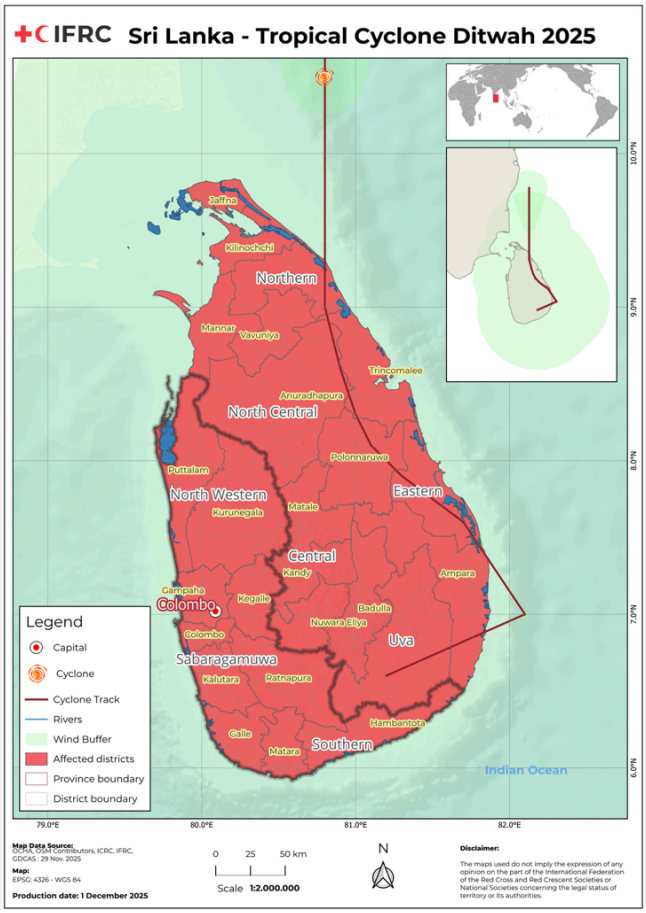
DREF Operational Update

Sri Lanka Cyclone Ditwah 2025

Multi-purpose cash distribution to people from all communities. (Photo: SLRCS)

Appeal: **MDRLK023**	Total DREF Allocation: **CHF 1,000,000**	Crisis Category: Orange	Hazard: **Cyclone**
Glide Number: **FL-2025-000213-LKA**	People Affected: **1,118,929 people**	People Targeted: **268,180 people**	
Event Onset: **Sudden**	Operation Start Date: **07-12-2025**	New Operational End Date: **30-09-2026**	Total Operating Timeframe: **9 months**
Reporting Timeframe Start Date: **07-12-2025**		Reporting Timeframe End Date: **31-05-2026**	
Additional Allocation Requested: -		Targeted Regions: **Central, Eastern, North Central, North Western, Northern, Sabaragamuwa, Southern, Uva, Western**	

Description of the Event



Map of all districts affected by the Cyclone Ditwah 2025, (Source: IFRC)

Date of event

28-11-2025

What happened, where and when?

A low-pressure system that developed over the southwest Bay of Bengal near Sri Lanka on 25 November 2025 rapidly intensified into a deep depression by 26 November 2025, bringing heavy rains and strong winds across the island. The Department of Meteorology, along with the Disaster Management Centre (DMC), issued early warnings as the system began to track north-northwestwards, positioning itself approximately 100 kilometres south of Sri Lanka's eastern coastline. On the morning of 27 November 2025, the Department of Meteorology escalated its alert to a "Red" Level Warning, the highest meteorological threat level as the deep depression intensified into Cyclonic Storm "Ditwah".

Cyclone Ditwah made landfall on the eastern coast of Sri Lanka on 28 November 2025, triggering what has since been described as the most extensive flooding and landslide damage the country has experienced in the past two decades. The storm's trajectory carried it across the Eastern, North-Central, Central, and Northwestern provinces, cutting through major population centres and historically vulnerable terrain, including Batticaloa, Polonnaruwa, Badulla, Kandy, and the central highlands. The cyclone brought exceptionally heavy rainfall, with several districts recording more than 200 mm within 24 hours and localised rainfall exceeding 500 mm in the worst-affected areas. These conditions precipitated widespread flooding, flash floods, and more than 200 landslides across the country in the immediate aftermath of the storm.

In response and based on the request of the Sri Lanka Red Cross Society (SLRCS), the IFRC launched an Emergency Appeal (EA) on 2 December 2025, with Secretariat funding of CHF 5 million for 18 months, targeting 500,000 people. Following the approval of a DREF allocation of CHF 1 million on 4 December 2025 to provide immediate life-saving and early recovery support to 268,180 people, the EA

was revised on 5 January 2026 to reflect a 24-month timeframe, with a total funding requirement of CHF 12 million from the Secretariat and CHF 14 million Federation-wide, targeting 597,365 people, alongside an updated Operation Strategy outlining key sectoral interventions.

NFI distribution by SLRCS. (Photo: SLRCS)

SLRCS cleaning well. (Photo: SLRCS)

Psychosocial services for children. (Photo: SLRCS)

IFRC and SLRCS staff during field visit. (Photo: SLRCS)

Scope and Scale

Cyclone Ditwah left a trail of destruction that cut across the entire island. At its peak on 30 November 2025, the DMC reported that disaster had affected 309,607 families (1,118,929 people) across all 25 districts, with 334 deaths and 370 people missing, and 55,747 families (196,790 people) sheltering in 1,494 safety centres . By 17 April 2026, the latest DMC situation reported that formally registered affected families stood at 64,901 (220,044 people), reflecting the consolidation of verified data by District Secretaries. Recorded deaths had risen to 687, with 147 people still missing, underscoring the full toll of landslides and flooding across the hill-country districts. Housing damage, now comprehensively assessed, stands at 5,866 houses fully destroyed and 109,629 partially damaged, totalling 115,495 homes across 25 districts. The most severely affected districts; Badulla (90,127 people), Nuwara Eliya (61,459), Kegalle (36,703), Matale (23,083), and Kandy (8,513) account for the large majority of casualties, displacement, and structural losses. Displacement has declined substantially from its peak: as of 17 April 2026, only 20 safety centres remained operational, sheltering 494 families (1,404 people), compared to 55,747 families in 1,494 centres at the height of the crisis. However, 44,179 families (150,329 people) continued to stay with relatives, friends, or in rented accommodation, reflecting a pattern of protracted and dispersed displacement. Remaining safety centres reported gaps in child-friendly spaces, safe spaces for women and girls, mental health and psychosocial support, and access to dignity items.

Cyclone also caused widespread disruption to transport, power, and communications: at least 206 major roads were blocked or damaged, 10 bridges destroyed or structurally compromised, rail operations on the upcountry, Batticaloa, and Trincomalee lines curtailed, and 25–30 per cent of the national power supply disrupted at different points due to fallen transmission lines and the temporary shutdown of major hydropower plants such as Kotmale and Rantambe.

The Government of Sri Lanka activated national and district-level coordination mechanisms immediately following the cyclone, with the DMC leading multi-agency efforts to manage safety centres, disseminate public alerts, and coordinate with armed forces, police, and local authorities. The tri-forces particularly the Army and Navy were deployed for search and rescue, water-based evacuations, and emergency road-clearing operations. At the request of the Government, the Humanitarian Country Team (HCT) launched a Humanitarian Priorities Plan (HPP) on 11 December 2025 to support 658,000 of the most vulnerable people affected by Cyclone Ditwah between December 2025 and April 2026. A Post-Disaster Needs Assessment (PDNA) was jointly undertaken by the Government with accompaniment from the United Nations, the European Union, the World Bank, and the Asian Development Bank, with findings shared to inform a government-led recovery plan.

Following Tropical Cyclone Ditwah, the SLRCS, with support from the IFRC, conducted a Rapid Multisectoral Needs Assessment (RMNA) across the most affected districts, surveying 1,355 households. The assessment confirmed that affected populations continue to face significant multi-dimensional humanitarian and recovery needs spanning housing, livelihoods, water and sanitation, health, and protection. While the Government of Sri Lanka continues to lead overall response and recovery efforts, SLRCS and humanitarian partners remain focused on addressing persistent gaps in remote, underserved, and severely affected areas, particularly as the Humanitarian Priorities Plan concludes and services transition into routine government systems.

After six months, the response has transitioned from emergency relief to early recovery and residual needs remain concentrated among displaced families unable to return safely due to landslide exposure, households in temporary shelter arrangements, and vulnerable populations, including women, children, older persons, persons with disabilities, and households in high-risk or land-insecure locations whose recovery has been constrained by loss of livelihoods and limited coping capacity.

Source Information

Source Name	Source Link
1. Disaster Management Center - Situation update	https://www.dmc.gov.lk/index.php?lang=en
2. Ditwah Summary Report_DMC	https://www.dmc.gov.lk/images/dmcreports/Ditwah_Situation_Summary_Report_at_1000hrs_on_2026__1776403312.pdf
3. Post Disaster Needs Assessment Report	https://www.dmc.gov.lk/images/pdfs/PDNA_Full_Report_Final%20Updated.pdf

Summary of Changes

Are you changing the timeframe of the operation	**No**
Are you changing the operational strategy	**No**
Are you changing the target population of the operation	**No**
Are you changing the geographical location	**No**
Are you making changes to the budget	**Yes**
Are you requesting an additional allocation?	**No**

Please explain the summary of changes and justification:

As the operation progresses toward its conclusion on 30 September 2026, a review of expenditure against the approved DREF budget has identified estimated savings of CHF 178,570.40, together with potential exchange gains of approximately CHF 50,248, which are proposed to be reallocated to the Multi-Purpose Cash Assistance (MPCA) component to support the distribution of the second cash tranche to 2,656 households, including 2,500 DREF-supported households and 156 migrant and refugee households. The proposed reallocation comprises savings from WASH in Emergencies (CHF 119,848.29), Health Services (CHF 35,445.93), Shelter and Household Items (CHF 18,378.52), Community Engagement and Accountability (CHF 1,944.55), National Society Strengthening (CHF 1,282.61), Volunteer Insurance (CHF 855.50), and Visibility Materials (CHF 815.00). The significant savings in Shelter, Health and WASH activities are due to savings in procurement and in order to avoid duplication with government and other actors providing same services. In addition, some needs were lower than initially estimated.

