Highlights

- The risk of cross-border transmission of Ebola Virus Disease (EVD) from the Democratic Republic of the Congo (DRC) to Burundi remains high with six cases of EVD confirmed in South Kivu in DRC close to the border with Burundi.
- The immunization campaign for front-line workers against EVD was launched in August 2019. As of 11 September, 1,700 front line workers were vaccinated.
- UNICEF supported the Ministry of Health in the distribution of 100 handwashing stations in public places (including schools and health centers) in high risk areas.
- UNICEF and partners jointly targeted 20 health facilities in priority 1 districts to raise their level of IPC/WASH compliance with standards and improve the level of readiness for Infection Prevention and Control (IPC).

UNICEF Actions with Partners

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>Targets by December 31</th>
<th>Results to date¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>C4D: # of people reached with EVD related messaging through community engagement and interpersonal communication approaches in areas at risk of EVD</td>
<td>2,000,000</td>
<td>1,300,000</td>
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<tr>
<td>C4D: # of people trained to sensitize the community on EVD prevention and control</td>
<td>1,500</td>
<td>646</td>
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<tr>
<td>WASH: # of entry points provided with essential WASH services in areas at risk of EVD</td>
<td>20</td>
<td>16</td>
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<tr>
<td>WASH: # of staff in health facilities trained on IPC/WASH in areas at risk of EVD</td>
<td>300</td>
<td>247</td>
</tr>
<tr>
<td>CHILD PROTECTION: # of partner organizations trained on psychosocial support and child protection services as part of EVD preparedness</td>
<td>38</td>
<td>38</td>
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<tr>
<td>EDUCATION: # of teachers trained with EVD prevention information in schools in areas at risk of EVD</td>
<td>2,000</td>
<td>30</td>
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<tr>
<td>NUTRITION: # of nutrition stakeholders oriented in NiE (Nutrition in Emergency) including EVD</td>
<td>200</td>
<td>32</td>
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<tr>
<td>HEALTH: # persons provided with essential drugs</td>
<td>100,000</td>
<td>70,000</td>
</tr>
</tbody>
</table>

¹ As of 20 September 2019

Situation in numbers: September 2019

4.8 million
# of people living in priority 1 & 2 districts
(MoH 13 September 2019)

2.1 million
# of people screened of incoming travelers for at the 21 Points of Entry
(MoH 13 September 2019)

33
# of alerts
(MoH 13 September 2019)

1,700
# Front-line workers immunized
(MoH National Task Force 11 September 2019)

UNICEF Burundi Ebola Response
Funding requirements 2019

Funding Gap, $1,977,527
49%

Funds received, $2,033,181
51%

Main gaps remain in IPC/WASH at health facilities level and RCCE in priority health districts (including schools).
Situation Overview

With the ongoing Ebola outbreak in eastern regions of the Democratic Republic of Congo (DRC), as a neighboring country, Burundi is at high risk of cross-border transmission. As of 24 September 2019, six cases (three deaths) were confirmed in South Kivu (less than 300 kilometers from Burundi), which increases the risk of cross-border transmission. The border, approximately 190 kilometers long, is characterized by a high number of border crossings, requiring additional focus on preparedness.

Humanitarian Leadership and Coordination

Government preparedness

The National Ebola Taskforce (NTF), under the leadership of the MoH, continues to coordinate the EVD preparedness and response planning. On 11 September 2019, the NTF presented Burundi’s level of readiness to respond to an EVD outbreak in the country. While preparedness at the national level was reported as adequate, at the district level, preparedness is considered low; mainly due to the limited capacity to coordinate and respond at the decentralized level.

The NTF was set up under the leadership of the MoH in collaboration with relevant government departments, WHO and other UN agencies (UNICEF, IOM, UNHCR, WFP, OCHA), donors (World Bank, USAID, DFID) and NGOs (ICRC, MSF-OCB). The taskforce coordinates the EVD preparedness and response planning including the National Contingency Plan, Centralized Operational Plan and District Micro-Operational Plan. In May 2019, thematic groups were established and re-structured in line with the six EVD pillars: surveillance, case management, laboratory, IPC/WASH, communication and community engagement, and logistics. In June 2019, the NTF revised the National Plan through the development of a comprehensive costed plan for each pillar for preparedness activities until 31 December 2019.

