

SEISMIC HAZARD ASSESMENT AND RAPID VISUAL SURVEY OF HOSPITAL BUILDINGS



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EARTHQUAKES AND TSUNAMIS

When Rām was preparing for launching his campaign for the rescue of Sitā from the captivity of Rāvan, there was a terrific noise like the clap of thunder, the mountains shook and rocks fell down violently, and the waters of rivers and lakes were greatly agitated. Snakes came out of their holes, and frogs fled the coast. The sea water was tossed up and waves advanced one upon the other (Vālmiki Rāmāyaṇa, Yuddha Kāṇḍ, 22).

पर्वपर्वतः कम्पयितः ॥ ७ ॥ ॥

प्रतिपुक्षुभिरे चाशु सर्वांसि सरितस्त्वया ॥ 7 ॥

आरुद्रद्वेष शैलाणाञ्छिखराणि बभञ्ज च ॥ 10 ॥

सह भूतैः सतीर्यामिः सनागः सहस्रक्षसः ॥ 14 ॥

वहस्यन्तु जले मेघाश्च मीनानामे मद्योषधिः ।

कान्तं क्रीडासकलं कालासकलं कल्पवृक्षं ॥ 15 ॥

[Vālmiki Rāmāyaṇa, Yuddha Kāṇḍ, 22]

Apparently, an earthquake had hit the Rāmoshyarān coast and a tsunami brought waves of sea water deep into the land. The coming out of snakes in dazed condition and other burrowing animals and fleeing away of toads from the coasts confirms the occurrence of an earthquake.

KS Valdiya

*Geography Peoples and
Geodynamics of India in
Puranas and Epics*

It has been already stated above that the strange behaviour of animals and birds are taken by the present seismologists to signal imminent occurrence of an earthquake or volcanic eruptions. It seems Krishna understood the nature's signals and advised the people to leave Dwārakā as early as possible—by land routes or by boat—and stay in a safer place in southern Pāṇḍyāśāstrā (Vishva Purāṇa, 27; Mahābhārata, Mausla Parv, 2).

एतन्नाम त्वं तदा वदुः, कर्णवर्षि ॥ ७ ॥

सदां वसामसौ वसामांशु रीरवम् ।

एतन्नाम त्वं तदा वदुः, कर्णवर्षि ॥ ११ ॥

[Vishva Purāṇa, 27]

अथैतान् पुत्रान्वा वीर्यावसानम् ।

कीर्त्तयन्तु मया मे कर्णो पुत्रवत् ॥ २३ ॥

[Mahābhārata, Mausla Parv, 2]

Soon after Krishna died, Dwārakā sank into the sea. It happened suddenly. Full of amazement and pain, the sea rose up and submerged Dwārakā with all its precious things (Vishva Purāṇa, 27). Seeing this, a lot of the people that had remained in town rushed out, exclaiming, "What a time—Oh, my God! Oh, my God!", "What a bad luck!"

एतन्नाम त्वं तदा वदुः, कर्णवर्षि ॥

एतन्नाम त्वं तदा वदुः, कर्णवर्षि ॥ ११ ॥

एतन्नाम त्वं तदा वदुः, कर्णवर्षि ॥ ११ ॥

एतन्नाम त्वं तदा वदुः, कर्णवर्षि ॥

एतन्नाम त्वं तदा वदुः, कर्णवर्षि ॥ ११ ॥

[Vishva Purāṇa, 27]

The evidences of the phenomenon indicates that it was the sinking of the ground due to faulting along of the seaward part of the land. In other words, the seaward side subsided a few metres. This is borne out by steep to vertical cliff faces of the coastal land; disturbed morphology of wave-cut notches and staircase-like platform (Pant and Juyal, 1993). The faulting must have been accompanied by a major earthquake.

The Kachchh-Saurāshtra domain is prone to repeated earthquakes (Fig. 10.5). Some very large or major earthquakes have hit the terrain in the present time stretching back to the middle Holocene time. Soft-sediment

An earthquake in Srinagar, 24th September, 1501 AD

The *Tarikh-e-Hasan* mentions about an earthquake which is not mentioned in the contemporary Sanskrit source, namely the *Rājatarāṅginī* by Suka. Pir Hasan Shah records:

“During the reign of Sultan Fath Shah on 12th of Asvach Pasi of 970 H. (September, 24th 1501 AD) a severe earthquake occurred in the previous night. A large number of creatures of God lost their lives and houses were razed to ground. The earth and sky remained in tumult for a period of three months. Then after three months normalcy was restored.”

(Tarikh-e-Hasan, ff. 170a)⁵

An earthquake at Garhgaon, 1548 AD

The *Ahom-Buranji* (Tr. and Ed. Barua, 1930) states:

“In Lakani Tao-Shinga (i.e. in 1548 AD) a violent earthquake took place, pebbles, sand and ashes came out bursting the surface of earth...”

(Ahom Buranji, pp. 81-82, para 61)²¹

This earthquake was during the reign of the king Suklemung who made his capital at Garhgaon and therefore known as Garhgaya Raja. Gait (1905) also mentions this earthquake. The intensity of this earthquake might be IX. Garhgaon is south east of Sibsagar and its location is approximately 26°45' N, 94°50'E.

VARAHAMIHIRA (5TH Cent. A.D).

ADBHUTA SAGARA OF BALLALA SENA(10TH Cent. A.D)

Lokopakarakam of Chamunda Raya (11th Cent. A.D.)

Earthquakes are classified into four groups, in decreasing order of distress. Felt distances and affected regions are mentioned.

Name	Distance (Yojana)	Region
Vayu	200	Kuru, Yavana, Sourashtra, Vanga, Trigarta, Magadha
Varuna	90 (180) *	Gonarda, Cedi ,Kukura, Videha, Sindhu
Agni	80 (110) *	Ashmaka, Dravida, Madhyadesha, Kuru, Yavana, Sourashtra, Vanga, Trigarta, Magadha
Indra	70 (160) *	Kashi, Dravida, Kashmir

*** 1 Yojana=9.6 Kms.(approx.) Prof. RN Iyengar *Current science***



NAMES OF
REGIONS WHICH
HAVE EXPERIENCE
EARTHQUAKES IN
ANCIENT TIMES AS
PER BRIHAT-
SAMHITA OF
VARAHA MIHIRA 5-
6TH CENT. A.D.

RED COLOUR
INDICATES THE
SEVEREST TYPE
(VAYU).

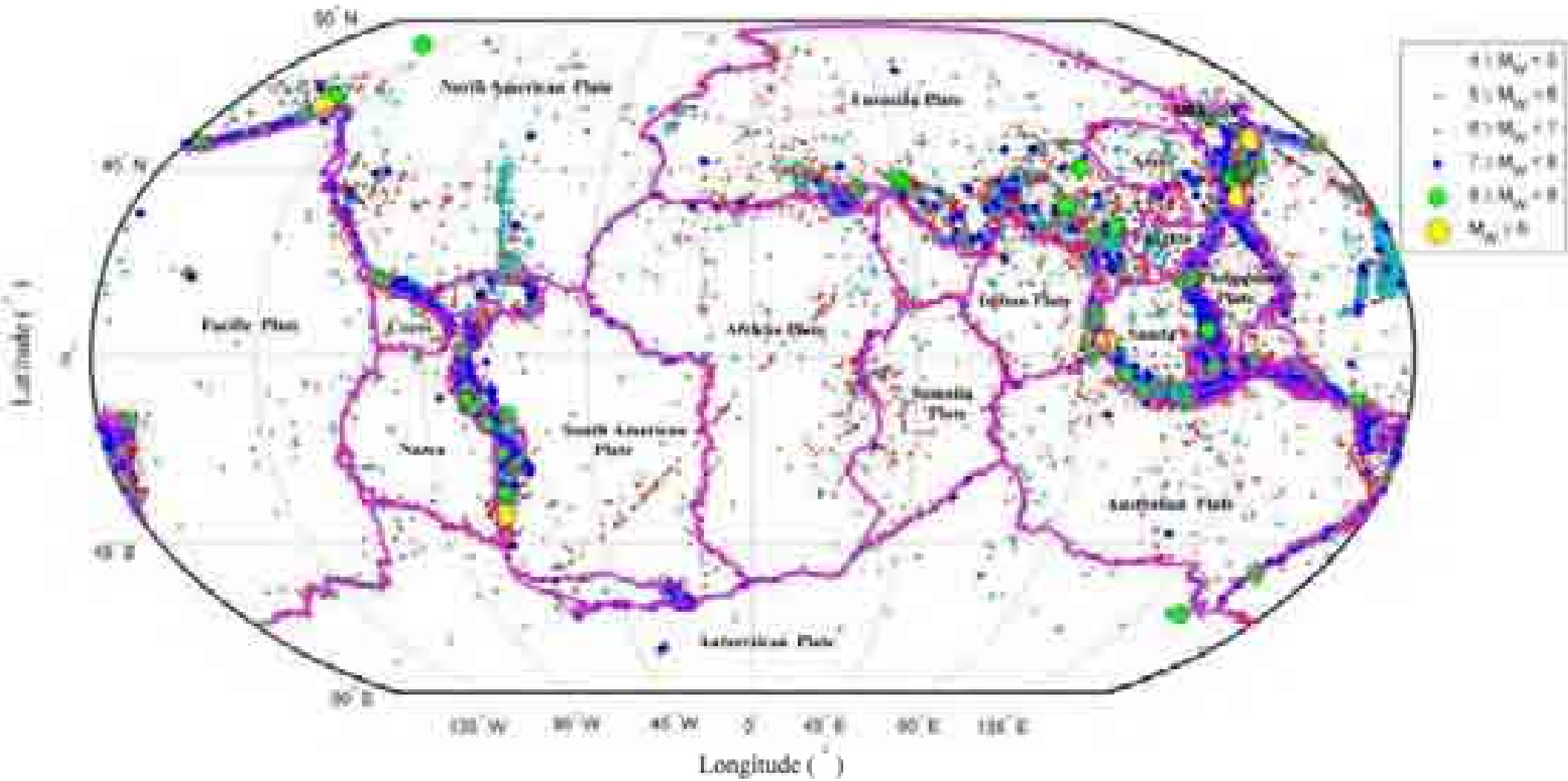


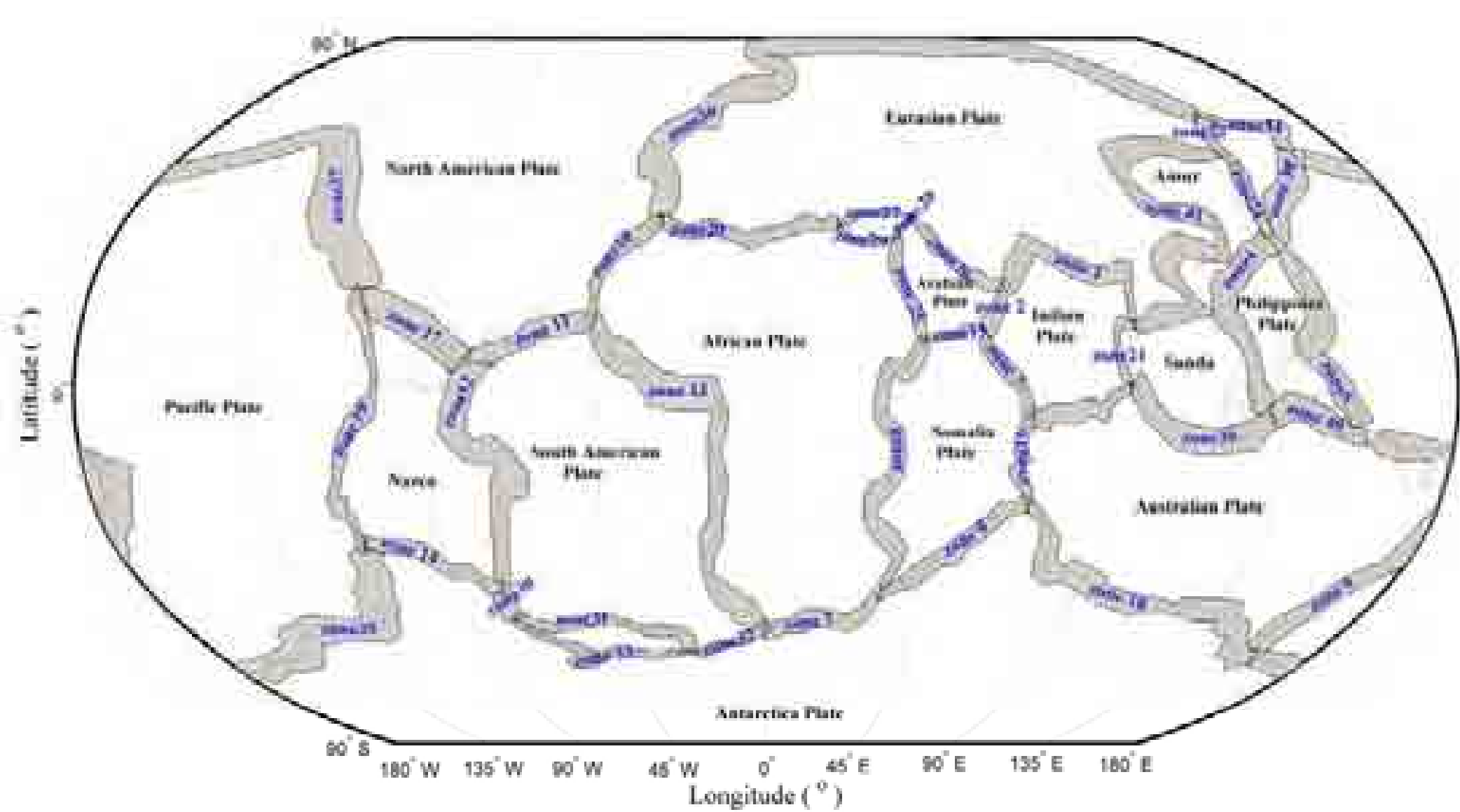
Kedarnath temple 2nd century
National centre for Heritage structures
IIT Madras

M.Tech and PhD Heritage structures
Reconstructing the past Natural
disasters

Dhankar monastery 2000
yrs old



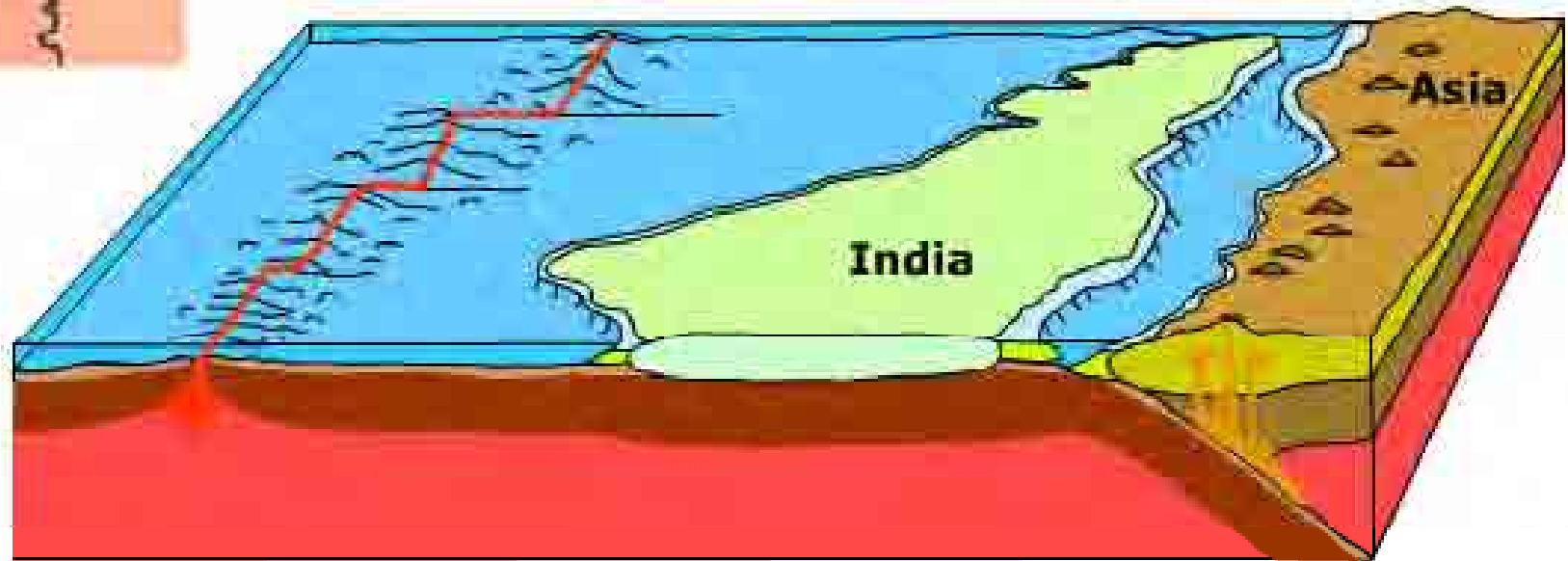






NORTHWARD MOVEMENT OF INDIA

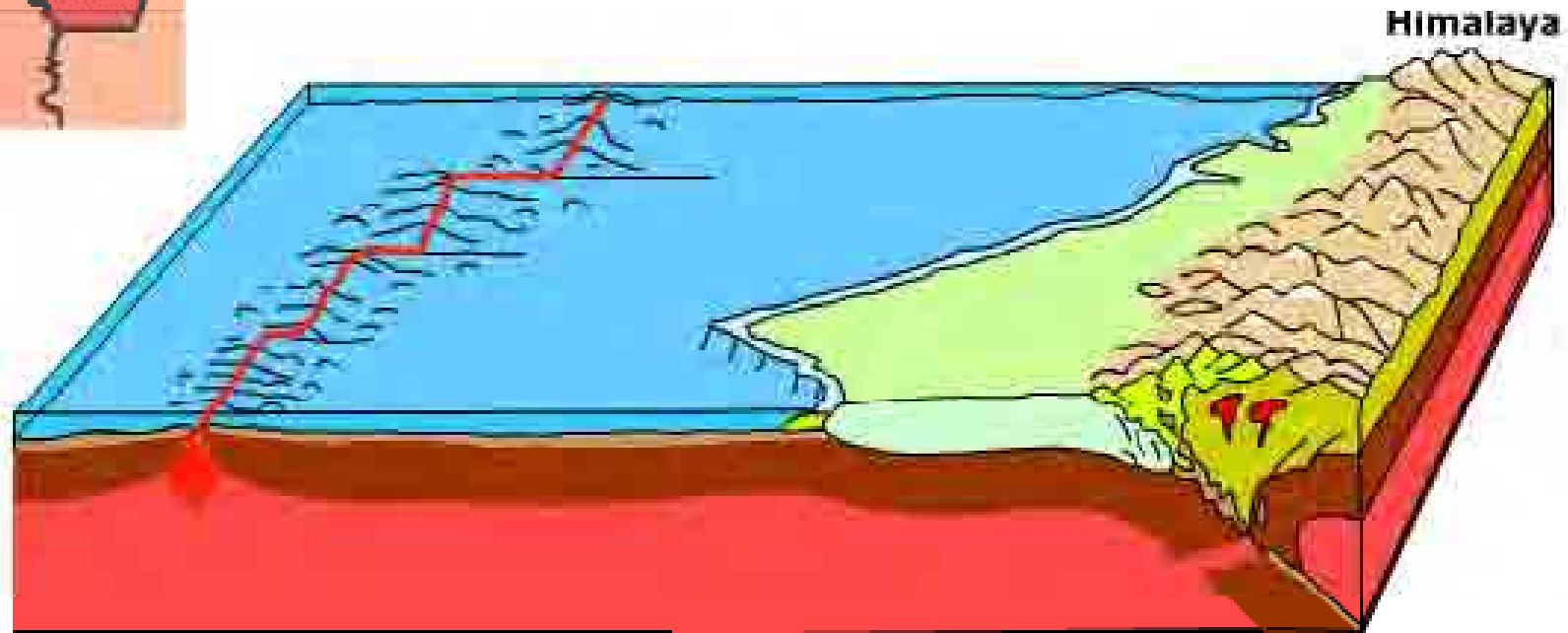
Converging plates - continental plate vs. continental plate



About 225 million years ago, India was a large island situated off the coast of Australia. The Tethys Sea, a large ocean, separated India from the Asian continent. When Pangaea broke apart about 200 million years ago, India began to move northward. About 40 to 50 million years ago India collided with the Eurasian continent. The northernmost part of the Indian continent was forced below

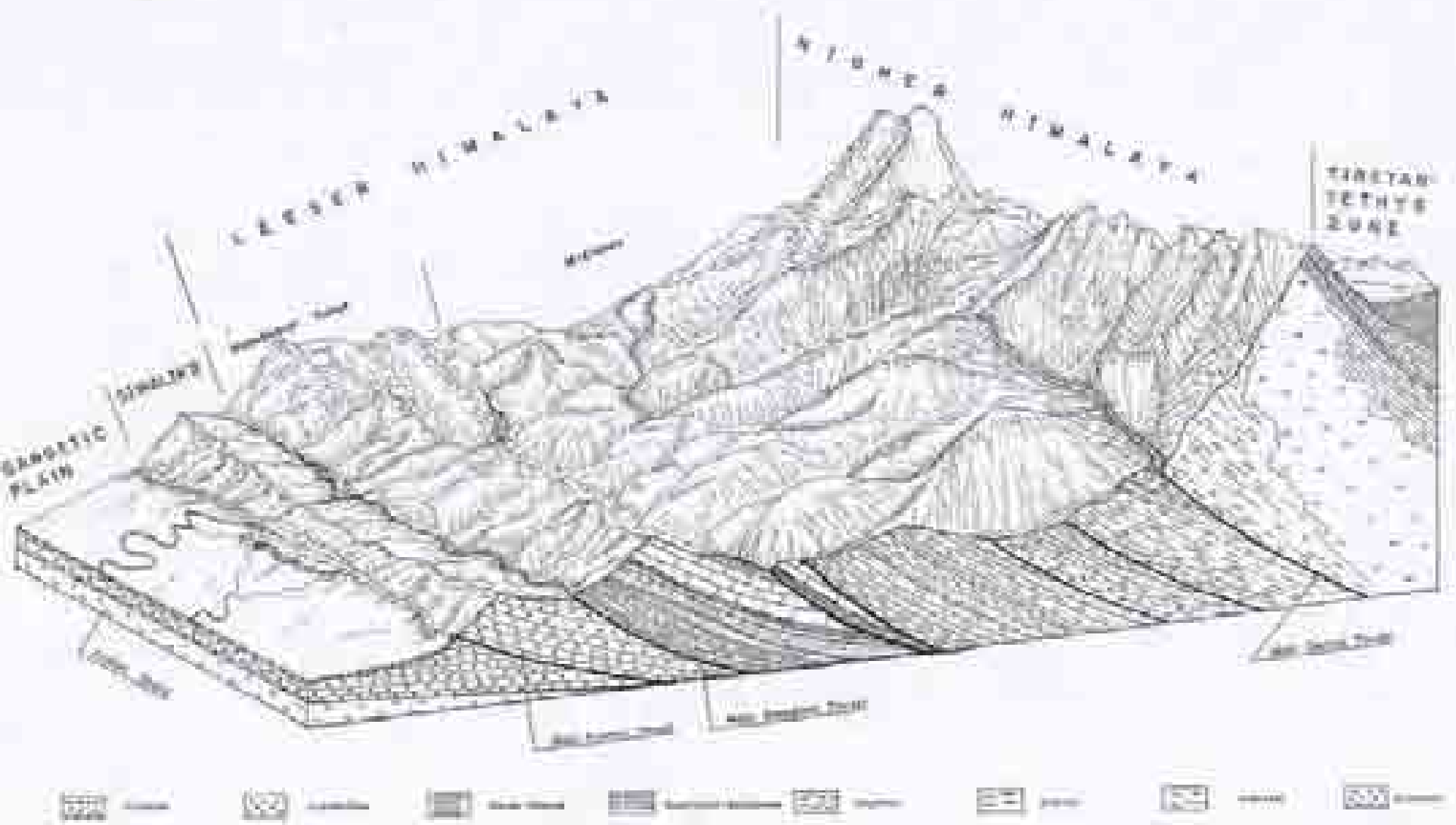
the Eurasian continent, which resulted in a thickening of the crust - the mountain chain Himalayas was formed. The collision between the two continents has not yet ended. The Indian continent is still moving northward, and the Himalayas continue to rise more than one cm per year.

Converging plates - continental plate vs. continental plate



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the Eurasian continent, which resulted in a thickening of the crust - the mountain chain Himalayas was formed. The collision between the two continents has not yet ended. The Indian continent is still moving northward, and the Himalayas continue to rise more than one cm per year.

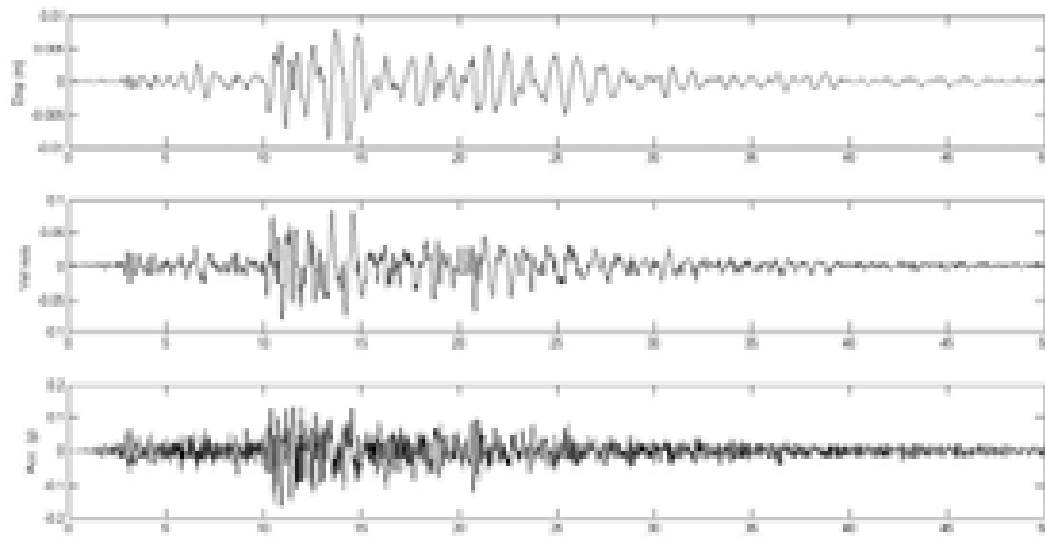


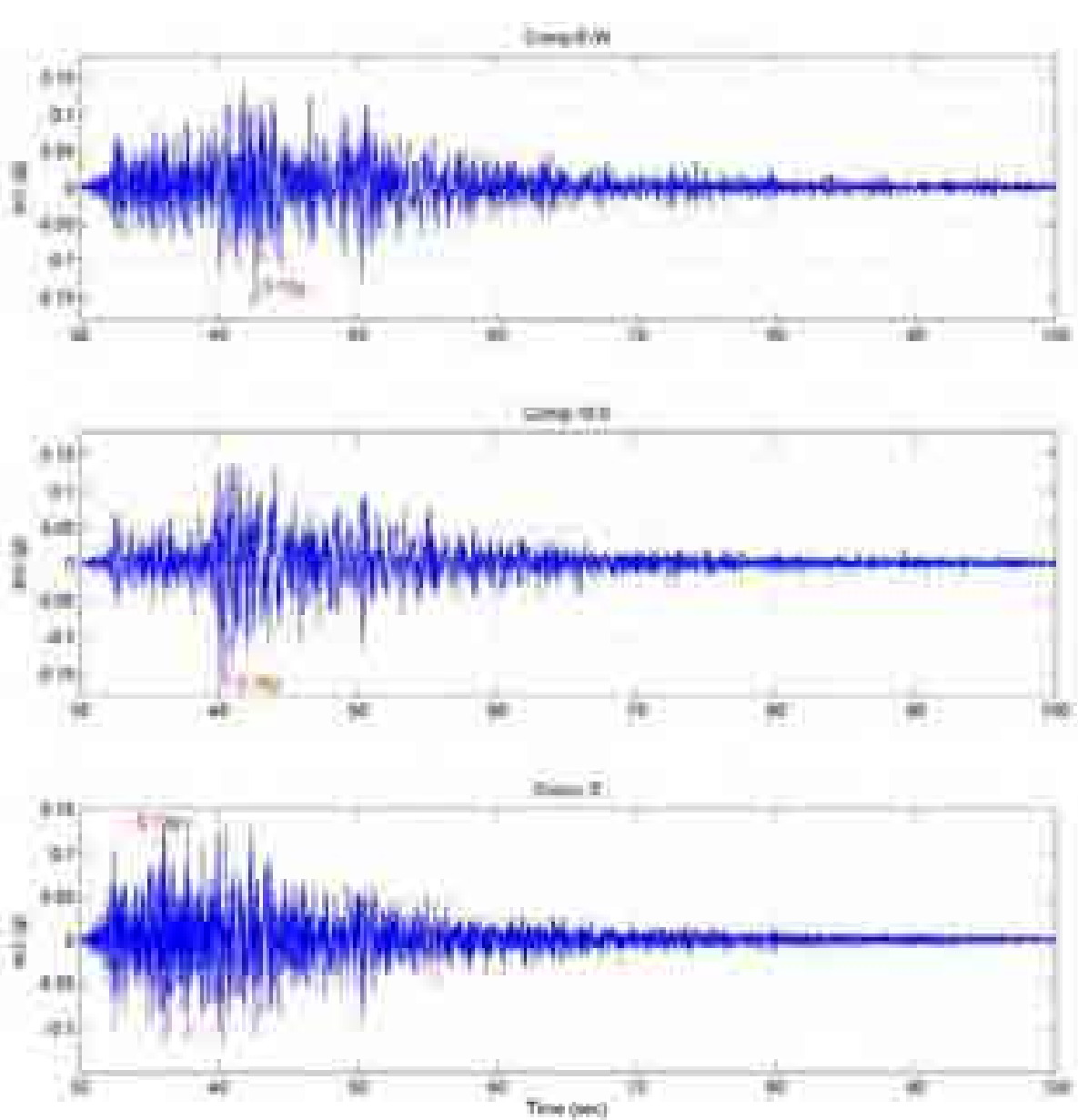
WHAT KIND OF FAULTS ARE THERE IN HIMALAYAS ?

Inter- and Intraplate Earthquakes

- ☞ Most earthquakes occur along plate margins because plate margins are relatively weak, but about 10% of earthquakes occur within the interior of plates.
- ☞ We classify earthquakes depending on where they are located
 - ◆ **Interplate** - between plates
 - ◆ **Intraplate** - within plates

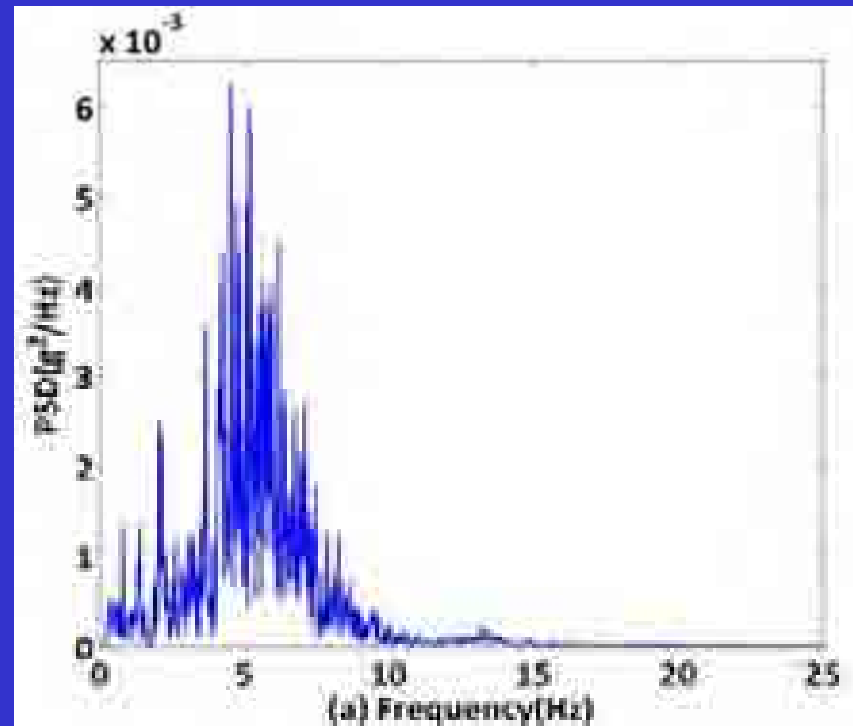
**SEISMIC HAZARD
STRUCTURAL SAFETY
EARTHQUAKE – GROUND
VIBRATION
(DISPLACEMENT, VELOCITY,
ACCELERATION TIME HISTORY)**





Most of our engineering structures have resonant vibration frequencies in 0.1 Hz – 10 Hz range.

NAT. FREQ. = $1/(0.1N)$,
 N =number of stories



The economic losses estimated for the period 1929-1950 due to earthquakes are in excess of US\$10 billion.

In the past 3 centuries over 3 million people have died due to earthquakes and earthquake related disasters.

2001 Bhuj earthquake – US\$ 5 Billion

2005 Kashmir earthquake - US \$5.2 billion

2008 China earthquake – US \$75 Billion

2011 Japan Earthquake – US \$ 300 Billion

2014 Indian Budget – \$ 301 Billion dollars

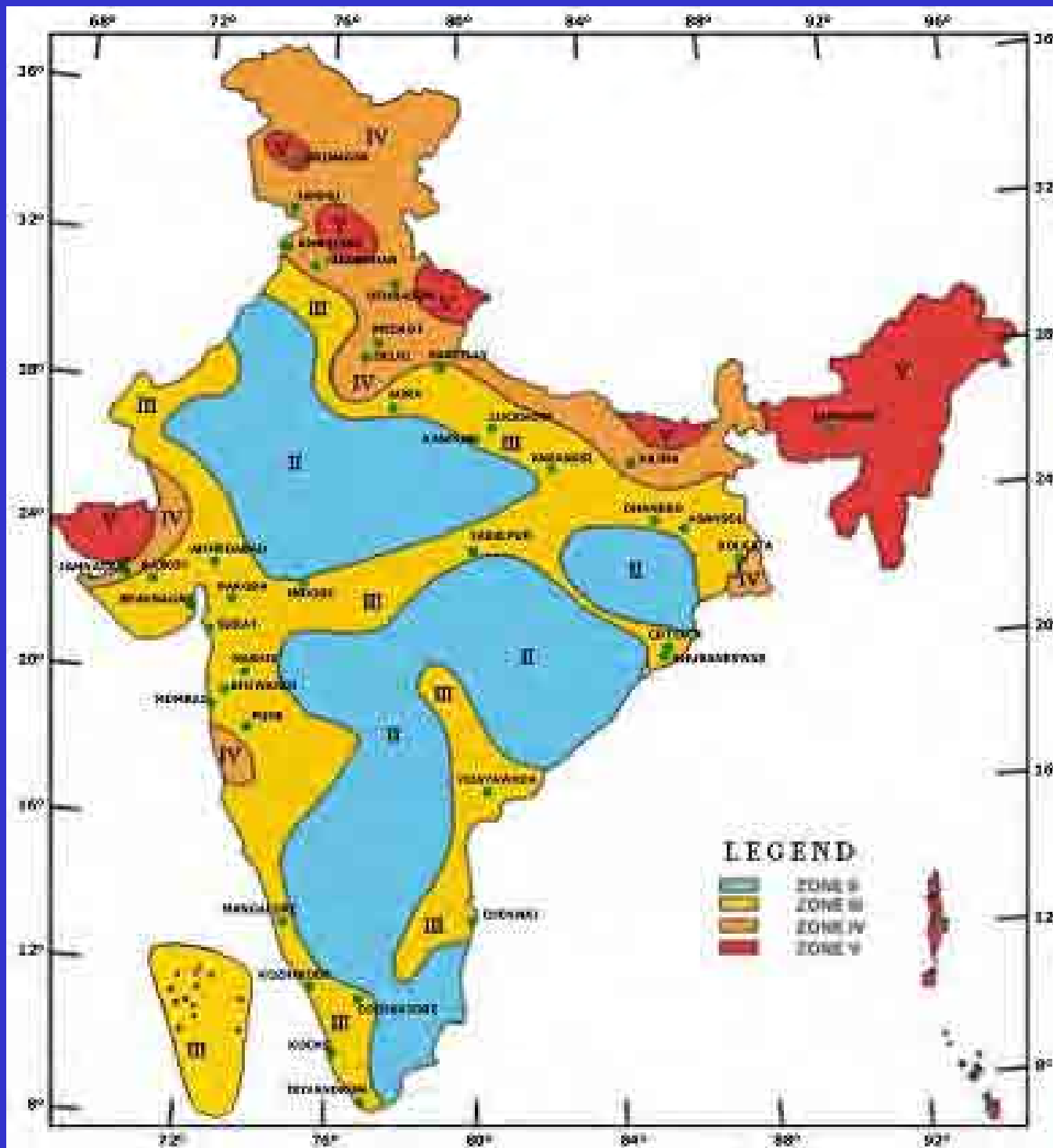
The next great earthquake in a major metropolitan region can cause damage at the multi-trillion dollar level

Table IV. Estimates of current disasters if repeats of historic earthquakes should happen. Expected deaths are calculated by QUAKELOSS, the reported numbers are from the IDD.

Date	Time (GMT)	Location	Latitude (degree)	Longitude (degree)	Depth (km)	<i>M</i>	Expected deaths	Reported deaths
1897/06/12	11:06	Shillong	26.0	91.0	20	8.3	90,000	1,542
1905/04/05	00:50	Kangra	32.1	76.4	25	8.0	70,000	20,000
1934/01/15	08:43	Bihar	27.55	87.09	30	8.1	18,000	6,000 (10,500)*
1950/08/15	14:09	Assam	28.5	96.5	30	8.6	40,000	1,500

Table II. Estimated human losses due to scenario earthquakes along the Himalayan plate boundary. Latitude, Longitude, depth, and magnitude, *M*, are assumed, based on parameters of historic earthquakes and the tectonic setting. The range of deaths and injured includes two standard deviations from the mean. The number of settlements expected to experience shaking of intensity, *I*, larger than 7 and 5, represents those where some people may be killed and those affected by the earthquake, respectively.

	Location	Latitude (degree)	Longitude (degree)	Depth (km)	<i>M</i>	Expected deaths (thousands)	Number injured (thousands)	No. settle $I \geq 7$	No. settle $I \geq 5$
1	Assam	27.8	92.3	25	8.1	24-49	52-99	160	1900
2	Bhutan	27.3	89.5	25	8.1	76-151	163-274	270	2500
3	Katmandu	28.1	84.2	25	8.1	21-42	45-86	330	2600
4	W. Nepal	28.7	81.8	25	8.1	11-22	24-53	370	2800
5	Garhwal	29.7	79.6	25	8.1	58-115	125-230	380	3000
6	Dehra Dun	30.7	77.7	25	8.1	96-199	210-433	450	3300
7	Kashmir	33.0	75.0	25	8.1	67-137	146-293	550	4000

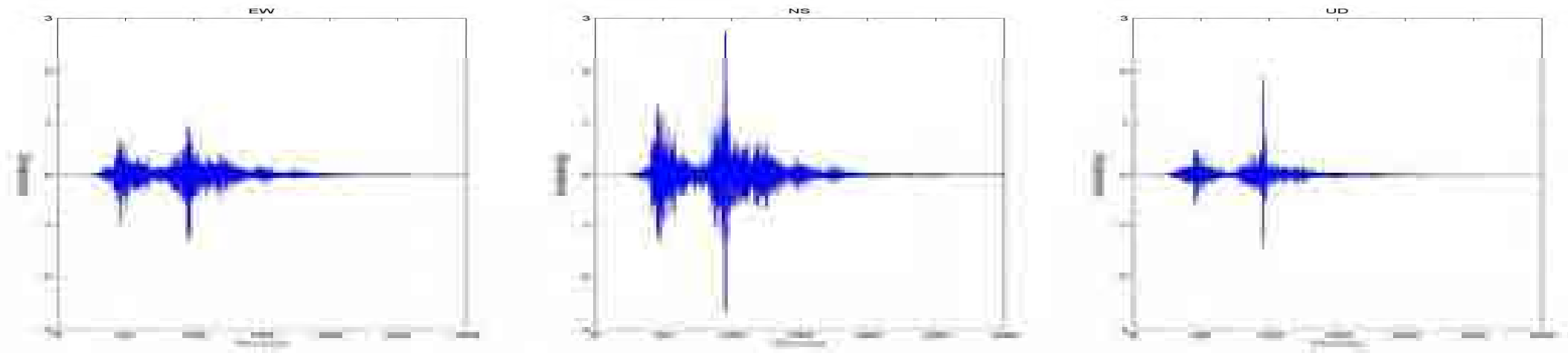
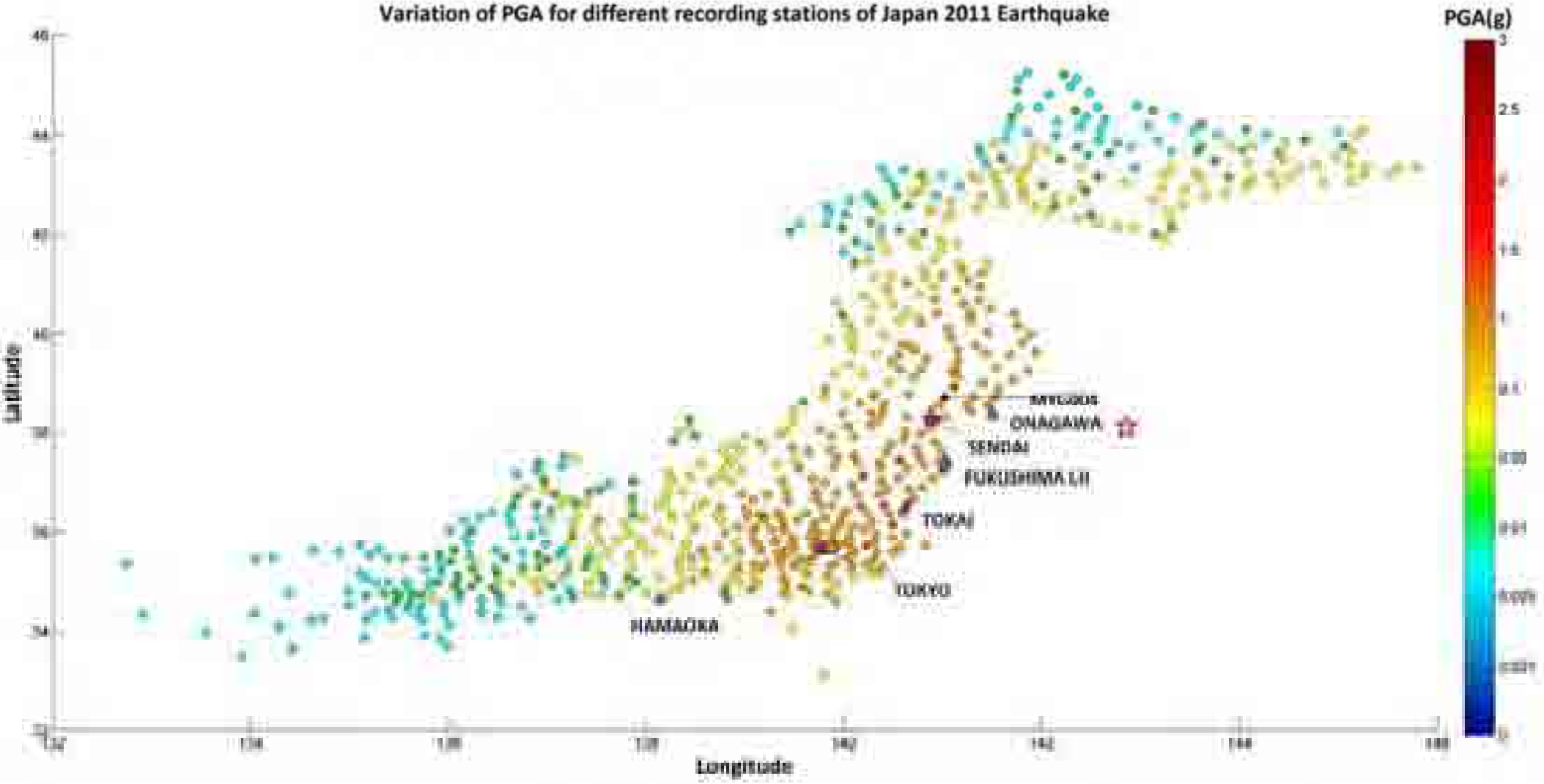


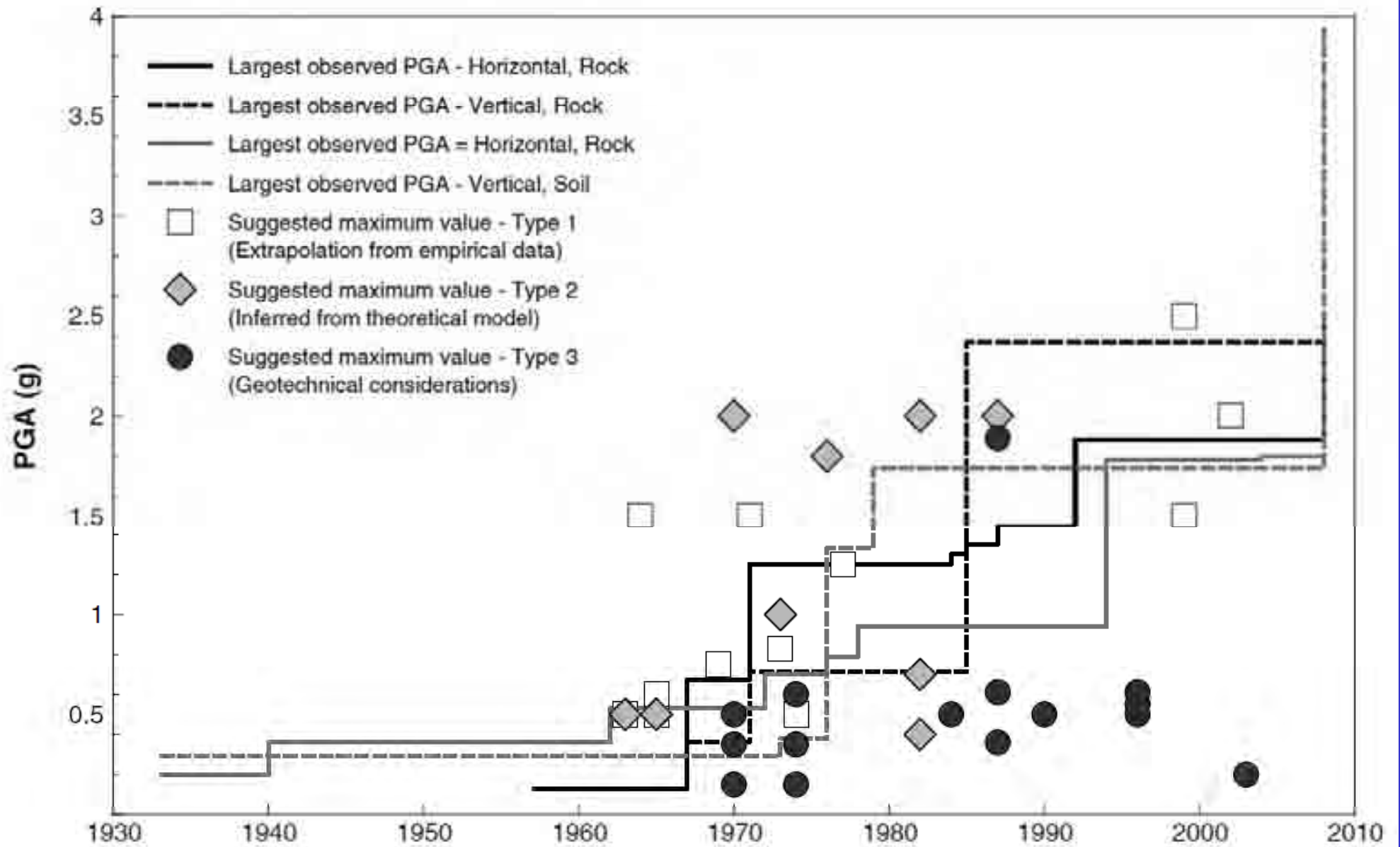
Seismic zone map of India (IS 1893 (Part 1) : 2002)

