

SIERRA LEONE: HUMANITARIAN ASSISTANCE

3 January, 2001

*appeal no. 01.04/2000
situation report no. 2
period covered: 1 June - 15 December 2000*

This years appeal was revised in order to better reflect the growing needs in view of the positive developments in the peace process early in the year. While the subsequent events in early May initially caused a severe set back to the peace process, with the strong international support to the Government from both the UN and the British Government, there is now the possibility of a major break through in the peace process with renewed hopes for an end to the 10-year old conflict.

The Federation support in year 2000 to the Sierra Leone Red Cross Society (SLRCS) has focused both on the ongoing emergency programs as well as on expanding the capability and resources of the SLRCS to enable the national society to take on the role of one of the major humanitarian organisations involved with the return and resettlement of both refugees and IDPs and the rehabilitation of the country when the situation in the country allows.

The context

The Federation's strategy for 2000 was formulated to provide support to the Sierra Leone Red Cross Society (SLRCS) as the only indigenous organisation with a countrywide reach, in order for the SLRCS to play a positive role in implementing and promoting the ongoing peace process. By starting up SLRCS and Federation programmes, especially in rural areas, a positive signal is sent to the traumatised population as well as to the ex-combatants, highlighting the advantages for all groups to return to a normal and peaceful society. The SLRCS, supported by the Federation, will continue their programmes and expand them to cover provinces where the SLRCS will be able to re-establish branches within the programme period,

re-establish and retrain First Aid volunteers throughout the country, provide health services to the population and assist the most vulnerable groups affected by the conflict. The SLRCS and Federation activities are co-ordinated with the ICRC which is the lead agency in the country, with the United Nations agencies and other NGOs.

During the reporting period the internal conflict continued with cross border attacks provoking massive population movements not only within the country itself but also with Sierra Leonean refugees fleeing unrest and resentment in neighbouring Guinea back to Sierra Leone. A lull in the brutal civil conflict occurred in November with the signing of a 30 day cease fire, although the implementation of the provisions in this agreement were not carried out.

The SLRCS is steadily refurbishing and reopening its provincial branches, as the security situation permits, the latest being a branch establishment in the Bonthe Province. The SLRCS has also restarted its Emergency First Aid Program (DPP), Community-based Health programmes (clinic support, Traditional Birth Attendance, AIDS/HIV prevention, Health Education, Sanitation and Water) which play an important part in assisting the returning Sierra Leonean refugees from Guinea, and participating as an active partner in the Polio Eradication campaign. New programmes have also been initiated, assisting the most affected population groups of the conflict - Amputees through the Job Assistance to War Amputees (JAWA) and war affected children through the Child Advocacy and Rehabilitation Program. Finally, the SLRCS has started a pilot program assisting in the rehabilitation, reconciliation and healing process in the rural communities most affected by the conflict through the Community Animation and Peace Support program (CAPS).

Latest events

The overall security situation continued to fluctuate and evolve, with the Revolutionary United Front (RUF) alternately entering into discussions, then reverting to renewed aggression. For example, while the intervention of British troops in May as a response to the May 8 disturbances and the RUF movement towards Freetown resulted in an immediate stabilisation of the situation, the RUF regrouped and held major parts of the country, thus preventing any humanitarian assistance to these areas despite reports indicating a dire need for assistance.

A British and Sierra Leone army operation on 10 September opened access to the upcountry areas, resulting in a major return of Sierra Leoneans from Guinea back to Sierra Leone. Up to mid-December a total of 16,822 refugees have been assisted by the Sierra Leone Red Cross at their arrival centre in Freetown Harbour. Another group moved from the camps in south Guinea into the north of Sierra Leone, joining civilians from the Kambia District (fleeing the fighting and air attacks) and ending up on the relatively more secure Lungi peninsular (close to the International Airport), where the ICRC/SLRCS and several other NGO's registered 12,000 returnees as well as an estimated 17,000 IDPs already in the area.

With the fluctuating and evolving nature of the situation and with the expansion seen in the number of returning refugees from Guinea, it is important that the SLRCS and Federation maintain the capability to assist with emergency interventions, continuing the close co-operation that already exists with the ICRC.

Red Cross/Red Crescent action

Disaster Preparedness Program (DPP) / First Aid Emergency Preparedness Programme •

In connection with the returnees coming in by boat from Guinea to Freetown, the DPP has set up a reception centre in Freetown harbour together with the CBHP program (mobile clinic) and ICRC (tracing and registration). The Emergency First Aiders distribute water, ORS and food to the often very exhausted returnees, and bring severe cases to the CBHP health post and if necessary onwards to the Connaught hospital. Two Emergency First Aiders also accompanied the boat on the trip, giving direct assistance onboard. In November additional assistance was provided to the beneficiaries due to the increase in the

number carried each trip on a boat designed to carry a maximum of 700 passengers. Starting in December an International Medical Corps medical team also accompanied the boat.

