

Sierra Leone: Landslide and Floods

Situation Update 06 - 25 August 2017



This bulletin is produced by the UNDAC team in collaboration with the UN Resident Coordinator's Office in Sierra Leone, liaising with the Office of National Security and humanitarian partners.

Situation overview

Through satellite and real time analysis it has been confirmed that landslides occurred on the morning of August 14th, with the debris from Mount Sugar Loaf resulting in 496 fatalities and roughly 800 missing persons.

There are no visible signs of hazardous waste and there is no information of potential industrial or major commercial building being impacted by the landslide. Nevertheless, more studies will be concluded in near future and the area should be avoided until further notice.



The rainy season is continuing, and the flood affected areas remain

fragile. The government counts 5.905 affected individuals and an estimated 80% of that amount relates to flood victims. A number of those in turn represent vulnerable people, especially in case of new torrential rains.

Olivia Acland, UNDP 2017

Response efforts

11 days into the response, the situation is starting to stabilize and to shift from the initial lifesaving response to early recovery phase. The Office for National Security (ONS), leading the coordination and response, together with the Ministry of Social Welfare has continued registration of affected people in certain areas. The registration pillar has defined the criteria and the existing data is being validated and digitized with help of local chiefs and other community stakeholders.

The ONS has set up a Situation Room and activated six Incident Coordination Centres (ICC) close to affected communities. Coordination channels and reporting format need to be standardized between field hubs (ICCs) and

Linnea Van Wagenen, Coordination Specialist, Office of the Resident Coordinator in Sierra Leone,
linnea.vanwagenen@one.un.org, +232 79 62 35 21

Peter-Bastian Halberg, UNDAC Sierra Leone Communication Officer,
sierraleone2017@undac.org, +232 79 733 222

the ONS Situation Room. Access to registration data needs to be more efficient and inclusive, so as to ensure that all partners can coordinate their response efforts with the ONS using consistent figures.

Attention is moving to gap analysis and response measurement and accountability, including a shared 4W overview.



UNDAC 2017

More permanent shelter solutions are planned. Based on the validated registration, voluntary relocation to Old School compound in Hill Station and Juba barracks in Lumley should start early next week. The layout of the sites has been done by the National Commission for Social Action (NaCSA) with advice from IOM and IFRC. This is however a temporary solution and cash transfers will be an additional option for affected persons without permanent shelter solutions. Standardized cash transfer approaches and packages are key to avoid discrepancies and duplication of efforts.

Assessment on the readiness of schools for the coming school year being used as temporary displacement centres is continuing.

Health remains an issue, although there are currently no reports of positive cholera cases. The Ministry of Health and Sanitation has placed two ambulances on standby and UNICEF has been requested to support the development of cholera treatment protocols. The Director of Drugs and Medical Supplies has also requested to include cholera drugs and consumables in the routine Free Health Care distribution to Peripheral Health Units in the Western Area.

Unmet leads on Protection issues for vulnerable groups, notably unaccompanied children and women without family protection (sexual exploitation prone and HIV/AIDS) are matters to focus on in the coming days.

HEALTH

UNICEF delivered emergency medical supplies to the Regent CHC to cater for the increased case load due to the emergency. The UN agency is also working on cholera preparedness. UNICEF supported the assessment of 12 Cholera Treatment Units located in Western Rural and Urban districts. One cholera kit has been prepositioned in Connaught Hospital and the second kit will be delivered for prepositioning at Regent CHC.

The Ministry of Health and Sanitation, with support from WHO, has enhanced surveillance for 5 priority conditions in high-risk affected areas (cholera, diarrhoea with severe dehydration in under five children, dysentery, typhoid and malaria). No cases of cholera have been confirmed to date but intensive surveillance will continue.

