

# UNICEF HUMANITARIAN ACTION

# SIERRA LEONE

## DONOR UPDATE 13 December 2004

**53% OF CAP APPEAL NEEDS REMAIN UNMET TO DATE**

### FUNDS URGENTLY NEEDED TO:

- **Provide Access to Basic Education for 375,000 Children (6-10 years) who have never been to school.**
- **Reduce U5 deaths due to malaria by providing insecticide-treated bed nets and anti-malarial drugs for 300,000 people.**

## 1. EMERGENCY OVERVIEW AND RECENT DEVELOPMENTS

### Sierra Leone ranks least developed

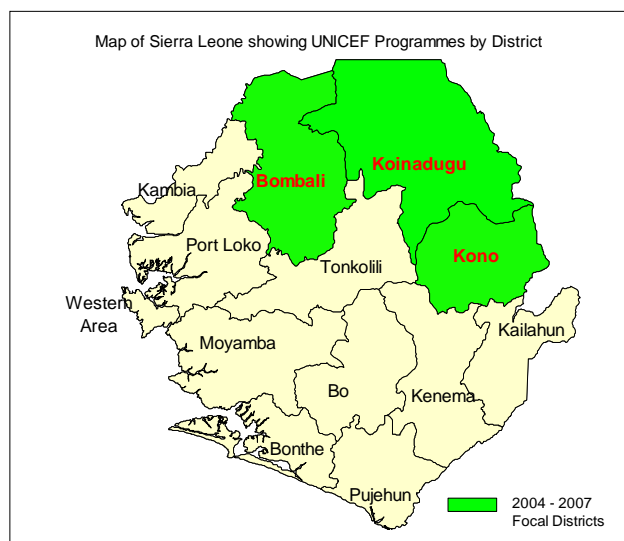
The humanitarian situation of children remains the worst in the world. According to the UN Human Development Report 2004, Sierra Leone is ranked as the least developed among 177 countries. The report outlined the following key indicators for Sierra Leone: average life expectancy of 34 years, maternal mortality of 180/100,000 and child mortality of 386/100,000 (the highest in the world). As such children and women continue to live under very difficult circumstances which deny them their basic rights to survival, protection and development.

### Security situation

However, on the positive side, Sierra Leone's internal security remains calm. The United Nations Peacekeeping Mission (UNAMSIL) is gradually withdrawing its troops, with more than 75% of the country including the capital Freetown now in the hands of the local security forces. A final phase out has been scheduled for June 2005. Meanwhile, the Special Court on war crimes in Sierra Leone resumed trials of in September in the midst of an acute shortfall in funding. Measures are being put in place to shorten the Court's expected mandate and speed up the trials. Also, the Truth and Reconciliation Report and child friendly version which provide a historical record of causes and atrocities of the decade long conflict with key recommendations been launched both globally and nationally.

### Repatriation of refugees completed

UNHCR has completed a three-year repatriation operation which helped 178,000 Sierra Leonean refugees return home. The last two batches of refugees totalling 615 were repatriated by road from neighbouring Guinea and Liberia in September. The UNHCR's repatriation programme started in January 2001. A further 92,000 had returned on their own and close to 15,000 had opted to stay and integrate into host countries within the sub region.



## 2. KEY ACTIVITIES, ACHIEVEMENTS AND CONSTRAINTS

### Education

- As part of the Government's efforts to meet the Millennium Development Goals, the Ministry of Education Science and Technology (MEST) in partnership with Global Movement for Children -Sierra Leone Chapter (GMC-SL), UNICEF and communities are collaborating to ensure that at least 375,000 school-age, out-of-school children (most of whom are girls) have access to basic education within the next four years. The initiative known as Community Movement for Education (CoME) targets to establish 1,300 community schools, train 2,750 teachers and provide teaching and learning materials during the four year period. The promotion of community participation and the training of the School Management Committees will provide opportunity to promote girls enrolment in rural communities. The schools are being established as formal schools to cover the early years of schooling. Children from these schools would eventually mainstream into bigger primary schools within three miles radius of their communities as they grow older and can walk longer distances.
- Ministry of Education, Science and Technology (MEST) with support from UNICEF has developed and produced the learning competencies in the Core subjects for Primary school namely English Language, Mathematics, Science and Social Studies. Defining nationally acceptable learning competency level for primary education is the first step being taken towards monitoring learning achievement in Sierra Leone.

### Child Protection

- The Ministry of Health and Sanitation (MoHs) in collaboration with UNICEF and Plan Sierra Leone has embarked on a nationwide birth registration campaign within the last quarter of 2004. The campaign includes waiver of fees for delayed birth registration which has been a major contributing factor to the low birth registration levels (42%) nationwide. The pilot phase supported by UNICEF was launched in the Bombali District in October. Thousands of birth certificates and vital registration forms were provided for this exercise. Also 10 District Health Management Teams (DHMTs) workers, 66 Birth Registrars drawn from amongst health workers in 33 Primary Health Units and 66 notifiers including court/treasury clerks in all chiefdoms in the district were trained. By mid November over 25,000 children 0-18 years were registered in Bombali District alone. Similar training will be held for the remaining 39 PHUs by end November.

