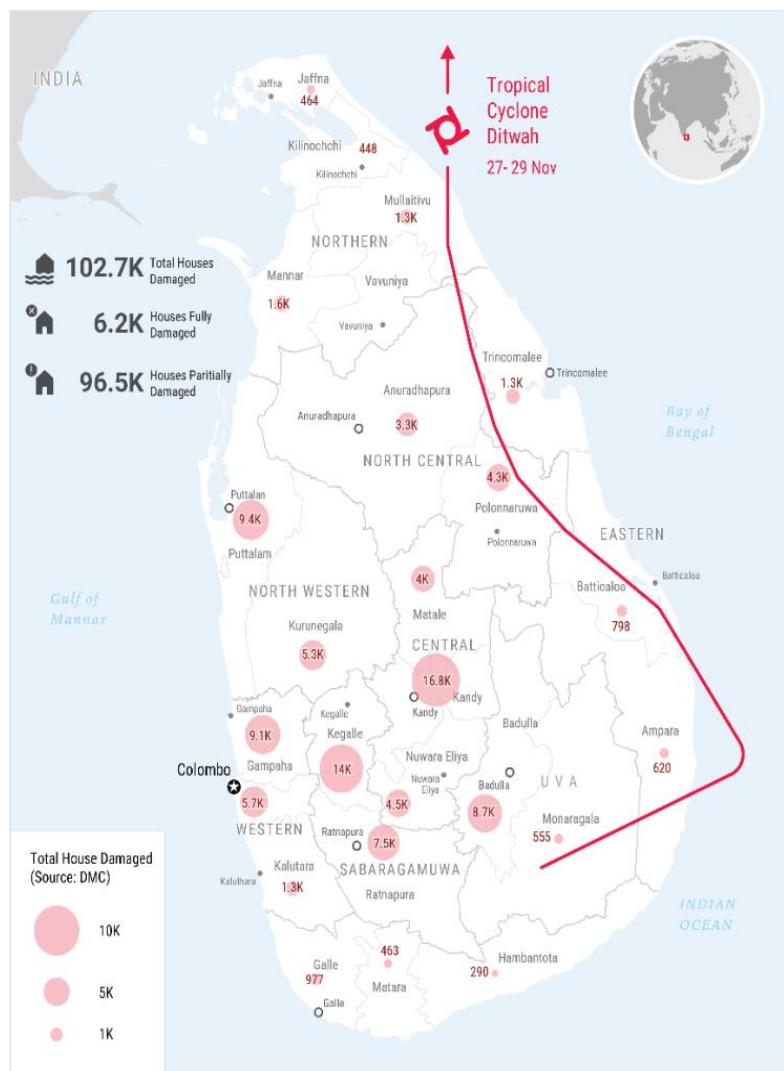


This report is produced by the Office of the Resident Coordinator in collaboration with humanitarian partners and the Office for the Coordination of Humanitarian Affairs – Regional Office for Asia and the Pacific. It covers the period from 16 December to 19 December 2025. The next situation report is scheduled on 23 December 2025.

## HIGHLIGHT

- Cyclone Ditwah made a landfall on 28th November causing widespread landslides and flooding, which is one of Sri Lanka's worst flood disasters in 20 years.
- Ongoing assessments show a rising number of damaged homes. As of 17 December, 101,055 houses are partially damaged and 6,288 are fully damaged. Housing damage remains a key driver of humanitarian needs.
- Cyclone Ditwah has destroyed several early-stage Maha season crops through heavy rains, landslides and floods. The Maha season crops were at a stage of high vulnerability when the cyclone struck, threatening production and future harvests which is a main source of the many households in coming months.
- An estimated 109 health facilities and infrastructure require repairs on water and sanitation amenities to become functional.
- At least 1,200 most affected schools require resumption of school meal programme to reduce the high risk of malnutrition among school-aged children.
- Landslide risks remain elevated in several districts during the ongoing northeast monsoon, particularly in hilly and previously affected areas, with implications for safety, access and the feasibility of return.



**1.2M**

People in need of  
humanitarian  
assistance

**658K**

People targeted for  
assistance

**643**

Casualties recorded

**100K+**

Damaged houses  
partially/ fully

**233K**

People displaced at  
its peak

## SITUATION OVERVIEW

Between 27 and 29 November, Cyclone Ditwah caused widespread flooding and landslides across Sri Lanka, affecting communities in all districts. The storm claimed lives, displaced many people from their homes and caused extensive damage to houses, roads, schools, and health facilities, with the most severe impacts recorded in the Central, Western, and North-Western Provinces. As of 19 December, the government reported 643 casualties, 183 people still missing, more than 66,000 people are residing still in the safety centre.

Damage to houses remain a key driver of humanitarian needs. As of 17<sup>th</sup> December, 101,055 houses partially and 6,288 fully are damaged. Many families returning to their communities are living in partially damaged homes or in makeshift conditions, increasing exposure to weather, health risks, and protection concerns. Protection concerns have increased among displaced communities, particularly for women and girls, as overcrowded shelters, disrupted services, and prolonged displacement heighten risks of gender-based violence, exploitation and psychosocial distress.

