HIGHLIGHTS

- According to the Ministry of Health, as of 23 February 2015, the cumulative total of suspected, probable and confirmed cases of Ebola Virus Disease (EVD) in Liberia stood at 9,265, with 4,057 related deaths. Case incidence declined from a peak of over 300 new confirmed cases per week in August and September 2014 to only two new confirmed EVD cases in the past week in Montserrado County.
- 5,779 children have been identified as directly affected by EVD (3,798 identified by the government and the rest by partner organisations).
- The Liberian government officially reopened its borders with Sierra Leone and Guinea on 22 February 2015.
- Schools in Liberia officially started reopening on 16 February 2015. However, not all schools are in full compliance with the Safe School Reopening Protocols at this point and due to confused messages about the start date, some schools are opening on 2 March 2015.
- Efforts are underway to collect data on the current status of schools using RapidPro SMS technology. Education Cluster partners are verifying the last mile delivery of Infection Prevention and Control (IPC) kits to schools.
- Training of teachers, administrators and Parent-Teacher Associations (PTA) members on the implementation of the Protocols is ongoing in schools that have not yet opened.
- Key awareness messages on school reopening protocols continue to air on 44 community radio stations throughout the country.
- 240 suspected cases of whooping cough were reported in Barrobo and Karluway districts in Maryland County. Maryland County Health Team (CHT) was able to ensure treatment and prophylaxis for cases and contacts. UNICEF continues to support the CHT for tracing cases and contacts from different communities.
- Since January 2015, 39 suspected measles cases in Montserrado County have been reported. An integrated measles and polio campaign for children aged 6 months - 10 years is scheduled for 10 to 16 April 2015. UNICEF is working closely with the Ministry of Health (MoH) and partners to provide technical advice and guidance for the effective implementation of measles campaign in the country. UNICEF is taking the lead in developing the social mobilization and communication package for the campaign.
- UNICEF is currently in the process of developing standard operating procedures for cross-border social mobilisation interventions. The recent reopening of Liberia’s international borders makes this effort ever more important.
- Last week, 20 tons of health and nutrition supplies were delivered to implementing partners in five counties to support the restoration of basic health services effort.

SITUATION IN NUMBERS

As of 23 February 2015¹

9,265
Cases of Ebola
(3,153 confirmed)

4,057
Deaths

5,779
Children directly affected

2 million+
Children living in affected areas

372
Cases and 180 deaths among health care workers

UNICEF funding needs until June 2015
USD 187.1 million

Funding gap
USD 56.1 million

¹Data are based on official information reported by the Liberian health ministry up to 23 February 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, as of 23 February 2015, the cumulative total of suspected, probable and confirmed cases of Ebola Virus Disease (EVD) in Liberia stood at 9,265, with 4,057 related deaths. Case incidence declined from a peak of over 300 new confirmed cases per week in August and September 2014 to only two new confirmed EVD cases in the past week in Montserrado County.

The Liberian government officially reopened its borders with Sierra Leone and Guinea on 22 February 2015.

Summary Analysis of Programme Response

Education

- Schools in Liberia officially started reopening on 16 February 2015. However, not all schools are in full compliance with the Safe School Reopening Protocols at this point and due to confused messages about the start date, some schools are opening on 2 March 2015.
- Efforts are underway to collect data on the current status of schools using RapidPro SMS technology. Meanwhile, Education Cluster partners are verifying the last mile delivery of IPC kits to schools.
- Training of teachers, administrators and PTA members on the implementation of the Protocols is ongoing in schools that have not yet opened.
- Key awareness messages on school reopening protocols continue to air on 44 community radio stations throughout the country.

Social Mobilisation

- UNICEF ramped up its social mobilisation efforts for the countrywide reopening of schools effort. Across all counties, UNICEF visited selected schools to encourage parents, students and communities to follow school re-opening safety protocols. In Paynesville, UNICEF joined partners in a meeting with administrators and principals of 30 schools to address school reopening needs as only five schools had received hygiene supplies and training on EVD prevention. To address this, a training of trainers (TOT) training involving school principals has been planned for Wednesday this week.
- UNICEF is currently in the process of developing standard operating procedures for cross-border social mobilisation interventions. The recent reopening of Liberia’s international borders makes this effort ever more important.
- A total of 100 key religious leaders across the country were trained as trainers on EVD prevention, safe and dignified burials, and protocols for safe school reopening. They will train another 2,000 religious leaders across all the country’s 89 districts.
- Last week, door-to-door visits by social mobilization teams reached 15,090 households across all 15 counties. 361 community meetings and group discussions aimed at promoting EVD prevention behaviours were conducted, reaching 16,663 men, 21,871 women, 13,195 children and 1,176 community leaders and elders.

