Solomon Islands
Rennell Island Oil Spill
Rapid Social Impact Assessment
March 2019
Acknowledgements

Many thanks to assessment team who collected data from Rennell Island, including staff and volunteers from Live & Learn Solomon Islands and the National Disaster Management Office (NDMO) RenBel Provincial representatives.

Thanks also to staff from Ministry of Women, Protection Committee Chair and Protection Committee Coordinator, the NDMO, Live & Learn, CARE Australia, Oxfam (Co-Chair Protection Committee), People With Disabilities Solomon Islands (PWDSI) and UN Women who conducted the data analysis and provided their feedback on the draft report.

Most importantly, Tangio Tumas to the community members and key informants who took the time to share their views for the assessment.

Report written by Charlie Damon, Pacific Humanitarian Capacity Coordinator, CARE Australia

This Social Impact assessment and analysis was made possible through the financial assistance from the Australian Government Department of Foreign Affairs and Trade (DFAT) through the Australian Humanitarian Partnership (AHP) program.

Cover page photo: Hamptan Pitu, Live & Learn Humanitarian Coordinator
Table of Contents

Acknowledgements ........................................................................................................................................... 2
Executive Summary ........................................................................................................................................... 4
1. Background and Context ............................................................................................................................... 7
   1.1 Rennell Oil Spill ...................................................................................................................................... 8
   1.2 Rationale for Social Impact Assessment ............................................................................................... 8
   1.3 Methodology ......................................................................................................................................... 9
   1.4 Limitations .......................................................................................................................................... 10
2. Key Findings and Recommendations ......................................................................................................... 11
   2.1 Protection .......................................................................................................................................... 11
   2.2 Health and Water, Sanitation and Hygiene (WASH) .......................................................................... 13
   2.3 Food Security and Livelihoods ........................................................................................................... 15
   2.4 Timeframe of disaster and response ................................................................................................... 15
Annex A CARE Gender in Brief Solomon Islands ......................................................................................... 16
Annex B Participatory Data Analysis Workshop Participants ........................................................................ 16
Annex C SAFENET Poster ............................................................................................................................ 16
Executive Summary

On 5 February 2019, the MV Solomon Trader had been loading bauxite from a mine on the island and was pushed aground on a coral reef. To date, more than 70 tonnes of oil has been dumped into the ocean, causing a three-mile slick in Kangava Bay.¹ Oil spill clean-up activities are being conducted by the Resolve Marine Group, the Australian Maritime & Safety Authority (AMSA), Solomon Islands Maritime Safety Association (SIMSA), Royal Solomon Islands Police Force (RSIPF) and Fire & Rescue officers. This includes fuel transfer (from one part of the boat to another and from one boat to another) and offshore oil skimming.² The total population of the affected area is approximately 539 people.

Whilst there have been significant efforts to manage the physical impact of the oil itself, there has not been any comprehensive assessment of the social impact of the oil spill. Therefore, Live & Learn Environmental Education (LLEE) Solomon Islands, with technical support from CARE Australia have conducted a rapid social impact assessment in coordination with the NDMO and the Protection Committee. The assessment consisted of key informant interviews (KII) and focus group discussions (FGD) with community members from affected areas. A total of 22 community members were interviewed (11 men and 11 women aged 20 – 49 including 1 person with disabilities). This on the ground analysis has been supplemented by KIIs with Honiara based stakeholders including NDMO, Provincial Department Officer for RenBel Province, UN agencies and other Civil Society organisations both on Rennell Island and in Honaira.

Data analysis was conducted in a participatory data analysis workshop hosted and facilitated by Live & Learn Environmental Education and CARE Australia. This workshop was attended by the Ministry of Women, Protection Committee Chair and Protection Committee Coordinator, the NDMO, Live & Learn, CARE Australia, Oxfam (Co-Chair Protection Committee), People With Disabilities Solomon Islands (PWDSI )and UN Women.

Key Findings

Protection

Code of Conduct and complaints mechanisms: Several agencies have been deployed to support clean-up activities. It is not clear if all these agencies have any kind of Code of Conduct in place or if the community know of how to submit a complaint in the event of any unacceptable behaviour. There are already anecdotal reports of unacceptable behaviour towards women and girls including informal reports of workers approaching female community members asking for sex.