Approximately 1,185 schools and 2,720 preschools affected by flooding, severe winds, and landslides urgently require essential teaching and learning equipment, furniture, and minor repairs to enable safe reopening. Schools that are severely damaged or destroyed may remain non-functional in the near term, necessitating temporary learning spaces to ensure continuity of learning. In addition, around 500 schools used as safety centers will require thorough cleaning and minor repairs once displaced families return to their homes.

Livelihoods have been severely disrupted, especially among households reliant on subsistence farming, fisheries, daily wage labour, and small businesses. More than 106,000 hectares of paddy have been damaged during the Maha season, which typically supplies over 70% of annual rice production. A narrow 0–3month window now exists to support replanting and recover 25–30% of lost production, missing this window risks cascading impacts into 2026. Losses of crops, livestock, fishing gear, and other small productive assets have disproportionately affected poorer households with limited coping capacity and little access to compensation. Because the floods coincided with Maha cultivation, delayed or missed planting could carry food and income losses into the next season, with likely knock-on effects on local food availability and prices, particularly for small-scale farmers and low-income households.

Damage to water supply and sanitation systems in several affected areas is limiting access to safe drinking water and adequate sanitation and increasing public health risks, particularly in displacement settings. Livelihoods have been significantly affected, particularly among households dependent on subsistence farming, fisheries, daily wage labour and small businesses.

A [Joint Rapid Needs Assessment](#) was conducted following Cyclone Ditwah, led by the Government with support from humanitarian partners, informed initial response planning. A broader inter-agency assessment is currently underway to refine understanding of evolving needs and priorities, with findings expected to inform future response planning and reporting.

According to national authorities, landslide risk remains elevated in several districts during the ongoing northeast monsoon, particularly in hilly and previously affected areas, with implications for safety, access and the feasibility of return.

## HUMANITARIAN RESPONSE

### Education

#### Needs:

- An estimated 458,609 school-age children and 68,000 preschool-age children need essential learning materials such as stationery, textbooks, backpacks and uniforms while 900 children with disabilities require adapted learning materials, and 25 special education units need appropriate teaching and learning supplies. 555,609 Children are unable to attend school due to the cyclone.
- Approximately 1,185 schools and 2,720 preschools need essential teaching and learning equipment, furniture, and minor repairs to reopen safely. Severely damaged or destroyed schools may remain non-functional in the near term,

**555,609**

Children unable to attend school due to the cyclone

- necessitating temporary learning spaces, while around 500 schools currently used as shelters will require cleaning and minor repairs once displaced families return to their homes.
- Approximately 28,900 teachers and school principals need guidance and immediate support on safe school reopening, socio-emotional learning and basic mental health and psychosocial support as well as on preventing student dropout following prolonged school closures.

#### **Response:**

- No new update.

#### **Gaps & Constraints:**

- Data collection in hard-hit and hard-to-reach areas remain challenging due to access constraints, limiting comprehensive response planning.
- While the Government has taken steps to attach students from fully damaged schools to nearby schools, temporary learning spaces may be required in some locations. The number of temporary learning spaces remains unclear, as damage assessments are ongoing.
- High costs of cleaning materials and equipment posing challenges for schools to do debris clearing.

## **Food Security**

#### **Needs:**

- Immediate food assistance for displaced and flood-affected, particularly those without access to functioning markets or cooking facilities.
- Stabilization of food prices and restoration of market functionality, as vegetable prices have surged 30–200% due to supply shortages and crop losses.
- Targeted nutrition support for pregnant and lactating women, infants, and young children to prevent acute malnutrition.
- Support to smallholder farmers to restart agricultural production during the Maha season, including provision of seeds, fertilizers, and tools, alongside emergency cash assistance.
- Livestock and fisheries recovery support, including fodder, veterinary inputs, and rehabilitation of damaged boats, cages, and aquaculture sites.

**200%**

Market price increased

#### **Response:**

- A total of 67 metric tons of life-saving, ready-to-eat fortified nutrition biscuits were distributed to more than 62,500 households (approximately 250,000 individuals) across the four most vulnerable districts. ADRA, Sarvodaya, ChildFund, Muslim Aid, SUN PF, and WFP are the main partners delivering dry rations and cooked meals across multiple districts.
- WFP chairs the logistics working group and, over the past week, convened a meeting with private sector logistics firms, Maersk and UPS. Both companies have agreed to support the Disaster Management Center and the National Disaster Relief Services Centre with customs clearance and warehouse management. The working group will meet with IMPACCT to discuss challenges faced by humanitarian partners regarding customs clearance.
- Save the Children, and Sarvodaya are implementing cash/voucher programmes in central districts, while WFP is planning to reach up to 40,000, households (approximately 158,000 individuals) through a large scale cash vouchers scheme in areas with functional markets., Voucher based assistance will complement government relief efforts in safety centres as well as in the most vulnerable, hard to reach locations affected by the flood and landslides. Nutrition Support is being provided by Muslim Aid and UNICEF, with a focus on pregnant/lactating women and children, through the distribution of thripasha and micronutrients.
- FAO and the Department of Agriculture have initiated field-level verification of crop damage to inform recovery planning and the provision of agricultural inputs.
- Livelihood support measures are being designed to assist 200,000 farmers in clearing debris, repairing irrigation systems, and accessing inputs in time for the next planting season.