Since May 2018, the national taskforce for EVD has mobilized US$11.9 million to implement the preparedness plan, which represents 56 per cent of the revised planned budget (US$21.5 million in total).

Partner support for EVD preparedness

UN agencies (including UNICEF) operate within the government coordination and response structures. WHO and OCHA are the technical secretariat of weekly strategic EVD coordination meetings at national level with UN agencies, donors, bilateral and multilateral cooperation and NGOs. The meeting is chaired by the UN Resident Coordinator. EVD UN technical meetings are also called on a weekly basis for the implementation and monitoring of the CERF - allocated in February 2019 (UNICEF received US$600,000 of an approximate US$2.4 million). Ad-hoc meetings and working sessions with UN agencies and NGOs are also convened by WHO as needed.

UNICEF actively participates in these meetings and provides technical support to the NTF and several sub-committees, such as IPC/WASH, Case Management, Logistics and Communication/Community Engagement (as a co-lead). Other existing UNICEF led coordination groups such as WASH, Child Protection and Education sectors have included preparedness and surveillance as a standing item in all meetings.

UNICEF Preparedness Strategy

UNICEF Burundi’s preparedness strategy is aligned with the National EVD Response and Preparedness Plan. Based on UNICEF’s comparative advantage, UNICEF Burundi supports the national preparedness efforts, as well as the efforts in the 21 priority districtsiii in the following areas:

- **Coordination** to strengthen existing coordination mechanisms in collaboration with national authorities and WHO and to ensure that the humanitarian response is timely, coordinated and comply with humanitarian principles and agreed upon standards and benchmarks. As co-lead of the Health sector with WHO, UNICEF provides technical and financial support to the National Ebola Task Force in coordinating EVD preparedness and response. UNICEF’s contribution includes the following: i) finalization of the decisions and actions for the full functionality of the Operational Emergency Center of the MoH (EOC), ii) capacity strengthening of the Rapid Response Teams in case

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iii As of 22 September 2019, a total of 3168 EVD cases were reported, including 3057 confirmed and 111 probable cases, of which 2118 cases died (overall case fatality ratio 67%). Of the total confirmed and probable cases with reported sex and age data, 56% (1772) were female, 28% (900) were children aged less than 18 years, and 5% (160) were healthcare workers. **WHO DRC EVD External Situation Report 60, date of issue: 24 September 2019.**

iv As part of Burundi’s EVD National Contingency Plan, 21 health districts that share a border with the DRC, Rwanda and Tanzania, at risk have been categorized at two priority levels (*Priority 1*: 6 health districts: Bujumbura North, Cibitoke, Isale, Mpanda, Mabayi, Bujumbura Centre, *Priority 2*: 15 health districts: Rumonge, Kabezi, Nianza-Lac, Bugarama, Bujumbura South, Kayanza, Ngozi, Buye, Kiremba, Vumbi, Kirundo, Busoni, Giteranyi, Rwibaga and Muyinga).
management as well as iii) provision of support for the formative supervision of priority districts 1 and 2 by the Central level.

- **Risk communication and community engagement (RCCE)** with the aim to promote protective practices to prevent EVD transmission and promote timely care seeking; to reduce anxiety by communicating technically correct messages to targeted populations; to mobilise communities to identify and quickly report potential cases. UNICEF co-chairs the RCCE sub-committee and will continue to provide support to i) generating evidence, including through the Knowledge, Attitudes and Practices (KAP) surveys and anthropological reviews/studies; ii) developing and implementing risk communication and social mobilisation plans to ensure engagement through interpersonal communication (door-to-door) and mass awareness communication (mobile cinema, communication caravans, mass media such as radio and TV spots and SMS); with key influencers (community leaders, cultural and religious leaders, health providers including traditional healers, teachers) and community networks (Burundi Red Cross volunteers, para-social workers, fishermen, etc.); iii) supporting the MoH in developing communication plans for preparedness and response. RCCE strategies are also planned for implementation at school level.

