Beirut explosion relief continues

On August 4, explosions in Beirut killed more than 200 people, injured more than 6,500 others, and caused widespread material damage. The explosions directly affected 220,000 people living in an estimated 73,000 apartments within 1.8 miles of the epicenter.

Humanity & Inclusion’s 100-person team was among the first to assist victims. Thanks to an outpouring of support from existing donors and brand-new friends, staff provided medical first aid kits to victims with light injuries, so they could recover without relying on overstretched hospitals. Specialists supplied rehabilitation care and mobility aids to people with more complex injuries. Many individuals face a significant road to recovery, and rehabilitation will be a key component of their healing. This includes people who underwent surgery, including those with traumatic injuries such as fractures, amputations,

Donor support means these victims have physical therapists overseeing their recovery, helping them to recover their functional independence and prevent long-term disabilities.

Damaged homes, a dire economic situation, and political turmoil can cause severe anxiety. Donor support has also extended psychosocial support to people traumatized by the explosion.

The situation remains extremely tense. Many families are unable to afford healthcare, and sometimes even food. The political situation continues to cause resentment. The pandemic is an additional burden. Donor support includes:

- supporting reconstruction efforts to be accessible to people with disabilities
- extending disability awareness-raising efforts
- providing access to people with disabilities or injuries to specialized mental health and psychosocial services (with local partner Mousawati)
- identifying the mental health needs of every individual in a household, alongside other urgent needs—medical, financial, hygienic, nutritional, rehabilitative, etc.

Please help us continue this work. Whatever you can give will make an immediate and lasting difference.
Tabita is a South Sudanese girl living in Omugo refugee camp in Uganda. She received a 3D-printed, lower-limb brace, after polio affected her legs.

Isabelle Urseau, Technical Director of the Rehabilitation Unit. “There are few or no centers in many parts of the world. Armed conflicts also restrict travel. By using digital technology combined with 3D printing, we can produce prostheses and orthoses for less money, and provide quality rehabilitation.”

At the end of 2019, Humanity & Inclusion achieved a demining world-first when it successfully located mines buried in the Chadian desert using drones equipped with infrared cameras.

“We can also map vast areas of contaminated land in record time,” explains Emmanuel Sauvage, Armed Violence Reduction Director. “It used to take weeks to investigate a suspected hazardous area. Drones accelerate clearance and land release for local populations.”

The prize money allows Humanity & Inclusion to establish a new innovation fund. “These projects reflect something that’s in our DNA: a desire to improve the quality and impact of our response using accessible technologies,” says HI’s Global Managing Director, Manuel Patrouillard. “Innovation is not just for specialists. It should be widely accessible. We are committed to that goal.”

Innovation Prize

The European Union Horizon Prize 2020 awarded Humanity & Inclusion with two innovation awards in September, along with a $2 million prize. Judges praised the organization’s use of drones in mine clearance, and its production of high quality, lower-cost braces and prosthetic limbs for people with disabilities.

“A person who needs a prosthesis has to travel to professional treatment at each stage of care,” explains Isabelle Urseau, Technical Director of the Rehabilitation Unit. “There are few or no centers in many parts of the world. Armed conflicts also restrict travel. By using digital technology combined with 3D printing, we can produce high-quality prostheses and orthoses for less money, and provide quality rehabilitation.”

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Fighting Covid-19 in Togo

Information by loudspeaker → In the streets of Lomé, the capital city of Togo, and in the north of the country, Humanity & Inclusion teams broadcast Covid-19 prevention messages through a loudspeaker. “It works very well, because the population wants clear information on what they need to do for themselves, and their loved ones,” explains Irène Manterola, Director of Humanity & Inclusion in Togo. “It is important, because there are a lot of contradictory messages.”

Producing soap → The costs of hygiene and cleaning products have risen dramatically since the start of the pandemic. Because the population—especially the most vulnerable people—cannot access the goods that can keep them safe, staff began manufacturing bleach and soap. Mobile teams distribute these hygiene kits to people in the poorest areas, where the virus is rampant.

Reassuring inhabitants → Teams record and broadcast radio programs to reassure listeners, and help them deal with their fear of the virus. “It is important that people are aware of the seriousness of the situation, but do not feel completely powerless,” says Manterola. With psychiatrists and psychologists, staff have also set up a free support line that people can call into for help.

Note from the Executive Director

President-elect Joe Biden has an opportunity to send a clear message to civilians caught in conflict that America cares about their fate. The United States has long been out of step with its allies and the broader global consensus to ban landmines and cluster munitions. The Biden Administration can reset U.S. policy and finally join the Mine Ban Treaty and Convention on Cluster Munitions. Further, the Administration should fully support the diplomatic process towards an international agreement against bombing in populated areas.

Cluster munitions have recently been used in the Azerbaijan-Armenia war. Landmines still cause around 6,000 casualties annually. These two indiscriminate weapons remain a clear danger to civilians. 123 States have joined the Oslo Convention that bans cluster munitions, and 164 States are parties to the Ottawa treaty banning anti-personnel landmines. Meanwhile, the use of heavy explosive weapons in urban areas has become common in modern conflict, with civilians making up 90% of the victims.

The Biden Administration should quickly issue a public commitment against using antipersonnel landmines and cluster munitions, and commit to the diplomatic process that will lead to an international agreement against heavy bombing in populated areas.

Jeff Meer
U.S. Executive Director
Twitter: @jeff_HIUS

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Something that’s in our DNA: a desire to improve the quality and impact of our response using accessible technologies.

Testing a drone for demining operations in Chad, alongside partner Mobile Robotics.