Zone	PGA
II	0.1g
III	0.16g
IV	0.24g
V	0.36g

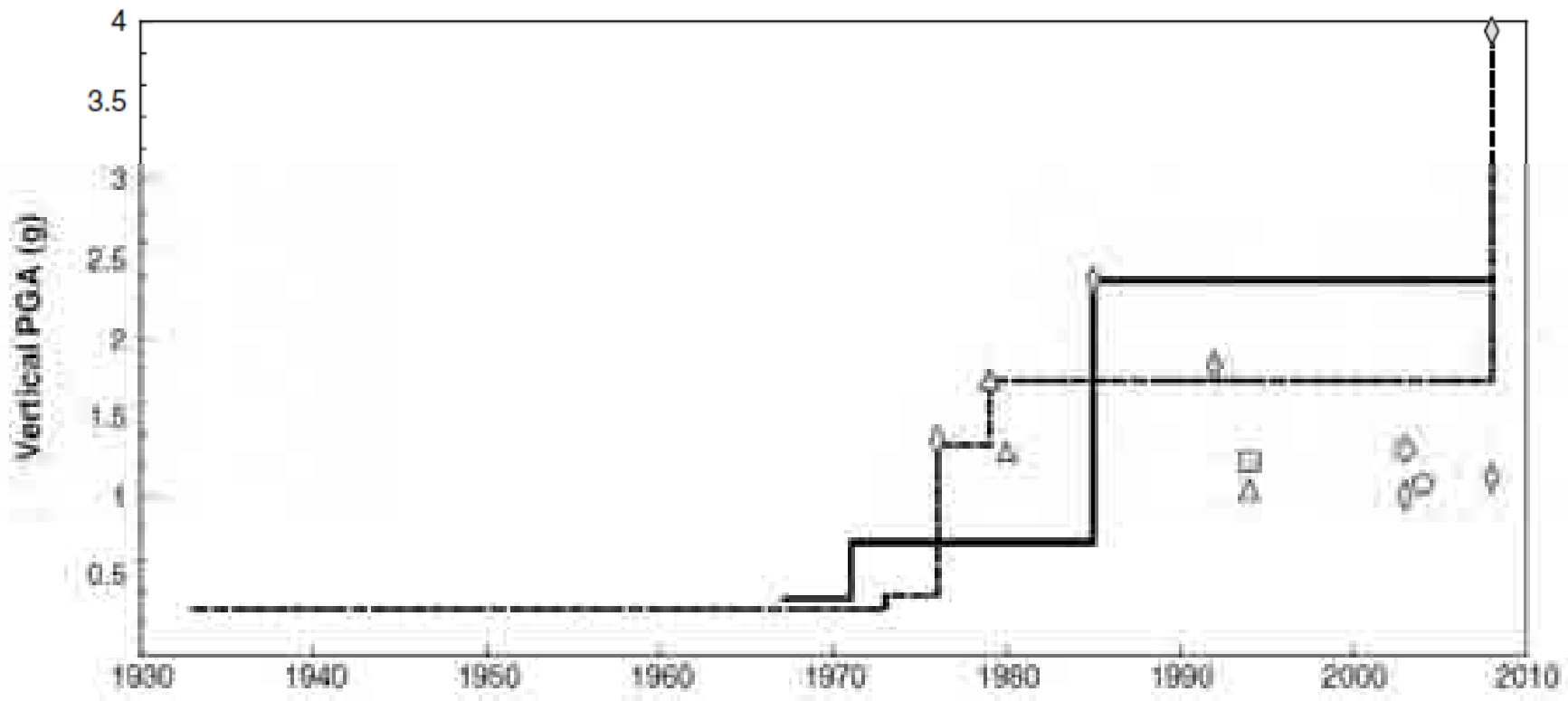
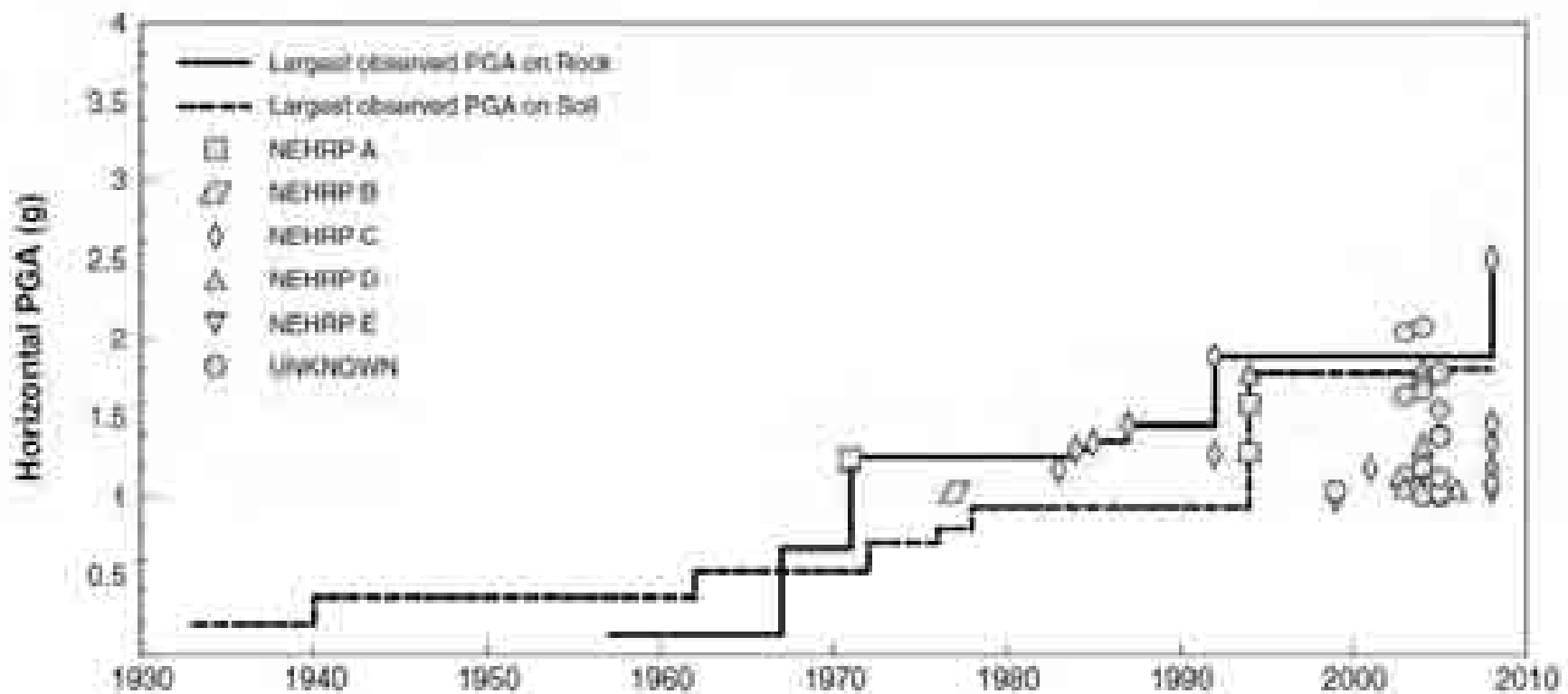
STRUCTURES HAS TO
BE SAFE IN
FUTURE -
UNCERTAINTY

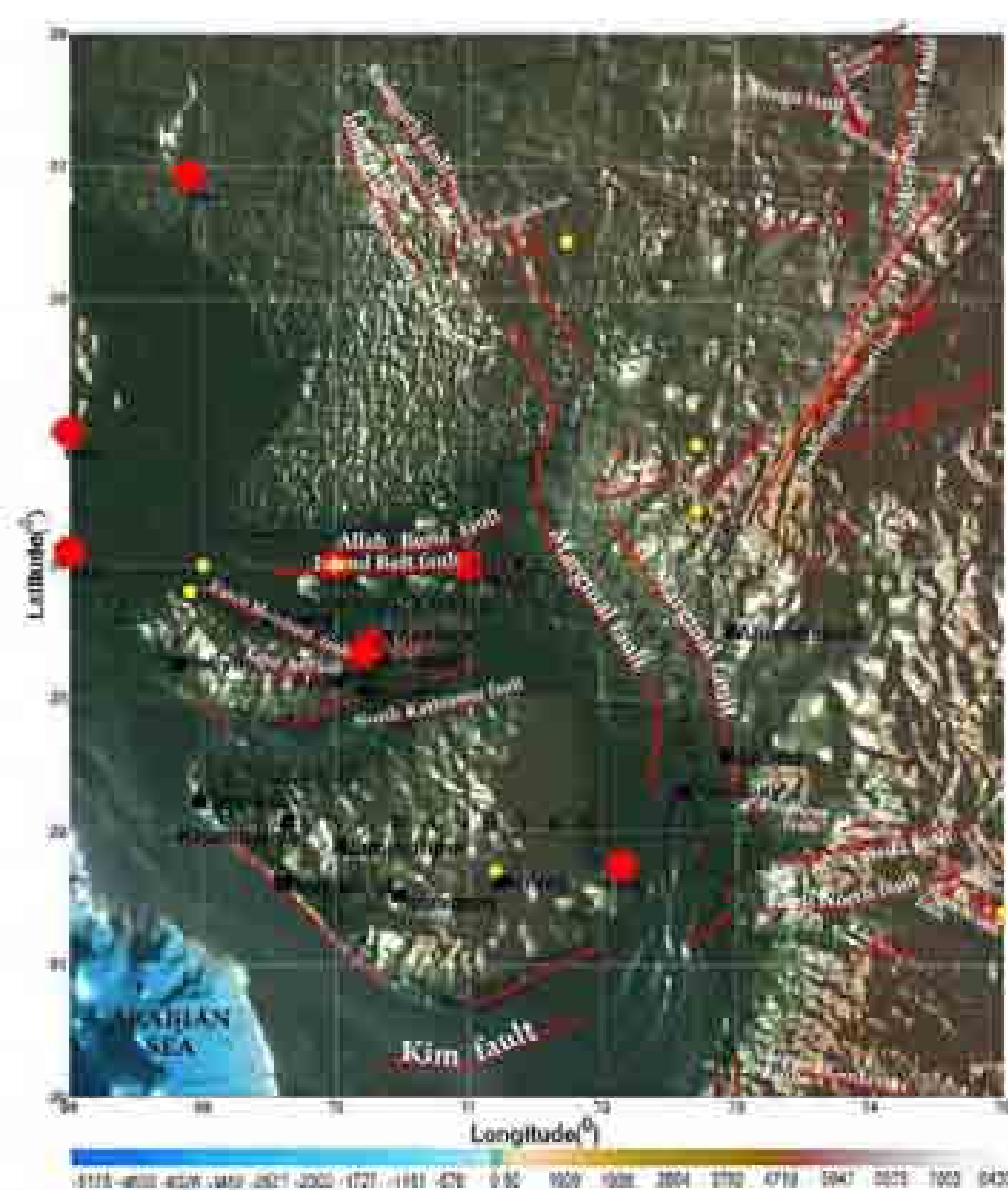
Variation of PGA for different recording stations of Japan 2011 Earthquake





Strasser and Bommer (2009)





EARTHQUAKE CAN OCCUR ON ANY FAULT IN FUTURE

DESIGN FOR MAXIMUM VALUE – Too Costly

DESIGN FOR MINIMUM VALUE – Unsafe

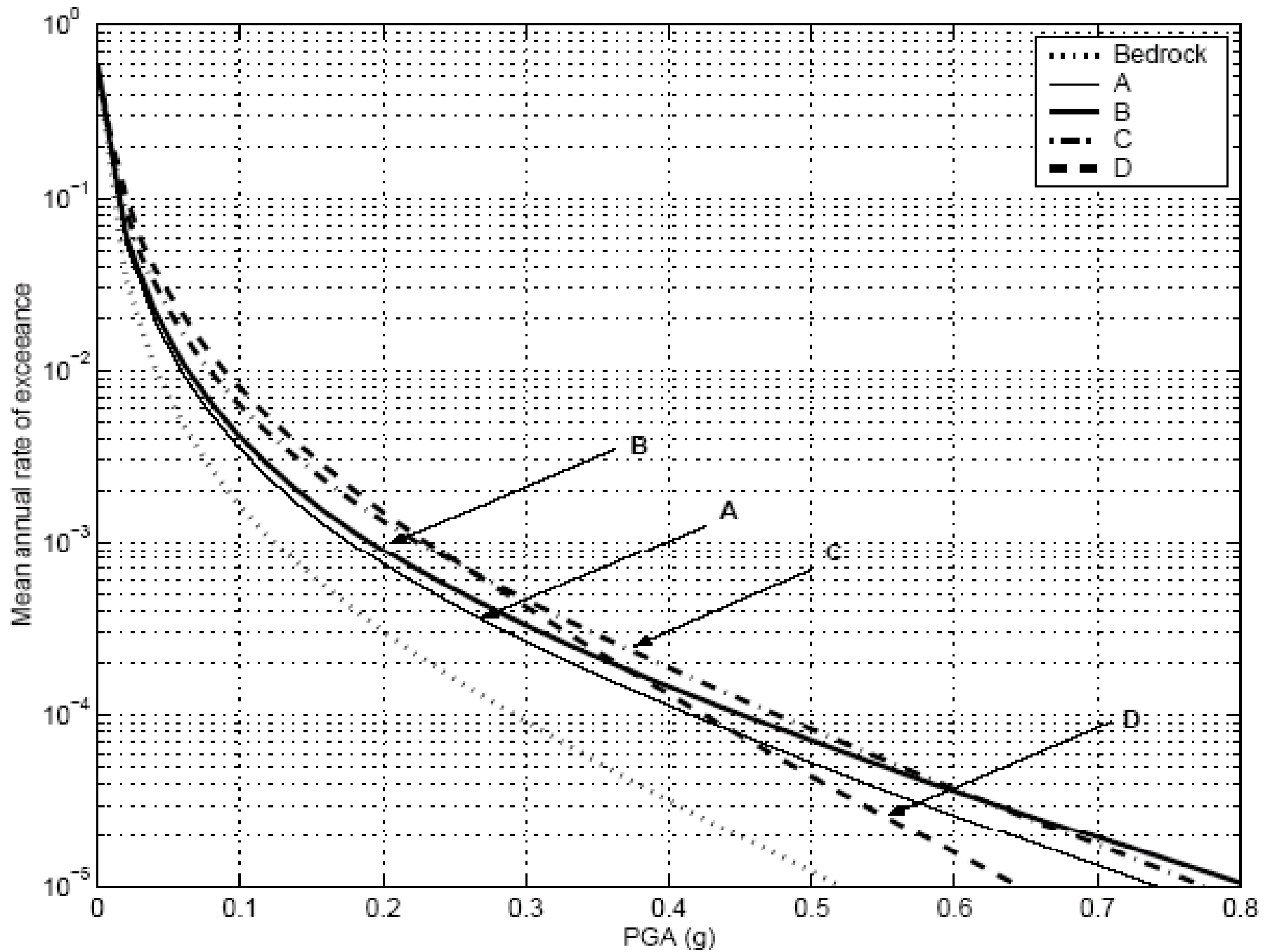
How to Take a decision ?

Nuclear reactors, Historical monuments - life time is high

Apartments – Life time (50 Yrs)

Design Value – Probability or Frequency

Cover the Risk - Insurance



Seismic Hazard Curve for Mumbai city

(Requirement for Engineers)

ENGINEERING SEISMIC RISK ANALYSIS

BY C. ALLIN CORNELL

ABSTRACT

This paper introduces a method for the evaluation of the seismic risk at the site of an engineering project. The results are in terms of a ground motion parameter (such as peak acceleration) versus average return period. The method incorporates the influence of all potential sources of earthquakes and the average activity rates assigned to them. Arbitrary geographical relationships between the site and potential point, line, or areal sources can be modeled with computational ease. In the range of interest, the derived distributions of maximum annual ground motions are in the form of Type I or Type II extreme value distributions, if the more commonly assumed magnitude distribution and attenuation laws are used.

INTRODUCTION

Owing to the uncertainty in the number, sizes, and locations of future earthquakes it is appropriate that engineers express seismic risk, as design winds or floods are, in terms of return periods (Blume, 1965; Newmark, 1967; Blume, Newmark and Corning, 1961; Housner, 1952; Muto, Bailey and Mitchell, 1963; Gsovsky, 1962).

The engineer professionally responsible for the aseismic design of a project must make a fundamental trade-off between costly higher resistances and higher risks of economic loss (Blume, 1965). It requires assessment of the various levels of performance and economic implications of particular designs subjected to various levels of intensity of ground motion. The engineer must consider the performance of the system under moderate as well as large motions. Sound design often suggests some economic loss (e.g., architectural damage in buildings, automatic shut-down costs in nuclear power plants) under these moderate, not unexpected earthquake effects.

This engineer should have available all the pertinent data and professional judgment of those trained in seismology and geology in a form most suitable for making this decision wisely. This information is far more usefully and completely transmitted through a plot of, say, Modified Mercalli intensity versus average return period than through such ill-defined single numbers as the "probable maximum" or the "maximum credible" intensity. Even well-defined single numbers such as the "expected lifetime maximum" or "50-year" intensity are insufficient to give the engineer an understanding of how quickly the risk decreases as the ground motion intensity increases. Such information is crucial to well-balanced engineering designs, whether it is used informally

SEISMIC HAZARD CURVE

Magnitude



Distance from the seismic source



GROUND MOTION

What is the Frequency of Occurrence of earthquakes ?

Frequency of 6 magnitude earthquake on a particular seismic source?

Frequency of 7 magnitude earthquake ?

Frequency of 8 ?

$$\mu_{y^*} = \sum_{i=1}^K N_i(m_0) \int \int_{m,r} P(Y > y^* | m, r) P_{R|M}(r | m) P_M(m) dr dm$$

Activity rate of i^{th} fault

Ground motion

Location of fault

Magnitude

K = Number of faults



DEVELOPMENT OF
PROBABILISTIC SEISMIC HAZARD MAP OF INDIA
TECHNICAL REPORT



March 2011



NATIONAL DISASTER MANAGEMENT AUTHORITY
GOVERNMENT OF INDIA

WCE

Prof. R.N. Iyengar, (Chairman)
Prof. D.K. Paul,
Dr. R.K. Bhandari,
Prof. Ravi Sinha,
Dr. R.K. Chadha
Dr. Prabhas Pande,
Prof. CVR Murthy,
Dr. A.K. Shukla (Member-Secretary)

Project Team

Dr.STG Raghukanth

CSIR – SERC

<http://www.ndma.gov.in/en/study-reports-of-mitigation-division.html>

PSHA METHODOLOGY

- 1. Identification of seismic sources and geological zones**
- 2. Earthquake catalogue**
- 3. Recurrence relationships**
- 4. Strong motion attenuation relationships**
- 5. Seismic hazard analysis**





www.sefindia.org

HISTORICAL AND PALEO-EVENTS

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Kumar, S., Wesnouskey, S.G., Rockwell, T.K., Ragona, D., Thakur V.C. and Seitz, G.G. (2001),

Lave, J., Yule, D., Sapkota, S., Basant, K., Madden, C., Attal, M., Pandey, R. (2005)

Sukhija, BS et al (2006), Rao, B. R., and Rao, P. S. (1984).

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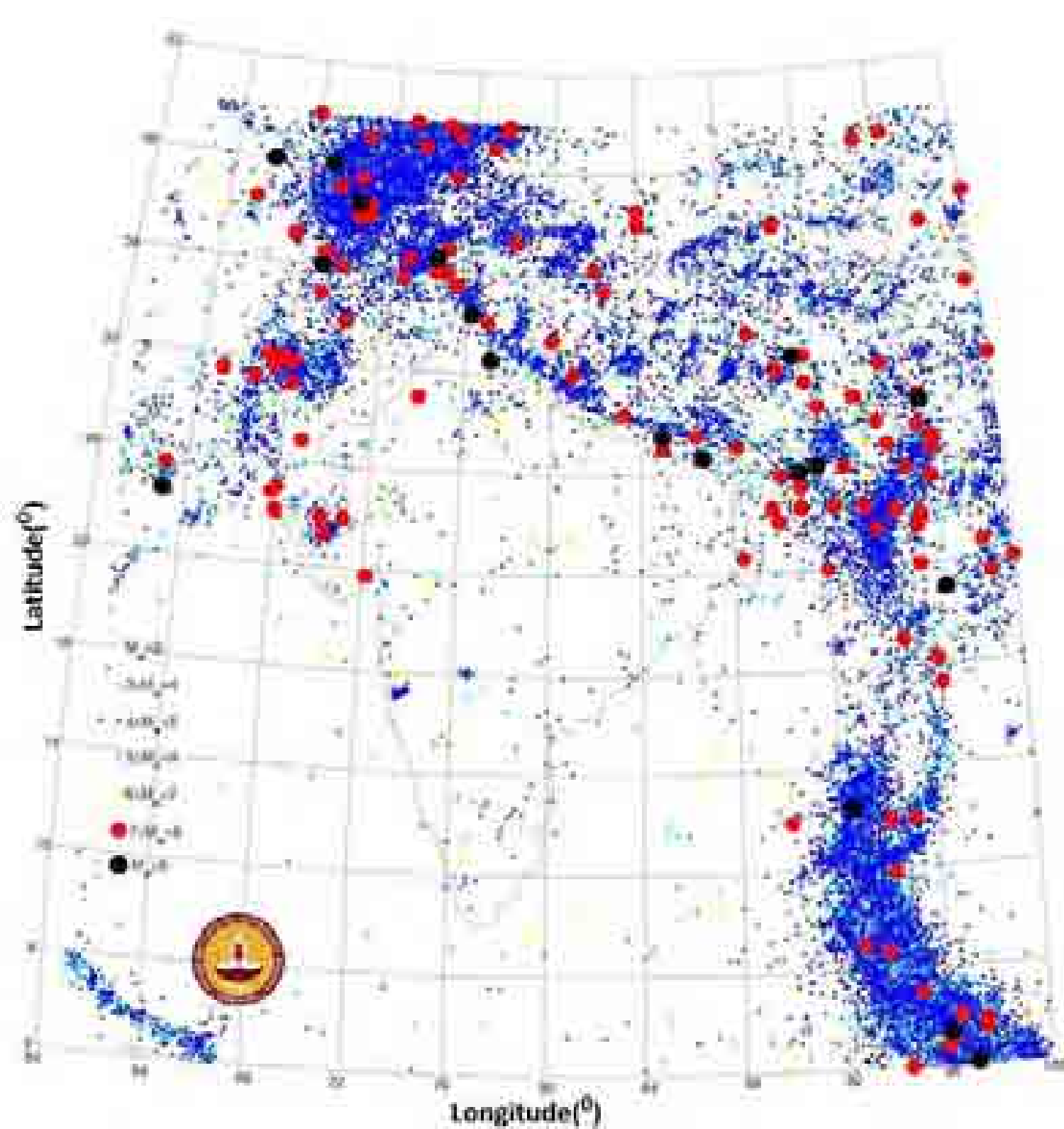
Ambraseys, N., and D. Jackson (2003)

Bilham, R. S. Lodi, S. Hough, S. Bukhary, Abid Murtaza Khan, and S.F.A. Rafeeqi, (2007)

De Ballore, Count F. De Montessus (1911).

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Jaiswal, K. & Sinha, R., 2004. Web portal on earthquake disaster awareness in India, www.earthquakeinfo.org

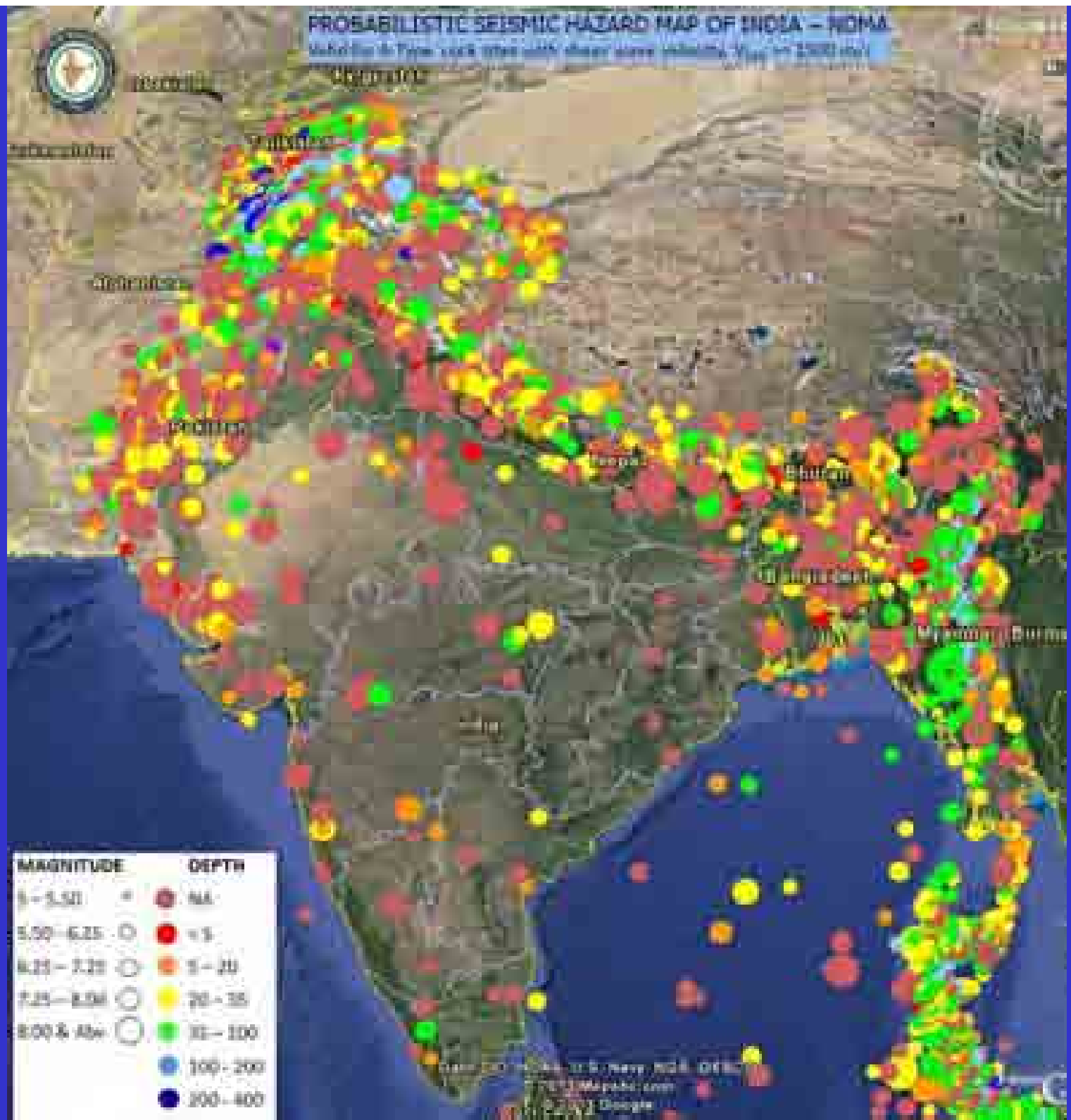


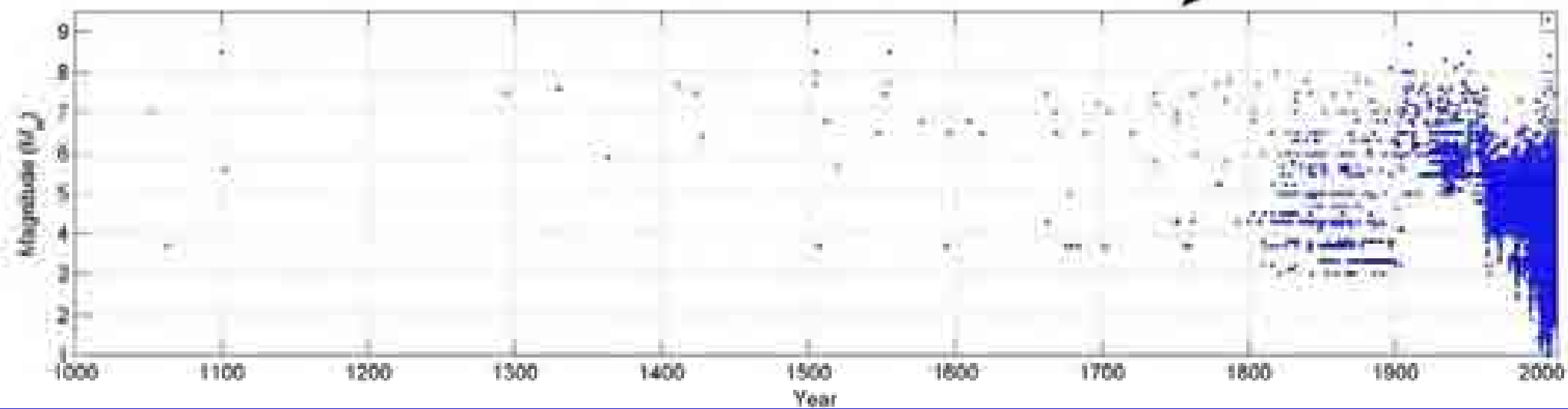
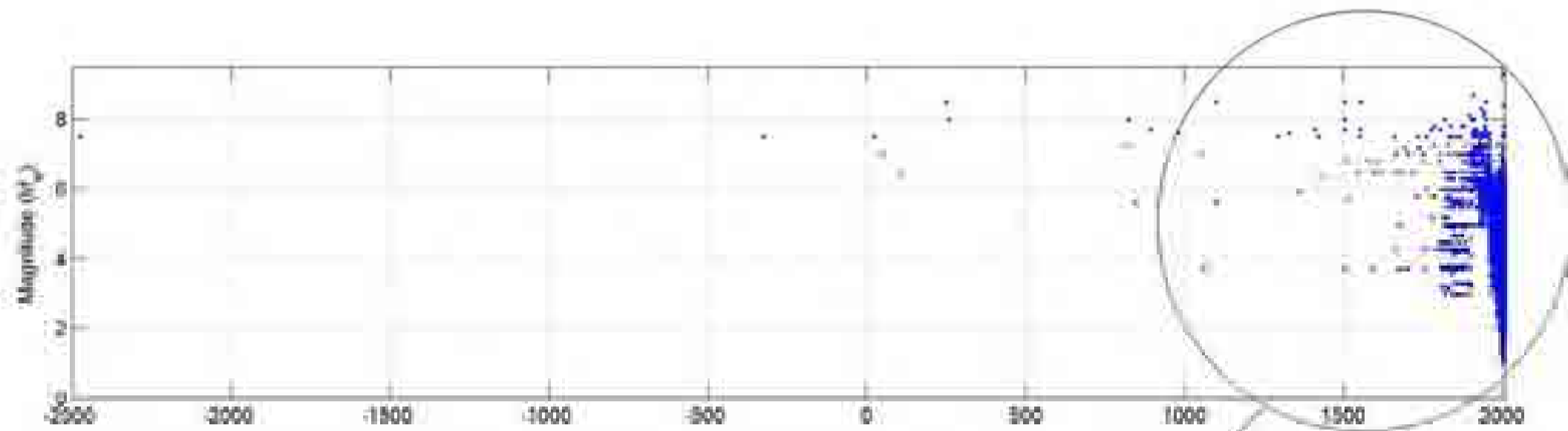
Assembled
catalogue
2474 BC -
2008
38,860
events

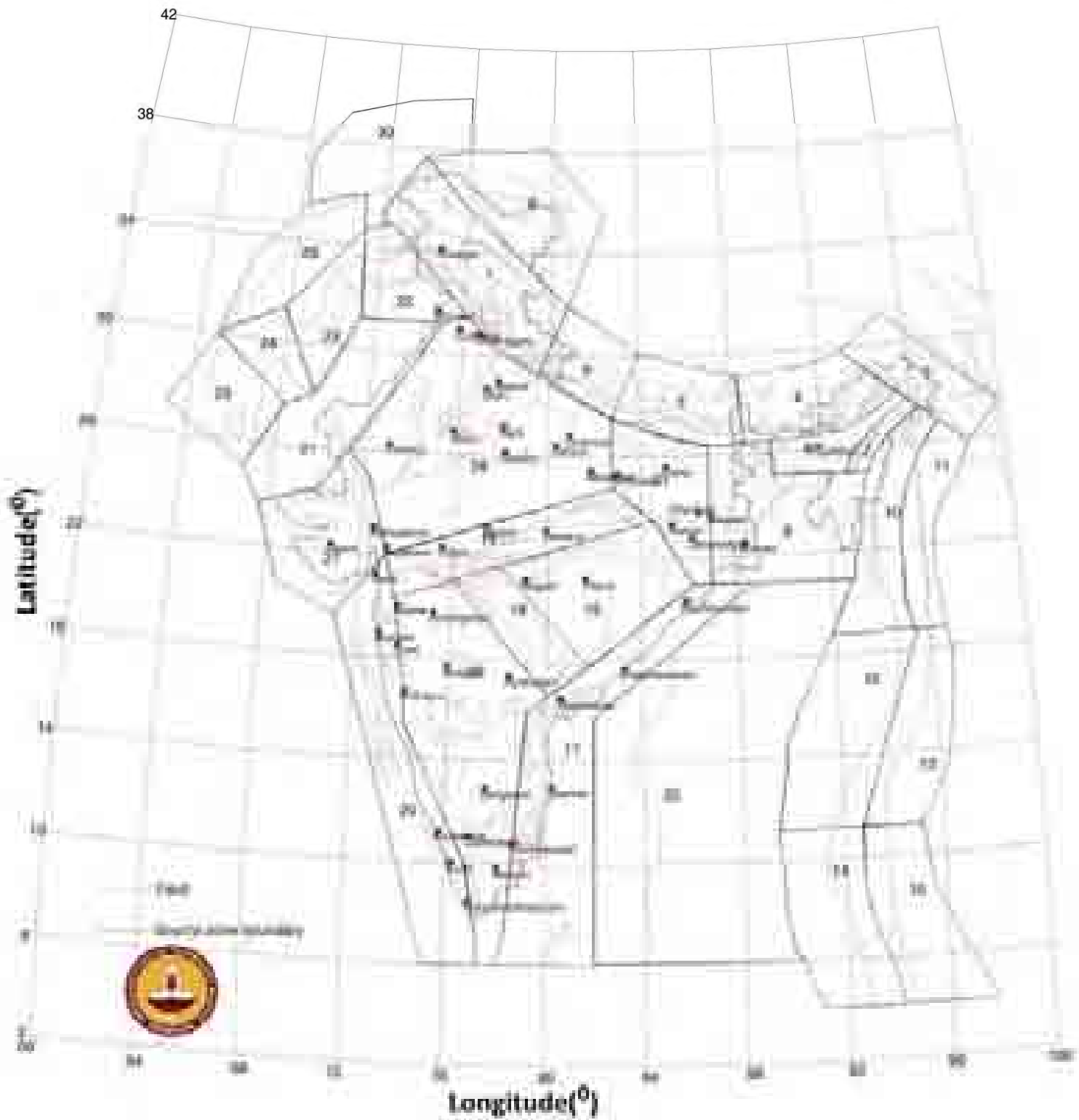
The uncertainty in the reported magnitudes is taken as 0.5 in the extreme part. For the complete part the magnitude uncertainty is assumed to be 0.3.

PROBABILISTIC SEISMIC HAZARD MAP OF INDIA – NDMA

Method: 4-Term 1998 model with decay curve (Miyatake, 1998) (Miyatake)

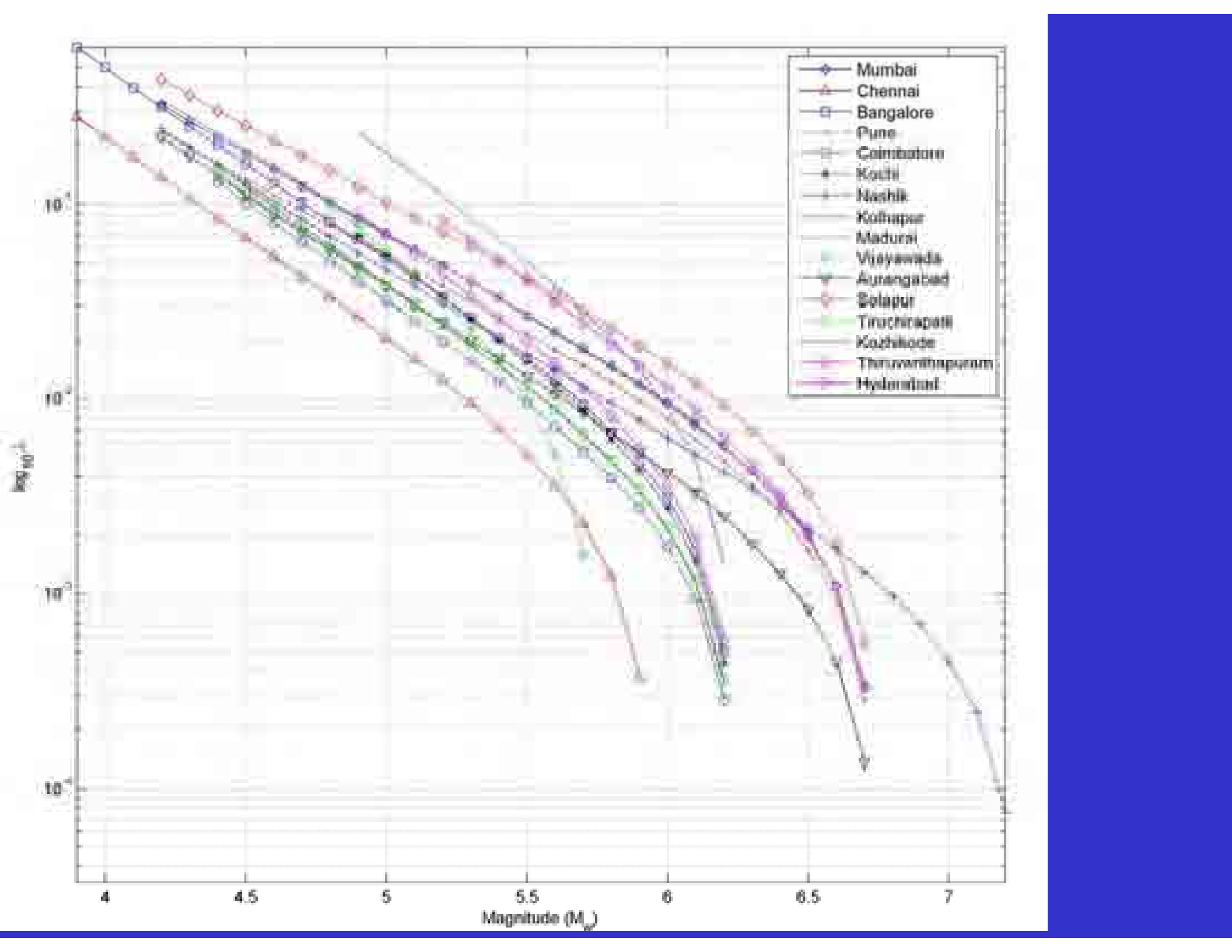


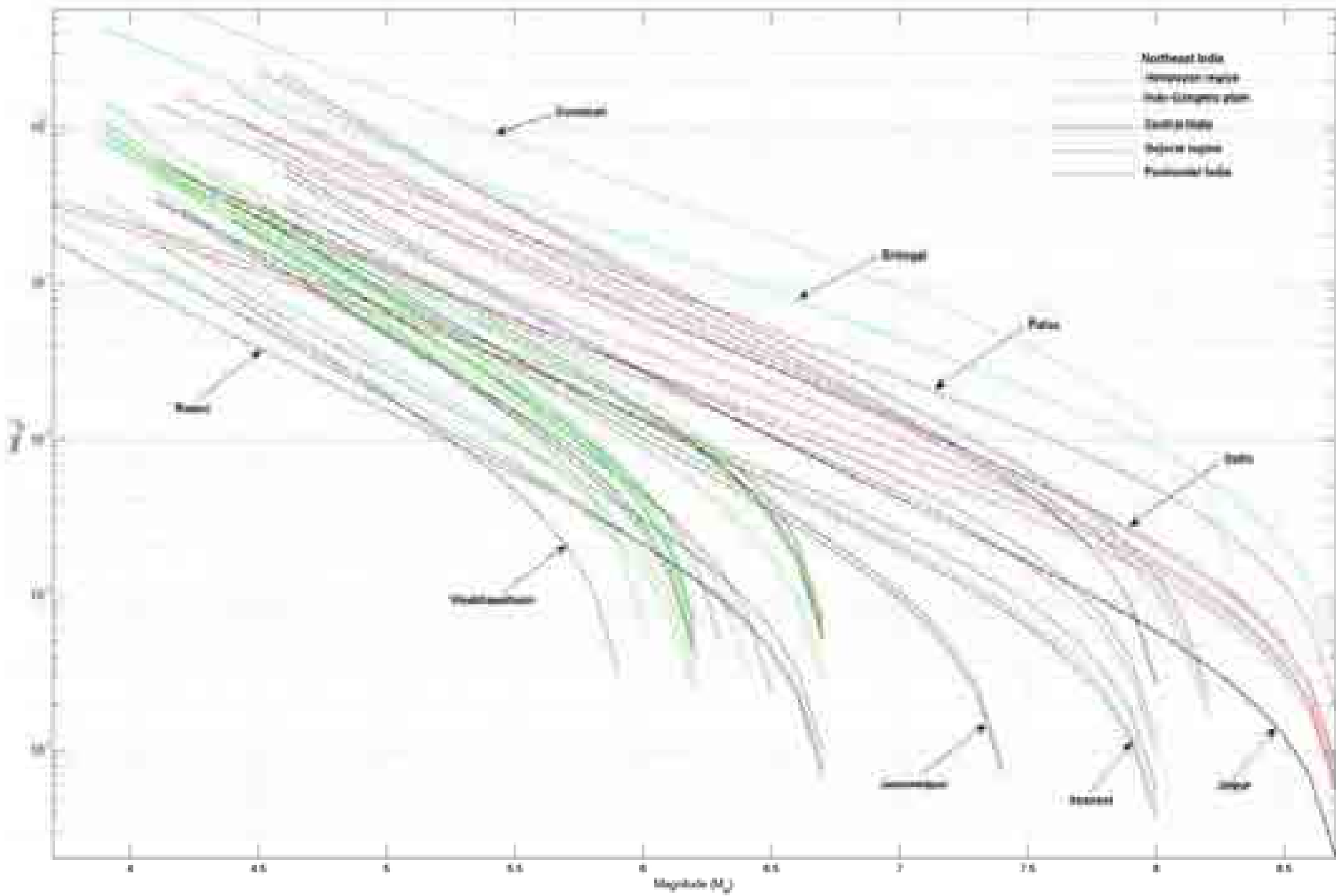


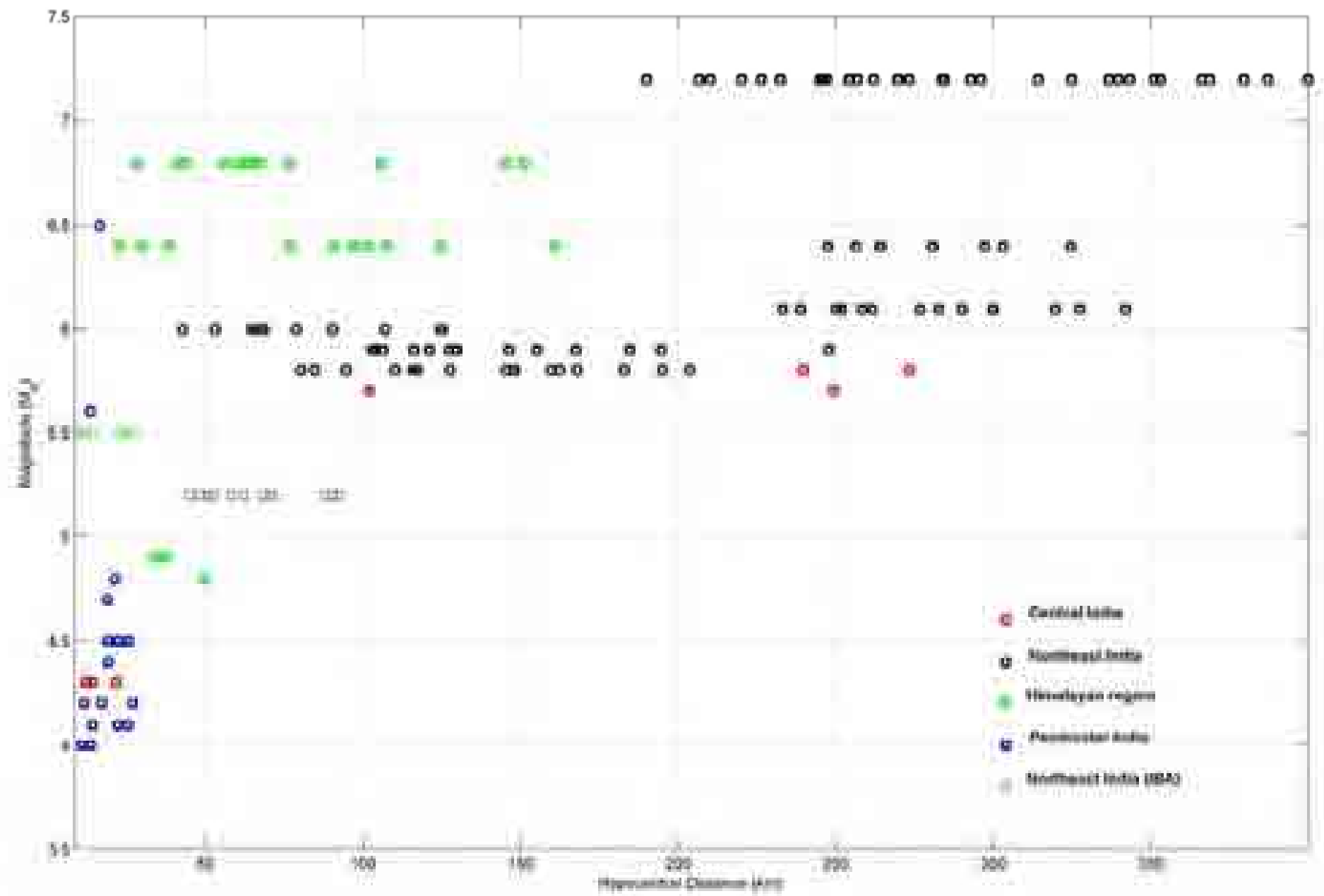


Source No.	Zones	<i>b</i> -value	<i>N</i> (4)	Max. Potential Magnitude (<i>M</i> _{max})	No. of earthquakes
1	Western Himalaya	0.88±0.02	5.37	8.8	901
2	Central Himalaya-I	0.73±0.04	3.15	7.8	306
3	Central Himalaya-II	0.78±0.04	2.30	8.8	340
4	Eastern Himalaya	0.71±0.04	3.12	8.0	223
5	Mishmi Block	0.66±0.03	3.72	8.8	219
6	Altya Togh & Karakoram	0.91±0.03	7.10	7.3	726
7	Naga Thrust	0.67±0.08	0.18	6.8	32
8	Shillong Plateau & Assam valley	0.73±0.04	1.46	8.4	181
9	Bengal Basin	0.74±0.04	1.99	8.1	289
10	Indo-Burmese Arc	0.80±0.02	11.40	7.8	1055
11	Shan-Sagaing Fault	0.66±0.04	5.28	8.1	260
12	West Andaman-I	0.70±0.03	3.62	8.4	239
13	East Andaman-I	0.63±0.03	5.83	7.5	331
14	West Andaman-II	0.71±0.02	2.55	7.5	158
15	East Andaman-II	0.62±0.01	16.53	7.6	985
16	SONATA	0.64±0.08	0.24	6.8	24

