

DREF operation



International Federation
of Red Cross and Red Crescent Societies

UGANDA: Bomb Blast

DREF operation n° MDRGU017
GLIDE n° OT-2010-000132-UGA
22 July 2010

The International Federation's Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of national societies to respond to disasters.

CHF 112,097 (USD 96,948 or EUR 76,505) has been allocated from the International Federation of Red Cross and Red Crescent Societies (IFRC) 's Disaster Relief Emergency Fund (DREF) to support the Uganda Red Cross Society (UGRS) in delivering immediate assistance and preparedness to some 400,000 beneficiaries. Unearmarked funds to repay DREF are encouraged.



Summary: A deadly attack at two public places packed with residents viewing the 2010 World Cup finals between Netherlands and Spain turned tragic in Kampala City as three bomb explosions ripped through the city suburbs, killing over 76, leaving 114 people critically injured.

Survivors search for the dead and injured friends at
the Kyadondo Rugby Club 11th July 2010:
Photo by New Vision

The URCS intends to provide response and preparedness interventions through search and rescue, tracing services, First Aid services, as well as Red Cross branch capacity building on social mobilisation to improve public awareness and vigilance about bomb threats. The social mobilisation campaign would reach approximately 400,000 people in the affected and neighbouring districts.

The major donors to the DREF are the Irish, Italian, Netherlands and Norwegian governments, and ECHO. Details of all donors can be found on

<http://www.ifrc.org/what/disasters/responding/drs/tools/dref/donors.asp>

This operation is expected to be implemented over one month, and will therefore be completed by 16th August, 2010; a Final Report will be made available one month after the end of the operation (by September 1, 2010).

[<click here for the DREF budget summary, here for contact details, or here to view the map of the affected area>](#)

The situation

A blast bomb is a term used for a type of improvised explosive device, usually a form of homemade grenade, which is thrown at a target. These devices have been used in a number of public order situations and in many terrorist attacks across the world. Hundreds of people were killed by intermittent blast bombs in the Ugandan Capital Kampala during the Allied Democratic Forces (ADF) insurgency in 1997/1998 where the UGRS and other emergency organizations provided effective response to the scores of people injured during the tragedies.

Since the occurrence of the above events in 1997/1998, there haven't been any other experienced until on Sunday 11 July 2010 when twin blasts feared to be a terrorists attack took place at an Ethiopian restaurant and a Rugby club, in Kampala late at night. Amongst the 76 people confirmed dead and 114 injured, are Ugandans, Eritreans, Ethiopians, Irish, Americans and Indian nationals. Thirty-three bodies currently in the city mortuary are yet to be identified and there is possibilities that some may not be completely identified and body parts confusingly mixing up with others as relatives claim them for decent burials.

On 12 July 2010, another devise that failed to go off placed inside an isolated building near a church in Mengo, a Kampala suburb was later detonated by the Police bomb squad, and the Red Cross Ambulances were well positioned to assist in case of any injuries. In a related incident, another bomb was found in a Kampala suburb night club (Makindye House) left at the club by a stranger, the police Anti Terrorism Unit detonated the bomb 24 hours after the blasts that killed a score of people and another was detonated by the police anti-bomb squad on 13 July on a busy down town Kampala street.

These incidences have created panic amongst the public since in the recent past Somali Islamist terrorist groups threatened to attack Uganda for sending peacekeeping troops to their country under the auspices of the African Union to protect the citizens. The Al Shabab group have claimed responsibility for the attacks and vowed to continue with the same saying this is just the beginning.



An aftermath scene of the first bomb blast at Ethiopian restaurant in Kampala, Uganda

Coordination and partnerships

As the response operation is related to security issues, the main coordination mechanism is being led by the Joint Anti-Terrorism (JATT) unit of the Uganda Police and in collaboration with other security agencies. The emergency medical services are being coordinated by Ministry of Health working closely with Mulago National Referral Hospital, International Hospital Kampala, WHO, URCS and others sector organizations. WHO supported Mulago hospital with safe identification and decent handling of the dead bodies.

The police and security personnel cordoned off the blast scenes and are continuing with investigations. The Uganda Peoples' Defence Forces (UPDF) deployed military personnel to support body identification at the Kampala City mortuary

The Uganda Police in collaboration with the URCS tracing programme established a central tracing desk and public information centre at Mulago Hospital, where relatives of deceased and affected are informed survivors about missing persons as well as receiving psychosocial support services.