The reallocation will also cover the revision of the MPCA transfer value from LKR 20,000 (CHF 54) to LKR 27,000 (CHF 72.97) per household, as recommended by the cluster Cash Working Group following updated market and cost-of-living assessments. While the first tranche has already been successfully distributed at the revised rate, the change to the transfer value is formalized through this operational update (OU). The proposed second tranche was already planned under the EA funding and using the DREF funding to cover it ensures that affected households receive the full level of assistance envisaged under the operation as well as effective use of funding.

Reallocating these savings to MPCA represents the most effective use of the available resources, as cash assistance remains one of the highest-priority needs identified through assessments and community feedback. The additional funding will enable vulnerable households to continue meeting essential needs, including food, household expenses, health costs, and recovery-related expenditures during the transition from emergency response to early recovery. The reallocation also ensures that savings generated through efficient procurement, lower-than-anticipated operational costs, and complementary bilateral support are fully utilized to maximize humanitarian impact before the operation closes.

The total budget remains the same and the second tranche of cash assistance is planned for implementation between June and September 2026, accompanied by monitoring visits, post-distribution monitoring, and a lessons learned workshop. By reallocating the savings to MPCA, the operation will strengthen support to the most vulnerable households, improve the overall effectiveness of the response, and ensure that available DREF resources are directed towards activities with the greatest direct benefit to affected communities.

IFRC Network Actions Related To The Current Event

Secretariat	The IFRC Secretariat continues to work in close coordination with SLRCS, providing technical support across operations management, WASH, health, PGI, logistics, and cash assistance, and facilitating systematic information sharing between SLRCS, Movement partners, and external actors including UN agencies. The IFRC Country Cluster Delegation (CCD) in Delhi and the Asia Pacific Regional Office (APRO) in Kuala Lumpur maintains coordination back-up, including liaison with Partner National Societies and oversight of surge and technical support deployment. Eight surge profiles have been deployed to support the operation, seven in-country and one remote, covering Operations Management, PMER, Information Management, Communications, Assessment Coordination, and Shelter Cluster Coordination. Second round of Operations Manager and Shelter Coordinator were deployed for the continuity of the operation. These profiles were designed to complement, not replace, SLRCS capacities, with a focus on building local systems, strengthening accountability, and enabling timely, high-quality reporting and operational adaptation as the situation evolves. Throughout the reporting period of the response operation, the IFRC maintained close coordination with the SLRCS by actively participating in coordination meetings and providing technical support, such as assessments, relief distribution, technical sessions and orientations to capacitate the national society during this operation.

	IFRC also continues donor reporting in accordance with agreed requirements to ensure regular information sharing with the IFRC network through operational updates and informal situational reports published on the IFRC GO platform and circulated accordingly. Through these combined efforts, IFRC and SLRCS strengthens their collaboration, enhancing SLRCS's capacity to respond to emergencies and address the critical needs of affected populations with greater efficiency and impact.
Participating National Societies	No partners present physically in Sri Lanka at the onset; however, bilateral funding and technical support were subsequently mobilized for the EA.

ICRC Actions Related To The Current Event

The ICRC maintained an active delegation in Sri Lanka and contributed CHF 12,588 (in local currency) to SLRCS to meet urgent needs, complementing IFRC's DREF support.

Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
National authorities	The Government of Sri Lanka activated national and district-level coordination mechanisms immediately following the cyclone. The Disaster Management Centre (DMC) led multi-agency efforts, convening coordination meetings, sharing situation reports, and working bilaterally with agencies to expedite life-saving actions through a dedicated Coordination Unit at the Defence Headquarters and a network of district-level emergency operation centres. The President instructed District Secretaries and District Disaster Management Committees to prioritise life-saving rescue and relief, issuing a special circular to avoid administrative delays. The tri-forces — Army, Navy, and Air Force — were deployed across all severely affected districts for search and rescue, water-based evacuations, and emergency road-clearing. The Sri Lanka Navy deployed over 140 Disaster Relief Teams nationwide, with approximately 79 teams actively engaged in flood-hit areas, operating in locations such as Kala Oya, Maho, Polonnaruwa, Trincomalee, Batticaloa, and Kegalle. The Air Force conducted aerial rescues and reconnaissance, including high-profile operations rescuing individuals trapped on trees and bridges in Anuradhapura and Polonnaruwa. Sri Lanka Police activated 47 division-level hotlines to receive distress calls and support evacuations. Two Cabinet Minister-led teams were appointed to oversee relief operations in the Northern and Eastern Provinces, working under presidential directives with governors, district secretaries, and security force commanders. The government released an initial allocation of approximately LKR 1.2 billion (CHF 2.8 million) for emergency relief, with up to LKR 30 billion (CHF 72 million) available under the 2025 budget for disaster response. Mobile medical teams were deployed to flood-affected communities, and vector-control activities including fumigation and larvicide were intensified to reduce dengue risk.

UN or other actors	The United Nations convened a Humanitarian Country Team (HCT) meeting on 30 November 2025, agreeing to proceed with a multi-sectoral Joint Rapid Needs Assessment (JRNA) in coordination with the DMC. The assessment was conducted in two phases: first, a layering exercise drawing on existing satellite data, census information, and sectoral data; followed by field-level gap analysis. The HCT reactivated its cluster structure across food security and livelihoods, nutrition, education, WASH, health, sexual and reproductive health, protection, shelter, non-food items, camp coordination and camp management, and early recovery. At the request of the Government, the HCT launched a Humanitarian Priorities Plan (HPP) on 11 December 2025 to support 658,000 of the most vulnerable people affected between December 2025 and concluded on 11 June 2026. OCHA's Regional Office for Asia and the Pacific (ROAP) in Bangkok provided surge support to facilitate rapid development of the Joint Response Plan. The DMC convened UN agencies and humanitarian partners to map ongoing activities, identify gaps, and align contributions with government priorities to avoid duplication and ensure coverage of hard-to-reach areas. A WASH cluster meeting was convened by the WASH Technical Working Group, bringing together the Ministry of Health, the National Water Supply and Drainage Board, UNICEF, WHO, INGOs, and SLRCS to coordinate water, sanitation, and hygiene interventions and harmonise hygiene promotion messaging. The United States Government announced an immediate allocation of approximately USD 2 million (CHF 1.6 million) for urgent flood relief and early recovery. A Post-Disaster Needs Assessment (PDNA) was jointly undertaken by the Government of Sri Lanka with accompaniment from the United Nations, the European Union, the World Bank, and the Asian Development Bank, with findings shared to inform the government-led recovery plan.

Are there major coordination mechanism in place?

The Disaster Management Centre continues to serve as the primary coordination hub, bringing together government line ministries, tri-forces, Police, UN agencies, and NGOs to harmonise assessments, resource allocation, and response activities. The DMC maintains regular coordination meetings and district-level emergency operation centres to oversee the transition from relief to recovery.

SLRCS continues to work in close collaboration with the DMC, Meteorological Department, Irrigation Department, and Divisional Secretariats, coordinating branch-level response and translating national guidance into community-level action. SLRCS co-leads the Shelter, Essential Household Items, and CCCM cluster, maintaining active engagement with district and divisional authorities on beneficiary verification, relief distribution, and needs monitoring.

The NBRO continues to monitor landslide risk across affected districts, while the Department of Irrigation maintains surveillance of major river systems including Kelani, Kalu, Mahaweli, and Attanagalu Oya, issuing alerts as conditions evolve. The Department of Agriculture is leading ongoing crop damage assessments and farmer compensation processes, with over 600,000 acres of crops reported damaged or destroyed and recovery support for affected farming households under active planning.

Needs (Gaps) Identified

Shelter Housing And Settlements

Shelter remains one of the most significant recovery needs. As of April 2026, 115,495 homes have been damaged across 25 districts; 5,866 fully destroyed and 109,629 partially damaged. Findings from the RMNA indicate that approximately 90 per cent of 1,355 surveyed households reported some level of dwelling damage. Despite the scale of impact, roughly 70 per cent of households continue to reside in their own homes, highlighting widespread unsafe occupancy. Roof failures and partial collapses were commonly observed, increasing vulnerability to further damage during storms and heavy rains. Several households also reported cracked or unstable walls, which pose risks of collapse and endanger residents' safety. These reflects significant in-site coping despite ongoing concerns around structural safety and limited access to repair resources. The PDNA identified housing as the largest recovery sector, accounting for approximately 28 per

cent of total estimated recovery and reconstruction needs. Households remaining in safety centres are disproportionately those whose homes sustained severe or complete damage, with needs extending beyond emergency shelter assistance toward transitional support, housing repair, and resilient reconstruction.

Through the operation, SLRCS has distributed essential household items to 5,000 households, supporting families returning to damaged homes and temporary living arrangements. However, longer term shelter needs remain significant as 115,495 houses were reported damaged, including 5,866 houses fully destroyed, and many households continue to require support for housing repair, transitional shelter solutions, and recovery assistance.