It is anticipated that the campaign will be extended to the other districts in 2005.

- UNICEF has provided technical assistance to the Ministry of Social Welfare, Gender and Children's Affairs to support the Government in drafting a 'Child Rights Bill'. The process which focused on a rights-based approach involved consultations with technical steering groups comprising stakeholders, communities, members of the judiciary, social workers, NGOs, members of civil society, human right activists and parliamentarians. A final draft has been submitted to the Government with a schedule for the passage of the Bill by 2005. UNICEF is also supporting the development of a children's policy which will serve to complement the passage of the Bill.

### Health and Nutrition

- The cumulative coverage (January – Sept 2004) for the fully immunised child is 46%. The coverage for antigens is BCG, 86%, Measles, 67%, Yellow Fever vaccine, 62%, DPT3/OPV3, 621% and TT2-pregnant, 63%.
- The cold chain system, in each of 13 district cold rooms, is now solar powered with a standby generator thus making it more reliable, cheaper and sustainable. Solar powered refrigerator/freezers have also been installed in 210 Primary Health Units (PHUs) in Bombali, Kambia, Koinadugu, Bonthe, Kenema, Kailahun and Kono Districts. The quality of the vaccines and access to immunisation services have improved.
- Essential drugs for case management of common communicable disease and medical supplies to cover the second and third quarters of the year were distributed to 87 PHUs in Bombali, Kono and Koinadugu districts to serve an estimated population of 870,000
- Community-based organisations (consisting of Islamic, Christian and traditional advocacy and action groups) in 63 communities in the three focal districts were provided with information on how to monitor the delivery and promote the utilisation of child survival interventions, including oral rehydration therapy, exclusive breastfeeding,

growth monitoring, immunisation, vitamin A supplementation, iron folate supplementation, insecticide treated nets and intermittent preventive treatment for pregnant women.

- The first round of NIDs was held from 8-10 October in all 13 districts in the country with 99% coverage of the targeted 992,092 children under five years. The second round is scheduled for 19-21<sup>st</sup> November.

### **Water and Environmental Sanitation**

- UNICEF, in collaboration with the Ministries of Health and Sanitation as well as Energy and Power has facilitated a data collection exercise in 4 additional districts. The exercise was completed in November in Bombali, Kenema, Tonkolili and Koinadugu districts. The data is currently being analysed and a final report is expected by early December. It would be recalled that UNICEF supported a similar exercise in Kambia, Kono and Kailahun Districts in 2003. It is expected that the information obtained will provide for better planning and programme intervention within the WES sector. Plans are underway for similar exercises to be conducted in Bo, Moyamba, Port-Loko, Pujehun, Bonthe and the Freetown Peninsula in 2005.
- As part of the hygiene promotion project UNICEF has supported (CADO) Community Animation Development Organisation in the introduction of School Sanitation and Hygiene Education (SSHE) in 90 schools in the focal districts of Kono, Bombali and Koinadugu. The schools were selected based on base line surveys conducted in all 90 schools.
- Financial Assistance has been provided by UNICEF for the construction of 25 new wells; 20 for Tobanda refugee camp and 5 for the host communities of the camp. All 25 wells are now complete and operational benefiting an estimated 12,200 people in both the camp and surrounding communities. The activity was implemented by United Methodist Committee on Relief.
- The Water Supply Division of the Ministry of Energy and Power with support from UNICEF has trained and equipped 76 chiefdom level hand pump mechanics (28 in Kono, 26 in Bombali and 22 in Koinadugu) during the months of September and October. These mechanics will be responsible for maintenance of the pumps within the various communities.
- UNICEF has supported the Ministry of Health and Sanitation (MoHS) and the Water Supply Division with financial assistance as well as the provision of chlorine to address the incidence of cholera. An estimated 3,800 traditional water wells have been chlorinated nation wide during the months of July through to October 2004. This resulted to reduce prevalence of cholera cases in the rural areas. The capital Freetown was the hardest hit, where about 800 cases with 60 deaths were recorded as a result of the cholera outbreaks during August and September 2004. This is the first reported outbreak since 2001.