The ICRC has been supporting the National Society in information sharing as well as a donation of medical supplies including cannulas, bandages, cotton and others donated to the hospital. The IFRC East Africa regional office has deployed one of its staff members to provide technical support to UGRS for a period one week from the disaster onset.

The President of the Republic of Uganda declared a week of national mourning where all national flags will fly at half-mast from 13 July 2010 in honour of those killed and injured during the tragedy.

Red Cross and Red Crescent action

Since the incident occurred in the middle of the night where safety of Red Cross volunteers was not guaranteed, the URCS intervention was halted until daybreak when visibility and safer access was assured. Due to the overwhelming number of injured referred to Mulago National referral hospital and International Hospital Kampala, the URCS intervened and deployed 55 First Aid volunteers in the two hospitals to support casualty reception, internal referral, attending to minor injuries at the casualty accident departments and admission wards at the two hospitals.

Due to the overwhelming number of casualties amidst inadequate supplies of dressings, medical consumables and bedding for patients in Mulago hospital, the URCS supported and delivered the following items:

- 100 pieces of 4" mattresses
- 100 pieces of blankets
- 5 pairs of field stretchers
- 10 pieces of 20lt basins
- 10 buckets of 10lt capacity with lids
- 10 bottles of 750mls JIK disinfectants
- 30 pairs of heavy duty gloves
- 4000 pairs of disposable gloves
- 60 pieces of crepe bandages
- 300 pieces of cannulas
- 20 boxes of zinc oxide plasters
- 1 carton of cotton wool
- 10 First Aid kits

URCS' two ambulances were put on stand-by at the hospitals and coordination mechanism established with the police and hospitals in case of further attacks.

Due to increased number of surgical cases in the hospital, the URCS supported the mobilization and immediate delivery of 75 units of safe blood from Uganda Blood Transfusion Services (UBTS) for transfusing the injured in Mulago National referral hospital. The URCS is continuing to appeal to the public to donate blood to ensure adequate supply of safe blood is available in all major hospitals in these cities/towns to facilitate effective treatment of victims.

A central tracing desk has been established at Mulago National Referral hospital and International Hospital Kampala where cases of missing persons are registered, names and identities of those admitted and the dead are shared. This information is being corroborated with other health facilities to trace the missing persons.

URCS already has four out of the six psychosocial support (PSP) trainers from the recently concluded training. These will train ten Red Cross Action Team (RCAT) volunteers currently based at the National Referral hospital in Mulago. The URCS PSP team will work with 15 other professional counselors/psychologists from Ministry of Health and AIDS Support Organization (TASO) who have agreed to volunteer counseling services to the bereaved families and survivors. Currently, the team is carrying out registration and verification of bereaved families in collaboration with the tracing unit at Mulago hospital to

ensure effective home based PSP visits. Kenya Red Cross Society has offered two professional psychologists (arrived in Kampala on 15 July 2010) to provide back up support to the URCS team for one week

Due to continues bomb threats during this week security is heightened, the URCS' approach is to undertake proactive intervention that will create community preparedness and resilience to limit casualty numbers beyond expected level as well as adequately prepare for effective response incase such attacks and other situations of violence continue in future.

The needs

Beneficiary selection:

The selected beneficiaries are people already affected and admitted in hospital or bereaved families as well as those living in the highly congested parts of the cities in Kampala, Entebbe, Jinja and Mukono who are at high risk of future attacks. These include citizens in public places like schools, hospitals, transport terminals like bus and taxi terminals, conference and meeting places, entertainment centres etc where people need safety information on how to identify the threat and/or limit its impact.

The general needs that exacerbate the situations are:

- General lack of emergency rescue services in most of the towns including Kampala city where few ambulance services exist but are limited to hospital referrals.
- Lack of awareness of the general public on possible terrorist attacks
- Terrorist attacks in the middle of the night make emergency intervention such as First Aid, search and rescue and evacuation difficult.
- Inadequate medical supplies and personnel in the referral hospitals that are always overwhelmed in such emergencies, thus need to support by restocking necessary surgical supplies and extra beddings and deploying First Aid volunteers offer back up support to cater for any upsurge
- RCAT volunteers have not received any training in Incident Command System (ICS) that is quite useful in such a situation where many partners, including security agencies are involved, and dead bodies management where mass casualty incidences are experienced
- The affected and bereaved facilities as well as those still admitted in hospital are in dire need of psychosocial support and counseling as some break down for failure to locate their missing relatives and on sight of the injured and dead.