The Government has committed to providing more than 1,100 transitional shelters, though humanitarian partners including SLRCS have emphasized the need for a clear transition strategy and resolution of Housing, Land and Property (HLP) issues.

Livelihoods And Basic Needs

Livelihood disruption has been widespread and severe across affected districts. Approximately 85 per cent of surveyed households reported that their primary livelihood source had been affected by the cyclone, particularly those dependent on informal daily wage labour, smallholder agriculture, livestock rearing, fisheries, and small-scale trade. In the central highlands and Uva province, intense rainfall and landslides damaged tea and vegetable plots, washed away topsoil, and destroyed hillside access roads, leaving estate workers and small farmers without income during a period of already high food prices. In coastal and low-lying districts, prolonged inundation damaged markets, petty trade stalls, and informal businesses, while fishing bans and damage to boats and gear disrupted fisheries livelihoods.

The PDNA estimated that the cyclone caused economic losses exceeding LKR 120 billion (CHF 283.1 million) across productive sectors, with agriculture, fisheries, tourism, trade, and small enterprises among the hardest hit. Over 600,000 acres of crops, primarily paddy, vegetables, and maize were inundated or destroyed across the Eastern, Northern, Central, and Uva provinces. The timing was particularly devastating: paddy farmers had recently completed planting, with crops only 30 days old at the time of flooding. Thousands of households lost productive assets, equipment, crops, livestock, fishing gear, and sources of income, significantly reducing their capacity to meet basic needs and recover independently. Early livelihood support including agricultural inputs, livestock fodder, and tools for small businesses remains essential for recovery, alongside longer-term conditional cash assistance to enable households to re-establish income-generating activities.

Health

Health services across affected districts came under severe pressure from multiple converging threats. The Health Department warned of diarrhoea, leptospirosis, and dengue fever from contaminated water sources and flooded sanitation systems, with historical data indicating that dengue cases were likely to rise dramatically in the weeks following the cyclone as inadequate sanitation created breeding grounds for Aedes mosquitoes. Health facilities faced restricted access due to road closures and bridge failures, with shortages of essential medicines and medical supplies reported in isolated areas. Mobile medical clinics and first aid services were urgently needed to reach remote communities in Badulla, Kandy, Colombo, Gampaha, Nuwara Eliya, and Ampara, where facility access was severely disrupted.

Findings from the RMNA confirmed that these pressures persisted well into the recovery phase. Approximately 22 per cent of surveyed households reported difficulty accessing healthcare, primarily due to financial constraints, lack of transport, and damaged roads. Around 30 per cent reported at least one family member experiencing illness following the cyclone, most commonly fever, respiratory infections, skin conditions, and gastrointestinal illness patterns consistent with heightened exposure to communicable diseases associated with flooding, poor sanitation, and damaged shelter environments. Mental health and psychosocial needs were particularly acute: approximately 86 per cent of households reported some degree of psychological distress linked to displacement, loss of livelihoods, bereavement, and uncertainty, while nearly 60 per cent had not received any health-related information during or after the cyclone. Awareness of available mental health and psychosocial support services remained critically low, indicating significant unmet need for accessible, community-based psychosocial outreach.

SLRCS has reached 58,580 people through medical camps, first aid services, and psychosocial support activities, including the deployment of trained volunteers and community-based health interventions. Nevertheless, health needs remain significant due to continued risks of dengue, diarrhoeal diseases, and persistent psychosocial distress among affected populations. Many vulnerable households continue to require accessible health information, referral support, and psychosocial services.

Water, Sanitation And Hygiene

Floodwater exceeding 10 to 15 feet in low-lying areas contaminated all local drinking water sources, including pipe-borne systems. Water pipes were damaged and purification centres submerged, severely restricting access to potable water. Household wells, the primary water source across affected districts were polluted due to elevated floodwater levels, particularly near rivers and in low-lying zones. Flooded latrines and septic systems significantly increased waterborne disease transmission risks. Community clean-up operations to remove waste from canals, riverbanks, and low-lying areas were identified as an immediate priority to prevent dengue mosquito breeding in debris and stagnant water.

Findings from the RMNA confirmed that these WASH vulnerabilities persisted across affected communities. Approximately 30 per cent of surveyed households reported lacking reliable access to safe drinking water, with households relying on a mix of piped systems, dug wells, trucked water, and water supplied through safety centres, reflecting uneven restoration of services. Around 52 per cent reported damage to household toilets or latrines, limiting safe access to sanitation and increasing hygiene and dignity risks; particularly for women, girls, older persons, and persons with disabilities, with approximately one quarter of households reporting that at least one member experienced difficulty safely accessing sanitation facilities. The PDNA identified significant damage to water and sanitation infrastructure across affected districts, increasing the risk of prolonged service interruptions and waterborne disease outbreaks. Hygiene needs remain particularly acute for women and adolescent girls, with continued requirements for dignity kits and menstrual hygiene management support.

The operation has reached 516,452 people through WASH interventions, including the cleaning of 7,421 wells benefiting 55,422 people, community clean-up campaigns reaching 445,998 people, and 15,032 people through sanitary and hygiene promotion activities. Despite these achievements, WASH needs remain substantial due to damaged sanitation facilities, contamination of water sources, and ongoing risks of waterborne diseases and dengue outbreaks, particularly during the monsoon season.

Protection, Gender And Inclusion

With more than 196,790 people displaced at peak, displacement and overcrowded evacuation centres significantly increased risks of exploitation, abuse, and neglect. Limited privacy, inadequate sanitation facilities, and security concerns heightened vulnerability — particularly for women and girls facing increased risks of gender-based violence in crowded facilities. Special protection concerns arose for children, pregnant and lactating women, elderly persons, and persons with disabilities, who faced heightened health, protection, and psychosocial risks and limited ability to access services independently. Minimum standards for emergency programming identified the need for designated partitioned areas in evacuation centres, priority lanes for persons with disabilities and the elderly, adequate lighting and security in temporary shelters, and confidential reporting mechanisms for protection concerns.

Findings from the RMNA confirmed that these vulnerabilities persisted into the recovery phase. Approximately 30 per cent of surveyed households reported a lack of access to hygiene and dignity items for women and girls. Around 37 per cent reported that participation in community decision-making had worsened following the cyclone, reflecting broader social disruption and reduced inclusion in local recovery processes with particular implications for groups facing compounded vulnerabilities. Protection concerns affecting children, older persons, and persons with disabilities were reported across surveyed locations, with displacement, disrupted livelihoods, and strained household coping capacities contributing to increased protection risks. Awareness of available protection support services and referral pathways — including mechanisms related to gender-based violence, sexual exploitation and abuse remained very limited among affected households, restricting their ability to safely seek support when needed.

PGI messaging and inclusive programming have reached 516,452 people, while 720 volunteers have been trained on PGI principles and the Code of Conduct. However, protection concerns continue to affect vulnerable groups, particularly women, children, older persons, persons with disabilities, and displaced populations. Limited awareness of available protection services and referral pathways, combined with ongoing economic and social pressures, means that PGI needs remain relevant throughout the recovery period.

Migration And Displacement

Among the most acutely vulnerable were refugees and asylum seekers, primarily UNHCR-registered individuals in Colombo district who are not legally permitted to work in Sri Lanka. During the flooding, many lost their belongings as floodwater inundated their homes, and their precarious legal and economic status left them largely excluded from government assistance and formal social protection mechanisms. Without access to employment or state safety nets, these households faced complete dependence on humanitarian support to meet their most basic needs. The combination of legal restrictions, loss of belongings, and absence of alternative coping mechanisms

placed them among the most difficult to reach and most urgently requiring targeted cash and material assistance.

Findings from the RMNA further indicated that displaced populations; including migrants, refugees, and asylum seekers faced heightened barriers to information and services compared to host communities. Limited awareness of available assistance, eligibility criteria, and feedback channels compounded existing vulnerabilities, reducing the ability of these groups to advocate for their needs or access available support through standard humanitarian channels.

The operation has provided cash assistance to 156 refugee and asylum seeker households, reaching 543 people. Despite this support, refugees, asylum seekers, and other displaced populations continue to face barriers to livelihoods, information, and access to services.

Risk Reduction, Climate Adaptation And Recovery

Cyclone Ditwah exposed deep vulnerabilities in early warning dissemination and community preparedness across affected districts. Despite national-level warning systems being activated, findings from the RMNA revealed that approximately 62 per cent of surveyed households did not receive early warning messages or alerts prior to or during the cyclone — indicating significant weaknesses in last-mile dissemination and uneven reach of existing warning systems, particularly for households with limited connectivity or access to official communication channels. Among households that did receive warnings, information came through a combination of government authorities, community leaders, public announcements, media, and mobile or social media platforms, highlighting both the importance of multi-channel approaches and the gaps that remain when communities rely on any single channel.

Community preparedness levels were found to be critically low. Approximately 92 per cent of surveyed households reported feeling inadequately prepared to cope with future disasters, a finding that reflects not only the exceptional scale of Cyclone Ditwah but also the broader need for sustained investment in community-level preparedness, risk awareness, and local response capacity. Households identified strengthened early warning systems, community-level preparedness training, clear and practiced evacuation plans, and reliable access to safe shelters as the priority measures required to reduce vulnerability to future hazards. The DREF document further identified that the worst-affected hill-country and mid-country districts where landslide risk remains high, terrain is steep and fragmented, and communities are dispersed across remote valleys and ridges face particular challenges in ensuring timely warning reach and safe evacuation, underscoring the need for locally embedded, community-based risk reduction approaches alongside branch capacity strengthening.