17	Eastern Passive Margin	0.74±0.08	0.27	6.1	40
18	Mahanandi Graben & Eastern Craton	0.77±0.09	0.24	5.3	15
19	Godavari Graben	0.85±0.09	0.13	6.0	10
20	Western Passive Margin	0.76±0.07	0.37	6.8	70
21	Sindh-Punjab	0.77±0.06	0.60	8.0	89
22	Upper Punjab	1.01±0.05	1.68	7.8	224
23	Koh-e-Sulaiman	0.84±0.04	5.03	7.3	358
24	Quetta-Sibi	0.74±0.04	5.22	7.8	293
25	Southern Baluchistan	0.74±0.05	2.58	7.3	190
26	Eastern Afghanistan	0.89±0.04	5.59	8.3	534
27	Gujarat Region	0.87±0.06	1.31	8.0	93
28	Aravali-Bundelkhand	0.81±0.06	1.16	7.0	114
29	Southern Craton	1.19±0.08	0.47	6.8	45
30	Hindukush and Pamirs	0.93±0.01	83.54	8.0	6790
31	Gangetic region	0.84±0.09	0.17	6.3	25
32	Bay of Bengal	0.60±0.08	0.49	6.7	53







SMA DATA IN INDIA

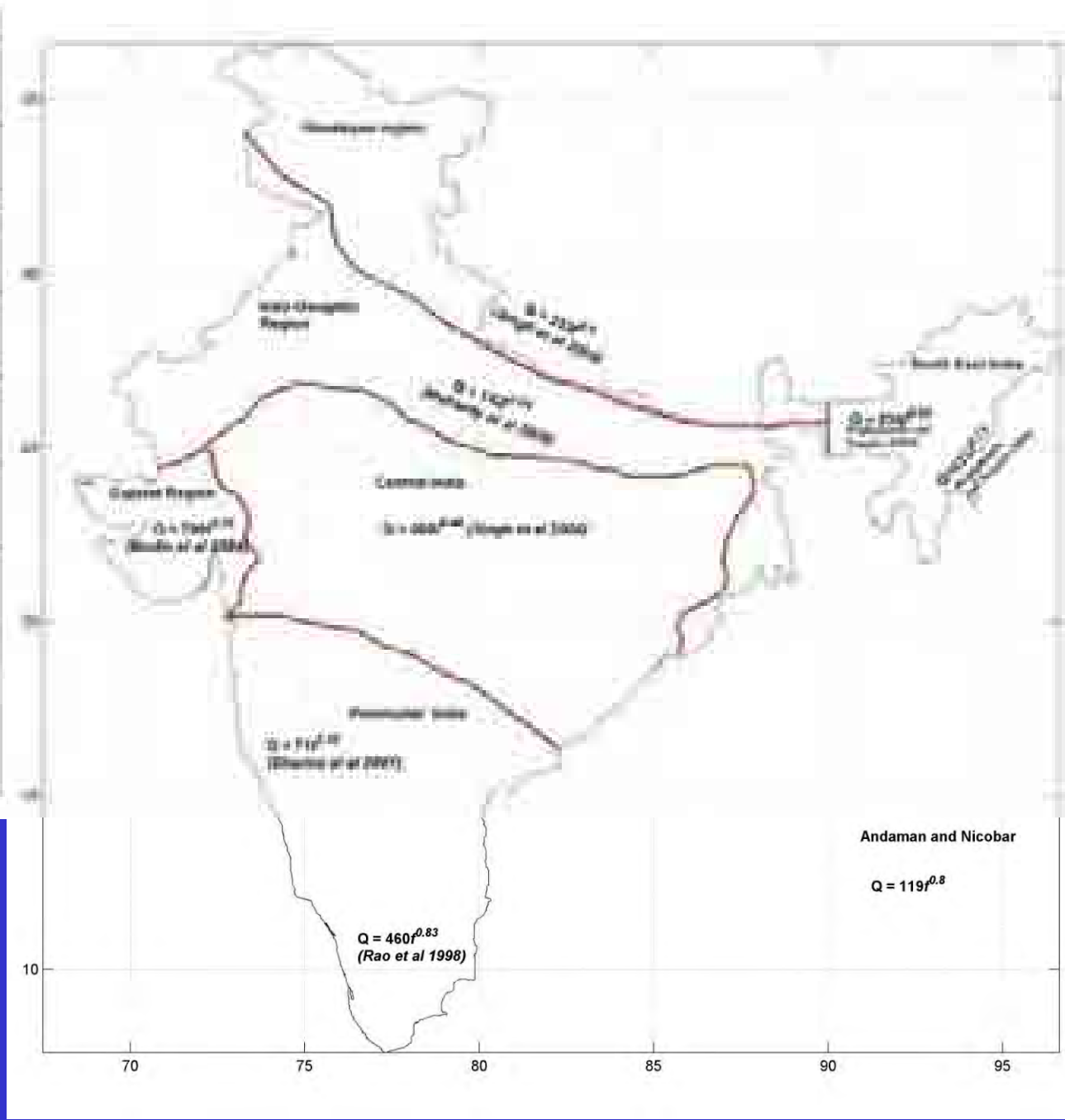
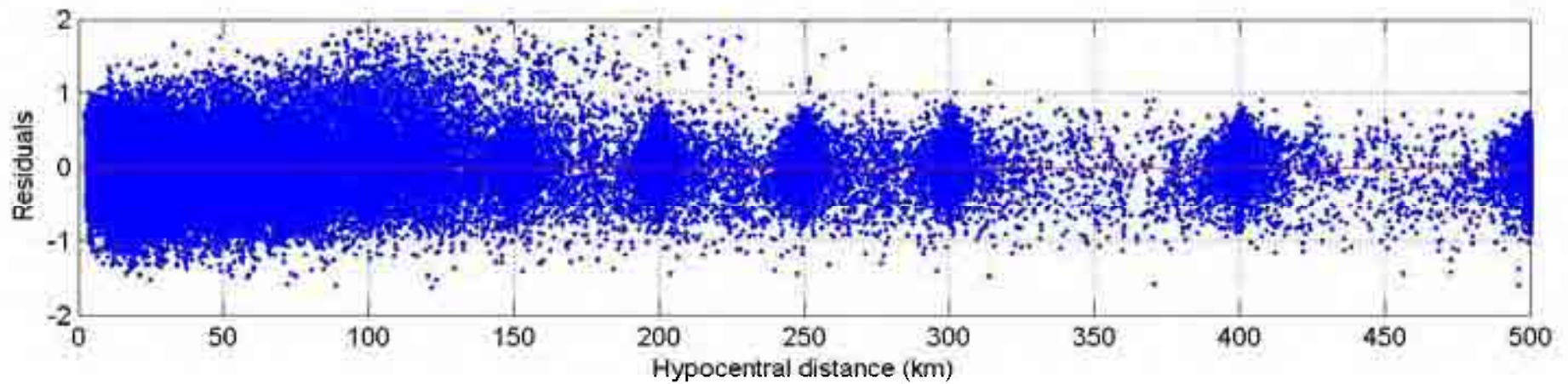
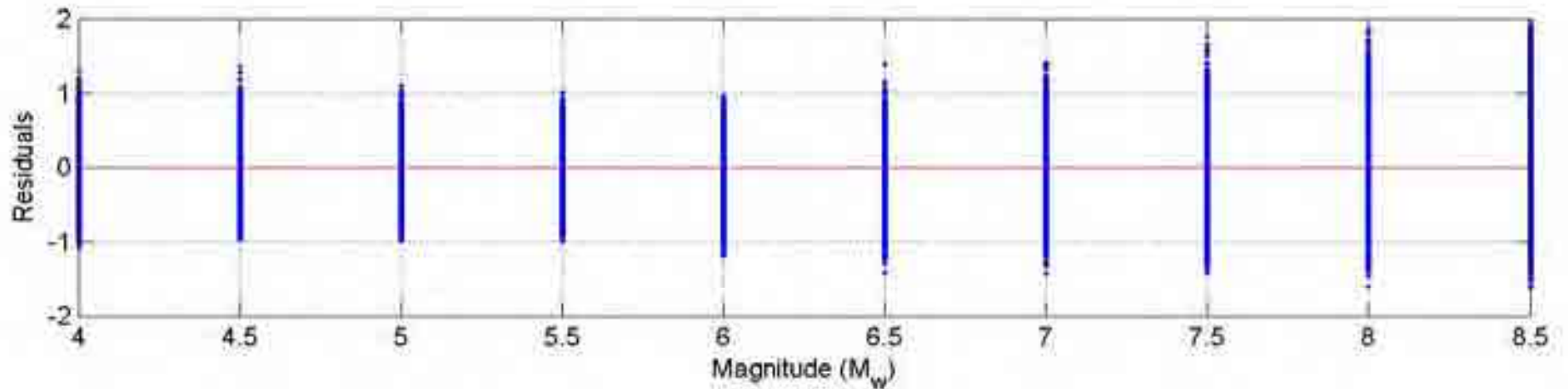


Table 1. Uncertainties in earthquake model parameters

Region	Q - factor	Investigator
Himalaya	$Q = 253f^{0.3}$	Singh et al (2004)
North East India	Indo-Burmesse arc $Q = 431f^{0.23}$ Bengal basin- Shillong plateau $Q = 224f^{0.31}$	Raghukanth and Somala (2009)
Indo-Gangetic	$Q = 142f^{0.28}$	Mohanty et al (2006)
Gujarat	$Q = 790f^{0.22}$	Bodin et al (2004)
Central India	$Q = 508f^{0.31}$	Singh et al (1999)
Peninsular India	Koyna-Warna $Q = 71f^{0.32}$ South India $Q = 460f^{0.23}$	Sharma et al (2007) Rao et al (1998)
Andaman-Nicobar	$Q = 119f^{0.26}$	Parvez et al (2008)

Region	Stress drop $\Delta\sigma$ (bars)	Dip ($^{\circ}$)	Focal depth (km)	Reference
Himalaya	50-200	2° - 30°	5-40	Kayal (2008)
Northeast India-crustal	100-300	10° - 80°	5-50	Kayal (2008)
Northeast India- Subduction	100-300	50° - 90°	50-140	Satyabala (2003)
Indo-Gangetic Plain	50-200	10° - 80°	5-40	Kayal (2008)
Gujarat	100-300	10° - 80°	5-40	Bodin et al (2004)
Central India	100-300	10° - 80°	5-30	Singh et al (2004)
Peninsular India	100-300	10° - 80°	5-25	Singh et al (2004)
Koyna-Warna	100-300	10° - 80°	5-15	Talwani et al (1998)
Andaman-Nicobar	50-200	10° - 80°	5-100	Parvez et al (2005)

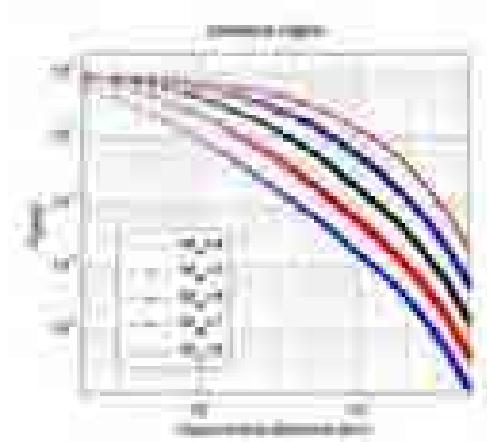
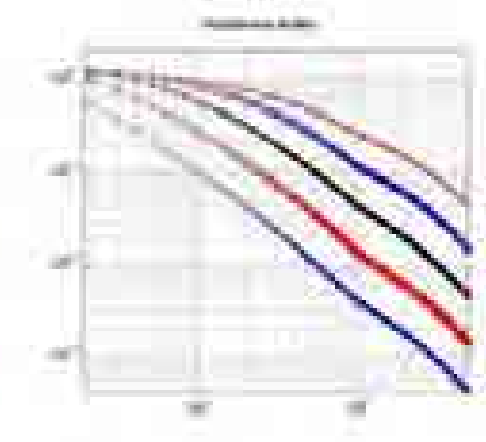
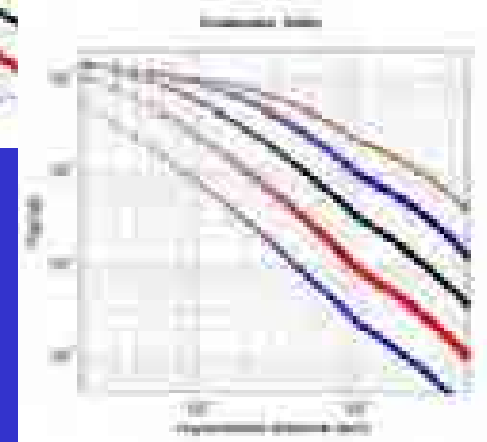
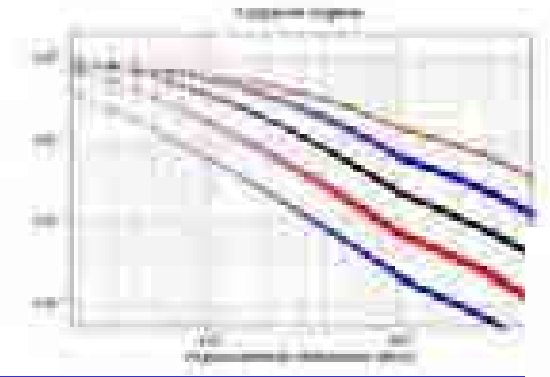
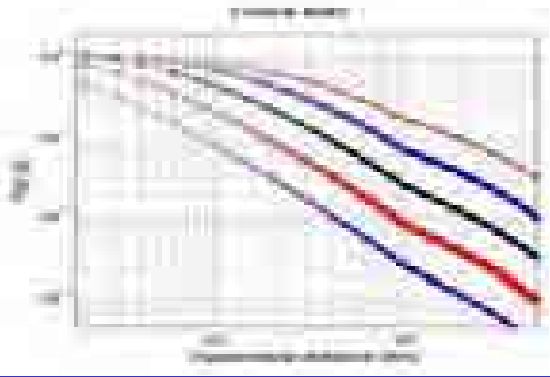
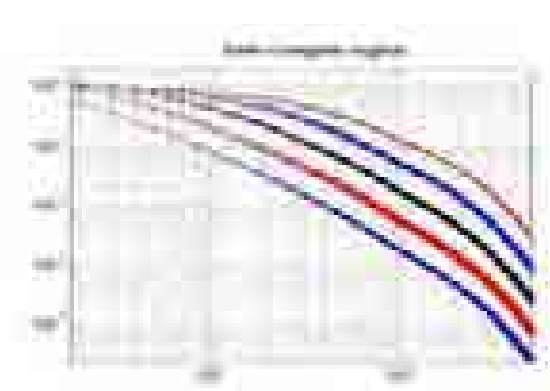
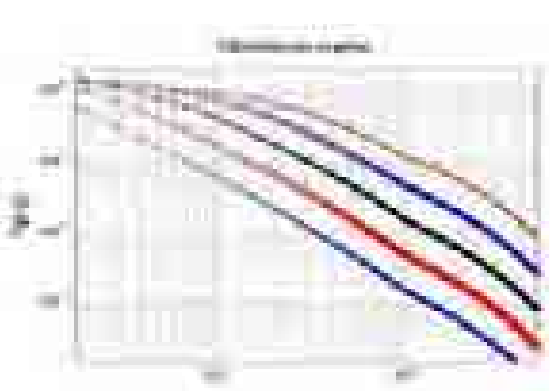


$$\ln\left(\frac{S_a}{g}\right) = c_1 + c_2 M + c_3 M^2 + c_4 r + c_5 \ln\left(r + c_6 e^{c_7 M}\right) + c_8 \log(r) f_0 + \ln(\varepsilon)$$

$$f_0 = \max(\ln(r/100), 0)$$

Coefficients in the attenuation relation for Peninsular India

Period	C ₁	C ₂	C ₃	C ₄	C ₅	C ₆	C ₇	C ₈	σ(ε)
0.0000	-5.2182	1.6543	-0.0309	-0.0029	-1.4428	0.0188	0.9968	0.1237	0.3843
0.0100	-5.2204	1.6523	-0.0307	-0.0029	-1.4422	0.0187	0.9971	0.1237	0.3837
0.0150	-4.1862	1.4952	-0.0197	-0.0030	-1.4265	0.0162	1.0135	0.1209	0.4159
0.0200	-4.1018	1.5037	-0.0209	-0.0030	-1.4096	0.0146	1.0237	0.1202	0.4022
0.0300	-4.1365	1.5228	-0.0227	-0.0030	-1.3888	0.0137	1.0298	0.1161	0.3873
0.0400	-4.2520	1.5430	-0.0244	-0.0029	-1.3783	0.0137	1.0266	0.1149	0.3827
0.0500	-4.4128	1.5817	-0.0271	-0.0029	-1.3801	0.0142	1.0227	0.1140	0.3822
0.0600	-4.7225	1.6531	-0.0327	-0.0028	-1.3730	0.0159	1.0077	0.1132	0.3835
0.0750	-5.0947	1.7235	-0.0383	-0.0028	-1.3572	0.0146	1.0136	0.1121	0.3842
0.0900	-5.5186	1.8218	-0.0460	-0.0028	-1.3441	0.0145	1.0117	0.1113	0.3856
0.1000	-5.8239	1.8911	-0.0511	-0.0028	-1.3409	0.0157	1.0018	0.1103	0.3868
0.1500	-7.4663	2.2950	-0.0816	-0.0027	-1.3179	0.0213	0.9581	0.1055	0.3888
0.2000	-9.0431	2.6930	-0.1115	-0.0026	-1.2965	0.0239	0.9374	0.1020	0.3941
0.3000	-11.9934	3.4705	-0.1687	-0.0025	-1.2861	0.0384	0.8713	0.0989	0.4008
0.4000	-14.3305	4.0665	-0.2112	-0.0025	-1.2686	0.0462	0.8467	0.0984	0.4052
0.5000	-16.2504	4.5566	-0.2457	-0.0024	-1.2614	0.0533	0.8254	0.0975	0.4082
0.6000	-18.1350	5.0060	-0.2767	-0.0024	-1.2419	0.0473	0.8363	0.0949	0.4106
0.7000	-19.3494	5.3013	-0.2962	-0.0024	-1.2399	0.0508	0.8309	0.0934	0.4119
0.7500	-19.8904	5.4156	-0.3035	-0.0023	-1.2316	0.0472	0.8388	0.0922	0.4130
0.8000	-20.4426	5.5522	-0.3118	-0.0023	-1.2423	0.0529	0.8273	0.0938	0.4120
0.9000	-21.4875	5.7648	-0.3246	-0.0023	-1.2309	0.0473	0.8383	0.0922	0.4129
1.0000	-21.9767	5.8581	-0.3297	-0.0023	-1.2258	0.0438	0.8487	0.0927	0.4134
1.2000	-23.1660	6.0486	-0.3372	-0.0023	-1.2204	0.0401	0.8659	0.0939	0.4139
1.5000	-24.2031	6.1891	-0.3402	-0.0022	-1.2281	0.0371	0.8833	0.0924	0.4137
2.0000	-25.1523	6.2202	-0.3308	-0.0022	-1.2390	0.0324	0.9107	0.0975	0.4173
2.5000	-25.5577	6.1153	-0.3139	-0.0022	-1.2275	0.0213	0.9687	0.0982	0.4248
3.0000	-25.5807	5.8957	-0.2871	-0.0021	-1.2341	0.0150	1.0215	0.1003	0.4274
4.0000	-25.2671	5.5029	-0.2436	-0.0021	-1.2511	0.0122	1.0627	0.1034	0.4346

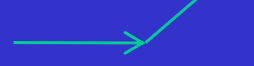


SEISMIC HAZARD CURVE

Magnitude



Distance from the seismic source



GROUND MOTION

What is the Frequency of Occurrence of earthquakes ?

Frequency of 6 magnitude earthquake on a particular seismic source?

Frequency of 7 magnitude earthquake ?

Frequency of 8 ?

$$\mu_{y^*} = \sum_{i=1}^K N_i(m_0) \int \int_{m,r} P(Y > y^* | m, r) P_{R|M}(r | m) P_M(m) dr dm$$

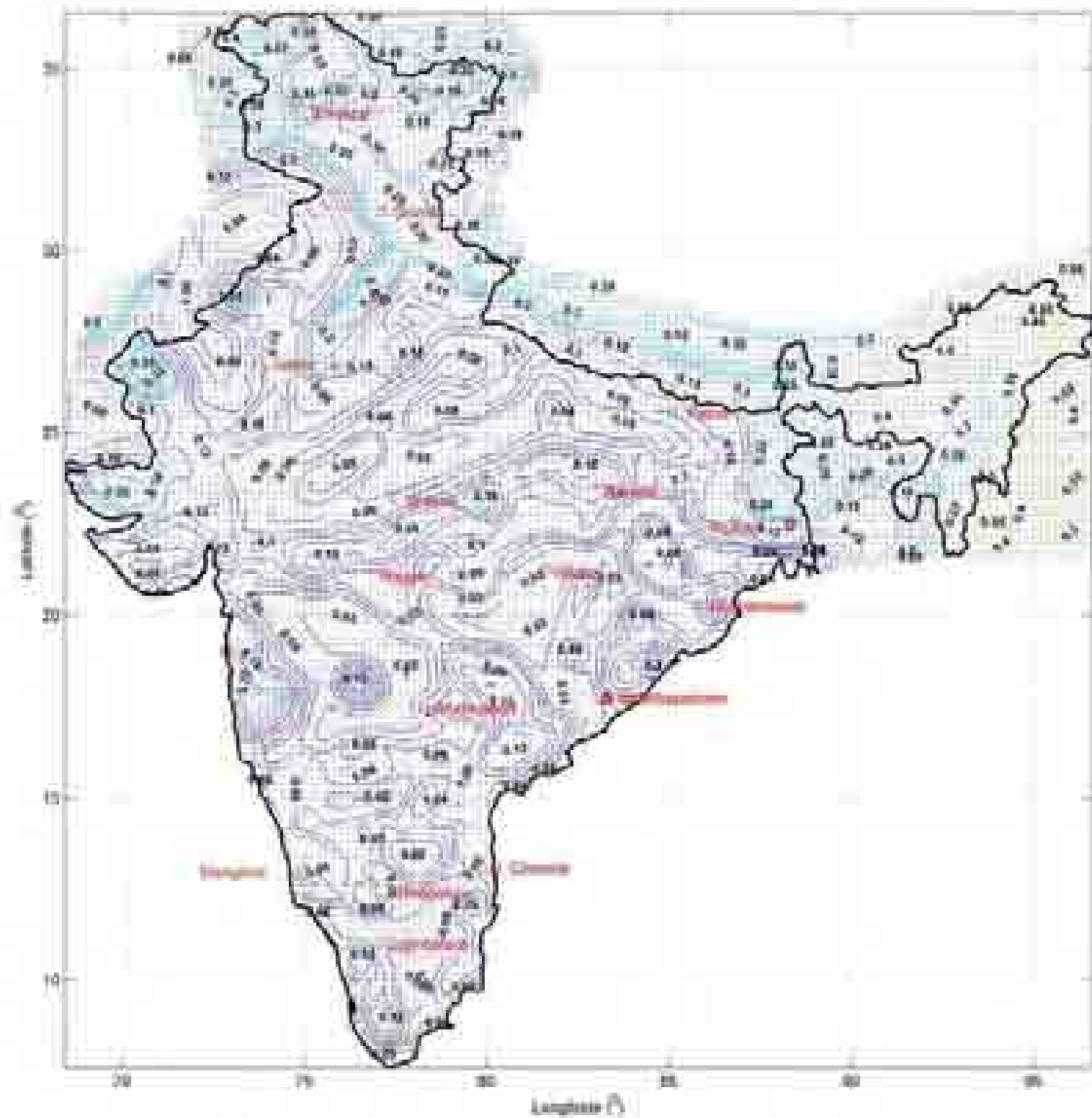
Activity rate of i^{th} fault

Ground motion

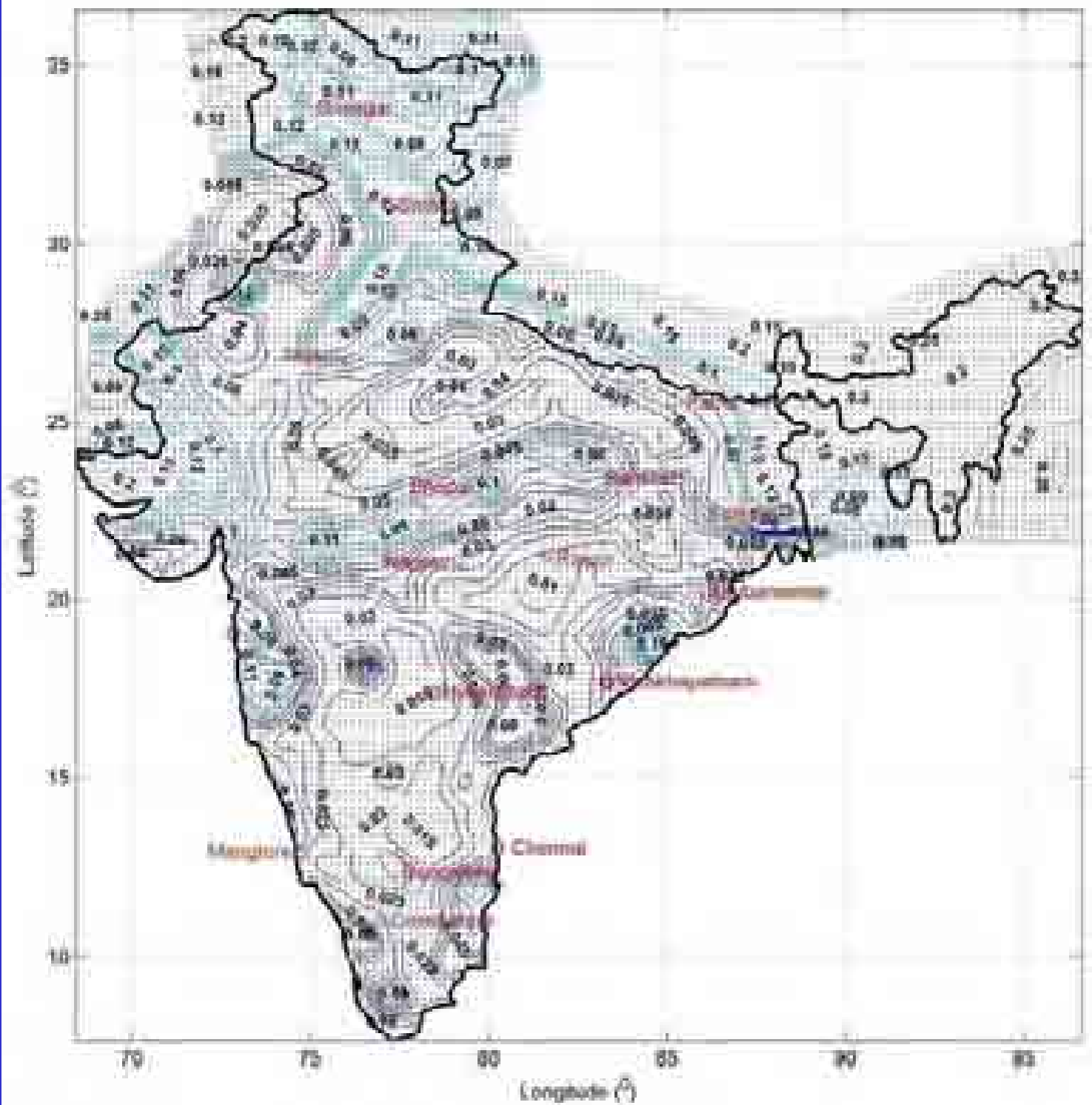
Location of fault

Magnitude

K = Number of faults

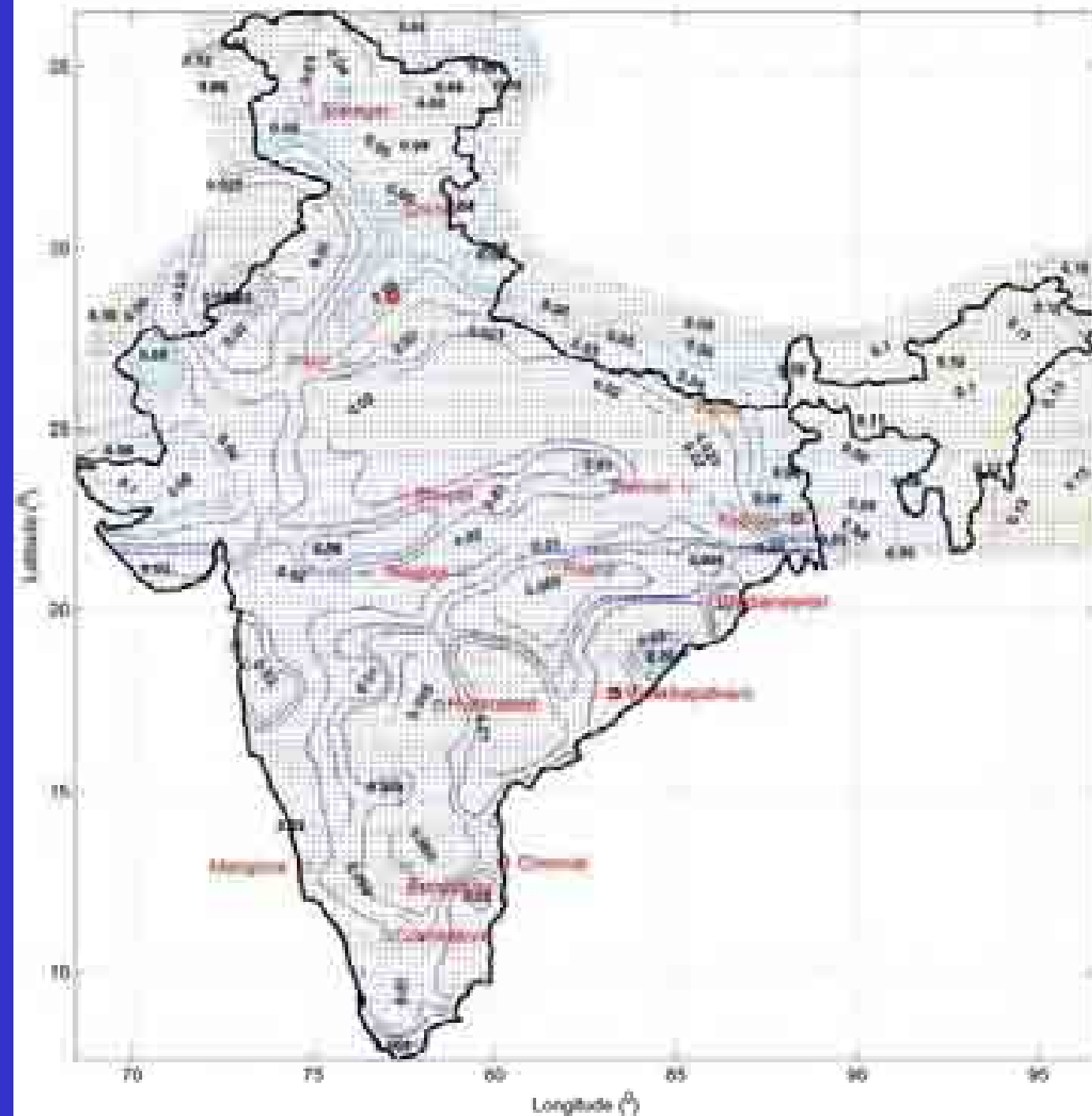


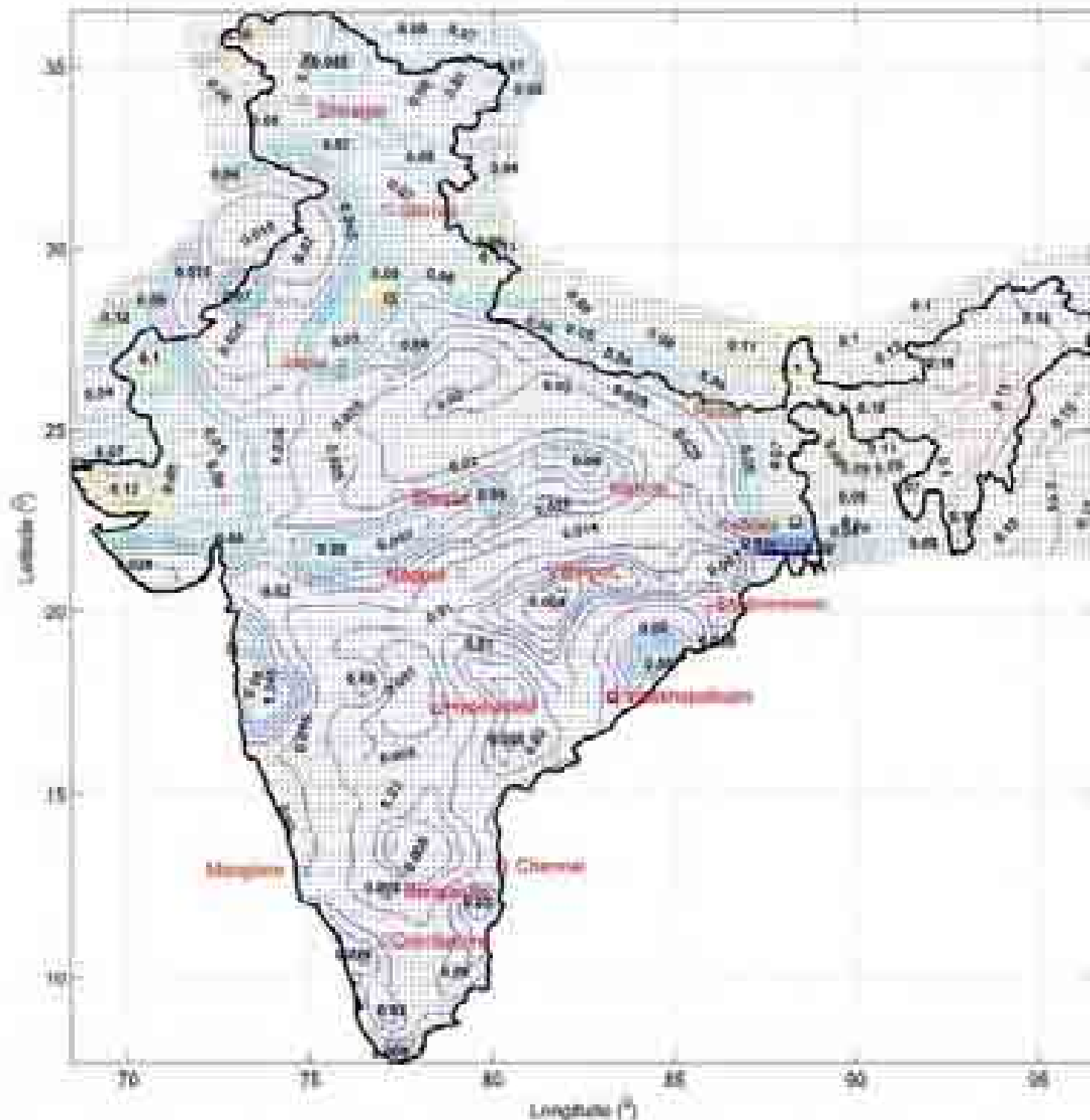
PGA
Contours
with 2%
probability
of
exceedence
in 50 years
(Return
Period
~2500 years)
on A-type
Sites



Spectral
acceleration
Contours at T
 $=0.5\text{sec}$ with 2%
probability of
exceedence in
50 years (Return
Period ~ 2500
years) on A-type
Sites

Spectral
acceleration
Contours at T
= 1.25sec with
2% probability
of exceedence
in 50 years
(Return Period
 ~ 2500 years) on
A-type Sites





Spectral
acceleration
Contours at T
=1sec with 2%
probability of
exceedence in
50 years (Return
Period \sim 2500
years) on A-type
Sites

IBC 2009



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Design Spectrum following IBC-2009; ASCE 7, 2005

Classification of sites based on the average shear wave velocity of the top 30 meters of the subsoil is popular among engineers as a quick way of understanding how ground motion during an earthquake differs on rock sites and soil sites. Standard documents such as IBC-2009, can be referred for classifying sites based on borehole data or velocity profiling. The standard site classification definitions are shown in Table A-1.

Table A-1. Site Class Definitions (Ref: International Building Code IBC-2009)

Site class	Average shear wave velocity (v_s^1)	Average standard penetration resistance (N^1 or N_{cr}^1)	Average undrained shear strength in the case of cohesive soils (s_u^1)
A: Hard Rock	>1500 m/s	Not applicable	Not applicable
B: Rock	760 to 1500 m/s	Not applicable	Not applicable
C: Very dense soil or soft rock	370 to 760 m/s	>50	>100kPa
D: Stiff soil	180 to 370 m/s	15 to 50	50 to 100 kPa
E: Soft soil	<180 m/s	<15	<50 kPa
	Any profile with more than 3 m of soil having Plasticity Index $PI > 20$, Moisture content $w \geq 40\%$ Average undrained shear strength $s_u < 24$ kPa		
F: Soils requiring site-specific evaluation	Soils vulnerable to potential failure or collapse (liquefiable, quick- or highly sensitive clays, collapsible weakly cemented soils) More than 3 m of peat and/or highly organic clays More than 7.5m of very high plasticity clays ($PI > 75$) More than 37m of soft to medium clays		

IBC-2009 defines two site coefficients F_a and F_v corresponding to the 2500-year spectral acceleration (5% damping) value for representative short and long period ranges as shown in Tables A-2 and A-3.

Table A-2 Site coefficients F_a for short period range

SITE CLASS	Mapped spectral response acceleration at short periods				
	$S_s \leq 0.25$	$S_s = 0.50$	$S_s = 0.75$	$S_s = 1.0$	$S_s \geq 1.25$
A	0.8	0.8	0.8	0.8	0.8
B	1.0	1.0	1.0	1.0	1.0
C	1.2	1.2	1.1	1.0	1.0
D	1.6	1.4	1.2	1.1	1.0
E	2.5	1.7	1.2	0.9	0.9
F	Site-specific analysis shall be performed				

Table A-3 Site coefficients F_v for 1-second period

SITE CLASS	Mapped spectral response acceleration at 1 sec period				
	$S_L \leq 0.1$	$S_L = 0.2$	$S_L = 0.3$	$S_L = 0.4$	$S_L \geq 0.5$
A	0.8	0.8	0.8	0.8	0.8
B	1.0	1.0	1.0	1.0	1.0
C	1.7	1.6	1.5	1.4	1.3
D	2.4	2.0	1.8	1.6	1.5
E	3.5	3.2	2.8	2.4	2.4
F	Site-specific analysis shall be performed				

Response Spectrum

Step 1: Determine maximum considered earthquake spectral response acceleration at 0.2s period and 1s period as

$$S_{MS} = F_v S_E \quad (\text{A-1})$$

$$S_{M1} = F_v S_1 \quad (\text{A-2})$$

S_E and S_1 are mapped spectral accelerations for short period and 1 s period

Step 2: Determine design basis earthquake spectral response acceleration at 0.2s period and 1s period using the equations

$$S_{DS} = (2/3)S_{MS} \quad (\text{A-3})$$

$$S_{D1} = (2/3)S_{M1} \quad (\text{A-4})$$

Step 3: Calculate characteristic time periods T_o and T_s

$$T_o = 0.2 \frac{S_{D1}}{S_{DS}} \quad (\text{A-5})$$

$$T_s = \frac{S_{D1}}{S_{DS}} \quad (\text{A-6})$$

Step 4: Design spectra construction:

Let T is the fundamental time period of the structure

a) For periods less than or equal to T_o , design spectral response acceleration, S_a is given by

$$S_a = 0.6(S_{DS}/T_o)T + 0.4S_{DS} \quad (\text{A-7})$$

b) For periods greater than or equal to T_o and less than or equal to T_s ,

$$S_a = S_{DS} \quad (\text{A-8})$$

c) For periods greater than or equal to T_s ,

$$S_a = S_{DI}/T \quad (\text{A-9})$$

Illustrative Example for a hypothetical D-type site at Chennai

The latitude and longitude of the site considered are 13.13° and 80.32° , respectively. Based on interpolation of PSHA results available at the four grid points of the $0.2^\circ \times 0.2^\circ$ square encompassing the site, the values of S_0 and S_1 for A-type rock level are obtained (Table A-4).

Table A-4 PSHA at site for A-type rock level

Return Period Yrs.	$S_0(g)$	$S_1(g)$
2500	0.044	0.0074

It is given that the site has been classified as of D-type. Since the IBC procedure requires the maximum considered earthquake spectral response acceleration at 0.2s period and 1s period at Type B rock level, a correction factor of 1.25 has to be applied (Tables A-2, A-3). The maximum considered earthquake spectral response acceleration at 0.2s period and 1s period at Type B rock level are obtained as

$$S_0(g) = 0.044 \times 1.25 = 0.055$$

$$S_1(g) = 0.0074 \times 1.25 = 0.0093$$

The site coefficients F_s and F_v for D-Type site are obtained as 1.6 and 2.4 from Tables A-2 and A-3, respectively. The short period and long period MCE spectral response acceleration are obtained as

$$S_{MCE}(g) = 1.6 \times 0.055 = 0.088$$

$$S_{MCE}(g) = 2.4 \times 0.0093 = 0.022$$

The design basis spectral accelerations are:

$$S_{DBS}(g) = \frac{2}{3} \times 0.088 = 0.058$$

$$S_{DBS}(g) = \frac{2}{3} \times 0.022 = 0.0148$$

The characteristic time periods are:

$$T_o = 0.2 \times \frac{0.0148}{0.058} = 0.051s$$

$$T_s = \frac{0.0148}{0.058} = 0.253s$$

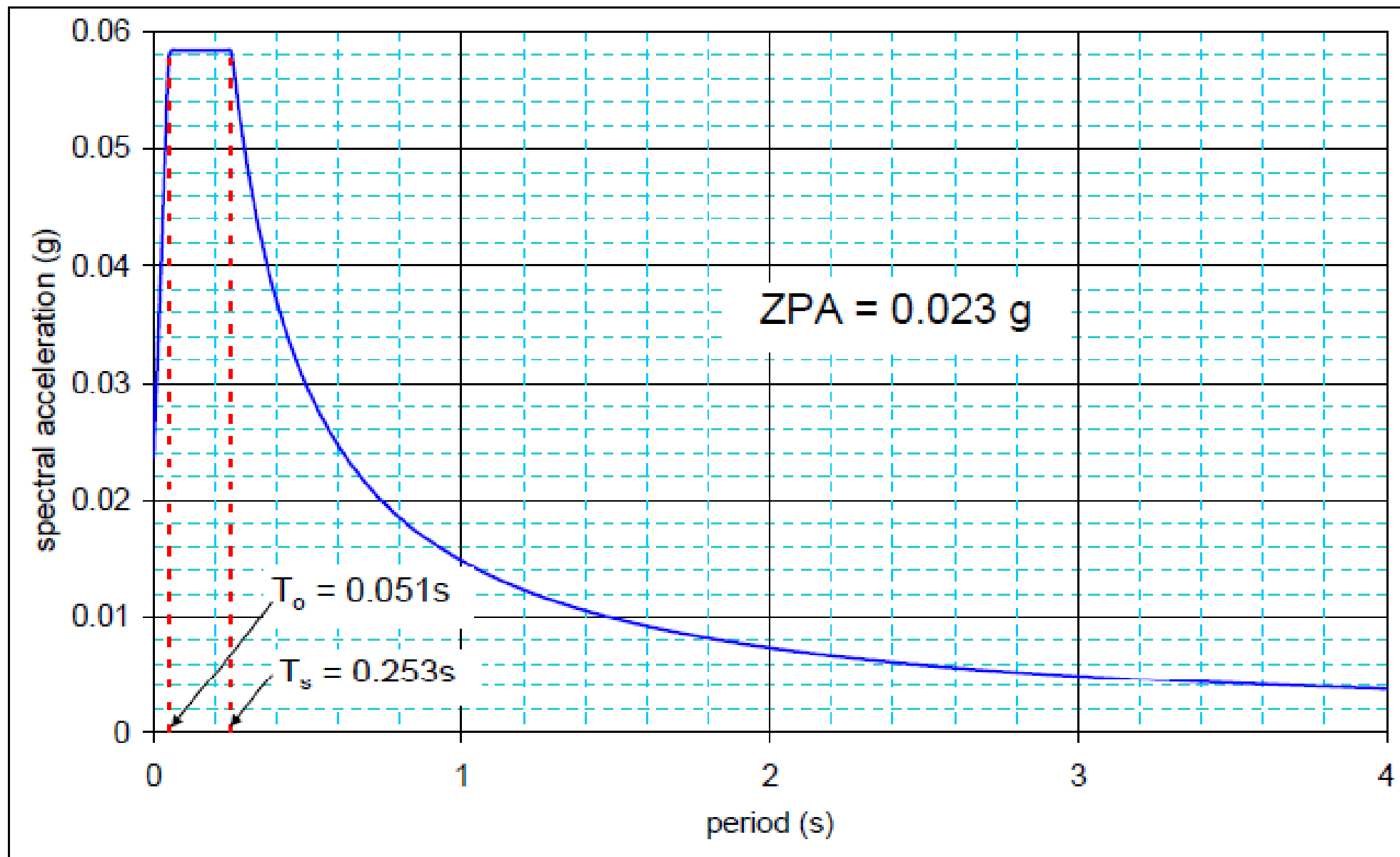
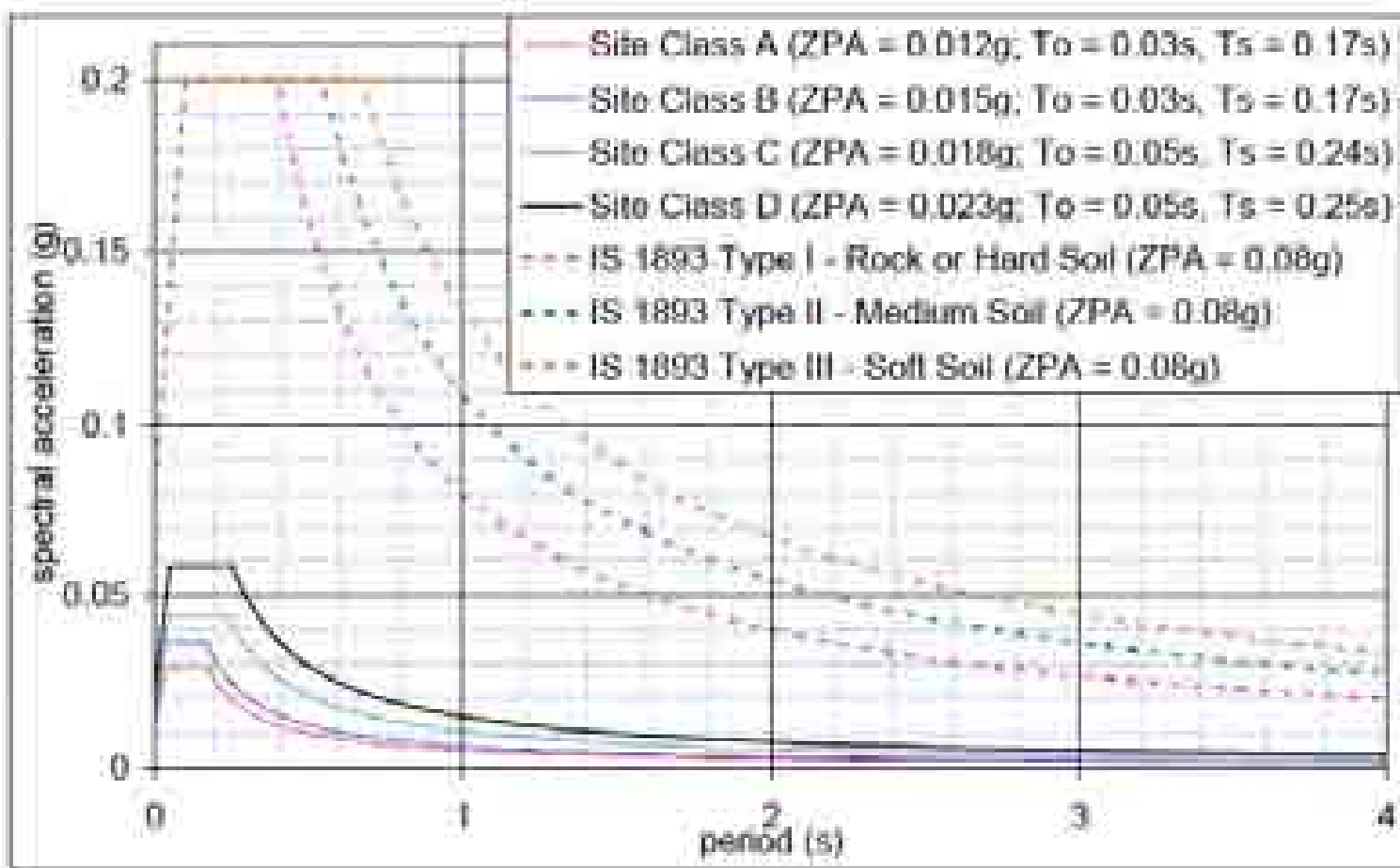


Figure A-1 Design spectra for D-type site in Chennai city (5% damping)

Note: ZPA is obtained as the ordinate at zero period. This need not be same as the mapped PGA value.