The DPP has established and trained 2 new First Aid groups in Mile 91 who assist the ICRC in relief to the estimated 20,000 IDPs who have fled from Makeni and Magburaka. The DPP continued the first aid post operation on the main beach in Freetown.

Community Based Health Program (CBHP) •

Primary Health Care Service: In addition to the 6 reactivated SLRCS Primary Health Clinics in Freetown, Kenema, Bo, Moyamba, Mattru and Bonthe, three additional emergency clinics assisting new IDPs were established in Lungi (clinic constructed by ICRC, manned by SLRCS staff and medicine supported by the Federation), Mile 91 (medicine and supervision by ICRC, manned by SLRCS staff supported by the Federation) and Bo IDP camp (SLRCS and the Federation clinic).

Treatment figures for the first 3 quarters of 2000 shows a total of 72,743 patients treated, 34,206 vaccinated (in addition to the 40,000 during the polio campaign) and 14,148 children covered under the growth monitoring programme with 960 receiving supplementary feeding. The clinic work focused particularly on maternal and child healthcare (MCH), growth monitoring, vaccination ante natal care, preventive health care and inter-links with the Health Education Project, the Community Based First Aid, and the Traditional Birth Attendance (TBA) Project.

Safe Motherhood (MCH): The progress of the program was partly delayed due to a new and more comprehensive training module being developed by UNICEF and the training manual undergoing field testing in mid-2000. The new training module expanded the training period from 10 to 30 days, and after the successful testing of the new manual, the program was restarted, initially with a refresher/retraining course for 40 previous trained TBAs. In October-November 123 new TBAs were trained and equipped, taking the total up to 283 TBAs trained by the program as compared to the 300 TBAs planned for year 2000. For 2001 the target is to train additional 500 TBAs using the new training module and manual to ensure a higher standard of the trained TBAs. The clinics held ante natal sessions for 7,177 women, and 9,367 pregnant and non-pregnant women were immunised against tetanus.

Health Education: Community awareness campaigns on immunisation, breast feeding, growth monitoring, and sanitation were carried out in the communities by the branch health officers, youth peer educators and community volunteers. Health education classes were also conducted at the health clinics using the waiting time and motivation of the patients to carry the health messages.

Control and prevention of HIV/AIDS: 2 dramas were written on HIV/AIDS and the 5 drama groups in W. Area, Moyamba, Bo, Kenema and Lungi were equipped, trained and performed the plays regularly at schools and community centres. The weekly Red Cross radio programme was used to spread the message regarding safer sex and HIV/AIDS prevention. Youth Peer Educators actively participated in the arrangement around the Worlds Aids Day on 1 December, especially targeting the senior students. One day seminar were held for 37 commercial sex-workers in Freetown and a 2 day workshop on HIV/AIDS for a group of UNAMSIL personnel.

Polio Eradication Program: With the Red Cross and Red Crescent Movement officially joining the world wide campaign to eradicate polio by year 2005, the SLRCS and Federation took on the responsibility for the October and November immunisation round for the area of Lungi (Kaffu Bullum Chiefdom). The target figure of 20,972 under fivers was almost reached, with 20,875 vaccinated in the first round (99.5% coverage) and similar figures for the second round. The success must be attributed to the involvement of the SLRCS volunteers from the area, who worked both with the social mobilisation, street drama and the actual immunisation. The next round is scheduled for February 2001, and the SLRCS and Federation hope to be able to expand into the area north of Lungi, thus being responsible for the entire Lungi peninsular, although this expansion depends on the security and availability of funding. This area is presently seeing a

major influx of returning refugees forced out of Guinea and IDPs fleeing the fighting on the border to Guinea in the north, many of whom have not been exposed to the polio vaccination yet.

Water and Sanitation: At the start of the dry season in November, material was purchased for 25 traditional wells in the Mattru and Bonthe areas, and works are ongoing with the SLRCS engineer present in the area. Additionally, 700 wells have been chlorinated in the Kenema, W.Area, Moyamba, Bonthe, Mattru and Lungi areas. Red Cross volunteers still assist in a 5 day monthly sensitisation campaign on a clean environment and sanitation in Freetown, although the assistance has now been limited to the input of the volunteers and fuel for the garbage trucks, while the rest of the input is supplied by the authorities.