Conditional food and water distributions and potential exploitation: The mining company has agreed to provide food, however this is conditional and based on community members working on continued operations for the mining company. This means there is a risk that those who cannot work (pregnant and breastfeeding women, elderly, female headed households, people with disabilities) are not able to access these contributions. Additionally, it risks community members, particularly women and girls being open to sexual exploitation and abuse.

No safe play spaces for children who usually play on the beach which they can no longer access.

¹ https://ramumine.wordpress.com/tag/rennell-island/
² National Disaster Management office (NDMO), National Sitrep Number 4, 18 March 2019
Water

Contamination of fresh water sources leading to insufficient drinking water. This has potential health impacts particularly for pregnant and breastfeeding women, children, the elderly and people with disabilities as well as impacts on women given their roles as caregivers for children family members who fall ill. Additionally it has the potential to increase workload and protection risk on community members, particularly on women and girls, who have to travel further to search for clean water.

Lack of community awareness around safe drinking water and water use. This is leading to misinformation and fear with community members unsure if they can drink from their water sources or not.

Health

Women and children are reporting breathing difficulties, nausea and vomiting due to the fumes. The elderly cannot move around due to the smell. Additionally, children have itchy skin and women are having skin issues as they are not washing regularly due to lack of access to water. Local nurse staff report an increase of patients presenting with ailments including fever, cough, sore throat and abdominal pain. The local clinic is approximately a 1.5 hour drive from the affected area so not accessible to all.

Food Security and Livelihoods

Marine life including fish and shellfish, which communities depend on as a main source of food and income have been affected. There is a lack of awareness around what fish is safe and unsafe to eat including what is a safe distance to fish from the oil spill.

With fish being a main source of protein, this is leading to poor nutrition. This poses particular risks for pregnant and breastfeeding women, young children, the elderly and people with disabilities. This coupled with a lack of awareness on nutrition and low understanding of how to replace fish in their meals has led to community members reportedly only eating rice and some produce from their gardens.
Recommendations

Protection
- Ensure that all response workers, including those from Government, NGOS, UN agencies and the mining company, sign a Code of Conduct and communities are aware of complaints mechanisms.
- SAFENET\(^3\) roll out to Rennell to be prioritised to support the establishment of a formal referral mechanism. See Annex C for an example of SAFENET.
- Conduct a targeted assessment of people with disabilities, disaggregated and analysed according to sex and age to determine impacts and needs.
- Conduct social impact assessments in 4-6 weeks’ time to monitor the situation with a particular focus on women, girls and people with disabilities and other vulnerable groups.

Water
- Conduct community awareness, with women, men, boys, girls and people with disabilities on safe drinking water.
- Targeted water distributions to vulnerable groups such as pregnant and breastfeeding women, children, the elderly and people with disabilities.

Health
- Provision of a mobile health clinic to affected communities which targets pregnant and breastfeeding women, children, the elderly and people with disabilities, to treat those who are suffering from ailments related to the oil spill.

Food Security and Livelihoods
- Conduct community awareness, with both women and men, on safe food practices (including fish) and nutrition.
- Work with the mining company to provide unconditional food distributions to community members including pregnant and breastfeeding women, children, the elderly and people with disabilities.
- Provide support to communities, including women and men to identify medium term alternative livelihoods.

---

\(^3\) As per the DFAT ‘Let’s Make our Families Safe - Mekim Famili Blong Iumi Sef’ prevention of family violence program design document for Solomon Islands: (31 January 2014, page 23), SAFENET is the Solomon Islands referral network for survivors of violence. Building on informal referral practices, in 2013 the five main service providers to survivors of violence signed a memorandum of understanding. The five organisations include SIG agencies (the Ministry of Health and Medical Services, the RSIPF and the Public Solicitor’s Office) as well as local non-government organisation Family Support Centre (providing counselling services) and the Anglican Church of Melanesia operated Christian Care Centre (offering refuge accommodation for women and children). The MOU sets out commitments of the organisations to make referrals to each other to ensure that a survivor of violence presenting to any one of those services is enabled to receive the services of all five. The Ministry of Health takes a lead role in SAFENET, including housing the SAFENET Coordinator through its Social Welfare Division. SAFENET is only operational within the capital city but has plans (funded through DFAT and the European Union) to expand to other Provinces and islands including Rennell.
1. Background and Context