#### **Gaps & Constraints:**

- Overcrowded safety centres lack adequate food preparation facilities, increasing reliance on external cooked meal provision.
- Severe damage to transport networks and markets continue to disrupt food supply chains, limiting household access to essentials.
- Crop, livestock, and fisheries losses are extensive, with recovery requiring significant resources and time, many farmers face debt and loss of productive assets.

- Cold chain and storage facilities remain inadequate, leading to spoilage of perishable goods and limiting distribution of nutrition-sensitive foods.
- Funding requirements remain high, with US\$17.7 million needed for food security, agriculture, and nutrition interventions; resource mobilization efforts are ongoing.

## Agriculture

### Needs:

- Agriculture: Emergency seed distribution (paddy, vegetables, maize), replacement of tools and pumps, cash for work for debris clearance, flood-tolerant varieties, remedial fertilizer.
- Fisheries: Repair/ replace boats and gear, restocking fingerlings and shrimp post-larvae, emergency cash assistance, temporary “Boat Bank”, loan repayment moratorium.
- Livestock: Emergency feed and water, mobile veterinary services, vaccination, shed repairs, poultry restocking, targeted support to women-headed households. ‘

**1M**

People in need of agricultural support

### Response:

- Household surveys are being conducted to identify impacts on the agriculture, fisheries, and livestock sectors.

### Gaps & Constraints:

- Post-Ditwah needs across the agriculture, fisheries, and livestock sectors exceed available resources, with households experiencing significant losses of crops, fishing assets, and livestock, necessitating urgent support for livelihood recovery.
- Access constraints in several affected areas continue to limit field assessments, resulting in challenges in accurately capturing the full extent of damage and losses.

## Nutrition

### Needs:

- 161,013 people need nutritional support, including pregnant and breastfeeding women and children under five. Out of the total, around 15% are displaced and living in safety centers.
- About 1,200 children (6-59 months) with severe acute malnutrition need treatment and therapeutic food, while 9,000 with moderate malnutrition require supplementary feeding cyclone-affected areas.
- Lack of privacy for the breastfeeding mothers in the safety centers.
- Promote and support proper complementary feeding suitable ingredients for children aged 6-59 months in safety centers and remote areas of the 10 most affected districts.
- Provide supplementary food for 7,500 children aged under 5 with moderate acute malnutrition.

**1,200**

Schools need meal program

### Response:

- Cooked meals and dry rations were provided to flood-affected families and to pregnant and breastfeeding mothers in safety centers, reaching 6,400 children under five; and 900 pregnant and breastfeeding women.
- A locally produced ready-to-use cereal mix was distributed as supplementary food to 3,000 children under five with moderate acute malnutrition for one week.
- A meal enrichment voucher, limited to fresh vegetables and fruit basket for 3 days, has been distributed to 1,000 pregnant and breastfeeding mothers in the most affected areas.
- The Ministry of Health is assessing the nutritional status of children in affected areas, with hospitals preparing BP-100 supplies for treatment.
- The government is deploying additional nutrition specialists to strengthen screening and treatment services in the safety centers and hardest hit districts.

### Gaps and Constraints:

- Lack of breastfeeding corners in the safety centers in the district of Kandy, Nuwara Eliya, Matale, Badulla and Kegalle.
- Urgently need to provide treatment for 1,000 severely acutely malnourished children aged 6–59 months across the 10 most affected districts.
- Lack of nutritional screening and interventions.
- Lack of complementary feeding support, including the supply of necessary ingredients and counseling on infant and young child feeding practices, at safety centers located in the districts of Kandy, Nuwara Eliya, Matale, Badulla, and Kegalle.

- Initiate mid-morning meal programs in pre-schools and schools located in the worst- affected districts, based on the assessment finding.
- Provide school meal program support to approximately 1,200 schools impacted by the recent cyclone and floods.

## ⌚ Health

### Needs:

- Continued essential health services, with special attention to the management of non-communicable diseases, which remain a top priority for affected populations.
- Strengthened disease surveillance and early warning, including scaling up early warning, alert and response systems given elevated risks of communicable diseases such as dengue and leptospirosis.
- Expanded mental health and psychosocial support at community and referral levels to address acute stress linked to the loss of lives, livelihoods and displacements; as well as to address anxieties on mid- or long-term uncertainty for those who are displaced
- Scale up sexual and reproductive health services, including prevention of and response to gender-based violence.
- Access to health services, assistive devices, and barrier-free facilities to address urgent needs of persons with disabilities.

**196**

Shortage of medical and pharmaceuticals items.