Lassa Fever Prevention and Health Education Program in Kenema: Due to the alarming increase in reported cases of Lassa fever (a “cousin” to the Ebola Virus) in Kenema, with the Lassa ward at the Kenema hospital reporting a mortality rate of 57% in September, the SLRCS launched this emergency program in October. The program entailed:

- Community sensitisation on Lassa fever and the importance of a clean environment, this part carried out through street dramas, role playing, discussions and a weekly radio program.
- Provision of rat traps.
- Garbage pick-up and the provision of tools for to the communities, enabling them to continue the garbage clearing.
- 20 volunteers were involved and 6,979 people were directly contacted while an estimated 45,000 listeners followed the weekly radio program. The program managed to involve other groups like the UNAMSIL, school children and various NGOs in the exercise.

Blood Programme: The Year 2000 Blood Program had a target of 2,500 units collected and distributed, but as of end November this figure has been exceeded with 2,969 units of blood collected and 2,255 whole units and 714 paediatric units issued, all screened for HIV and Hepatitis B and C. The Federation has officially informed the SLRCS that, due to a change in policy, it will cease its support to the present blood bank at Connaught Hospital and at the Maternity and Children’s Hospital by the end of December 2000. Discussions are presently ongoing between the Ministry of Health, WHO, the SLRCS and Federation as to how the program could be handed over, bearing in mind that the SLRCS blood bank is the only public blood bank in Freetown from where screened blood is available.

Branch and Institutional Development Support Programme •

The SLRCS has decided to elevate the Bonthe Group to branch status covering Bonthe province with clinics in Bonthe and Mattru, plans are now underway for assisting this new branch with office space, equipment and communication gear in time for an official opening in February 2001. The planned reopening of branches in Makeni, Magburaka and Port Loko had to be postponed due to the prevailing security situation.

In October 10 lap top computers were supplied to the SLRCS and daily computer training classes started in the SLRCS conference room for all staff, with an enthusiastic response from staff.. These will improve overall reporting.

A two days workshop on the 2001 SLRCS program supported by the Federation, was conducted at the end of August followed by the detailed drawing of plans and budgets. All heads of departments participated as well as the Field Officers from the program areas and other related resource persons. The final 2001 program is now available on the IFRC web site.

Community Animation Peace Support Programme (CAPS) •

The CAPS program has now been functioning for 8 months, and there are indications of an increased confidence in a peaceful society with agricultural and economic activities starting up again in the communities. The first harvesting from the communal prepared areas has just been completed and the saplings from these areas will contribute an important part of next seasons planting.

The animators living within the 24 communities covered by this programme around Bo/Moyamba have become well integrated into their community and are actively supporting the ongoing reconciliation process through community meetings, sports activities, drama group acting, formation of women, men and youth work groups, agricultural activities and local first aid training courses. They have also supervised distribution to the communities of basic agricultural tools and building equipment, some of the major items being given to the community as a whole.

Discussions are under way as to additional assistance to needs identified by the communities within the field of literacy classes for widows and single mothers, income-generating and micro-credit projects for women.

Child Advocacy and Rehabilitation Programme (CARP) •

The Social Welfare Delegate for the program arrived end September, and plans were immediately started for starting implementation. Initially it was decided to start the operation in Waterloo and surrounding communities (east of Freetown). This area has seen a great influx of IDPs and even young ex-combatants. Whenever Freetown was attacked, it was the first area to be hit and the worst affected. A suitable empty community centre in Waterloo was identified as a focal point for the programme and a contract set up with the community for a two year utilisation of this space.

A Vulnerability Capacity Assessment was carried out in the communities in November and December, asking the communities to identify the threats and needs of the war-affected children in their community and the communities ability to respond. The communities were also asked to estimate the number of the most war affected children and give reasons why they considered them in this category.

Presently, recruitment of the new staff is ongoing and we expect full activities will start at the centre in Waterloo in mid-January 2001.

Job Assistance to War Amputees Programme (JAWA) •

The insecurity and uncertainty created by the May disturbance resulted in reluctance from employers to hire new staff, but come August the program again started to secure employment for amputees in the private sector and the State Lotto accepted 10 amputees as ticket agents. The program has in the second part of the year secured jobs for 20 amputees of which 2 are double amputees.

The micro credit loan scheme continued to be very popular with the amputees, with an additional 50 amputees joining the scheme in the second half of the year, starting businesses such as wood sellers, selling of prepared food and boiled rice, soft drinks and kerosene as well as hair dressing, where the first participant in the skill training program now have started her own business.

An additional 40 amputees have been placed with reliable skill training institutes within the field of tailoring, shoe making, hair dressing and batik making. Attendance of the trainees are regularly checked by the JAWA officers and transport provided to the training sessions.

The program has been expanded to include the Lungi area and Bo, where local SLRCS volunteers are actively seeking jobs, training opportunities and support to micro loan schemes for amputees living in these areas, and a further expansion to the Moyamba and Kenema area is planned for early next year.

The 346 students from grade 1 to 5 in the school in the amputee camp in Freetown, was supplied with text books, school material and class room furniture at the beginning of the new school year in September month.