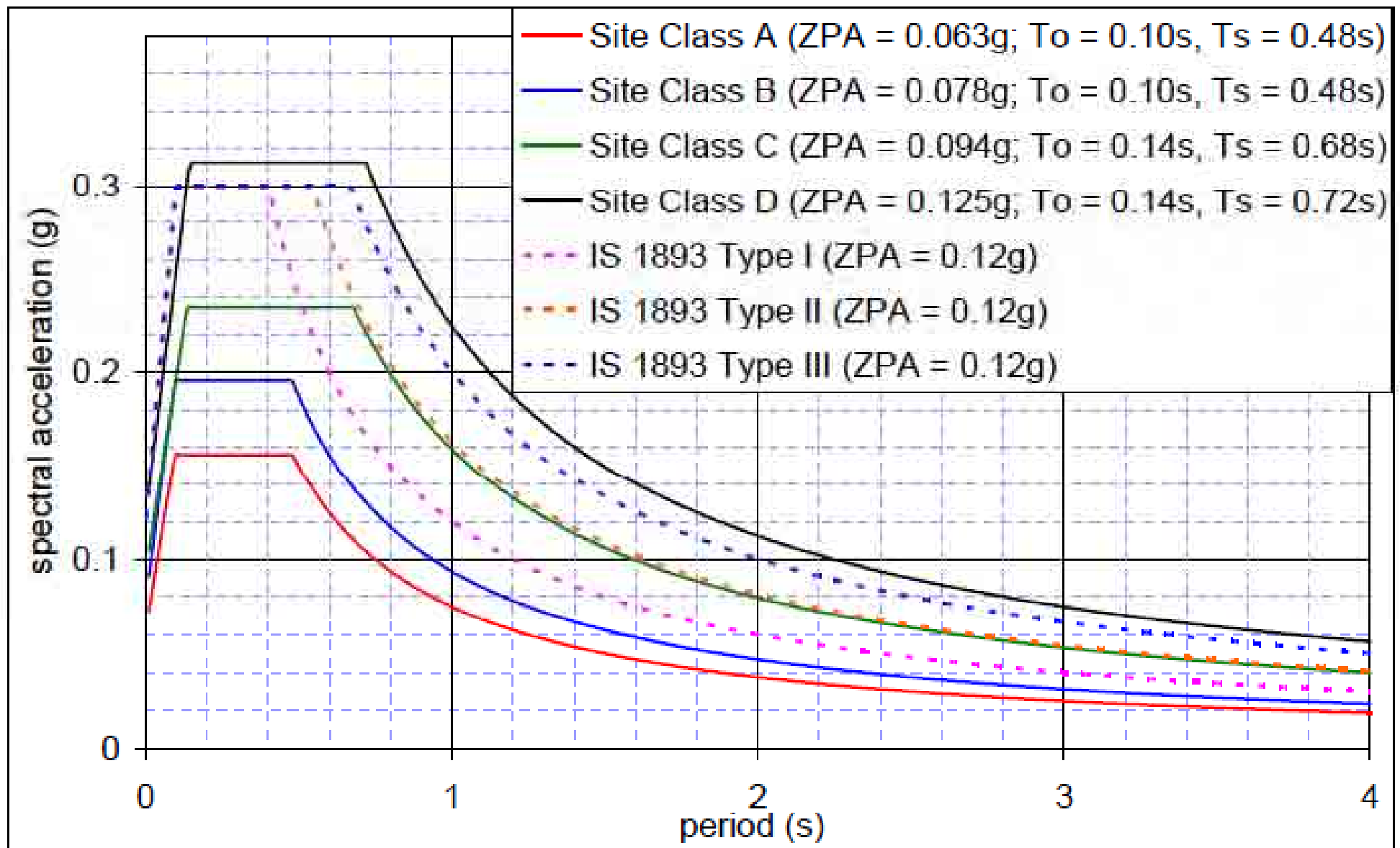
Design Response Spectra for Chennai, Delhi, Kolkata and Mumbai

Following the procedure described above, the design spectrum at any site in India can be constructed following the provisions of IBC-2009. This provides an opportunity to compare the design spectrum constructed based on PSHA results (with spectral accelerations corresponding to 2500-year mean return period as the MCE) with the response spectra provided in the BIS building code IS 1893:2002 which is based on deterministic hazard concepts and past damage intensity considerations. Here this comparison has been carried out for the four metropolitan cities of India. The results are shown in Figs A-2, A-3, A-4 and A-5. In plotting the design basis spectrum of IS 1893:2002, $(Z/2)$ is taken as the ZPA ordinate.



Comparison of IBC design spectra obtained using PSHA results with that specified in IS 1893:2002 for Chennai (damping = 5%)

Comparison of IBC design spectra obtained using PSHA results with that specified in IS 1893:2002 for Delhi (damping = 5%)



Comparison of IBC design spectra obtained using PSHA results with that specified in IS 1893:2002 for Kolkata (damping = 5%)

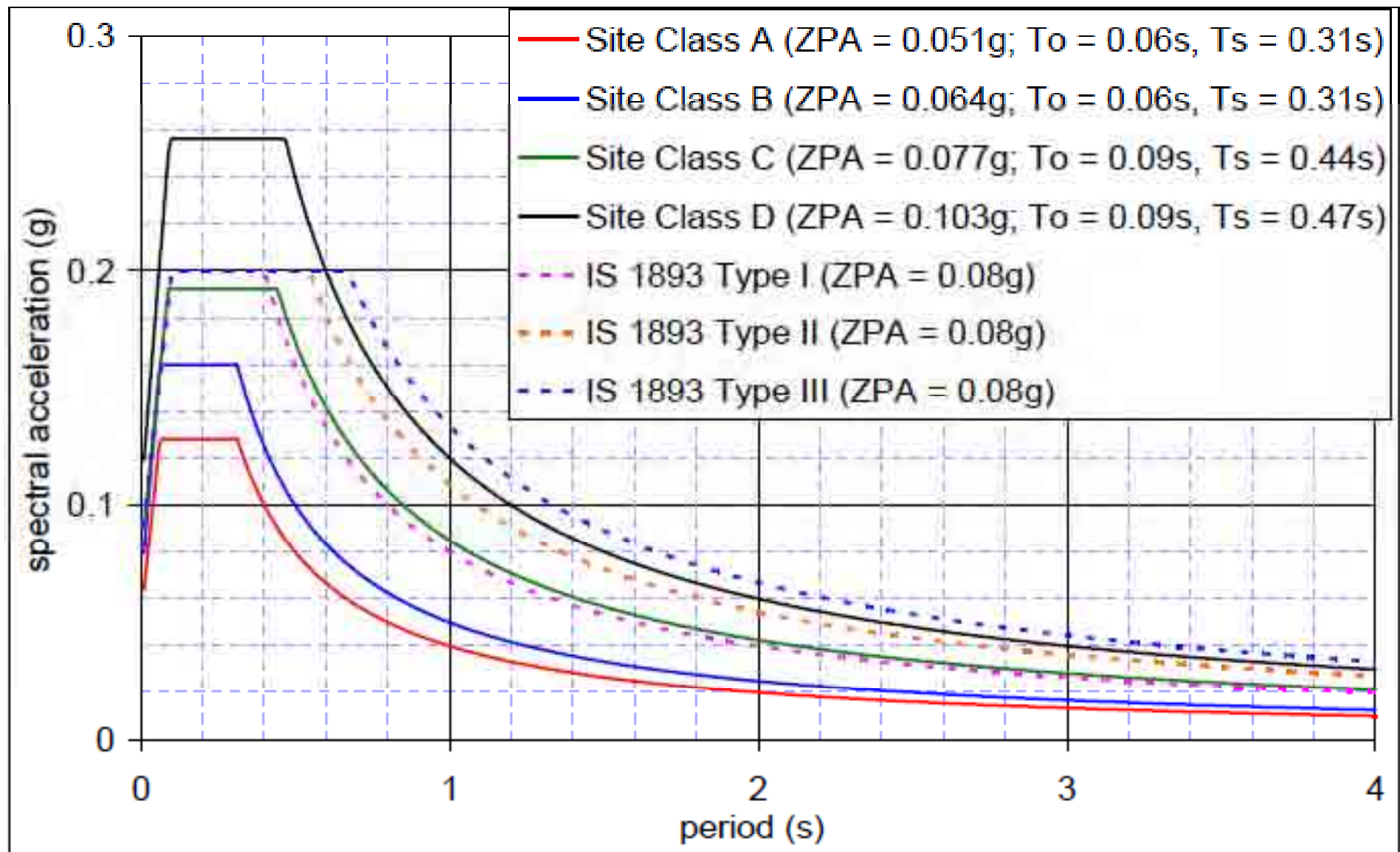
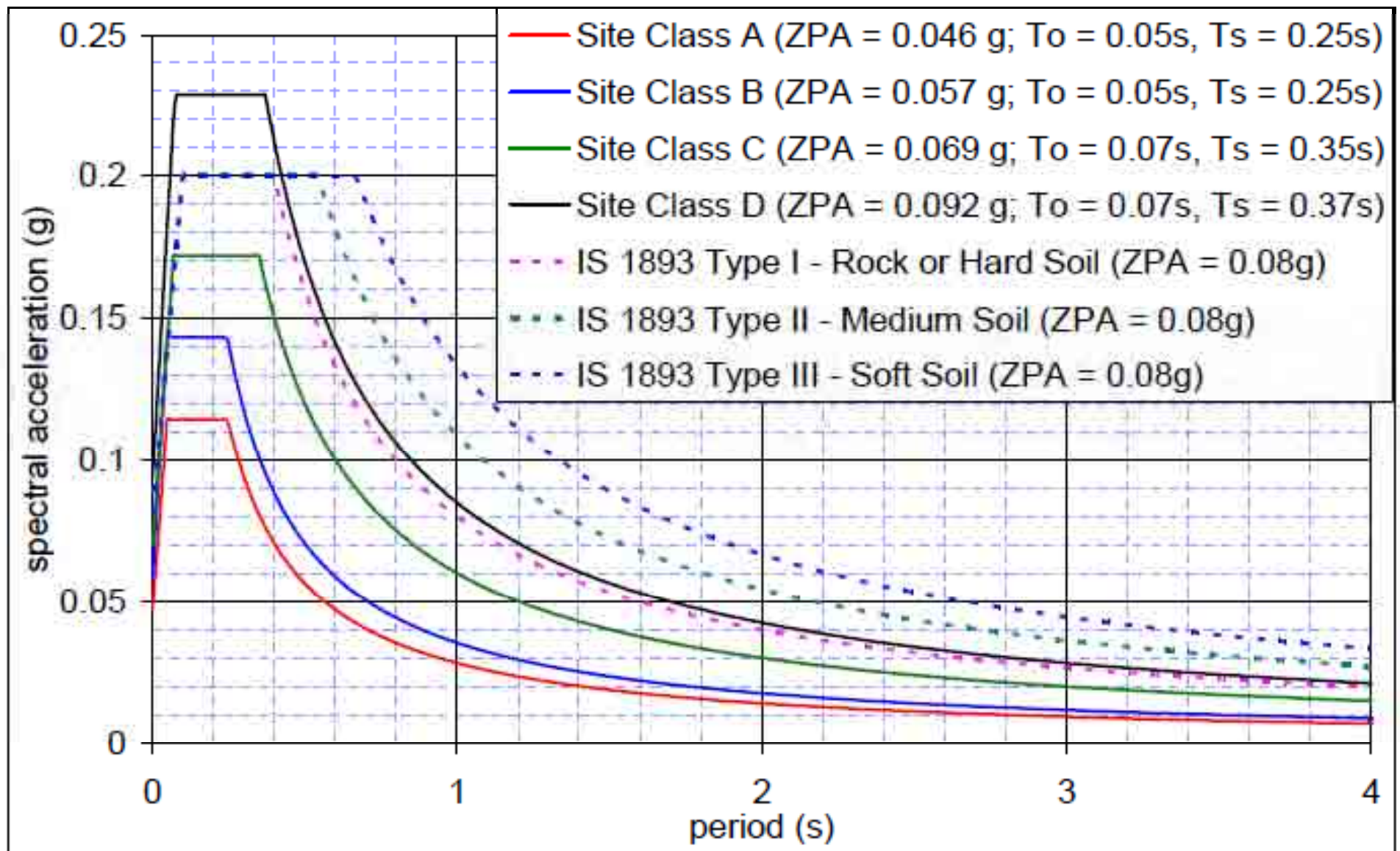


Figure A-4 Comparison of IBC design spectra obtained using PSHA results with that specified in IS 1893:2002 for Kolkata (damping = 5%)

Comparison of IBC design spectra obtained using PSHA results with that specified in IS 1893:2002 for Mumbai



Comparison of ZPA of Design Spectrum

City	Site Type IBC- Notation	PSHA ZPA (g)	Soil Type IS 1893:2002 Notation	IS 1893:2002 ZPA (g)
Chennai	A	0.012	Type I (Rock or Hard Soil)	0.08
	B	0.015	Type II (Medium soil)	
	C	0.018	Type III (Soft soil)	
	D	0.023		
Delhi	A	0.063	Type I (Rock or Hard Soil)	0.12
	B	0.078	Type II (Medium soil)	
	C	0.094	Type III (Soft soil)	
	D	0.125		
Kolkata	A	0.063	Type I (Rock or Hard Soil)	0.08
	B	0.078	Type II (Medium soil)	
	C	0.094	Type III (Soft soil)	
	D	0.125		
Mumbai	A	0.046	Type I (Rock or Hard Soil)	0.08
	B	0.057	Type II (Medium soil)	
	C	0.069	Type III (Soft soil)	
	D	0.092		

Dynamic Analysis of the Reinforced Concrete Framed Structure using Response Spectrum Method

The dynamic analysis of the reinforced concrete framed structure is carried out using the response spectrum method as specified in IS 1893 (Part 1):2002. The step-by-step procedure for carrying out dynamic analysis using response spectrum is given below:

1. Carry out free vibration analysis of the building to obtain the frequencies and mode shapes corresponding to different modes of vibration
2. Determine the modal masses and modal participation factors from the following equations:

The modal mass of k^{th} mode is given by

$$M_k = \frac{\left[\sum_{i=1}^n W_i \phi_{ik} \right]^2}{g \sum_{i=1}^n W_i (\phi_{ik})^2}$$

where

g = Acceleration due to gravity,

ϕ_{ik} = Mode shape coefficient at floor i in mode k , and

W_i = Seismic weight of floor i .

The modal participation factor of mode k is given by

$$P_k = \frac{\sum_{i=1}^n W_i \phi_{ik}}{\sum_{i=1}^n W_i (\phi_{ik})^2}$$

3. Determine the number of number of modes to be used in the analysis such that the sum total of modal masses of all modes considered is at least 90% of the total seismic mass (Cl. 7.8.4.2 of IS 1893 (Part 1):2002)

4. Determine the peak lateral force (Q_{ik}) at floor i in mode k as

$$Q_{ik} = A_k \phi_{ik} P_k W_i$$

where A_k is the design horizontal acceleration spectrum value corresponding to the period of the k^{th} mode of vibration. This needs to be obtained from the ordinates of the response spectrum corresponding to the design basis earthquake, obtained from PSHA results.

5. Determine the peak shear force (V_{ik}) acting in storey i in mode k as

$$V_{ik} = \sum_{j=i+1}^n Q_{jk}$$

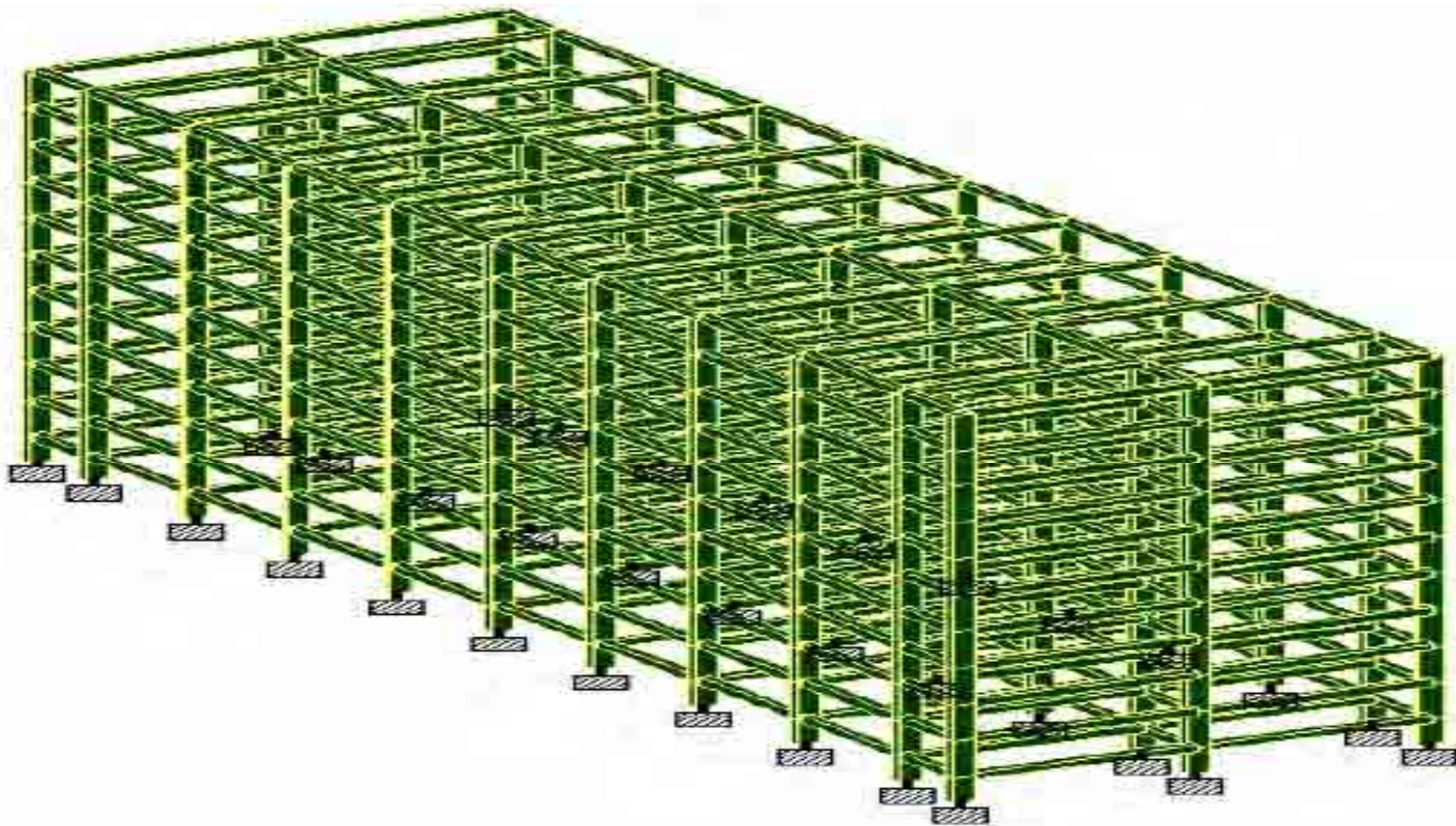
6. Determine the peak storey shear force (V_i) in storey i due to all modes considered by combining those due to each mode using Complete Quadratic Combination (CQC) method or Square Root of Sum of Squares (SRSS) when the modes are well separated.

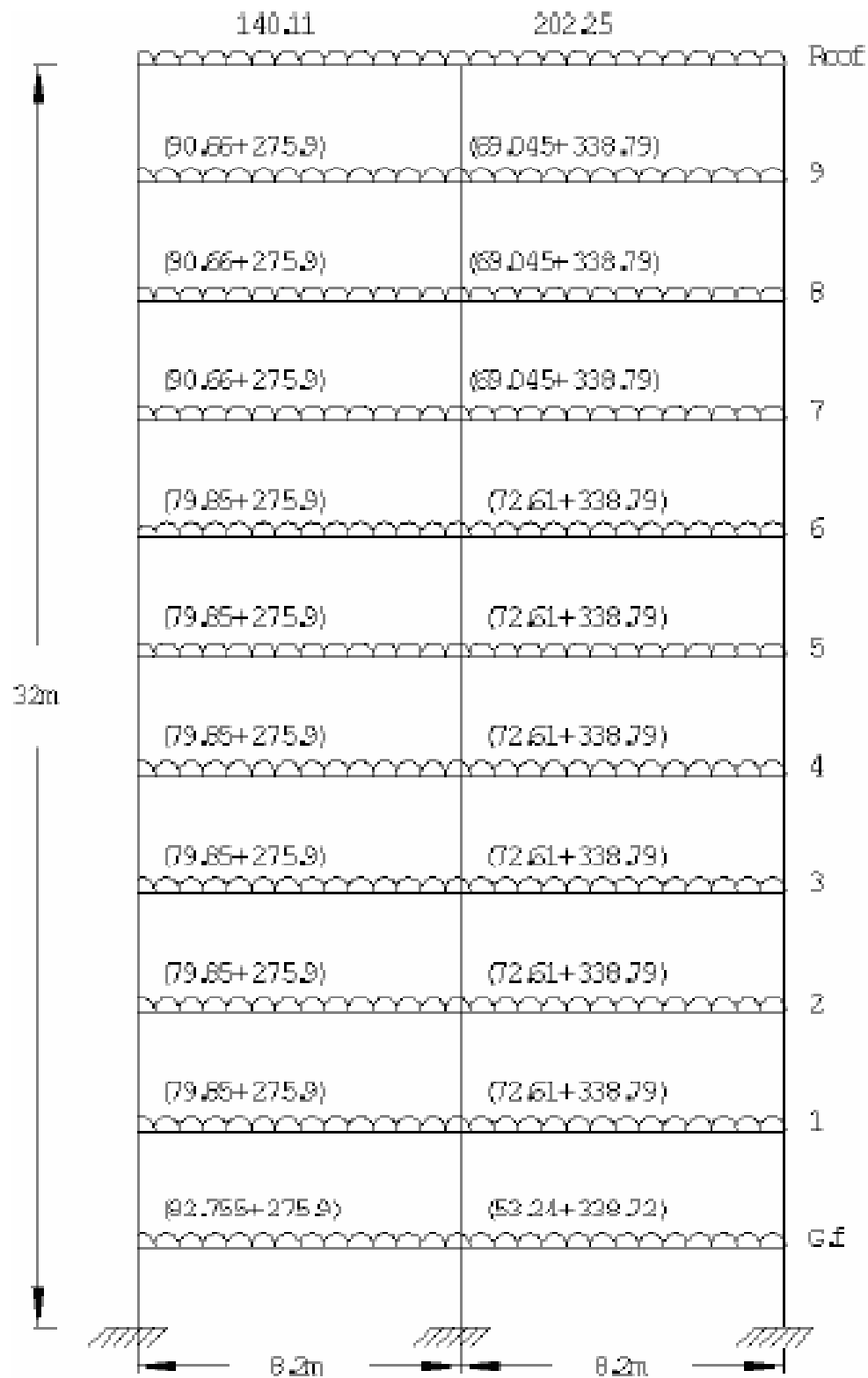
7. Determine the design lateral forces (F_i) at each storey due to all the modes considered

8. Analyze the building for the design lateral forces

Illustrative Example

The building considered is an eleven storey reinforced concrete framed hospital building (see Fig. B-1) with 10 bays in the longitudinal direction (8-bays of span length = 6.2m and 2 bays of span length = 3.3m) and 2 bays in the transverse direction (span length of each bay = 8.2m), and located in Zone III (Adyar, Chennai). The building is assumed to be located in Type C soil (very dense soil and soft rock with shear wave velocity ranging from 360 m/s to 750 m/s). The total plinth area of the hospital building is 56.2m x 16.4m. The dead- and imposed- loads are computed according to IS 875-1987 Parts 1 and 2. The loads acting on a typical frame of the building is shown in Fig. B-2. The characteristic strength of concrete used is 40 MPa and the yield strength of steel is 415 MPa. The columns are of size 400mm x 800mm and the beams are of size 400mm x 600 mm.





Loads acting on
Frame 2 (loads are
in kN)

Results of free vibration analysis of the 11 storey hospital building

Mode	Frequency (Hz)	Period (s)	Modal Participation Factor	Modal Weight (kN)	Relative Modal Weight (%)
1	0.520	1.925	1.756	30238.43	73.34
2	1.798	0.556	0.686	4615.74	11.20
3	3.681	0.272	-0.456	2036.99	4.94
4	6.344	0.158	-0.350	1198.04	2.91
5	9.896	0.101	0.282	779.44	1.89
6	14.367	0.070	0.236	548.44	1.33
7	19.776	0.051	0.209	429.06	1.04
8	26.238	0.038	0.189	349.37	0.85
9	33.404	0.030	0.172	288.93	0.70
10	40.354	0.025	0.161	254.01	0.62
11	46.204	0.022	0.224	491.76	1.19

It is noted from Table that the first four modes needs to be considered in the dynamic analysis since the sum total of modal masses of these four modes will exceed 90% of the total seismic mass.

The response spectrum corresponding to DBE for Chennai city at Type C soil (very dense soil and soft rock with shear wave velocity ranging from 360 m/s to 750 m/s) has been computed using the procedure outlined earlier and is shown in Fig. B-3.

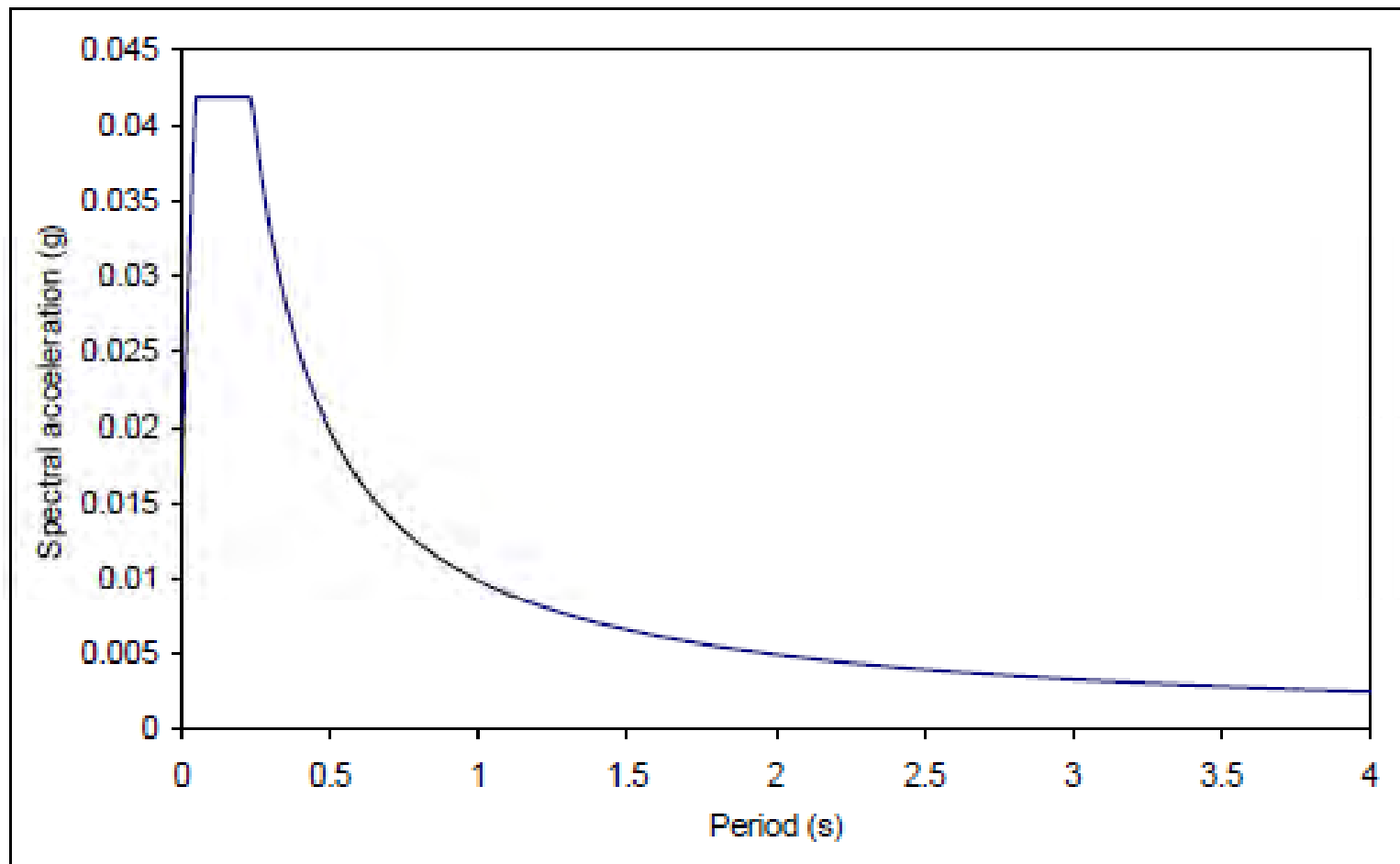


Figure B-3 Response spectrum for Chennai at Type C soil corresponding to DBE (MCE is taken as that corresponding to 2475-year mean return period and DBE is taken as $2/3^{\text{rd}}$ of MCE)

The storey shear forces and the design lateral forces are determined using the procedure given above and are given in Table B-2.

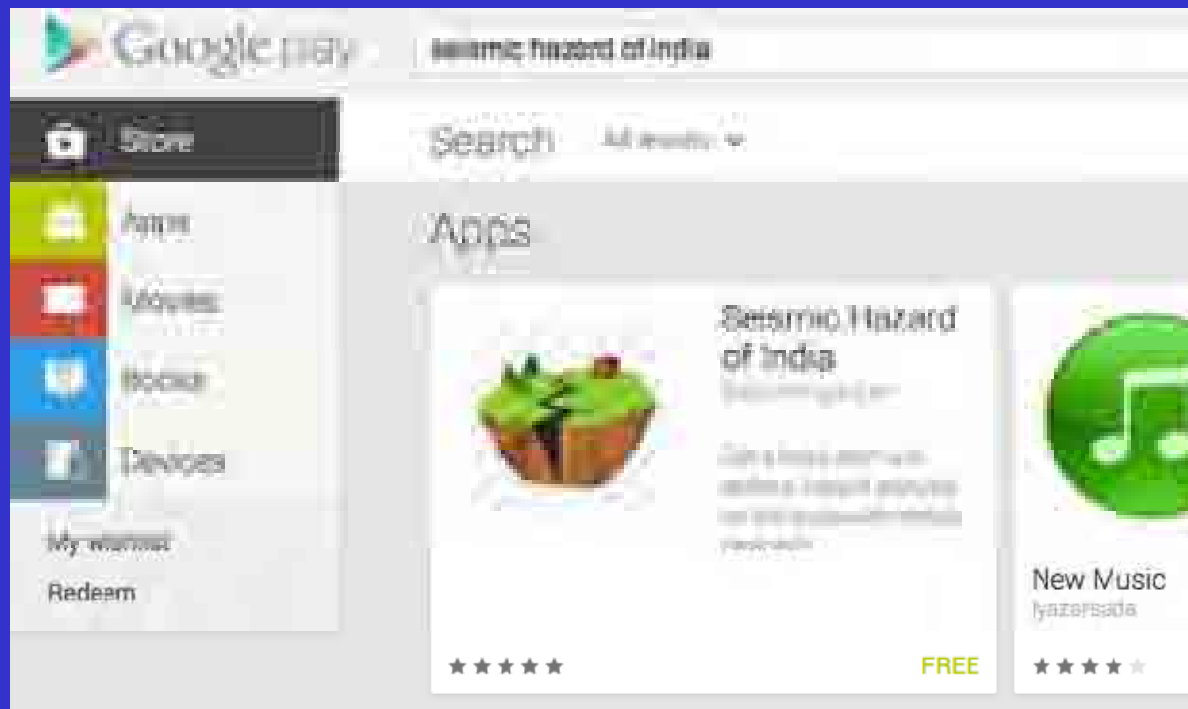
Table B-2 Storey shear forces and the design lateral forces for the hospital building considered

Storey No	Storey shear force	Design lateral force
11	55.26	55.26
10	102.53	47.28
9	120.64	18.10
8	140.81	20.17
7	158.78	17.96
6	173.60	14.82
5	188.48	14.88
4	199.18	10.71
3	214.79	15.61
2	235.52	20.73
1	243.04	7.51

The building has been analyzed for the design lateral forces given in Table B-2. From the analysis, the drift at the top storey is obtained as 9.9mm.

Seismic Hazard of India – Installation details

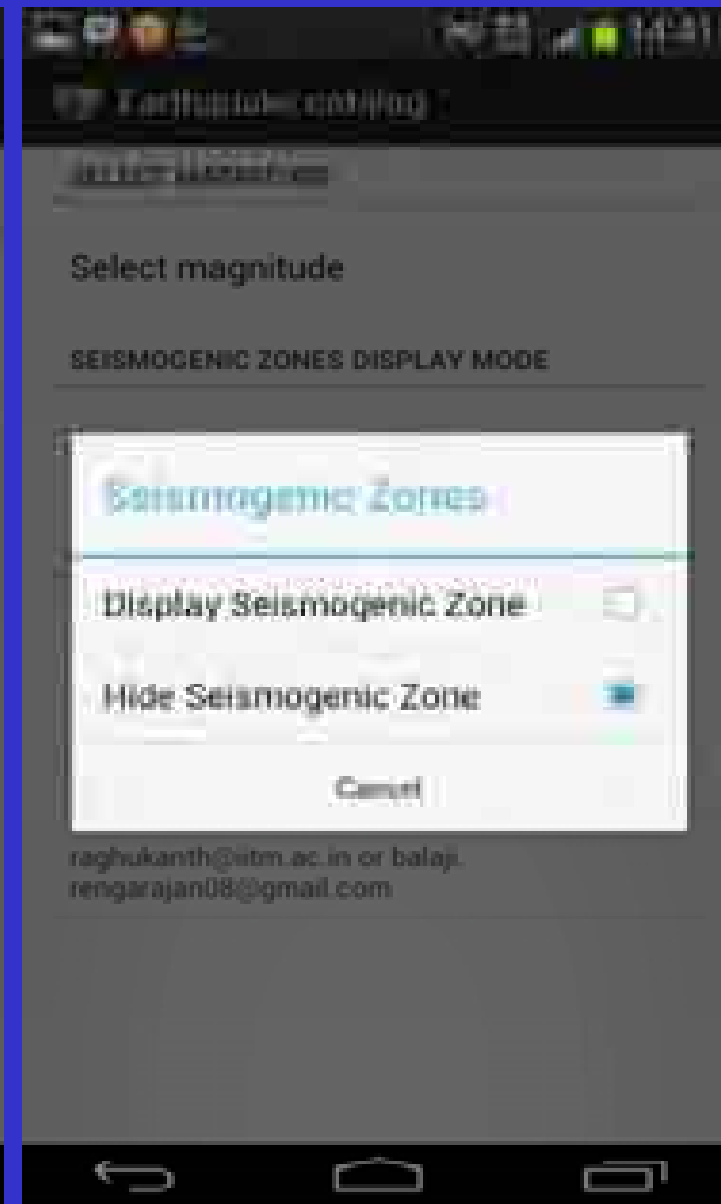
1. Navigate to Google Play or Play Store
2. Search “Seismic Hazard of India”
3. The application is available for Free on google play.
4. Read description and Install application on your android devices.
5. Compatible for android 3.0 and above (Mobile and Tablets).



Earthquake catalog



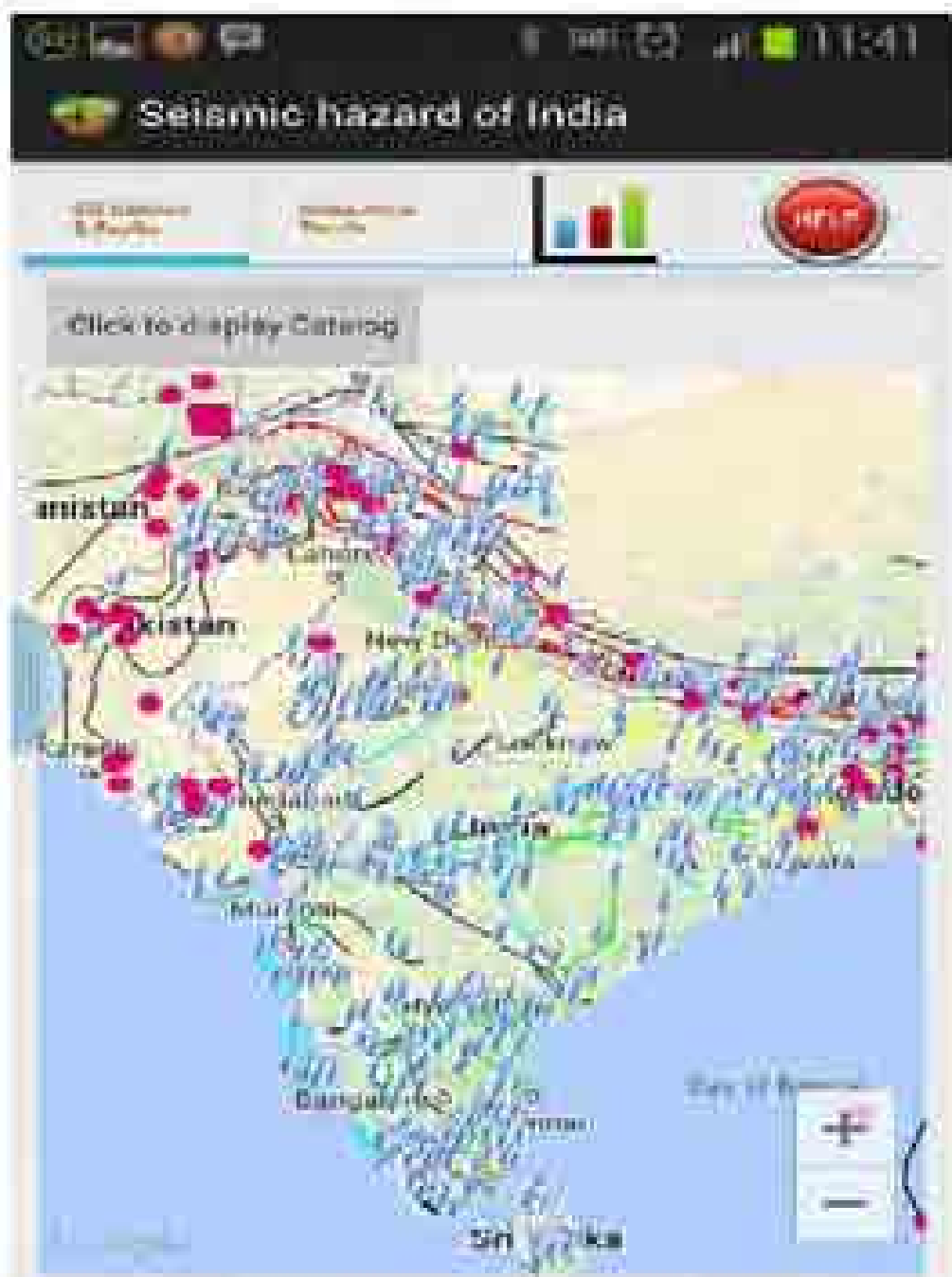
Setting Preferences for filter



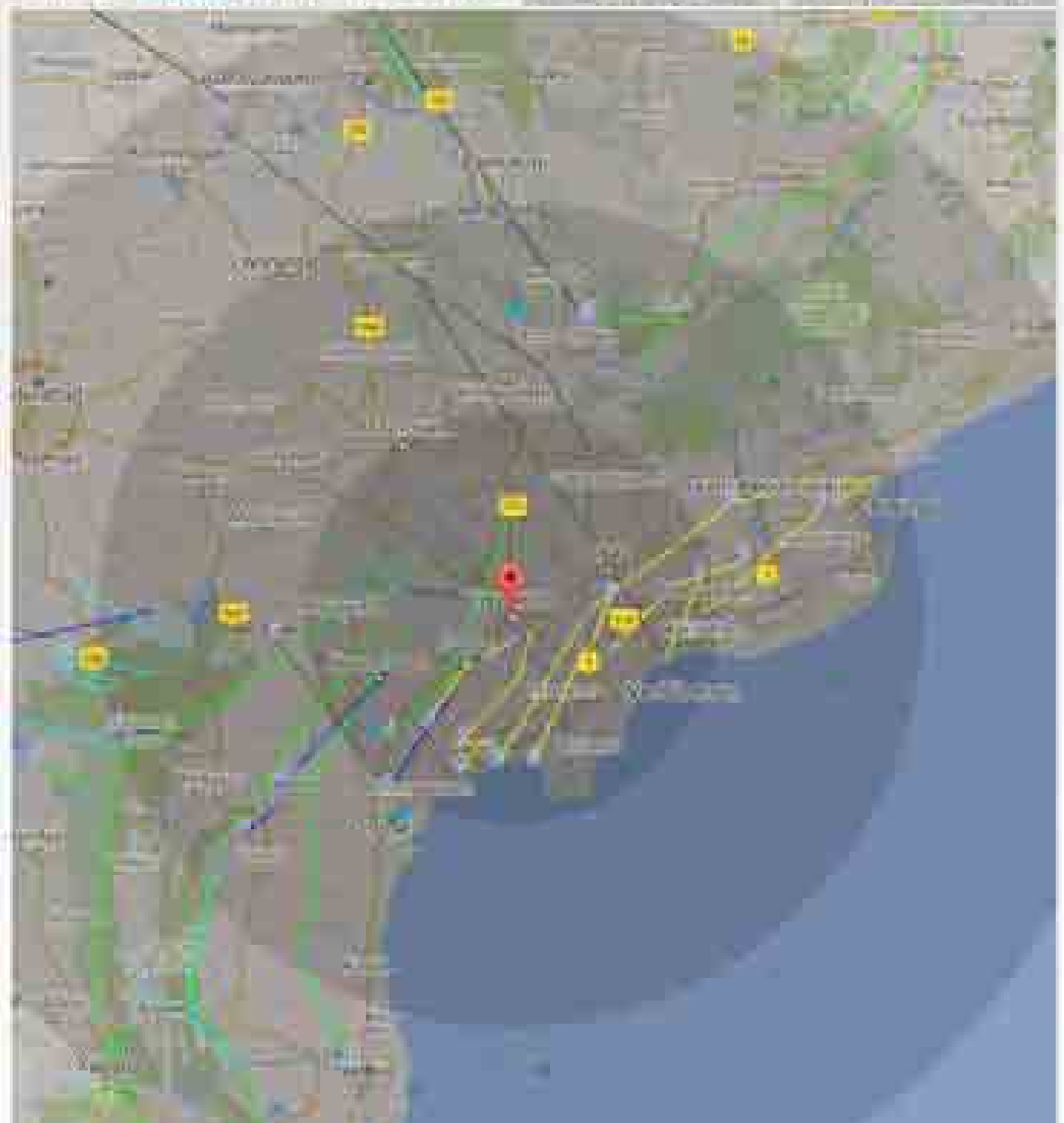
Fault Map of India on Mobile Device



Fault Map of India on Mobile Device



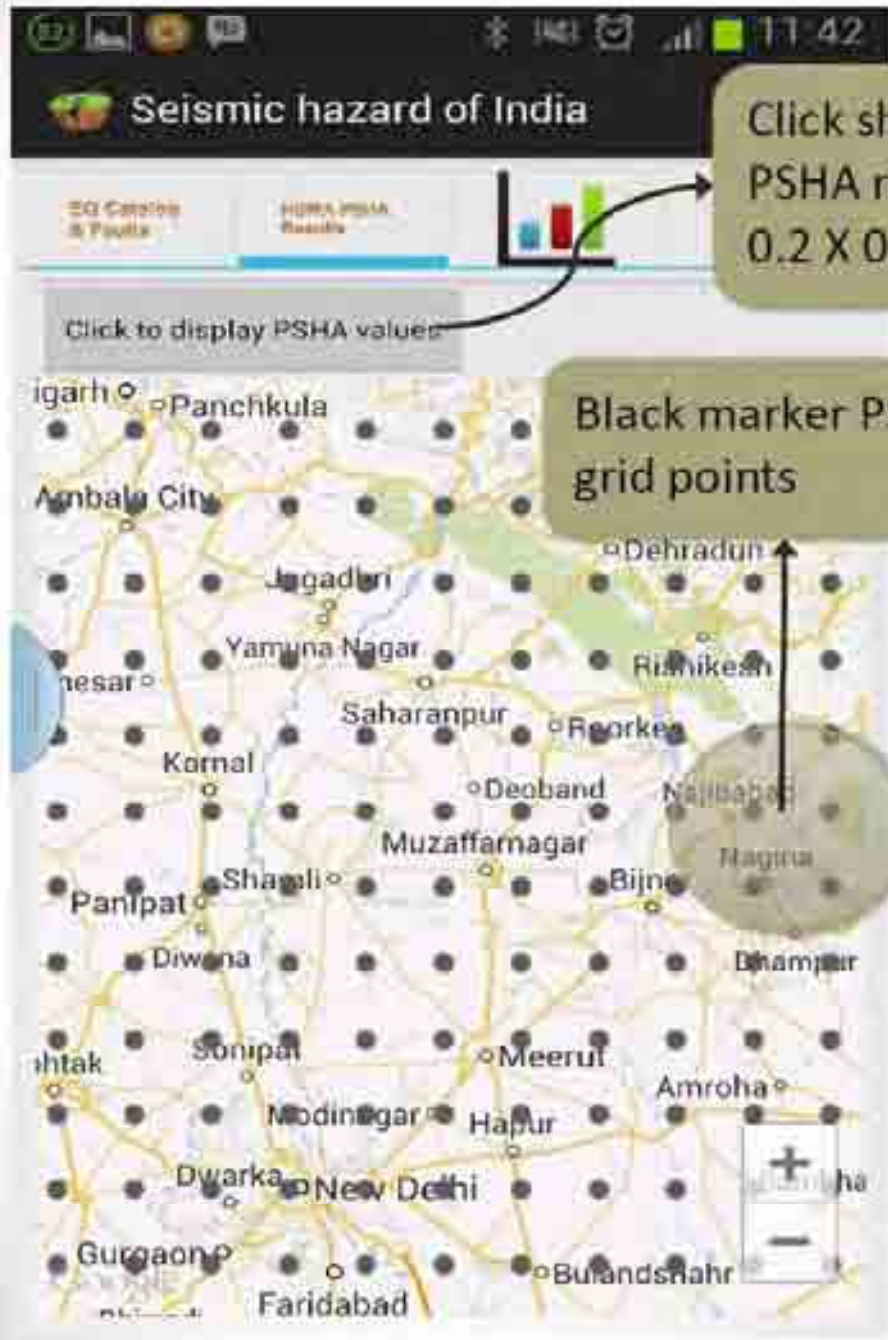
Latitude#: [16.5003](#) Longitude#: [80.64100](#) [Click to display Catalog](#) [PDF for epicentral distanc](#)