WHO has assisted the Government to develop a three-month costed cholera preparedness and response plan. Options to bring in the oral cholera vaccine to the area are also being explored which would provide additional protection for the most vulnerable people affected by the disaster. WHO supports the Directorate of Food and

Linnea Van Wagenen, Coordination Officer, Office of the Resident Coordinator in Sierra Leone,
linnea.vanwagenen@one.un.org, +232 79 62 35 21

<https://sl.one.un.org/>

Peter-Bastian Halberg, UNDAC Sierra Leone Communication Officer,
sierraleone2017@undac.org, +232 79 733 222
<http://reliefweb.int/disaster/ms-2017-000109-sle>

Nutrition to scale up surveillance and counselling sessions at temporary shelter sites. Cases of acute malnutrition are being reported with prompt referrals facilitated to Health Centres.

Emergency medical supplies have arrived in country and cholera testing kits are being deployed to health facilities/laboratories serving affected areas.

The Ministry, supported by WHO, UNICEF and other partners have conducted assessments of health-related needs at affected sites. Immediate mobilization for maternal and child health services including immunization, Vitamin A, Albendazole for under-fives; and provision of treated bed nets has been initiated at a shelter where 210 displaced children and women are temporarily accommodated.

WHO continues to provide technical guidance and support in infection prevention and control (IPC), for health facilities, communities, burial teams, the mortuary at Connaught Hospital and others involved in the response. In addition, 40 dedicated IPC personnel have now been deployed in the affected communities to address hand hygiene, safe food handling, water chlorination, and community education on safe waste disposal, and emergency sanitation equipment is also being distributed to IDP sites.

WHO, together with UNICEF and other partners, continue to support the Ministry of Health and Sanitation to develop and disseminate health education materials to help reduce disease risks. 150 community health workers deployed with peer supervisors are on the ground every day conducting house-to-house engagement on food safety and water-borne diseases in affected communities.

HO Mental Health teams are working together with the Ministry and partners to deliver quality psychological first aid to survivors. Mental health nurses are now available in Regent, Don Bosco, Pentagon, Kaningo, Connaught and Lumley Hospitals and Jah Kingdom, with plans to also bring in a dedicated child psychologist to provide specialized clinical care to children affected by the disaster

UNFPA distributed equipment and supplies to Regent Community Health Centre, to provide basic emergency obstetric care. The items distributed included medical equipment such as delivery beds, refrigerators, resuscitation tables, midwifery kits and oxygen concentrators. Reproductive health kits including Intra Uterine Contraceptive Devices and management of complications of miscarriage, were also provided.

A team of UNFPA staff including the Adolescent, Sexual Reproductive Health Specialist, National Programme Specialist, Midwifery and Reproductive Health Technical Specialist visited the following affected communities: Dwazark, Regent Motormeh, Kaningo and Pentagon / Kamayama. A total of 44 pregnant women were identified. Of these, 22 were adolescents - nine first time pregnancies and 13 who had previously given birth. Many of the women need urgent medical care.

IOM supplies vital IPC/WASH materials to the Ministry of Health and Sanitation for the burial teams.

Handicap International provides rehab and devices and trains Government and NGO partners on including marginalized people.

GOAL International provides supportive supervision for surveillance and IPC activities, training of CHWs and community engagement on diarrhoea diseases and reporting in 20 primary health care units.

International Rescue Committee support coordination, surveillance, reporting and training of health workers.

RESTRAINTS

The Spanish forensic team (in country since 20th Aug) informed that they were not able to access the fingerprints database made for the civil registration due to technical issues. The bodies found are very decomposed and the fingerprint identification is therefore very difficult.

WFP and CRS will provide training, technical support and PDAs to partners to conduct a verification of registered households to inform NACSA and MSWGCA on levels of support dependent on MSWGCA criteria for affected

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linnea.vanwagenen@one.un.org, +232 79 62 35 21

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households. The verification exercise will take place in Regent, Kamayama, Kaningo, Mortomeh, Culvert, Juba and Dwarzark on 26-27 August.

FOOD & NUTRITION

WFP has completed the food transportations and distribution to all planned 2.000 households with food and nutrition support in Culvert, Dwarzak, Kaningo & Mountain Cut, thus supporting only communities still to be served in Juba and Regent. WFP also provided fortified complementary food to children 6-59 months at a shelter in Regent (200 children) and Kaningo (157 children). Planned food support to morgue and hospital workers is still pending.