Solomon Islands, consisting of six major islands and over 900 smaller islands, is one of the most disaster-prone countries in the world. In 2017, the country was ranked 6th on the World Risk Index (a global comparison of countries’ vulnerability to natural disasters). The population of the Solomon Islands, approximately 600,000 people, face a perennial risk of cyclones, floods, storm surges, earthquakes, tsunamis, volcanos and landslides and consequent humanitarian impacts. The 2015 Global Assessment Report (GAR) on Disaster Risk Reduction identifies cyclonic wind and storm surge as Solomon Island’s most frequent natural disasters, followed by earthquakes and tsunamis. Cyclones and storms are predicted to become more severe with climate change.4

Rennell Island is the southernmost island in the Solomon Islands. Rennell is 86 km long x 15 km wide, is the largest raised coral atoll in the world. The site includes approximately 37,000 ha and a marine area extending 3 nautical miles to sea. A major feature of the island is Lake Tegano, which was the former lagoon on the atoll. The lake, the largest in the insular Pacific (15,500 ha), is brackish and contains many rugged limestone islands and endemic species. Rennell is mostly covered with dense forest, with a canopy averaging 20 m in height. Combined with the strong climatic effects of frequent cyclones, the site is a true natural laboratory for scientific study. The site is under customary land ownership and management.9 Communities manage their food and income security though subsistence gardening, hunting and fishing. However, there are anecdotal reports that the community demographic has changed over the years as young adults and working-age men, move away to Honiara and elsewhere for education and employment.6

Rennell Island has one clinic in Tingoa but does not have a health post to serve any of those communities that are further away. There are currently no referral mechanisms in place for child protection and gender based violence (GBV) incidents.

Oil mining

Rennell Island has hosted a bauxite mining operation since 2014, and has a geographic advantage in the trade due to its relative proximity to the Chinese market. The Bintang Mining development, located on the west side of the island, is locally controversial; the east side of the island is a UNESCO World Heritage Site.7

Gender and protection

Women in the Solomon Islands continue to face inequalities in all spheres of life – social, cultural, economic and political8. Traditional roles and responsibilities for men and women impact on education and economic empowerment of women, participation and gender-sensitive policy, and rates of gender-based violence and protection. Women and girls in areas affected by disasters usually face greater challenges related to water, sanitation and hygiene (WASH), protection, shelter and food security, and livelihoods.9

For a short summary of the gender context, see CARE’s Gender in Brief in Solomon Islands at Annex A.

Children, women and youth

The major concerns for children, youth and women are under-resourced health services and schools, especially in rural areas, scarcity of cash earning opportunities for both men and women, and scarcity of employment opportunities and lack of career structures for youth.10

---

4 DFAT AHP Disaster Ready, Solomon Islands country plan, December 2017
5 https://whc.unesco.org/en/list/854
6 https://www.iucn.org/content/natural-world-heritage-sites-pacific%E2%80%99s-challenges
8 CARE Australia, “Gender and Disaster Risk Reduction in the Pacific”, Gender Considerations Brief AHP 2017.
9 DFAT AHP Disaster Ready, Solomon Islands country plan, December 2017
10 UNICEF, A Situation Analysis of Children, Women and Youth, 2005 page viii
People with disabilities

2009 Solomon Islands National Population and Housing Census reports that 14 percent of the total population or 72,222 people – live with disability. This census figure is near the global prevalence rate of 15 per cent, which would suggest that a total of 77,381 Solomon Islanders live with disability. It is noteworthy that while the census questions focused on difficulties or health problems regarding seeing, hearing, walking (‘lameness’) and/or memory or concentrating (‘senile and/or amnesic’), they were not based on the WHO International Classification of Function and did not use rights-based language. The census found:

- Minimal gender disparity in disability prevalence rates, with the proportion of females living with disability being slightly higher than that of males;
- 142,418 impairments among the population who reported disability;
- Ten per cent of children younger than five (5) years of age had disability and less than five (5) per cent of youth aged 5–19 years reported disability;
- The proportion of people with disability increased with age with approximately 50 per cent of those aged 55–59 years reporting difficulties;
- Twenty per cent of the total population of people with disability were in Guadalcanal and Malaita.11

1.1 Rennell Oil Spill

The MV Solomon Trader had been loading bauxite from a mine on the island in the days before Cyclone Oma pushed it aground on a coral reef, in the early hours of 5 February. To date, more than 70 tonnes of oil has been dumped into the ocean, causing a three-mile slick in Kangava Bay which experts said was likely to cause long-term damage to the local ecosystem.12

