveraged additional donor support, Mercy Corps has now allocated over $2,450,000 to 181 relief and development projects primarily accomplished through 98 local partner NGOs. Using private donations, Mercy Corps has supported projects including cash-for-work, distribution of non-food items, livelihood generation, psychosocial support, education activities, community-based tourism development, local NGO capacity building and community mobilization. Currently with private funds, Mercy Corps and four local partners are working with 21 communities in three districts to determine community-wide priorities for development. In this initial pilot, Mercy Corps provides up to $50,000 per community over a period of four years. Through September, all 21 communities have identified their top priorities, including; drinking water, irrigation, toilets and self-employment. Overall Mercy Corps has assisted over 800,000 Sri Lankans. In January 2006, Mercy Corps will be conducting a strategic planning exercise to develop plans of the next 3-5 years in Sri Lanka.

SOMALIA
With funding from private donations, Mercy Corps, with its partner Horn Relief, has been carrying out rehabilitation of roads and gullies in Bender Beyler District, Bari Region, Puntland, Somalia. Using cash for work methodologies, Mercy Corps provides a cash injection to the local economy while rehabilitating infrastructure that was either destroyed by the tsunami or which is essential for the devastated fishing industry. The current project, which runs until the end of the year, directly targets 900 households (approximately 7200 individuals). A longer-term project (30 months) has been designed which continues the current work and promotes development of alternative livelihoods to reduce vulnerability of fishermen and agro-pastoralists and support economic growth in Puntland. This proposed project will likely start in January 2006.
Mercy-USA for Aid and Development (M-USA) is dedicated to alleviating human suffering and supporting individuals and their communities in their efforts to become more self-sufficient. M-USA’s general objectives are: 1) to alleviate human suffering caused by natural and manmade disasters, 2) to improve individual and community health, 3) to promote economic growth, and 4) to support educational development around the world.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
From August 2005 to April 2006, Mercy-USA for Aid and Development (M-USA) is rebuilding a village consisting of about 100 homes in Aceh Besar District. From April to July 2005, M-USA constructed a fresh water system (a deep well with piping) for 300 homeless persons living in a temporary shelter in the same district. In July and August 2005, M-USA distributed 47 hand tractors that are being used by 1,740 farming families on the island of Simuelue. M-USA also provided 586 of these families with rice seed and fertilizers. These inputs are helping these families to support themselves once again. In January and February 2005, M-USA distributed food packages (containing rice, noodles, canned sardines, biscuits, bottled water, etc.) to 1,200 homeless families near Banda Aceh and Meulaboh. In March, M-USA distributed six-month household kits (containing kitchen items, towels, toiletries, clothing, plastic mats, candles, matches, etc.) to 400 homeless families near Banda Aceh and Meulaboh. In February and March 2005, M-USA also dug water wells and built latrines in ten IDP camps/temporary shelters in the district of Aceh Besar. This water and sanitation project is benefiting approximately 4,000 persons. Mercy-USA is focusing on shelter, water and sanitation, and livelihood support (including aquaculture, fishing and agriculture) during the reconstruction and rehabilitation phase of its tsunami response efforts.

INDIA
From January to March 2005, M-USA, through our local partner, United Economic Forum, distributed food packages (containing rice, lentils, oil, sugar, tea, etc.), kitchen kits (containing pots, pans, plates, bowls, cups, utensils, etc.), clothes, plastic tarpaulins, ceiling fans for temporary shelters, sheets and blankets to approximately 2,000 families left homeless by the tsunami in the states of Andhra Pradesh and Tamil Nadu. No further response is planned at this time.

SOMALIA
In April and May 2005, M-USA assisted 100 tsunami-affected families in the devastated district of Haffun to restart their small fishing businesses. Mercy-USA provided these families with nets, hooks, anchors, buoys and other necessary equipment to allow them to support themselves once again. No further response is planned at this time.
The National Peace Corps is a membership-based alumni organization serving returned Peace Corps volunteers, staff, as well as Peace Corps family, friends and supporters. Our mission is to foster peace through service, education and advocacy. We pursue this mission through our 157 affiliate groups and our network of 30,000 members.

COUNTRY SPECIFIC INFORMATION:

THAILAND
The Friends of Thailand, one of NPCA’s 157 affiliated groups, launched Project Restore on January 9th to provide assistance to rural schools in southern Thailand. It focused in particular on two schools, Ban Gank Sak and Ban Bang Muang in Phuket province. The project provided scholarship assistance to students orphaned by the tsunami. Since members of the Friends of Thailand have an ongoing relationship with the country, it is anticipated that this project will continue until this assistance is no longer needed. Approximately 150 students are benefiting from these scholarships.

INDIA
NPCA administered a project on behalf of five Returned Peace Corps Volunteers (RPCVs) from the H. John Heinz III School of Public Policy and Management at Carnegie Mellon University. Three of these RPCVs are working with the Association for India’s Development in Akkararaipettai Village in Tamil Nadu, India. The project involves construction of post-disaster temporary housing of 150 families, approximately 750 individuals. This project concluded in June 2005, and no further response is planned at this time.
The mission of Northwest Medical Teams is to demonstrate the love of Christ to people affected by disaster, conflict and poverty. Since 1979, Northwest Medical Teams has sent more than 1,300 medical and rehabilitation teams and more than $650 million in medical supplies and equipment--improving the lives of people all over the world. Medical and dental volunteers respond to disasters around the globe and also in the Pacific Northwest. Internationally, Northwest Medical Teams collaborates with in-country organizations to support long-term development programs, including construction projects, health promotion, and education.

In Sri Lanka and Indonesia, Northwest Medical Teams’ programming has focused on emergency relief and rehabilitation of health sector activities. Northwest Medical Teams has transitioned from providing direct primary health care services in mobile and static clinic locations to building local health capacity by providing health education and training. Northwest Medical Teams is implementing a training of trainers trauma counseling program in Indonesia and Sri Lanka; nurses’ training at the nursing academy in Banda Aceh, Indonesia; and organized malaria training. Additionally, Northwest Medical Teams is initiating an emergency medical services training program in Indonesia. Rehabilitation activities also include contributions to hospital reconstruction, medicines and equipment re-supply, and housing reconstruction. Northwest Medical Teams will continue to work with local Ministry of Health officials and partners to transition further into development programming.
Operation USA, a non-profit Los Angeles-based disaster relief agency in operation for over 26 years, assists developing communities in the US and abroad in addressing problems relating to natural and man-made disasters and chronic poverty through the creation of sustainable health, nutrition and disaster response programs. Operation USA provides essential materials, training, advocacy and financial support for such programs.