UNICEF provided nutrition training to 30 social workers to provide psychosocial support to breastfeeding mothers and screen under five children to identify the severely malnourished children in Child Friendly Spaces.

A total of 151 under-five children were screened in Regent, Kaningo and Juba. One was found to be suffering from severe acute malnutrition (SAM) with medical complications, and was referred to the inpatient facility (IPF) at Ola During Hospital. Two were suffering from moderate acute malnutrition (MAM), and their caregivers were counselled by a trained community health worker (CHWs) on appropriate infant and young child feeding (IYCF) practices.

In partnership with the Directorate for Food and Nutrition, WHO and WFP developed a comprehensive monitoring and data collection tool to collect and collate data from all the flood affected sites (number of households who received food, number of lactating mothers who received IYCF counselling, number of infants less than six months, number of children under five who were screened, number of children under five identified as severely malnourished, who received food, and number of children under five identified as moderately malnourished).

Street Child of Sierra Leone has distributed ready-to-eat parcels to 4.398 individuals.

Action Aid has provided emergency food and NFI aid to 200 households.

Christian Aid provides assorted food items to affected households.

RESTRAINTS

While WFP has almost completed the first round of two-week rations distributions, beneficiary data needs to be adjusted with the latest lists from NACSA and the outcomes of the verification exercise.

WASH

UNICEF supports the provision and daily delivery of water to the affected communities (10,000 litres in Regent at the Saio temporary displacement centre, 10,000 litres in Kaningo, 5,000 litres in Pentagon and 5,000 litres in Kamayamah).

At the Juba Bridge community, UNICEF, through its implementing partner WHI, completed construction of four concrete basements for water tanks in the community and installation of one 10,000-liter bladder.

Rain water harvesting systems (RWHSs) in both Saio, Kaningo and Pentagon are fully functional. In total the RWHSs in the three centres have been able to harvest 25,000 litres.

In Pentagon, implementing partner SLSAV installed five handwashing stations and conducted hygiene promotion at the community level, covering 1,155 people (239 males, 233 females, 608 children, 34 pregnant women and 41 lactating women). Distribution of hygiene kits by LWI was also conducted in Regent and Kaningo.

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UNICEF, through its implementing partner ADP-SL, supports the provision of WASH services at the four hospitals. At the Lumley and Connaught hospitals, concrete basements for the permanent handwashing stations were completed. At Princess Christian Maternity Hospital, 18 handwashing stations were installed, cleaning of the wards was completed, as well as disinfection of drainages and mortuary. Support to WASH infection prevention and control continued in all the four hospitals in Freetown. Water, soap and disinfectants were provided in all critical areas in these hospitals. Health education focusing on diarrhoea prevention was carried out in and around the hospitals. A total of 215 children, 579 women and 422 men participated in the trainings

UNICEF supports sanitation facilities at the six existing holding centres. UNICEF also de-sludged five mobile latrines deployed to the three new holding centres in Regent.

Promotion of handwashing continued in all the main areas. Handwashing stations, water and soap are provided. Hygiene education was provided to communities residing in all the holding areas. Implementation of WASH activities for other directly affected but not displaced communities continued in all the three community sites. A total of 2,000 aquatabs and 4,200 aquatabs were distributed in Kaningo and Pentagon/Kamayama respectively. Accompanying hygiene education on a safe water chain was provided during all the distributions



A drone used to take aerial photos of the affected area
Olivia Acland, UNDP 2017

Action Against Hunger distributed 200 hygiene kits in Culvert community. The organization also installed 5 water tanks (5,000 litres each) and 3 water bladders (5000 litres each) for water trucking in the same community. In addition, it promotes hygiene to create awareness for acute waterborne diseases (use of aqua tabs aided by IEC material). Eight water points has been assessed in the community that were affected by floods, assessment information compiled and shared with WASH pillar.

Médecins sans Frontières (MSF) has provided clean water for 4,000 people in Kamayama, Pentagon and Jah Kingdom (Kaningo).

Street Child of Sierra Leone has provided potable water to 4,398 individuals and distributed soap and towels to affected households.