Oil spill clean-up activities are being conducted by the Resolve Marine Group, the Australian Maritime & Safety Authority (AMSA), Solomon Islands Maritime Safety Association (SIMSA), Royal Solomon Islands Police Force (RSIPF) and Fire & Rescue officers. This includes fuel transfer (from one part of the boat to another and from one boat to another) and offshore oil skimming.13

Resolve Marine Group, a salvage consulting firm engaged by the shipping company’s insurer has managed to control the leakage under the oversight of the Solomon Islands Government (SIG) Team with support from the Australian Government also engaging on offshore oil spill removal. Observations by SIG Teams on-site as well as by the local community confirmed significant reduction of oil (sheen, dark oil and brown oil) in the wider sea area at Kangava Bay except closer to where the MV Solomon Trader lies. Pumping of oil from the MV Solomon Trader and clean-up of shoreline is taking place according to set plans. Potential to re-float the ship may take 3–5 months however this timeframe is subject to change based on operational conditions.14

1.2 Rationale for Social Impact Assessment

Whilst there have been significant efforts to manage the physical impact of the oil itself, there has not been any comprehensive assessment of the social impact of the oil spill or any comprehensive targeted assistance to affected community members. This rapid social impact analysis (with a focus on gender and protection) is designed to provide initial information about how the daily lives of men, women, boys, girls, people with disabilities and any other marginalised groups have been affected by the oil spill.

---

12 https://ramumine.wordpress.com/tag/rennell-island/
13 National Disaster Management office (NDMO), National Sitrep Number 4, 18 March 2019
14 National Disaster Management office (NDMO), National Sitrep Number 4, 18 March 2019
Taking into consideration the rapidly changing context and limited information, this analysis seeks to understand how different groups might be impacted by recent events and provide practical programming and operational recommendations to meet differing needs of men, women, boys, girls and people with disability and ensure that humanitarian responders including Government, UN agencies, NGOS and mining workers ‘do no harm’.

This report will be shared with government, in-country NGOs, CSOs, INGOs, UN agencies and donors to inform programming responses to the recent oil spill. This includes the National Disaster Management Office (NDMO), the Ministry of Women as Chair of the Protection Committee and the Chairs of the Health Committee and Livelihoods Committee.

This report will also be disseminated widely to a range of stakeholders, including key government ministries and departments, national and regional humanitarian clusters, UN agencies and donors.

1.3 Methodology
The methodology for this rapid assessment included the collection and analysis of both primary and secondary data. Secondary data collection involved a review of background documentation, NDMO SITREPs, Rural Water, and Hygiene department (RWASH) observation reports and newspaper articles.

Primary data was collected from focus group discussions in Honiara on 5 and 11 March 2019 and then from key informant interviews and focus group discussions on Rennell Island from 18-19 March 2019. A total of 22 community members were interviewed (11 men and 11 women aged 20 – 49 including 1 person with disabilities).

The locations visited on Rennell Island were Lavangu, Avaatai and Motanamoa. The population of these sites based on the 2010 census (2020 projection) are as follows:

<table>
<thead>
<tr>
<th>Ward Name</th>
<th>Village</th>
<th>Male</th>
<th>Female</th>
<th>2010 total</th>
<th>2020 projection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lughu</td>
<td>Avatai</td>
<td>48</td>
<td>42</td>
<td>90</td>
<td>180</td>
</tr>
<tr>
<td>Lughu</td>
<td>Kangava</td>
<td>10</td>
<td>5</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>Lughu</td>
<td>Lavangu</td>
<td>204</td>
<td>181</td>
<td>385</td>
<td>770</td>
</tr>
<tr>
<td>Lughu</td>
<td>Matamona</td>
<td>25</td>
<td>24</td>
<td>49</td>
<td>98</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>539</td>
<td>1,078</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The data collection team consisted of the Live & Learn Humanitarian Coordinator (male) and a Live & Learn volunteer (female) accompanied by the RenBel Provincial Disaster Officer (male) to conduct key informant interviews with community members and service providers, focus group discussions with community members as well as recording personal observations.

Data analysis was conducted in a participatory data analysis workshop on Thursday 21 March. This workshop was attended by the Ministry of Women, Protection Committee Chair and Protection Committee Coordinator, the NDMO, Live & Learn, CARE Australia, Oxfam (Co-Chair Protection Committee), People With Disabilities Solomon Islands (PWDSI) and UN Women. The workshop was attended by 7 female and 3 male participants including 1 female with a disability. A full list of participants can be found in Annex B.
1.4 Limitations

- **Timeframe of data collection**: the Social Impact assessment team only had 2 days to collect data, though despite this time constraint they still managed to visit all three affected communities.

