

**Responding to a world in crisis**

At the end of 2015, the UN estimated that a record number of people around the world required humanitarian aid to meet their basic needs – a total of 125 million people. Throughout 2016, the world saw the highest number of people who had been forced to migrate, whether inside their country or across borders. In total, 65 million people have been uprooted and are living in this situation in 2016. **According to estimates, every minute, 24 additional people are subject to the trials of fleeing their homes and forced exile.**

This displacement is caused by conflict, but also by natural disasters such as hurricanes or droughts, which force families to uproot and take to the road, very often towards poor areas of cities. At this very moment, some displaced people are being forced into exile, such as those who are continuing to dodge bombs as they flee east Aleppo, or those who are risking their lives as they escape Mosul. Men, women and children who are scared but alive, uprooted but living in hope of a better future. Others have already been displaced for decades. The conflict that forced them from their homes is continuing, and even intensifying, because the drought they fled is still occurring, because their chances of returning to their homeland is nothing but a distant mirage. **The average person is displaced for an estimated 17 years** for those who are within their own countries or who are currently refugees, a sign of the permanence of this state of affairs and the increasingly complex nature of crises.

Faced with these immense and growing challenges, we are standing up for this humanitarian imperative and for our humanitarian ideal. We are preparing ourselves and we are taking action, both on front lines and the most remote villages, in fields and in schools, wherever there is need. We are on the ground, working with communities that have been affected by crises, providing a rapid response and meeting their basic needs. We constantly strive to outdo ourselves and provide a better response, making choices and remembering that every action we take must help to soften – even a little – the violence that the world’s upheavals impose on the most vulnerable.

We are choosing to carry out humanitarian necessities by responding to new and sudden crises, such as those that followed in the wake of Hurricane Matthew in Haiti, while remaining alongside communities that have been in crisis for decades, such as in the Democratic Republic of the Congo. We are choosing to leave Guinea, which is gradually recovering from the terrible Ebola crisis, after two years of support, handing over to other stakeholders and focusing on our responses to new crises. And so we are working to respond to the critical situation in Afghanistan, where hundreds of thousands of people are returning home after decades of exile in neighbouring Pakistan, or the crisis that has hit Nigeria, where the number of children with severe malnutrition is bordering on disaster, and which will affect the country for generations. We are also choosing to strengthen our technical expertise, to prepare and train ourselves, to use new technology so we can constantly improve the way we respond to the needs we identify.

Finally, we are choosing to rally all of our energy – from our teams, from local and international stakeholders, and from you – allowing us to act wherever we are needed, now and in the future.

**Hélène Quéau**  
Director of Operations

**A TIME OF URGENCY**

A doctor takes a woman’s pulse. She is around 50 years old. Samia fled the city of Mosul in Iraq following the offensive launched on 17 October 2016. She reached the Zelikan camp, 40 km from the Iraqi city, where Première Urgence Internationale has a mobile clinic of doctors, nurses and pharmacists who are treating people from Mosul and the surrounding villages. Since the first fighting was announced, the risk that a major humanitarian crisis will soon hit the region has been worrying. For Première Urgence Internationale, which has worked in Iraq since 1997 and whose mobile clinics were already operating near the front line, the response came without delay – located near Mosul, teams began work on the very first day of the offensive. *“Responding to a humanitarian crisis is never simple, but it is obviously much simpler when our teams are already in place. We don’t need to register ourselves or to employ staff, and logistics is also easier,”* explains Olivier Routeau, Head of Emergencies and Operational Development. Implementing a humanitarian response involves a number of steps – anticipation, preparation, and deployment. But no two interventions are exactly alike – each humanitarian crisis has its own specific features, context, challenges, and schedule.

**Anticipating**

To help with anticipating crises, the department has put a number of monitoring tools in place to react to the smallest humanitarian emergency. Armed conflicts, population displacement, natural disasters, political upheaval, and more – emergency situations are becoming increasingly long-lasting and the number of individuals affected is only growing. And yet there is so much information, from both general media and specialised publications. The Emergency Department must therefore *“sieve through a mountain of information”*, process it and analyse it via a range of tools and using a specific methodology. *“The aim is to determine whether a humanitarian crisis is developing. With the battle of Mosul, we can anticipate population movements, but in the event of a natural disaster, obviously it is more difficult to predict when and where it will happen,”* explains Olivier.

The next step is to assess the extent of needs and the response already in place, whether from authorities in the affected country or from other organisations if they are already present. *“We need to avoid humanitarian chaos,”* explains Olivier. It’s time to answer a great many questions. Is action justified? What are the specific needs? Which areas are worst affected? Do we have the resources and the ability to respond to these needs?