Care International targets 250 households with WASH activities.

Christian Aid has provided sanitary kits to 400 affected females, training on hygiene, water containers to 150 households and distributed 1,000 water purification kits.

GOAL International provides rehabilitation and repairs in 8 primary health care units.

Safe the Children distributes WASH kits and does clean water distribution and trucking.

RESTRAINTS

Water and sanitation actions have been in the forefront of the response. However, the mapping of response lacks baseline data and gaps identification. This should be in part answered by the 4W mapping initiated by UNDAC.

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SHELTER

The following potential relocation sites are estimated to hold the following numbers:

- Old School: about 60-80 households;
- Juba Barracks: 50-60 households;

The voluntary relocation option may be paired with a cash transfer alternative. The planning is still ongoing.

IOM is deploying a site planning expert to assist with the layout of the relocation sites. Tents may be used as well as more resistant corrugated iron and wood frames.

On behalf of UNOPS, WFP will distribute solar lamps to Regent, Kaningo and Kamayama.

WFP continues to provide ONS with logistical support to facilitate the flow of relief items and personnel to distribution sites.



Juba Barracks open ground, UNDAC 2017

Action Aid provides emergency cash to 100 women. Care International has an unconditional cash programme.

RESTRAINTS

The ONS will start up a process to validate the registry of affected persons entitled to assistance. Based on the revised numbers the shelter options can be better assessed and planned.

PSYCHOSOCIAL/ PROTECTION/EDUCATION

Protection Desks will be established in each of the affected areas which would be managed by a joint team made up of the Ministry of Social Welfare, Gender and Children's Affairs (MSWGCA) and Police/Family Support Unit – and strong links with the MoHS mental health nurses. NGOs would be asked to support these protection desks, by helping to staff them or provide assisting personal – as well as material support. The MSWGCA is taking the lead on these with UNICEF.

UNICEF and Save the Children provided training for 28 Child Friendly Space (CFS) facilitators on running CFS, including creating a safe environment and engaging with children, as well as a basic nutrition orientation for children in emergencies. 460 children attended Child Friendly Spaces in Kaningo, Kamayamah, Pentagon and Regent and 99 children received Psychological First Aid in Kaningo, Kamayamah, Pentagon and Regent. UNICEF supports the Protection pillar and partners with the coordination of the response. As part of this collaboration, UNICEF is helping to support affected children, including through the provision of psychosocial support and identification of child protection concerns.

The MSWGCA and the Family Support Unit of the Sierra Leone Police have agreed to establish Protection Desks in all six affected locations with the support of UNICEF and UNFPA.

WHO Psychosocial support has been provided to a total of 397 affected persons this week, with mental health nurses stationed in all affected areas.

ONS has listed 209 referrals to Don Bosco and Rany Season. ONS states that 678 individuals have received psychosocial support. The numbers are equally distributed amongst gender and age. With vulnerable groups being at the low end.

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Handicap International supports 150 children with back-to-school fees and school kits.

Christian Aid has provided emergency clothing and blankets and NFI kits.

GOAL International provides support to the Protection Pillar including monitoring, provision to staff, and psychosocial training.

Save the Children provides staff training in child friendly spaces and support inter agency PSS teams.

Trocaire supports community psychosocial activities and information kiosks at ICCs.

Education

The Ministry of Education, Science and Technology completed an assessment of 120 schools in the affected areas using EduTrac to assess damage to the schools and determine enrolment data for children. Findings will be released on 25 August.

UNICEF has released a total of 12 ECD kits for use in the Child Friendly Spaces and provided a crash training to staff on their use.

Safe the Children is preparing school kits, learning material, furniture and emergency plans for schools.

RESTRAINTS

Vulnerable groups need more focus. Information outreach is planned by the UN and partners to target these audiences.

COMMUNICATION & SOCIAL MOBILIZATION

The Communication pillar headed by the Minister of Communication and includes representatives from the UN Country Team that also meet within the UNCT sphere. Currently messaging in Cash transfer and sectorial messages are being elaborated on. The UNCT conducted a workshop on dissemination and crisis coms messaging.