Trends, gaps and milestones

- In Montserrado, secret burials are reportedly still being conducted in Samukai Town Zone 1600; UNICEF has since enhanced community engagement efforts in the area.
- Across all counties, limited knowledge on the back to school protocols was observed coupled with lack of instructional materials in some of the counties. Through training and in coordination with partners – UNICEF has planned more orientation/trainings involving teachers, parents and stakeholders – including distribution of printed copies of the protocols.
- Heavy rains, bad road network and lack of cell phone coverage has been a challenge in reaching some of the far-located communities.
- In Margibi, UNICEF participated in a meeting that brought together county health teams from Grand Bassa, Bong, Gbarpolu and Margibi to discuss inter-county border movements. Such a meeting will be held monthly on a rotational basis.
- UNICEF continued preparations for social mobilization interventions aimed at supporting and promoting the imminent measles and polio vaccination campaigns.

Child Protection

- 5,779 children have been identified as affected by EVD (3,798 identified by the government and the rest by partner organizations). The government has defined the affected children as quarantined, those who have lost
one or both parents, unaccompanied and separated children (UASC), in treatment and discharged. The Child Protection sub-Cluster estimated that as many as 7,500 children may have lost one or both parents due to EVD. UNICEF is working with the government and NGOs to train and engage additional social workers to identify and ensure that all the children who have lost one or both parents are in a protected family-based environment, for example in a kinship arrangement, thus preventing institutionalization in orphanages.

- UNICEF provides one-time cash transfer to the families that take the responsibility to care for children who have lost one or both parents. To date, a total of 990 children who have lost one or both parents due to EVD and are living in foster and kinship care received a one-time cash grant meant to serve as immediate recovery support. Payments continue for the remaining 1,610 children that have been documented so far.
- In the UNICEF-supported Transit Center in Monrovia – established to provide care for children who survived EVD but have no known relative or caregiver to return to after being treated – there are currently two children receiving psychosocial support, case management, family tracing and reunification services.
- Three children (two boys, one girl) are currently under observation for 21 days in the UNICEF-supported Jatonno Interim Care Center (ICC).
- UNICEF provided 12 laptops to the Ministry of Gender, Children and Social Protection (MoGCSP) to fast track the input of data on children affected by EVD into the Child Protection Information Management System. The encoding of data started this week.
- UNICEF supported the establishment of a referral pathway for victims of sexual and gender-based violence (SGBV) in West Point and New Kru Town communities. The strengthening of the referral pathway between health facilities, police and the legal system addresses the high number of SGBV/rape cases reported in these two communities.
- UNICEF is currently conducting an assessment of orphanages in Montserrado. In the eleven orphanages (home to a total of 330 children who have lost one or both parents) assessed so far, it was found that some of the orphanages admitted children who have lost one or both parents without accreditation by the MoGCSP and that some of the ‘Ebola orphans’ are not registered with the MoGCSP social workers. UNICEF is following up and referring these cases to the MoGCSP for registration and follow up.

Health and Nutrition

- 240 suspected cases of whooping cough were reported in Barrobo and Karluway districts in Maryland County. Maryland County Health Team (CHT) was able to ensure treatment and prophylaxis for cases and contacts. UNICEF continues to support the CHT for tracing cases and contacts from different communities.
- Since January 2015, 39 suspected measles cases in Montserrado County have been reported. An integrated measles and polio campaign for children aged 6 months - 10 years is scheduled for 10 to 16 April 2015. UNICEF is working closely with MoH and partners to provide technical advice and guidance for the effective implementation of measles campaign in the country. UNICEF is taking the lead in developing the social mobilization and communication package for the campaign.
- 166,985 (30 per cent) children under 23 months old were reached during the second round of periodic intensification of routine immunization (PIRI). The highest coverage was recorded in Sinoe county (86 per cent) and the lowest coverage in Grand Bassa county (17 per cent). According to field-monitoring reports, the concurrent Ebola vaccine trial in the same week created confusion and led to misperceptions around vaccines in general.
- 309 severely malnourished children in Bong, Monsterrado, and Nimba Counties were identified and admitted in the Integrated of Acute Malnutrition (IMAM) program.
- 86 per cent of patients admitted in the Ebola Treatment Centers (ETU) in Bomi, Grand Cape Mount, Margibi, and Monsterrado Counties were provided with nutritional care and support.
- 73 of the 93 Nutrition treatment units are now functional country wide (78 percent) comparing to 93 functional before the crisis out of 127 planned to be functional in 2015.