SLRCS has strengthened preparedness capacities through the training of 90 branch staff and volunteers on disaster response and operational procedures. However, a large majority of households still feel inadequately prepared for future disasters. With recurring flood and landslide risks across many affected districts, continued investment in community preparedness, early warning dissemination, and local response capacity remains necessary.

Community Engagement And Accountability

With over 1,118,929 people affected and humanitarian assistance initially reaching only a small proportion of families, establishing transparent and community-accepted beneficiary selection criteria was identified as an essential priority from the outset. Affected households required accessible information about available support, eligibility criteria, and access means through multiple channels yet many remote communities faced significant challenges due to power outages and telecommunications disruptions. Establishing accessible feedback desks at distribution points and evacuation centres, operating community hotlines, conducting regular community meetings, and ensuring accessibility for people with disabilities were identified as critical requirements to build community trust, ensure dignity, and improve response effectiveness.

Findings from the RMNA confirmed that information and accountability gaps persisted across affected communities. Approximately 34 per cent of surveyed households reported not having been consulted about their needs, with gaps particularly acute in the health and protection sectors where access to timely, actionable information was most limited. Approximately 49 per cent of households indicated a preference for direct engagement through phone calls, in-person communication, SMS, and mobile-based messaging platforms, underscoring the importance of maintaining accessible, two-way communication channels throughout the recovery phase.

Through integrated CEA activities, the operation has reached 516,452 people, trained 720 volunteers, and responded to 978 complaints and feedback cases through hotline and community feedback mechanisms. While strong accountability systems have been established, assessment findings continue to show information gaps and unmet expectations among affected populations. Ongoing communication, feedback management, and community engagement remain critical to ensuring affected communities are informed and able to influence recovery efforts.

Any identified gaps/limitations in the assessment

The Rapid Multisectoral Needs Assessment faced significant access and logistical constraints in the immediate aftermath of the cyclone. At least 206 major roads were blocked or damaged and 10 bridges destroyed, rendering large parts of the operational area impassable for assessment teams. In the most severely affected hill-country districts; Badulla, Kandy, Nuwara Eliya, Kegalle, and Matale communities remained entirely cut off by flooding or landslides, requiring boats, all-terrain vehicles, and alternative local arrangements to reach. Telecommunication disruptions and power outages further compounded access challenges and delayed data collection.

As a result, initial assessment findings, particularly from remote and landslide-affected communities should be interpreted with caution. Casualty figures and damage assessments were likely understated in the early phase, with data progressively revised upward as access improved and District Secretaries consolidated verified information. Vulnerable groups including elderly persons, persons with disabilities, and pregnant women may not have been fully captured in initial data given the constraints on safe and timely access.

Operational Strategy

Overall objective of the operation

This operation aims to provide immediate life-saving assistance and early recovery support to restore the well-being, dignity and resilience of displaced and affected populations for approximately 268,180 people affected across 20 districts by Cyclone Ditwah and the associated floods, landslides and severe weather conditions, by providing emergency shelter and essential household items, cash assistance, water and sanitation services, emergency health care, and community engagement and protection services and ensuring protection of vulnerable groups, restoration of household dignity, and strengthened community and branch capacity over a nine-month operation period.

The operation focuses on the 20 most severely affected districts, which account for approximately 90 per cent of the total affected population and experience the highest concentration of casualties, displacement, and infrastructure damage. These districts are Puttalam, Gampaha, Colombo, Kandy, Mannar, Kurunegala, Ampara, Batticaloa, Trincomalee, Anuradhapura, Kegalle, Badulla, Jaffna, Kilinochchi, Mullaitivu, Polonnaruwa, Vavuniya, Nuwara Eliya, Rathnapura, and Matale.

This nine-month DREF operation is part of the overall Revised Operational Strategy of the ongoing 18-month EA (MDRLK023-Tropical Cyclone Ditwah), to kick-off emergency response as part of the overall intervention being implemented by SLRCS. The activities supported under this IFRC-DREF is complemented by the EA.

During the reporting period, SLRCS with support from the IFRC-DREF assisted a total of 516,452 people (highest number of people reached through DREF) comprising 182,149 adult males, 68,501 boys, 189,280 adult females, and 76,522 girls across 20 districts affected by Cyclone Ditwah through the provision of essential household items, multipurpose cash assistance, health services, water, sanitation and hygiene interventions, psychosocial support, and protection and community engagement activities.

Operation strategy rationale

OVERALL APPROACH

In response to the devastating Cyclone Ditwah that struck Sri Lanka on 28 November 2025, the operational strategy for the DREF-supported humanitarian response centres on delivering timely, life-saving, and inclusive assistance to people across 20 of the most severely affected districts through its priority sectors, with notable achievements in the distribution of essential household items, multipurpose cash assistance, well cleaning and hygiene promotion, and emergency health services. The operation remains ongoing and is expected to conclude on 30 September 2026.

This DREF operation prioritises the most severely affected and vulnerable households across 20 districts, focusing on two main groups: families displaced from their homes due to flooding, landslides, and structural damage who require immediate essential household items and cash support; and communities with contaminated water sources, damaged sanitation facilities, and disrupted health access who require urgent WASH and health interventions. Targeted districts were identified using secondary data from the Disaster Management Centre, rapid assessments conducted by SLRCS branches, and coordination with district and divisional authorities. The 20 districts; Ampara, Anuradhapura, Badulla, Batticaloa, Colombo, Gampaha, Jaffna, Kandy, Kegalle, Kilinochchi, Kurunegala, Mannar, Matale, Mullaitivu, Nuwara Eliya, Polonnaruwa, Puttalam, Rathnapura, Trincomalee, and Vavuniya account for approximately 90 per cent of the total affected population and the highest concentration of casualties, displacement, and infrastructure damage. Beneficiary selection

follows SLRCS's systematic, community-based process involving rapid needs assessments, coordination with Grama Niladhari officers and Divisional Secretariats, and participatory validation through community engagement. Special attention is given to vulnerable groups including women-headed households, elderly persons, persons with disabilities, families with young children, refugees and asylum seekers, and households whose livelihoods have been severely disrupted by the cyclone.

1. Key components of the response include the distribution of essential household items to 5,000 families, providing each family with a standardised NFI kit containing bed sheets, towels, sarongs, kaftans, kitchen sets, adult and baby kits, solar lamps, and folding mattresses to help restore basic living conditions for displaced households returning home or in temporary arrangements.

2. Multipurpose cash assistance is being provided to 2,500 households, giving families the flexibility to address their most urgent needs based on their individual circumstances. Each household has received LKR 27,000 (CHF 72.97) as the first cash transfer, representing 60 per cent of the Minimum Expenditure Basket (MEB), with a second tranche of LKR 27,000 planned for distribution in June 2026. Cash assistance has also been extended to 156 refugee and asylum seeker households in Colombo district, delivered directly in envelopes in coordination with UNHCR given that most beneficiaries lack bank accounts or formal identification documents.

While the first tranche of cash assistance has been completed, the planned second tranche for 2,656 households, comprising 2,500 DREF-supported households and 156 refugee and asylum seeker households, remains pending. The reallocated funds generated through savings across other budget lines, resulting from lower-than-expected procurement costs, operational efficiencies, and complementary partner contributions, will be used to implement this second cash transfer. These resources will ensure continuity of assistance and support affected households in addressing ongoing recovery needs during the next phase of the operation.

3. WASH interventions are focused on restoring safe water access through the cleaning of 7,421 household and community wells reaching 55,422 people and 358 community clean-up campaigns targeting schools, public spaces, shelters, and affected neighbourhoods, reaching 445,998 people. These activities are significantly reducing the risk of waterborne and vector-borne disease outbreaks in flood-affected communities.

4. Health services are being provided through 95 medical camps and 158 first aid events, reaching 56,870 people across targeted districts, in close coordination with Medical Officers of Health and Public Health Inspectors. Psychosocial support has been provided to 1,710 people by 570 volunteers trained on PSS refresher across 19 training events, helping affected individuals cope with the trauma of displacement, loss of livelihoods, and bereavement.

5. Protection, Gender and Inclusion (PGI) standards continue to be integrated throughout the response, with refresher training conducted for 720 volunteers on PGI principles and the Code of Conduct, and PSEA and SEA prevention messages displayed at all distribution points and safety centres. Sex, age, and disability disaggregated data is systematically collected across all operational activities to ensure inclusive targeting and better understanding of the differentiated needs of affected populations.

6. Community Engagement and Accountability (CEA) continues to be incorporated at every stage of the operation from planning and implementation to monitoring ensuring that affected people have access to timely information, feedback mechanisms, and transparent beneficiary selection processes. The SLRCS hotline has received over 1,600 calls to date, achieving a 95 per cent complaint resolution rate within one week, demonstrating strong accountability to affected communities throughout the response.

By grounding the intervention in data-driven targeting, inclusive planning, and participatory methods, this operational strategy linked with National Action Plan aims to deliver equitable and dignified support that addresses the most urgent needs of communities affected by Cyclone Ditwah, while strengthening SLRCS branch capacity and laying the groundwork for longer-term recovery.

Targeting Strategy

Who will be targeted through this operation?

Over the six-month operational period, the SLRCS targeted approximately 268,180 people across the most severely affected districts impacted by Cyclone Ditwah. The operation prioritizes displaced populations residing in safety centres or with host families, households returning to damaged homes, and communities facing significant livelihood losses and deteriorating living conditions. Assistance is focused on vulnerable groups including daily wage earners, smallholder farmers, fishing communities, refugees and asylum seekers, LGBTQ individuals, women-headed households, older persons, people with disabilities, pregnant and lactating women, and households with infants and young children.