- **Availability of community members**: due to lack of network connection, the team found it difficult to inform communities of their visit. This led to difficulties in gathering groups of people to survey on arrival into Rennell. Additionally, the team found it difficult to find any **people with disabilities** to interview with community members claiming that there were no people with disabilities in their community.

- **Health Committee data** was unavailable to the team so has not been incorporated.

- **Differing individual community member investments in mining on Rennell** influenced which community members would speak not speak and what information they would offer. Some community members would not share their name or images for fear of retribution from their fellow community members and the mining company.
2. Key Findings and Recommendations

During the primary data assessment, key informants identified a range of groups who might be particularly at risk and require special assistance. Initial data suggests increased risks for women (particularly female-headed households, pregnant and breastfeeding women), children, the elderly and people with disabilities. The impacts include protection, water supply, health, food security and livelihoods. The detailed findings from these sectors are outlined below.

2.1 Protection

Code of Conduct and Community Complaints mechanisms

There are several agencies (including private sector and Government) that have been deployed to support clean-up activities and are made up of mostly male staff. It is not clear if all these agencies have any kind of Code of Conduct in place. This puts community members, particularly women and girls, at increased risk of sexual abuse and exploitation. There are already anecdotal reports of women and girls being approached by salvage workers which is an indication that there are some additional protection risks to those that were pre-existing.

Additional police have been deployed to support the clean-up operation though how many have been trained or briefed on sexual exploitation and abuse, gender based violence and referral mechanisms would need to be checked. A formal community complaints mechanism does not yet exist and awareness on what inappropriate or unacceptable behaviours can be reported and how has not been conducted to date.

Child protection

In addition to protection risks outlined above, particularly for girls, with the increase in workers to the island, the other issue is that children no longer have access to their usual play space. Prior to the oil spill children would always place on the beach. This is currently inaccessible therefore disrupting the usual way of life for children.

Conditional food and water distributions

The mining company has agreed to provide food, however this is conditional and based on community members working on continued operations for the mining company, including clean up. This means there is a risk that those who cannot work (pregnant and breastfeeding women, elderly, single mothers, or women caring for young children, people with disabilities) are not able to access these contributions. Additionally, it risks community members being open to exploitation as the food and water provisions are based on some form of exchange as well as potentially some community conflict.

People living with disabilities

During assessments, it was hard to gather data on how people with disabilities have been affected. Some communities stated that they did not have anyone with disabilities. This indicates that there may be some stigma around people with disabilities and / or they may be hidden. Given that people with disabilities may have mobility issues, low access to health services and limited resources, it is anticipated that there vulnerabilities will be exacerbated by this situation including women with disabilities at risk of sexual exploitation and abuse.

Vanua Community High School

Globally it is recognised that disasters can lead to children being in unstable situations where they are less supervised, either because they are separated from or have lost a caregiver, or because their family is absent for longer periods of time than normal, either trying to find work or working longer hours. Children in these situations say schools are
places where they feel safe and protected. Whilst the RWASH field Observation report noted that the Vanua Community High school does not have any toilets for its 80 students it does not note if the school is still operational since the oil spill or if student attendance has been affected in any way. Given the importance of school for children’s well-being, the status of the school should be followed up.

Recommendations for Protection

1. Ensure that all response workers sign a Code of Conduct
Given the increase in workers to support the clean-up operation on Rennell Island, it is recommended that anyone supporting the clean-up efforts is briefed and asked to sign a Code of Conduct. This includes staff from Government, NGOs, UN agencies and the mining company. The Code of Conduct should outline acceptable and unacceptable behaviours including risky behaviours and sexual exploitation and abuse. Ensure women in particular, especially those who face higher risks, as well and male and female community (and church) leaders are well informed about these codes of conduct and complaints mechanisms and they are appropriately designed.

2. Increase awareness and establish community complaints and referral mechanisms
Communities, including women, men and community leaders should be sensitized to these Codes of Conduct, acceptable and unacceptable behaviours, risky behaviours and sexual exploitation and abuse. SAFENET is due to be rolled out on Rennell over the next 12 months with the Provincial Committee being established in May 2019. In the interim, communities should be sensitised to reportable behaviours and an interim reporting mechanism established from which SAFENET can then build upon.