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Multiple crises
Bangladesh has been weakened by the Covid-19 health crisis, which has profoundly affected its economy. In addition, there is a climate risk, with the country regularly subjected to natural disasters, and 50% to 70% of the territory being regularly flooded due to monsoons. In June, Cyclone Amphan hit the coast, causing widespread destruction. Local teams are concerned about consequences of these multiple crises: "We need to strengthen support for the poorest people in this country, especially since they are most at risk of being victims of the pending economic crisis," says Jean-Loup Gouot, Director of HI in Bangladesh. "The standard of living among these populations would be profoundly and negatively affected."

In Bangladesh, the Cox’s Bazaar refugee camps are home to nearly 1 million Rohingya refugees—fleeing repression by the Burmese army for the past three years. In these densely populated camps, Humanity & Inclusion donors are protecting the most vulnerable from a large-scale health disaster. More than 860,000 Rohingya live in an area that’s just 10 square miles. Since the beginning of the pandemic, these camps have been a sanitation nightmare. With 40,000 people per less than half a square mile, accessing water, hygiene and health care centers is already challenging. Detecting the virus is even more so. For the high number of refugees already experiencing pre-existing conditions, living conditions are almost unbearable.

"The Rohingya population is extremely at-risk for Covid-19," says Jean-Loup Gouot, director of Humanity & Inclusion in Bangladesh. Covid-19 arrived in the camp in mid-May. The first death, a 71-year-old man, was recorded in June. As in the rest of the country, confinement is the rule: entry to and exit from the camp is forbidden. But this rule has severely restricted the presence of humanitarian personnel.

"Our teams are performing our normal essential activities adapted to Covid-19 precautions," Gouot says. They share stay-healthy informing and raise awareness among the population about effective ways to protect themselves from Covid-19, such as hand washing, keeping a distance, limiting travel and movement. The result is that cases have been stemmed inside the camp. Since the outbreak began, the camps and neighborhoods bordering them have counted 5,000 cases, with fewer than 300 inside the camps.

Distributing clear and reliable information is essential, because rumors spread quickly. Some refugees believe that prayer or an herbal tea will protect them from the virus. Others fear being chased away and killed if they fall ill.

"Our teams also identify individuals who have need for medical care and report them to partner organizations," he says. "Meanwhile, the association’s physical therapists continue to offer rehabilitation sessions, by respecting the rules of distancing and wearing a mask."

Proximity and limited health services make the Rohingya population extremely at-risk.

Key figures
Humanity & Inclusion’s teams in Cox’s Bazaar refugee camps:
Between March and June 2020

860,000 refugees in overcrowded camps
653,000 tons of humanitarian aid
169,000 humanitarian aid packages
36,000 medical kits distributed

A young Rohingya girl waits in line for an aid distribution in Kutupalong refugee camp in Bangladesh.

A Covid-19 awareness session
Half of children with disabilities still excluded from schools

A new report looks at the physical, financial, and attitudinal challenges that children with disabilities must surpass to access education in the world’s poorest countries. Valentina Pomatto, Inclusion Advocacy Officer for Humanity & Inclusion, explains that only 42% of girls with disabilities complete primary school, compared to 51% of boys with disabilities. “All of these obstacles can and must be overcome,” she says.

Right now, Humanity & Inclusion donors are funding 52 education projects in 27 countries in Africa, the Middle East, and Asia. Humanity & Inclusion works to increase the school enrollment of children and young adults with disabilities.

James Dugan lives in Chicago, and raised $2,220 for the emergency response in Beirut by organizing and running a 10K. Humanity & Inclusion is grateful to James and his fellow runners for each step they took to send care & aid to the victims of the Aug. 4 explosions. He took time recently to share his story:

When the explosion in Beirut happened, I felt like we had to help out. My friends and I had been planning a 10K charity race— in part to motivate a friend recovering from an ACL injury, and also to get outside again, after so many other runs had been cancelled due to Covid-19. I found out about Humanity & Inclusion’s work in Beirut from a New York Times article providing information about different ways to help. The mission of Humanity & Inclusion just struck me as the right way to go.

I had posted information about the August 22, race on Facebook and Instagram, and a lot of people jumped at the opportunity to challenge themselves. People all over the U.S. and Canada wanted to run.

We started a Facebook group where everyone could post their training runs, ask for advice, or share their favorite running songs. The positivity in that group was one of my favorite parts of the whole process. Most of the runners were in Chicago, but we also had people who had never met before being so supportive of one another in Pittsburgh, Los Angeles, New York, and Canada.

We obviously couldn’t all run together due to Covid, so we decided on a universal start time. For those of us in Chicago, we picked a landmark statue called “Self-Portrait,” created by Keith Haring. It’s on the lake shore, and runners had to incorporate it in some way during the run. One of the runners, Jackie, made custom tie-dyed masks for a lot of us.

The day of the race was great! You ended up seeing people along the run even though everyone was free to pick their own route. My friend Andy just ran to the statue and completed four miles worth of laps around it. His ACL was just fine!

The runners found another cool way of raising money, by selling off spots on their running playlists. For a donation of $3–$5, anyone could pick a song that you had to listen to on the run. I finished a little behind the pace I wanted, at 1:03:34, but it felt like we really accomplished something. It was nice to feel connected to a community again. My friend’s ACL turned out to be just fine.

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JOIN OUR LEGACY SOCIETY

If you choose to make a planned gift to Humanity & Inclusion, we would be honored to recognize your extraordinary commitment as a member of our Legacy Society.

For more information on how you can become a member of our Legacy Society, email Jeff Meer on j.meer@hi.org or call (301) 891-2138

www.hi-us.org/legacy