This calls for high level of preparedness and intensive training of URCS volunteers in search and rescue operations in areas that are vulnerable to terrorist attacks.

Through sensitization of the public by URCS on possible terrorist attacks in areas at risk and restocking First Aid materials and training of volunteers in search and rescue; will all act as important risk reduction strategies that will reduce the community vulnerabilities to further terrorist attacks, the restocking of First Aid materials and the trained volunteers will help reduce the number of deaths in case of a similar terrorist attack.

The proposed operation

Emergency health

Objective: To carry out response to bomb blasts and improve readiness through training and action of Red Cross Action Teams.

Due to the continued threat by the Alshabab militants that this was just a beginning, the URCS would like to consider this DREF to cover both response in Kampala city and public awareness covering three additional neighbouring towns of Entebbe, Mukono and Jinja at risk of the bomb attacks

Activities planned:

- Replenish First Aid and medical supplies utilized during the initial response and casualty stabilization at the hospital emergency units.
- Train 80 Kampala, Entebbe, Jinja and Mukono RCAT members from eight URCS branches to equip them with basic First Aid and Triage, Safer Access, Incident Command System (ICS), and dead bodies handling skills for effective response and community safety awareness. ICRC will support training in dead body management, while other specialized skills will be facilitated by the Uganda Police and trainers from Ministry of disaster preparedness.
- Train ten URCS volunteers in basic psychosocial support skills.
- Conduct tracing of missing persons and sharing information about people admitted and the deceased in

collaboration with the Police information desks established at the two hospitals.

- Printing and distribution of Information, Education and Communication (IEC) materials (20,000 posters, 50,000 brochures) for promoting public safety awareness about terrorist attacks as well as collective action to reduce possibility and limit impact if such attacks occur. The message packaging will be done in collaboration with the Uganda Police Force and Ministry of disaster preparedness.
- Procure and restock First Aid materials for four URCS ambulances.
- Procure and restock 200 First Aid Kits.
- Procure, distribute and restock 200 body bags.
- Conducting door-to-door safety education targeting high risk areas
- Conduct timely response, triaging, treatment at pre-hospital settings and referral of casualties to health facilities.
- Provide community-based PSP services to bereaved families and survivors in Kampala.
- Conduct follow-up services for discharged patients and bereaved families providing PSP and bereavement counselling services.
- Conduct media campaigns (1,800 radio spots and 24 talk shows) to promote public awareness and safe behavior change for at-risk communities.
- Procure and distribute 200 mattresses and other medical equipment to support patient care at Mulago hospital.

Coordination; Monitoring and support supervision

Objective: To strengthen coordination and local response by supporting and participating in the coordination mechanisms and monitoring.

Activities planned:

- Conduct four field monitoring and technical support supervision visits from regional and headquarters levels.
- Participate in four weekly coordination meetings at district and national levels.

How we work

All International Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

For further information specifically related to this operation please contact:

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[<DREF budget \(if available\) and map below; click here to return to the title page>](#)

Budget Summary

Uganda Bomb Blast (MDRUG017)

Budget Group	DREF Grant Budget	Total Budget (CHF)
Construction - Materials		0
Clothing & Textiles	2,273	2,273
Food		0
Seeds & Plants		0
Water & Sanitation		0
Medical & First Aid	31,604	31,604
Teaching Materials	10,963	10,963
Utensils & Tools		0
Total Supplies	44,840	44,840
Storage		0
Distribution & Monitoring	2,406	2,406
Transport & Vehicle Costs	13,619	13,619
Total Transport & Storage	16,026	16,026
International Staff		0
NS staff/volunteers	15,722	15,722
Consultants		0
Total Personnel	15,722	15,722
Workshops & Training	18,160	18,160
Total Workshops & Training	18,160	18,160
Travel		0
Information & Public Relation	9,198	9,198
Office Costs		0
Communications	160	160
Professional Fees		0
Financial Charges		0
Other General Expenses	1,149	1,149
Total General Expenditure	10,507	10,507
Program Support	6,842	6,842
Total Programme Support	6,842	6,842
TOTAL BUDGET	112,097	112,097

