HIGHLIGHTS

- No new confirmed cases were reported since 20 March 2015.
- UNICEF supported Massaquoi Elementary and Junior High School in Montserrado with teaching and learning materials for grades I to IX in preparation for its reopening on 11 May 2015. This school was used as an Ebola Virus Disease (EVD) isolation center and is currently being rehabilitated. UNICEF has also supported the preparations for training of teachers on pedagogy aiming to improve the quality of teaching and learning outcomes.
- The WASH-in-School (WinS) programme was officially launched by the President of Liberia on 29 April 2015 at Charles DB King’s School. During the event, UNICEF handed over 2 million bars of soap donated by UNILEVER to be distributed among all schools in Liberia. The school also benefitted from repair of one hand pump and construction of a group hand washing facility (done by UNICEF).
- Back-to-School kits containing infection prevention and control supplies for an additional 581 schools in Montserrado County are being distributed directly to these schools after UNICEF verified they had been left out in the first round of School Safety Protocols supplies requested by the Ministry of Education.
- UNICEF continues to support the preparation of the upcoming national measles, polio and deworming campaign which runs from 8 to 14 May 2015 for children under five. 4,400 general community health volunteers (gCHV)/mobilizers have been trained across the country – 50 in each of the 88 health districts.
- UNICEF, with support from the Office of U.S. Foreign Disaster Assistance (OFDA), has donated six solid waste collection trucks to the city of Monrovia in response to the challenge of solid waste collection and disposal in the city.
- The Minister of Gender, Children and Social Protection (MGCSP), Julia Duncan-Cassell, presented the human rights situation in Liberia during the Universal Periodic Review (UPR) meeting on 4 May 2015 in Geneva.

As of 3 May 2015

10,695
Cases of Ebola
(3,150 confirmed)

4,716
Deaths

4,572
Children registered as directly affected by EVD

2 million+
Children living in affected areas

378
Cases and 192 deaths among health care workers

UNICEF funding needs until June 2015
USD 187.1 million

Funding gap
USD 53.4 million

¹Data are based on official information reported by the Liberian health ministry up to 3 May 2015. These numbers are subject to change due to on-going reclassification, retrospective investigation and availability of laboratory results.
Situation Overview and Humanitarian Needs

According to the Ministry of Health and Social Welfare Ebola reports, the last confirmed Ebola case was reported on 20 March 2015. Liberia is hoping to be declared Ebola-free in the absence of confirmed new cases, using the World Health Organization 42-day countdown, on 9 May 2015. The 42-day period started on 29 March 2015- the day after the last patient who succumbed to the disease was buried.

The last confirmed case died on 27 March 2015. There is no contact being monitored in the country. Heightened vigilance is being maintained throughout the country. In the 6 days to 28 April 2015, all 43 new laboratory samples tested for EVD were negative. All counties, with the exception of Montserrado, have now not reported a new case for over 7 weeks.

Summary Analysis of Programme Response

Education

- Back-to-School kits containing infection prevention and control supplies for an additional 581 schools in Montserrado County are being distributed directly to these schools after UNICEF verified they had been left out in the first round of School Safety Protocols supplies requested by the Ministry of Education.
- UNICEF supported Massaquoi Elementary and Junior High School in Montserrado with teaching and learning materials for grades I to IX in preparation for its reopening on 11 May 2015. This school was used as an EVD isolation center and is currently being rehabilitated. UNICEF has also supported the preparations for training of teachers aiming to improve the quality of teaching and learning outcomes.

