Aishath Shahula Ahmed is Counseling Coordinator at a local NGO, Society for Health Education (SHE), and Acting Coordinator of the Psychosocial Support Unit (PSU) at the National Disaster Management Centre. She described the huge challenges involved in providing psychosocial support for the many thousands of traumatised people in a country with very few trained counsellors and only one psychiatrist. The response began immediately after the event, with local professional counsellors volunteering their time. Since then the Indian Red Cross, with support from UNFPA, has conducted ‘Psychological First Aid’ training and Maldivian teams have visited more than 70 islands to provide basic ‘ventilation’ (active listening) and to spot severe psychological trauma cases requiring referral. With assistance from UNICEF, they have also used play- and art-based therapy very effectively to help young children to come to terms with their experiences – often difficult when parents are focusing on day-to-day survival.

It is likely that the PSU will soon become a formalised section of a government ministry. Along with many other previously unfamiliar features of the disaster response, psychosocial support will become part of the everyday language of both the government and civil society in the Maldives. It will be impossible to plan for the future without referring to the tumultuous events of the recent past. Hopefully the Maldives will be better prepared to deal with whatever nature chooses to throw at it in years to come.

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This article is written in a personal capacity.

1. www.tsunamimaldives.mv
2. www.sphereproject.org
3. www.maldives/md Lauderdale unit.doc
4. The author thanks Emma Fulu of UNFPA Maldives, Tracey Larman of the Unit for the Rights of Children, Aishath Shahula Ahmed of SHE, Mu- nroof Jameel of the National Disaster Management Centre, Mark Evans of Oxfam GB, Shava Arval of VSO Maldives, Umi Silkoset of UNICEF Maldives and Dr. Aishath Shiham of the Maldives IDP Unit for useful discussions.

An African perspective on the tsunami

The tsunami reminded us that the world is a global village with common vulnerabilities but also that the needs of Africa often take second place.

While the international community’s attention was focused on the damage caused to the countries in South Asia, little attention was paid to the tsunami effect on the western side of the Indian Ocean, about six thousand kilometres from the epicentre. Tanzania reported 10 people dead and 2 in Kenya but it was Somalia, suffering a central government and reeling from the effects of 14 years of war and drought [see article by OCHA Somalia page 51] which suffered the most – 290 fatalities and about 54,000 displaced. Six hundred fishing boats, which provided income for 75% of the coastal population, were destroyed. The lives of people in communities along a 650-km stretch between Hafun and Garacad in the north east to as far south as the lower Juba area, south of Mogadishu, were affected. Damage was greatest in Puntland, a self-declared autonomous region. Infrastructure in the town of Hafun was almost totally destroyed. The fact that Somalia does not have a government to advocate for assistance makes it dependent on the UN to do so. UNICEF and the World Food Program have achieved a lot with limited resources but donors have been unresponsive to the country’s needs. At the beginning of April only 3% of the funding requested in the UN’s 2005 Consolidated Appeal for Somalia had been pledged.

Two people died in the Indian Ocean state of the Seychelles and some 900 families lost their homes. The waves caused severe flooding and considerable damage to transport infrastructure including ports, road network, bridges, public utilities, houses, and private property on Mahe and Praslin islands. The government has estimated the cost of repairing damage at $30m. However, the international community has been slow to respond. At the beginning of May the Seychelles had received only $4.4 of the $11.5 million budgeted for under the UN’s Indian Ocean Flash Appeal and commencement of planned rehabilitation projects has had to be delayed.

Kenya and Tanzania were the last two countries to be hit by the tsunami. Tourists were evacuated from beaches in tourist resorts but the news did not reach those who died. Mechanisms did not exist to enable authorities to pass on information from other countries about the devastating potential of the killer waves. The tsunami has demonstrated the need for civil defence preparedness and disaster mitigation programmes in Africa. In recognition of this the Chinese Red Cross Society and the Chinese government have made donations to the Tanzania Red Cross Society to build disaster response capacity.

The international community can do more to assist the people, communities and states badly affected by the tsunami in Africa. All responses to this and future natural disasters in Africa must be shaped by recognition of the relevance of the UN Guiding Principles on Internal Displacement.

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