3. Conduct a detailed assessment of people with disabilities
A detailed assessment of people with disabilities, collecting and analysing gender and age disaggregated data to identify full range of issues for women, girls, men and boys with disabilities, should be conducted to determine how people with disabilities have been impacted and how they are managing their particular needs. It is recommended that this assessment is supported by People With Disabilities Solomon Islands (PWDSI) given their expertise in this area.

4. Conduct social impact assessments in 4-6 weeks’ time to monitor the situation
It is not yet known how long clean-up activities will take or how long communities will feel the impacts of the oil spill. For this reason, another social impact assessment should be conducted in 4-6 weeks’ time in order to assess if the situation for communities is improving or if they are still feeling the impacts of the oil spill. This assessment should collecting and analysing gender and age disaggregated data to identify full range of issues (including WASH, livelihoods and protection) for women, girls, men and boys with disabilities and ensure consultation and involvement of women and girls.

5. Check status of Vanua Community High School
Continuation of normal community life, including attending school will be important for community recovery. Therefore, it is recommended that the Ministry of Education check the status of the high school to see if it is still open and operational and to check if student attendance has been impacted at all and if there are any barriers, due to the oil spill, to children attending school.

---

16 As per the DFAT ‘Let’s Make our Families Safe - Mekim Famili Blong Iumi Sef’ prevention of family violence program design document for Solomon Islands: [31 January 2014, page 23], SAFENET is the Solomon Islands referral network for survivors of violence. Building on informal referral practices, in 2013 the five main service providers to survivors of violence signed a memorandum of understanding. The five organisations include SIG agencies (the Ministry of Health and Medical Services, the RSIPF and the Public Solicitor’s Office) as well as local non-government organisation Family Support Centre (providing counselling services) and the Anglican Church of Melanesia operated Christian Care Centre (offering refuge accommodation for women and children). The MOU sets out commitments of the organisations to make referrals to each other to ensure that a survivor of violence presenting to any one of those services is enabled to receive the services of all five. The Ministry of Health takes a lead role in SAFENET, including housing the SAFENET Coordinator through its Social Welfare Division. SAFENET is only operational within the capital city but has plans (funded through DFAT and the European Union) to expand to other Provinces and islands including Rennell.
17 Note from meeting between CARE Australia and IOM 23 March 2019
2.2 Health and Water, Sanitation and Hygiene (WASH)

Health

Social Impact assessment data found that women and children are reporting breathing difficulties, nausea and vomiting due to the fumes. The elderly cannot move around due to the smell. Additionally, children have itchy skin and women are having skin issues as they are not washing regularly due to lack of access to water. Local nurse staff report that since the oil spill there has been an increase of patients presenting with ailments including fever, cough, sore throat and abdominal pain. This is consistent with claims of infections from oil spill by community members which were investigated by the Environment Health Division (MHMS) who conducted interviews with women from Matamoana Community who claimed breathing issues, skin rash, red-eye and dizziness.18

The local clinic is approximately a 1.5 hour drive from the affected area so not accessible to all, particularly pregnant women, children, the elderly and people with disabilities. A team from the Ministry of Health and Medical Service comprising of one doctor and one nurse (from Solomon Islands Medical Assistance Teams -SOLMAT) has been deployed to Rennell to support health responses.19

Water, Sanitation and Hygiene (WASH)

Community members interviewed noted that fresh water sources have been contaminated. This is leading to insufficient drinking water which has potential health impacts particularly for pregnant and breastfeeding women, children, the elderly and people with disabilities. Concern was raised that if the fresh water ends there will be no fresh water source. There are some coconuts but not in great quantities. This has a potential impact on women and girls including additional work load in searching for and collecting water as well as a potential increase in protection risks.

In Avatai, all households have at least one water tank to collect rain water and the mining company also transports water to the communities by truck during the dry weather and transfers the water into the rain water tanks. The trucked water comes from a ground water source located several kilometres west of Lavangu. When their rainwater tanks are empty, community members will resort to collecting the spring water at low tide for cooking and perhaps drinking. RWASH noted some minor signs of oil residue on the solid rock next to the spring and a water sample was taken at this spring for lab testing.20 However, impact assessment survey respondents noted that they are not sure what the results of the lab testing were. RWASH noted that water drank from tanks still tastes normal while tests carried out indicated no traces of oil condensation onto roofs despite the presence of strong odour and fumes in the atmosphere. RWASH also noted that the mining company should also consider prioritizing carting water into household tanks at Avatai and Matamoana as there has been no rain for the last few weeks.21

Many survey respondents noted a lack of community awareness around safe drinking water and water use since the oil spill. This is leading to misinformation and fear with community members unsure if they can drink from their water sources or not.