If there are no teams in place, which areas should they travel to as a priority? Access needs to be taken into consideration, as do security issues and even administrative formalities. NGOs cannot simply intervene without official permission from the relevant authorities. Everything must be carefully prepared

**Preparing**

The Emergency department has a toolkit that simplifies the process of answering these questions and helps to identify what will create an effective operation.

The approach taken needs to be adapted to every situation. If there is a natural disaster, the preparation time must be short, and as such information must be collected quickly to respond as quickly and effectively as possible to the damage. *“We didn’t have a team in place in Haiti when Hurricane Matthew hit the country. We didn’t have accurate information on which areas were worst affected or on the priority needs of the affected populations,”*

explains Olivier. Following news of the hurricane’s path, a crisis unit was formed at Première Urgence Internationale HQ the very same day. Two days after Matthew hit the country, a team arrived in Haiti to launch an exploratory mission.

**Understanding the crisis and acting**

When she arrived on site, Elsa Softic, coordinator of the exploratory mission in Haiti, first made contact with Première Urgence Internationale partners who were already present in the field. *“We attended coordination meetings and we organised as many meetings as possible.”*

Première Urgence Internationale’s Emergencies manager met representatives from the authorities and from communities as well as national NGOs and journalists. As soon as possible, the exploratory team visited the affected areas.

*“In Haiti, our assessment was visual. Everything was destroyed,”* adds Elsa. The aim was to assess needs that had not been met, analyse the situation and structure a humanitarian response.

**Afghanistan**



A new exploratory mission began in Afghanistan in November 2016

**Haiti**



Teams began work two days after Hurricane Matthew struck Haiti in October 2016.

**Ukraine**



In March 2015, a team was deployed to Ukraine

Once the approach is determined, a specific response can be put in place. In Haiti, funding was released very quickly and an official mission was opened in the country.

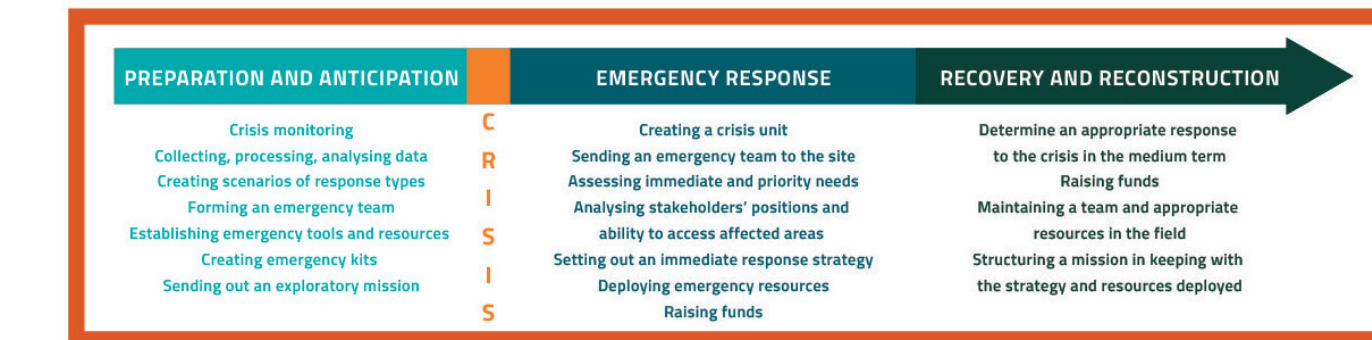
**Every mission has its surprises**

**Intervening: from emergency to reconstruction**

Once the humanitarian response has been structured and the mission has received funding, a team can be deployed in the country. But this deployment isn’t so simple. *“It’s important to make sure that as many things as possible are in place so the team can work easily,”* explains Elsa.

Registering a mission with local authorities, opening a bank account, finding an office and accommodation, recruiting staff and hiring vehicles are essential steps in opening a mission. *“And every mission has its surprises. In Haiti, for example, the working conditions were difficult. It was hard to get access to electricity and I was sorting CVs by candlelight,”* says Elsa.

Although the Haiti mission was opened very quickly, some launches take a bit longer. Challenges vary depending on the circumstances. *“There are more complicated contexts in terms of security, logistics and administration,”* says Olivier Routeau.





**FOCUS**  
**TIME-SAVING KITS**

In times of humanitarian crisis, it isn't rare for people to lose everything they own. When displaced people or refugees flee, they often leave behind even the most essential requirements for living – they cannot bring a blanket, a pan or plates. Première Urgence Internationale works with these people by distributing non-food item kits, such as hygiene kits, shelter kits and winter kits. These kits provide the basic products required for cooking and heating and even for housing. The kits are standardised, although they are adapted to fit the context in which they are distributed. For example, in some countries, people cook using wood fires, whereas others use gas. The equipment provided needs to be adapted as a result.

