



**U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT  
BUREAU FOR DEMOCRACY, CONFLICT, AND HUMANITARIAN ASSISTANCE (DCHA)  
OFFICE OF U.S. FOREIGN DISASTER ASSISTANCE (OFDA)**

***LIBERIA – Complex Emergency***

Situation Report #3, Fiscal Year (FY) 2003

July 25, 2003

*Note: the last Liberia Situation Report was dated July 17, 2003.*

**BACKGROUND**

Liberia has been marked by intermittent civil war since Charles Taylor launched a rebellion against the military regime of Samuel Doe in 1989. More than 200,000 people were killed during the ongoing conflict in Liberia in the 1990s. In 1997, Taylor emerged the dominant power, winning the 1997 presidential election. Two opposition groups, controlling between 60 and 80 percent of the country, are currently attempting to oust Taylor from power. The main opposition group, Liberians United for Reconciliation and Democracy (LURD), has been fighting President Taylor since 1999 and has grown from a northern-based insurgent movement to a force that now controls the majority of the country. The second opposition group, the Movement for Democracy in Liberia (MODEL), based in southern Liberia, began incursions into Liberia from Côte d’Ivoire in April 2003 resulting in large-scale population displacement. Years of conflict have had devastating consequences for the humanitarian situation in Liberia, which is currently ranked 174 out of 175 countries by the United Nations (U.N.) World Human Development Index, which measures health and living conditions.

NUMBERS AT A GLANCE		SOURCE
Internally Displaced	<b>Total : 500,000-600,000 in Liberia</b> 150,000 – IDP camps and irregular settlements in Monrovia 200,000-300,000 – Unidentified locations in Monrovia 160,000 – Outside of Monrovia	UN OCHA and NGOs, July 2003 UN OCHA and NGOs, July 2003 European Commission, July 2003
Refugees	123,000 Liberians in Guinea 53,000 Liberians in Sierra Leone 50,000 Liberians in Côte d’Ivoire 14,000 Sierra Leoneans in Liberia 20,000 Ivoirians	UNHCR, June 2003 UNHCR, June 2003 UNHCR, June 2003 UNHCR, July 2003

**Total FY 2003 USAID/OFDA Assistance to Liberia ..... \$1,268,784**  
**Total FY 2003 USG Humanitarian Assistance to Liberia..... \$8,268,784**

**CURRENT SITUATION**

**(Updated Weekly)**

*Political*

Cease-fire negotiations aimed at ending the ongoing conflict resumed in Accra, Ghana on July 4. On July 19, following the complete breakdown of a June 17 cease-fire agreement, LURD launched their third major offensive since June to gain control of strategic areas of Monrovia. Since then, fighting between Government of Liberia (GOL) and LURD forces has become more intense and severe, as LURD forces advance into the center of Monrovia. Estimates of the number killed since July 19 range from 200 to 700 people. Negotiations are ongoing in Accra, though LURD and MODEL stated on July 22 that they would refuse to sign a draft peace agreement unless changes were made that would allow them to play a more significant role in the proposed transitional government.

On July 24, officials from the United States, United Nations, Economic Community of West African States (ECOWAS), and Nigeria met to consider the deployment of approximately 1,300 Nigerian peacekeepers as part of a multinational peace-keeping force. ECOWAS indicated its willingness to deploy the troops provided an effective ceasefire, but has not yet specified a date. President Taylor has continued to assert that he will relinquish power only after the establishment of a peace-keeping force.

*Security*

In conjunction with the U.S. Department of Defense Humanitarian Assistance Surveillance Team (DOD/HAST), the USAID Office of U.S. Foreign Disaster Assistance (USAID/OFDA) Emergency Disaster Relief Coordinator (EDRC) for the Mano River countries conducted a field assessment in Liberia from July 7 to 18

to evaluate the extent of the current humanitarian crisis. The USAID/OFDA field assessment observed that 1) unstable security conditions have led to the evacuation of significant numbers of humanitarian relief workers, and 2) the security situation has created an immense gap between the needs of affected populations and the capacity of the humanitarian community to respond.

Due to the high level of insecurity in Monrovia, many non-governmental organizations (NGOs) have suspended relief operations. Constant shelling and gunfire, combined with the threat of looting or violent assault, have severely hindered operations and deliveries. NGOs continuing to operate in Monrovia, including Oxfam, Concern, and the International Rescue Committee (IRC), have reported several instances of looting by LURD forces and government-sponsored militia. Medical Emergency Relief International (Merlin) reported that two staff were wounded by stray bullets on July 22 and 23.