Child Protection

- Out of 3,323 registered children who have lost one or both parents/primary caregivers due to EVD, to-date, 2,305 children have received a one-off financial cash grant of USD 150 through the Ministry of Gender, Children and Social Protection (MGCSPP), representing 69 percent of registered children. The remaining children will receive the one-off cash grant during the third phase of the program which is expected to commence beginning of June 2015 after the MGCSPP finishes finalizing the list of qualified children. This list will include children who have not received the one-off cash grant in the previous two rounds. Most of these children have not received the one-off cash grant before because they were identified, registered and verified only recently.
- The Minister of Gender, Children and Social Protection, Julia Duncan-Cassell, presented the human rights situation in Liberia during the Universal Periodic Review (UPR) meeting on 4 May 2015 in Geneva. The UPR is a process which involves a periodic review of the human rights records of all 193 UN Member States. The UPR provides an opportunity for all States to declare what actions they have taken to improve the human rights situations in their countries and to overcome challenges to the enjoyment of human rights. UNICEF supported Liberia’s UPR by providing secretarial support to Minister Duncan-Cassell and by providing a briefing paper for the child right’s component. The UPR will be followed by the release of a report on the presentation and defense of the human rights situation in Liberia and the government’s commitments for the protection of human rights and the rights of children for the next five years.
- UNICEF provided an orientation to Inter-Religious Council of Liberia (IRCL) program staff on the program agreement, UNICEF’s mandate, standards and reporting requirements last Friday. The IRCL staff will implement community based child protection programs in Bong, Bomi, Lofa, Margibi, Montserrado and Nimba. UNICEF will continue to provide technical support to IRCL and support the trainings for Christian and Muslim leaders and women groups on psycho-social support, identification and documentation of children and case management. The trainings in the six counties are expected to be conducted in the beginning of June 2015.
- Child Protection Sub-Cluster partners approached UNICEF regarding a number of children allegedly not yet registered and supported by social workers, NGOs or UNICEF. UNICEF followed up these cases in collaboration with the social workers assigned to the respective communities in Montserrado and confirmed that most of the children were already registered and received the one-off cash grant. The conflicting information in most cases resulted from children changing caregivers and the new caregivers not being notified by previous caregivers of support already provided. This highlights the challenge of supporting children, which are moving in with new caregivers, and the need for establishing a centralized database able to track children across counties. The children not yet registered and supported will be followed up by social workers with support of UNICEF.
- UNICEF Child Protection Field Officers report steady progress with regards to the registration and follow up of EVD orphans in the counties of their assignment. Progress is also observed with regards to organization and participation in Child Protection Sub-Cluster meetings on county level. These coordination meetings support multi-sectorial collaboration in addressing the basic needs of EVD affected children and families.
Health and Nutrition

- Counties shared their updates on preparedness (micro-planning, cold chain, logistics, social mobilization etc.) about the measles campaign and corrective action has been taken by the National Expanded Program on Immunization (EPI) Manager based on the identified gaps highlighted by each county. The Vice-President will launch the campaign on Friday, 8 May 2015.
- UNICEF continues to support the preparation of the national measles, polio and deworming campaign which runs from 8 to 14 May 2015 for children under five. 4,400 general community health volunteers (gCHV)/mobilizers have been trained across the country – 50 in each of the 88 health districts. A planning session was conducted with over 100 national Civil Society Organizations to consolidate broad-based support for the campaign. Door-to-door visits reached 28,141 households across the counties. 425 community meetings and group discussions on the upcoming immunization campaign, reached 27,354 men, 27,060 women, 22,566 children and 1,531 community leaders and elders. Misconceptions regarding the immunization campaign vaccines are being addressed across the counties. Notably, some people are wrongly associating this campaign with Ebola vaccines. UNICEF and its partners continue to address this by rigorous relevant messaging through community engagement and radio.

- The training of gCHVs for long-lasting insecticide-treated nets (LLITN) distribution has been completed. The door-to-door LLITN distribution kicked off this week starting in Montserrado and will be followed by other counties. The distribution will continue for one month. More than 2 million nets will be distributed. The target population are pregnant women and children under five.
- From September 2014 to April 2015, 3,061 severely malnourished children below 5 years old were identified and admitted to the Integrated Management of Acute Malnutrition (IMAM) program. 91 percent of these severely malnourished children were cured.
- 38 infants below 12 months affected by Ebola received special nutrition support and care from December 2014 to April 2015. 58 percent of infants had reached 12 months and were discharged from the programme however, close screening for malnutrition among these children continues.

Water, Sanitation and Hygiene (WASH)

WASH in Communities

- Implementation of community WASH programme has been on-going. During the reporting period, the construction of two hand dug wells was completed: one with a 14ft water column in Juluzon community and one with a 15ft water column in Jarwodee community. The water quality test conducted has indicated that the wells are fit for human consumption. An additional five hand dug wells are under construction in Zleh Town (in City Hall B, Airfield B, Karhn Quarter, City Hall and Airfield A communities)