Particular attention was also be given to vulnerable rural and estate-sector communities in the most affected districts. Through a

vulnerability-based targeting approach, the operation will ensure that individuals and households with the greatest needs and the least capacity to recover independently receive timely, dignified, and inclusive assistance throughout the response period.

Explain the selection criteria for the targeted population

The selection criteria were based on the severity of impact, pre-existing vulnerabilities, and households' capacity to recover, using a combination of data from the Disaster Management Centre (DMC), the SLRCS Rapid Multisectoral Needs Assessment (RMNA), government assessments, and community-level validation. Targeting focused on the most affected Divisional Secretariat (DS) and Grama Niladhari (GN) divisions across the 20 targeted districts. Priority was given to households whose homes were destroyed or damaged, families displaced in safety centres or staying with relatives, and those experiencing significant livelihood losses due to flooded agricultural land, damaged fishing assets, disrupted businesses, and loss of income sources. Communities facing critical WASH and health risks, including contaminated water sources and damaged sanitation facilities, were also prioritized.

Within the affected population, assistance was targeted towards households facing acute income loss and immediate basic needs with limited savings, resources, or social protection mechanisms. Daily wage earners, smallholder farmers, fishers, and informal workers were prioritized for cash assistance due to the severe disruption of their livelihoods and increased risk of food insecurity and negative coping strategies. Displaced families with destroyed or heavily damaged homes were prioritized for shelter and essential household item support, while communities with contaminated wells, damaged water systems, and flooded sanitation facilities were prioritized for WASH interventions to reduce the risk of waterborne diseases and dengue outbreaks.

Additional vulnerability criteria were applied to ensure inclusive and equitable assistance. Priority was given to women-headed households, older persons, persons with disabilities, pregnant and lactating women, and households with infants and young children, recognizing their heightened health, protection, and recovery needs. Estate sector communities were included due to chronic poverty and limited access to services, while refugees and asylum seekers were prioritized because of their limited livelihood opportunities and exclusion from government safety nets. The operation also sought to reach LGBTQ community members who may face discrimination and barriers to accessing support. Beneficiary identification and verification were conducted through community consultations, household assessments, coordination with local authorities, and SLRCS validation processes to ensure assistance reached those with the greatest humanitarian needs and the least capacity to recover independently.

Total Targeted Population

Women	**118,536**	Rural	**2%**
Girls (under 18)	**20,917**	Urban	**1%**
Men	**109,418**	People with disabilities (estimated)	**3%**
Boys (under 18)	**19,309**		
Total targeted population	268,180		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	**No**
Does your National Society have prevention of sexual exploitation and abuse policy?	**Yes**

Does your National Society have child protection/child safeguarding policy?	**Yes**
Does your National Society have whistleblower protection policy?	**Yes**
Does your National Society have anti-sexual harassment policy?	**Yes**

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
Transport delay: delivery of essential household items may be delayed, as major roads and bridges have been damaged and cut off.	- Alternative routes (longer routes) were used to reach the target areas - Road Development Authority set up temporary bridges and filled up the damaged roads to restore connectivity.
Inadequate HR and Technical capacity at the branches	- NS has deployed NDRT and BDRT to the branches that experience limited capacity - 5 Surge members were mobilised to support the key technical areas – operations, assessment, Information Management, CVA, and PMER - Refresher trainings were conducted across targeted branches
Delay in financial settlement from the branches	-Volunteers and branch teams would be trained on IFRC financial settlement procedures. -Close follow-up on accounts and settlements was maintained with branches that had limited capacity to ensure timely compliance. -Strong commitment from SLRCS senior leadership and management has contributed to strengthening internal financial procedures and practices, including increasing personnel capacity to facilitate the timely submission of financial documentation, faster processing of settlements, and improved compliance with donor requirements.

Please indicate any security and safety concerns for this operation:

As the operation transitions into the recovery phase, the operating environment remains complex. With the southwest monsoon season now underway (May–September 2026), there is an elevated risk of renewed flooding and secondary landslides across the worst-affected hill-country districts, particularly in Badulla, Kandy, Kegalle, Nuwara Eliya, and Matale where terrain instability persists and many communities remain in temporary or partially damaged shelter arrangements. These conditions continue to pose risks of accidents, entrapment, and disrupted access for field teams travelling to isolated GN divisions, and may renew displacement among households that have not yet found durable solutions.

Health and safety risks remain present for field teams and communities, particularly around waterborne and vector-borne disease exposure. While SLRCS has cleaned over 7,421 wells across affected districts, risks of leptospirosis, dengue, and diarrheal disease persist in areas where sanitation infrastructure has not yet been fully restored, and as stagnant water from the approaching monsoon creates new breeding grounds for disease vectors.

Localised security pressures continue around cash assistance distribution, particularly as the second tranche of MPCA is prepared for disbursement in June 2026. If transfers are perceived as delayed or inequitable, there remains a risk of community tensions, complaints, or disputes at distribution points particularly in densely populated urban and peri-urban areas. The multi-layered beneficiary verification process and active feedback hotlines maintained by SLRCS serve as key risk mitigation measures in this regard.

To manage these risks, the CCD Security team continues to implement security measures including continuous situation monitoring, timely security and safety updates, tracking of staff movements via phone and WhatsApp, security assessments in operational areas, and pre-deployment briefings on the current security context. Completion of relevant IFRC e-learning courses including Basic Knowledge and Prevention Measures for Responders, Personal Security, Security Management, and Volunteer Security remains required for all deployed personnel. The IFRC Regional Office security team maintains close coordination with SLRCS branches, local authorities, and external humanitarian actors, and participated regularly in Humanitarian Country Team meetings where safety and security matters are discussed.

Has the child safeguarding risk analysis assessment been completed?	**Yes**

Planned Intervention

Shelter Housing And Settlements

Budget: CHF 105,664
Targeted Persons: 25,000
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of households provided with essential household items assistance	5,000	5,000

Progress Towards Outcome

List of Activities:

1. Conduct an assessment of the severely affected GN division.
2. Implement a community feedback mechanism to ensure the community voices are heard and addressed.

3. Verify the final recipients list through the community and government officers.
4. Procure the household items as per the IFRC/SLRCS procurement guidelines.
5. Distribute the emergency shelter and essential household items to the selected individuals.
6. Conduct the PDM survey, and identify findings, and recommendations.

Progress:

To address identified shelter and household item needs, SLRCS conducted detailed assessments and beneficiary verification across all 20 targeted districts. Standardized Shelter NFI kits designed for a family of five included bed sheets, towels, sarongs, kaftans, kitchen sets, adult and baby kits, solar lamps, and folding mattresses. The kits were designed on the basis of the initial assessment and contextual needs of the affected areas. Relief items were distributed across all 20 districts: Ampara, Anuradhapura, Badulla, Batticaloa, Colombo, Gampaha, Jaffna, Kandy, Kegalle, Kilinochchi, Kurunegala, Mannar, Matale, Mullaitivu, Nuwara Eliya, Polonnaruwa, Puttalam, Rathnapura, Trincomalee, and Vavuniya. Through the support of the EA, including the DREF allocation, SLRCS distributed essential household items to 7,218 households in total, of these, 5,000 households were reached through DREF funding.

Under this DREF operation, SLRCS reached 5,000 households, or 21,000 people (an average of 4.2 household members counted based on the RMNA findings), comprising 5,902 adult males, 3,965 boys, 7,281 adult females, and 3,852 girls.

Overall, the shelter intervention demonstrated SLRCS's commitment to restoring the dignity and well-being of affected families while ensuring that assistance was delivered in a risk-informed, inclusive, and accountable manner. The operation provided immediate relief to some of the most vulnerable families displaced by Cyclone Ditwah, while laying a foundation for longer-term recovery as households begin the process of rebuilding their homes and livelihoods.

A post-distribution monitoring (PDM) exercise is planned, and findings will inform the lessons learned workshop and will be reflected in the final DREF report.

Multi Purpose Cash

Budget: CHF 375,648
Targeted Persons: 12,500
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of targeted households provided with cash assistance	2,500	2,500

Progress Towards Outcome

List of Activities:

1. Conduct a detailed assessment and recipients verification in the targeted districts.
2. Implement a community feedback mechanism to ensure community voices are heard and addressed.
3. Collect all supporting documents and verify the Financial Service Provider (FSP).
4. Provide unconditional cash grants to the targeted households in the identified districts.
5. Conduct monitoring visits to confirm the delivery of cash.
6. Conduct post-distribution monitoring to assess the effectiveness of the cash grant distribution.

Progress:

Under this DREF operation, SLRCS with IFRC Secretariat support, reached a total of 2,500 households, covering 10,500 people (4,390 males and 6,110 females) through MPCA.

SLRCS conducted household assessments across 12 districts to identify eligible families whose livelihoods and assets had been severely

disrupted. The Cash Working Group (CWG) revised the recommended cash transfer value from LKR 20,000 (CHF 54) to LKR 27,000 (CHF 72.97) per household in late December to reflect rising inflation and increased household needs. Each household received LKR 27,000 (CHF 72.97) as the first cash transfer, representing 60 per cent of the Minimum Expenditure Basket (MEB) enabling families to prioritize their most urgent needs including food, essential household items, and home cleaning and repair.