18 National Disaster Management office (NDMO), National Sitrep Number 4, 18 March 2019
19 National Disaster Management office (NDMO), National Sitrep Number 4, 18 March 2019
20 RWASH, Lavangu Bay, Rennell Island Field Observation Trip Report, 10 March 2019
21 National Disaster Management office (NDMO), National Sitrep Number 4, 18 March 2019
Recommendations for Water, Sanitation and Hygiene (WASH) and Health

Health

1. **Provision of a mobile health clinic**
   Whilst there is a clinic in Tango, this is far (approximately 30 km, 1.5 hours drive and several hours walk) and therefore not accessible to all affected community members, particularly pregnant women, people with disabilities and the elderly. Therefore, it is recommended that a mobile clinic visits all 3 communities to conduct tests for oil spill related ailments and provide treatment. It is recommended that the mobile clinic spends at least a week in each community and targets health assistance to affected community members particularly pregnant and breastfeeding women, children, the elderly and people with disabilities.

2. **Provision of community awareness**
   Widespread community awareness should be conducted to affected communities that has standard messages on how to manage and treat the ailments caused by the oil spill. Awareness should be provided to the whole of community including with women, men, boys, girls and people with disabilities.

Water

3. **Conduct community awareness on safe drinking water**
   Community awareness on safe water practice should be conducted. This includes messages on what water can be used for drinking, cooking, bathing and household washing. This recommendation is in line with RWASH recommendations on the need to provide continuous awareness for the next 21-40 days on the need to use safe water for cooking and drinking and for locals to stop eating fish, shellfish and crustaceans.²²

4. **Communicate results of recent water tests**
   Whilst RWASH have conducted tests on community water sources, survey respondents had not received the results and were still unclear as to whether their water sources are safe or not. It is recommended that water test results are widely communicated as part of the community awareness outlined above.

5. **Provide targeted water distributions to vulnerable groups**
   Given the issues with accessing clean water, it is recommended that water is distributed to vulnerable groups who may not have the resource or mobility to collect clean water including pregnant and breastfeeding women, children, the elderly and people with disabilities.

6. **Continue distribution of water purification tablets**
   Water purification tablets were mentioned by several survey respondents as they are using these to treat water that is coming from different water sources than usual (not water that has been affected by the oil spill) which is reportedly brackish water. It is recommended that these distributions should continue for the duration of the oil skill clean up response until it is confirmed that usual community water sources are safe to drink. These distributions should be accompanied with clear verbal and written guidance on how to use these tablets.

7. **Sustainable water access plan to be developed**
   Data analysis noted that even without the oil spill, the community are dependent upon the mining company trucking water to their communities. It is recommended that a community based sustainable water access plan be developed which looks at community-led sustainable solutions to water access and is developed with both men and women noting their respective roles in decision making water resource management.

---

²² National Disaster Management office (NDMO), National Sitrep Number 4, 18 March 2019
2.3 Food Security and Livelihoods

Fish stocks, which communities depend on as a main source of food and income have been affected. There is a lack of awareness around what fish is safe and unsafe to eat including what is a safe distance to fish from the oil spill. For the people of Rennell “the sea is like their garden” therefore the oil spill is affecting their usual food sources.

The mining company has agreed to provide food, however this is conditional and based on community members working on continued operations for the mining company. This means there is a risk that those who cannot work (pregnant and breastfeeding women, elderly, people with disabilities) are not able to access these contributions.

With fish being a main source of protein, this is leading to insufficient nutrition which poses risks for pregnant and breastfeeding women, children, the elderly and people with disabilities. This coupled with a lack of awareness on nutrition and low understanding of how to replace fish in their meals has led to community members reportedly only eating rice and some produce from their gardens.

“People are now eating rice but without fish and shellfish. We do not enjoy food anymore.”

Female focus group participant, Honiara

Recommendations for Food Security and Livelihoods

1. **Conduct community awareness on safe food practices and nutrition**
   Community awareness should be conducted that educates the community on what fish and seafood is safe to eat and not eat, how far from oil spill can people fish, where can they fish safely and an indication of how long the oil spill will affect their food sources. Additionally, community awareness should include nutrition messages that educate the community on how they can replace the protein in their meals in the absence of being able to eat fish and seafood.