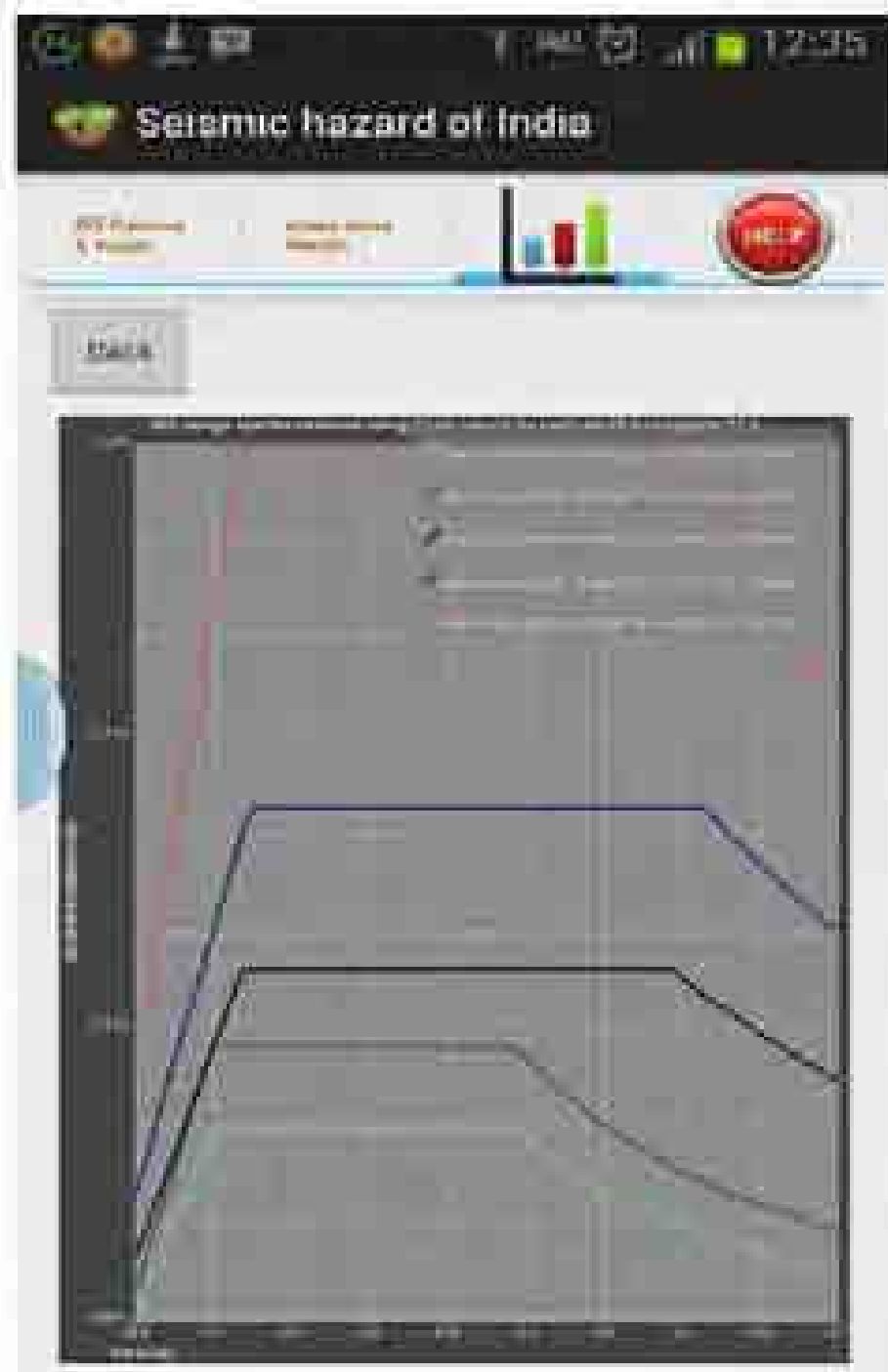
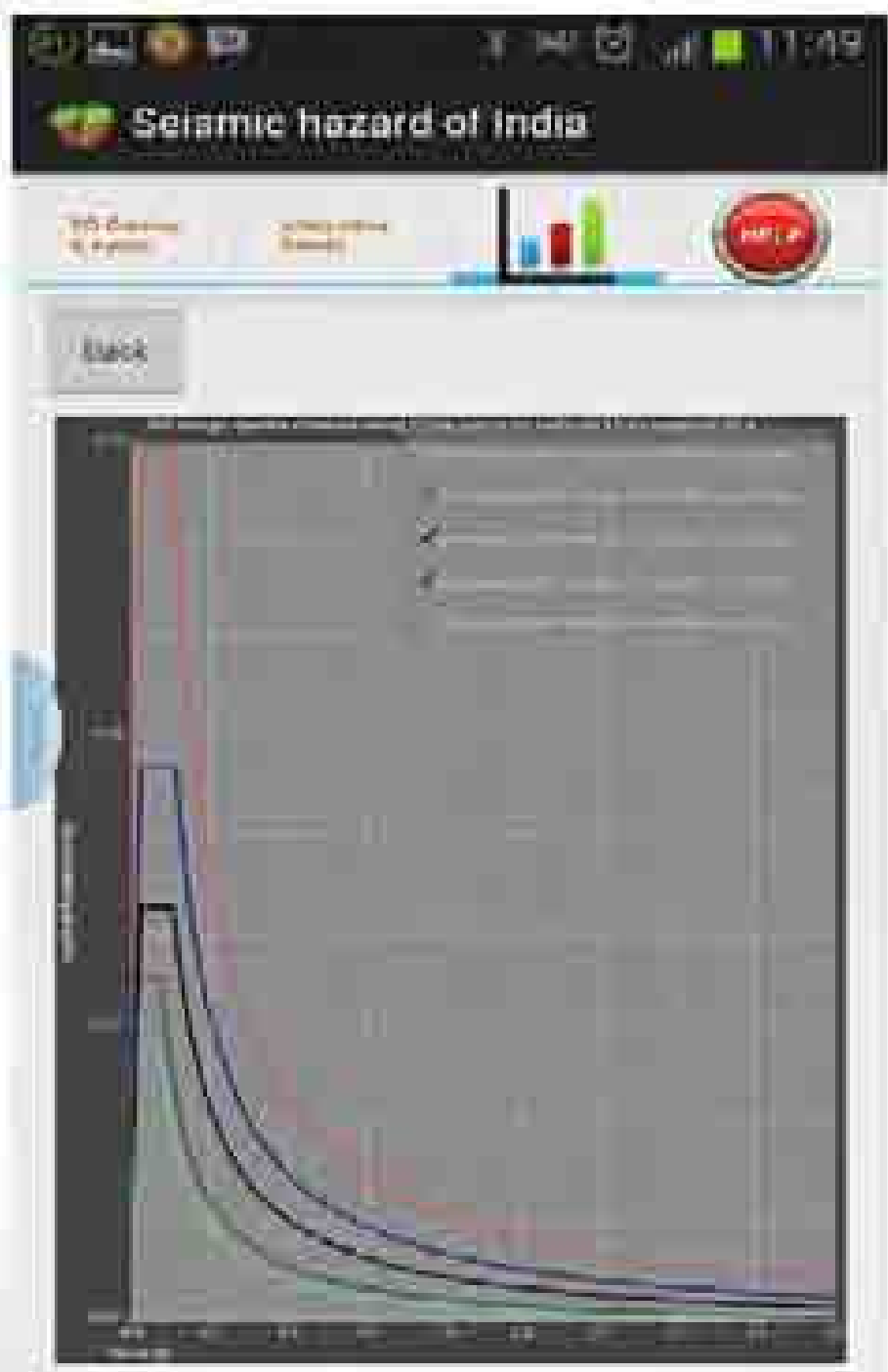
View PSHA Values



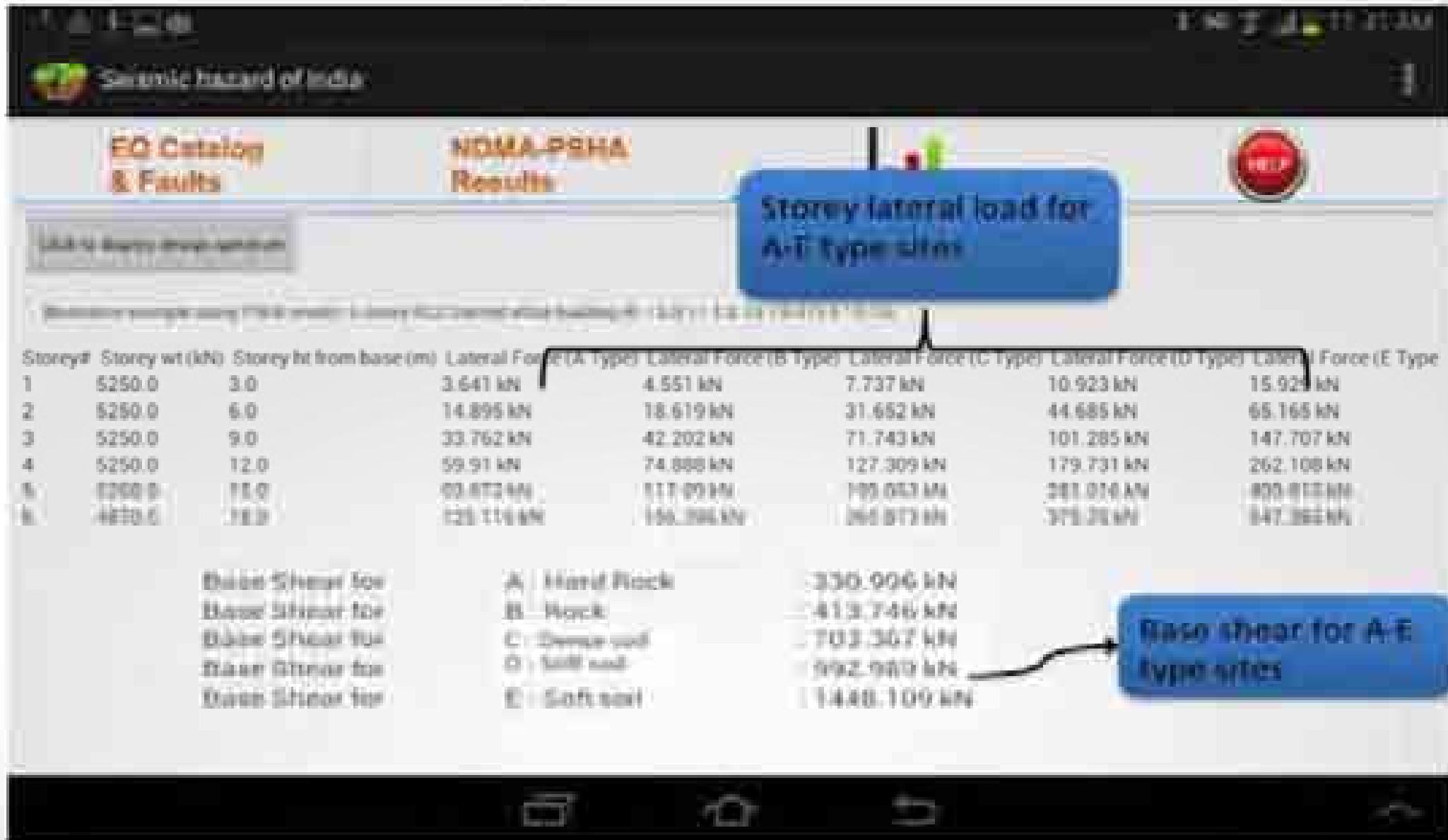
NDMA – PSHA Results on Mobile Device



IBC 2009 Design Response Spectrum



Building analysis for six storey RCC framed building



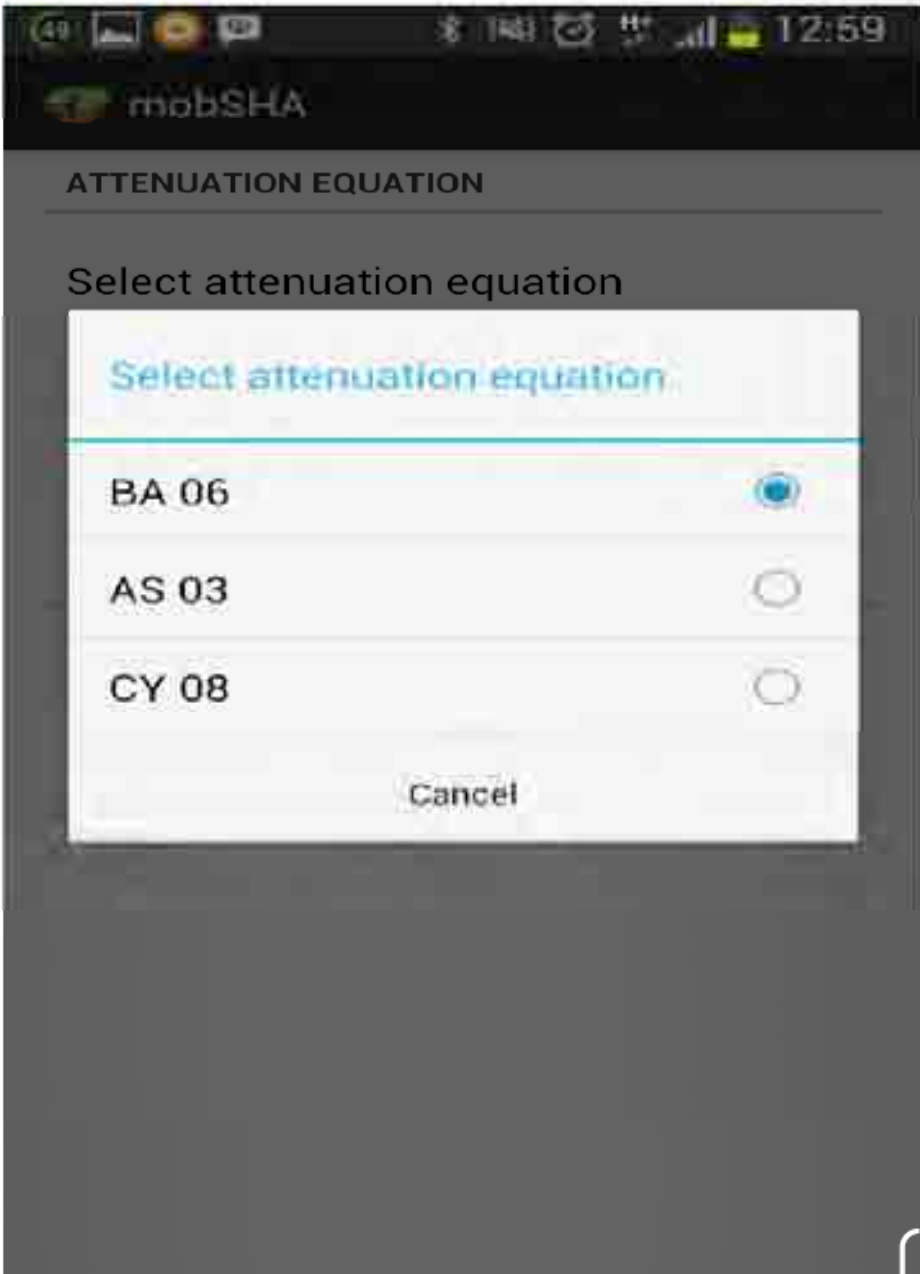
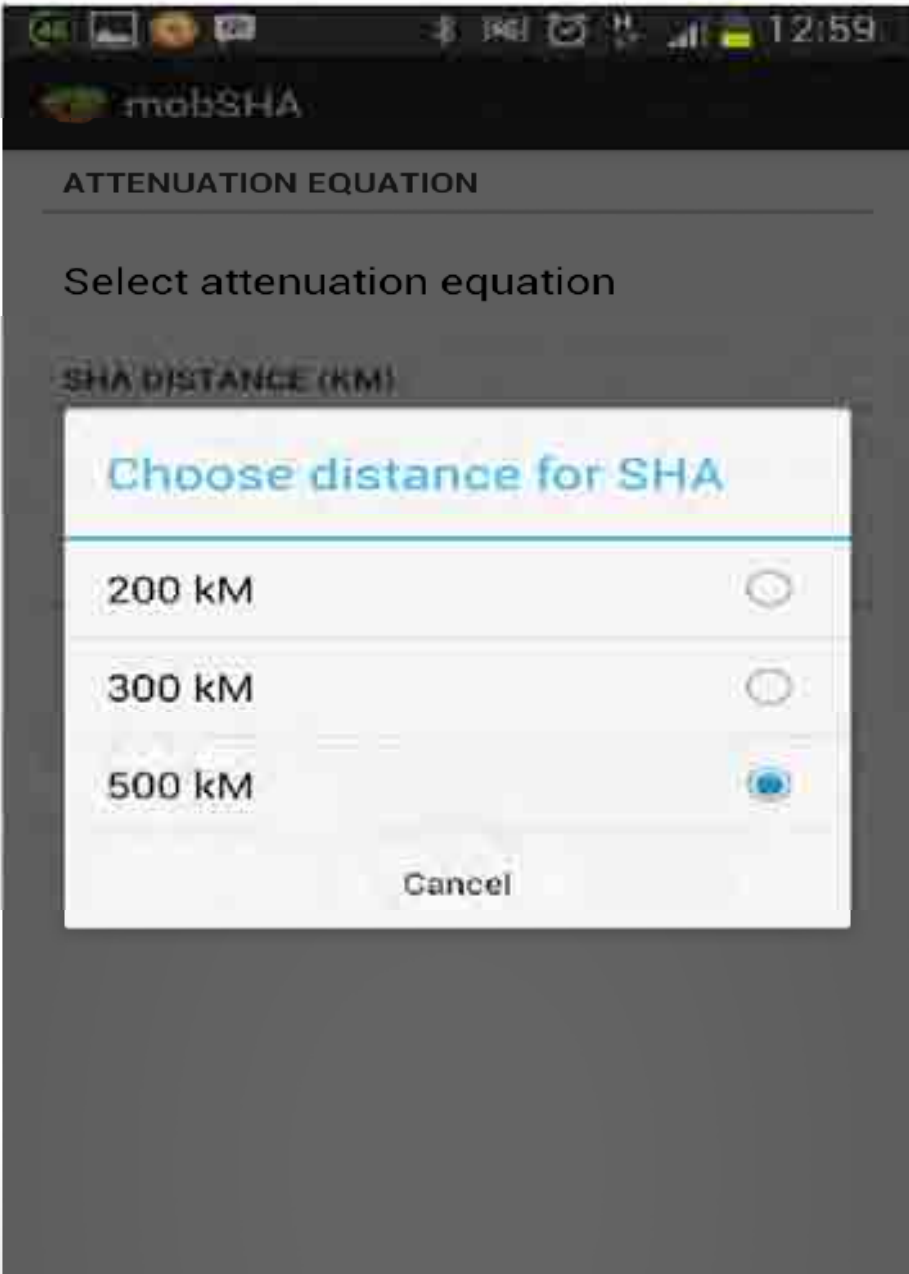
PSHA & DSHA Application - Capabilities

- Seismic source around the site
- Probability distribution plot for distance
- Probability distribution plot for magnitude for a particular source
- Mean annual rate of exceedance plot for various target accelerations
- Perform PSHA & DSHA using multiple attenuation models

Contributing seismic sources around the influence zone



SHA evaluation parameters and attenuation model



Probability Distribution Function for Epicenter Distance



Probability Distribution Function for Magnitude



DSHA Results with PGA

EQ Catalog & Faults



DSHA by site - display top 20 considerable source



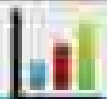
DSHA Results with PGA

0 1 2 3 4 5 6 7 8 9 10 11 12

1:41:00 AM

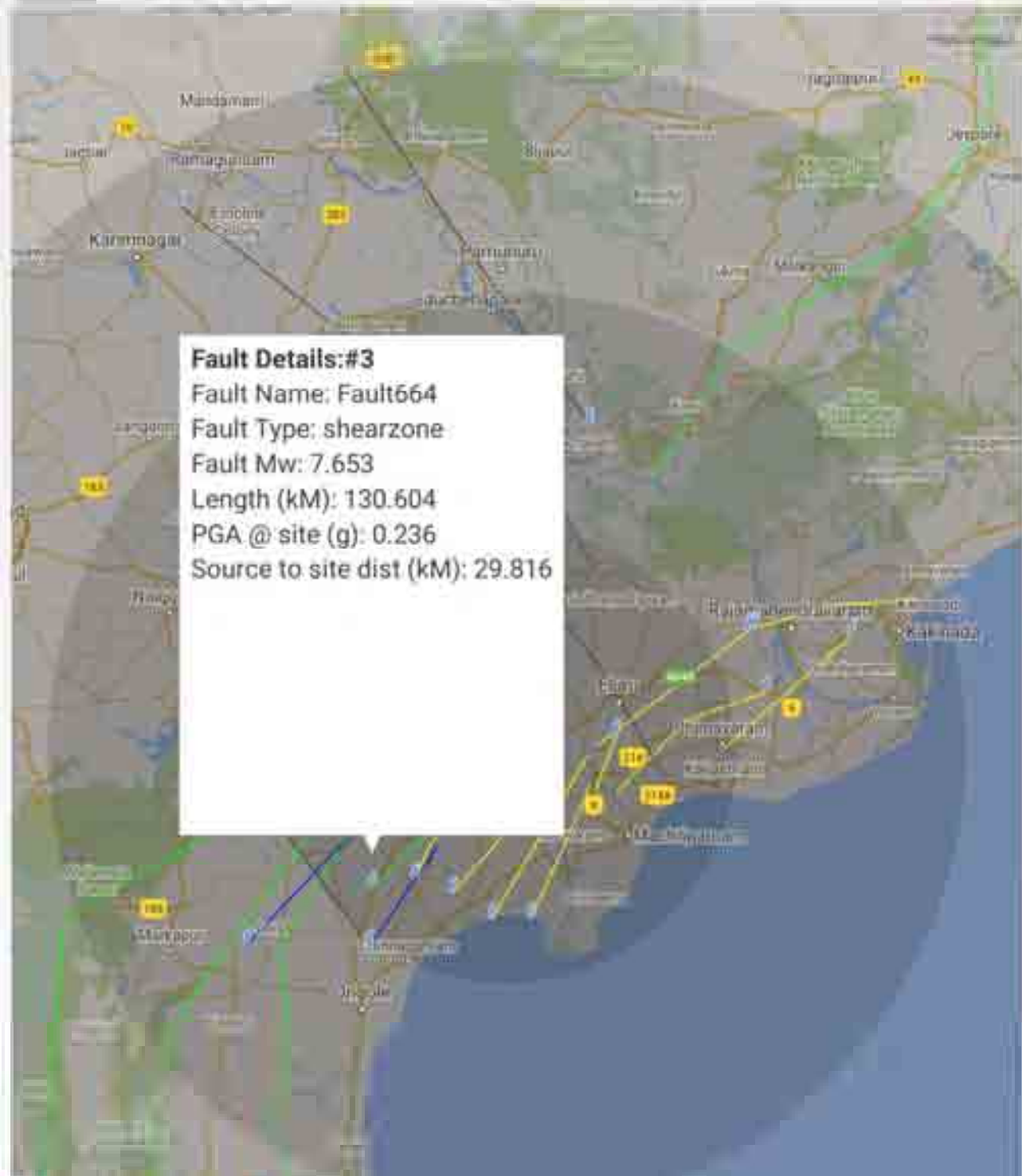
mobSHA

EO Catalog
& Faults



Home | DSHA | EO Catalog | EO Catalog & Faults | EO Catalog & Faults





Perform probability evaluation



9:46 AM

mobSHA

EQ Catalog & Faults



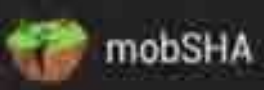
Latitude#: Longitude#: [Click to display Catalog](#) [PDF for epicentral distance](#) [PDF for magnitude](#) [PSHA](#) [BSHA](#)



PSHA Hazard Curve



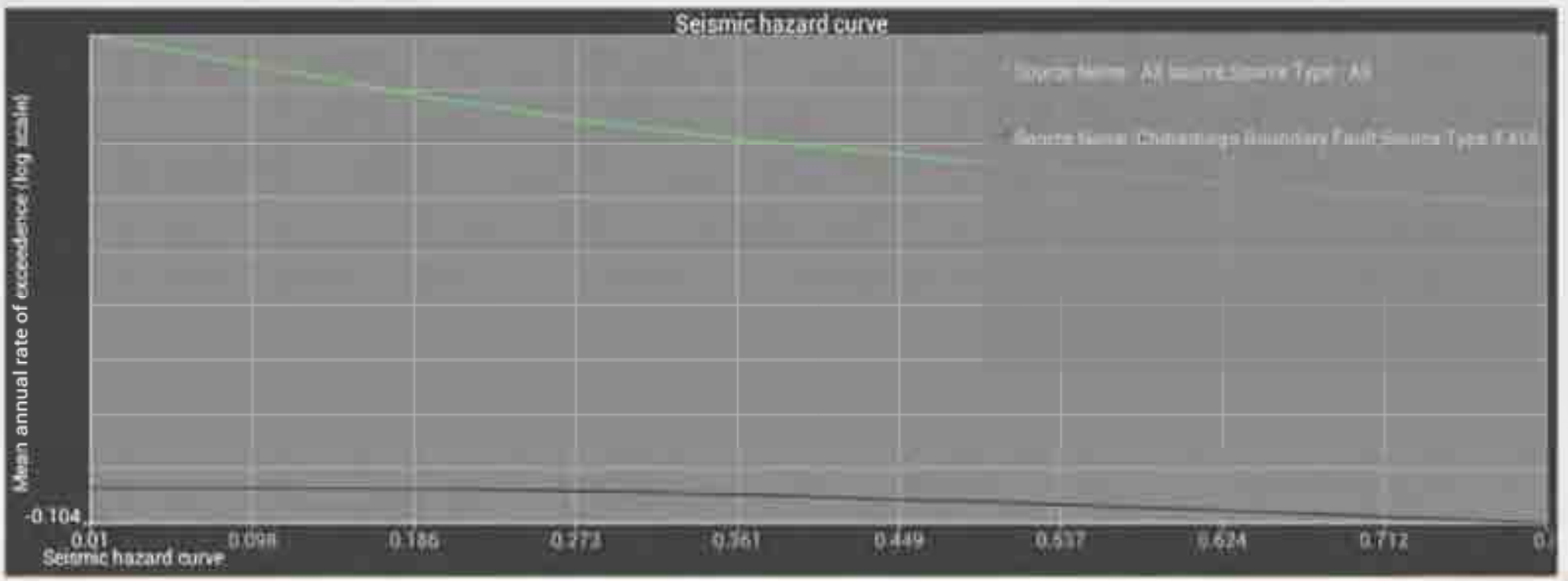
9:47 AM



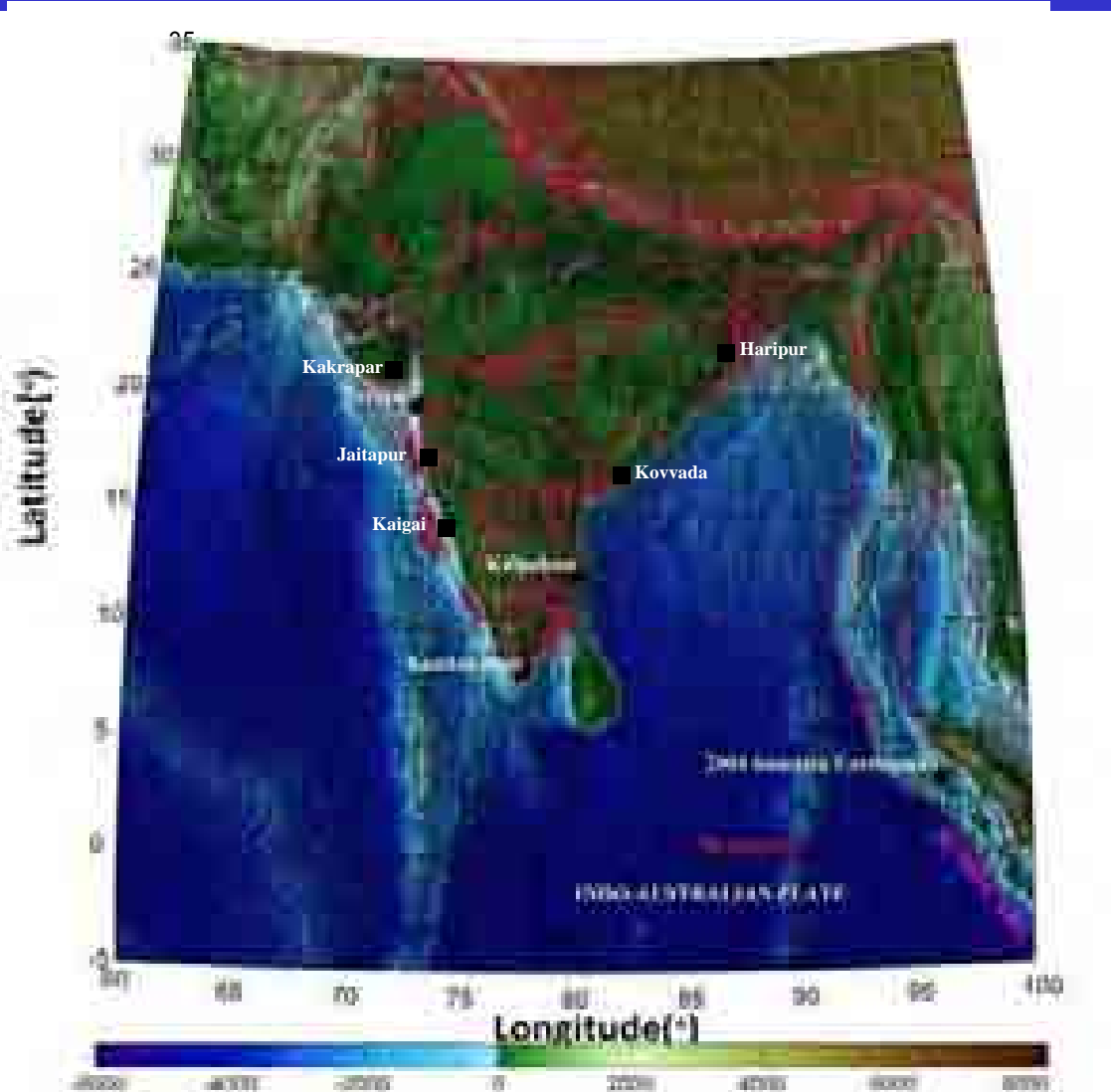
EQ Catalog & Faults



Home Mean annual rate of exceedence Vs. target acciteration



TSUNAMI HAZARD ANALYSIS

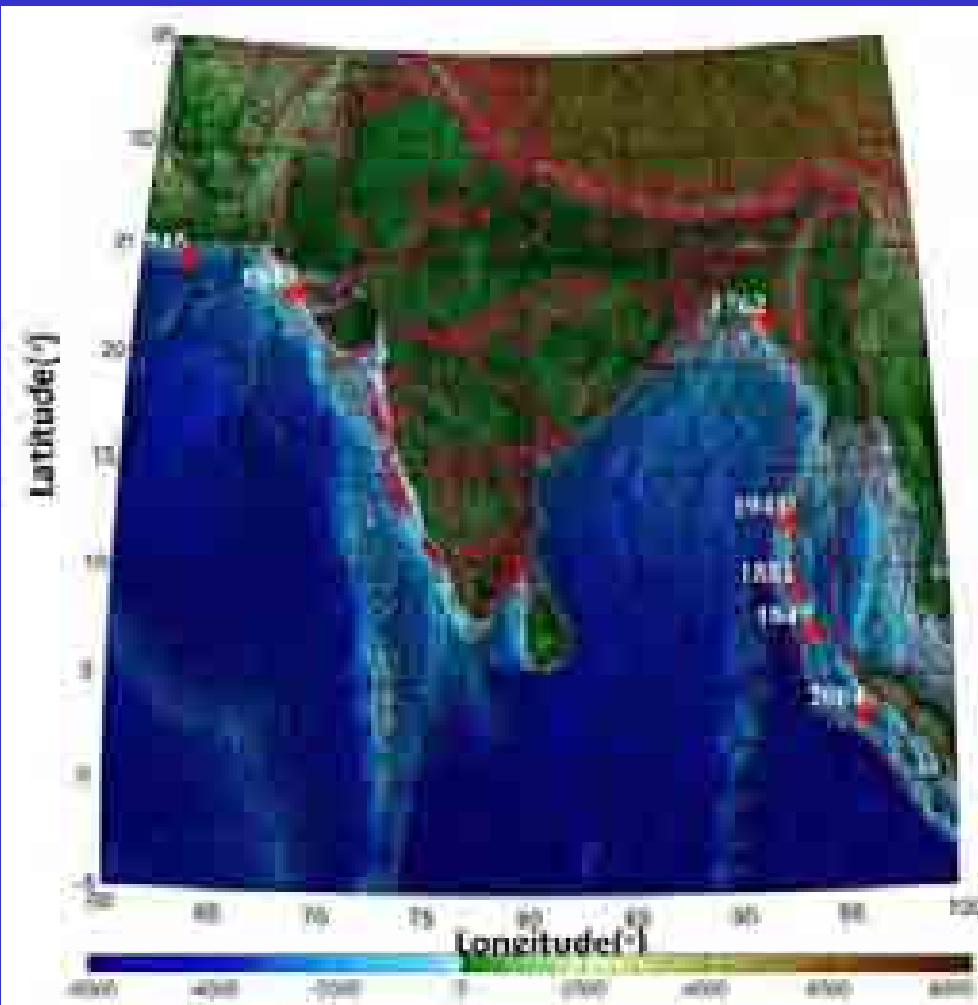


- India lies between latitude 8.07°N and 37.10°N and longitude 68.12°E and 97.42°E .
- India has one of the longest coastal lines (7517 km)
- The total population coastal districts and Island territories is around 171.44million, which accounts to 14.20% of the total population
- Mega cities like Kolkata, Chennai, Mumbai are in the coastal belt of India
- There are 13 Major Ports
- 8 Nuclear power Plants

It is thus evident that the Tsunami hazard analysis of the Indian coastal belt is significant for the safety of both life and economy



EARTHQUAKES THAT TRIGGERED TSUNAMI WAVES THAT AFFECTED INDIAN COAST



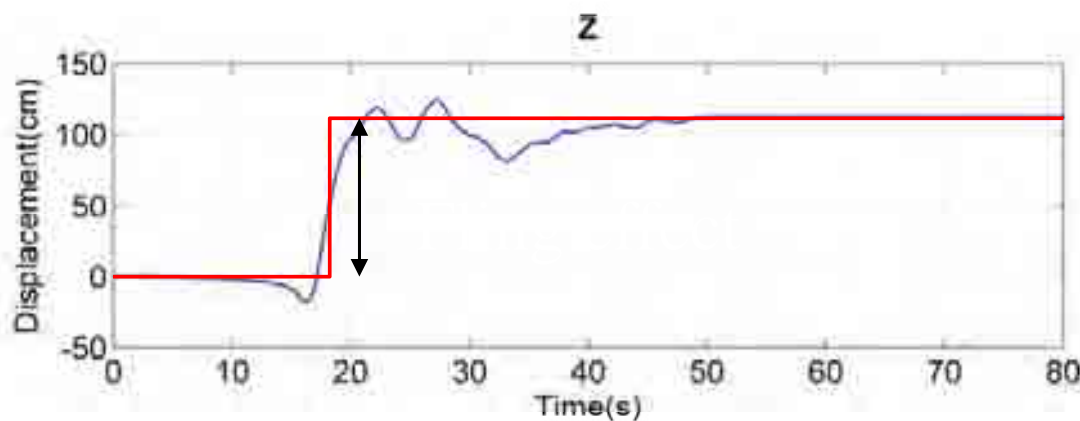
Date	Cause	Impact
12 th April, 1762	Earthquake in Bay of Bengal.	Tsunami wave of 1.8m at Bangladesh coast
31 st December, 1881	Magnitude 7.8 earthquake beneath the Car Nicobar	Entire East coast of India including Andaman & Nicobar coast was affected by tsunami
27 th August, 1883	Eruption of karkatoa volcano (Sunda Strait) Indonesia	East coast of India was affected and 2 m Tsunami was reported at Chennai.
26 th June, 1941	A 8.1 Magnitude earthquake in Andaman	East Coast of India was affected by tsunami.
27 th November, 1945	Earthquake in the Makran subduction zone	West coast of India was affected by Tsunami.
26 th December, 2004	Earthquake in Sumatra region	Affected the coastal India. Wave height in chennai around 3 m

How can an earthquake cause tsunami



- Tsunami is triggered by the static displacement of the ground underneath the ocean body
- This static displacement of ground is termed as Fling
- The ground motion contains two parts the fling effect and the vibration component

Tsunami Generation



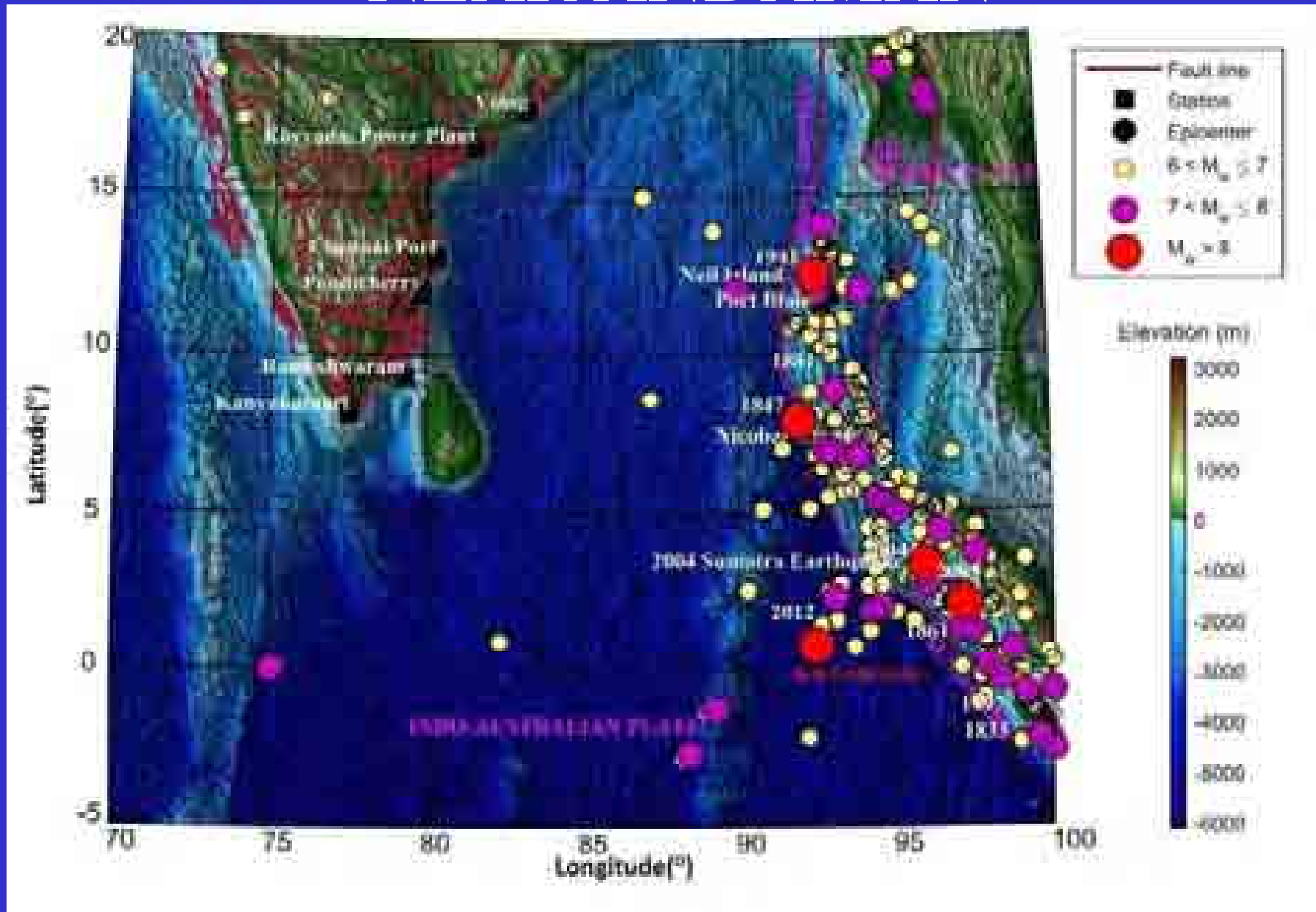
Motion of Fault Block

What intensity of fling can trigger a tsunami?

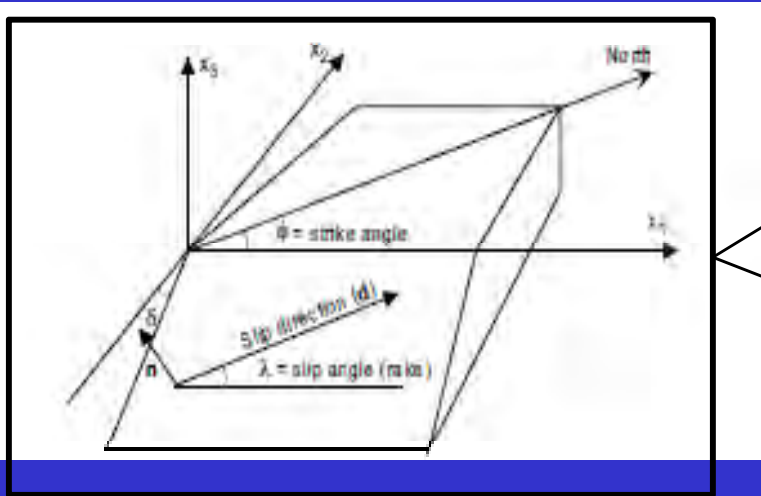
Does the vibration component in the ground motion has any effect on the tsunami waves?