Beneficiary selection followed a comprehensive multi-layered verification process: local Grama Niladhari officers compiled and verified initial lists of affected households, which were subsequently reviewed by Divisional Secretariats and district authorities. SLRCS branches further validated the lists against vulnerability and eligibility criteria, with NHQ conducting direct phone verification with each household before final approval. This process ensured that assistance reached those most in need while maintaining transparency and accountability to affected communities. Beneficiary selection criteria were shared openly with communities and local authorities, and beneficiaries were informed of the transfer arrangements and contacted to confirm receipt.

Cash transfers were delivered through Sampath Bank as the Financial Service Provider, with transfers made directly to beneficiaries' bank accounts. In Colombo, Kandy, and Puttalam districts, SLRCS piloted the Digital 121 platform to improve efficiency of cash delivery, processing 1,733 transfers to date. The remaining transfers were done through existing MPCA procedure.

SLRCS is preparing to distribute the second cash transfer of LKR 27,000 (CHF 72.97) in June 2026. The estimated savings identified within the operation would be reallocated to support the implementation of the second tranche of MPCA for 2,656 households, comprising 2,500 DREF-supported households under MPCA and 156 refugee and asylum seeker households under Migration. As the MPCA transfer value was revised from LKR 20,000 to LKR 27,000 per household, the funding required to cover this increase will be met through the reallocation of savings within the operation and exchange gain, ensuring the full implementation of the second tranche as originally planned under the Emergency Appeal activities.

Community feedback mechanisms were maintained throughout the distribution process, with beneficiaries encouraged to raise concerns or complaints through SLRCS hotlines and branch focal points. Beneficiary selection criteria were shared transparently with communities and local authorities to build trust and acceptance of the assistance. The SLRCS hotline received over 1,600 calls related to cash assistance, including inquiries on payment status, transfer delays, second-tranche distributions, and beneficiary eligibility.

A PDM exercise is planned following completion of the second tranche of MPCA distributions, expected by July 2026.

Health

Budget: CHF 31,465
Targeted Persons: 50,000
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of people supported with medical points/camps	25,000	23,295
Number of people supported with First Aid services	25,000	33,575
Number of Volunteers trained on PSS Refresher	600	570

Progress Towards Outcome

List of Activities:

1. Procure or replenish basic items for first aid services.
2. Establish medical camps per district with essential first-aid services to provide additional health assistance to affected communities.
3. Mobilize volunteers and provide incentives.
4. Coordinate with the Medical Officer of Health and Public Health officers for inspection and approval.

Progress:

During the reporting period, SLRCS with IFRC Secretariat support reached 58,580 people including 19,334 adult males, 9,588 boys, 19,884 adult females, and 9,774 girls through direct health services across targeted districts.

As part of its commitment to addressing immediate and recovery health needs of cyclone-affected communities, SLRCS deployed trained volunteers and health teams to deliver first aid and medical services in areas where health facility access had been severely disrupted by floods and landslides. Through 95 medical camps, 23,295 people (7,880 males, 3,656 boys, 8,021 females and 3,738 girls) received healthcare support, including consultation, treatment, and referral services.

Through 158 first aid events, a further 33,575 people (11,356 males, 5,270 boys, 11,561 females and 5,388 girls) received emergency first aid. All medical camps and first aid events were organized in close coordination with Medical Officers of Health and Public Health Inspectors to ensure quality and compliance with national health standards. Basic first aid supplies were procured and replenished to strengthen volunteer response capacities throughout the operation. The government health agencies were providing primary health services, and SLRCS delivered complementary services without duplication. These SLRCS-led health services have now concluded.

As part of its efforts to address the psychosocial impacts of the disaster, SLRCS conducted 19 Psychosocial Support Services (PSS) refresher training events, with 570 volunteers (315 males, 255 females) completing the training. These trained volunteers subsequently provided psychosocial support services to 1,710 (98 male, 302 female, 662 boys and 648 girls) people including children affected by displacement, loss, and trauma. As the government deployed medically trained teams to provide MHPSS services, the majority of people in Safety Centres were reached through this initiative. SLRCS complemented these efforts by reaching the remaining individuals and remains prepared to provide additional support as needed.

To sustain and scale up this capacity, SLRCS developed and printed a PSS Training of Trainers (ToT) manual to standardize training content and support future rollout of psychosocial support initiatives across branches.

Water, Sanitation And Hygiene

Budget: CHF 200,972
Targeted Persons: 180,000
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of people reached through cleaned/rehabilitated water facilities	50,000	55,422
Number of people reached through clean-up campaigns	100,000	445,998
Number of adolescent girls and women reached through menstrual hygiene distribution and promotion activities	20,000	4,000
Number of people reached with hygiene promotion activities	10,000	11,032

Progress Towards Outcome

List of Activities:

1. Printing the Well Cleaning Manual and distributing it to the branches.
2. Procurement of service provider – well cleaning and related costs.

3. Deployment of technical support for WASH activities.
4. Conduct clean-up campaigns, including disinfection and cleaning activities (e.g., public places, houses, schools, & safety centres).
5. Transportation and distribution of well-cleaning items
6. Procurement and distribution of sanitary napkins
7. Hygiene promotion campaigns.
8. Procurement and distribution of Gumboots and raincoats.

Progress:

During the reporting period, SLRCS with IFRC Secretariat support reached 516,452 people including 182,149 adult males, 68,501 boys, 189,280 adult females, and 76,522 girls through WASH activities across targeted districts.

SLRCS prioritized the cleaning and rehabilitation of household and community wells, the primary drinking water source across affected districts which had been contaminated by floodwaters. Using the OXFAM well cleaning manual as a standard guide and working in close coordination with Public Health Inspectors and third-party service providers, SLRCS cleaned 7,421 dug and community wells across targeted districts, restoring safe water access to 55,422 people (27,469 male and 27,953 female). Well cleaning guides were produced and disseminated to all branches to standardize procedures and maintain quality across districts.

To reduce disease risk and support the return of displaced families to their communities, SLRCS organized 358 community clean-up campaigns in schools, public spaces, shelters, and affected neighbourhoods, reaching 445,998 people (217,804 males, 228,194 females). These campaigns focused on removing waste and stagnant water to eliminate dengue mosquito breeding sites and reduce environmental contamination. In response to the extensive destruction caused by Cyclone Ditwah and to reduce the risk of disease, a nationwide clean-up approach was implemented, with district-level campaigns coordinated closely with local health authorities and community leaders to ensure comprehensive coverage of the most affected areas.

The scale of participation and impact significantly exceeded the original DREF target of 100,000 people, reflecting both the severity of the cyclone's damage and the strong engagement of local communities in restoring safe and hygienic environments. Similarly, the people reached under each indicator are distinct individuals, as different people participated in each activity. Therefore, the totals for separate indicators are added together to represent the overall reach across the operation, ensuring all participants are captured without overlap within the same activity.

To address the hygiene and dignity needs of women and girls, 4,000 sanitary napkins were distributed to adolescent girls and women in safety centres across targeted districts. A total of 11,032 people (5,377 male, 5,655 female) participated in hygiene promotion activities. Total 1,700 pairs of gumboots and raincoats were also procured and distributed to 720 trained volunteers to equip volunteers engaged in field operations and clean-up activities.

Protection, Gender And Inclusion

Budget: CHF 0
Targeted Persons: 268,180
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of individuals reached through dignity, access, and protection activities	268,180	516,452
Number of volunteers oriented or refreshed on PGI and Code of Conduct	550	720

Progress Towards Outcome

List of Activities:

1. Conduct refresher sessions on PGI and the code of conduct for volunteers.
2. Print and prominently display Protection from Sexual Exploitation and Abuse (PSEA) and Sexual Exploitation and Abuse (SEA) prevention messages at distribution and safe centres.

Progress:

During the reporting period, SLRCS with IFRC Secretariat support reached 516,452 people through PGI awareness and engagement activities mainstreamed across all sectoral interventions, and trained 720 volunteers (420 males, 300 females) on PGI principles and the Code of Conduct. This represents the highest number of people reached across all sectors, with PGI fully integrated into the response, and the results have been systematically documented and reported, ensuring these individuals are counted as part of the integrated multi-sectoral assistance rather than as separate beneficiaries.

As part of its commitment to ensuring safe, dignified, and equitable access to assistance for all affected people, SLRCS mainstreamed PGI considerations across all aspects of the response. Refresher sessions on PGI principles and the Code of Conduct were conducted for volunteers from all 25 branches to strengthen awareness of protection risks and reinforce safe and accountable humanitarian practices. Messages on Protection from Sexual Exploitation and Abuse (PSEA) and Sexual Exploitation and Abuse (SEA) prevention were printed and prominently displayed at all distribution points and safety centres to improve community awareness of safeguarding commitments. Similarly, sanitary pads were distributed to adolescent girls and women in safety centres across targeted districts for maintaining hygiene and dignity needs of women and girls.

Sex, age, and disability disaggregated (SADD) data was systematically collected across all operational activities to improve understanding of the different needs and vulnerabilities of affected people and support more inclusive targeting of assistance. Safety audits were conducted in safety centres to identify protection risks and gaps for vulnerable groups including women, children, older persons, and persons with disabilities, with findings used to inform follow-up actions. SLRCS shared the findings of safety audits with district government authorities, recommending measures to improve safety, verbal referrals, accessibility, privacy, and inclusion within collective settings. The formal feedback pathway, including a hotline and email address, would be implemented in June, and would be documented in the final report. The Child Safeguarding and Risk Assessment (CSRA) have been completed with reports shared.

