

HIGHLIGHTS

- The death toll from the Bata explosions climbs to 105. At least 615 people were injured, out of which 132 remain hospitalized.
- UNOSAT satellite imagery shows the blast caused widespread damage over an 800-meter radius. Initial assessments confirm that approximately 300 houses were destroyed at the military compound alone.
- The main COVID-19 PCR testing laboratory in Bata suffered significant damage.
- Large numbers of unexploded projectiles and rockets scattered as a result of the detonation pose a risk to the populations.

SITUATION OVERVIEW

As of 9 March, 105 people have been killed and 615 others injured following a series of explosions at an armory of the Nkuantoma Gendarmerie and special forces barracks in Bata, which occurred on Sunday, 7 March. At least 482 people have been discharged from the hospital while the rest are still being treated. Some immediate consequences of the blast include significant damage to the only COVID-19 testing laboratory. Families whose houses were destroyed in the blast and those who evacuated over fears of another explosion remain without shelter. More than 60 people have been pulled out from rubble at the site of the explosion by the fire service and other agencies.

[Preliminary satellite-derived damage assessment](#) of the camp of Nkuantoma in Bata shows widespread damage. The camp is fully destroyed as well as houses and vegetation observed up to 800m from the blast epicentre. Initial figures from military sources indicate that up to 300 houses were destroyed.

Meanwhile, concerns are rising over risks posed by unexploded ordnances including explosives, rockets and other munitions still present at the now defunct Nkuantoma military barracks. Images of citizens posing on social media with these kinds of munitions have gone viral. The Vice President has called on the population to maintain vigilance and asked the military to find a way to better dispose of them.

While the extent of the damage and the number of affected households remain unknown, some urgent needs have been identified, including the deployment of emergency response experts, financial support and medical interventions including mobile hospitals, medical and WASH equipment, and medicines. Temporary shelter, food assistance and psychological support for victims are also critical.

RESPONSE

The government has mobilized health personnel, volunteers and ambulances from neighbouring cities to help care for injured people. Additionally, in collaboration with some private centers such as Spanish college, NGOs Save our Souls (SOS) and Ekuku are providing some emergency shelters.

Meanwhile, WHO has mobilized an emergency team from the regional office, is preparing to deploy two trauma kits and has allocated some US \$200,000 for immediate response to the emergency.



Map Sources: UNCS, ESRI.
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Map created in March 2021.

UNICEF and WHO have also sent a team from Malabo to Bata to support case management; epidemiological surveillance; infection prevention and control; logistical support; and vaccination. This team was slightly delayed due to logistical challenges. Regular flights between Malabo, the capital city, and Bata were halted due to COVID-19, which may impact the effectiveness of the response.

UNICEF is in discussions with the Ministry of Social Welfare, the Ministry of Interior, and the Ministry of Education regarding the need to identify unaccompanied minors who lost their parents or guardians, in coordination with local NGOs.

UNDP has received some US \$100,000 through their emergency window to respond to the Bata explosion.

The UN is coordinating the support provided by international actors, including ECHO, which is sending a donation from the Spanish Government. Spain has dispatched the first batch of humanitarian aid, which should arrive in the country on 10 March. The shipment consists of medicines and medical supplies to treat those wounded in the explosion, including trauma material, and antibiotics. WHO and UNICEF will support with the storage and immediate distribution of the medicines and equipment.

The UN Resident Coordination Office is also coordinating and securing support from the US Embassy and other partners, including private companies, like Marathon Oil and Noble Energy.

Terms of reference for the UNDAC deployment were finalized on 8 March and a team of experts will deploy in the next days. The main challenge is to ensure logistical arrangements are in place, particularly under the current COVID-19 outbreak. The UNDAC team will complement efforts by the country team, whose capacity is stretched. The Resident Coordinator is keeping Member States informed of the UN coordinated response.

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