SEISMICITY AT ACTIVE REGIONS NEAR ANDAMAN

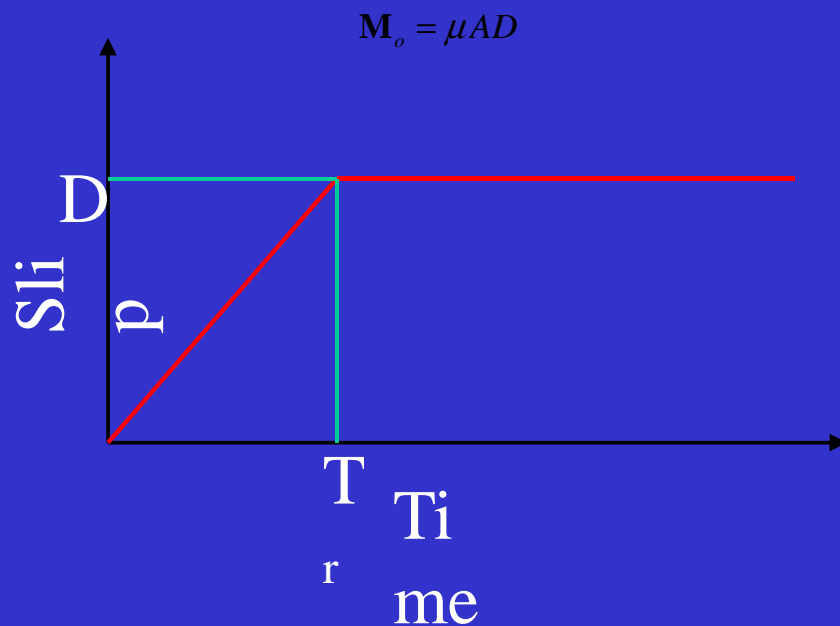
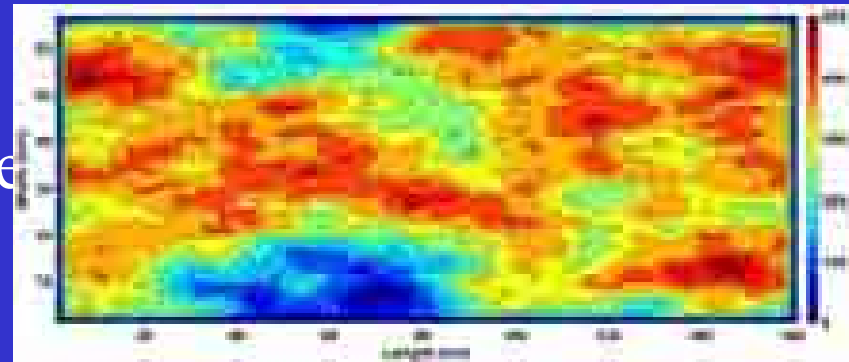


Analytical model - Source



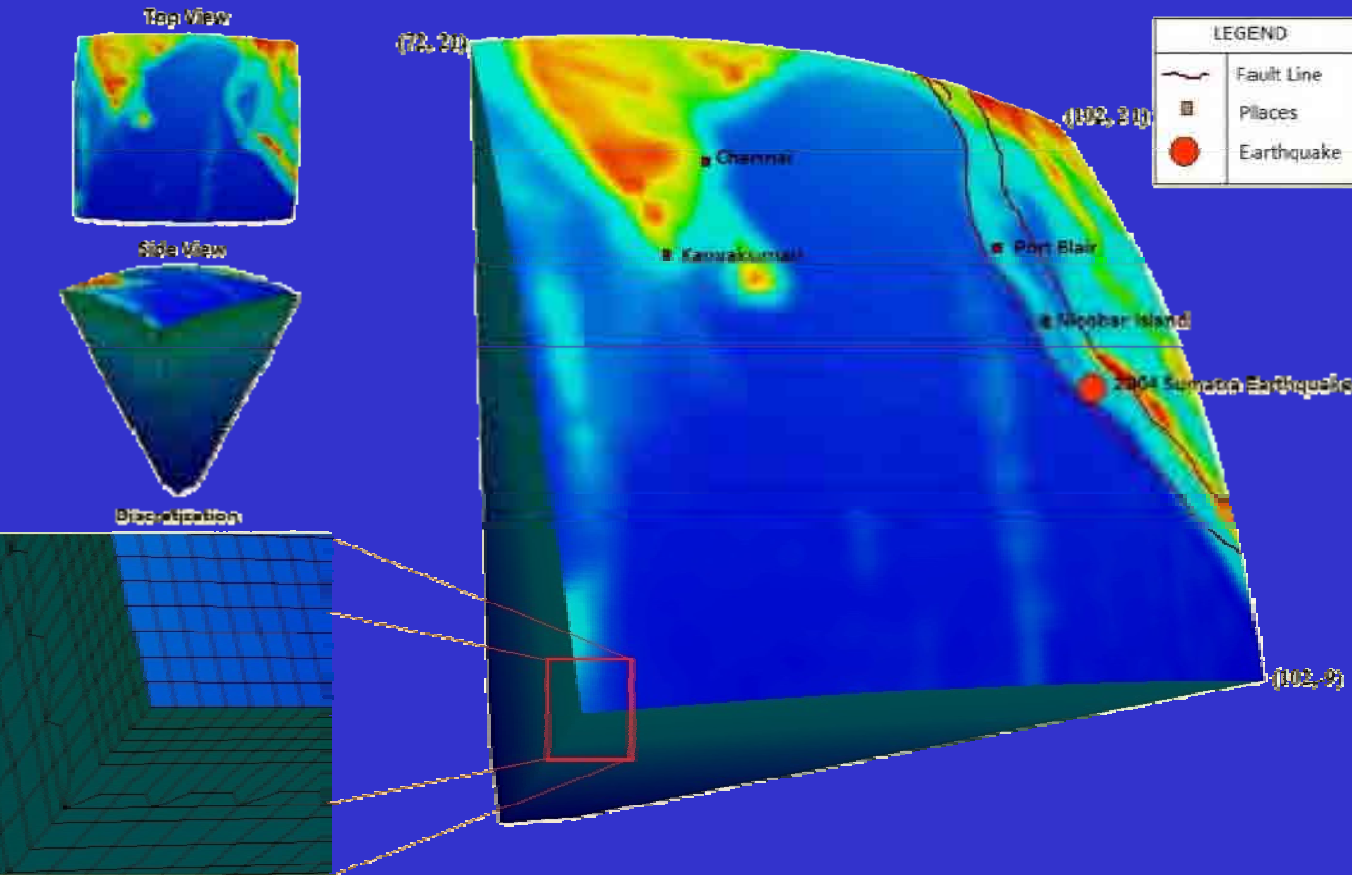
Point Source

Finite Fault



Magnitude (M_w)	Typical Dimension
5	4×3
6	13×8
7	45×24
8	161×67
9	567×190

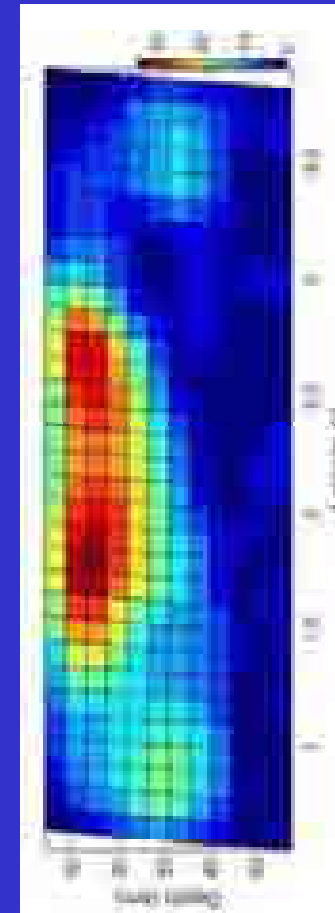
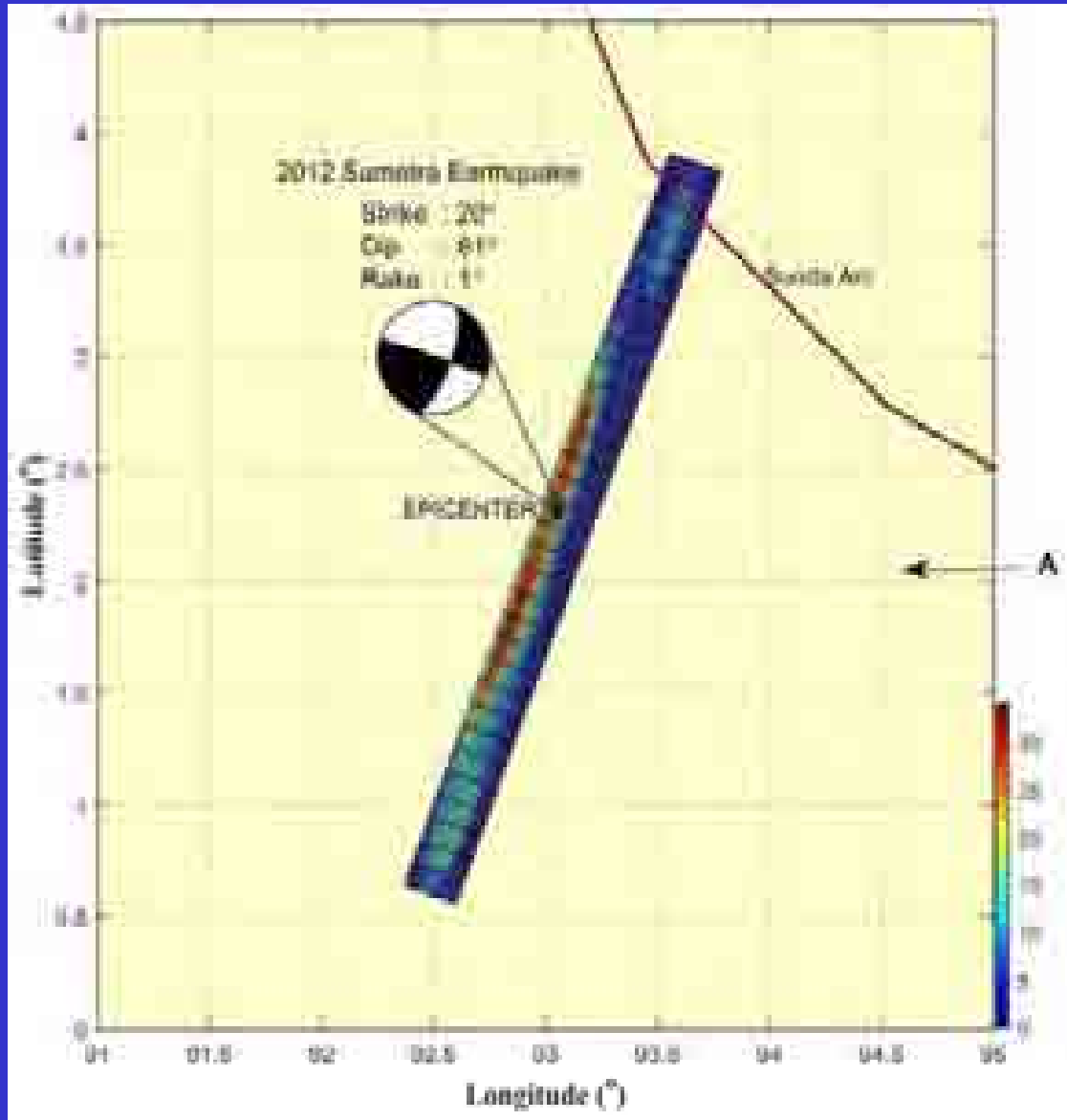
MESH USED FOR GROUND MOTION SIMULATION



Characteristic	Value
Dimension: Angular width	$35^{\circ} \times 35^{\circ}$
Center Latitude	25°
Center Longitude	82°
Total no: of elements	11.49 Million
No of element at surface	0.2 Million
Average distance between points	5 km
Total no: of elements	68.96 Million
No: of nodes	0.46 Billion
Total Degree of freedom	1.38 Billion
Time Step used for simulation	0.02s
Total Time required for simulation	20 Hours

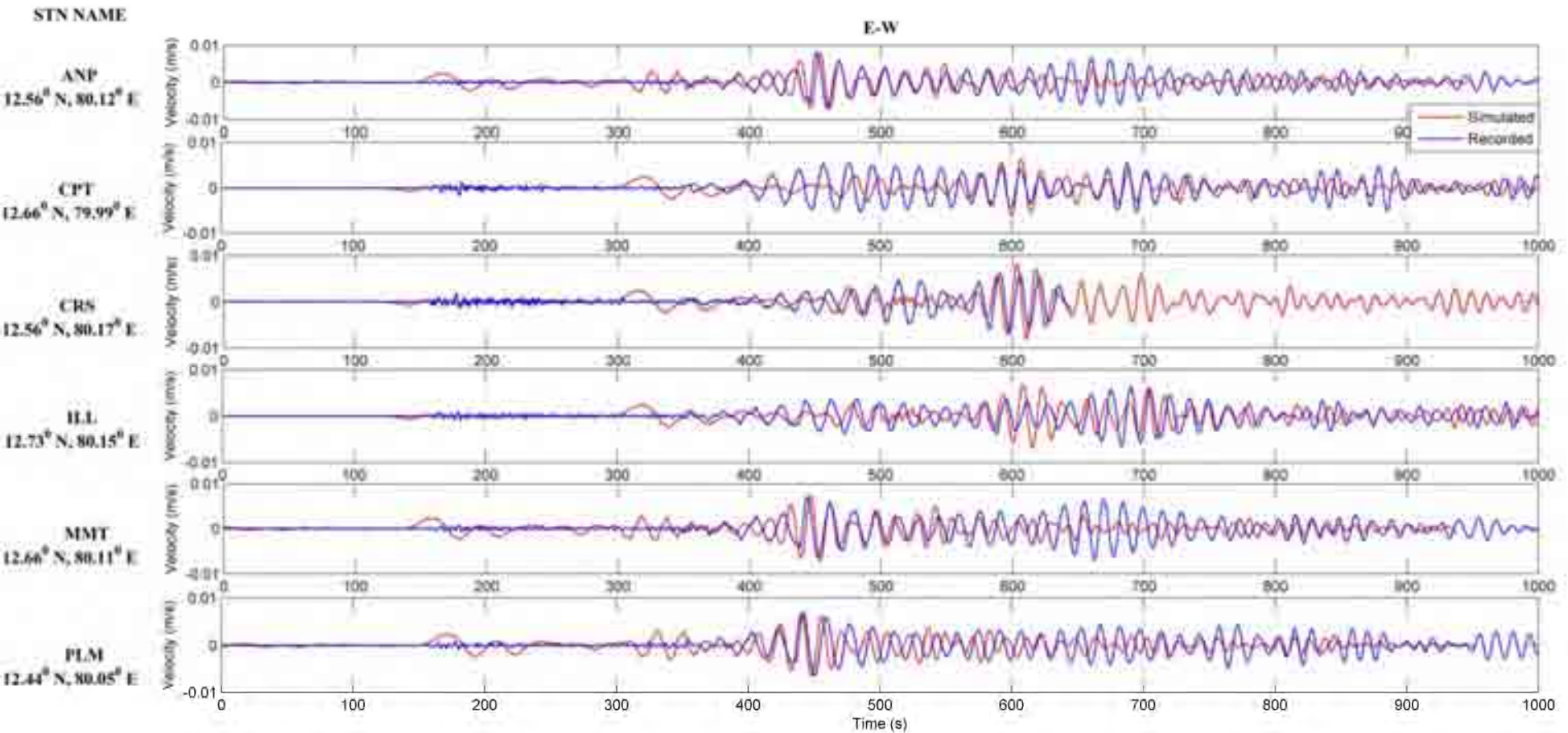
VALIDATION

Slip Model 2012 Mw 8.6 Sumatra Earthquake



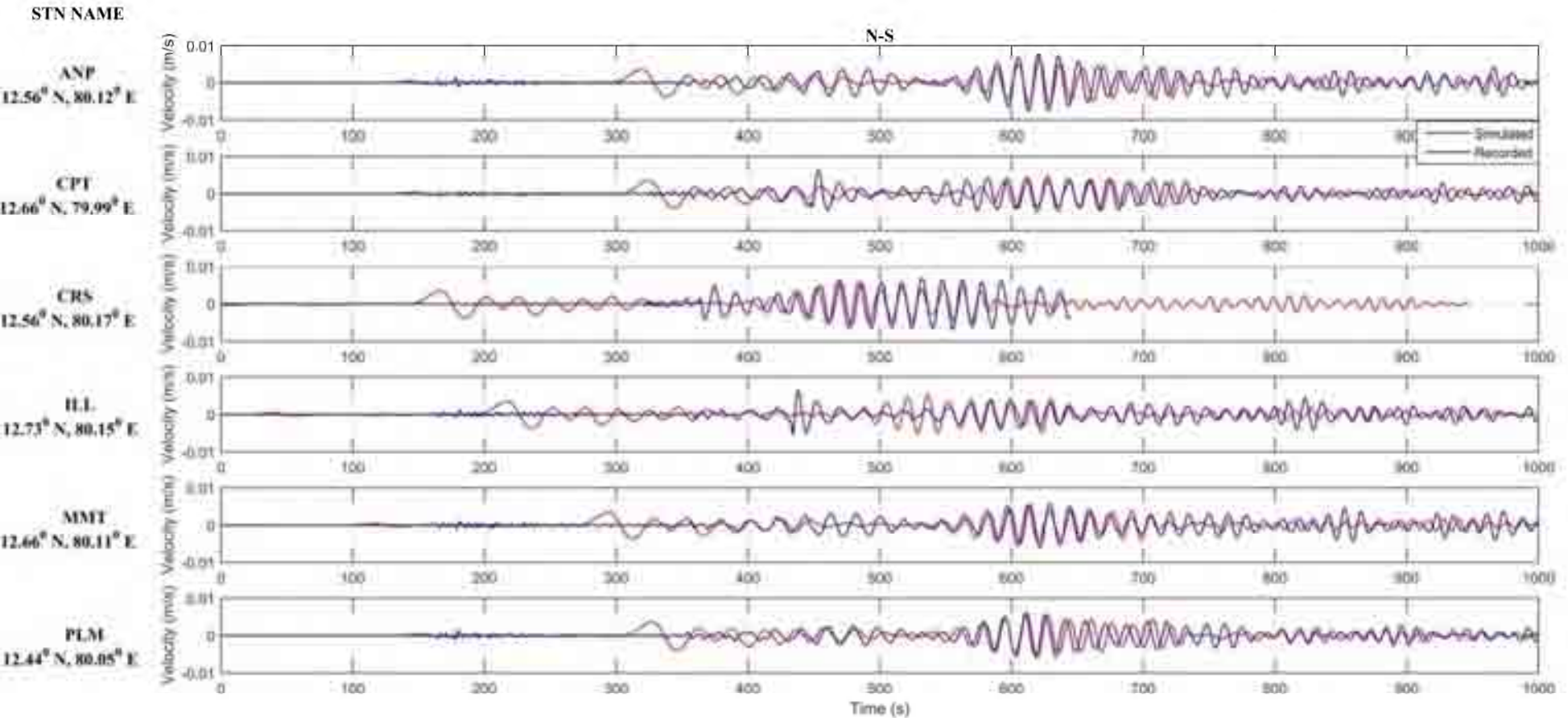
VALIDATION

Comparison with IGCAR data, EW direction



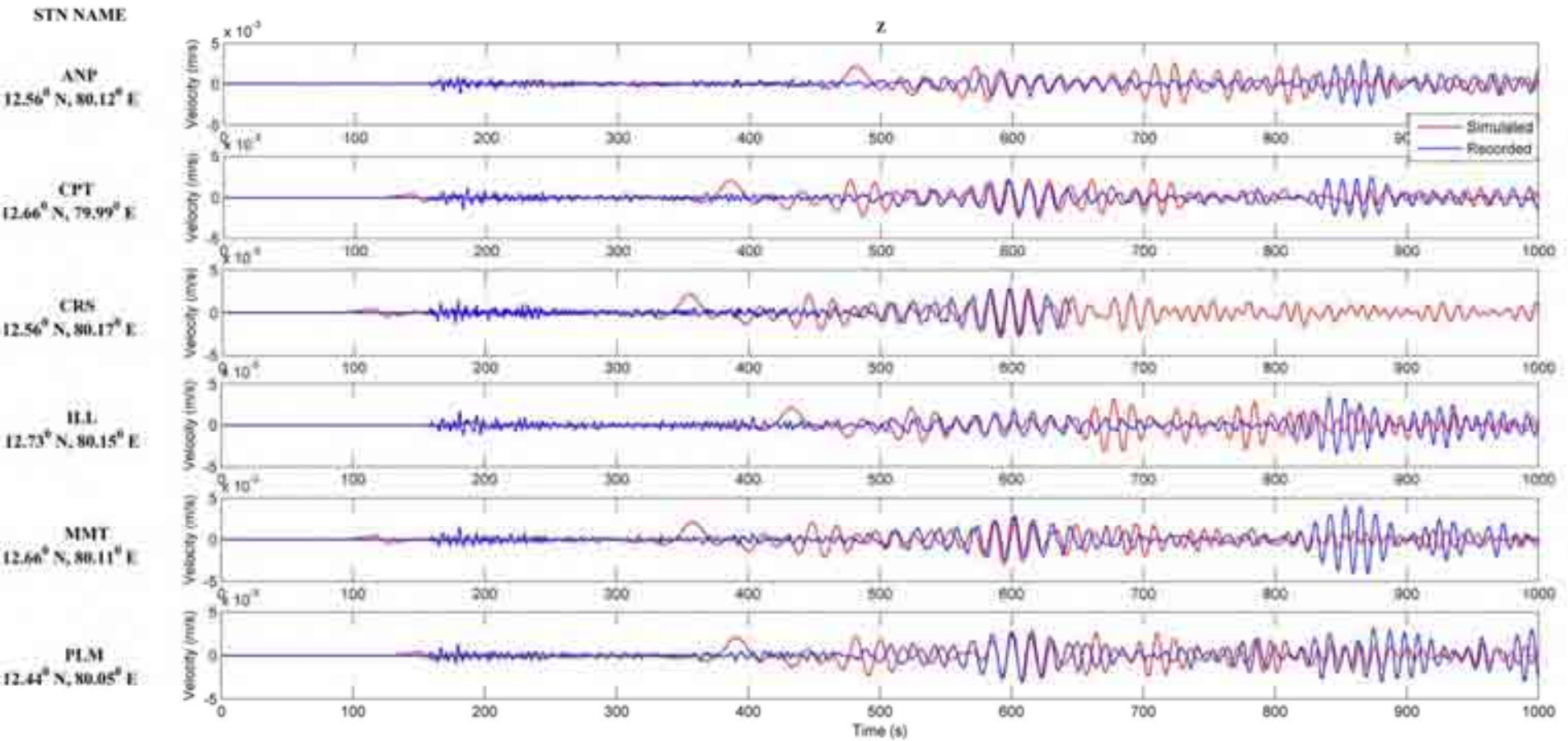
VALIDATION

Comparison with IGCAR data, NS direction



VALIDATION

Comparison with IGCAR data, Z direction



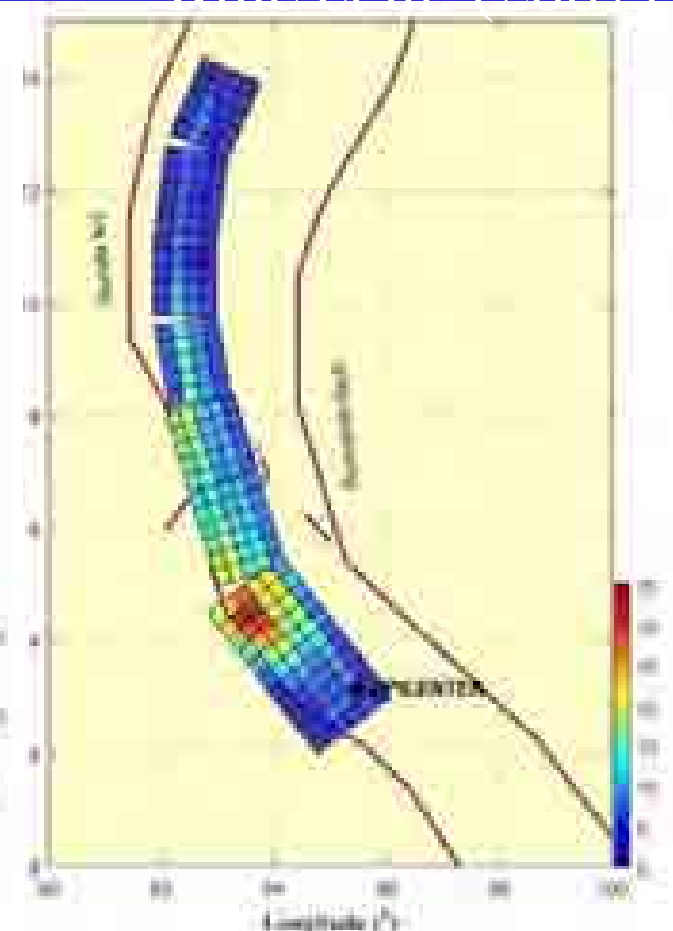
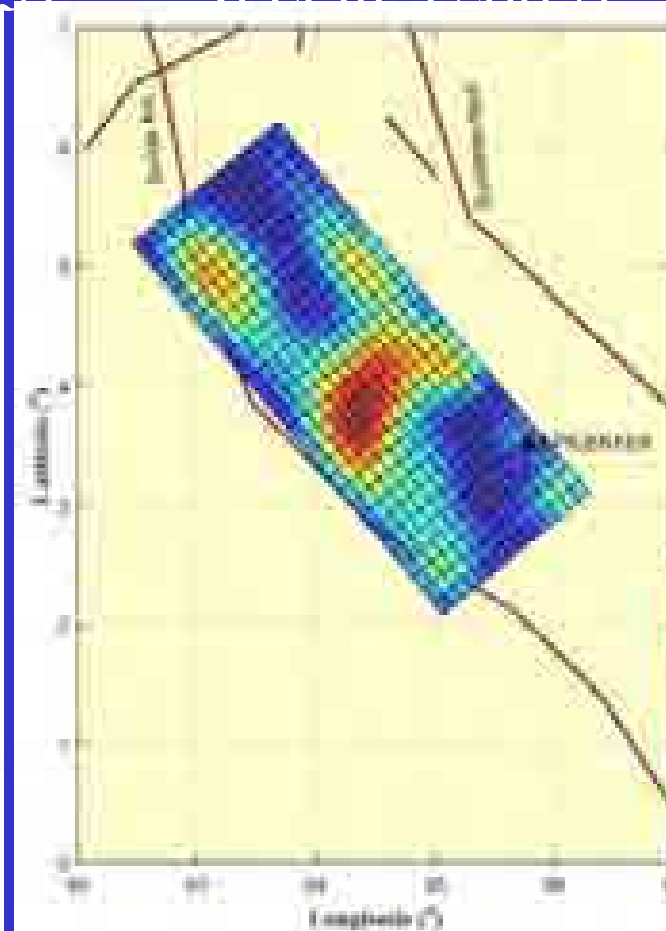
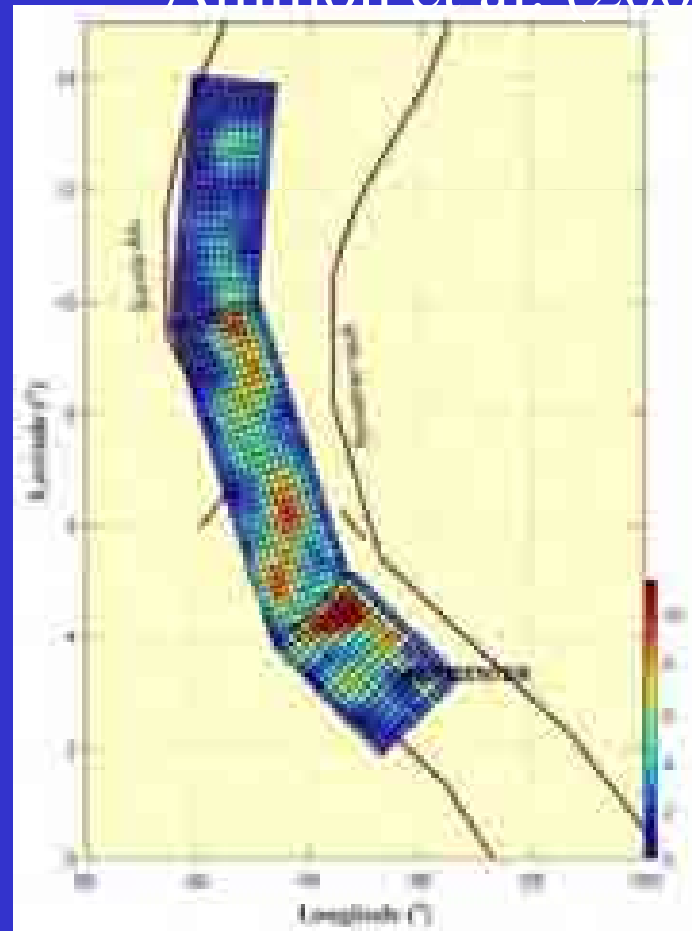
GROUND MOTION SIMULATION

Slip Distribution 2004 Mw 9.1 Sumatra Earthquake

Ammon et al. (2005)

Ii et al. (2005)

Rhie et al. (2007)

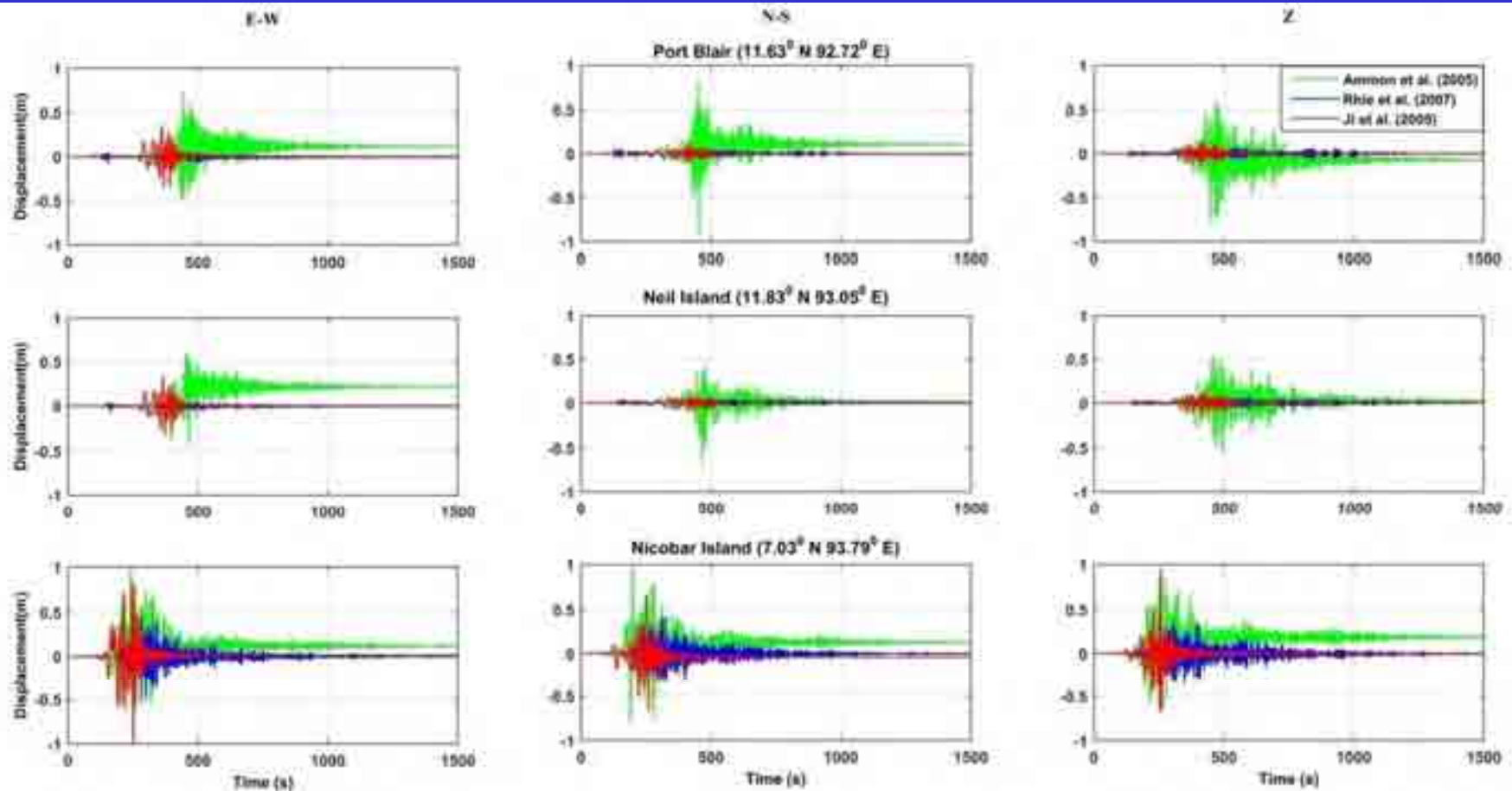


GROUND MOTION SIMULATION

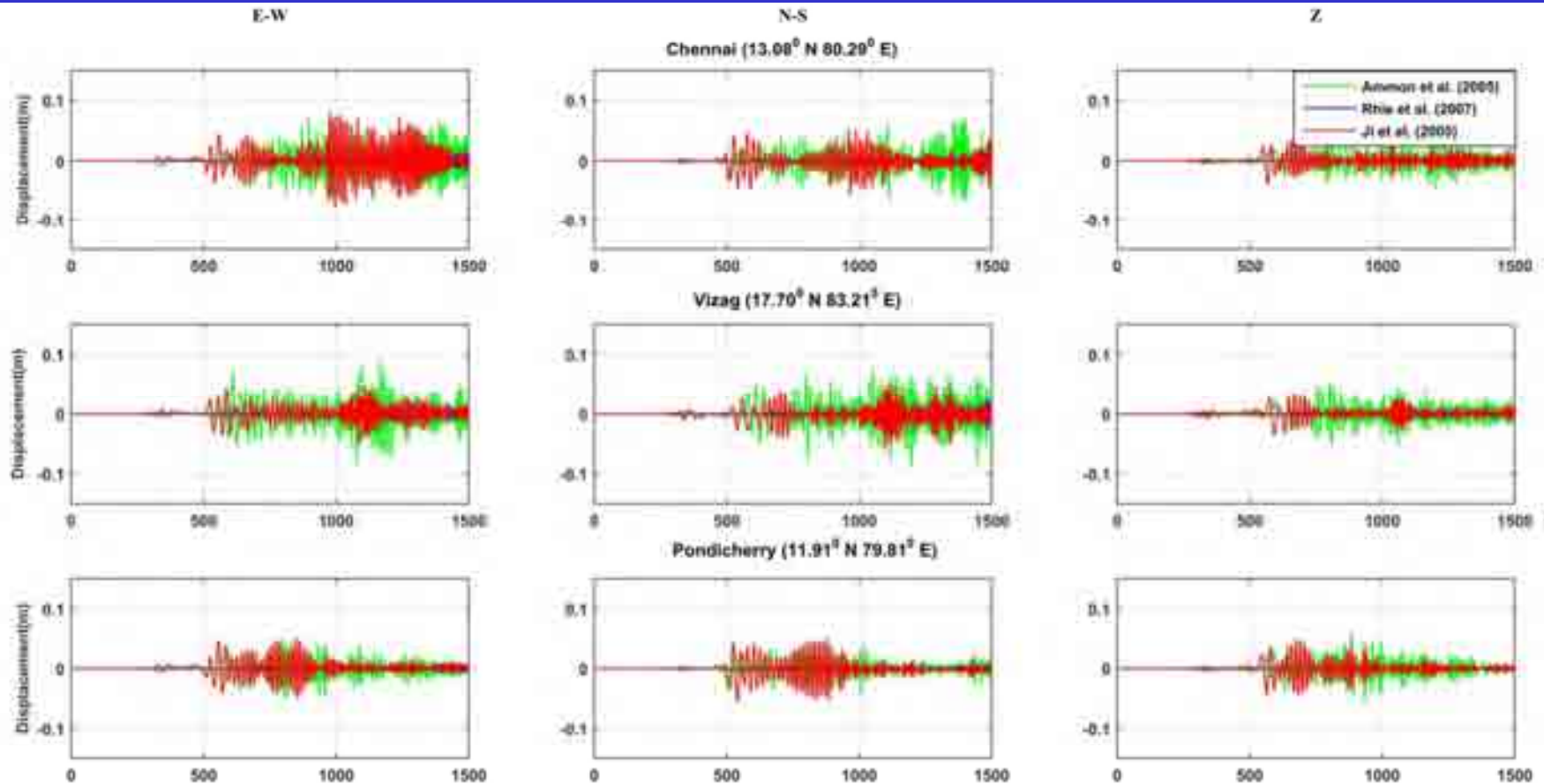
Slip Distribution 2004 Mw 9.1 Sumatra Earthquake

	Ammon et al.	Ji et al.	Rhie et al.
(Longitude (°), Latitude (°))	(95.78, 3.3)	(95.78, 3.3)	(95.49, 3.12)
Depth (km)	35	35	27
Length (km)	1480	450	1355
Number of segments	3	1	6
Hypocenter :along strike	70 in Seg. 1	52.5	43.91 in Seg. 1
: down-dip	168 in Seg. 1	150	27 in Seg. 1
Segment: Length (km)	300, 680, 500	450	350, 343, 162.50, 162.50,165.50, 162.50
Width (km)	224, 192, 176	180	188.64, 144.88, 129.47, 129.47, 129.47, 129.47
Strike	315, 342, 5	320	322, 343, 350,0,7,24
Dip	12, 15, 17.5	11	11,15, 18, 18,18,18
Rake	99	91.7	-
Number of Sub-faults	210, 408, 275	450	66, 55, 20,20,20,20
Size of Sub-faults (km)	20 × 16	15 × 12	31.82 × 31.44
Avg. Rupture Velocity (km/s)	3	2	2.6
Avg. Rupture Time (s)			20
Max. Slip (m)	11.5	20	35

Displacement time history for 2004 (M_w 9.1) Sumatra earthquakes: Stations near the epicentral region (near-field)

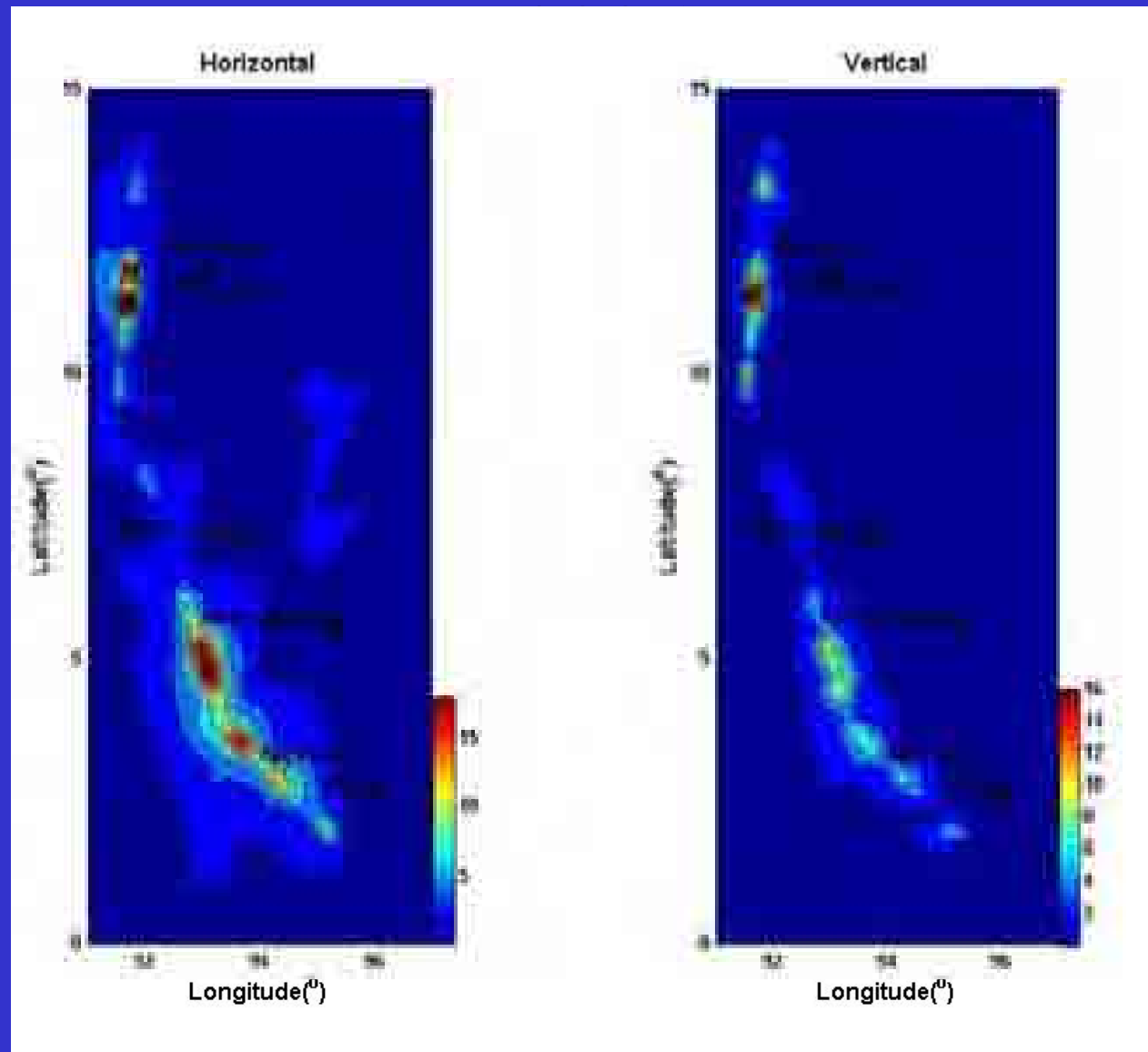


Displacement time history for 2004 (M_w 9.1) Sumatra earthquakes: Stations far from the epicentral region (far-field)



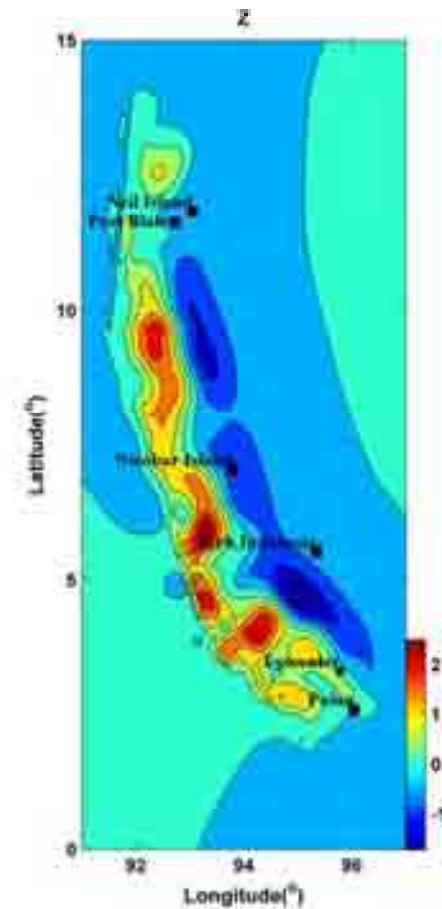
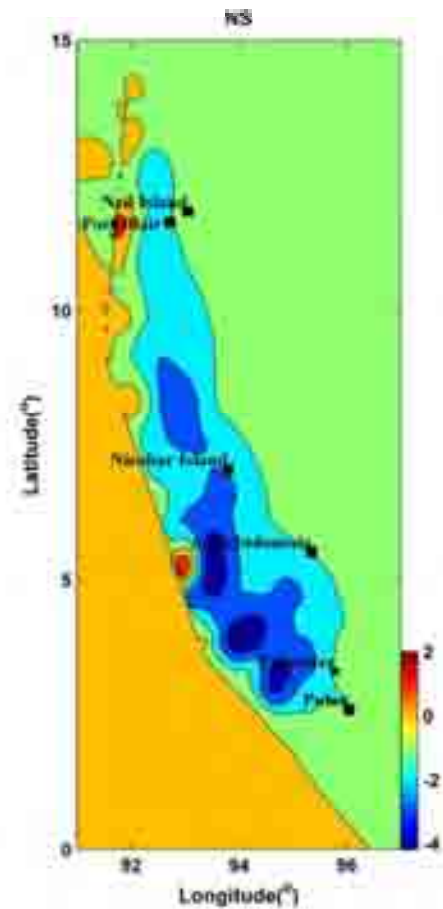
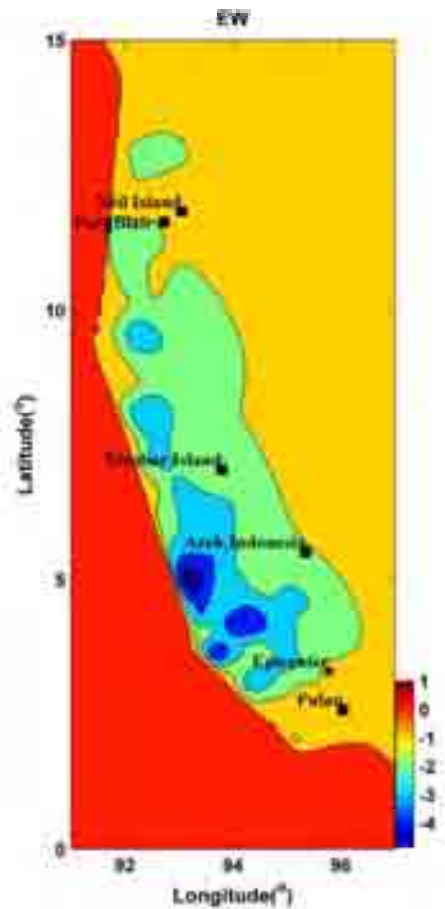
PEAK GROUND RESIDUAL DISPLACEMENT

The 2004 SUMATRA EARTHQUAKE: Ammon et al.



VERTICAL GROUND RESIDUAL DISPLACEMENT

The 2004 SUMATRA EARTHQUAKE: Ammon et al. (2007)



Wave Propagation- Finite Volume Method

$$\frac{\partial h}{\partial t} + \frac{\partial}{\partial x}(h\dot{u}_x) + \frac{\partial}{\partial y}(h\dot{u}_y) = 0$$

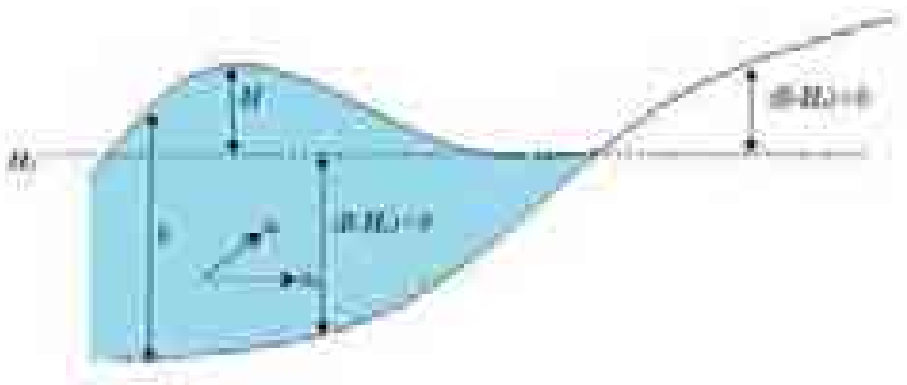
$$\frac{\partial}{\partial t}(h\dot{u}_x) + \frac{\partial}{\partial x}(h\dot{u}_x^2 + \frac{1}{2}gh^2) + \frac{\partial}{\partial y}(h\dot{u}_x\dot{u}_y) = -gh\frac{\partial B}{\partial x}$$

$$\frac{\partial}{\partial t}(h\dot{u}_y) + \frac{\partial}{\partial x}(h\dot{u}_x\dot{u}_y) + \frac{\partial}{\partial y}(\frac{1}{2}gh^2 + h\dot{u}_y^2) = -gh\frac{\partial B}{\partial y}$$

$$\mathbf{H}(x,t) = h(x,t) + \mathbf{B}(x,t)$$

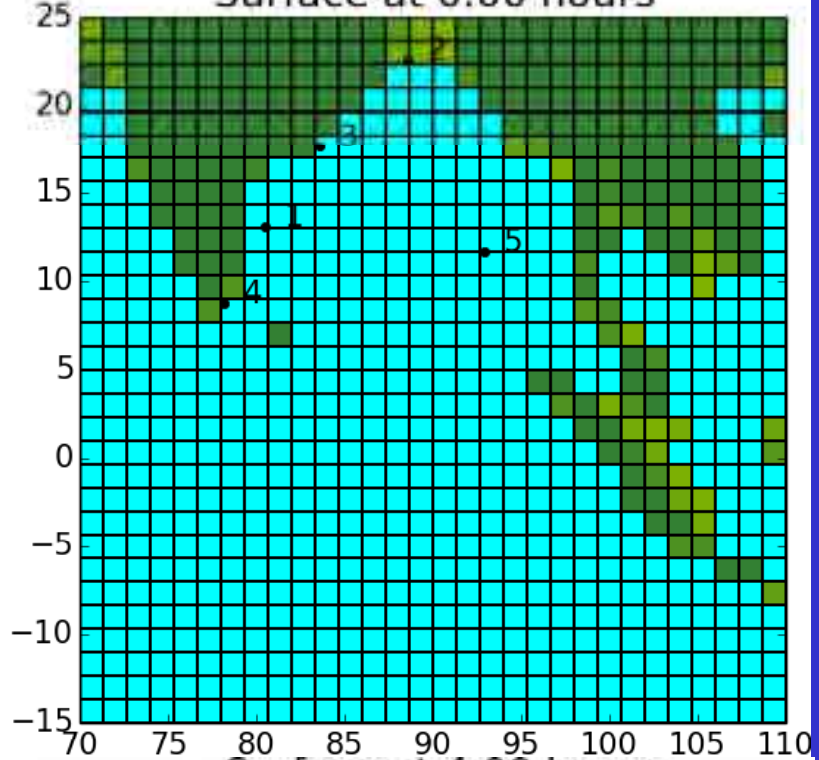
Shallow water wave can be concisely written as:

$$\frac{\partial q}{\partial t} + \frac{\partial f(q)}{\partial x} + \frac{\partial g(q)}{\partial y} = \psi(q, x, y)$$

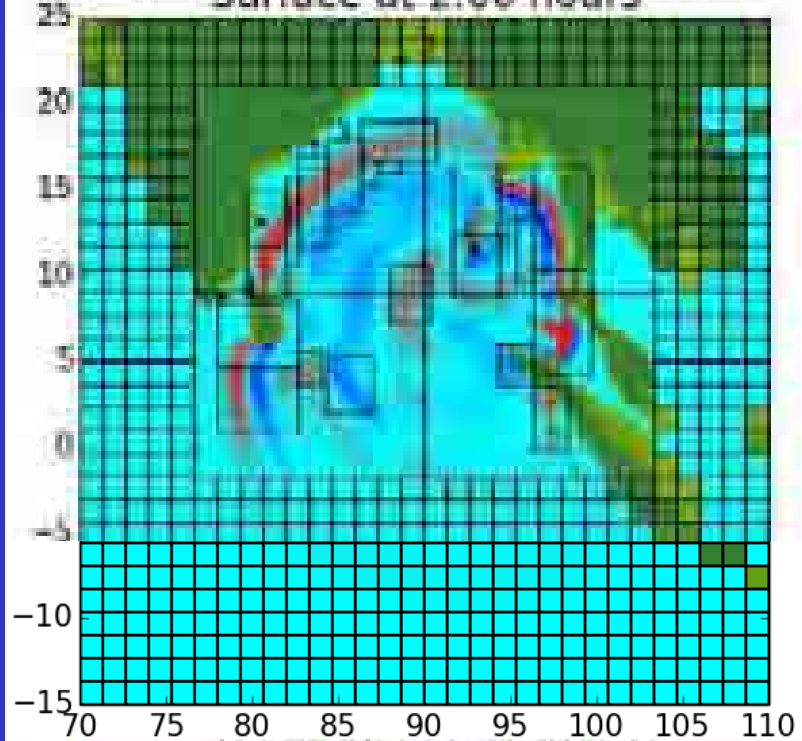


$$q = \begin{bmatrix} h \\ h\dot{u}_x \\ h\dot{u}_y \end{bmatrix}, \quad f(q) = \begin{bmatrix} h\dot{u}_x \\ h\dot{u}_x^2 + \frac{1}{2}gh^2 \\ h\dot{u}_x\dot{u}_y \end{bmatrix}, \quad g(q) = \begin{bmatrix} h\dot{u}_y \\ h\dot{u}_x\dot{u}_y \\ \frac{1}{2}gh^2 + h\dot{u}_y^2 \end{bmatrix}, \quad \psi = \begin{bmatrix} 0 \\ -gh\frac{\partial B}{\partial x} \\ -gh\frac{\partial B}{\partial y} \end{bmatrix}$$