### Response:

- Essential health services were restored at Chilaw District General Hospital, one of the worst-affected facilities.
- Deployed rapid response medical and public health teams to safety centres to address immediate health needs and to strengthen field surveillance.
- Provided 2,400 maternity and dignity kits coupled with awareness sessions on sexual and reproductive health services, maternal and childcare for pregnant women and women of reproductive age.
- Developed Information, education and communication materials for reproductive, maternal, newborn, child and adolescent health.
- Shared technical guidance on reproductive, maternal, newborn, child, and adolescent health, nutrition and MHPSS with coordination bodies.
- Sector partners are supporting medicines and consumables to the Ministry of Health, including insulin (9,200 vials across 3 types), 200,000 syringes, disposable gloves, glucometer strips, and 2,000 nasopharyngeal/oropharyngeal swabs.
- Sector partners supplied non-medical items, including clinic furniture, to Ministry of Health offices and Maternal Child Health clinics to help restart services. The Ministry of Health has prepared a list of required items, and partners are now systematically committing to providing them.
- Provided technical support for psychological first aid, delivery of mental health and general health services for displaced population, mental health and psychosocial support activities, climate – resilient sanitation planning, and multi-level coordination to enhance community well-being, staff mental health, and integration of Healthy City approaches into disaster risk reduction.
- Supported strengthen early warning and alert systems, including systematic information collection from safety centres and high-risk areas.
- Established weekly reporting mechanism on dengue and leptospirosis.
- Established accountability of affected population mechanism to receive feedback and community needs with partnership with the Health Promotion Bureau.
- Provide cash assistance to 120 pregnant and lactating women coupled with awareness sessions on maternal danger signals and protection.
- MOH is inspecting damaged biomedical equipment in hospitals and clinics, but finishing this assessment will take about two more weeks.

### Gaps & Constraints:

- Full restoration of essential health services remains constrained by access limitations, damaged or inundated facilities, and disruptions to power, water and infection prevention and control.
- Support to staff working both in affected health institutions as well as in welfare centers, such as WASH.
- Increased gender-based violence risks persist in displacement settings, particularly affecting women and girls.
- Insufficient vector control capacity remains in areas with extensive environmental damage and stagnant water.
- Limited availability of referral pathways for mental health and psychosocial support constrain access to care especially for children and adolescents.

- Access barriers for people with disabilities persist due to transport constraints, damaged infrastructure and loss of assistive devices, with urgent needs for orthotics, prosthetics and accessible services.
- Low stock levels of essential medicines for non-communicable disease management continue to pose challenges.
- 109 health institutions are facing water, sanitation and hygiene issues as assessed by Ministry of Health.
- Urgent need for 6 high-consumption items in flood-affected areas, 59 pharmaceuticals, 69 surgical items with current supply issues, and 62 non-medical items for health institutions needing partner support as identified by Ministry of Health.
- Lack of communication for people with disability.
- Institutional and integrate Mental Health and Psychosocial Support (MHPSS) into the core relief framework rather than treating it as an add-on.

## Protection - General Protection/ GBV/ Protection

### Needs:

- Privacy and security for women and children in temporary shelters (WASH facilities and overall spaces) is inadequate.
- Gender-based violence risks persist due to overcrowding, poor lighting, distant bathing areas for women, toilets without locks, limited facilities, and absence of center managers in some safety centers.
- Affected communities housed in buildings belonging to the tea factory/ estate experience additional challenges to their safety and reporting, due to transitionally complicated governance and power dynamics.
- Identification and referral pathways require strengthening to address family separation, loss of caregivers, lack of documentation, and risks of abandonment and institutionalization.
- Referral pathways for gender-based violence also need strengthening.
- Domestic violence has increased in some households due to economic burdens and stress.
- Mental health and psychological support services needs for children, women and affected individuals, including survivors of trafficking and various forms of violence.
- PSEA (Protection from Sexual Exploitation and Abuse) and community feedback mechanisms are critical.
- Shortage of menstrual hygienic items, safe and private latrine, and shower facilities for girls and women are safe centers and in the tea farming.
- Risk of trafficking persists beyond the immediate aftermath of the cyclone, as prolonged economic hardship and lack of opportunities leave individuals susceptible to traffickers.
- Strengthened monitoring, safe shelters, and integration of anti-trafficking measures and awareness into emergency response are required.

**186**

Children received case management support

**>15,000**

individuals were reached with mental health awareness and support messages online

### Response:

- Reached 286 children through child protection services, supported by UNICEF and the Ministry of Women and Child Affairs, strengthening response mechanisms for orphaned and separated children.
- Sector partners operate child safety spaces across multiple locations. UNICEF is supporting 35 child safety spaces in Batticaloa, Trincomalee, Ampara, Puttalam, and Kandy in partnership with the Rural Development Foundation and Sarvodaya. The Red Cross has reached 2,117 children and 1,125 caregivers through child protection activities. ChildFund Sri Lanka has established 28 child safety spaces, reaching approximately 4,000 children. World Vision is supporting 54 shelters by addressing identified basic needs of children and families and has identified families with urgent needs across 28 Divisional Secretariats, including direct monitoring of 7,413 affected children. Save the Children is active in Colombo, Badulla, and Nuwara Eliya.
- UNFPA supported the Ministry of Women and Child Affairs and Women's Bureau to deliver a coordinated response to gender-based violence and ensure the safety of women, girls, and children in safety centers and affected communities.
- Disseminated online/poster messages on psychosocial support in English, Sinhala, and Tamil, reached more than 20,000 individuals.
- Sector partners have provided psychological first aid activities and training for responders. As of now, 221 frontline officers and civil society organization members reached via psychological first aid training.
- A total of 1,012 children received direct support through case management and child protection services,
- Distributed 200 play and learning kits to safety centers in North-Western, Central, and Eastern provinces, reaching 1812 children.
- The Department of Probation and Childcare Services was supported with the organization of psychosocial support, comprehensive care for children in need, and transportation.