COUNTRY SPECIFIC INFORMATION:

INDIA
After the tsunami, Operation USA provided a $15,000 emergency cash grant to Pondicherry Institute of Medical Sciences for the purchase of medicines and $12,000 to the Auroville Community Relief Project for environmental clean up. Operation USA is continuing their connection with the Vivekenand Medical Society for running a mobile health clinic, which was in operation two days after the tsunami along the southern coast of India. Operation USA has also funded $62,000 to SAWED, based in Tamil Nadu, for the rehabilitation of two villages in the Karaikal District, to provide fishing boats, motors, and temporary housing. The hope is to have a continued connection with them to institute a human rights/gender empowerment after-school education program.

INDONESIA
Primarily operating in Banda Aceh, Indonesia, Operation USA has partnered with a number of groups on the ground in both the emergency and rehabilitation phases. Operation USA provided $12,000 to Nurani Dunia for the purchase of a vehicle to distribute emergency supplies and another $22,000 for a widows’ cash grant program. $75,000 went to Pulih for a psychosocial and livelihoods program for widows. Continuing Operation USA’s commitment to providing support in health and medical infrastructure, we have provided $71,000 for an amputee rehabilitation project operating out of the Zainoel Abidin Hospital. We have also partnered with the International Organization for Migration, providing $250,000 towards the construction of seven clinics in the Meulaboh region and committed another $75,000 for a medical training center in Nagan Raya. Immediately following the disaster, we shipped nearly $4.7 million worth of in-kind medical and relief supplies to the Islamic Relief Organization for distribution to IDP camps and clinics throughout Aceh.
SRI LANKA
Operation USA has committed $750,000 to the Tamil Rehabilitation Organization for the rebuilding and development of the Kalladi Village, in the Ichchampattai district outside of Trincomalee, expected to be completed in March 2006. Operation USA has committed $100,000 to Sarvodaya for psychosocial programs, as well as the development of a Women’s Empowerment program, and a Village Development Program in the Matara district. Operation USA recently gave $100,000 to Project Galle, specifically for the Restoring Livelihoods/Community Center project and another $50,000 for a water and sanitation program. The Association for Play Therapy/Operation USA sent two teams of play therapists to all three major affected regions in Sri Lanka, to train paraprofessionals and develop a sustainable method of conducting mental health training. Local elementary schools have been active in fundraising, (nearly $30,000) and will begin to develop relationships with specific orphanages through Operation USA. Operation USA has also sponsored the rebuilding of a preschool in Paiyagal for $20,000. Since January, Operation USA has sent nearly $4.1 million in in-kind supplies to Colombo, for distribution throughout the country. Operation USA provided $50,000 each to the Tamil Rehabilitation Organization and Sarvodaya for shelter and water purification during the emergency phase. Other commitments include $30,000 for a school/community center project in Galle.

THAILAND
Operation USA provided $25,000 to the Forever Love Foundation, for the purpose of housing tsunami orphans and for the construction of fishing boats. Operation USA also partnered with Life Home Project, spending $30,000 to construct a building for tsunami and HIV/AIDS orphans.

“It’s the biggest outpouring of relief in such a short period of time... international compassion has never been like this.”

U.N. Emergency Relief Coordinator
Jan Egeland
Oxfam America is an international development and relief agency committed to creating lasting solutions to poverty, hunger, and social injustice. Working with Oxfam affiliates and local partners, Oxfam America carries out emergency relief operations, development programs, and campaigns to overcome the political, economic, and social policies that exclude much of the world’s population from opportunity and political participation.

Oxfam America raised $30 million for its tsunami response. Oxfam America and its affiliates around the world have unified their tsunami programs and pooled their donations into a single fund that is expected to reach $278 million. Oxfam is providing clean water, sanitation, shelter, food, cash-for-work projects, and programs to revive and improve livelihoods. Oxfam’s humanitarian programs—in the tsunami-affected region as elsewhere—emphasize gender equity, community participation in decision making, support for socially marginalized populations, and helping disaster survivors in impoverished regions achieve sustainable improvements in their lives and livelihoods. The Oxfam tsunami response work will continue at least through the year 2008.

As the purpose of this report is to describe programs that are funded exclusively by US donors, InterAction is not including a detailed description of the Oxfam America/Oxfam International combined tsunami response.

For media-related enquiries, please contact:

Elizabeth Stevens
(617) 728-2478

For more information, please visit:
http://www.oxfamamerica.org/whatwedo/emergencies/asian_floods_2004

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**total private donations**

$30,000,000

**total expenditures**

$20,500,000
Plan USA strives to achieve lasting improvements in the quality of life of deprived children in developing countries through a process that unites people across cultures and adds meaning and value to their lives by: enabling deprived children, their families and their communities to meet their basic needs and to increase their ability to participate in and benefit from their societies; building relationships to increase understanding and unity among peoples of different cultures and countries; and advocating for the rights and interests of the world’s children. Plan works with communities, as well as local and international partner organizations to implement programs in the areas of health, education, habitat and shelter, and inter-cultural communications. Working through a process known as Child-Centered Community Development, Plan is part of a network of 60 countries, working with children and families throughout Africa, Asia, Latin America and the Caribbean, and in Albania.

Plan USA raised $2,331,279 from private sources through September 30, 2005. Plan USA is part of Plan International, a confederation of international members that pools the private funds they received for tsunami response. These funds are allocated to specific humanitarian, recovery and reconstruction activities in the tsunami-impacted countries of Indonesia, India, Sri Lanka, and Thailand. Plan USA joins private American contributions with those of other global donors and does not distinguish the use of private contributions by donor nationality.

The remaining US private monies are dedicated to ongoing and future Plan rehabilitation and reconstruction programming in the impacted countries. These programs will run between three and five years.

Total private donations: $2,331,279
Total expenditures: $323,619

For media-related enquiries, please contact:

Carol Donnelly
(401) 738-5600, ext.1340

For more information, please visit:
http://www.planusa.org
http://www.plan-international.org
Presbyterian Disaster Assistance and Hunger Program are two organizationally specific programs existing as part of the Worldwide Ministries of the Presbyterian Church (USA) whose mission is: to empower the church, in each place, to share transforming power with all people through partnership and mutuality with the worldwide body of Christ.

With plans for a five-year response in place, PDA has provided $4 million to date in aid and materials. In total, PDA’s support is expected to reach $12 million. PDA assistance has been focused on helping survivors rebuild their lives physically, emotionally and professionally.