### **HIV and AIDS**

- More than 50% of the population is under age 25. With knowledge about HIV/AIDS, protection measures and social practices within this age bracket below 7%, UNICEF continues to make young people the target of its interventions. Religious leaders are credible sources of information for about 95% of young people in Sierra Leone, with sermons being the most popular medium of communication on HIV and AIDS. They have critical influence on their behaviour and beliefs. In particular the religious leaders are influential in reducing stigma and providing care. Many opportunities exist for the leaders to interact with young people in religious houses, schools, meetings and festivals. Therefore the participation of religious leaders to reach young people with information on HIV and AIDS is a key strategy in HIV prevention. Leaders of key religious denominations including the Catholics, Methodists, Wesleyans and Muslims have been mobilised to participate in the prevention activities. The Inter-Religious Council, the umbrella organisation for all faith communities in the country, has now taken the lead in mobilising the faith communities and advocating to all sectors of the population to be involved in HIV and AIDS prevention. To enhance the capacities of the faith leaders to effectively participate in the programme, UNICEF has supported the orientation of 176 regional, district and chiefdom Imams and 25 priests of the United Methodist Church nationwide, on HIV and AIDS and urged them to integrate messages on HIV and AIDS in their routine religious activities. These activities are being monitored using a well structured checklist.

### 3. APPEAL REQUIREMENTS AND RECEIPTS FOR UNICEF HUMANITARIAN ACTION IN 2004

Within the framework of the 2004 Consolidated Appeal (CAP) for humanitarian assistance in Sierra Leone, UNICEF requested US\$ 11,897,000 in November 2003. Until the end of November 2004, only 47% (or about US\$ 5.6 million) of the required support for 2004 has been received. As we approach the end of the year, additional support is urgently needed in all sectors to re-establish basic services in the most vulnerable areas, especially for the provision of access to quality basic education and support to child survival.

The table below shows the contributions received by programme sector:

<b>Sector</b>	<b>Target (US\$)</b>	<b>Funded (US\$)</b>	<b>Not Funded</b>
Child Protection & Child Rights	1,720,000	1,112,457	607,543
Primary and Emergency Education	2,270,000	1,720,325	549,675
Health & Nutrition services	4,820,000	2,078,815	2,741,185
HIV/AIDS	590,000	199,906	390,094
Water & Environmental Sanitation	2,497,000	519,358	1,977,642
<b>Total</b>	<b>11,897,000</b>	<b>5,630,861</b>	<b>6,266,139</b>

The table below details the contributions by donor:

<b>Donor</b>	<b>Health</b>	<b>HIV</b>	<b>Education</b>	<b>Child Protection</b>	<b>WATSAN</b>	<b>TOTAL</b>
Canada			254,500	348,817		603,317
Ireland			593,825			593,825
Sweden			448,110		495,280	943,390
United Kingdom	1,679,003					1,679,003
*New Zealand			24,078		24,078	48,156
<b>NATCOMs</b>						
German				763,640		763,640
<b>Others</b>						
T Kuroyanagi	399,812	199,906	399,812			999,530
<b>TOTAL</b>	<b>2,078,815</b>	<b>199,906</b>	<b>1,720,325</b>	<b>1,112,457</b>	<b>519,358</b>	<b>5,630,861</b>

\* Please note that these funds served as sector contributions to cross sectoral

In addition, UNICEF is grateful to the contributions from the National Committees of France (US\$ 608,234), Belgium (us\$ 60,901) and Italy (US\$ 446,962), which have also contributed to our humanitarian activities in the country.

### 4. IMPACT OF UNDER-FUNDING AND CURRENT PRIORITIES

The issue of child survival has become most critical in the transition through recovery to development. UNICEF in support of the Government has continued to make stringent efforts to work out strategies to take on the arduous challenge of addressing child survival through the provision of solar refrigerators to maintain the cold chain as well as the provision of bed nets to reduce the incidence of malaria especially among infants under one year and pregnant women. Malaria continues to account for 33% of infant mortality in Sierra Leone. UNICEF in collaboration with the malaria Control Programme has launched in June a massive malaria control campaign in initially two out of the three focal districts. 15,000 bed nets were distributed in Koinadugu and 10,400 in Bombali. Total number of beneficiaries is approximately 76,200 families including pregnant women and children less than one year of age. Implementation of the first phase of the back-to-school campaign which targets an initial 100,000 of the estimated 375,000 children currently out of school has commenced. 40 of the targeted 1,300 school structures are expected to be completed by end December 2004. It is therefore crucial that funds are available now to address these immediate needs if Sierra Leone in order to meaningfully address the recovery plans for children.

The table below presents the most urgent priorities.

<b>Table 2: PRIORITY REQUIREMENTS THROUGH DECEMBER 2004</b>		
<b>Project</b>	<b>Beneficiaries/coverage</b>	<b>Amount Required (US\$)</b>
1. Access to Quality Primary education.	25 schools (primary-formal); 65,000 over-aged children in 7 districts; 674 untrained teachers nationwide; 180 community/ satellite schools in four districts; 500 community leaders in four districts.	725,468
2. Malaria Prevention and Response	70,000 pregnant women and 230,000 children under the age of 5 in the districts of Bombali, Koinadugu and Kono.	800,000
<b>Total</b>		<b>1,525,468</b>

Further details of the Sierra Leone Emergency Programme can be obtained from:

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