WASH-in-Schools (WinS) & Health Facilities

- The WASH-in-School programme was officially launched by the President of Liberia on 29 April 2015 at Charles DB King’s School. The event was attended by various ministers, NGO partners and UN officials. During the event, UNICEF handed over 2 million bars of soap donated by UNILEVER to be distributed among all schools in Liberia. The school also benefitted from repair of one hand pump and construction of a group hand washing facility (done by UNICEF).
- The regular school WASH programme is continuing in various counties. During the reporting period, hand dug wells were completed, including water quality testing, one in Juluzon Public School (15ft water column) and one in Jarwodee Junior High school (14ft water column). School latrines have been completed in Jarwoodee Junior School (five cubicles) and Jarwoodee Elementary School (five cubicles). Construction of latrines is on-going in Lutheran school in Zleh Town. In River Gee, construction and rehabilitation of school latrines and establishment of school health clubs has been completed in all eight schools planned in Gbeapo and Chedepo districts. Work on hand dug wells is on-going in the two districts.
- The meeting on upgrading of health facilities in South-East was held in Nimba on 28 April 2015 and various partners attended, including UNICEF, UNOPS, Welthungerhilfe, Partners in Health, American Refugee Committee. The MoH will share standard designs of facilities with partners and provide a priority list of health centres by end of the week. UNICEF will be responsible for all WASH interventions in the health facilities.

Sanitation and Hygiene Promotion

- The National Technical Coordinating Unit (NTCU) monthly meeting was held on 30 April 2015 and chaired by the new Chairperson Mr. J. Leahown Tokpah. Among the matters discussed were: decentralisation of verification of open defecation free (ODF) communities to be done at county level to avoid delay in the declaration of communities attaining ODF status; Ministry of Health to inform partners about the change in structure at the NTCU; and NTCU to communicate to county authorities about the resumption of Community-Led Total Sanitation (CLTS) activities.
- During the week, 2,335 hygiene kits have been delivered to Grand Cape Mount for distribution and the process of assembling and dispatching is continuing.
Urban WASH

- UNICEF, through their implementing partner CODES, have commenced the construction of six user friendly and gender sensitive school latrine cubicles; four latrine cubicles for the market; and eight latrine cubicles for Careysburg City (peri urban Monrovia).
- UNICEF, with support from OFDA, has donated six solid waste collection trucks to the city of Monrovia in response to the challenge of solid waste collection and disposal in the city. On average, approximately 630 metric tonnes of solid waste is generated every day in Monrovia out of which only 288 metric tonnes (representing 45.7 percent) is collected and well managed. Through this donation, the trucks will make a significant contribution towards improved management of the uncollected solid waste.

Recovery and resilience building

- Request for Expression of Interest from qualified water/civil engineering consultancy firms is being finalized. The objective, in line with MoH expectations, is to assess, identify and develop budgeted site specific requirements and cost estimates for the different WASH components that UNICEF is engaged in.

Social Mobilisation

UNICEF’s supported social mobilization activities are fully engaged for the upcoming national integrated measles, polio and deworming campaign:
- UNICEF hosted an orientation meeting with media executives from 22 radio stations and five newspapers in Montserrado County on the expected role of the Media during this campaign.
- District level orientation meetings with 456 gCHVs/frontline mobilisers were conducted in several counties – 300 in River Cess, 85 in Bomi and 71 in Nimba.
- UNICEF and its partners conducted training for 624 gCHVs/mobilisers - 60 in Grand Gedeh, 85 in Bomi, 230 in Sinoe, 189 in Montserrado, 60 in Gbarpolu - and 450 traditional leaders, chiefs and other community leaders - 270 in Grand Gedeh, and 180 in Maryland. Additionally, 121 health practitioners (vaccinators) were trained - 101 in Maryland and 20 in Grand Cape Mount.
- 4,400 gCHVs/mobilizers have been trained/oriented across the country – 50 in each of the 88 health districts.
- A planning session was conducted with over 100 national Civil Society Organizations to consolidate broad-based support for the campaign.
- Across the country, coordination meetings continue to be held with county health teams and partners on both county and district levels.
- UNICEF continues to monitor the airing of immunization messages across national and community radios in all counties.
- UNICEF will deploy 597 gCHVs across the 22 zones in Montserrado County and liaised with the Liberian National Red Cross Society to start the social mobilization activities on 5 May with 1800 volunteers.
- Door-to-door visits reached 28,141 households across the counties. 425 community meetings and group discussions on the upcoming immunization campaign, reached 27,354 men, 27,060 women, 22,566 children and 1,531 community leaders and elders.
- Misconceptions regarding the immunization campaign vaccines are being addressed across the counties. Notably, some people are wrongly associating this campaign with Ebola vaccines. UNICEF and its partners continue to address this by rigorous relevant messaging through community engagement and radio.