One example is a women’s sewing cooperative we helped create in Banda Aceh with YTBI and L-Peka. The cooperative provides a source of income, a renewed sense of duty and accomplishment, and a place to share feelings for women who lost children, husbands and homes in the tsunami. The co-op provides training as well as marketable goods. PDA communication experts have worked with survivors to similarly document stories of their tsunami experience and subsequent rebuilding efforts, an exercise that provides considerable healing for those traumatized by danger, fear and loss. These stories have been collected and translated and will appear on the PDA website. (www.pcusa.org/pda) In one village, children PDA worked with became alarmed when they learned many children in the U.S. were killed, injured or made homeless by hurricanes. They wrote poems and made drawings for their U.S. counterparts, hoping they would help them to be strong and keep their hopes alive. Those poems and drawings will appear in an upcoming issue of PDA’s Mosaic Magazine.

PDA is also coordinating an exchange program with an Indonesian recovery work team. A team of Muslim tsunami survivors will come to the U.S. in February to work at one of the PDA Volunteer Villages along the Gulf Coast, helping rebuild families and facilities damaged by hurricanes. This will be an important step toward building positive relations between Christians and Muslims, as well as an extraordinary contribution by the Indonesians. Their ability to provide aid to others is a milestone in their healing process. Rev. Dr. Rebecca Young currently is our primary on-site representative and liaison to Indonesian authorities. She is fluent in local languages and often provides translation services as part of her humanitarian efforts. Her expertise includes nutrition, child psychology and organizational services.

For media-related enquiries, please contact:
Rev. Dr. Rebecca Young
(706) 892-4556

For more information, please visit:
http://www.pcusa.org
Project HOPE, founded in 1958, conducts health education and medical humanitarian assistance to communities around the world, with a special emphasis on women and children. Health programs are focused on several areas of expertise: infectious diseases (including HIV/AIDS and TB); maternal and child health; health systems and facilities; health professional education; and humanitarian assistance. While the methodology changes based on local needs and resources, the ultimate goal of HOPE's work is long-term, sustainable improvements in health and health systems.

Known to many by the humanitarian tours of the SS HOPE, Project HOPE took a three-tier response to the Dec. 26, 2004 tsunami that included placing a medical volunteer force of 210 aboard the U.S Navy's hospital ship Mercy. This public/private partnership during Operation Unified Assistance again brought Project HOPE to Indonesia, the destination of its first SS HOPE voyage in 1960. Founded in 1958 by William B. Walsh, M.D. to help people to help themselves, the international health education and humanitarian assistance organization today provides approximately $100 million in resources to land-based programs in 30 countries. This year, Project HOPE integrated disaster response in Indonesia, Thailand and Sri Lanka into its international humanitarian assistance operations. Project HOPE provided care amid a healthcare infrastructure stripped of facilities, personnel, and operating capacity by the tsunami and a March 28 earthquake. Project HOPE's partners generously donated their services and to date have raised $5,079,192 toward these activities with further pledges of $1,168,000. Following the disasters, Project HOPE volunteers performed 38,954 medical procedures aboard the Mercy and on shore; the region's hospitals and clinics received $9.7 million in donated life-saving medicine and supplies; and a three-year commitment was established to re-equip a hospital in Banda Aceh. Project HOPE has spent $1.4 million and has committed $3.7 million to continue its programs in the affected areas. Project HOPE programs continue their work today to restore quality medical services to the region.

COUNTRY SPECIFIC INFORMATION:

THAILAND
HOPE staff in Thailand visited the country's most damaged areas and purchased emergency supplies in response to local officials' requests. Project HOPE is also working to improve the number and skills of critical care nurses in Thailand. Nurses receive a standardized curriculum instruction leading to certification, and once trained become peer educators for other nurses in hospitals across Thailand. These ongoing efforts to restore quality health services echo Project HOPE's worldwide Health Professional Education programs providing qualified personnel where they are urgently needed.
INDONESIA
As part of the immediate response, Project HOPE brought $7 million in urgently needed supplies to Indonesia’s Aceh Province in cooperation with FedEx, Uplift International and the Indonesian Doctors Association. In the intermediate term, Project HOPE recruited and sent 210 health professionals to Indonesia with the US Navy aboard its hospital ship Mercy. These volunteers cared for more than 20,000 survivors from Indonesia and affected Indian Ocean islands, performing 38,954 medical procedures. When the ship was re-activated following a March 28 earthquake, more volunteers traveled to Nias Island to provide relief. Project HOPE remains present in Indonesia at Banda Aceh and in the Nagan Raya District. Banda Aceh’s Abidin Hospital lost half its staff and most of the facility’s equipment and furnishings to the tsunami. With the help of the biotechnology company Genzyme Corporation, Project HOPE established a three-year commitment to re-equip this hospital and provide training to its staff. In the Nagan Raya District, Project HOPE implemented a long-term program to train community health workers and midwives in the integrated management of childhood illnesses.

SRI LANKA
Project HOPE’s partner organizations also delivered in excess of $2.2 million in medical assistance to Sri Lanka.

“Above and beyond the humanitarian considerations --which would be compelling enough-- we have an enormous interest in seeing this succeed”

World Bank President
Paul Wolfowitz
Refugees International, a Washington-based advocacy organization, is an independent voice for humanitarian action on behalf of the least-known and most vulnerable victims of war, famine and disaster. Founded in response to the forced repatriation of tens of thousands of Indochinese refugees in 1979, Refugees International is a non-governmental organization serving refugees, internally displaced persons, and other dispossessed people around the world. Refugees International accepts no government or UN funds and, thus, relies on the support of concerned individuals, foundations, and corporations. On-site field assessment missions are the heart of Refugees International’s work. Refugees International field representatives assess the situation and recommend concrete actions to protect people and save lives. Refugees International distributes brief, timely reports to policy and opinion makers worldwide to mobilize help for the victims and follow up with public, private, and media advocacy.

**COUNTRY SPECIFIC INFORMATION:**

**INDONESIA**

Refugees International has conducted two humanitarian assessment missions to Aceh, one in January 2005. Advocacy work related to Indonesia has focused on the need to get resources into the hands of local communities so that they can plan and carry out their own rebuilding activities. Refugees International has also stressed the need to support the reconstruction of private businesses and other critical economic infrastructure in Aceh, resulting in greater local development to employ more people and supply resources to the reconstruction effort.