2. **Ensure the mining company provide unconditional food ration support**
   Survey respondents noted that the mining company provide food in return for support to operations. It is recommended that SIG work with the mining company to ensure that no conditions are placed on food distributions to ensure that the whole of community can access them as well as to reduce the risk of exploitation.

3. **Provide support to communities to identify medium term alternative livelihoods**
   Community members who sell fish and seafood to market are being impacted by the oil spill as their livelihoods are being affected. It is recommended that support is provided to community members (men and women) to determine alternative income sources to diversify their income and increase their resilience and recovery to this disaster.

2.4 Timeframe of disaster and response

The other issue that was highlighted by survey respondents is that there is no clarity around how long the oil spill will affect their daily lives.

“It is recommended that SIG continue and strengthen communication between authorities based on Rennell Island dealing with the oil spill and affected communities. It is also suggested that SIG seek advice from other countries in the region who may have had this experience.”

“People are now eating rice but without fish and shellfish. We do not enjoy food anymore.”

Female focus group participant, Honiara

Male survey respondent (nurse)
Annex A  
CARE Gender in Brief Solomon Islands

Annex B  
Participatory Data Analysis Workshop Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
<th>Gender</th>
<th>Organisation</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aaron Pitaqae</td>
<td>Chair, National Protection Committee</td>
<td>Male</td>
<td>Min of Women, Youth, Children and Family Affairs</td>
<td><a href="mailto:APitaqae@mwycfa.gov.sb">APitaqae@mwycfa.gov.sb</a></td>
</tr>
<tr>
<td>Everlyn Fiualakwa</td>
<td>Coordinator, Protection and Gender in Emergency Project</td>
<td>Female</td>
<td>Min of Women, Youth, Children and Family Affairs</td>
<td><a href="mailto:EFiualakwa@mwycfa.gov.sb">EFiualakwa@mwycfa.gov.sb</a></td>
</tr>
<tr>
<td>Jerry Hagaria</td>
<td>Senior Operations Officer</td>
<td>Male</td>
<td>NDMO</td>
<td><a href="mailto:jhagaria@ndmo.gov.sb">jhagaria@ndmo.gov.sb</a></td>
</tr>
<tr>
<td>Elmah Panisi</td>
<td>Country Manager</td>
<td>Female</td>
<td>Live &amp; Learn Solomon Islands</td>
<td><a href="mailto:elmah.panisi@livelearn.org">elmah.panisi@livelearn.org</a></td>
</tr>
<tr>
<td>Hamptan Pitu</td>
<td>Humanitarian Coordinator</td>
<td>Male</td>
<td>Live &amp; Learn Solomon Islands</td>
<td><a href="mailto:hampton.pitu@livelearn.org">hampton.pitu@livelearn.org</a></td>
</tr>
<tr>
<td>Gwen Rarai</td>
<td>Volunteer</td>
<td>Female</td>
<td>Live &amp; Learn Solomon Islands</td>
<td><a href="mailto:gwennielipai@gmail.com">gwennielipai@gmail.com</a></td>
</tr>
<tr>
<td>Naomi Tai</td>
<td>Administrator</td>
<td>Female</td>
<td>People With Disabilities Solomon Islands (PWDSI)</td>
<td><a href="mailto:tainaomi529@gmail.com">tainaomi529@gmail.com</a></td>
</tr>
<tr>
<td>Lavinia Dakei</td>
<td>Gender Lead</td>
<td>Female</td>
<td>Oxfam Solomon Islands</td>
<td><a href="mailto:laviniad@oxfam.org.au">laviniad@oxfam.org.au</a></td>
</tr>
<tr>
<td>Rochelle Braaf</td>
<td>Regional Gender &amp; Protection Programme Specialist</td>
<td>Female</td>
<td>UN Women</td>
<td><a href="mailto:rochelle.braaf@unwomen.org">rochelle.braaf@unwomen.org</a></td>
</tr>
<tr>
<td>Charlie Damon</td>
<td>Pacific Humanitarian Capacity Coordinator</td>
<td>Female</td>
<td>CARE Australia</td>
<td><a href="mailto:Charlie.Damon@care.org.au">Charlie.Damon@care.org.au</a></td>
</tr>
</tbody>
</table>

Annex C  
SAFENET

Adobe Acrobat Document