Première Urgence Internationale also develops medical emergency kits. The aim is to send a batch of basic first aid medication to an area as quickly as possible. With these pre-prepared and pre-packaged kits stored in a warehouse, the medication can be sent to the field in under 72 hours.

All of these tools allow us to implement a rapid and effective response during a humanitarian crisis.

**Haiti**  
Following Hurricane Matthew last October, Première Urgence Internationale has been working in Haiti, specifically the Grand'Anse department, to provide emergency assistance to extremely vulnerable populations.

Thanks to your support, you could help to provide the following during natural disasters, for example:

**25 € Water and hygiene kit**

A kit means that families can receive at least 7.5 litres of water per person per day for around a month, the time required to carry out work to restore access to clean drinking water. These kits are essential to prevent risks of cholera epidemics and other diarrhoea-borne illnesses.

450 g of soap, a 20 litre jerrycan, a 20 litre container with a tap, a 1.5 litre bucket and 150 33-mg water disinfecting tablets.

**Irak**  
Première Urgence Internationale is working to prepare for the impending humanitarian disaster in Mosul. The NGO is deploying a number of mobile clinics, featuring doctors, nurses and pharmacists, less than 50 km to the north-east of the city, who are ready to assist people fleeing Mosul who need immediate first aid. Two other mobile clinics will also provide mental healthcare. These clinics are constantly travelling around the front line area.

Thanks to your support, you could help to provide the following during massive population movements, for example:

**15 € Child hygiene kit**

A family can receive products for their baby's health and safety: nappies, cream, cotton, and cord care products.

**50 € Winter emergency**

A blanket, a cooking set (5 plastic tubs, 1 thermos, 1 cooking utensil, 12 plates, 12 spoons, 6 knives, 6 cups), and a pocket torch.

These kits mean that families who are forced to leave a conflict area urgently can still access the minimum resources needed for a dignified life. They also help to fight against worsening health in the most vulnerable people.

**INTERVIEW**

**THE STORY OF A NIGERIAN WHO FLED BOKO HARAM**



Mallam Bukar Alama is 47 years old and lives in Nigeria. Under threat from the terrorist group Boko Haram, he was forced to leave his village. Today, he lives in the city of Maiduguri in Borno State in north-east Nigeria. He benefits from the electronic card programme put in place by Première Urgence Internationale since April 2016. Here, he tells of his struggle to meet his family's needs.

*Where did you live before coming to Maiduguri?*

I come from Ala, a small village in the Marte local government area in Borno State. My family and I lived off my plantations. I mainly grew sorghum, which is a cereal, as well as maize and peanuts, and my harvests were enough to feed the household. Selling my produce allowed us to buy other products we needed. I liked living in Ala. But then the village was struck by disaster. Boko Haram gradually established itself in Ala and its members tried to recruit residents. One afternoon, they came to see me to force me to join them. I begged them to let me go, telling them that I was the head of the family. They said that it wasn't their

problem, but luckily they left. My family, terrified, advised me to leave the village immediately. I managed to climb into a truck that was heading to Maiduguri. That's how I was forced to leave my family. We were apart for 20 months before they also managed to flee Ala, where a number of people had lost their lives and several houses had been burned down. They came to join me in Maiduguri.

« Now I can look to the future without worrying. »

*How did you come to travel to Maiduguri?*

I arrived in this city with nothing. Life was very hard. Some days, we didn't have anything to eat and we had to beg for food. I lost two children who had become seriously ill. I wanted to find a job, but it's really hard when you don't know anyone. We didn't have anything – food, clothes, healthcare. A distant relative sent us a little money, but it wasn't enough to cover all of our needs.

*You became a beneficiary of a Première Urgence Internationale project. Has it been a real help?*

One day, the teams from Première Urgence Internationale came to the area of the city where we lived, and I was chosen as a beneficiary. The teams gave me a card which I use as a voucher for food in certain shops in the city. I can buy food and my family can now get three meals a day. I'm so relieved. My worries about food have disappeared. Now I can look to the future without worrying. I'd like to go back to our village, but it's still too unsafe, so I'm planning to go to the Damboa area for the next farming season. I'd like to start some new plantations so I can feed my family again.

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**QUESTIONS?**  
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**Report**  
**A time of urgency**

**Interview**  
**The story of a Nigerian who fled Boko Haram**

**Focus**  
**Time-saving kits**

Humanitarian information from



Mobile clinics near Mosul in Iraq