- 5 children were reunified with their families
- UNFPA reached 700 women through the distribution of dignity kits in affected communities. In Kandy, the Women's Development Centre provided dry rations and hygiene packs for 350 displaced families, complemented by sanitary supplies, clothing, kitchen utensils, and maternity kits for families both inside and outside camps. World Vision delivered menstrual Hygiene dignity kits to 3349 adolescent girls, as part of holistic emergency relief programming.
- All key gender-based violence reporting and referral mechanisms, including women and child police units, the women's helpline, the child helpline, and Mithurupiyasa centres, remain operational.

#### **Gaps & Constraints:**

- Limited funding prevents sector partners reaching more safety centres and communities with protection services.
- Lack of access to school uniforms, stationery, and warm clothing compounds anxiety and protection concerns among children.
- Breakdown of referral pathways for specialized services; lack of age-disaggregated data across the entire response hinders proper sectoral planning.
- Inadequacies in safety centre management, insufficient privacy and safeguarding in these locations give rise to protection risks, particularly to women and children. Unclarity in the future of these centers and management lines makes protection response planning difficult.
- Availability of services in all relevant languages emerges as a constraint to effective access to services in certain situations. E.g. While many women and girls in affected communities speak Tamil, most of the service providers speak Sinhala which may be an additional barrier in disclosing incidents of gender-based violence.
- Gaps exist in the sexual and gender-based violence case management (SIR, funding, coordination, technical assistance); compounded by the breakdown of referral pathways and specialized services among some affected communities.
- Despite ongoing efforts, there is a lack of a fully streamlined approach to Child Safeguarding and PSEA.

## **Shelter, Land and Site coordination**

#### **Needs:**

- Emergency shelter, repair kits, and transitional housing solutions for 101,055 partially and 6,288 fully damaged houses.
- Over 286,000 displaced individuals, including 22,500 families in safety centres, need non-food items such as bedding, kitchen sets, mosquito nets as well as site management and coordination support for safe, dignified living conditions.

**107,343**

Partially or fully damaged

#### **Response:**

- No new update

#### **Gaps & Constraints:**

- Overcrowded safety centres without sufficient space, privacy and essential items for over 70,000 people accommodated in 762 government-run centres.
- Households in landslide-prone districts urgently require transitional shelter solutions until safe land for reconstruction is identified.
- Immediate provision of non-food items, including shelter materials, bedding sets, kitchen items, mosquito nets, and hygiene supplies, is critical to restore dignity and protection for displaced families and vulnerable groups.

## **Water, Sanitation and Hygiene**

#### **Needs:**

- Cleaning of dug 3000 wells, and rehabilitation of toilets at 5500 household levels.
- Water, sanitation and health services in 850 temporary shelters including faecal sludge management.
- Supply of safe drinking water, hygiene kits, and water-purification/disinfection materials to 27,000 households.
- Water trucking and installation of water tanks at distribution points for communities and 1000 households.

**121,150**

Women and girls need safe water, sanitation and hygiene supplies.

- Facilitation of water supply to more than 100 health-care facilities through urgent rehabilitation of the on-site water treatment facilities or through 25 water trucking to maintain essential services.
- Rehabilitation of community and rural 538 water supply schemes and 45 sewerage treatment facilities.
- Access to safe water, sanitation, and appropriate hygiene supplies for 121,150 women and girls to improve menstrual health and hygiene.
- Rehabilitation of 1500 dug wells and tube wells through the provision of purification chemicals and disinfections (TCL/aquatabs) for rural households and small communities.
- Essential water-testing chemicals and equipment, including water testing kits (25 laboratories and 5000 water quality monitoring kits).
- Disinfection of flood damaged 150 health-care facilities and 1,200 schools through the supply of Lysol and other approved disinfectants.
- Provide urgent supplies such as 16 water bowsers, 10,000 water tanks, 10,000 water pumps, 10,000 water purification machines, and 136 generators for immediate restoration of WASH facilities.

#### **Response:**

- Water, sanitation, and health supplies were procured and distributed including hygiene kits (2,000 soaps and 700 buckets for Kandy and 4,000 sleeping mats, 4,000 bed sheets, 2,000 soaps, 4,000 towels, 700 buckets, 8,000 toothbrushes, 1,600 tubes of toothpaste, 3,000 sanitary napkin packets, 350 packs of baby diapers, and 700 large garbage bins for Badulla).
- Procured and distributed 7321 mosquito nets.
- Procured 24,100 kg of chlorine for water purification in community-based water supply schemes.
- Procured 1000 jerry cans, 8 sludge pumps and 2 generators
- Water trucking services and the installation of temporary water storage tanks were provided to support displaced households and safety centres.
- Promoted positive hygiene behaviors at the household, safety centers, and community level for the prevention of water-borne diseases, with other awareness message included where possible.