**SRI LANKA**

Refugees International has conducted two humanitarian assessment missions to Sri Lanka, one in January 2005 in the immediate aftermath of the tsunami and the second in September 2005. Refugees International’s advocacy work on Sri Lanka has focused on the need to accelerate the support for permanent housing by getting funds to families to support their own rebuilding, coupled with getting the Sri Lankan government to rescind their buffer zone policy, which prevents rebuilding close to the shoreline. Refugees International is also concerned that the needs of conflict-affected displaced persons have been neglected in the context of the tsunami response and endorses the idea of allowing tsunami resources to be used to address the needs of displaced persons throughout districts affected by the catastrophe. On an exceptional basis Refugees International accepted $21,500 in donations for children in Sri Lanka. These funds have been allocated to two local NGOs to rebuild a pre-school in Galle and to provide school supplies to three schools in Batticaloa. These projects have been completed.

Refugees International applied other unearmarked donated funds to its tsunami response in addition to the money donated specifically for tsunami response.

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**contact information**

For media-related enquiries, please contact:

Joel R. Charny  
(202) 282-0110, ext. 206

For more information, please visit:

http://www.refugeesinternational.org

**regional activity**

**total private donations**  
$51,704

**total expenditures**  
$57,507
Founded in 1990, Relief International provides emergency, rehabilitation and development services that empower beneficiaries in the process. Relief International dedicates itself to seeking and addressing the long-term developmental needs of its beneficiaries even while in the emergency phase. Relief International focuses on serving people who typically have not received due attention, and in several large-scale crises Relief International has been the first US-based agency to provide high-impact development emergency programming to communities in need. Relief International's programs include health, shelter construction, education, community development, agriculture, food, income-generation, and conflict resolution. Over the past 15 years, Relief International has implemented programs in more than 40 countries. Relief International recognizes that disasters have the most negative impact on the poor and that poverty eradication is integral to disaster mitigation. Relief International consults closely with the local communities it serves in order to ensure that its programs do not impose solutions from the outside but rather address their needs and requirements for the long term. This grassroots approach proves effective in fostering an environment of self-help and sustainability.

**COUNTRY SPECIFIC INFORMATION:**

**SRI LANKA**

Relief International's tsunami relief programming has reached more than 10,000 beneficiaries in the first 90 days of operation in Sri Lanka. Work began in the districts of Hambantota and are now concentrated in Ampara, particularly in Ullai, Potuvil, Arugam Bay, Panama, and Nintavur. Relief International has implemented an integrated program of relief supplies, school supplies, food rations, drinking water, and health services distribution. Relief International has also implemented water and sanitation, classroom reconstruction and rehabilitation, emergency shelter, and emergency livelihood restoration projects. Relief International has distributed drinking water and family food rations to thousands of families. During early deployment, Relief International provided transport for the distribution of emergency shelter material by local groups. Relief International has established a temporary shelter construction program in Ullai and provided single-family houses that can be later moved or reused for livelihoods activities. The emergency shelter program targets approximately 50 families. In addition to shelter, Relief International has implemented school reconstruction projects in Ullai and Potuvil. In the initial weeks following the tsunami, our teams conducted a survey of the damage sustained and provided cash-for-work opportunities for debris clean-up and began repairing boats and mending nets. By forming cooperative relationships with local microfinance organizations, Relief International also has empowered women by financing small businesses.

**contact information**

For media-related enquiries, please contact:

Jennifer Norris
(310) 478-1200

For more information, please visit:

http://www.ri.org

**regional activity**

**total private donations**

$870,000

**total expenditures**

$321,000
ternational has disbursed $25,000 in loans on which repayments are already being made. The emergency livelihood restoration program has benefited approximately 200 families.

Relief International plans to continue working closely with community members to identify durable solutions to the problems that they consider to be a priority. After conducting a strategic programming review, Relief International is committed to at least two years of longer-term programming in both tsunami and non-tsunami affected areas through livelihood restoration using microfinance strategies and education through technology. In order to continue to assist families in restoring their livelihoods in areas such as commerce, fishing, vocational trades, and cottage industries, a Revolving Micro credit Loan Fund with an initial start-up capital of $250,000 was launched. In the education sector, Relief International has successfully established two Internet Learning Centers (ILCs) where youth acquire IT skills as well as being involved in peacebuilding activities employing internet technology.

“From the nameless fishing villages of Sumatra to the modern tourist resorts of Thailand; from the beaches of Sri Lanka and India to the coastal communities of the Maldives and Somalia; the disaster was so brutal, so quick, and so far-reaching that we are still struggling to comprehend it.”

U.N. Secretary-General
Kofi Annan
The Salvation Army World Service Office provides financial and technical assistance to the international Salvation Army in support of its work in a variety of programs including education, health services, relief and disaster services, and community development. It also assists The Salvation Army (TSA) in developing community-based initiatives that address the underlying causes of poverty in developing countries.

COUNTRY SPECIFIC INFORMATION:

INDIA
After providing immediate disaster and emergency assistance, TSA launched seven 3- to 36-month rehabilitation projects. SAWSO, tasked with programming TSA USA donations, is the lead partner in three of these projects and anticipates being the lead partner in a large agriculture and food production project currently being developed. SAWSO is serving the following communities: Andaman and Nicobar Islands, Patina Pakkam, Mypardu, Labipalem, Potti Subbiah Palem, Nizam patanam Port, Campbellpeta, Gilikalalindili, Chinakaragraharam, Iskapelli, and Nellore. TSA is involved in these communities as well as the following locations: Muttom, Tamil Nadu, Nagapatinam, Cuddalore, Pondicherry State, Karaunagappally, Kallam District, Kovalulhum. Programming involving TSA USA funding is expected to extend for 3 to 5 years and includes the following sectors: disaster and emergency assistance; business development/cooperatives/credit; food distribution/security; nutrition, health or medical services; community counseling/support; education/training; shelter; and water and sanitation. Programs have reached a total of 161,303 beneficiaries as of the end of September 2005.

INDONESIA
Indigenous TSA Compassion in Action teams were on-site in Aceh Barat/Aceh Jaya and on Nias Island providing disaster and emergency assistance within hours of the tsunami and the subsequent earthquake that devastated the areas. Shortly after both of those events TSA started five 6- to 12-month rehabilitation projects in the Meulaboh area (Suak Ribee, Suak Sigadeng, Lepang, Leuhan) and on Nias Island (Teluk Dalam, Gunung Sitoli, Manderehe). SAWSO, armed with TSA USA donations, quickly established a partnership with other TSA donors in three of these projects. Projects currently being developed and expected to extend for another 3 to 5 years include an extension to the first construction project in Suak Ribee and Suak Sigadeng, the construction of a new community for persons residing in the Leuhan barracks, and a multi-sectoral community development project in Nias (Telak Dalam, Gunung Sitoli, Hilifalago, Hilimondregeraya, Hilmozaua, Onohondra, and Bawomataluo).