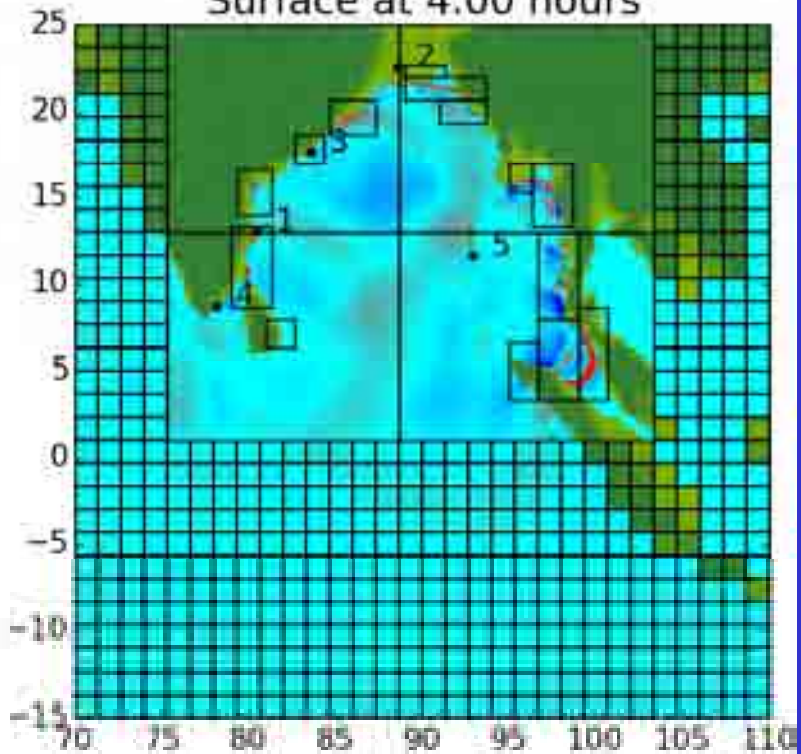
Surface at 0.00 hours



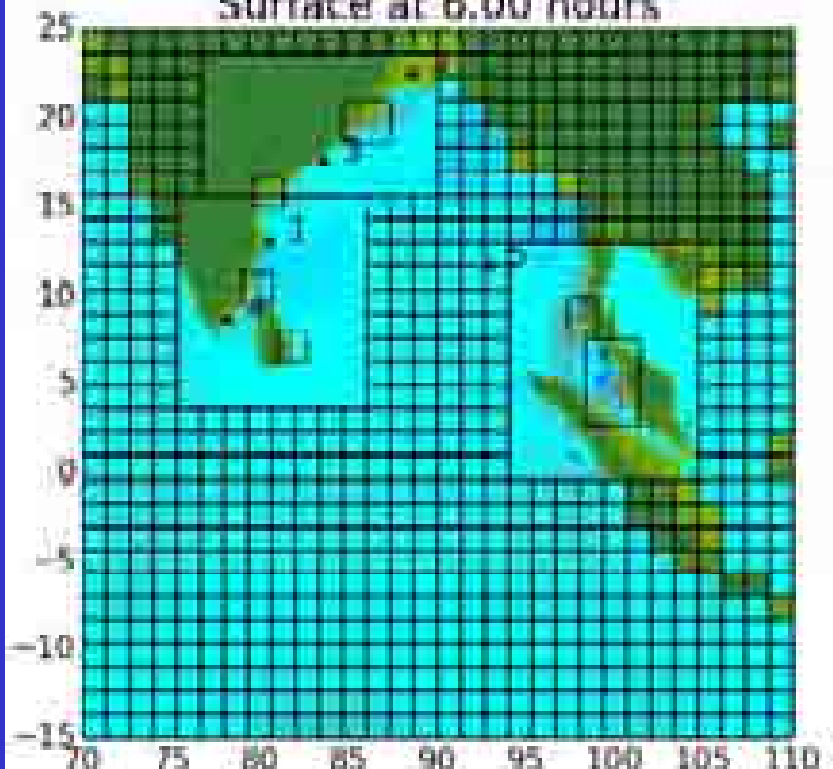
Surface at 2.00 hours



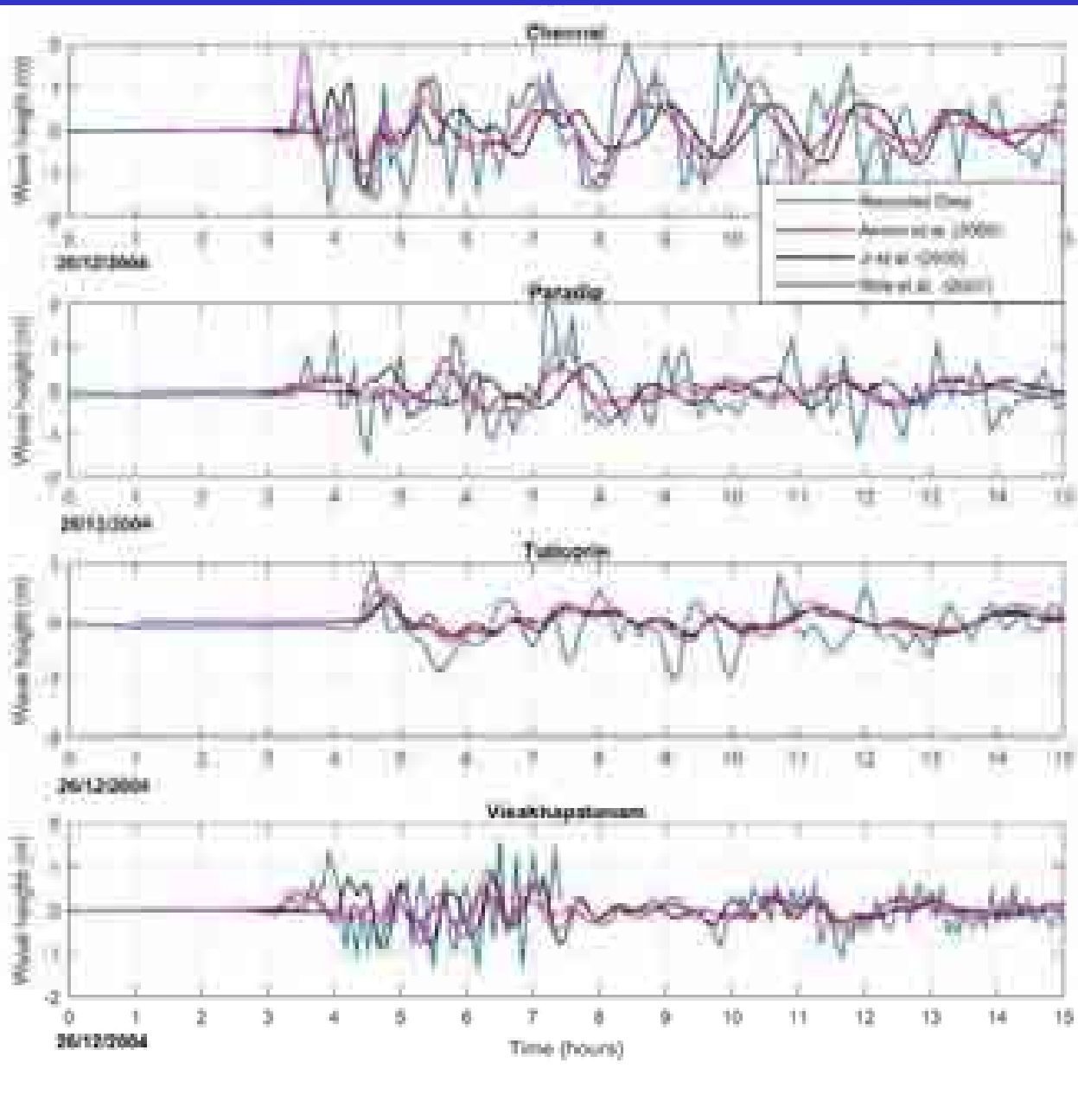
Surface at 4.00 hours



Surface at 6.00 hours



VALIDATION OF WAVE HEIGHT TIME HISTORY FOR 2004 SUMATRA EARTHQUAKE



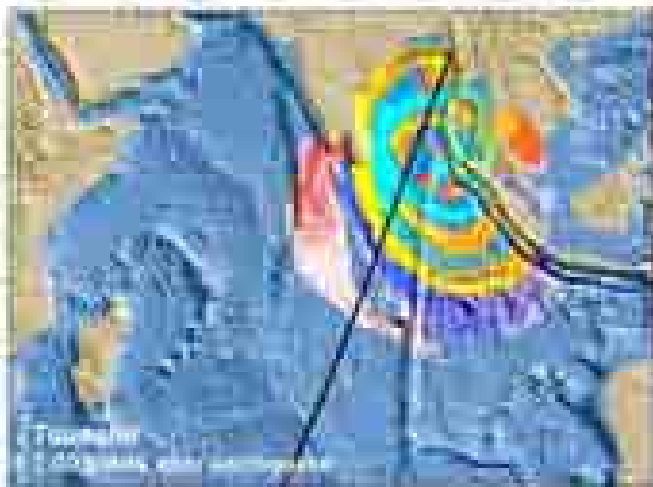
The recorded data corresponds to the detided tsunami signals at Tuticorin, Chennai, Vishakapattanam, and Paradip ports downloaded from:

http://www.nio.org/index/option/com_nomenu/task/show/tid/2/sid/18/id/11

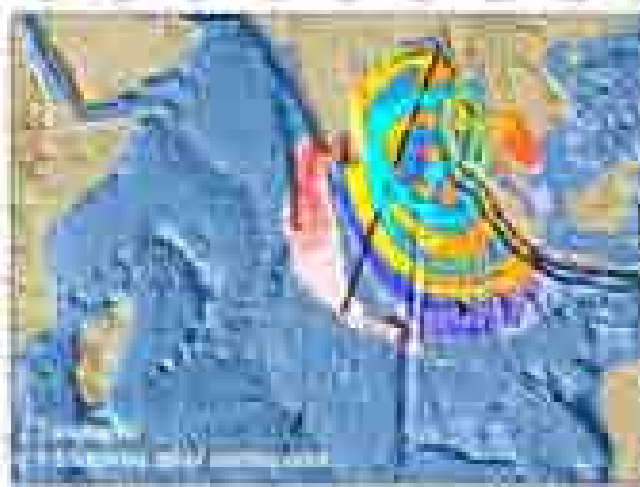
VALIDATION OF ALTIMETER READINGS FOR 2004 SUMATRA EARTHQUAKE

- ❑ Performance of the tsunami model in the open ocean is assessed by validating the results with the altimeter-derived sea surface height
- ❑ Jason-1, TOPEX/Poseidon, and ENVISAT altimeter have passed over the Bay of Bengal in Indian Ocean at 115, 120, and 200 min, respectively, after the December 2004 earthquake.
- ❑ Location along which Altimeter readings are recorded (black solid line) are as follows:

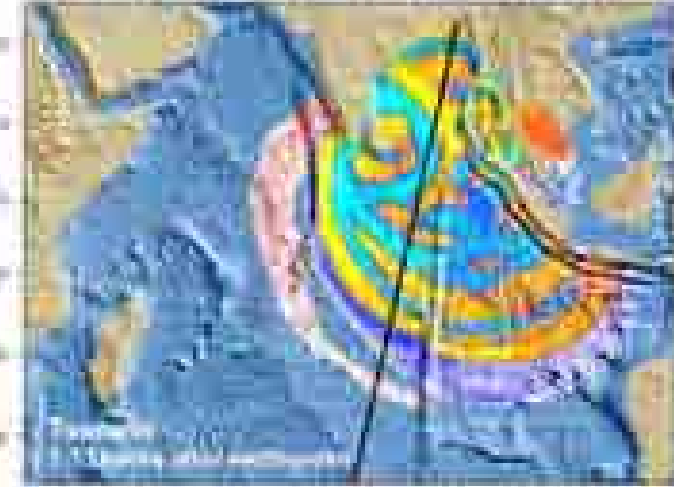
Jason - 1



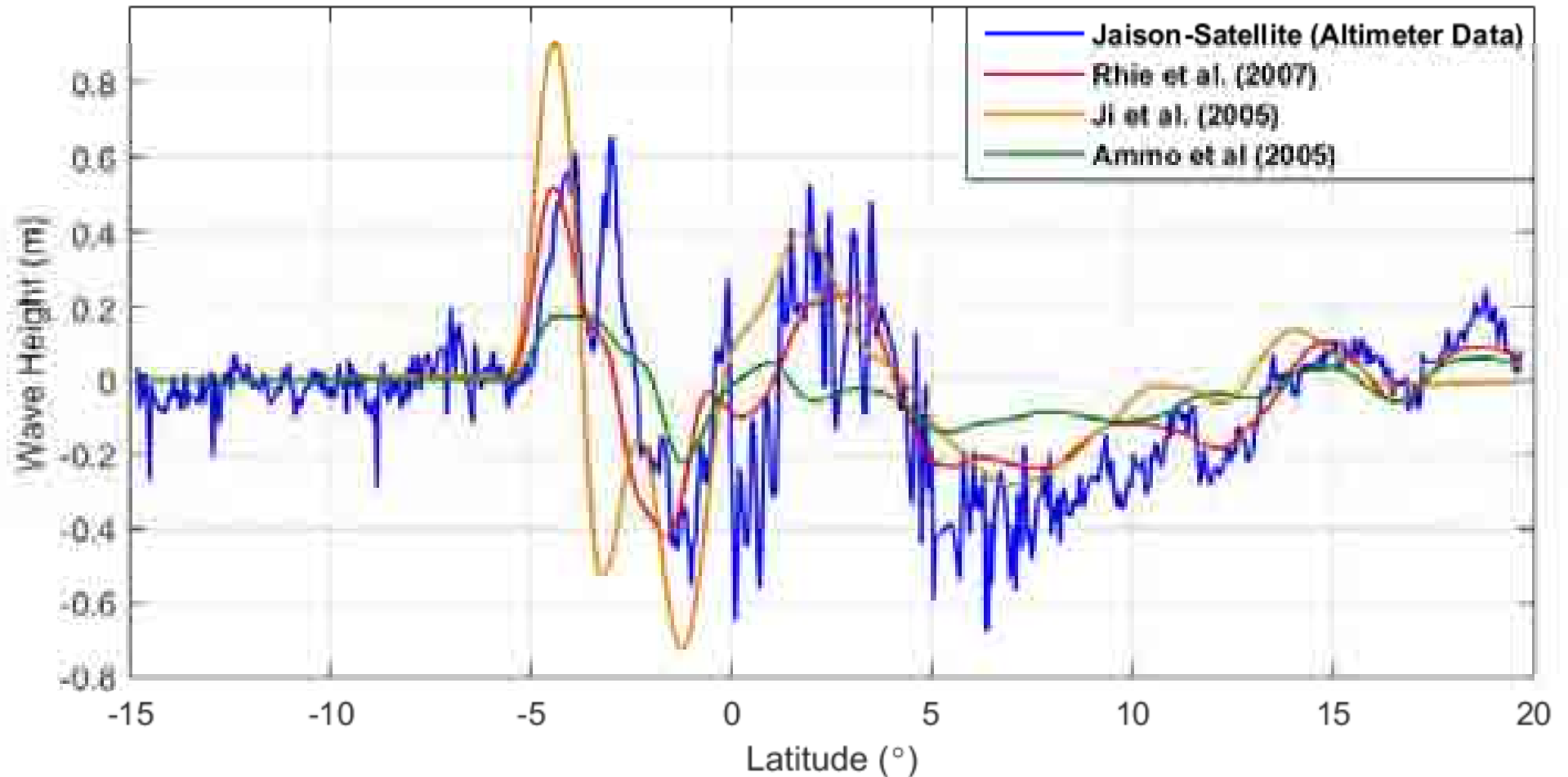
TOPEX/ Poseidon



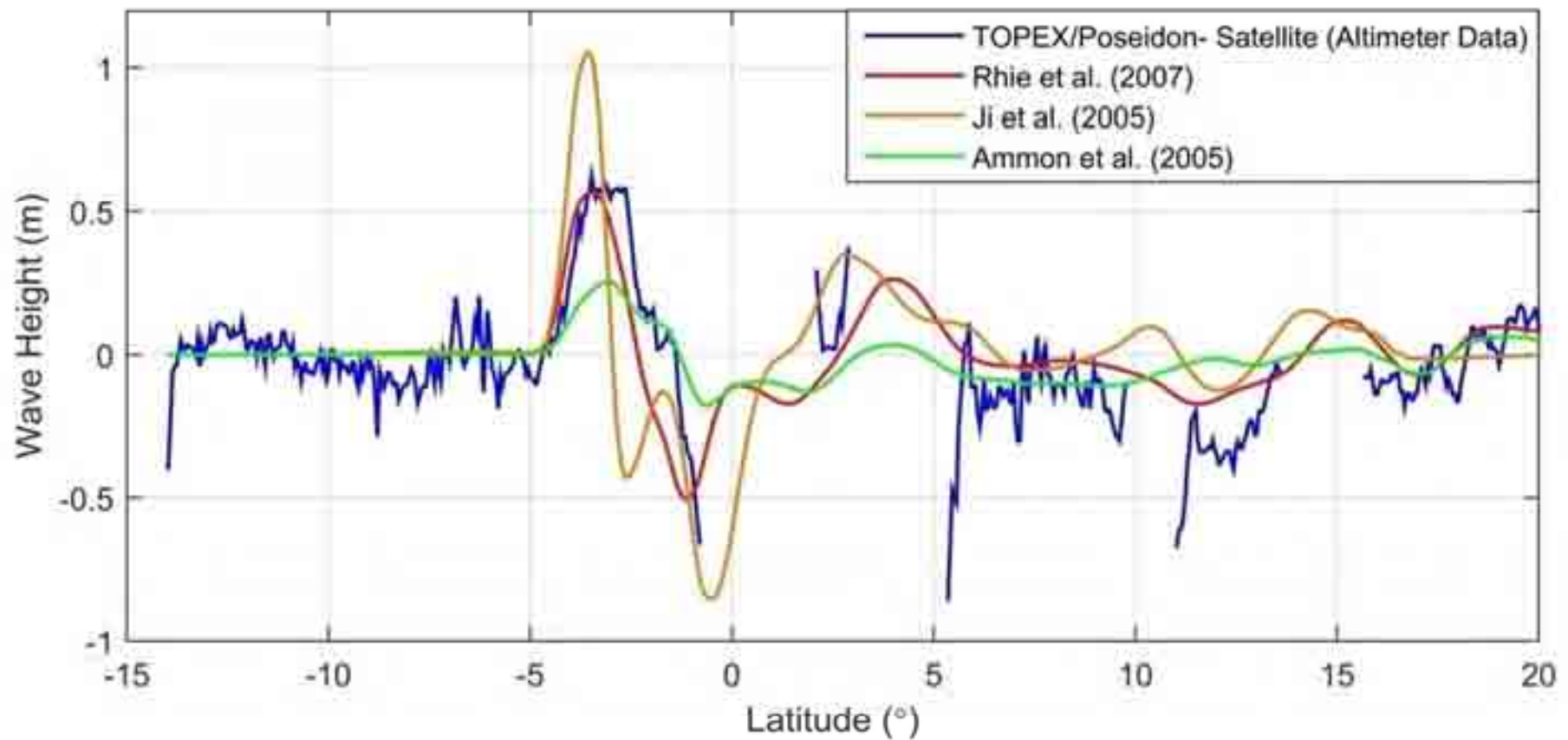
ENVISAT



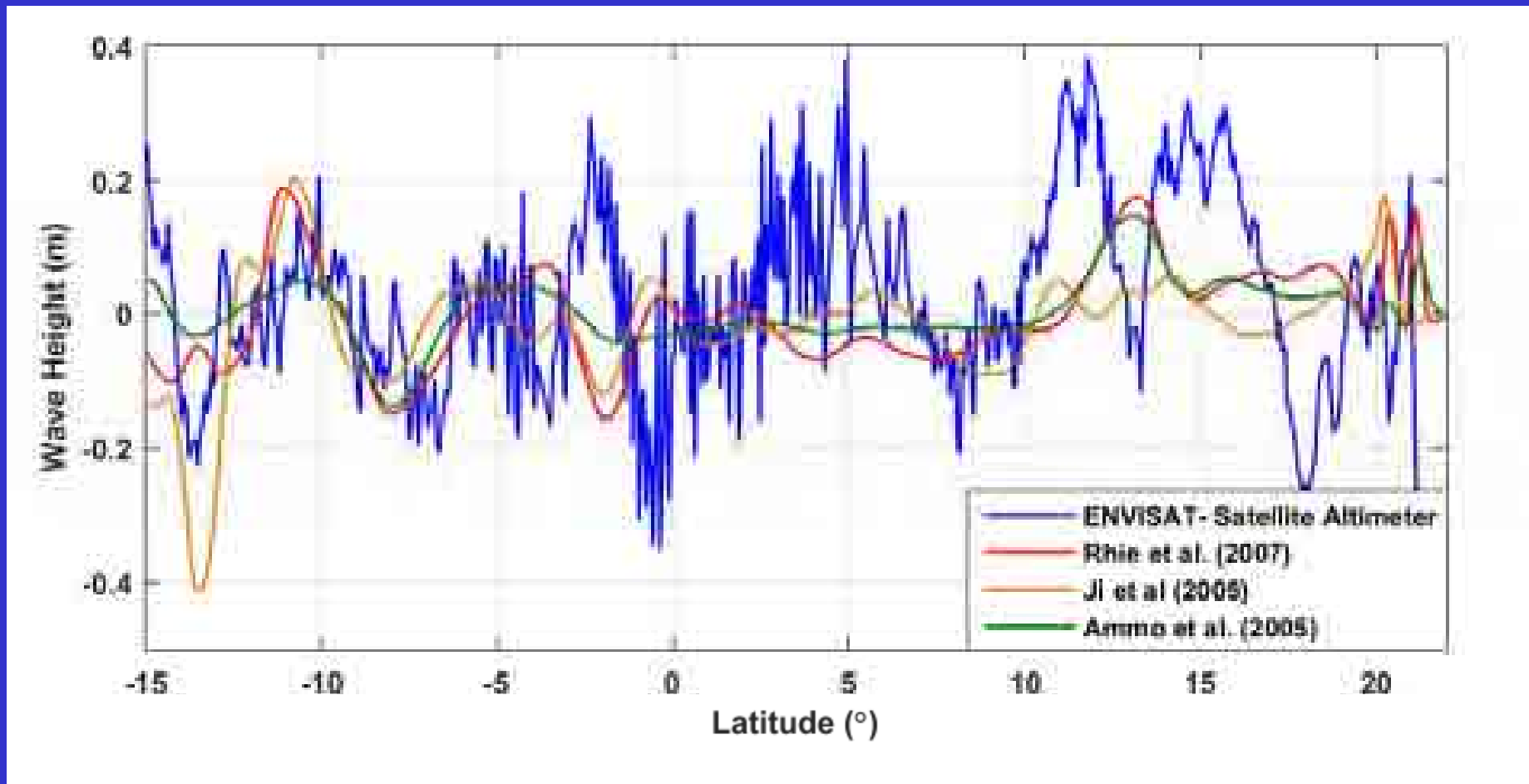
VALIDATION OF ALTIMETER READINGS FOR 2004 SUMATRA EARTHQUAKE: JASON -1



VALIDATION OF ALTIMETER READINGS FOR 2004 SUMATRA EARTHQUAKE: TOPEX/Poseidon



VALIDATION OF ALTIMETER READINGS FOR 2004 SUMATRA EARTHQUAKE: ENVISAT



How to generate tsunami hazard curve

Probability of occurrence of earthquake

$$P(k \text{ earthquake per year}) = \frac{\nu^k e^{-\nu}}{k!} \quad k = 0, 1, 2, \dots$$

Probability that wave height exceed a certain limit provided earthquake occurred

$$P(h > \bar{h})_{t \text{ year}} = 1 - e^{-\left(\sum_{k=1}^{N_z} \nu_k P_k\right) t}$$

Total probability at a site due to all the identified seismic zones

$$P_r(h \geq \bar{h}; x, \Delta T) = 1 - \prod_{i=1}^{N_z} (1 - P_r(h \geq \bar{h}; x, \Delta T, z_i))$$

Combined probability considering all scenarios

$$P_i(h \geq \bar{h}; x, z_i) = \mu_{z_i} \sum_{j=i}^{N_\sigma} P_r(S_j | z_i) P_r(h \geq \bar{h} | S_j; x)$$



- Cities situated at coasts are vulnerable to multiple disasters like floods, cyclones, storm surges and tsunamis.
- Odisha is a state located at eastern coast of India with a population of 4,19,47,358 (Census 2011)



Wind and cyclone zones of Orissa
(Reference: OSDMA:
<http://www.osdma.org/>)

Odisha is vulnerable to all natural disasters, in particular natural hazards like flood, cyclone and drought. The coastal districts are frequently affected by floods and cyclones, western districts are prone to drought and southern districts experience high floods. Frequency of occurrence of these disasters is high and moderate to high intensity.

Cyclone Phailin that occurred in 2013 was the strongest cyclone in Odisha after the super cyclone of 1999. But during Phailin, local government and other agencies of disaster management showed commendable strength in preparation and response. The health system's response was well in accordance with the terms of preparedness the government undertook. Still, there were some vulnerabilities observed during post-disaster phase, which prevented the affected population access to the essential health services. For example, the roof tops of various facilities were blown away by strong winds exposing the interiors to heavy rain. The training facilities were water logged. Various drugs, vaccines, supplies and utility of services were damaged due to loss of flood weather storage system.

Thus, the vulnerability assessment of existing health facilities in Odisha is critical. PHCs and CHCs in the coastal districts of the state are prepared to deal with gaps in the capacity of health system to provide uninterrupted services during and post disaster. The study provided assessment of structural and non-structural components which includes various indicators.

1.1 Objectives of the study

- To identify structural / non-structural vulnerabilities in the infrastructure and logistic arrangements of the sub-centre, PHC and CHC facilities in the coastal/flood prone blocks of Odisha that could hamper the availability of essential services in the health facilities during and aftermath of a disaster.
- To identify gaps in the preparedness of the health system during time in understanding of the impact of disaster to providing uninterrupted essential health services to the most disadvantaged children and women in the immediate aftermath of a disaster and in early recovery phase.
- To propose a number of long term recommendations to strengthen the infrastructure of health centres and offer short/mid-term recommendations to improve the

health system's preparedness to provide uninterrupted health services during post disaster phase disaster.

1.2 State Background

Odisha is a state located on the eastern coast of India. The state is spread over an area of 1,55,707 sq. km, with a population of 4.57 million persons (2011). The state has 480-km long coastline along the Bay of Bengal that extends over 1.5 lakhs sq km area. Mahanadi is a large river that crosses through the state and forms by delta in the coast ranging into the delta formed by Brahmani and Baitarani River. The main physiographic zones of the state are coastal plains, eastern ghats, northern plateau and central table land. The state is divided into 30 districts and higher population density is observed when compared to other parts of the state. Odisha experiences a tropical monsoon climate where summer are hot, monsoon are heavy due to the presence of Bay of Bengal and western pre cool and pleasant. 65% of the rainfall is received between the months of June and September and remaining 35% is received throughout the year. The average rainfall measured is 1480mm.¹

1.3 Disaster Profile of the State

The state is vulnerable to various disasters, but because of its coastal location, it is more prone to tropical cyclones, storm surge and floods. The coastal plains are the affected disaster region of the state coast system. The coast in these regions have heavy rainfall and the surfing reports is less when results in frequent floods, especially during monsoon season. 80% of the annual rainfall is concentrated over three months, making this vulnerable to flood. High population density, overcrowding in flood prone weak infrastructures, overcrowded the vulnerability. Floods are recurrent disaster in the state and have occurred 22 times in last 20 years. Many small, heavy rainfall is accompanied with heavy gusting wind system, making coastal regions vulnerable to both flood and storm surge. The floods of 2000, 2004, 2005 and 2002 in the state were severe, causing huge economic and life loss. Table 1 shows the damage/loss happened due to floods in last decade.

Cyclones also occur frequently in the state, in the months of April-May (pre-monsoon) and September-November (post-monsoon). Super cyclones strike Odisha once every few decades. There are 250 cyclone-warning sets throughout the coastline of India, out of which 34 are in Odisha, covering 480 Km of coastline. The super cyclone of 1995 affected

11,50,000 population and caused 7,000 number of human casualties. The most recent cyclone to hit the coast of Odisha near Bargarh in Nandan district was the extremely severe cyclone storm Phailin in 2013. It affected 1.2 million people in 18 districts of the state, unaccounted to be human casualties. The cyclone had an unprecedented wind velocity of up to 175 kmph followed by two other days that caused massive destruction in the districts of Bargarh, Puri, Khurda, and the Orissa region. Table 2 shows in numbers, the damage to health facilities in these three districts, but the state was successful in minimizing human casualties due to its preparedness. The government of Odisha and SAMMA were quick in dispatching emergency assistance & evacuating people. Over 6 million people were evacuated within 24 hours preventing the loss of life of Cyclone Phailin.

Table 1. Damage/Loss due to Floods

Flood year	Damage/Loss
2004	200 PHCs (67 PHCs were completely 149 blocks, 15,111 village affected)
2007	3 districts (Bargarh, Boudh, Jagatsinghpur) were badly affected, around 1000 and 60000 population in parts of Anandrapur district
2009	Heavy rainfall in many parts of Odisha led to floods in many parts of the Mahanadi basin affecting 18 districts, 2 blocks
2010	48 PHCs (due to 200000 affected)

Source: Odisha National Disaster Risk Reduction Portal, NIDM (2013)

Table 2. Damage to health facilities

Type of facility	Damage	Total	Intensity
Health Centres and Dispensaries (Unaffected)	475	13	13
Health Centres and Dispensaries (Affected)	111	9	11
Total	586	22	24

Source: Rapid damage and need assessment report, Cyclone Phailin in Odisha (2013)

Figure 1 and 2, are the map representation of the TARU analysis, which highlight the flood prone and cyclone prone areas in the district of Odisha. Flood map represents the flood inundation area from 1999-2009. Map of cyclone frequency represents the number of cyclone or storm surge events that range from depression to super cyclonic storms.

3 Rapid damage and need assessment report, Cyclone Phailin in Odisha (2013)

1. Padhy, Gourikumari, et al. "A review on management of cyclone phailin: early warning and timely action saved lives." *Indian Journal of Forensic and Community Medicine* 2.1 (2015): 55-63.

2. Odisha National Disaster Risk Reduction Portal, NIDM <http://www.ndm.gov.in/pdf/dp/Odisha.pdf>

Vulnerability assessment: Methodology

2.

2.1 Background

Structural and Non-structural building components

A hazard poses many different types of damages to the building. These damages can be structural and non-structural. Structural components of the building are the components of building infrastructure like load bearing system (i.e. vertical and lateral force resisting systems) walls and building frame. The non-structural components are those which do not affect the integrity of the structural support system but are important for functionality of the health facilities like accessibility, critical systems, staff and management. During disaster damage to structural components can render whole building inoperable but even if the structure is intact and the non-structural components are damaged, the healthcare facility cannot function when it is most needed. Thus, both structural as well as non-structural components play a key role in maintaining the operations of the health facilities during any disaster.

Assessment methodology

The assessment that will be carried out for the health facilities will follow an extensive process. Flow chart below shows an overview of the assessment methodology.

Desk review	<ul style="list-style-type: none"> Background research Discussions GIS mapping Sample size
Observation checklist	<ul style="list-style-type: none"> Structural components Non-structural components
Field Evaluation	<ul style="list-style-type: none"> Scoping Detailed assessment of selected facilities Field level assessment
Interviews and FGDs	<ul style="list-style-type: none"> Departments and officials Community level
Analysis	<ul style="list-style-type: none"> Structural analysis (simulation and field data), Non-structural analysis, interview and FGD summary
Workshop	<ul style="list-style-type: none"> Presentation of results Presentation of recommendation Documentation of suggestions (if any)
Finalization of results	<ul style="list-style-type: none"> Finalization of the report based on inputs from the workshop and UNICEF Dissemination of the visualization system for the presentation of the findings

2.2 Desk Review

The first step involved the background research and study of healthcare infrastructure, various standards and guidelines, and existing methodologies on vulnerability assessment. Some of the documents reviewed were as follows:

- Indian Public Health Standards (IPHS) Guidelines
- Hospital Safety Index, WHD
- Field Manual for Capacity Assessment of Health Facilities in Responding to Emergencies, WHO; and various other research papers.

Desk review also included table discussions with the structural and non-structural experts, to evolve more relevant methodology to suit Odisha and its public health system.

The initial risk scoping across the state was also done at this stage, this helped in identifying stratified samples across the selected survey district. Flood mapping was undertaken on GIS using available data from CWC, IMD and Govt. of Odisha data to estimate peak discharges, levels and frequency of occurrence. Also, TARU repository of flood analysis based on previous studies in Odisha was used to further enhance the information. A set of cyclone 'corridors' and historical landfall locations based on the 130-year cyclone catalogue was identified. This provided basis of understanding the variation in storm intensities across the region.

Sample selection¹ included those districts which have been affected more than 5 times in last 20 years by large scale flooding and the districts which are frequently affected by cyclone.

Districts affected by cyclone	Districts affected by flood
<ul style="list-style-type: none"> Ganjam Puri Jagatsinghpur 	<ul style="list-style-type: none"> Jajpur Bhadrak Cuttak Kendrapara Balasore Jagatsinghpur Puri Sambalpur Anugul Sonepur Khordha Ganjam Nayagarh Gejapati

The health facilities were selected based on the criteria

¹ As indicated in TOR

provided in the terms of reference: 50% of CHCs, 25% of PHCs and 5% of SCs in the flood affected blocks and 100% of CHCs, 50% of PHC and 10% of SCs in the cyclone affected blocks. The sample size is indicated within the Table 5.

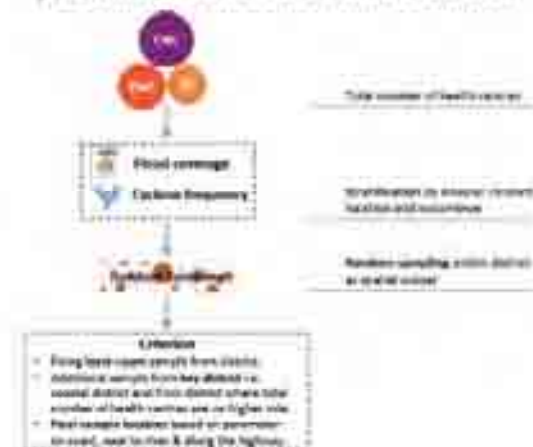
Table 5. Sample size

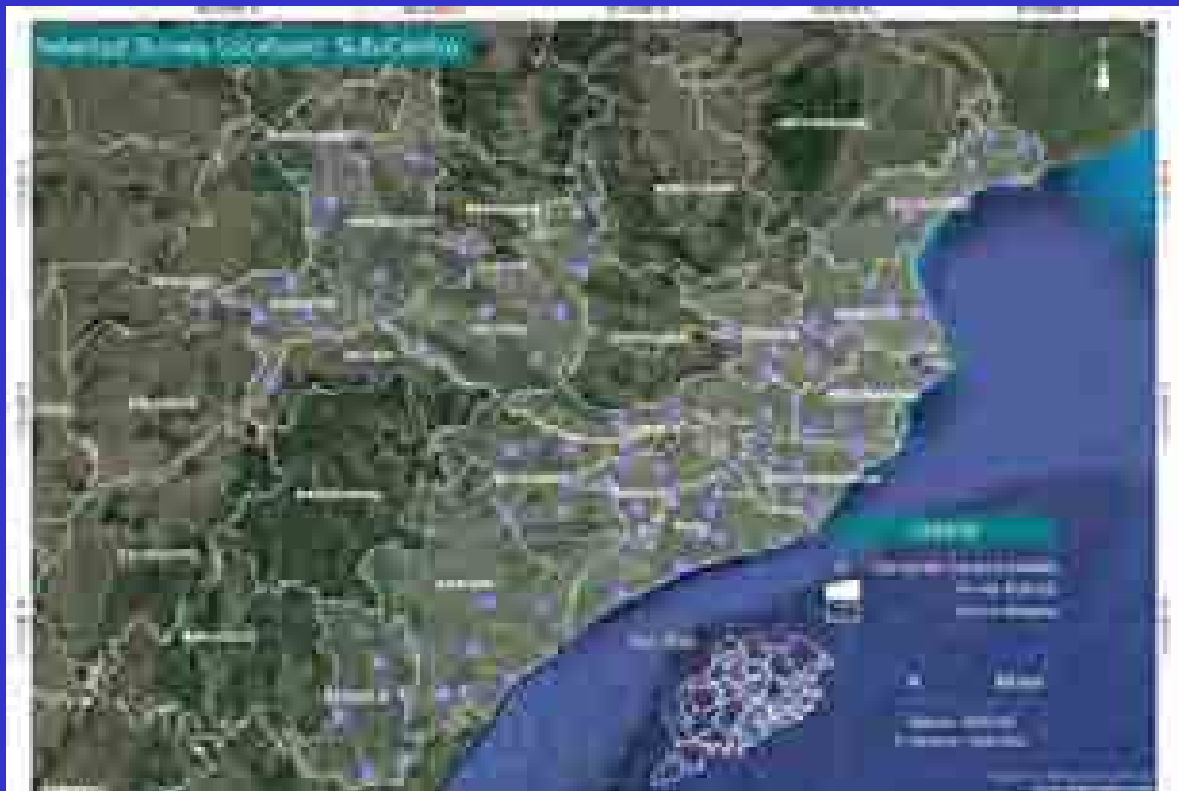
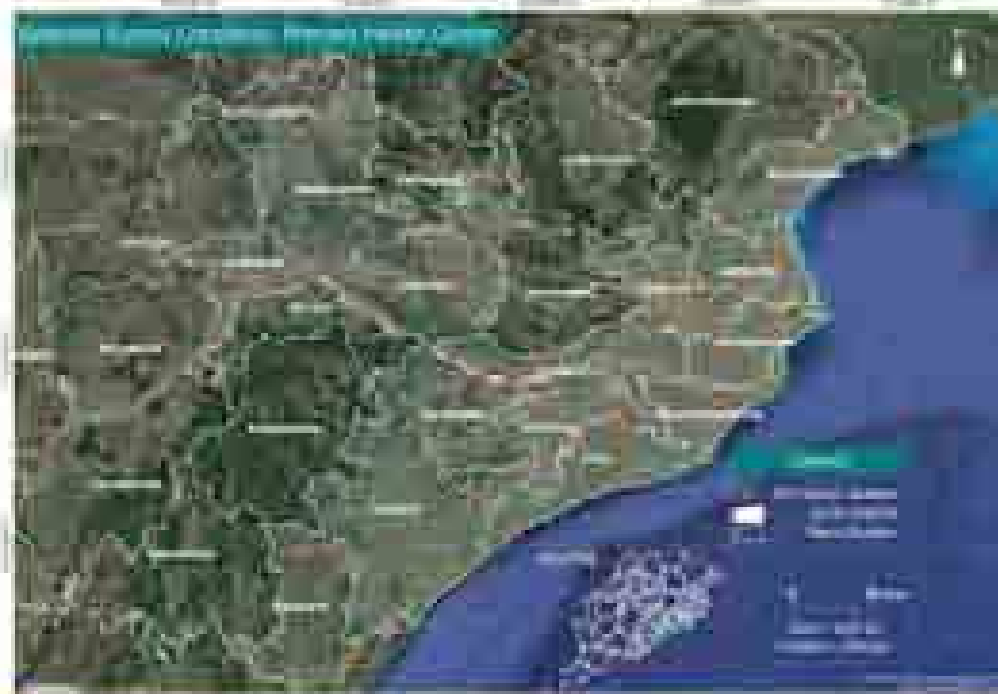
Facilities	Sample size		
	Flood	Cyclone	Total
CHC	58	5	63
PHC	232	20	252
SC	1,160	100	1,260
Total	1,450	125	1,575

2.3 Sampling methodology

Stratified random sampling method was used for the selection of survey locations. This sampling process consists flood and cyclone based information as filter for stratification. Health centres which were intersecting with the flood and cyclone occurrence were selected. After filtrations from cyclone and flood information, residual location was used for random sampling process. Random sample selection was based on district as subset. Some parameters which were used for final sampling were as, selected location should be near to coast, river and along the road.

- For case of CHC – Minimum two samples per district were selected. Additional one sample for the key coastal districts and the districts where number of CHC are relatively more, were selected.
- For case of PHC and SC – At least six number of sample per district for both SC and PHC were selected.





The analysis for every building was done based on several indicators. The questionnaire was divided into six main indicators:

Indicator 1: ACCESSIBILITY

Indicator 2: BUILDING INFRASTRUCTURE

Indicator 3: CRITICAL SYSTEMS

Indicator 4: LOGISTICS

Indicator 5: STAFFING PERSONNEL

Indicator 6: OPERATION AND MANAGEMENT

Description of indicators

Indicator 1: ACCESSIBILITY

Ease of access is essential if the health facility has to function properly, especially during the time of emergency when the number of affected population is high. The emphasis in this indicator was on the main access route to the hospital building, features of site and surroundings.

1.1 Site conditions

Site condition involves condition of the access road, its width and topographical factors of the neighbourhood. Effect of these parameters on accessibility of vehicles and pedestrians.

This section consists of the following 6 sub sections:

1. Condition of road- Condition of the road to the hospital was assessed, whether it was paved or unpaved, potholes/obstacles exist or not and situation of the traffic congestion.
2. Width of the access route- Width of access route was measured, to know, if it was wide enough for easy access of the ambulance or narrow such that three-wheeler, two-wheeler or only pedestrian can access.
3. Topographical factors for flood- Location of the health facility was observed with respect to the road level, if it was constructed on a high ground, flat land or low-lying area. Presence of any high obstruction in the near vicinity. These factors determine the situation during flood.
4. Topographical factors for cyclone- Location of the health facility was observed with respect to the site, if the site was shielded by wind barriers like strong trees or hillocks, which can protect the building during cyclone.
5. Building accessibility in case of flood and cyclone- Presence of certain elements in the site surrounding can hinder/block the access to the facility during flood or cyclone. Elements like construction material, debris,

weak trees, etc. were observed near the building.

6. Site accessibility for vehicle and pedestrian- Any damage to the outer structure of the building and the damage to the road were observed, which can impede vehicular and pedestrian access to the building. Damage to structure, like falling of plaster, can endanger people outside the building.

1.2 Surrounding buildings

Arrangement of surrounding buildings and their distance from the health facility also affects the accessibility.

This section consists of the following 2 sub sections:

1. Surrounding building configuration- Pattern of the buildings surrounding the health facility was observed. Zig-zag pattern or row type arrangement of the buildings affect the flow of wind. Presence of no building in the surrounding, exposes the existing building to the strong winds.
2. Distance of surrounding buildings from hospital- Distance between the surrounding buildings and health facility was measured. A safe distance can avoid damage to one building, affect another building.

Indicator 2: BUILDING INFRASTRUCTURE

This indicator involved both the structural and non-structural components of the building. Structural components are the load bearing system like the walls and building frame. The non-structural components include the design and architectural elements like false ceiling, partition wall, fixtures, shelves, etc. Both the components play a key role in maintaining the operations of the health facility.

2.1 Layout

Layout includes the means of entrance to the building and; shape and configuration of the building plan and elevation, which can affect the building integrity.

This section consists of the following 3 sub sections:

1. Means of entrance- Presence of ramp and stairway was observed at the entrance of the health facility.
2. Building Elevation- Any irregularity or variation in the elevation of the building was observed.
3. Building Plan- The plan of the building was observed to be square, rectangle or with irregularities like the re-entrant corners.

2.2 Structural elements

Structural elements include the type of construction and design. The extent of roof overhangs which can make building

vulnerable during high speed winds. Interaction of secondary structural components and the location of openings on the horizontal diaphragm which can affect the integrity of the structure. The height of plinth with respect to past flood levels which can help in determining the situation during flooding. Number of redundant members that can prevent collapse during disaster situation.

This section consists of the following 7 sub sections:

1. Type of wall construction- Wall construction of the building was categorised into three types: RCC frame, reinforced brick masonry or unreinforced brick masonry/ mud walls.
2. Type of roof construction- Roof construction of the building was categorised into three types: Hipped/ pyramidal shaped, gentle sloped gable roof or flat/ mono-pitched roof.
3. Roof projection- Projection of the sloped or flat roof was measured at the eaves. If the projection was more than 450mm then its connection with the wall framework was observed.
4. Interaction of secondary structural components- Interaction of secondary structural elements like partition walls, suspended ceiling or facades with the structure was observed. For ex. Rigid connection of the secondary structure can damage the structure.
5. Distance of openings from wall intersection- Placement of openings on the walls are important during cyclone hazard. Distance of openings from wall intersection were measured, if they were at the centre of the wall or within 0.5m from the wall corner or just below the roof.
6. Plinth with respect to past flood levels- Plinth of the building was noted to be high, coinciding or lower, with respect to the past flood level.
7. Lines of resistance- Lines of resistance i.e. beams or load bearing walls were observed in each orthogonal direction of the building, to be > 3 , $= 3$ or < 3 .

2.3 Condition of building

Condition of the building involves condition of various building components like the walls, roof, floor, construction material, windows and doors, etc. which can help in determining overall condition of the building that whether it is safe or vulnerable.

This section consists of the following 13 sub sections:

1. Envelope- Hairline cracks and diagonal cracks were observed on the outside walls/facing of the building.

Annex 1. Questionnaire

Checklist for structural safety assessment

Name of the respondent:

Mobile No.:

Programme:

Structural Safety Assessment

General information:

Is there any weak body in the structure? If Yes, mention distance (in km):

Total no. of external walls:

Average Length:

Average Width:

Wall thickness:

Thickness of slab:

Built up area (in sq.ft.):





Height of the building/No. of storey:



Number of occupants (staff, patients):

Day:

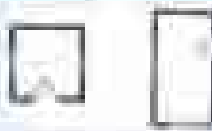





Night:

Is there a treatment in the building?

Sl. No.	Key Question/Issue	Building Condition			Remarks
		Good	Fair	Poor	
1.	What is the age of the building in years?	0-20	20-50	>50	
2.	How is the condition of the building?	No deterioration or cracks	Some deterioration (the filling of mortar) could not be weathering or normal aging	Cracks, Major deterioration caused by weathering or normal aging	
3.	What is the configuration of surrounding buildings?	Surrounding buildings are in good management	Surrounding buildings are in poor management	No building in the surrounding	
					
4.	What is the separation distance of the building from the surrounding building?	Distance between the buildings is more than 10 m	Distance between the buildings is between 5 m and 10 m	Distance between the buildings is < 5m	
5.	What is the type of construction of wall?	Reinforced concrete masonry walls	Non-reinforced brick masonry	Jointed masonry	
6.	What is the type of construction of floor?	Reinforced concrete slab or paved or cemented soil (30-40' depth)	Some unreinforced RCC (10' depth)	Asphalt or bare light wood (10' deep)	
					

1.2a	The existing building (EM)	Valley view			Observation
		right	average	view	
1	Any past structural damage or failure of the structural building?	Minor (3 cracks) in the ceiling, in fully repaired	Minor (2 cracks) in 2 beams and partially repaired	Major cracks (1 crack) in lower structural elements (i.e. walls, columns, beams) not repaired	
2	What is the effect of surrounding or neighbouring on the structural behaviour of the building?	Minor or no interfering structural behaviour or no negative effect	Minor (2) minor effect on performance	Major (3) compressing effect on performance	
1.2b	Valley site	Valley view			Observation
		right	average	view	
3a	How topography (for East view)	Exposed on high ground higher than the nearby road level and no high obstruction (the building in the near vicinity)	Partial level at the same level as the road level	No interfering with view that nearby road level	
3b	How topography (for western view)	Constructed on site shielded by block or strong trees	Recessed	Constructed along the ridge or valley	
					
4	Are there any elements in the site surrounding, resulting in seismic movement (in case of flood) or flying debris in case of cyclonic, that can block access?	No such elements present	Few elements like trees, construction material etc.	Considerable elements that can block access during hazard	
1.3	Building quality	Valley view			Observation
		right	average	view	
11	How is the condition of the construction material? (Building)	Cracks less than 2 mm (concrete) no visible deformations, no rust	Cracks between 3 and 4 mm present (concrete), moderate and visible deformations (steel and wood) or rust with no flaking	Rust with flaking, cracks larger than 3mm (concrete), visible deformations (steel and wood)	
12	Does the interaction of secondary structural (Partition walls, suspended ceiling, beams) with the structure?	There are no secondary elements affecting the structure	Some of the preceding secondary structural elements interacting with the structure, damage would not affect the structure	Further walls rigidly attached to the structure, suspended ceiling or beams interacting with the structure, damage would have significant effect on the structure	
13	Are there structural redundant members?	More than 3 lines of resistance (i.e. 1st structural components like beams) in each orthogonal direction of the building	3 lines of resistance in each direction or lines without orthogonal orientation	More than three lines of resistance in each direction	
14	Is the plan of the building in accordance with the past floor level?	More than high flood level for that building	Comply with flood level of lower building	Not in line with highest flood level in the past	
15	Are there irregularities in building structure plan?	No, simple square or rectangular plan (if any)	No, long rectangular shape or more irregularity	Irregular plan, can suffer from	

VIPER STUDY ASSESSMENT OF HEALTH FACILITIES IN OMAN

L.No	Topic/Issue	Safety level			Assessment
		High	Low	Low	
					
16	Are there irregularities in alignment of the building?	No significant irregularity, alignment of the building is continuous.	Irregularities exist, some alignment irregularities of the building.	Significant irregularities, discontinuity in the alignment of the building.	
17	How is the connection of the eaves/overhang between roof and wall (securely fastened, welded or laminated)?	Connection of roof framing to wall by wooden lath and two pieces.	Connection of roof framing to wall by nailed galvanized steel.	No proper secure connection.	
					