#### *Displaced Populations*

Combined estimates from the United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) and NGOs in Liberia indicate that approximately 600,000 Liberians are currently displaced as a result of the ongoing civil war. Since June 6, nearly 150,000 internally displaced persons (IDPs) have fled into Monrovia as fighting affected IDP camps and suburbs surrounding the capital. UN OCHA estimates that more than half of the estimated one million people in Monrovia are considered vulnerable. According to UN OCHA, as of July 20, there were approximately 10,000 IDPs at the U.S. diplomatic residential compound at Graystone.

The USAID/OFDA field assessment reports that in addition to the 150,000 IDPs identified in makeshift settlements, NGOs estimate that the “invisible IDP” population, or those settling with friends, family, or in unidentified locations, ranges from 200,000 to 300,000 in Monrovia.

In the few accessible areas remaining outside of Monrovia, an additional 160,000 IDPs have been identified in camps in Montserrado, Margibi, Bong, and Grand Bassa counties, according to the USAID/OFDA field assessment. Due to insecurity, humanitarian relief organizations have not been able to confirm the number of IDPs outside of the limited accessible areas, nor the condition of the general population in nearly 80 percent of Liberia.

During the USAID/OFDA field assessment, the USAID/OFDA EDRC visited several locations for IDPs in Monrovia, including the Redemption Hospital, D.Tueh High School, the Voice of America camp, and Samuel K. Doe (SKD) Stadium. With more than 32,000 people, the

SKD Stadium has the largest concentration of IDPs in Monrovia. Schools, churches, public facilities, abandoned buildings, and other public spaces have been converted into makeshift IDP settlements. The field assessment observed that the IDP sites visited lacked minimum basic services including medical care, safe water, food, sanitation, and appropriate shelter.

#### *Refugees*

On July 4, the U.N. High Commissioner for Refugees (UNHCR) began an evacuation of Sierra Leonean refugees by ship from Monrovia to Freetown, Sierra Leone. The Motor Vessel (MV) Overbeck made the return trip approximately every four days, carrying between 300 and 350 refugees per voyage.

On July 20, UNHCR suspended MV Overbeck’s fifth evacuation operation due to the continued fighting in Monrovia. On July 21, the MV Overbeck returned to Freetown without refugees onboard because it was unable to dock safely. From July 4 until the suspension of operations, UNHCR evacuated more than 1,250 Sierra Leonean refugees.

The U.N. World Food Program (WFP) and UNHCR predict that there will be an influx of approximately 20,000 Liberian refugees into Guinea and 30,000 into Sierra Leone by the end of the year. Additional Liberian refugees are also expected to cross into Côte d’Ivoire.

#### *Water and Sanitation*

On July 21, mortar fire damaged the White Plains water pumping center, which is the primary supply of clean water for Monrovia, including IDP camps. The damage to the facility has greatly increased concerns that cholera and other water-borne illnesses are likely to spread rapidly. Oxfam and Merlin report that the majority of IDPs are using water from potentially contaminated sources such as rivers and dilapidated wells.

International media reports indicate that more than 3,000 private wells are in Monrovia, though some are in territory now controlled by LURD. The European Commission (EC) has provided chlorination supplies for approximately 1,500 of the wells. According to the EC, the clean water supply in the city is scarce, with reports of residents begging for water.

Several organizations, including Merlin, the International Committee of the Red Cross (ICRC), and the EC, have trucked water on an intermittent basis to campsites around the capital, depending on the security situation. Merlin reported on July 22 that some water trucks had been taken off the roads due to concerns that they would be looted or damaged by falling shells.

The USAID/OFDA field assessment reports that the main challenges in providing potable water on a large scale include 1) difficulties in procuring adequately sized water storage tanks on the local market; 2) availability of fuel for trucks; and 3) the unpredictable security situation.

#### *Health*

UN OCHA reported on July 22 that the poor health and sanitation conditions in Monrovia have led to outbreaks of cholera, measles, and malaria. As of July 21, UN OCHA reports that the current rate of cholera is 350 cases per week compared to approximately 30 cases per week at the same period last year. The capacity of operational hospitals in Monrovia, especially the main hospital in Monrovia, the John F. Kennedy (JFK) Memorial Hospital, is overwhelmed with hundreds of war wounded and severe medical cases. On July 23, Médecins Sans Frontières (MSF)-France and MSF-Belgium reported lower cholera admissions at their treatment units at SKD Stadium and JFK Memorial Hospital than during previous weeks, but speculate that this is a result of limited access due to insecurity.