For media-related enquiries, please contact:
Pat Kiddoo
(703) 684-5528
For more information, please visit:
http://www.sawso.org
Projects involving TSA USA funding include the following sectors: disaster and emergency assistance; business development/cooperatives/credit; food distribution/security; nutrition, health or medical services; community counseling/support; shelter; and water and sanitation. Programs have reached a total of 60,245 beneficiaries as of the end of September 2005.

**SRI LANKA**

TSA is busy with 2- to 48-month long projects in both the northern and southern parts of Sri Lanka. Following an intensive disaster and emergency response, projects destined to yield a longer-term impact were developed in Galagodawatta and Katugoda (Galle District), Hikkaduwa, Akurala, Jaffna, Kalutara, Dehiwela and Colombo (training). As of September 2005, SAWSO has primarily programmed USA funding to support work in the Galle and Hikkaduwa areas. However, this funding may be used in the future to support Jaffna, Batticaloa, Chillaw and other yet to be identified communities as well as regional projects. Service sectors include: disaster and emergency assistance; business development/cooperatives/credit; community counseling/support; education/training; shelter; and water and sanitation. Programs have reached a total of 34,030 beneficiaries as of the end of September 2005.

“The affected nations were hit by a huge disaster which may strike only once in 100 years… a debt moratorium for a certain period is necessary and I would like to urge other nations to do so.”

Japanese Prime Minister
Junichiro Koizumi
Save the Children USA is one of the nation’s leading independent organization creating real and lasting change for children in need in the United States and around the world. Based in Westport, Conn., Save the Children USA is a member of the International Save the Children Alliance, comprising 27 national Save the Children organizations working in more than 100 countries to ensure the well being of children.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
Save the Children US’s long-standing presence in Indonesia and rapid mobilization of emergency staff and other resources greatly helped us respond to the initial emergency needs quickly and efficiently. Save the Children USA’s five-year program is now focusing its efforts on long-term recovery and reconstruction. Save the Children USA is active in the following localities – Aceh and North Sumatra Provinces, including Banda Aceh, Aceh Besar, Pidie, Bireuen, Lhoksumawe, Aceh Utara and the islands of Simeulue, Sabang and Nias. Save the Children USA is managing a program that will benefit approximately 293,000 children and their families within the following thematic areas and project activities: Child Protection - Advocating for children’s rights; registering and reunifying separated children, establishing safe play areas, and providing training for government agencies and local partners on child protection; Nutrition and Health - Supplementary feeding for pregnant women, infants aged 7-18 months and children under 12, rebuilding and equipping 70 health facilities, training midwives, assisting government to revitalize health center management, and the distribution of bed nets; Livelihoods - Cash-for-work programs, restoration of productive assets, ERA program focusing on vocational and lifeskills training, microfinance and business development programs, and coastal environment rehabilitation; Education - Establishing temporary schools, construction of 94 permanent schools, training teachers, distributing school and activity kits, school based psychosocial programs, support community learning centers, vocational youth training, and the inclusion of children with disabilities; Shelter - Construction of 200 temporary houses, 3,660 permanent houses being built (to date 23 are complete), and water and sanitation facilities; and Non-Food Items - Distribution of household kits, large tents on Simeuleu, and 100,000 liters of water during the emergency relief phase.

Save the Children USA has commissioned a number of programmatic reviews, looking at specific areas of interest for the current program and with a view to long-term commitment within the region.

For media-related enquiries, please contact:
Mike Kiernan
(202) 261-4686

For more information, please visit:
http://www.savethechildren.org/emergencies/tsunami_update_040705.asp
TRICKLE UP PROGRAM

Trickle Up provides microenterprise development support, including business development training, microgrants and supporting services to help capitalize micro-businesses and anticipate the need for two levels of assistance around livelihood re-development among the most vulnerable: the first being short-term assistance to capitalize micro-businesses providing for immediate income needs and the second is to plan for longer-term support to ensure the establishment and sustainability of stable enterprises.

COUNTRY SPECIFIC INFORMATION:

SRI LANKA
Trickle Up re-established a partnership with the Association of Social Activities Development – Sri Lanka (ASAD), a Sri Lankan NGO that focuses on community development and peace-building activities since its founding in 1985. ASAD is enabling 650 entrepreneurs in the eastern districts of Trincomalee and Amapara to re-start businesses that were destroyed in the tsunami or to launch new businesses with seed capital and skills training. Trickle Up capital, together with ongoing support from ASAD, will enable these entrepreneurs to rebuild their savings and livelihoods.

For media-related enquiries, please contact:
Allyson Wainer
(212) 255-9980

For more information, please visit:
http://www.trickleup.org

Regional activity

<table>
<thead>
<tr>
<th>Total Private Donations</th>
<th>$125,986</th>
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</thead>
<tbody>
<tr>
<td>Total Expenditures</td>
<td>$44,976</td>
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</tbody>
</table>
United Methodist Committee on Relief (UMCOR) responds to natural or human-made disasters—interruptions of such magnitude that it overwhelms a community’s ability to recover on its own. UMCOR’s mission is to alleviate human suffering with open minds to all religions and open hearts to all people. UMCOR is the humanitarian, non-proselytizing agency of the United Methodist Church. Activities in Thailand with Burmese refugees have been completed.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
Ten demonstration homes were built in four selected villages. Community partners assisted UMCOR to determine a process for selecting beneficiaries. Building commenced on 425 earthquake resilient homes in Desa Tanjung Baro, Pameung Sirebee, Matang Teungoh, and Quala Raja. Priority for assistance has been for single heads of household, families taking in orphaned children, and other vulnerable groups. Included in the housing project are safe water and sanitation facilities, income-generation activity, and assistance to communities not directly affected. In addition, UMCOR partnered with International Blue Crescent to build 200 houses in the Lamno area of Aceh. While reconstruction went on, UMCOR continued to partner with Church World Service in delivery of emergency aid such as water, hygiene kits, and other supplies.

INDIA
In Dalit and other minority communities UMCOR partnered with Churches Auxiliary for Social Action to provide 50,000 families with dry rations, clothing, bedding, temporary shelters, and kitchen utensils; repaired 400 damaged homes and 50 damaged schools; supplied 100 handpumps to facilitate irrigation; and initiated organizations in 50 villages to provide input for reconstruction and rehabilitation. Thirty cooperatives for fisherfolk have been formed, and 4,000 acres of salinated land have been recovered. Boats, nets, and long-tail motors—136 of each—were provided. Also in India, UMCOR delivered funding for scholarships for students affected by the tsunami, and augmented our partner CASA’s emergency preparedness supplies.