#### **Gaps & Constraints:**

- While adequate quantity of drinking water supplies is being provided to safety centers, there are significant challenges in providing the required quantities of water to ensure good hygiene practices.
- Sanitation facilities at safety centers are significantly inadequate, and provision of additional facilities within a short time scale is a challenge.
- Equipment and chemicals for well-cleaning are in short supply.
- Limited access to affected locations for rehabilitation.
- Lack of technical staff and incomplete data due to communication barriers.

## Early Recovery

#### **Needs:**

- Clearance and safe disposal of mixed solid waste (including mud, rubble, plastics, e-waste, sewage, animal carcasses, and damaged household items) from homes, roads, schools, and community facilities.
- Immediate capacity for safe handling, treatment, and disposal of biomedical waste generated by health facilities in affected areas.
- Strengthened waste management and environmental sanitation services to prevent disease transmission and protect public health in affected communities.

**460,000**

People benefiting from  
Early Recovery  
interventions in 8 areas  
across 4 districts

#### **Response:**

- Government authorities, supported by sector members, continue to implement waste and debris clearance, drainage cleaning, and distribution of early recovery items across affected districts
- UNDP continues to support government-led waste and debris clearance in Colombo, Kandy, Kurunegala, and Batticaloa districts contributing to the removal of approximately 100 tons (for a total estimated amount of US\$ 3,500) in Rideegama (Kurunegala) and 60 tons (for a total estimated amount of US\$ 2,100) in Eravur Pattu (Batticaloa), while ChildFund is focusing on emergency debris and waste clearance in Puttalam.

- Jaffna Social Action Center has provided early recovery support to over 600 affected households across Jaffna, Kilinochchi, Mullaitivu, and Mannar districts, helping families restore basic living conditions, personal dignity, and household functionality in the aftermath of the crisis.

#### **Gaps & Constraints:**

- Limited availability of consolidated and centralized data on government-led debris and waste removal efforts across affected districts, constraining planning, prioritization, and gap analysis.
- Inconsistent final disposal practices remain a constraint: while some waste is transported to waste-to-energy facilities, significant volumes are being temporarily deposited in open landfills without adequate final treatment arrangements, highlighting the need for environmentally sound disposal solutions.
- Limited local capacity for the management and disposal of construction-related debris, with existing mechanisms insufficient to address medium- to long-term debris volumes, requiring sustained technical, regulatory, and infrastructure solutions.

## **GENERAL COORDINATION**

The overall coordination for Cyclone Ditwah response is led by the Government through national and sub-national, with support from the United Nations, humanitarian partners, international organizations, national Civil Society Organizations and the Private Sector. The Disaster Management Centre continues to lead operational coordination, working closely with line ministries, district and divisional authorities to support response planning and implementation across affected areas. Local authorities play a central role in coordinating assistance at district and divisional level, often while being directly affected by the disaster themselves.

The United Nations, under the leadership of the Resident Coordinator, supports Government-led coordination through the activation of the Humanitarian Country Team, which brings together heads of humanitarian UN agencies and international and national civil society organisations to provide strategic direction and ensure coherence of humanitarian support. Operational coordination is facilitated through the Inter-Sector Coordination Group, convened by the Resident Coordinator's Office, which provides a platform for technical coordination among designated sector leads and partners. Sector coordination mechanisms are being progressively activated and strengthened, with regular sector meetings convened to support information-sharing, joint analysis and alignment of activities. Technical working groups have been established for selected cross-cutting priorities, including Cash and Voucher Assistance (CVA), and Accountability to Affected Populations and Protection from Sexual Exploitation and Abuse (AAP/PSEA). A light logistics coordination arrangement has also been put in place to facilitate basic information-sharing and coordination among Government and humanitarian partners. Joint needs assessments and information management efforts are coordinated through the ISCG supporting the Government-led assessment process under the leadership of the DMC. Common reporting tools, including a 5W system and an online dashboard are rolled out to support response coordination, information-sharing and tracking of response activities. As of reporting date, more than 39 national and international partners are contributing information on response activities, reflecting the scale and breadth of engagement in the humanitarian operation.