Partnership and Humanitarian Coordination

The UN Country Team (UNCT), through the UN Resident Coordinator, has responsibility for coordinating the inter-agency support to the Government. This includes activating the humanitarian clusters necessary to coordinate support to specific sectors. Within this cluster framework, UNICEF is the lead UN agency for the Social Mobilization, WASH and Education clusters, as well as the Nutrition and Child Protection sub-clusters of the response.

Nutrition Cluster

- The final report of the Rapid Nutrition Assessment was endorsed by cluster members including the Ministry of Health.
- Ministry of Health started internal discussions and consultation for the National Nutrition Survey planned for July and August 2015.

Media Coverage

- UNICEF Representative Sheldon Yett: Handover of trucks to Monrovia City Corporation (allAfrica.com)
- Orlando Bloom, UNICEF Global Ambassador, visits Liberia: Ground Zero for Ebola (CNN)
- UNICEF delegation conducts interactive working visit in several Ebola affected communities (allAfrica.com)
### Funding

**Funding Requirements, as defined in Humanitarian Appeal of December 2014 (for 6 months)**

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Ebola Requirements Sept 2014 (USD)</th>
<th>Revised Ebola Requirements Dec 2014 (USD)</th>
<th>Funds received*</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>C4D/Social Mobilization</td>
<td>12,915,145</td>
<td>22,588,357</td>
<td>13,850,885</td>
<td>8,737,472</td>
</tr>
<tr>
<td>Nutrition</td>
<td>7,289,263</td>
<td>10,736,999</td>
<td>3,740,116</td>
<td>6,996,883</td>
</tr>
<tr>
<td>Health and HIV/AIDS</td>
<td>25,546,857</td>
<td>70,812,058</td>
<td>43,864,429</td>
<td>26,947,629</td>
</tr>
<tr>
<td>WASH</td>
<td>22,405,806</td>
<td>45,378,144</td>
<td>29,252,607</td>
<td>16,125,537</td>
</tr>
<tr>
<td>Child Protection</td>
<td>8,079,681</td>
<td>12,239,127</td>
<td>13,291,579</td>
<td>-1,052,452</td>
</tr>
<tr>
<td>Education</td>
<td>4,593,643</td>
<td>14,532,090</td>
<td>9,532,800</td>
<td>4,999,290</td>
</tr>
<tr>
<td>Cross Sectoral</td>
<td>4,981,002</td>
<td>7,667,614</td>
<td>5,757,141</td>
<td>1,910,473</td>
</tr>
<tr>
<td>Cluster/Sector Coordination</td>
<td>0</td>
<td>3,117,296</td>
<td>2,601,665</td>
<td>515,631</td>
</tr>
<tr>
<td>Funds under allocation</td>
<td></td>
<td>2,783,951</td>
<td></td>
<td>-2,783,951</td>
</tr>
<tr>
<td>Recovery cost</td>
<td></td>
<td>8,970,371</td>
<td></td>
<td>-8,970,371</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>85,811,397</strong></td>
<td><strong>187,071,685</strong></td>
<td><strong>133,645,545</strong></td>
<td><strong>53,426,140</strong></td>
</tr>
</tbody>
</table>

*Programmable amount

### Programme Results

**UNMEER and UNICEF Results 6 May 2015**

**INDICATORS**

**EPIDEMIOLOGY**

<table>
<thead>
<tr>
<th>Pillar/Sector</th>
<th>UNICEF</th>
<th>Pillar/Sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of EVD cases with onset in the past week¹</td>
<td>105/10,400</td>
<td>105/10,400</td>
</tr>
<tr>
<td>Percentage of county Social Mobilization taskforces (SMT) reporting on the dashboard each week</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>Percentage of counties with list of identified key religious leaders (including priests, imams, pastors, tribal leaders) or community groups who promote safe funeral and burial practices according to standard guidelines</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>Percentage of counties with at least one security incident or other form of refusal to cooperate in past week</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**COMMUNICATION FOR DEVELOPMENT**

<table>
<thead>
<tr>
<th>Pillar/Sector</th>
<th>UNICEF</th>
<th>Pillar/Sector</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of Community Care Centers (CCCs), Rapid Isolation Treatment for Ebola (RITE)/ Mobile CCC, Interim Care Centers (ICC) and Transit Centers (TC) functional against target set for the current reporting period²</td>
<td>35/35</td>
<td>45/52</td>
</tr>
</tbody>
</table>

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¹ Report based on MoH SitRep # 334, 19 April 2015.
² Number will remain the static until the process of decommissioning ETUs and decision on CCC facilities conversion is finalized.
³ As of this week three (3/12) UNICEF CCCs have been converted into Isolation facilities in Maryland (for infectious disease), Grand Gedeh (TB and Measles) and Sinoe. These facilities can be immediately converted back into EVD isolation facilities as needed.
### Percentage of Community Care Centers (CCCs) established after a community dialogue process aligned with Global SOPs or according to norms established in country