Water, Sanitation and Hygiene (WASH)

- During an assessment of WASH facilities in the quarantined communities of New Town and Zuma Town in Monrovia, an immediate need was identified. UNICEF is providing drinking water bottles for 21 days and hygiene kits to the seven affected families and will also provide water purification tablets as a long term measure. UNICEF will also support the Ministry of Public Works in rehabilitating existing hand dug wells and drilling a borehole.
- The assessment of WASH in health facilities is ongoing. 85 trained enumerators have started actual data collection in all 15 counties using (UNICEF-provided) mobile phones equipped with AKVO flow software. The enumerators are expected to start sending data to the central location in Monrovia from tomorrow onwards.
**UNICEF continued to support the construction of WASH facilities in Community Care Centers (CCC):** Drilling of boreholes is underway in Gbeapo (River Gee) and Morlaquilla (Gbarpolu), and completed in Karnplay (Nimba) and Keita (Grand Cape Mount).

**Supply and Logistics**
- 2,800 back sprayers remaining from Back to School kits were delivered to 48 districts in seven counties (Gbarpolu, Grand Kru, Lofa, Maryland, Nimba, Rivergee and Sinoe).
- Follow up visits were made to monitor the last mile delivery of Back to School kits to 45 schools in Montserrado County.
- The remaining components of water treatment plants were delivered to Kpayeakwelleh (Gbarpolu) and John Logan Town (Grand Bassa) and are ready for installation.
- 20 tons of health and nutrition supplies were delivered to implementing partners in five counties: Lofa (IRC), Montserrado (Merci, AHA, MTI, MDM) and to the County Health Teams in Gbarpolu, Grand Cape Mount and Margibi to support the restoration of basic health services effort.

**Trends, gaps and milestones**
- Poor road conditions, damaged bridges and rain affected delivery lead times for supply deliveries.

**Human Resources**
In an effort to strengthen EVD response efforts, UNICEF currently has 111 staff deployed in Monrovia and 31 at the field/county level, in addition to engaging 2,878* government and non-government personnel across 15 counties. These include staff on fixed term and temporary contracts, UNICEF staff members on loan from other country offices, personnel support from stand-by partners, third-party contractors, subcontractors and volunteers.

Below is a snapshot from 18 February 2015, notwithstanding regular field monitoring and support visits to the field on a daily basis.

<table>
<thead>
<tr>
<th>Type of staff</th>
<th>Number of Personnel in Capital</th>
<th>Number of Personnel in the Field</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Member (FT, TA for IP and Nationals)</td>
<td>111</td>
<td>31</td>
</tr>
<tr>
<td>Surge (UNICEF staff on mission and staff through standby partners)</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>Third-party contractors (deployed for EVD Response, financially supported by UNICEF)</td>
<td>0</td>
<td>2,878</td>
</tr>
<tr>
<td>Total as of 18 February 2015</td>
<td>125</td>
<td>2,909</td>
</tr>
</tbody>
</table>

* In addition, 5,600 teachers were trained and engaged as social mobilisers, not included in these calculations.

**Media Coverage**
UNICEF Representative Sheldon Yett on how UNICEF is supporting schools reopening in Liberia (Inquirer and All Africa)
UNICEF Representative Sheldon Yett on UNICEF support to reopening of schools in Liberia (The News)
Innovation Lead Lee Kironget on the launch of u-report in Paynesville (Heritage, Kiss FM)
Communications Specialist Helene Sandbu Ryeng on UNICEF support to reopening of schools in Liberia (TVC News)
UNICEF Representative Sheldon Yett on reopening of schools in Liberia (UNMIL Radio)