SOMALIA
UMCOR funds supported restoration of fishing craft and industry supplies for 2,200 families in several villages in Benadir, Lower and Middle Shabelle, Galgadud, and Mudug regions. These families were living in destitute conditions due to loss of livelihoods. Partner Center for Education and Development delivered food and plastic sheeting to meet emergency needs, and the distribution of livelihoods supplies assisted with recovery and self-sufficiency for about 13,200 individuals.
“Fishing Boats” -- Banda Aceh, Indonesia, December 10, 2005. Fishing boats ply the waterways in downtown Banda Aceh, where nearly a year ago the water's surface was covered in corpses of the tsunami victims. Many boats were built, or donated by NGOs and fishermen are re-establishing their businesses. Photo by Karl Grodl.
Established by concerned American citizens, the United States Association for UNHCR (USA for UNHCR) builds support in the United States for the humanitarian work of UNHCR (United Nations High Commissioner for Refugees). USA for UNHCR supports UNHCR’s life-saving work around the world through the help of individuals, corporations and foundations. In addition, USA for UNHCR reaches out to educate Americans through public education programs and events about the plight of refugees and the work of UNHCR. UNHCR is responsible for protecting over 17 million people worldwide who have been forced to flee their homes due to persecution or war. During emergencies, UNHCR and its partners provide refugees with water, shelter, healthcare and other types of assistance. In addition, the organization helps to ensure that all refugees can exercise the right to seek asylum and find safe refuge in another country, with the option to return home voluntarily, integrate into their country of asylum or to resettle in a third country. UNHCR operates in more than 116 countries.

USA for UNHCR raised $1,129,631 for tsunami response. USA for UNHCR and its affiliates around the world have pooled their donations into a single fund that UNHCR is using to address the tsunami crisis. UNHCR’s humanitarian assistance focuses on providing shelter, non-food relief supplies and logistical support. Private funds raised by USA for UNHCR were used for UNHCR program activities in Indonesia, Sri Lanka and Somalia.

As the purpose of this report is to describe programs that are funded exclusively by US donors, InterAction is not including a detailed description of the USA for UNHCR/UNHCR tsunami response.
The mission of the U.S. Committee for Refugees and Immigrants (USCRI) is to address the needs and rights of persons in forced or voluntary migration worldwide by advancing fair and humane public policy, facilitating and providing direct professional services, and promoting the full participation of migrants in community life.

COUNTRY SPECIFIC INFORMATION:

THAILAND
After the devastating tsunami, the U.S. Committee for Refugees and Immigrants implemented a six-month emergency relief program for Burmese migrants in Ranong, Phangnga, Krabi, Phuket, Trang, and Satun provinces in southern Thailand. The program distributed 500 ceramic water filters to 3,000 Burmese migrants. In addition, USCRI assessed the long-term health and education needs for approximately 4,000 Burmese living in 20 settlements in these provinces and is working with partners on the ground to address these needs.

For media-related enquiries, please contact:
Jennifer Divis
(202) 797-2105, ext. 3019

For more information, please visit:
http://www.refugees.org
The U.S. Fund for UNICEF works for the survival, protection and development of children worldwide through education, advocacy and fundraising. Created in 1947, it is the oldest of 37 national committees around the world that support UNICEF’s mission. UNICEF has been working in each of the tsunami-affected countries for decades, providing health care, clean water, improved nutrition, education, and protection.

The U.S. Fund for UNICEF raised $137,300,000 for tsunami response. The U.S. Fund for UNICEF and its affiliates around the world have pooled their donations into a single fund that UNICEF is using to address the crisis. UNICEF’s programs focus on health and nutrition, child protection, education, and water and sanitation. All of the money donated to the U.S. Fund for UNICEF has been transferred to the main UNICEF fund.

As the purpose of this report is to describe programs that are funded exclusively by US donors, InterAction is not including a detailed description of the U.S. Fund for UNICEF/UNICEF tsunami response.
WORLD CONCERN

World Concern works in the areas of relief, rehabilitation, and development to help the recipients in developing countries achieve self-sufficiency, economic independence, physical health and spiritual peace through integrated community development.

COUNTRY SPECIFIC INFORMATION:

THAILAND
World Concern is bringing technical expertise to help in the rehabilitation of coastal communities in southern Thailand devastated by the tsunami. The focus is on reaching communities and people who have no other sources of assistance (or limited sources), and special attention is given to marginalized groups such as the minority Morgen people (sea gypsies). The rehabilitation phase now being implemented is focusing on restoring 10-15 communities (2,500 people) in six coastal communities (Phuket, Krabi, Phang Nga, Satun, Ranong and Trang) by providing housing for up to 500 families, restoring fishery activities through provision or repair of boats and related equipment for 200-300 families, helping 200-300 families diversify their livelihood activities to include animal husbandry, small business and agriculture, and equipping project staff to appropriately address psycho-social needs of the affected population who have been traumatized by the tsunami. The project is planned to last two and a half years (from February 2005 to July 2007). World Concern has been involved in Thailand since the late 1970s and we plan to continue our work there indefinitely.

SRI LANKA
World Concern’s work in Sri Lanka, the Tsunami Rapid Recovery Project, is a two-year initiative that is providing access to permanent safe shelter, clean drinking water and safe sanitation facilities, sustainable livelihood and culturally-affirming bereavement care for 10,000 families (approximately 50,000 people) affected by the tsunami. The project is targeting four severely affected regions: Jaffna in the North, Trincomalee and Batticaloa on the East Coast and several communities along the southern coastline. This project is planned to last until July 2007, with a view to long-term commitment in the country.

SOMALIA
World Concern’s tsunami relief efforts in Somalia were focused on the Bajuni people, residents of the offshore islands of Kismayu, Madoa and Bargawo. The main emphasis was to provide food and shelter materials, cooking supplies, water containers, medicines and fishing boats, nets, anchors and diving kits to an estimated 13,500 direct beneficiaries. During the project duration of January 25 to April 30, 2005, an estimated 14,225 people received food, utensils, mosquito nets, jerry cans, anchors, ropes, fishing twine and polythene sheets.