A human-interest story/video was developed about a gardener who survived the floods, but tragically lost his daughter, two grand-children, son-in-law, cousin and his home. <http://bit.ly/2ipdFmW>

UNICEF has been carrying out a mass mobilization campaign through radio (over 3,500 minutes - Public Service Announcements and call-in discussion programmes) and television (over 600 minutes - call-in discussion programmes) with messages particularly on cholera prevention. UNICEF visited 2,687 households, including 1,702 males and 1,145 mothers of children under five. 248 community dialogues were held and 303 stakeholders were also engaged on issues surrounding cholera and malaria prevention.

Care International has supported ONS with a vehicle with a public-address system.

UNICEF Community Health Workers are continuing to work in and around the displacement sites and affected communities to educate families and caregivers on key behaviours, especially on how to avoid cholera and malaria.

WHO deployed 150 community health workers to conduct house-to-house engagement on hygiene, sanitation and disease prevention in affected communities.

CAFOD disseminate hygiene messaging using youth with loud speakers and community radio.

RESTRAINTS

Two- way communication with affected people and communities needs to be systematic. Coherency in messaging is also at times a challenge.

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Bilateral and Private Sector Support

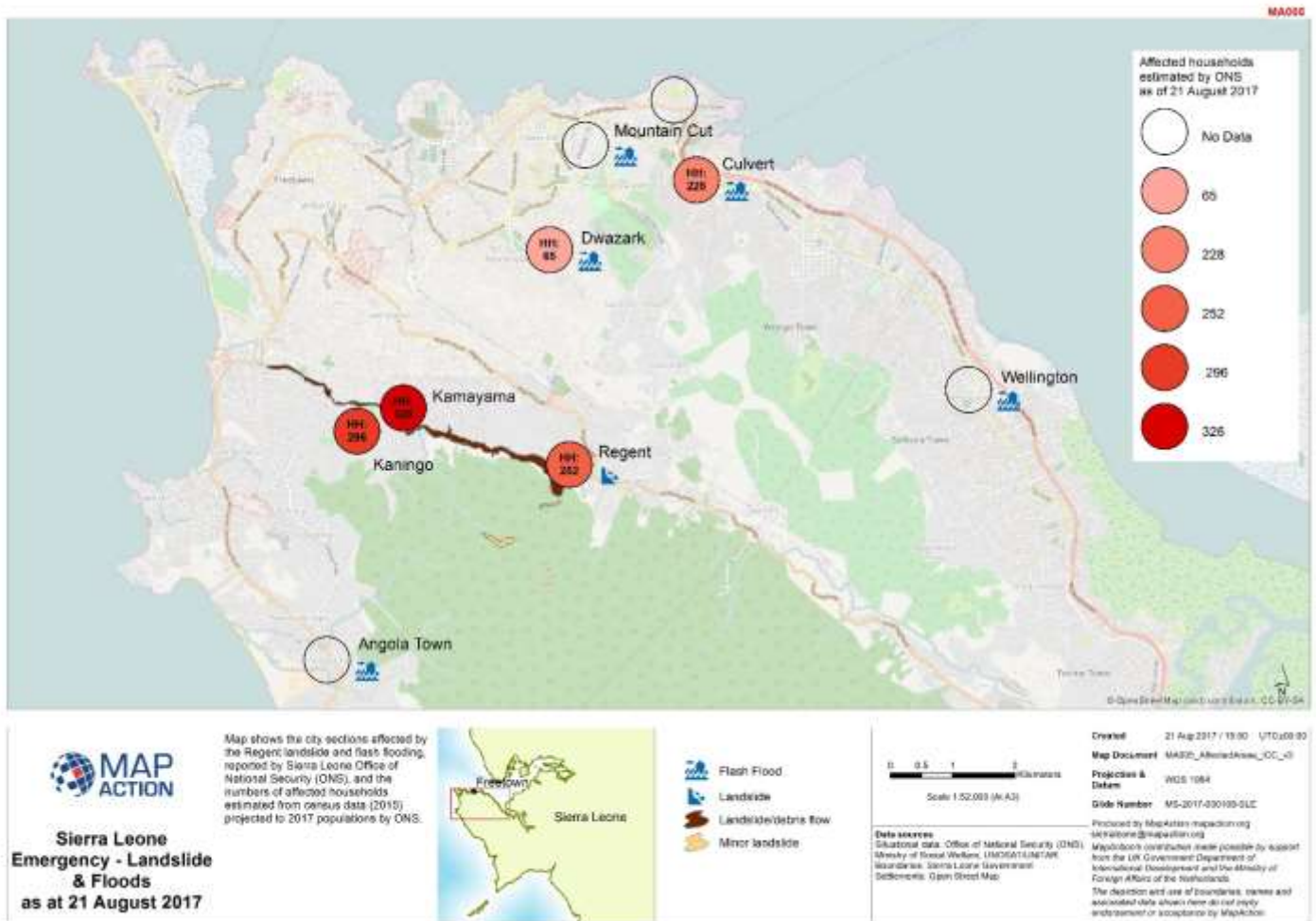
- ECOWAS (including WAHO): 300,000 USD.
- Ghana team including Vice-President and NADMO national coordinator have brought 10MT of relief items
- Togo. 500,000 USD.
- China: US\$1million to the Government of Sierra Leone through its embassy in Freetown.
- Spain 60,000 EUR and deployed a technical team to help with body identification
- UK: 5 million USD
- EU: 300,000 EUR for vulnerable families affected by disaster (through local and international partners)
- Ireland: 400,000 EUR for START fund (International NGOs)
- Mercury International: 55,000 USD
- United Bank of Africa CEO donated 500,00 USD to Sierra Leone
- Africell: 67,000 USD.
- Red Cross appeal 4.8m USD asked.