Communications Specialist Helene Sandbu Ryeng on getting Ebola cases down to zero in Liberia (TVC News)
Communications Specialist Rukshan Ratnam on schools reopening and need for implementation of protocols (Radio Nimba)
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></td>
<td>$</td>
<td>$</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>C4D/Social Mobilization</td>
<td>12,915,145</td>
<td>22,588,357</td>
<td>13,451,325</td>
<td>9,137,032</td>
</tr>
<tr>
<td>Nutrition</td>
<td>7,289,263</td>
<td>10,736,999</td>
<td>3,538,369</td>
<td>7,198,630</td>
</tr>
<tr>
<td>WASH</td>
<td>22,405,806</td>
<td>45,378,144</td>
<td>29,211,676</td>
<td>16,166,468</td>
</tr>
<tr>
<td>Child Protection</td>
<td>8,079,681</td>
<td>12,239,127</td>
<td>12,640,473</td>
<td>-401,346</td>
</tr>
<tr>
<td>Education</td>
<td>4,593,643</td>
<td>14,532,090</td>
<td>10,856,460</td>
<td>3,675,630</td>
</tr>
<tr>
<td>Cross Sectoral</td>
<td>4,981,002</td>
<td>7,667,614</td>
<td>3,840,100</td>
<td>3,827,514</td>
</tr>
<tr>
<td>Cluster/Sector Coordination</td>
<td>0</td>
<td>3,117,296</td>
<td>2,212,015</td>
<td>905,281</td>
</tr>
<tr>
<td>Funds under allocation</td>
<td>1,008,578</td>
<td>-1,008,578</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recovery cost</td>
<td>8,856,640</td>
<td>-8,856,640</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>85,811,397</td>
<td>187,071,685</td>
<td>130,914,256</td>
<td>56,157,429</td>
</tr>
</tbody>
</table>

*Programmable amount

**UNICEF received from OFDA a total of USD 47,863,314 specifically for Health and WASH support to ETUs and CCCs. These figures are reflected above in Health and WASH sectors.

Programme Results

UNMEER and UNICEF Results 25 February 2015

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>TARGETS</th>
<th>TOTAL RESULTS</th>
<th>% REACHED</th>
<th>TARGET REACHED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UNICEF</td>
<td>Pillar/Sector</td>
<td>UNICEF</td>
<td>Pillar/Sector</td>
</tr>
</tbody>
</table>

EPIEMIOLOGY

Percentage of EVD cases with onset in the past week¹

- 132/9169 132/9169 1% 1%

COMMUNICATION FOR DEVELOPMENT

Percentage of county Social Mobilization taskforces (SMT) reporting on the dashboard each week

100% (15) 100% (15) 15 15 100% 100%

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 guidelines²

100% (15) 100% (15) 2 2 13% 13%

¹ Report based on MoH SitRep # 282 released on 21 February 2015.
² Trained members of the Inter-Religious Council of Liberia (IRCL) has started rolling out training activities for other religious leaders in 15 counties on safe funeral and burial practices according to standard guidelines. Religious leaders who are in partnership with UNICEF are expected to start active promotion of safe funeral and burial in the coming weeks and to report on them through the RapiPro platform.
| Percentage of counties with at least one security incident or other form of refusal to cooperate in past week | 0%  
(0/15) | 0%  
(0/15) | 1 | 1 | 7% | 7% |
|---|---|---|---|---|---|---|
| CCC | 100%  
(13 CCCs, 19 RITEs, 2 ICCs, 2 TCs/holding facility) | 100%  
(26 CCCs, 19 RITEs, 4 ICCs, 4 TCs/holding facility) | 33/36  
(19 RITE kits, 2 ICC, 2 TCs, 10 CCCs) | 43/53  
(20 CCCs, 19 RITEs, 2 TCs, 2 ICCs) | 92% | 81% |
| Percentage of Community Care Centers (CCCs) established after a community dialogue process aligned with Global SOPs or according to norms established in country | 100%  
(13 CCCs) | 100%  
(26* CCCs) | 10  
(19 RITE kits, 2 ICCs, 2 TCs, 10 CCCs) | 20 | 100% | 100% |
| WASH | 100%  
(27 ETUs 13 CCCs, 19 RITEs, 2 holding centers/TCs, 2 ICCs) | 100%  
(27 ETUs 26 CCCs, 4 ICCs, 19 RITEs, 4 TCs/holding centers) | 39/61  
(8 ETUs, 19 RITEs, 2 holding centers, 10 CCCs) | 54/80  
(13 ETUs, 20 CCCs, 19 RITEs, 2 holding centers) | 64% | 68% |
| PROTECTION | Percentage of EVD-affected children provided with care and support, including psychosocial support | 100% | 100% | 3,798 | 3,798 | 51% | 51% |
| 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% | 55/57 | 55/57 | 96% | 96% |

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3 Target has been revised for this indicator as incident(s) of refusal or non-cooperation has been maintained at very low levels as a result of social mobilization activities, and in at least three weeks of (non-consecutive) reporting had zero incident.