Constraints

The major constraint continues to be the lack of access for humanitarian agencies to RUF controlled areas, and reports have emerged of dire needs with very little if any access to health facilities or medicine.

Outstanding needs

Since the revision of the budget in August, some funds have been reallocated to cover the SLRCS and Federation support to the polio campaign and to the emergency assistance given to the returning refugees from Guinea. While the appeal is 98% covered, a considerable portion of the support is in-kind, and additional funds are required to implement the full range of planned activities.

External relations - Government/UN/NGOs/Media

A status agreement between the Government of Sierra Leone and the Federation was signed at the end of August 2000, granting the Federation status equivalent to that of UN agencies (the ICRC has since signed a similar agreement). The agreement allows the Federation to operate in Sierra Leone as a fully recognised international organisation, thus enhancing day to day co-operation with Embassies, the UN, NGOs and local organisations.

The SLRCS and Federation participate fully in the regular meeting of UN, selected NGOs and international organisations at the National Commission for Reconstruction, Resettlement and Rehabilitation (NCRRR), which includes a security briefing by UNAMSIL. Weekly tri-party meetings are held with the ICRC, the SLRCS, and Federation participation, ensuring a smooth relationship within the Red Cross movement in Sierra Leone, with many new programs being carried out in full co-operation.

Contributions

See Annex 1 for details.

Please note that detailed programme descriptions and further information can be obtained from Anne Kirsti Vartdal, Federation Desk Officer for West Africa; phone +41 22 730 4485; email vartdal@ifrc.org

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This and other reports on Federation operations are available on the Federation's website: <http://www.ifrc.org>

Sierra Leone						ANNEX 1
APPEAL No. 01.04/2000		PLEDGES RECEIVED				01/05/01
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
CASH						
REQUESTED IN APPEAL CHF ----->				3,135,502		TOTAL COVERAGE 99.0%
Balance carried forward from 1999				322,525		
BRITISH - RC		30,000	GBP	77,700	03/24/00	PEACE BUILDING
BRITISH - RC		30,000	GBP	77,700	03/24/00	FIRST AID
BRITISH - RC		80,000	GBP	201,600	24.07.00	SLRCS COMMUNITY BASED HEALTH PROG.
BRITISH - RC		38,000	GBP	96,140	28.11.00	COMMUNITY ANIMATION & PEACE SUPPORT PROGRAMME
BRITISH - RC		120,252	GBP	304,238	28.11.00	CHILD ADVOCACY & REHABILITATION & CAPS/CARP DELEGATE
CANADIAN - RC		50,000	CAD	56,120	06.09.00	COMMUNITY ANIMATION & PEACE SUPPORT PROGRAM
CANADIAN - RC		30,000	CAD	35,736	06.11.00	COMMUNITY ANIMATION & PARTICIPATORY SUPPORT PROGRAMME
DENMARK - GOVT/RC		2,375,000	DKK	514,188	21.02.2000	
ICELAND - RC		500,000	ISK	10,948	04/03/00	
NETHERLANDS - PRIVATE/RC				4,000	15.08.00	TRAINING FOR NS ACCOUNTANTS
NORWEGIAN - GOVT/RC		566,750	NOK	107,227	03.08.00	ID & COMMUNITY HEALTH
NORWEGIAN - PRIVATE/RC		43,803	NOK	8,287	07.08.00	SCHOOL PROJECT
SWEDISH - RC		225,000	SEK	42,368	30.05.00	EMERGENCY FIRST AID
SWEDISH - GOVT/RC		800,000	SEK	150,640	30.05.00	ID/BD
SWEDISH - GOVT/RC		765,000	SEK	144,050	30.05.00	CBH PROGRAMME
SWEDISH - RC		630,000	SEK	118,251	30.05.00	
UNITED STATES GOVT. (PRM)		350,000	USD	576,625	05/01/00	
SUB/TOTAL RECEIVED IN CASH				2,848,343	CHF	90.8%
KIND AND SERVICES (INCLUDING PERSONNEL)						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
Denmark	Delegate(s)			60,123		
Norway	Delegate(s)			60,451		
Great Britain	Delegate(s)			44,846		
DANISH - RC		437,212	DKK	89,148	21.11.00	10 SLRCS HEALTH CLINICS, 1000 BLOOD TESTS, 6000 BLOOD LANCETS, 10 TORNIQUETTES, 4 BLOOD PRESSURE MACHINE, 1000 CHLORINE TABLETS, 2 INFANT DIGITAL SCALES
SUB/TOTAL RECEIVED IN KIND/SERVICES				254,568	CHF	8.1%
ADDITIONAL TO APPEAL BUDGET						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	
THE FOLLOWING PROJECTS ARE LINKED TO THIS APPEAL:						
PSL511						