- Israel announced it will send medicine, clean water, and blankets via the embassy in Senegal.
- Guinea and Nigeria also pledged support.
- Morocco has send 66MT (tents, blankets, cholera kits). Transport by Royal Armed Forces.
- Switzerland has pledged 400 000 CHF to IFCR Appeal (WASH, primary health).
- Qatar is sending cargo.
- Germany supported the victims of the landslide with ca. 90.000 € through Deutsche Welthungerhilfe Freetown (Purchase and Distribution of Mattresses and Blankets, Foodpackages).
- The Netherlands has donated in total EUR 580,000 to the International Red Cross Society for their relief efforts in Sierra Leone.
- Côte d'Ivoire is sending 1.5 tons of medical supplies.
- Senegal donated USD\$100,000 to the relief efforts.
- Turkish Red Crescent deployed to delegates to Freetown, Sierra Leone via an air freighter containing; 2.5 tons of wheat flour, 2.5 tons of pasta, 2.5 tons of rice, 100 tents, 100 kitchen kits, 12,300 razor blades and 1 ton of liquid soap. The relief materials were received by the Sierra Leone Red Cross along with a 15,000.00 USD cash in additional support.
- UK has dispatched a team from the British Geological Survey (BGS) and ARUP that is assessing the risk of further landslides in the already-affected zone.
- Liberia has forwarded 20 vehicles, medical and food supplies.
- Spanish Police Forensic team will be helping on identification of victims is terminated.
- Canadian Humanitarian Assistance Fund has funded Care Canada with \$275,000.
- South Africa has donated US\$615,000 to WFP Sierra Leone.
- Nigeria has donated 315 tonnes of assorted relief materials and one million dollars to Sierra Leone
- IOM has deployed a strong team of experienced emergency managers and subject-matter experts from its Regional Headquarters to provide crucial and necessary technical support to the GoSL in the area of:
 - Data/information system management, Displacement Tracking and registration
 - Camp Coordination and Camp Management
 - Shelter and rehabilitation

NEXT SITUATION REPORT ON 29 AUGUST. DEADLINE FOR INPUTS 28 AUG 14:00

Linnea Van Wagenen, Coordination Officer, Office of the Resident Coordinator in Sierra Leone,
linnea.vanwagenen@one.un.org, +232 79 62 35 21

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