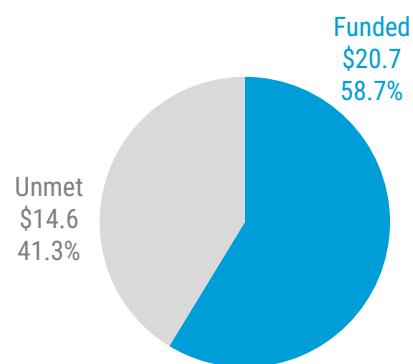
The working group on accountability to affected people is initiating a rapid mapping of partner activities, developing common templates to collect and share complaints and feedback, and introducing a set of organization-level indicators to monitor partners' commitments under the Humanitarian Priorities Plan. Partners were also briefed on government plans to strengthen complaints and feedback management systems, supporting improved coordination and alignment across the response. Efforts to integrate disability-inclusive communication approaches across information dissemination and community engagement activities were promoted among partners implementing the Humanitarian Priorities Plan. In addition, areas related to accountability to affected people were integrated into the phase 2 of the Joint Rapid Needs Assessment, capturing community information needs, trusted sources of information, preferred communication channels, preferred mechanisms for providing complaints and feedback on assistance and the conduct of relief workers, as well as perceptions of community participation in decision-making.

The Humanitarian Priorities Plan has also been presented to Delhi-based embassies, and a briefing for development partners in Sri Lanka was held today to provide an update on progress under the plan and to also support advocacy, coordination, and resource mobilization.

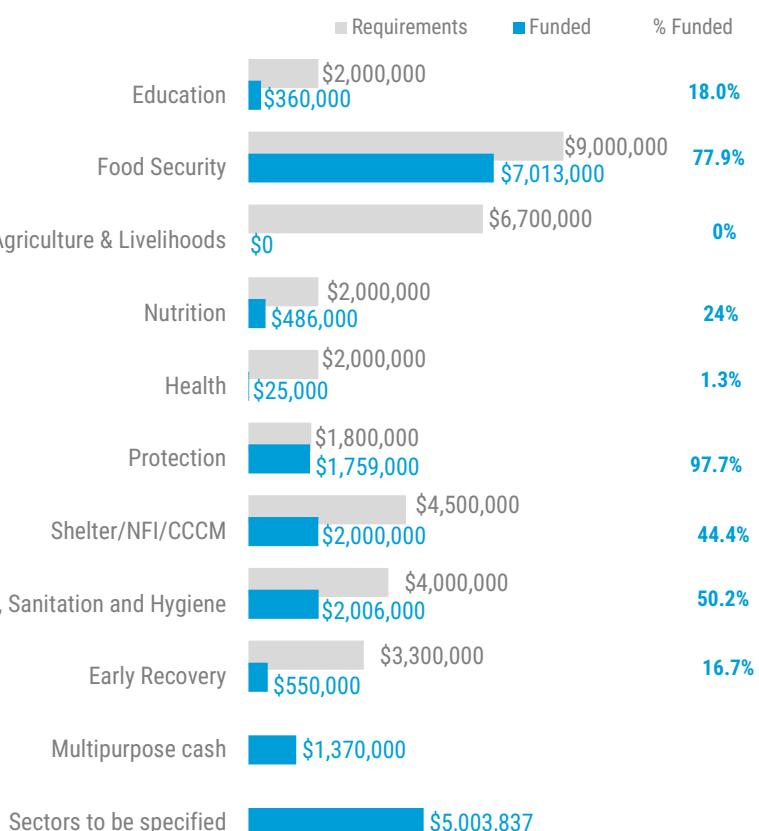
## FUNDING INFORMATION

### CONTRIBUTIONS TO THE HUMANITARIAN PRIORITIES PLAN (HPP)

**Sri Lanka HPP 2025**  
**US\$35.3 million requested**



### HPP Funding Status by Sector (US\$ million) – as of 19 Dec 2025



All humanitarian partners, including sectors, donors and recipient agencies, are encouraged to inform the Office UN Resident Coordinator Sri Lanka for funding received to be included in this reporting.



**ANNEX 1:****FUNDING FOR CYCLONE DITWAH RESPONSE (INSIDE THE HPP)**

<b>Development Partner</b>	<b>Channel / Partner</b>	<b>Sector</b>	<b>Amount ~ (US\$)</b>
Australia	UN	Food Security	995,000
Australia	UN	Protection	330,000
Australia	UN	Unspecified	330,000
Canada	NGOs	Shelter/ NFIs/ CCM, WASH	252,600
Canada	TBC	Unspecified	54,100
Canada	UN	Food Security	1,018,000
EU	UN	Education, Protection, WASH	1,025,000
EU	UN	Multipurpose cash assistance	1,100,000
Gates Foundation	UN	Health	25,000
Gates Foundation	UN	Nutrition	246,000
Gates Foundation	UN	WASH	406,000
German National Committee for UNICEF	UN	Unspecified	117,547
Japan	UN	Food Security	1,000,000
Japan	UN	Shelter/ NFIs/ CCM	1,000,000
Japan	UN	WASH	300,000
Japan	UN	Protection	200,000
New Zealand	NGOs	Unspecified	123,000
New Zealand	UN	Protection	288,323
New Zealand	UN	Education, WASH, Protection	288,323
Norway	Other	Protection	740,700
Norway	UN	Unspecified	980,415
Republic of Korea	UN	Food Security	500,000
Switzerland	UN	Multipurpose cash assistance	270,000
UK	UN	Multipurpose cash assistance, WASH, Shelter/ NFIs/ CCM	332,852
UN	UN	Food Security	2,000,000
UN	UN	Protection	200,000
UN	UN	Shelter/ NFIs/ CCM	1,000,000
UN	UN	WASH	1,300,000
US	NGOs	Unspecified	1,000,000
US	UN	Food Security	2,000,000
US National Committee for UNICEF	UN	Education	360,000
US National Committee for UNICEF	UN	Nutrition	240,000
			<b>20,022,850</b>