Nearly all medical facilities report operational difficulties due to the precarious security situation. ICRC reported on July 23 that extensive looting engulfed the neighborhood in which JFK Hospital operates, and the route from the ICRC compound to the JFK Hospital remains unsafe. JFK Hospital reported on July 21 that it admitted at least 150 new patients over a 24-hour period, bringing the total number of patients to more than 300. Six ICRC medical staff members and approximately 120 Liberian employees are currently working in the hospital.

MSF reports that fighting in the proximity of the hospitals has comprised its ability to treat patients and could prevent the transport of war-wounded civilians to hospitals. On July 18, fighting forced MSF to suspend work in three medical clinics in Montserrado County. MSF reported on July 20 that two of its makeshift hospitals in Monrovia are treating more than 80 civilians wounded in the fighting.

According to the USAID/OFDA field assessment, lack of human resource capacity and coordination among health actors has made consolidation of available health and nutrition data a challenge. As a result, there are no morbidity or mortality statistics that provide an accurate assessment of the overall health situation in Monrovia or other accessible areas. At the same time, however, data from existing clinics and NGOs active in the health sector demonstrate a marked increase in weekly consultations since fighting broke out in early June. For example, MSF-Belgium reports that in its five Monrovia clinics, consultations more than doubled since the recent fighting began.

#### *Food*

UN OCHA reported on July 21 that food stocks are rapidly depleting due to the large number of new IDPs at camps. Because they cannot travel into the villages to look for food sources, many IDPs have had to beg and/or sell their possessions to purchase food. The closure of stores and market areas due to the war has also exacerbated the situation. According to international media reports, rice is in short supply, and prices have sharply increased. On July 23, news reports indicated that a 50 kg bag of rice cost \$50 compared to \$20 the week prior. There are reports of increasing malnutrition among children under the age of five in both in the camps and host communities.

WFP reported on July 22 that WFP's national staff resumed distributions on July 2. From then until operations were suspended again on July 18, WFP distributed 722 metric tons (MT) of WFP food aid to more than 100,000 IDPs at various centers throughout Monrovia. This total includes aid distributed by the ICRC, which provided WFP food and other essential items to nearly 47,000 IDPs in Monrovia. Given the short window of opportunity and the prevailing level of insecurity, WFP was not able to reach all of its intended beneficiaries, particularly those in IDP camps in Monrovia's northern suburbs.

WFP reported on July 21 that it currently has sufficient food stocks in Monrovia to feed 250,000 people for three months. More food stocks are available in Freetown and Adidjan, Cote D'Ivoire that could be shipped in quickly.

In order to continue to provide food assistance in the current environment, WFP is sending a supply ship to function as a mobile office off the coast of Monrovia. The ship will be shared with staff of the United Nations Children's Fund (UNICEF), UN OCHA, and UNHCR.

According to the USAID/OFDA field assessment, insecurity remains a crucial barrier to conducting food distributions in the Montserrado camps. The WFP Liberia office reported on July 15 that distributing food is highly risky due to the presence of armed men. WFP suspended food distributions in the Montserrado camps during early April after a pattern of LURD and militia attacks immediately after food distributions. WFP continues to negotiate with the GOL to protect the area, but security has not improved. Oxfam has reported difficulties accessing the Montserrado camps beyond the government checkpoint.

The field assessment indicates that although drivers are available, NGOs report difficulties renting vehicles in Liberia due to the non-existent private sector. To help fill the emergency gap, the EC grants free use of four trucks to NGOs conducting humanitarian activities, and will provide ten trucks in August.

*Nutrition*

Action Against Hunger (ACF) operates two therapeutic feeding centers (TFCs) in Monrovia to treat severely malnourished children. ACF reported on July 16 that the TFCs are treating a total of 200 severely malnourished children under the age of five. ACF data collected from nutritional screenings conducted in Monrovia from June 10 to July 10 indicated that a total of 4,199 children under the age of five screened for malnutrition, 1,972 were moderately malnourished, and 381 were severely malnourished. No screening data is currently available for areas outside of Monrovia.

ACF reported on July 23 that their TFCs in Monrovia are operating under national staff and have been supplied for one week. However, ACF is having difficulty resupplying the centers with potable water due to increased insecurity and threats to staff in transit.