<table>
<thead>
<tr>
<th></th>
<th>100%</th>
<th>100%</th>
<th>12</th>
<th>22</th>
<th>100%</th>
<th>100%</th>
</tr>
</thead>
</table>

#### WASH

Percentage of all Community Centers (CCCs), Rapid Isolation Treatment for Ebola (RITE), Interim Care Centers (ICC) and Transit Centers (TC) provided with essential WASH services

|                          | 100%  (8 ETUs, 12 CCCs, 19 RITEs, 2 holding centers/ TCs 2 ICCs) | 100%  (27 ETUs, 25 CCCs, 4 ICCs, 19 RITEs, 2 holding centers) | 41/43  (8 ETUs, 19 RITEs, 2 holding centers, 12 CCCs) | 56/79  (13 ETUs, 22 CCCs, 19 RITEs, 2 holding centers) | 95%   | 71%   |

#### PROTECTION

Percentage of EVD-affected children provided with care and support, including psychosocial support

|                          | 100% | 100% | 4,572 | 4,572 | 61%   | 61%   |

Percentage of children who are without a primary care giver due to EVD reintegrated with their families or provided with appropriate alternative care.

|                          | 100% | 100% | 62/64 | 62/64 | 97%   | 97%   |

### UNICEF Liberia Humanitarian Performance Monitoring Indicators

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>TOTAL UNICEF RESULTS</th>
<th>Results</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Households reached by social mobilization teams</td>
<td>500,000</td>
<td>480,402</td>
<td>96%</td>
<td></td>
</tr>
<tr>
<td>Households reached with Inter-Personal Communication for the National Measles campaign</td>
<td>100,000⁵</td>
<td>28,141⁶</td>
<td>28%</td>
<td></td>
</tr>
<tr>
<td>HEALTH</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ebola treatment/care centers equipped with medical supplies</td>
<td>52</td>
<td>28</td>
<td>54%</td>
<td></td>
</tr>
<tr>
<td>Health facilities equipped with essential commodities for maternal, new-born and child health care and infection prevention and control</td>
<td>470</td>
<td>270</td>
<td>57%</td>
<td></td>
</tr>
<tr>
<td>NUTRITION</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of Ebola patients who received nutrition support in UNICEF supported ETUs and CCCs</td>
<td>94%</td>
<td>988/1,088</td>
<td>91%</td>
<td></td>
</tr>
<tr>
<td>Percentage of children in previously identified Ebola hotspots admitted for SAM treatment</td>
<td>4,000</td>
<td>2,357</td>
<td>59%</td>
<td></td>
</tr>
<tr>
<td>WASH</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Households equipped with hygiene kits in Ebola-affected areas</td>
<td>150,000</td>
<td>59,768</td>
<td>40%</td>
<td></td>
</tr>
<tr>
<td>EDUCATION</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teachers trained on Ebola awareness and prevention</td>
<td>6,000</td>
<td>5,995</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>District Education Officers (DEO) trained on the use of the EVD Infection Prevention and Control (IPC) kits for the safe reopening of schools</td>
<td>98</td>
<td>98</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>

Next SitRep: 13 May 2015

Web: UNICEF Liberia
Twitter: @UNICEF_Liberia
Facebook: Liberia.Unicef
Soundcloud: Unicef-liberia
YouTube: UNICEFLiberia

Who to contact for further information:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
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<td>Sheldon Yett</td>
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</tr>
<tr>
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<td>Cell: +231-770-26-7926 Email: <a href="mailto:dkiernan@unicef.org">dkiernan@unicef.org</a></td>
</tr>
</tbody>
</table>

⁴ The Government has defined the number of children affected as quarantined, orphaned, unaccompanied and separated children (UASC), in treatment and discharged. Orphans are children who have lost one or both parents due to the Ebola virus Disease. The current denominator being used is estimated using the following assumption: for every adult that dies 3 children are orphaned [Liberia’s fertility rate is 5 children per woman], with 2,500 adult deaths to date, the number of orphaned children is estimated to be around 7,500.

⁵ This is the minimum target as preparation is set in place for the National Measles Vaccination Campaign in light of the impact of EVD on the health system and the restoration of general confidence in the public health service.

⁶ Results for the first week of intensive door-to-door IPC for the National Measles campaign.