PGI messages were integrated into health, WASH, cash assistance, community clean-up campaigns, and other community engagement activities, reaching 516,452 people across targeted districts. As PGI was mainstreamed within sectoral activities, this figure does not represent additional beneficiaries beyond those already counted in other sectors.

Migration And Displacement

Budget: CHF 22,713
Targeted Persons: 680
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of migrant households assisted with cash support	156	156

Progress Towards Outcome

List of Activities:

1. Conduct assessment with the appropriate selection criteria.
2. Distribute cash in envelopes to the selected migrant households.

Progress:

During the reporting period, SLRCS with IFRC Secretariat support provided cash assistance to 156 refugee and asylum seeker households reaching 543 people, including 204 adult males, 82 boys, 156 adult females, and 82 girls in Colombo district. The second tranche for 156 refugee and asylum seeker households is planned for July 2026.

SLRCS conducted a rapid needs assessment to identify affected refugee and asylum seeker households based on agreed eligibility criteria. All beneficiaries were UNHCR-registered individuals who are not legally permitted to work in Sri Lanka, leaving them entirely dependent on humanitarian assistance to meet their basic needs following the loss of their belongings in the flooding. Eligibility was verified in coordination with UNHCR. As most beneficiaries lacked bank accounts or formal identification documents, SLRCS distributed cash directly in envelopes to ensure safe and dignified access to assistance.

Risk Reduction, Climate Adaptation And Recovery

Budget: CHF 20,222
Targeted Persons: 550
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of volunteers trained and included in the pool of BDRT team	300	90
Number of staff trained on DREF guidelines and familiar with standard procedures	550	0

Progress Towards Outcome

List of Activities:

1. Conduct BDRT refresher training for the volunteers to strengthen volunteer capacity and enhance volunteer retention
2. Conduct refresher and awareness sessions for the branch staff, including accounts staff, to ensure the timely settlement and follow-up the IFRC-DREF guidelines during the emergency operation

Progress:

SLRCS conducted three BDRT refresher training events in Vavuniya, Rathnapura, and Kandy, training 90 branch staff and volunteers (49 males, 41 females) including finance and accounts personnel to strengthen branch and community capacity to respond and provide support to people affected. Each event trained 30 participants on disaster response procedures and IFRC operational and financial systems, helping branches better manage emergency response activities and meet reporting requirements. These trainings strengthened branch-level preparedness and response management capacities at a time when branches were simultaneously managing active relief operations across affected districts.

Training of staff on DREF guidelines and standard procedures has been planned for June 2026. Recovery-phase activities including BDRT training for newly selected volunteers.

Community Engagement And Accountability

Budget: CHF 13,211
Targeted Persons: 268,180
Targeted Male: -

Targeted Female: -

Indicators

Title	Target	Actual
Number of people reached with CEA initiatives	268,180	516,452
Number of volunteers trained on CEA for emergency response	550	720
Number of feedback and complaints received and responded to by SLRCS	650	978

Progress Towards Outcome

List of Activities:

1. Conduct refresher sessions and orientation on CEA for volunteers and staff.
2. Activate a feedback mechanism to receive and address grievances from communities.
3. Share the selection criteria with the community during community meetings.
4. Strengthen the feedback mechanism through hotline services.
5. Set up a community desk at Grama Niladhari (GN) offices during community meetings.
6. Design and print the IEC materials and distribute them during the meetings and community consultation

Progress:

SLRCS ensures that its emergency operations are aligned with its CEA guidelines, which includes processes and informal feedback mechanisms that were incorporated into SLRCS's activities to ensure community involvement and direct access to information that was comprehensive and inclusive.

During the reporting period, SLRCS with IFRC Secretariat support reached 516,452 people through CEA activities integrated across all sectors, representing the highest number of people reached across all sectors, with CEA fully incorporated into the response, trained 720 volunteers on CEA, and received and responded to 978 feedback and complaints.

SLRCS established and maintained robust community engagement and feedback mechanisms throughout the response. Refresher training on the IFRC CEA toolkit was conducted for 50 volunteers from all 25 branches, and a Training of Trainers session was held for 30 volunteers to build local capacity for ongoing community engagement. Among the 767 insured volunteers, 720 were also briefed on CEA principles during BDRT training.

SLRCS operated dedicated hotlines (+94 0703788653 and +94 0703788654) alongside email, in-person channels, and the official SLRCS website to provide accessible channels for communities to ask questions, raise concerns, and submit complaints. The hotlines received over 1,600 calls of which 978 were feedback and complaints all acknowledged immediately, responded to within one week. The majority of inquiries related to cash assistance, with complaints on delay of cash transfer, covering payment status, inquiry on transfer timelines, and beneficiary eligibility. Feedback and complaints regarding cash transfer delays were taken into account. In response to that, Digital 121 cash transfer platform was incorporated into programme design and decision-making. Each cash recipient was assigned a unique household code to enable seamless tracking and follow-up of complaints. Community members and selected recipients were regularly involved in the process of recipient selection, verification, distribution and post-distribution. CEA messages and information on available assistance, selection criteria, and transfer processes were shared with communities across all sectors, reaching 201,025 people. As CEA was mainstreamed within sectoral activities, this figure does not represent additional people reached beyond those counted in other sectors.

Beyond meeting immediate needs, the approach strengthens trust, promotes transparency, and reinforces community solidarity. By ensuring that communities are informed, consulted, and able to provide feedback, the intervention contributes not only to immediate relief but also to stronger community resilience against hazards; contributes not only to immediate relief but also to stronger community resilience against hazards.

Coordination And Partnerships

Budget: CHF 20,825
Targeted Persons: 0
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of communication materials produced (e.g., social media posts, media articles, interviews)	40	150
Number of volunteers equipped with visibility items (T-shirts, caps, jackets)	1,000	767

Progress Towards Outcome

List of Activities:

1. Conduct monitoring visits to identify gaps and good practices in the targeted districts.
2. Share and update interventions based on monitoring findings.
3. Collect and publish case stories, and produce video footage to highlight impact and success stories.
4. Procure jackets and t-shirts for staff and volunteers to create visibility for the intervention.
5. Share news updates and publish articles in newspapers to raise awareness and communicate achievements.

Progress:

A diplomatic briefing was held in mid-January 2026 to present the findings of the RMNA to external stakeholders, including representatives from UN agencies, embassies, and government authorities. During the same period, the third partners' call was convened to update partners on the revised operational strategy and share RMNA findings from late December 2025 and early January 2026. Both events were led by SLRCS with technical support from IFRC. Following the initial diplomatic engagement, a field visit was planned for May 2026 to further strengthen stakeholder engagement; however, due to the unexpected unavailability (illness) of SLRCS management, the visit has been rescheduled for September 2026.

SLRCS have participated on around 30 meetings including all the sectors and continues to actively participate in national and cluster coordination meetings, providing updates on support to affected communities and coordinating closely with government authorities, UN agencies, and humanitarian partners. The IFRC co-leads the Shelter, Essential Household Items, and Camp Coordination and Camp Management (CCCM) clusters, offering technical guidance and support to partner organizations. To enhance operational coordination, surge personnel, including a Shelter Cluster Coordinator and Information Management Coordinator, have been deployed, while the Shelter, Land and Site Coordination (SLSC) sector is co-led alongside IOM. SLRCS and IFRC representatives also participate in Humanitarian Country Team (HCT) meetings to ensure alignment with broader humanitarian priorities.

At the operational level, SLRCS headquarters coordinates closely with local branches, which in turn work with government authorities and other stakeholders to support smooth implementation. Since the onset of the operation, IFRC has maintained close collaboration with the International Committee of the Red Cross (ICRC) through three tripartite meetings, enabling joint efforts such as the provision of Restoring Family Links (RFL) services to affected populations. In addition, a surge Communications Coordinator has supported operational communications and visibility across all activities.

Communications activities throughout the operation included developing and sharing videos, photos, podcasts, stories, and social media content through IFRC and SLRCS platforms to raise visibility of the response at national and international levels. Volunteers received training on humanitarian photography, ethical standards, and video editing to strengthen in-house communications capacity. Visibility items including 1,150 t-shirts, 500 jackets, and 1,150 caps were produced and distributed to 767 volunteers to ensure SLRCS and IFRC branding was maintained visibly across all field operations.

Secretariat Services

Budget: CHF 79,352
Targeted Persons: 0
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual
Number of surge personnel deployed to support the operation	4	5
Number of monitoring visits conducted by IFRC	20	7

Progress Towards Outcome

List of Activities:

1. Identify the need for surge support based on ongoing assessments and needs.
2. Deploy surge support personnel to swift response efforts.
3. Conduct monitoring visits to affected districts to oversee the implementation of activities.
4. Conduct and participate in coordination meetings and brief government stakeholders on operational strategy.

Progress:

During the reporting period, IFRC Secretariat deployed 5 surge personnel under the DREF and conducted 7 events of monitoring visits covering 18 out of 20 targeted districts.

The IFRC deployed surge personnel across critical operational areas. Under the DREF operation, four surge profiles were deployed; Operations Manager, PMER Coordinator, Information Management Coordinator, Communication Coordinator and Assessment Coordinator providing direct technical and management support to SLRCS throughout the response.

IFRC conducted monitoring visits across 18 out of 20 targeted districts, providing operational oversight and identifying gaps and good practices to inform adjustments to the response strategy. The number of monitoring visits recorded at 7 reflects broader monitoring coverage across 18 districts was achieved through combined DREF and Emergency Appeal monitoring activities. The IFRC CCD in Delhi continued to provide technical support to the Sri Lanka team throughout the operation, including procurement support for local procurement activities and guidance on financial management and compliance.