- **Infection, Prevention and Control (IPC) through WASH** with the aim to prevent EVD transmission in points of entry from DRC and priority 1 countries, health facilities, institutions and communities (including schools). UNICEF will continue to distribute essential WASH supplies (such as chlorine, handwashing stations, etc.), train health workers and WASH resource persons on IPC, contribute to construction and/or rehabilitation of water supply and sanitation facilities in points of entry and health facilities and enhance and promote hand washing practices in public spaces through integration of WASH and risk communication activities.

- **Support for Infant and Young Child Feeding (IYCF)** in the context of EVD, includes the updating of national guidelines and protocols, development of implementation tools and building the capacity of frontline health workers and implementing partners in high-risk districts to provide lifesaving nutrition services for infants and young children affected by Ebola.

- **Child Protection, including Psychosocial Support** for children affected by EVD, is still not considered a pillar of the National EVD Contingency Plan. UNICEF advocates for the review of the plan in order to include this activity and will develop a minimum response package together with sectoral protection groups held at national level. Training of implementing partners on psychosocial support and individual child protection services in case of EVD will also be conducted in the coming months.

### Summary Update of Programme Preparedness Activities

#### Risk Communication, Social Mobilization and Community Engagement (RCCE)

UNICEF, as co-lead of the RCCE sub-committee, is supporting the Ministry of Health to convene stakeholders involved in the RCCE and provide technical assistance for effective coordination of interventions. In line with that, UNICEF convened two meetings for UN agencies and NGOs to pave the way for mapping interventions with a broader group of stakeholders. A workshop is planned with the MoH on the revision of the Ebola RCCE plan to emphasize community engagement and risk perception. A rapid KAP assessment will be conducted to inform immediate response measures, facilitate effective prevention-related behavior change and most importantly will be used as baseline to show the significance of the interventions. Informed by insights from the assessment, the RCCE strategy will be updated to address any gap identified. IEC materials were distributed for use in clinics, schools and handwashing stations.

UNICEF is supporting the development of a training manual for national hotline workers to better respond to Ebola linked-rumors. In support of EVD immunization, UNICEF and partners have introduced specific key messages in the frequently asked question on Ebola, targeting health care workers and the general population. Strategic action planning for future actions were finalized with the Ministry of Health and the Burundian Red Cross, including a request from the Ministry of Health to resume the social mobilization caravans.

#### Infection Prevention and Control/WASH

A campaign on EVD awareness and appropriate hygiene practices was expanded to 16 points of entries (out of 21) and in neighboring communities. With UNICEF support, door-to-door awareness campaigns were conducted by community health workers and reached 84,005 households for a total of 504,030 people, as of September 2019. About 45,088 school children (22,950 girls; 22,138 boys) in 100 schools in priority districts learned about Ebola prevention and control.

With UNICEF support, 30 local communities in priority 1 districts, developed EVD prevention and response plans. These activities are being carried out by UNICEF partner, NGO AIDE, and the Department of Hygiene of the MoH.
UNICEF has so far supported the training of 390 community leaders, 150 health staff from 50 health centers in priority districts 1, and 150 teachers from 50 schools in priority districts 1, on IPC and WASH. The package of activities also concerned the training of 97 health center hygienists on chlorine solution preparation.

UNICEF is working with the Ministry of Health for the distribution of 300 kg of chlorine to 150 health facilities and entry points in priority districts 1 and 2. A distribution plan for 100 handwashing stations in public places was also finalized with the MoH.

Health

In July 2019, UNICEF procured an additional 25 basic Interagency Emergency Health Kits (IEHK) and four Acute Watery Diarrhoea (AWD) kits for the management of potential patients, as contingency stocks. The previous order was delivered to the MoH in August 2019. During the reporting period, UNICEF agreed with the MoH for Ebola kits to be re-positioned in the Central National Warehouse (CAMEBU). UNICEF enhanced an integrated package, including supervision for improved quality of activities carried out at the central level and availability of critical supply contingency stocks. The contingency stockpile secured by UNICEF for the Government, also includes essential medicines for approximately 70,000 patients.

Psychosocial support, including Child Protection

Since January 2019, social workers trained by UNICEF reached 27,320 children (10,890 girls, 16,430 boys) with EVD prevention awareness messages in four out of the six priority 1 districts (Bujumbura Nord, Bujumbura Centre, Cibitoke and Isale).

