

SUDAN: ERITREAN REFUGEES

9 June 2000

*preliminary appeal no. 12/2000
situation report no. 1
period covered: 22 May to 7 June 2000*

After an initial period of delays the delivery of assistance is on track and the situation is reasonably under control. The growing number of new arrivals however is causing considerable concern, and underlines the importance of immediate action to meet the outstanding needs. The Sudanese Red Crescent Society and Federation are planning to prepare care and maintenance assistance for up to 80,000 refugees, and the original time-frame may be extended.

The context

Following advances by the Ethiopian army and air force deep into Eritrean territory, an initial wave of at least 12,000 Eritrean refugees began arriving in Sudan on May 18-19. The refugees originated mainly from the town of Tessenay, only a few kilometres from the border. Further arrivals from other areas including Barentu were expected. Eritrean authorities have reported that more than 500,000 civilians have been forced to flee towards the north of the country.

Initially, the two main entry points were Luffah and Gulsa villages, with an estimated 8,000 and some 4,000 new arrivals respectively, most of them elderly, women, and children. Gergef, some 180 km south of Kassala, and other places along the Eritrean-Sudanese border have also received significant numbers of refugees. Further influxes are expected, with people arriving by foot or any means of transportation. By June 7, approximately 70,000 persons had been registered by UNHCR, including some 20,000 who have arrived during the last two days. More than half a million civilians reportedly were forced to flee their homes in Eritrea, and fighting is continuing in the Tessenay area.

To respond to the humanitarian situation, the SRCS, with support from the Federation, has been extremely active from the first day, providing initial supplies of relief items from available stocks. The SRCS and the Federation launched an Appeal on 22 May, 2000 to enable the delivery of further assistance to the refugees, working in close collaboration with UNHCR, WFP, and other agencies.

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Following advances by the Ethiopian army and air force deep into Eritrean territory, an initial wave of at least 12,000 Eritrean refugees began arriving in Sudan on May 18-19. The refugees originated mainly from the town of Tessenay, only a few kilometres from the border. Further arrivals from other areas including Barentu were expected. Eritrean authorities have reported that more than 500,000 civilians have been forced to flee towards the north of the country.

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Latest events

Although reconciliation talks have been underway for more than a week, hostilities inside Eritrea have not stopped. The Ethiopian forces are still present in western Eritrea, causing further population displacement towards the border. Most of the recent newcomers have arrived at the existing reception centres of Gulsa and Luffah.

Following the first week of delays in organising the reception centres and providing immediate support to the refugees, the organisations assisting the refugees (local government, UNHCR, WFP, the International Federation and SRCS, MSF Holland and others) managed to assert control of the situation by the end of the first week (late May). Water tankers were dispatched to all major reception centres and distributions of food started. New camps with approximately 2,000 tents were established a few kilometres away from the border areas. Gergef camp lacks water and is not easily accessible. Refugees are therefore being moved to Shagarab, some 30 km towards Girba. Land mines from previous fighting pose a serious threat to the lives of the refugees in those areas.

The new increase in refugee numbers is placing additional strain on the aid organisations. However, the health situation is under control and no epidemics are foreseen. The major health problem is malaria and some respiratory infections. Sanitation is rudimentary and needs improvement, notably through latrine construction. In Gulsa and Luffah, between 10 and 13 litres of clean water per person per day is being supplied, while in Gergef only two litres is available.

The Sudanese government is voicing strong concern of a humanitarian disaster if the international community does not immediately respond to the needs of the Eritrean refugees.

Red Cross/Red Crescent action

In response to the situation the Sudanese Red Crescent immediately established health units in abandoned schools at Gulsa and Luffah and later on in Gergef, using small tents. Medical equipment and drugs for the first week were made available from the ongoing Relief Health Programme in Wad Sherefei. The SRCS has established and is now running four clinics in the Gulsa and Luffah areas with some assistance from MSF/Holland. The SRCS is also responsible for hospital referrals whereby over 70 referrals were made during the first week of the disaster. The Sudanese Red Crescent in Kassala is handling the situation very efficiently due to their experience with sporadic refugee influxes over the years.

Currently 400 volunteers have been mobilised in the camps to assist the health staff, provide and distribute water via water tankers, and to assist UNHCR in registration of refugees and WFP in distribution of food items. Hygiene messages are being dispatched through loudspeakers. The volunteers are involved in all aspects of the assistance activities, working with all the agencies present.

All three components of the Movement have been working vigorously to complement each other. The International Federation allocated CHF 150,000 from its Disaster Relief Emergency Fund (DREF) to purchase 1,500 sacks of charcoal from neighbouring Gedaref state and transferred cash for transportation, salaries and incentives for the staff and volunteers working on the emergency. The response to the Federation appeal from Participating National Societies has so far been positive (see Annex 1), and a number of donors have indicated firm forthcoming support including the Spanish Red Cross (BP-5 compact food, kitchen sets, and plastic sheeting), Danish Red Cross (canvas tarpulins) British Red Cross (Delegate support), and the Netherlands Red Cross (emergency health kits).

The United Arab Emirates Red Crescent has also despatched two flights carrying tents, vehicles, clothes and blankets. VHF radio equipment for the Kassala Branch has already been despatched from Geneva. An application has been submitted ECHO. In addition, the table below reflects in-kind contributions made by the SRCS and ICRC towards the disaster:

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Donor	Description	Quantity	Remarks
SRCS	jerry cans	2,000 pcs	4 gallons/DP stock
	tents	250 pcs	DP stock
ICRC	tarpaulins	2,500 pcs	
	water buckets & lids	5,000 pcs	plastic
	soap	24,000 pcs	3,000 families
	aquatabs	480 tabs	water disinfectants
	chlorine test kit	1 kit	
	diesel	1,200 ltrs	6 drums

In addition to the above donations, the ICRC has loaned 2 water tankers, 4 water bladders, 4 tapstands, 6 reinforced pipes and 2 motor pumps, to assist in the provision of water to the various refugee camps. On 5 June, an ICRC assessment team and a mobile surgical team were also sent to Kassala.

To avoid an outbreak of meningitis, the supply of vaccine recently donated by the British Red Cross for the meningitis campaign has also made it possible to vaccinate all registered refugees under 30 years of age. Medical equipment for the upgraded health units is being purchased locally and dispatched to Kassala.

Outstanding needs

The focus is now on water, sanitation, health and shelter assistance, and with the number of refugees continuing to increase, it is critical that the SRCS and Federation continue to receive support for the delivery of assistance in health services, shelter (tents), and ensure that the cost of transportation of relief supplies as well as volunteers and monitoring staff is secured. Most of the in-kind goods requested in the original appeal have been provided, although medical supplies and shelter are still in short supply. *The main outstanding requirement is cash to cover transportation and staffing costs.*

External relations - Government/UN/NGOs/Media

Regular meetings are held in Khartoum and Kassala between all agencies and the government to ensure coordination and a full coverage of the needs. In Kassala, daily meetings are being held with the local government and between NGOs to ensure coordinated planning and movements to and between camps, and to minimize the duplication of efforts.

The SRCS is the focal point for most of the international partners, assisting them with information, transport and liaison services.

Contributions

See Annex 1 for details.

Peter Rees-Gildea
 Director
 Operations Funding and Reporting Department

Bekele Geleta
 Director
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