18	What is the width of the roof projection?	Minimum 1 to 400mm or overhang and patio roofs built as separate structures.	> 400mm that projects out further for projects to the wall framework.	< 400mm at edge of beam.	
					
L.No	Topic/Issue	Safety level			Assessment
		High	Low	Low	
19	What is the source of water supply in the facility?	High supply from municipality as well as non-piped supply facility.	Non-piped supply like hand pump, borewell, etc.	Connected through water tanker.	
20	What is the capacity of water storage in the facility?	10 to 2000.	At least 2 days.	No storage of water storage.	
21	Are the water storage systems protected and in better condition?	Covered storage, located at higher level.	Uncovered storage, located at lower level.	No cover (if water storage tank).	
	Provide photographs for the location and condition of water storage system.				
L.No	Topic/Issue	Safety level			Assessment
		High	Low	Low	
22	What is the status of electrical system of electrical facility?	High power (240V/220V) separate wire (for ground), 100/500.	High power (240V/220V) (for ground) (for battery wire) (power, internet).	No electrical wire.	

S.No.	Facility electricity connection	Safety levels			Observation
		High	Average	Low	
23	What is the capacity of alternate source of electricity?	Alternate source(s) start(s) automatically in less than 10 seconds and cover(s) more than 70% of demand in critical areas	Alternate source(s) covers 31-70% of demand in critical areas and starts automatically in less than 10 seconds in critical areas	Alternate source(s) is(are) missing or covers less than 30% of demand in critical areas, or can only be started manually	
24	Are there regular tests of alternate sources of electricity in critical areas?	Tested at full load at least monthly	Tested at full load every 1 to 3 months	Tested at full load every 3 months or more	
25	How is the condition and safety for alternate source of electricity?	Well-secured, elevated from ground and in good working order for emergencies.	Partially protected, elevated from ground and working	No protective measures, not elevated from ground and not working properly	
26	How is the condition and safety measures for electrical equipment, control panel, cables and cable ducts.	Good condition, well-protected and in good working order	Fair condition, some measures provide partial protection and security	Poor condition, there are no protective measures	
27	Provision and operation of emergency lights [for use between periods of power interruption and restoration of electrical supply with alternate source]	Automatic emergency lights provided at all important locations	Manually operated emergency lights provided at few locations	No provision	
Provide photograph for the location and condition of the alternate source and fuel storage					

S.No.	Facility drainage and sewerage systems	Safety levels			Observation
		High	Average	Low	
28	What is the means of storm water drainage?	Proper closed piped drainage connected to main line	Open drain connecting to main line	No drainage connected to main line	
29	What is the means of sewage disposal?	Proper closed piped drainage connected to main line	Septic tank provided	No proper disposal system	
30	Does the facility handle biomedical waste?	Yes	No (the waste is dumped directly)		
30a	If yes, how it is managed?	Segregation of waste and disposal in designated coloured containers. What is the frequency of transportation of waste off-site?			

Checklist for non-structural safety assessment

Name of the assessment:

Green Hill

Designation:

New Zealand Safety Assessment

General information:

Type of event: **earth**

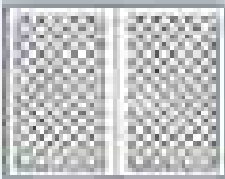
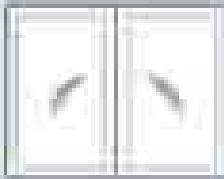


Population concerned:






NA

Assessment conducted:

Yes

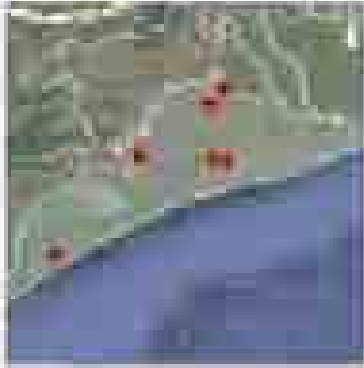
If Yes, deliveries conducted in the last month (December 2016):

I No.	Risk/Issue/Concern	Safety Issue			Observation
		High	Medium	Low	
1	Is there any visible damage and failure of non-structural elements?	Minor to no damage, or failure fully repaired	Extensive damage, building only partially repaired	Major damage and no repair underway	
2	How is the condition and safety of doors (joints and hardware) that could affect the functioning?	Good condition, securely attached to joints, no or minor potential for damage	Fair condition, subject to damage but would not impede the function	Visible damage which would cause the function	
3	What is the distance of structural floor and ceiling?	At a minimum distance of 4.5m from the wall/ceiling	Within a distance 3.0m from the wall/ceiling	Less than 1.5m from wall/ceiling, not fixed	
4	How is the condition and safety of windows and glazing that could affect the functioning?	Good condition, thick designed glass panes, smaller panel dimensions, would be able to resist high wind speed and heat gain	Fair condition, use of softwood frame, without W, damage of framed glazing	Visible damage, large and thin untempered glass panes, will fail to resist high wind speed and damage	
					
5	State of structure:	Strongly damaged	Average damaged	Minor damaged	
6	How is the condition and safety of floor systems, of building structure (joints, walls, ceiling)?	No cracks	Visible cracks on the surface	Clear or exposed cracks on the surface	
					
7	Subjected to horizontal movement (if any, amount):	Yes		No	
7a	What is the height of the person?	100mm or more	Less than 100mm	No ground connection	
7b	How is the condition of the window?	Minor to no damage, good condition	Medium damage, no connection	Major damage, the critical importance of the connection	

ID#	Question/Query	Safety Issues			
		High	Low	Low	None/Other
8	Are there obstacles or damage to structure in road and walkways that will impede vehicle and pedestrian access to buildings or change pedestrian routes outside the building?	No		will not impede pedestrian access, but will impede vehicle access	No
9	Are there obstacles or damage to elements that will impede movement inside the building?	No		will not impede movement of people, but will impede movement of structure, weakened equipment	No
10	How is the condition of the exterior walls and panels?	Good condition		Damage that would not impact the facade	Minor damage
11	How is the condition of the base or supported ceiling?	Good condition		Damage that would not impact the facade	Minor damage and support properly to the ceiling
					
12	How is the condition of the stairways, ramps and handrails?	No obstacles or minor damage		Damage that would not impact the facade	Minor damage and mechanical
13	Is there a finished roof or the roof framing properly located to the roof panel?	No, covering between joists is very thin (up to 200mm) and 1 joist are used		No, but covering between joists is more (up to 200mm) and 2 joists are used	Regular design joists used with high strength plywood and no consideration for wind hazard
					
14	How is the condition of the flooring?	No big fluffing, but a crack and indentation		Extensive damage, minor wear and tear	Damage and indentation of flooring
15	Does the building have a lightning rod?	No			No
16	How is the condition of other architectural elements like:				
	Windows	As expected properly		As expected	
	Signage	No	No	Light	None
	Trim panels				
	Light fixtures				
	AC units				
	Other				

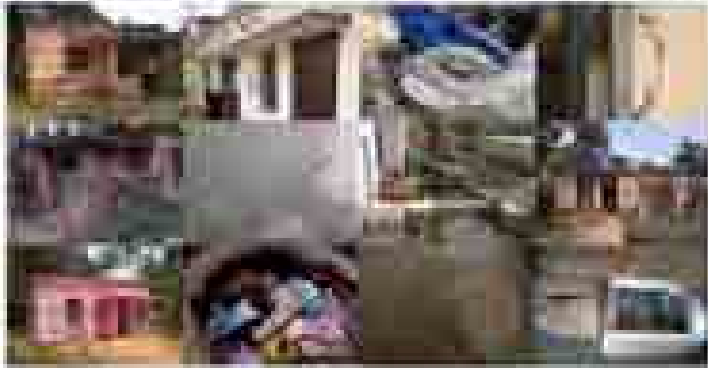
MUST ANSWER QUESTIONS FOR THE INTERVIEW

Please use other sheets				
Q No	Question	Yes	No	Other
17	How is the security of the building assessed?	Not used with the building/ premises are in traffic congested	Not used with the building/ premises are in traffic congested	Not used with the building/ premises are in traffic congested
18	What is the width of the access route to the health facility?	Access route is not clear	Access route is not clear	Access route is not clear
19	What is the width of the access route to the health facility?	Access route is not clear	Access route is not clear	Access route is not clear
20	What is the width of the access route to the health facility?	Access route is not clear	Access route is not clear	Access route is not clear
Q No	Question	Yes	No	Other
21	Is there a separate area for drug storage?	Separate storage area for drug storage	Separate storage area for drug storage	Separate storage area for drug storage
22	Is the entry level to drug storage area secure?	Entry level to drug storage area is secure	Entry level to drug storage area is secure	Entry level to drug storage area is secure
23	Are the drug storage area well ventilated?	Drug storage area is well ventilated	Drug storage area is well ventilated	Drug storage area is well ventilated
24	What is the storage area for the drug storage area?	Drug storage area is well ventilated	Drug storage area is well ventilated	Drug storage area is well ventilated
Q No	Question	Yes	No	Other
25	Number of staff at the facility based on minimum standard (at least 10 staff)	Not having minimum staff at the facility	Not having minimum staff at the facility	Not having minimum staff at the facility
26	Is there a designated staff for drug storage area?	Not having designated staff for drug storage area	Not having designated staff for drug storage area	Not having designated staff for drug storage area
27	If there is a designated staff, what is the education of the staff? (Formal education)	Not having designated staff for drug storage area	Not having designated staff for drug storage area	Not having designated staff for drug storage area
28	Are the staff members trained for drug storage?	Not having designated staff for drug storage area	Not having designated staff for drug storage area	Not having designated staff for drug storage area
29	Are there training programs conducted by the government? If so, what?	Not having designated staff for drug storage area	Not having designated staff for drug storage area	Not having designated staff for drug storage area
30	Is there a separate storage area for drug storage?	Not having designated staff for drug storage area	Not having designated staff for drug storage area	Not having designated staff for drug storage area
31	Is there a designated staff for drug storage area?	Not having designated staff for drug storage area	Not having designated staff for drug storage area	Not having designated staff for drug storage area



55	<ul style="list-style-type: none"> State District Block MATHURAM Village Pincode Latitude Longitude
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FACILITY: PUMI	
GENERAL STATUS:	<ul style="list-style-type: none"> Health centre type Year of building (1980s) & 2010s Population covered: 250 (PMU) & 15,000 (Village) Services provided: 40 Staff: 10 (PMU) Bed availability: 50



KEY CATEGORIES	ACCESSIBILITY	High
	Site location	High
	Surrounding buildings	High
	BUILDING INFRASTRUCTURE	Medium
	Layout	Medium
	Structural (masonry)	Medium
	Condition of the building	Medium
	Water systems affecting the building	Medium
	CRITICAL SYSTEMS	Low
	Water and sanitation	Low
	Electrical system	Low
	Structural safety	Low
	STAFFING	High
	Staffing levels	High
	STAFFING PERSONNEL	High
Number of staff	High	
Contact information	High	
DISASTER MANAGEMENT	High	
COMPLIANCE WITH STANDARDS	Medium	
Preparedness	High	
Response	Medium	

Strengths
<ul style="list-style-type: none"> Proximity to the surrounding (low trees, construction activity, fire area) limits the possibility of impact (landslides, debris and windstorm etc.) Location that is not in vicinity of any major road, highway and commercial hub Condition of the building is free from any significant structural deficiencies and defects Plinth of major buildings are lower than the soil level level to minimize impact of floods There are only 200 trees in all directions in vicinity of building well in early stage of development of the building Large construction site adjacent to vicinity of water and drainage of health facility Just east of all these health centre is a concrete slab of drainage

Weaknesses
<ul style="list-style-type: none"> Building does not include fire safety in water supply system No separate storage area for medical and drugs are stored without shelves Contact list of medical, community and other staff are not displayed near the entrance Staff members are not trained for managing disaster Maximum supplies of the emergency kits are missing Condition of first-aid kit is not maintained Key staff are not aware of procedure for maintenance during disaster situation There are no communication with local disaster management agencies The facilities does not have storage provision Storage for medicines are missing

Key Recommendations
<ul style="list-style-type: none"> Surrounding elements should be kept clean and vegetation should be controlled Tree and landslides to be avoided Always ensure the ground floor for structure and not above Designated outdoor collection should be provided for effective structural safety management Concrete structures should be provided to health centre Drugs should be kept at high elevated platform in covered system Updated contact list of the medical staff should be displayed at the entrance of the health facility A directory of local resources already should be maintained and updated regularly All staff members should be given proper training for disaster situation

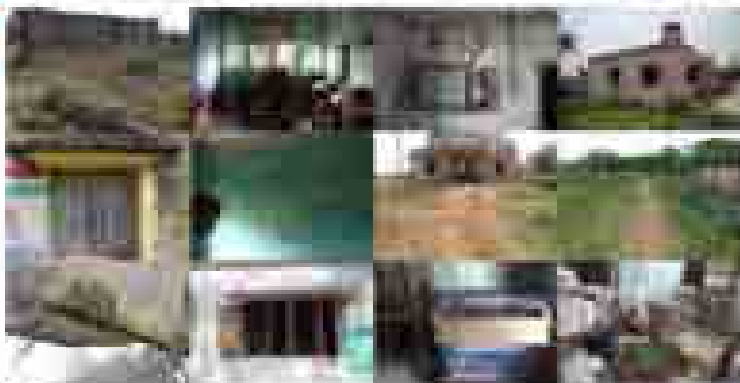
Key Findings
<ul style="list-style-type: none"> Presence of trees will increase the risk of storm Roofing needs to be done for drugs & kits Capacity of water storage tank needs to be increased to cater for 2-3 days Good quality should be provided at the place used to store medicines Water tank should be placed preferably using water proofing structure Concrete covers floor should be replaced to strengthen the floor External water supply should be placed in a covered covered location Health centre should plan and develop coordination mechanism with DCMS and community including NGOs



PIT	
1. Location	
2. Name	
3. Type	
4. Size	
5. Age	
6. Capacity	

District: KENDRAPARA

Several matters:
 Road width: 5 ft
 Water supply: gravity-fed (near 1 AWC)
 Age of building: 1 (Min) & 47 (Max)
 Founders' income: 1,000 (Min) & 17,000 (Max)
 Estimated population: 100 (Min) & 200 (Max) in previous month
 Occupancy: 10 (Max)
 Staff: accordingly 10



Indicators	ACCESSIBILITY	
	Site location	Green
	Surrounding buildings	Yellow
	BUILDING INFRASTRUCTURE	
	Layout	Green
	Structural elements	Green
	Condition of the building	Green
	Other issues affecting the building	Green
	CRITICAL SYSTEMS	
	Water and sanitation	Yellow
Electrical system	Yellow	
Sanitation waste	Green	
STAFFING		
Drug storage	Red	
STAFFING PERSONNEL		
Number of staff	Red	
Contact information	Red	
Disaster management	Red	
OPERATIONAL AND MANAGEMENT		
Preparedness	Red	
Response	Red	

Key Findings

Structural

- Hollow, concrete, masonry and Ayta does not have ramps or drainage.
- Kalyan health centre does not have proper water during rains.
- There are some deterioration like flaking of plaster on roof slab at ayta and drainage health centre.
- Water in the facilities is from rain-water supply (closed pumps, limited, etc.)
- All facilities has capacity of storing water only for 3 days, except Kalyan health centre.
- Storm water drainage is provided through open drain connected to main line.
- Ayta health centre has partial painted structural concrete at door hanging wires were visible.
- In all these centres, alternate source of electricity is not tested regularly.

Non-structural

- Drug storage system is located on first floor or above.
- No separate storage area is provided and drugs are stored without shelves.
- Quantity of essential medicines and supplies is less than 30%, and less than 20% of drug stocks are stored in walls.
- Staff in the facilities are less than essential number stipulated with WHO guideline.
- Staff members are not trained for managing disaster.
- Fire supplies at the emergency exit are missing, fire fully prepared for disaster situation.
- Key staff are not aware of procedure for immediate and evacuation of personnel during disaster situation.
- The facilities does not have provision for drugs and no signpost are present.

Key Recommendations

Structural

- Surrounding elements outside the premises should be kept clean and impurities should be removed.
- Copies of building plan and structural drawings should be maintained within the facilities.
- Septic tanks should be cleaned regularly.
- Capacity of water storage tanks needs to be increased to store for a minimum two days.
- Alternate electrical source should be tested monthly at full load.
- Drugs should be kept at high elevated secured position.
- Appointed contact list of the medical staff should be displayed at the entrance of the health facilities.
- Staff members should be given proper training for disaster situation.
- An escape route should be marked.

Non-structural

- Elevation of ramps will increase the ease of access.
- Minor repairs are needed for windows and shutter.
- Non fire doors need to be planned.
- Damaged doors should be replaced or repaired by using soft ply or laminated battens.
- Alerts and emergency connected lines detailed NCF is required (not done).
- Covered storm water drainage system should be provided.
- Human resources should be strengthened.
- Location for drugs should be identified and informed to the respective staff.

Vulnerability	Low	Medium	High
	Green	Yellow	Red



SC
1. Sukha
2. Mahada
3. Ulunda
4. Brahmani
5. Sindurpur

District: SONEPUR	
General statistics:	
Road width- 8.4'	
Water body in vicinity- Yes (near 3 SC)	
Age of building- 1 (Min.) & 50 (Max.)	
Population covered- 5,800 (Min.) & 9,400 (Max.)	
Deliveries conducted- No	
Occupancy- 4 (Max.)	
Roof accessibility- No	



INDICATORS	ACCESSIBILITY	High
	Site condition	High
	Surrounding buildings	High
	BUILDING INFRASTRUCTURE	High
	Layout	Medium
	Structural elements	High
	Condition of the building	High
	Prior events affecting the building	High
	CRITICAL SYSTEMS	High
	Water and sanitation	High
	Electrical system	High
	Biomedical waste	High
	LOGISTICS	High
	Drug storage	High
	STAFFING PERSONNEL	High
	Number of staff	High
Contact information	High	
Disaster management	High	
OPERATION AND MANAGEMENT	High	
Preparedness	High	
Response	High	

Key Findings

Structural
<ul style="list-style-type: none"> Only stairway (no ramps) is provided at all these health centers There are less than three lines of resistance i.e. beams or load bearing walls in each orthogonal direction of the building. There are evidence of damage over doors, windows and shutter at Ulunda and Brahmani SC. There are cracks and major deterioration on roof slab caused by weathering and ageing (except Mahada and Sindurpur). Inner walls of all these centers show evidence of dampness. There are deterioration like flaking of plaster on roof slab caused by weathering ageing at Sukha, Ulunda and Brahmani SC. There have been past structural damage of major cracks on main structural elements i.e. walls, columns, beams. Water to the facilities is secured from water tankers and storm water drainage has no connection to main line. There is no proper system for sewage disposal. Electrical system of the facilities is in poor condition, there are no protective measures (except Sukha SC) Facilities does not have an alternate source of electricity.

Non-Structural
<ul style="list-style-type: none"> Sindurpur SC does not handle bio-medical waste. The waste is dumped within site and incinerated at Sukha and Mahada SC. There is no separate storage area for drugs are stored without shelves. Quantity of essential medicines and supplies is less than required. Staff in the facilities are less than essential number stipulated within IPHS guidelines. Contact list of medical, non-medical and other staff are not displayed near the entrance. Staff members are not trained for managing disasters. Directory of local resource people are not maintained. The facilities does not have triage provision. Signage for evacuation were missing.

Key Recommendations

Short-term
<ul style="list-style-type: none"> Surrounding elements should be kept clean and supervision should be carried out. Hair line Cracks needs to be plastered Damaged doors should be replaced or repaired by fixing with ply or wooden battens. Drugs should be kept at high elevated secured position. Designated coloured containers should be provided for biomedical disposal. Staff members should be given proper training for disaster situation. Human resources should be strengthened to match IPHS guidelines. Provision of stairways with ramp will increase the ease of access for people. Area should be identified and assigned for triage. All escape routes should be marked.

Long-term
<ul style="list-style-type: none"> Provision of stairways with ramp will increase the ease of access for people. Capacity of water storage tanks needs to be increased to cater to a atleast five days. Grouting need to be done for cracks >3mm. Electrical system like control panel should be placed in a secure, covered location. Rebars are excessively corroded hence detailed NDT is required. Damp proof course should be provided at the plinth level to avoid dampness. Trench can be constructed around the building to avoid inundation of water inside the building. Health center should plan and develop coordination mechanism with DDMA and local community including NGOs.

VULNERABILITY	LOW	Moderate	HIGH
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CHC
1. Pattamunda
2. Rajnagar

District: KENDRAPARA

General statistics:
 Road width- 10'
 Water body in vicinity- Yes (near 1 CHC)
 Age of building- 5 (Min.) & 55 (Max.)
 Population covered- 1,72,000 (Min.) & 1,98,000 (Max.)
 Deliveries conducted- Yes (212 conducted in previous month)
 Occupancy- 200 (Max.)
 Roof accessibility- Yes (in 1 out of 5 building blocks)



INDICATORS	Vulnerability Level	
	LOW	HIGH
ACCESSIBILITY	Yellow	Yellow
Site condition	Yellow	Yellow
Surrounding buildings	Green	Yellow
BUILDING INFRASTRUCTURE	Yellow	Yellow
Layout	Yellow	Yellow
Structural elements	Yellow	Yellow
Condition of the building	Yellow	Yellow
Prior events affecting the building	Yellow	Yellow
CRITICAL SYSTEMS	Green	Yellow
Water and sanitation	Yellow	Yellow
Electrical system	Green	Yellow
Biomedical waste	Green	Yellow
LOGISTICS	Green	Yellow
Drug storage	Green	Yellow
STAFFING PERSONNEL	Red	Yellow
Number of staff	Red	Yellow
Contact information	Yellow	Yellow
Disaster management	Red	Yellow
OPERATION AND MANAGEMENT	Yellow	Yellow
Preparedness	Yellow	Yellow
Response	Yellow	Yellow

Key Findings

Structural

- Plinth of the buildings are lower than the past flood level.
- Building layout is irregular.
- Structural and non-structural building components are partially damaged.
- Dampness was evident across inner wall of the health facilities.
- Except one building unit of Pattamunda, all other building are partially repaired.
- Damage to architectural elements were evident.
- Windows of Pattamunda health center are damaged, will fail to resist high speed wind and may not prevent water leakage.
- Obstacles were evident within passageway. These will not impede the movement of people but will impede movement of stretcher or wheeled equipment inside the building.

Non-Structural

- Staff in the facilities are less than essential number stipulated within IHS guidelines and no staff member is trained for disaster situation.
- There is a hospital disaster committee but it is not fulfilling its functions effectively.
- Staff members are not aware of their disaster management duties and responsibilities.
- Limited signage for escape routes/ building layout diagram/assembly points were evident.
- Existing emergency sets were not complete.
- There is a directory of local resource people but information needs to be updated.
- Disease surveillance system is functioning as per their mandate.

Key Recommendations

Short term

- Provision of ramps will increase the ease of access.
- Hair line Cracks needs to be plastered.
- Minors repairs are needed for windows and shutter.
- Drugs should be kept at high elevated secured position.
- Staff members should be trained for disaster management.
- Covered storm water drainage system should be provided.
- Storage capacity of water tanks should be increased to cater to a minimum of five days.
- Septic tanks should be cleaned regularly.
- Markings for escape routes should be done across all facilities.

Long term

- Grouting need to be done for cracks >3mm.
- Damp proof course should be provided at the plinth level to avoid dampness.
- A cement concrete layer should be overlaid to strengthen the slab.
- Damaged panels of the false ceiling needs to be replaced.
- Thick designed glass panes with smaller panel dimension should be used for windows.
- Location for triage should be identified and informed to staff members.

1. Select Health Center

Adampur

PHC THAKLE

or choose a location

2. Choose parameters

- Accessibility
- Building Infrastructure
- Layout
- Structural elements
- Condition of building
- Prior events affecting the building
- Critical systems
- Logistics
- Staffing personnel
- Operation and management

3. Recommendations



Condition of road

Majority of the road is paved and smooth, but there are some potholes and uneven surfaces.

Site accessibility for vehicle and pedestrian

There are no major obstacles in terms of the road, but there are some narrow passages near the building.

Windows and shutter

Windows and shutters are in good condition, but there is some damage.



Width of access route

The access route is wide enough for vehicles and pedestrians.

Topographical factors for cyclone

The building is not affected by wind and waves.

Means of entrance

The entrance is covered by a shelter to protect it from rain.

Building Plan

The building is constructed in a simple way. The roof is made of concrete.

Building materials

The building is constructed with local materials.

Structural configuration

There is no structural reinforcement or reinforcement.

Topographical factors for flood

The building is not affected by flood and is not in a low-lying area.

Building accessibility in case of flood and cyclone

There is no major obstacle in terms of the building, but there are some narrow passages.



Building elevation

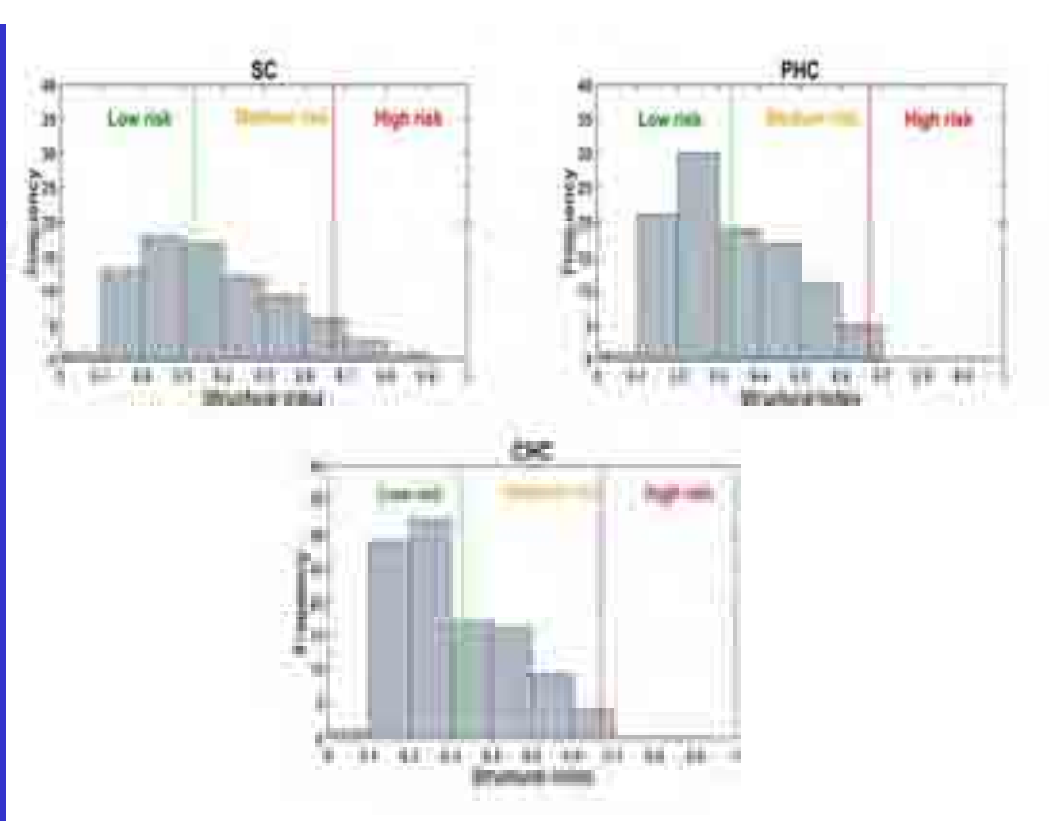
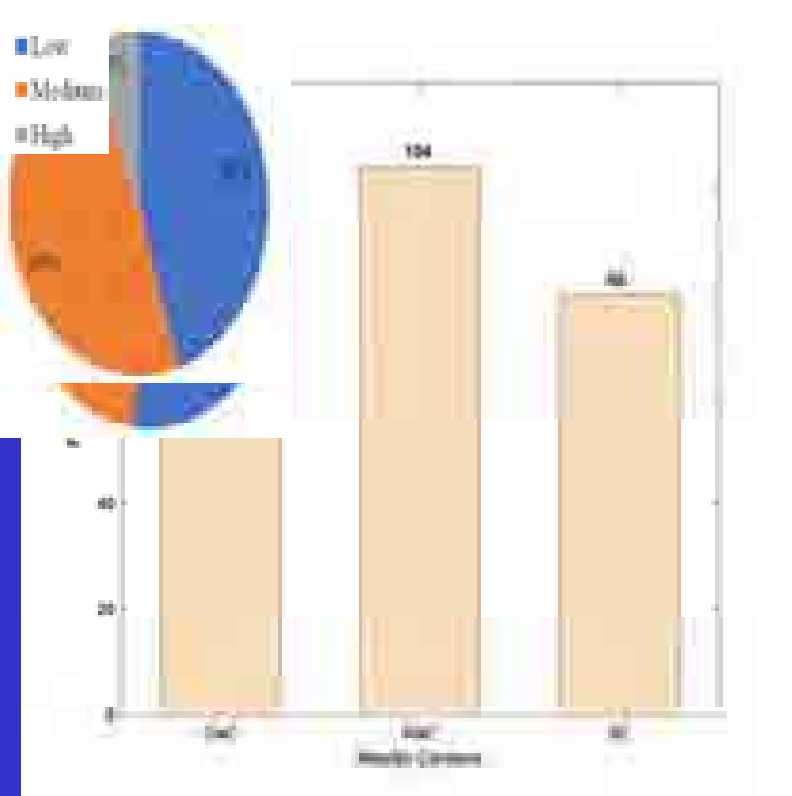
The building is built on a raised platform to protect it from flood.

District: Jharkhand
Block: Jharkhand
Village: Adampur
Center Type: PHC

Vulnerability

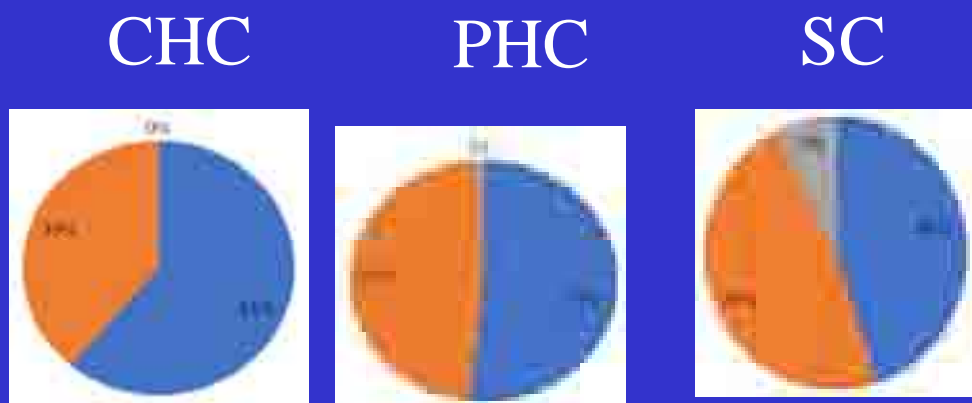
Initiative by: UNICEF

Prepared by: TARU



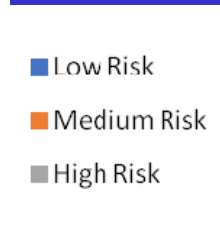
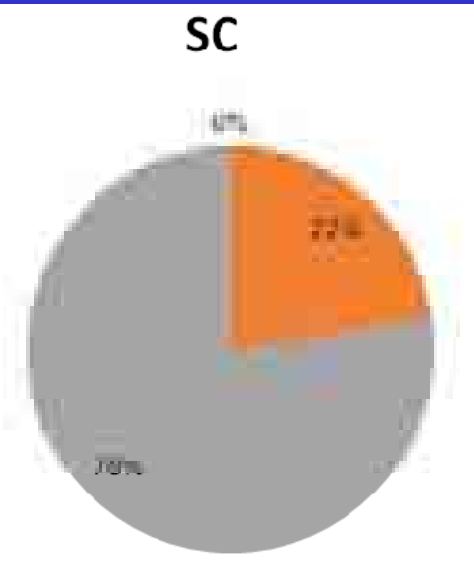
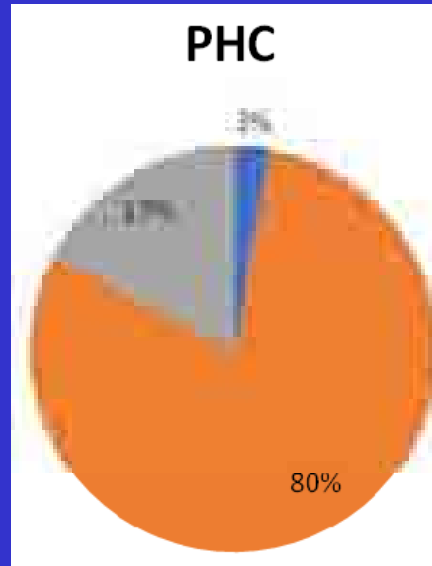
Histogram of Structural index

Histogram of the health centers considered for rapid visual screening

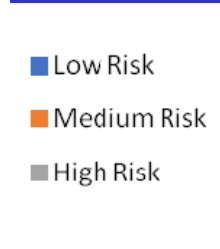
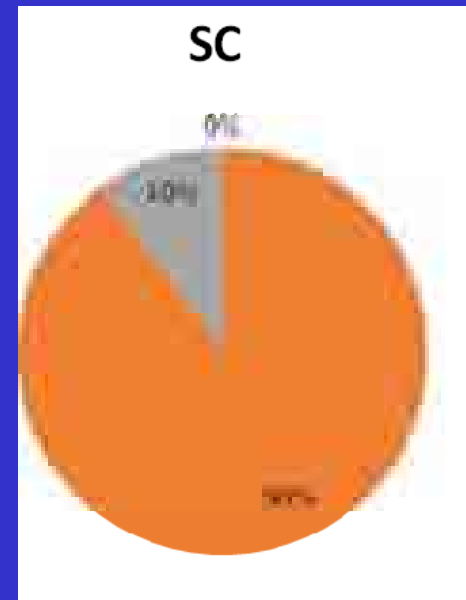
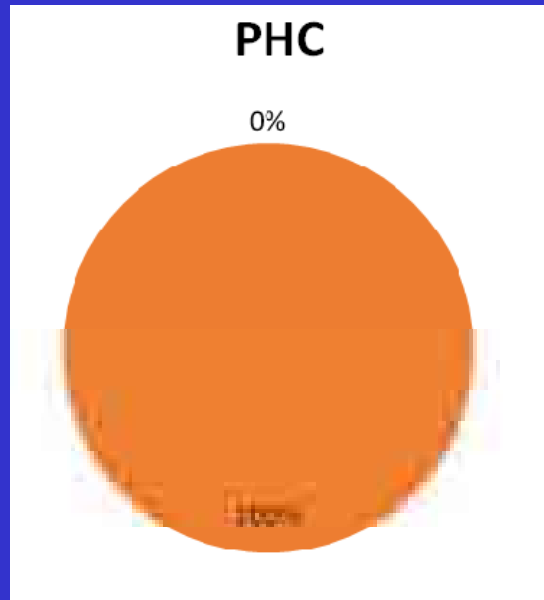


Histogram representing the percentage of Structural risk for different health centers

Non-Structural Index



Organizational Index



Index of Vulnerability

$$FUNC = \begin{cases} |1 - (0.6 I_{STR} + 0.4 I_{NSTR})| & \text{if } I_{STR} \leq 0.67 \\ 0 & \text{if } I_{STR} > 0.67 \end{cases}$$

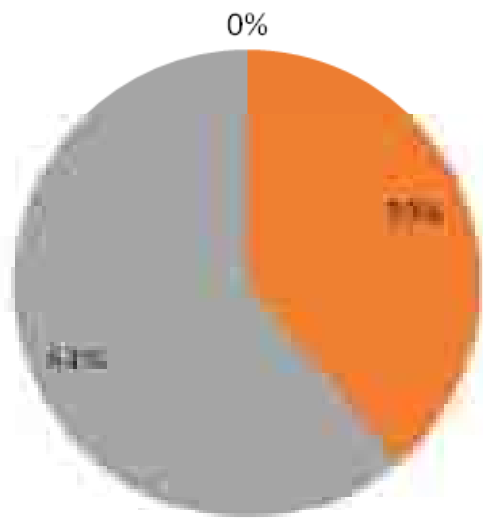
$$VULN = \begin{cases} |0.8 - (0.8 FUNC - 0.2 I_{ORG})| & \text{if } FUNC \neq 0 \\ 1 & \text{if } FUNC = 0 \end{cases}$$

WHO CLASSIFICATION

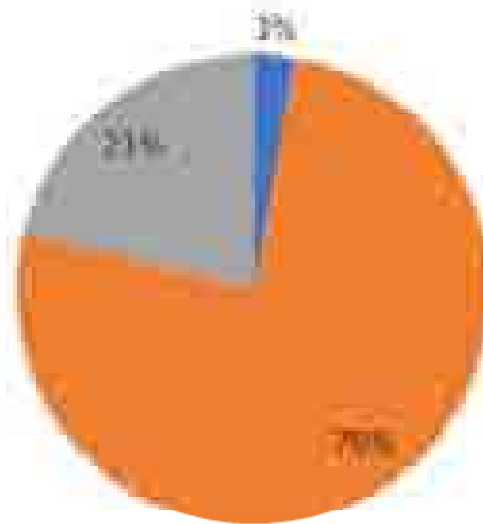
Safety index	Classification	What should be done?
0 - 0.35	C	Urgent intervention measures are needed. The hospital's current safety levels are inadequate to protect the lives of patients and hospital staff during and after a disaster.
0.36 - 0.65	B	Intervention measures are needed in the short-term. The hospital's current safety levels are such that patients, hospital staff, and its ability to function during and after a disaster are potentially at risk.
0.66 - 1	A	It is likely that the hospital will function in case of a disaster. It is recommended, however, to continue with measures to improve response capacity and to carry out preventive measures in the medium- and long-term to improve the safety level in case of disaster.

Safety Index

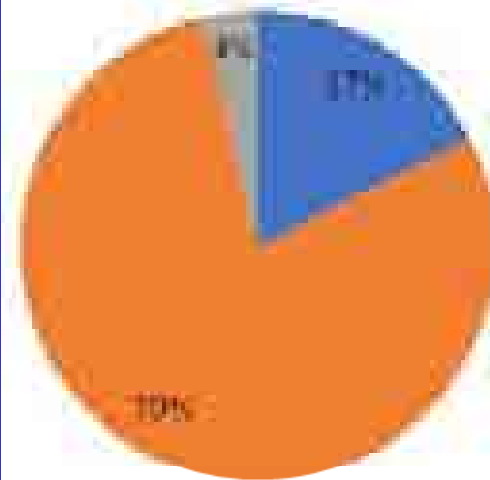
CHC



PHC

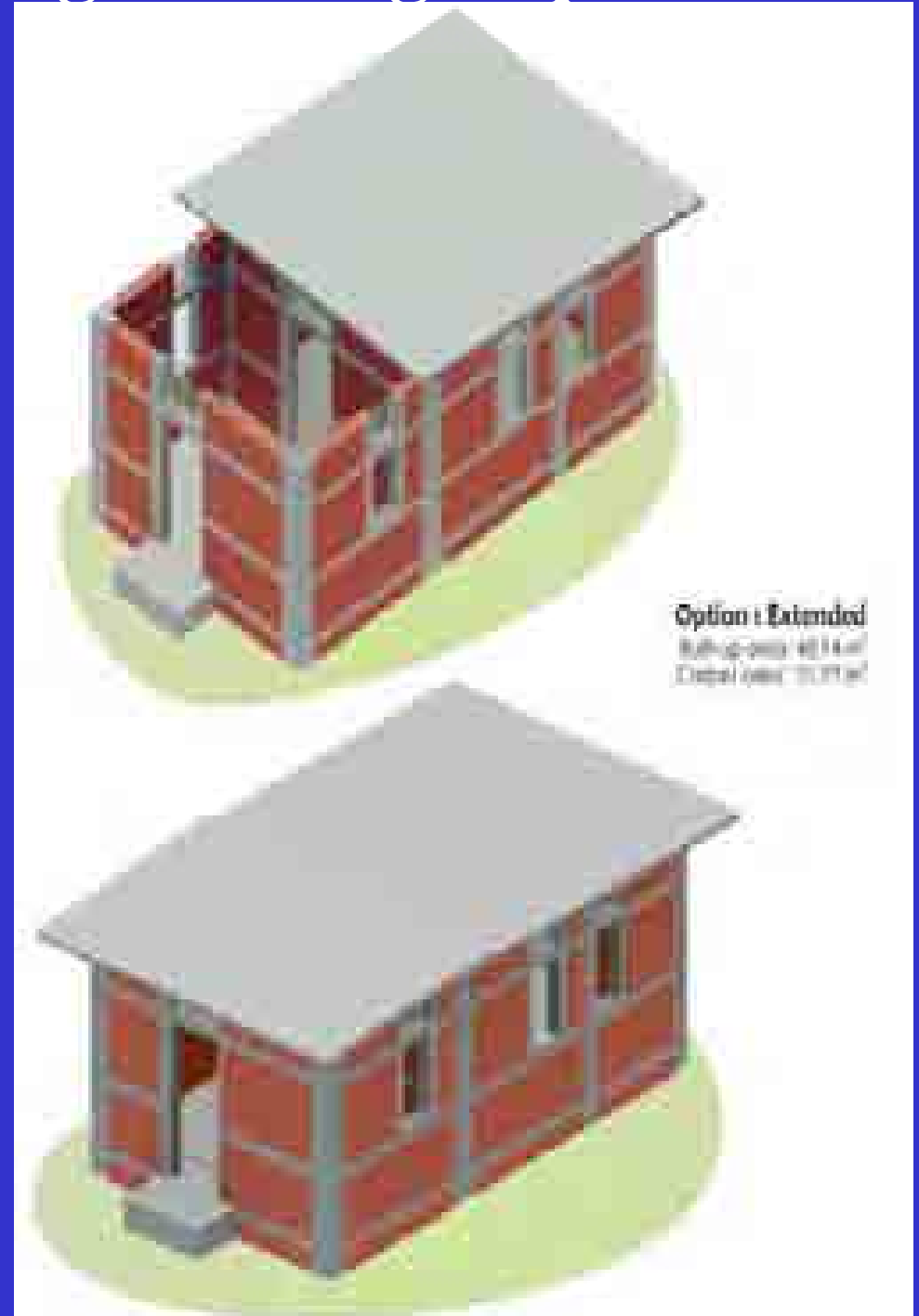
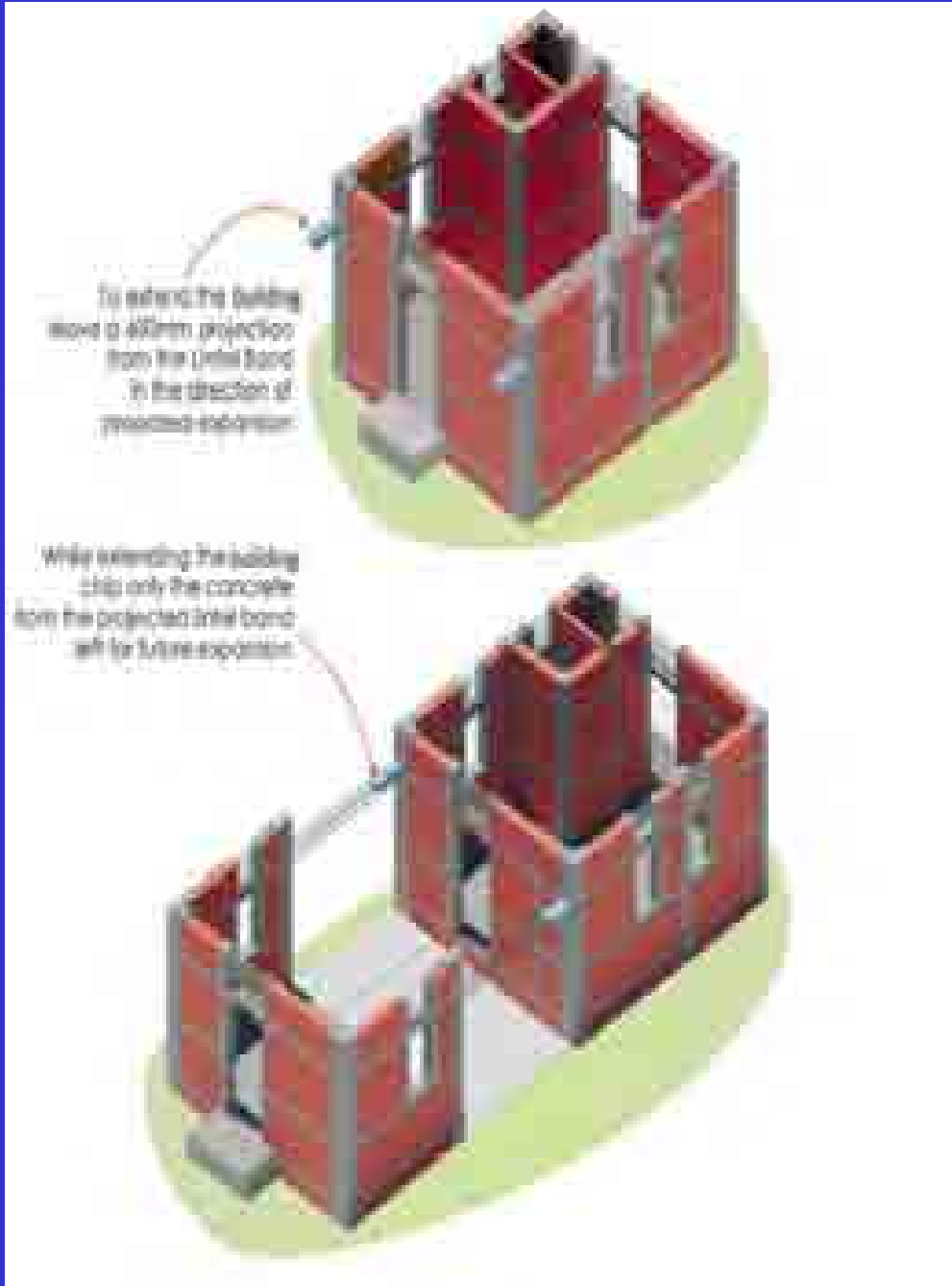


SC



- Low Risk
- Medium Risk
- High Risk

How to extend the existing building- Option 1



Summary

1. Seismic hazard assessment of India
2. Tsunami Hazard map of India (in Progress)
3. RVS of hospital buildings in Odisha

Acknowledgement

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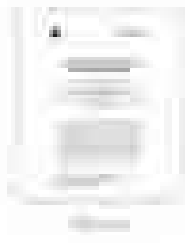
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Author(s): Raghukanth Stg, Anandhan S, Sankar S

Published In

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Research: EARTHQUAKE SOURCE GEOMETRY CORRELATION WITH STRONG MOTION DATA

Author(s): Stg

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