For media-related enquiries, please contact:
Rhonda Manville
206-546-7346

For more information, please visit:
http://worldconcern.org/html/Projects-Relief-AsiaFloodRelief.htm

Contact Information

Total private donations
$4,082,779

Total expenditures
$3,720,023
World Emergency Relief is a global group of Christians and like-minded individuals bringing emergency and long-term relief, plus community development, within the context of capacity building for local NGOs and similar groups in developing countries. The WER overall goal is to “give children a living chance.” This is done without consideration for race, creed or political persuasion, so long as the security interests of the United States are not threatened. Four categories of resources are provided: (1) financial aid; (2) commodity aid; (3) volunteers and WER staff; and (4) other capacity building aids (training, IT support, etc.) Founded in 1985 and now with operating offices in London, Paris, Bonn, Amsterdam and Hong Kong, WER/US has delivered over $760 million in aid to 49 countries since its founding.

Resources reported here are exclusively from WER/US. All countries reported below also received substantial gifts-in-kind (GIK) aid, as well as training for their disaster victims and other institutional support, from other WER offices.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
Within 12 hours of the tsunami hitting, WER sent a $25,000 grant to International Catholic Refugee Commission to help restore their offices in Banda Aceh as an administrative center for six NGOs in the region. WER then delivered $8,452,022 in gifts-in-kind to tsunami victims through local consignee NGO partners, including food, bottled water, hand sanitizers, antibiotics, antifungal medication, corticosteroids, new shoes, and hospital supplies. WER does not expect to continue as part of the recovery in Indonesia.

SRI LANKA
WER has delivered $1,770,424 in GIK since the tsunami, including hand sanitizers, over-the-counter medicines, flour, tents, and medical supplies. WER/US does not expect to be part of Sri Lanka’s long-term recovery, although our other offices will be involved. WER identified a reliable local NGO with strong contacts to help ensure security for the WER goods.

INDIA
WER/US sent $143,000 of GIK, a mixed shipment of medical supplies, to a local NGO. Other outreaches to India were handled through the Hong Kong office and not therefore accounted to WER/US. WER/US is investigating how to continue to aid in India with a special focus on the dalit peoples.

For media-related enquiries, please contact:
Wendy Avan
(760) 448-3519

For more information, please visit:
http://www.children-us.org/
THAILAND
Like many other U.S. NGOs, WER was immediately drawn to Thailand because of familiarity with the country, its laws and people. WER dispatched a logistics team 48 hours after the tsunami hit to secure accountable partners around Phuket working the disaster and to secure GIK delivery pipelines. After visiting several sites (and in the midst of immediate confusion), WER selected a NGO consortium, “We Love Thailand”, who received $211,000 of baby food and cleaning supplies (hospital grade). In November 2005 WER is sending $48,000 to We Love Thailand to underwrite construction of a new Child Center near Phuket. WER is also under-writing activities of a Bangkok-based NGO helping sexually exploited women from the tsunami region (and elsewhere in Thailand) escape that city’s bars and brothels.

“\textit{It’s clear that we must move much quicker now to put people away from the tents and into permanent houses… All agencies and all NGOs need to work more together.}”

U.N. Emergency Relief Coordinator
Jan Egeland
World Hope International is a faith-based relief and development organization alleviating suffering and injustice through education, enterprise and community health. World Hope International partners with individuals and organizations from around the world to promote justice, encourage self-sufficiency, and inspire spiritual hope through programs such as economic development, leadership development, skill trainings, child sponsorship and community health initiatives.

COUNTRY SPECIFIC INFORMATION:

INDONESIA
WHI has distributed emergency food, clothes and medical supplies to 3,579 IDPs primarily in Medan and Nias. School uniforms, books and scholarships have been given to 313 affected students. Temporary housing has been provided for 50 IDPs in Medan. Twenty permanent houses are nearing completion in Kuta Alam, Banda Aceh. 120 persons have been helped through start-up business grants. Future plans include the construction of a school and permanent houses in Nias. WHI does not plan to continue long-term activity in Aceh, but is considering such in Nias. World Hope has managed rural development projects and microfinance programs in other parts of Indonesia since 1996 and is committed to a long-term presence in Indonesia through our partner organization, Lembaga Harapan Sejahtera. Total Expenditure as of September 30th: $178,000

SRI LANKA
WHI has focused on the need for permanent houses. Fifty-six houses have been completed to date for recipients who had land of their own outside the buffer zone. The number and locations include: 10 houses in Tangalle (Hambantota District), 30 in Akurala (Kalutara District), 16 in Kalmunai (Ampara District). Ten more houses are presently under construction in Tangalle. Land has been purchased for 30 lots outside the buffer zone on which will be built 30 more permanent houses and a community center. Land is now being sought in Kalmunai on which to build a further 14 houses to help those left landless by the tsunami. Besides housing, World Hope plans to help people re-start their businesses and is hoping to remain engaged in the reconstruction effort for the long-term. Total Expenditures: $459,000
WORLD RELIEF

World Relief works in more than 20 countries in relief and development through micro-finance, disaster response, refugee resettlement, food security, child development, maternal and child health and HIV/AIDS prevention and care. The mission of World Relief, as originated within the National Association of Evangelicals, is to work with, for and from the Church to relieve human suffering, poverty and hunger worldwide in the name of Jesus Christ.

COUNTRY SPECIFIC INFORMATION:

SRI LANKA
In Sri Lanka, World Relief is responding as a donor-plus agency, supplying its local partner, Alliance Development Trust, with financial and limited personnel support. The project in which World Relief is involved is a housing reconstruction program consisting of the rebuilding of 120 houses along the northern coast of Sri Lanka, Jaffna District, in the community of Point Pedro. Construction on the new homes commenced in August of this year and is scheduled to be completed by June of 2006. Total Expenditures for Sri Lanka, as of 9/30/2005: $462,000

INDIA
In India, World Relief is responding as a donor-plus agency, supporting a local partner, Discipleship Centre, with funding as well as limited personnel support. The specific project in which World Relief is involved is a housing and community reconstruction effort consisting of the edification of 200 homes along the southern coast of India, Tamil Nadu State, in the community of Kuttappuli. The groundbreaking for the houses and new community occurred on August 30, 2005, and project completion of all 200 houses is projected for April 2006. Total Expenditures for Sri Lanka, as of 9/30/2005: $667,000

INDONESIA
World Relief is the lead agency of the Integral Alliance - twelve relief and development agencies - in their tsunami response in Indonesia. This response is taking place out of three offices: one country office in Medan, and two field offices in Banda Aceh and Meulaboh. The response is/has been concentrated on the following sectors: emergency relief, livelihood rehabilitation, housing reconstruction, community health education, agriculture rehabilitation, and school reconstruction. Emergency relief took place in the months of January, February and March 2005 with the limited scope of assisting those recently displaced through food, clothing and household item distribution, tent distributions, setup of temporary school site, school cleaning, and water/sanitation advising. This effort was coordinated through 423 volunteers.