4 Changes in the numbers is brought about by the last approved number of ICCs, RITEs and other similar facilities planned by the MoH. The sudden increase of RITE facilities is triggered by government decision to add an additional 9 RITEs for the prepositioning and/or immediate deployment and set-up of EVD treatment operation in smaller outbreak areas in the counties.

5 All completed CCCs were put up following community dialogue process.

6 The denominator is based on the updated approved number of ICCs, RITEs and other similar facilities being planned by the MoH.

7 UNICEF supports the installation of WASH facilities in CCCs and other Ebola facilities that are not necessarily built by UNICEF but by other partners.

8 The numerator is solely based on figures from the MoH. The government wants to verify the cases of children reported by other partners first before including it in the national tally. 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 (EVD).

9 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.

9 The denominator has been stable for the last six weeks as there have not been any new registration of EVD affected children without primary caregiver. But additional children has been provided or reunited with caretakers in the community.
<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>TOTAL UNICEF RESULTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Households reached by social mobilization teams&lt;sup&gt;10&lt;/sup&gt;</td>
<td>250,000</td>
<td>314,021</td>
</tr>
<tr>
<td>HEALTH</td>
<td></td>
<td>(126%)</td>
</tr>
<tr>
<td>Ebola treatment/care centers equipped with medical supplies&lt;sup&gt;11&lt;/sup&gt;</td>
<td>52</td>
<td>26</td>
</tr>
<tr>
<td>Health facilities equipped with essential commodities for maternal, new-born and child health care and infection prevention and control&lt;sup&gt;12&lt;/sup&gt;</td>
<td>470</td>
<td>270</td>
</tr>
<tr>
<td>NUTRITION</td>
<td></td>
<td>(57%)</td>
</tr>
<tr>
<td>Percentage of Ebola patients who received nutrition support in UNICEF supported ETUs and CCCs&lt;sup&gt;13&lt;/sup&gt;</td>
<td>94%</td>
<td>899/1,046</td>
</tr>
<tr>
<td>Percentage of children residing in Ebola hotspots admitted for SAM treatment&lt;sup&gt;14&lt;/sup&gt;</td>
<td>4,000</td>
<td>1,595</td>
</tr>
<tr>
<td>WASH</td>
<td></td>
<td>(39%)</td>
</tr>
<tr>
<td>Households equipped with hygiene kits in Ebola-affected areas</td>
<td>150,000</td>
<td>53,014</td>
</tr>
<tr>
<td>EDUCATION</td>
<td></td>
<td>(35%)</td>
</tr>
<tr>
<td>Teachers trained on Ebola awareness and prevention</td>
<td>11,000</td>
<td>5,995</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&lt;sup&gt;15&lt;/sup&gt;</td>
<td>98</td>
<td>98</td>
</tr>
</tbody>
</table>

Next SitRep: 4 March 2015

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

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<sup>10</sup> Numerator has now exceeded old target, as social mobilization activities get underway in more areas with the mobilization of district level coordinators in all 15 counties. A revised target is still being studied along with new targeted C4D communication strategies for the transition phase.

<sup>11</sup> New deliveries of medical supplies to four ETUs have been recorded in the last 17 days; a ready to deploy RITE kit was also delivered in Grand Cape Mount as part of the support to the rapid response to new confirmed EVD cases in the area.

<sup>12</sup> Facilities covered by UNICEF PCAs supplied with essential commodities.

<sup>13</sup> 11 out of 14 ETUs provided with appropriate nutrition supplies. Grand Cape Mount, MMU and Chinese ETU have their own procurement and do not receive nutrition supplies from UNICEF. The target for this indicator was revised based on the Nutrition Results Matrix.

<sup>14</sup> While Ebola hotspots are now mostly concentrated in Margibi and Montserrado counties, they are both part of the six (6) priority counties for SAM treatment, which includes Bong, Nimba, Grand Cape Mount and Lofa. These are the original six counties where high number of EVD cases where recorded during the height of the EVD crisis. Of the total SAM cases, 222 are from Montserrado, 70 from Bong and 17 from Nimba.

<sup>15</sup> This indicator is developed in conjunction with the Education intervention on the rollout of the “Protocol on for Safe School Environments in the Ebola Outbreak in Liberia”.