**ANNEX 2:****FUNDING & OTHER CONTRIBUTIONS FOR CYCLONE DITWAH RESPONSE (OUTSIDE THE HPP)**

<b>Development Partner</b>	<b>Channel / Partner</b>	<b>Amount ~ (US\$)</b>
ADB	GoSL	3,000,000
Australia	Australian NGOs - TBC	660,000
	Family Planning Association Sri Lanka (FPASL)	100,000
Canada	Sri Lanka Red Cross Society (SLRC)	155,200
China	GoSL	1,000,000
EU	Sri Lanka Red Cross Society (SLRC)	582,200
Germany	Federal Agency for Technical Relief (THW)	582,200
Ireland	International Federation of the Red Cross and Red Crescent Societies (IFRC)	582,200
Maldives	TBC	1,150,000
Nepal	TBC	200,000
Norway	IFRC	980,415
Red Cross China	Sri Lanka Red Cross Society (SLRC)	100,000
Singapore	Singapore Red Cross	100,000
Singapore Red Cross	Singapore Red Cross	38,765
UK	Sri Lanka Red Cross Society (SLRC)	998,558
		<b>10,453,538</b>

<b>Development Partners</b>	<b>Non-Food Items/ services</b>
Bangladesh	Relief supplies included 1,000 mosquito nets, 500 food packets, 10 tents, 20 pieces each of torch lights, gum boots, vests, gloves, hats; and 125 boxes of essential medicines
China	Relief supplies (84,525 kg) included inflatable lifejackets, tents, blankets, bed sheets. Total value: RMB 10 million (~LKR 400 million)
European Union	Relief supplies (69,000 kg) included tents and emergency shelters, utensils for food preparation, mattresses and water purification equipment. Total value: ~EUR 500,000. Expert assistance by 11 structural engineers.
France	Relief supplies included 3,400 emergency supplies (emergency shelter materials and WASH supplies) for over 1,000 people (200 families) and deployment of an expert in crisis and disaster management
India	Equipment supplies 10 logistics and surveillance drones, TriNetra drone, satellite phones, generator sets, 15 fast Rescue Boats with Outboard Motors, 2 more bailey bridges, BHISHM Cubes, National Disaster Response Force equipment and other essential disaster response equipment.  Deployed 2 Urban Search and Rescue Teams, 80 National Disaster Response Force (NDRF) personnel, K9 units and 5-member medical team.  53 tonnes of relief materials including emergency food rations, medical supplies, tents, blankets, hygiene kits, 17 types of essential medicines, more than 14,200 kg of dry food items, 300 MT

	sugar, 300 MT lentils, 25 MT milk powder, medicines, blankets, dhotis, sarees, towels, 150 MT rice, 150 MT sugar, 500 water purification kits and other essential relief items.. Deployed 2 Chetak helicopters and 2 Mi-17 helicopters.
JICA	Deployed Japan Disaster Relief Medical Team (27 members) containing doctors, medical experts, relief personnel and rescue specialists
Maldives	25,000 cases of tuna cans
	Deployed 47-member specialised Pakistan Army search and rescue unit
	Relief supplies (80 tons) including food, emergency medicines, first-aid kits and essential equipment.
	Relief supplies (200 MT) including essential medicines, powdered milk, nutritional supplements, tents, blankets, mosquito nets, bedding materials, water pumps, lighting equipment and other essential items.
Pakistan	Relief supplies (7.5 tonnes) including tents, tarpaulins, and powdered milk.
Russia	Relief supplies (35 MT) including movable 60 kW electric power station, pumping equipment for water drainage, summer tents (10-person capacity), food supplies (sugar, vegetable oil, and rice).
	Deployed a rapid response team containing 7 WASH experts. (\$ 224,000)
Switzerland	Relief supplies - equipment capable of providing drinking water to over 10,000 beneficiaries and various other equipment. Dry rations and hygiene kits provided.
	Deployed 53 specialists from the Abu Dhabi Civil Defence Force (trained in advanced search and rescue) and trained rescue dogs. Supplied air-conditioned vehicles, specialized emergency response equipment, trucks, jeeps, vans and high-speed rescue boats.
UAE	Relief items including 1,116 food packets (each sustaining a family for 10 days) 336 relief and aid bags containing (bottled water, tents, blankets, mattresses, cooking utensils and sanitary items), and others.
	Deployment included 60 American military personnel and support for post-disaster response and logistics operations for approximately two weeks.
USA	Supplied two C-130 cargo aircraft and US Department of War's strategic airlift capabilities to deliver aid to the hardest-hit communities.
Qatar/ Qatar Fund for Development	Provided dry goods and canned items (for 1,800 displaced families), and search and rescue equipment

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