For media-related enquiries, please contact:
Chris Pettit
(443) 451-1966

For more information, please visit:
http://www.worldrelief.org

Contact Information

Regional Activity

Total Private Donations
$5,768,226

Total Expenditures
$3,719,000

Total Private Donations
$5,768,226

Total Expenditures
$3,719,000
assisting 8950 beneficiaries in Banda Aceh and Meulaboh. Livelihood rehabilitation includes boat building (fishing boats, sand dredgers), boat yard establishment, micro-finance development, and shrimp pond and salt flat rehabilitation. Housing reconstruction is taking place in villages in and around both Banda Aceh and Meulaboh. Community health education is focused in Meulaboh and Nias. Agriculture rehabilitation focuses on helping households return to farming livelihoods through livestock breeding, dry-land ground/estate crops, and rice ground farming in Meulaboh but will scale up to include work in Banda Aceh as well. Total Expenditures for Sri Lanka, as of 9/30/2005: $2,590,000

World Relief has just been part of an Integral Alliance evaluation of the Indonesia program and is in the process of reviewing programs with a view to our long-term commitment to the country.

“As we move from relief into recovery and reconstruction, the most difficult period is upon us …my job is to ensure first of all that the money which has been committed by the donor countries be invested, [and] that we assure the donors that it is spent effectively, responsibly and in a transparent manner.”

Former U.S. President Bill Clinton
World Vision is a Christian relief and development organization dedicated to helping children and their communities worldwide reach their full potential by tackling the causes of poverty. World Vision helps transform the lives of the world’s poorest children and families in nearly 100 countries by extending assistance to all people, regardless of their religious beliefs, gender, race or ethnic background.

With pre-existing development programs in India, Indonesia, Sri Lanka, and Thailand, a project management office in Singapore, and a global partnership operating in nearly 100 nations, World Vision has been ideally positioned to mobilize resources and staff to tsunami-affected areas. When the tsunami hit, World Vision was able to respond immediately, providing emergency supplies such as water, food, emergency shelter, and essential non-food items.

World Vision has assisted roughly 1 million people across the tsunami-affected region since December 26, 2004. This year, program activities have focused on the construction of temporary and permanent shelter, recovery of infrastructure, water and sanitation, access to health care, and child protection. Over the next 2-5 years, World Vision’s aim is to help restore communities to their pre-tsunami condition and improve quality of life for affected people, with special focus on families and children. World Vision staff work alongside beneficiaries, community leaders, and other stakeholders to shape contextually appropriate interventions that promote lasting change and impact. An overarching principle of the long-term tsunami response is accountability to beneficiaries through the involvement of communities in the design, implementation, and evaluation of World Vision programs. World Vision is working with the broader humanitarian community to improve accountability mechanisms. For specific information on the long-term strategy for each country, please see the program descriptions below.

**COUNTRY SPECIFIC INFORMATION:**

**INDIA**

World Vision is currently operating in 11 districts, three states (Andhra Pradesh, Tamil Nadu, and Kerala), and two union territories (Pondicherry and Port Blair). Sectors include water and sanitation, provision of food, construction of temporary and permanent shelters, healthcare, psychosocial support, child protection, education, economic recovery (including skills training, livelihood support, and cash-for-work programs), community capacity building, and infrastructure recovery. Recovery
efforts will continue through the end of the year. World Vision’s strategic plan for the next three years is to help facilitate community rehabilitation through livelihood support, improved access to education and health care, infrastructure development (improved permanent housing and community structures), and disaster preparedness.

**INDONESIA**

World Vision has provided relief assistance in five major program areas: Banda Aceh/Aceh Basar, Lhoong, Lamno, Meulaboh, and Gunung Sitoli on Nias Island. In the last year, World Vision’s development activities have focused on construction of temporary living centers and permanent shelters, schools, clinics and community centers, distribution of food, water, and non-food items, provision of health care services, counseling, economic recovery programs and child-friendly spaces, restoration of the education system (equipping schools with supplies and trained teachers), and assisting children in obtaining new birth certificates and homeowners in obtaining landowner certificates. World Vision has created a long-term strategic plan for tsunami recovery programs in Indonesia through 2009 that will guide transition from relief to rehabilitation through the construction of permanent housing, rebuilding roads and bridges, and economic/livelihood recovery. Rather than just rebuilding individual homes or villages, World Vision’s approach is to build communities. This concept involves the active participation of beneficiaries and stakeholders through extensive planning, consultation, and negotiation. In addition to finding a positive solution to the severe labor shortage, people who work to rebuild their own home or village have a restored sense of pride, dignity and community. Cash-for-work programs provide income generation and skills training. The Bureau for Reconstruction and Rehabilitation of Aceh and Nias has identified this approach as a best practice, encouraging other agencies to replicate the community-based housing model.

**SRI LANKA**

World Vision is working in the districts of Ampara, Batticaloa, Colombo, Galle, Hambantota, Jaffna, Kilinochchi, Matara, Mullaitivu, and Trincomalee. World Vision’s tsunami relief activities in the past year have focused on the provision of transitional shelter, water and sanitation, health and nutrition, child protection, rebuilding the infrastructure of schools, health facilities and other community entities, community leadership development, and economic development. One particular activity in the economic development sector has been the large-scale distribution of bicycles to provide a means of transportation for adults, school children, government employees, and disabled persons. Through a partnership with World Bicycle Relief, over 4,500 bicycles have been distributed. As relief activities slow down, World Vision has begun to implement its five-year strategy for Sri Lanka to address long-term needs such as improved access to water and sanitation facilities, health care and nutrition, construction of permanent housing, continued economic and infrastructure recovery, and child protection (including increased awareness of children’s rights).

**THAILAND**

World Vision is currently operating in the provinces of Phuket, Phang Nga, Krabi, Ranong and Trang in the sectors of water and sanitation, temporary shelter, health care, education, and economic development. Other projects include restoration of infrastructure, livelihood activities, and enhancing the capacity of communities in disaster preparedness. World Vision is implementing a three-year strategy for tsunami recovery in Thailand. It is anticipated that programs in the shelter, health, and water and sanitation sectors will be completed by the end of the 2006 fiscal year. Community-based disaster management, economic recovery and development, and child protection programs will continue throughout the following two years.