National Society Strengthening

Budget: CHF 129,926
Targeted Persons: 0
Targeted Male: -
Targeted Female: -

Indicators

Title	Target	Actual

Number of lessons learned workshop conducted	1	0
Number of volunteers involved in the operation insured	1,000	767

Progress Towards Outcome

List of Activities:

1. Recruit and deploy all local operation-based surge staff at NHQ and branch levels.
2. Ensure all staff and volunteers are insured, and that protection is ensured throughout the operation.
3. Conduct assessments based on the situation and needs analysis.
4. Conduct monitoring by branches, NHQ, and IFRC.
5. Conduct progress review meetings at the NHQ level.
6. Conduct a lessons learned workshop to capture insights and improvements.
7. Produce case stories and news and share good practices to highlight successes and promote learning.

Progress:

This DREF operation mobilized and insured 767 volunteers (502 males, 265 females) to support response activities across all 20 targeted districts. SLRCS National Headquarters facilitated comprehensive orientations for staff and volunteers across all 20 affected districts, informing them of planned activities and their respective roles and responsibilities in supporting affected communities. Throughout the operation, volunteers demonstrated strong commitment to the Fundamental Principles of the Red Cross particularly voluntary service ensuring assistance was delivered fairly, safely, and respectfully, always prioritising the dignity and needs of affected people. Insurance coverage was provided to all mobilised volunteers to ensure their protection throughout the operation.

Due to flood damage affecting the Mannar, Nuwara Eliya, and Polonnaruwa branches, SLRCS has initiated a plan to renovate and repair these branch facilities to restore full operational capacity. A lessons learned workshop has not yet been conducted during the reporting period and is planned for the next phase of the operation, where findings and good practices from the response will be documented and shared to strengthen SLRCS's institutional learning and future preparedness and response capacities.

SLRCS, with support from the IFRC, will be organizing a Lessons Learned Workshops by the month of August, prior to the conclusion of the DREFs under the wider MDRLK023 operations. The findings and reflections from these LLWs will then be integrated into future reporting and will be utilized to refine strategies, strengthen the implementation, and inform the early recovery to longer-term interventions under this operation.

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

A total of 767 volunteers (502 males, 265 females) have been mobilised and insured across all 20 targeted districts to support the implementation of this operation. Branch Executive Officers take key responsibilities for the implementation and oversight of DREF activities at the branch level, ensuring that planned interventions are carried out effectively and in line with IFRC standards.

SLRCS has deployed NDRT and BDRT members to actively support relief operations, assessments, cash and voucher assistance, protection, gender and inclusion, and community engagement and accountability activities. This hands-on involvement is designed to strengthen their practical skills and build local capacity for future emergency response. Community-level volunteers and youth leaders have been mobilised to lead cleaning campaigns, support safety centre distributions, and engage affected communities throughout the response.

At the national level, the operation is managed by a project manager supported by a team comprising a project assistant, coordinator, community mobilisers, finance officer, and driver. The Head of Programmes provides overall oversight and is responsible for monitoring the progress of the entire operation. Staff and volunteers from each branch and SLRCS National Headquarters are directly engaged in day-to-day implementation, coordination, and reporting across all sectors.

In addition, IFRC surge personnel have been deployed to provide technical and management support across key operational areas including operations management, PMER, information management, communications, assessment coordination, and shelter cluster coordination complementing SLRCS capacities and helping to build local systems and strengthen accountability throughout the operation.

Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

Yes, SLRCS has a diverse volunteer base drawn from 25 branches across the country, including women and men, youth, and long-standing community-level volunteers from the same districts and GN divisions affected by Cyclone Ditwah. This mix ensures that teams can speak local languages, understand cultural norms, and provide support to specific groups such as women-headed households, older people, persons with disabilities, refugees and asylum seekers, and LGBTIQ persons in a safe and trusted manner.

Will surge personnel be deployed? Please provide the role profile needed.

Yes. Selected Surge profiles were requested as part of the Operational Strategy of the Emergency Appeal which was launched for Cyclone Ditwah. During the reporting period, under the combined DREF and Emergency Appeal operation, a total of eight Rapid Response surge personnel have been deployed seven in-country and one remote. Out of 8 surges, 5 of them were funded by DREF operation. Surge personnel have been deployed to provide short-term technical and management support to the operation, complementing SLRCS capacities and focusing on building local systems, strengthening accountability, and enabling timely and high-quality reporting and operational adaptation as the situation evolves.

The surge team provided critical technical support throughout the operation, contributing to the assessments, shaping operational planning, and ensuring alignment with IFRC standards. They played a key role in the development of the revised Emergency Appeal and Operational Strategy, as well as in enhancing information flow, reporting systems, and data management.

If there is procurement, will it be done by National Society or IFRC?

Procurement for this operation has been carried out by both SLRCS and IFRC, in line with respective procurement thresholds and standards.

International procurement for tarpaulin and essential household items which exceeded the CHF 50,000 procurement threshold was managed by IFRC CCD Delhi in accordance with IFRC procurement guidelines and standards. For payments exceeding the CHF 30,000 threshold, payments were processed through the IFRC in line with established procurement procedures.

Local procurement activities were managed by SLRCS in accordance with IFRC and SLRCS procurement guidelines, with a procurement focal point from IFRC CCD Delhi providing technical support to assist the team in completing local procurement processes efficiently and in compliance with standards.

How will this operation be monitored?

SLRCS oversees all operational, implementation, monitoring, evaluation, and reporting aspects of this operation through its country-wide network of branches and volunteers. IFRC, through its Country Cluster Delegation (CCD) in Delhi and the Asia Pacific Regional Office (APRO) in Kuala Lumpur, provides technical support in programme management to ensure operational objectives are met and activities remain on track.

Reporting on the operation is conducted and supported by the surge PMER Coordinator, in accordance with IFRC-DREF minimum reporting standards. A PMER Delegate was subsequently deployed in April 2026 to further strengthen the monitoring and reporting system. Regular operational updates are issued during the operation's timeframe, with a final report to be issued within three months of the operation's completion.

In addition, key monitoring tools, including the Indicator Tracking Table (ITT), M&E Plan, reporting schedules, and implementation plan, have been developed, regularly updated, and uploaded into the ERP system, while also being maintained in parallel Excel-based tracking sheets to ensure accessibility, consistency, and effective operational monitoring.

IFRC and SLRCS NHQ conduct systematic monitoring visits at both national and branch levels. As of the reporting period, seven (7) monitoring visits have been conducted across 18 out of 20 targeted districts, covering the progress of activities, quality of assistance, and adherence to IFRC standards. Monitoring findings are shared regularly with SLRCS management and IFRC to inform operational adjustments and address emerging gaps or challenges.

Following the implementation of key activities, PDM surveys are planned to assess the appropriateness, adequacy, and impact of assistance provided including for shelter and household items, multipurpose cash assistance, and education kits. An exit survey will also be conducted at the close of the operation. Challenges, lessons learned, and good practices are being documented throughout the operation and will be captured in a lessons learned workshop, with findings reflected in the final DREF report.

Please briefly explain the National Societies communication strategy for this operation

SLRCS communications staff and volunteers are working closely with the IFRC Regional Communications team and the surge Communications Coordinator to gather and produce communications deliverables that highlight key aspects of the operation and raise visibility of the response at national and international levels. These deliverables are shared across social media platforms, pitched to national and international media, and used for Movement-wide sharing and reporting purposes by both SLRCS and IFRC.

Communications content produced throughout the operation includes in-action photos and short videos of Red Cross volunteers on the ground, with detailed captions capturing the work, testimonials, and experiences of Red Cross members responding to the disaster. Photos and videos of affected communities and beneficiaries have also been collected and shared, capturing moments, expressions, and strong human interest stories from the field. All content is collected with the informed consent of individuals, in line with IFRC ethical standards and safeguarding policies, ensuring respect for dignity, privacy, and the protection of vulnerable groups — particularly children.

Both SLRCS and IFRC have worked together to produce press releases, news stories, key messages, and infographics as needed to communicate the scale and impact of the response. Content has been published and shared through IFRC and SLRCS social media platforms including X, Facebook, Instagram, and ifrc.org, as well as through local newspapers and national media outlets. Volunteers have received training on humanitarian photography, ethical standards, and video editing to strengthen in-house communications capacity across branches.

SLRCS field staff and volunteers always maintain the visibility of both IFRC and SLRCS branding, and security/ ensuring duty of care for volunteers while working on the ground, wearing RCRC jackets, caps, gum boots, or t-shirts during all response activities. The IFRC supports management of reputational risk at the country and regional level, ensuring that all Movement actors speak and act with a unified voice to build trust with partners, donors, government, and other stakeholders throughout the operation.

Budget Overview

IFRC

DREF OPERATION

MDRLK023 - Sri Lanka Red Cross Society
Cyclone Ditwa

Operating Budget

Planned Operations	**769,897**
Shelter and Basic Household Items	105,664
Livelihoods	0
Multi-purpose Cash	375,648
Health	31,465
Water, Sanitation & Hygiene	200,974
Protection, Gender and Inclusion	0
Education	0
Migration	22,713
Risk Reduction, Climate Adaptation and Recovery	20,222
Community Engagement and Accountability	13,211
Environmental Sustainability	0
Enabling Approaches	**230,104**
Coordination and Partnerships	20,825
Secretariat Services	79,353
National Society Strengthening	129,926
TOTAL BUDGET	**1,000,000**

all amounts in Swiss Francs (CHF)

Click here to download the budget file

Contact Information

For further information, specifically related to this operation please contact:

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