Through a partnership with the Platform of Actors involved in Mental Health and Psychosocial Support (PPSM), UNICEF is reviewing the mapping of other child care centers, including orphanages, to be included in EVD preparedness activities in priority 1 and 2 districts, to ensure that more centers are available for EVD response.

The Child Protection section has finalized an agreement with PPSM, a national partner for implementing PSS Ebola interventions, starting in the first week of October. An EVD preparedness child protection PSS package will be included in the training for teachers organized by the Education section.

Nutrition response in the context of Ebola

A cascade training on Nutrition in Emergency, with a focus on EVD, is planned for frontline health workers in the 21 priority 1 health districts by end of October 2019. A set of tools including National Nutrition guidelines (CMAM and IYCF) will be reviewed as part of the EVD response preparedness. UNICEF will also advocate and support the MoH to conduct a market survey to identify in advance available infant formula (for children six months and above) in the country by end of September.

Education

The Education in Emergencies Working Group, under the leadership of the Ministry of Education, is preparing an awareness campaign and training sessions with key education stakeholders on EVD preparedness and response, which is scheduled to start 30 September. UNICEF will provide technical and financial support to the planning and the implementation of this campaign.

To ensure that the education sector (managing bodies and schools) is prepared to support EVD prevention and response, UNICEF will enhance capacities by the end of the year in 90 schools, through the training of central level personnel, heads of schools and teachers on EVD. Awareness raising campaigns will reach more than 45,650 school children. All schools covered by the plan will benefit from hand washing stations and an orientation on how to use them properly.
UNICEF Burundi EVD preparedness interventions are costed at US$ 4 million. As of 19 September 2019, the funding gap for the UNICEF Burundi EVD preparedness plan stands at approximately US$ 2 million. Through the generous contributions of CERF and DFID, as well as from the UNICEF Global Humanitarian Thematic Fund (GHTF) and other internal UNICEF funding sources US$ 2 million has been received. UNICEF Burundi also received US$ 500,000 from the Emergency Programme Fund (EPF) mechanism - a loan to strengthen the organisation’s capacity for timely emergency response. The EPF has supported the implementation of urgent Ebola preparedness activities since late 2018.

Since May 2018, the national taskforce for EVD has mobilized US$11.9 million to implement the national preparedness plan, which represents 56 per cent of the revised planned budget (US$21.5 million in total). UNICEF has received 50 per cent of the funding needed to enhance capacities, in its areas of expertise, in preventing and in responding to a potential Ebola outbreak. Critical gaps remain in IPC/WASH to support health facilities but also in RCCE to disseminate messages to at-risk populations on how they can protect themselves and react in an appropriate manner in the case of signs and symptoms.

### Estimated Funding Requirements for Ebola Response (September 2018 - December 2019)

<table>
<thead>
<tr>
<th>Pillars</th>
<th>UNICEF Expertise</th>
<th>Requirements</th>
<th>Funds received</th>
<th>Funding Gap</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Coordination</strong></td>
<td>Cross sectoral technical assistance</td>
<td>$122,000</td>
<td>$30,000</td>
<td>$92,000</td>
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<tr>
<td><strong>Case management/IPC/WASH</strong></td>
<td>WASH/IPC</td>
<td>$1,776,932</td>
<td>$933,079</td>
<td>$843,853</td>
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<tr>
<td></td>
<td>Support to case management</td>
<td>$435,000</td>
<td>$139,561</td>
<td>$295,439</td>
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<tr>
<td></td>
<td>Nutrition</td>
<td>$65,000</td>
<td>$75,000</td>
<td>$0,000</td>
</tr>
<tr>
<td><strong>Risk communication and community engagement</strong></td>
<td>Communication for Development (including at school)</td>
<td>$1,461,776</td>
<td>$814,863</td>
<td>$646,913</td>
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<tr>
<td></td>
<td>Psychosocial support and Child protection</td>
<td>$150,000</td>
<td>$40,678</td>
<td>$109,322</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>$4,010,708</td>
<td>$2,033,181</td>
<td>$1,977,527</td>
</tr>
</tbody>
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**Next SitRep: 20 October 2019**

**Who to contact for further information:**

<table>
<thead>
<tr>
<th>Jeremy Hopkins</th>
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</thead>
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<td>Emergency Specialist Burundi</td>
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