*Shelter*

According to the USAID/OFDA field assessment, shelter conditions in Monrovia are lacking. In all of the temporary sites visited by the USAID/OFDA EDRC, none provided adequate shelter protection. The July to September rainy season, during which downpours can last for days, is expected worsen shelter conditions. Most temporary sites lack doors, windows, and sturdy roofs, creating pools of water where people sleep. ICRC, MSF-Belgium, and MSF-France report Acute Respiratory Infections (ARIs) as the second highest cause of morbidity across all age groups. This is likely due to inadequate protection from the heavy rains.

**USG HUMANITARIAN ASSISTANCE**

**(New information is underlined)**

*Non-food Assistance*

In FY 2003, USAID/OFDA has provided more than \$1.2 million to support humanitarian needs in Liberia. USAID/OFDA provided more than \$517,000 to Action Against Hunger (ACF) in support of emergency nutrition needs in Monrovia and more than \$751,000 to Merlin to address emergency health and water and sanitation needs throughout Liberia. USAID/OFDA deployed a Disaster Assistance Response Team (DART) to Liberia that arrived in Freetown, Sierra Leone on July 20. The DART, currently composed of three members, will remain in Freetown until the security situation in Monrovia becomes permissive for the deployment of the DART.

*Emergency Food Assistance*

Thus far in FY 2003, USAID’s Office of Food for Peace (USAID/FFP) has provided 9,260 metric tons of P.L. 480 Title II emergency food assistance, valued at \$6 million, to Liberia. The commodities provided by USAID/FFP include a combination of cereals, pulses, and vegetable oil, and Corn Soya Blend for therapeutic and supplementary feeding. USAID/FFP emergency food assistance is provided to vulnerable populations through direct distribution, food for work programs, emergency school feeding, maternal and child health programs, and supplementary and therapeutic feeding programs. USAID/FFP programs are implemented in Liberia through WFP.

*Refugee Assistance*

The State Department’s Bureau for Population, Refugees, and Migration (State/PRM) has provided support for Liberian refugees since 1989 and for Sierra Leonean refugees in Liberia since 1991. To date in FY 2003, State/PRM has provided \$1 million in emergency assistance for refugees in Liberia through UNHCR. State/PRM has also provided nearly \$13 million to UNHCR and more than \$13 million to various NGOs to support Liberian refugees in Côte d’Ivoire, Guinea, and Sierra Leone. This is in addition to unearmarked funding for UNHCR for Africa (\$55.1 million) and ICRC for Africa (\$29.2 million).

**OTHER DONOR HUMANITARIAN ASSISTANCE<sup>1</sup>**

In addition to the USG’s efforts, several other donors have made significant humanitarian contributions to Liberia in 2003.

<i>Donor</i>	<i>Amount</i>
Norway	\$1,654,267
Canada	\$1,128,546
Japan	\$1,000,000
Sweden	\$580,877
Ireland	\$269,108
Netherlands	\$189,000
Italy	\$139,899
Switzerland	\$81,103

<sup>1</sup>As reported by UN OCHA’s ReliefWeb Financial Tracking of donor contributions inside and outside of the U.N. Consolidated Appeal on July 25, 2003

**U.S. GOVERNMENT HUMANITARIAN ASSISTANCE TO LIBERIA**

<i>Agency</i>	<i>Implementing Partner</i>	<i>Sector</i>		<i>Amount</i>
<b>LIBERIA – FY 2003 (TO DATE)</b>				
<b>USAID Total .....</b>				<b>\$7,268,784</b>
<b>USAID/OFDA .....</b>				<b>\$1,268,784</b>
	ACF	Nutrition	Monrovia	\$517,773
	Merlin	Health and Water/Sanitation	Country-wide	\$751,011
<b>USAID/FFP .....</b>				<b>\$6,000,000</b>
	WFP	P.L. 480 Title II Food Assistance – 9,260 MT	Country-wide	\$6,000,000
<b>STATE/PRM* .....</b>				<b>\$1,000,000</b>
	UNHCR	Annual Refugee Operations	Country-wide	\$1,000,000
<b>TOTAL USG HUMANITARIAN ASSISTANCE TO LIBERIA IN FY 2003 (TO DATE) .....</b>				<b>\$8,268,784</b>

\* State/PRM figures include funding within Liberia. State/PRM also provides additional Africa-wide and regional assistance not reflected in this total. Please see the USG Humanitarian Assistance section for further details.



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