Highlights

- According to the latest Ministry of Health and Social Welfare (MoHSW) Ebola Virus Disease (EVD) report dated 31 October 2014, the cumulative total of suspected, probable and confirmed cases of EVD in Liberia had grown to 6,525 from 6,267 since 25 October 2014. The addition of 258 cumulative cases over the six day period indicates an average growth rate of 43 cases per day, according to ministry data, which is down significantly from the growth rate seen a few weeks ago.
- 1,304 children (612 boys and 692 girls) have been identified as being affected by the Ebola crisis. The Government of Liberia 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.
- As a key partner on the Rapid Response Team with the health ministry, CDC and WHO, UNICEF recently conducted rapid assessments of “hot spots” – namely Grand Cru, Grand Bassa, Sinoe and Grand Cape Mount counties – to rapidly isolate and treat patients with symptoms of Ebola following clear infection control standards. Currently, two rapid response missions are underway in Gbarpolu and Bomi.
- UNICEF has been working hand-in-hand with youth in Liberia to launch U-report, an SMS/text-messaging-based tool that connects young people around the country to vital information and services. The end result is a two-way communication channel enabling citizens to report on the status of the Ebola situation in their local communities directly to the Liberian government, and for the government to respond in real-time with important information. At the launch this week, 50 U-reporters - young girls and boys in the densely populated slum of West Point - were the first to join the network.

Ebola statistics as of 31 October 2014*:

- 6,525 cases, including:
  - 2,447 confirmed
  - 1,627 probable
  - 2,451 suspected
- 2,697 total deaths
- 315 cases and 157 deaths among health care workers

Counties of highest incidence:
- Montserrado: 3,666
- Margibi: 1,158
- Lofa: 623
- Bong: 261
- Nimba: 318

UNICEF funding needs for the next six months:
- USD 64.7 million

UNICEF funding gap:
- USD 36 million

*Data are based on official information reported by the Liberian health ministry up to the end of 31 October. These numbers are subject to change due to ongoing recategorization, retrospective investigation and availability of laboratory results.
Situation Overview

EVD transmission remains persistent and widespread in Liberia. All administrative districts in Liberia have now reported at least one confirmed or probable case of EVD since the outbreak began. Transmission remains intense in Monrovia. Cases and deaths continue to be under-reported.

Liberia has reported 6,525 confirmed, probable, and suspected cases, and remains the country worst affected by the outbreak. The marked increase in the cumulative total number of cases compared with the situation report of 22 October 2014 results from a more comprehensive assessment of patient databases. The additional 3,792 cases have occurred throughout the epidemic period, not only since 22 October 2014.

There is some indication that the spread of EVD may be slowing in Liberia. Speaking on reported drop in the growth of new cases, WHO Assistant Director General Bruce Aylward noted that there had been a drop in the number of burials in Liberia and no increases in laboratory-confirmed cases. He did caution that it was premature to draw conclusions, and partner organizations including MSF have also been quick to warn that the outbreak is by no means under control, and that the global effort still needs to be accelerated.

It is possible that this reflects a true reduction in incidence. However, further data are needed to resolve this question. Liberia continues to report few confirmed cases. Laboratory data on recent confirmed cases may provide scope for deeper analysis not currently provided by the incidence data. The capacity to capture a true picture of the situation in Liberia remains hamstrung by underreporting of cases.

WHO estimates there is a need for 528 trained burial teams in the three countries with widespread and intense transmission. Currently, there are 50 trained teams on the ground in Liberia. This is being done in partnership with the International Federation of the Red Cross (IFRC), the key partner in the management of safe burials. Data on the proportion of burials that are safe and dignified are not yet available. This is partly due to the practice of burials taking place in secrecy, making it difficult to collect information on the true number of burials in each country. Understanding burial practices and engaging the community in decision-making are considered crucial in ending the practice of unsafe burials. Guidance on conducting safe and dignified burials in line with Muslim and Christian faiths is being finalized.

WHO reports that Ebola survivors have not found life easy on the other side. A phenomenon called "post-Ebola syndrome" has been noted in survivors, such as visual problems, body aches, headaches and extreme fatigue. The latter is making it difficult to take up their former lives, especially if it involved manual work as farmers, laborers and household managers. Ebola survivors and health workers regularly report being shunned by their communities. While some Ebola survivors have been branded as witches for surviving the disease, members of burial teams have faced calls for eviction from their homes.

Although the epidemic seems to register an apparent trend downwards, the underlying problems persist. The poor state of the health facilities prevent the population from seeking qualified help, while in certain communities EVD-denial still prevails. A strengthened response at village level and the permanence of the Community Care Centers (CCC) as health centers with qualified medical personnel were the main requests indicated by the local authorities. With the collapse of the health systems in the countries, immunization services have dropped dramatically. In the case of Liberia, there has been a 50-per-cent decrease in vaccinations.

The peak season for Lassa fever in West Africa is about to begin. The viral haemorrhagic fever has been largely forgotten in the Ebola crisis, and health workers are warning that they may not have the resources to deal with the disease if cases increase. At first sight the symptoms of Lassa are identical to Ebola. There can be bleeding, vomiting and fever. But whereas Ebola is a new outbreak, Lassa is a constant presence. Every year it infects from 300,000 to 500,000 people, killing up to 20,000.

Health and Nutrition

- As a key partner on the Rapid Response Team with the health ministry, CDC and WHO, UNICEF recently conducted rapid assessments of “hot spots” – namely Grand Cru, Grand Bassa, Sinoe and Grand Cape Mount counties – to rapidly isolate and treat patients with symptoms of Ebola following clear infection control
standards. Currently, two rapid response missions are underway in Gbarpolu and Bomi. The process involved working with County Health Teams, communities and partners to come up with local solutions including the setup of CCCs, providing technical assistance on water, sanitation and hygiene management, and advising on how to engage communities. As part of the response, UNICEF provided basic protective gear, supplies for infection control, sanitation supplies (chlorine, water tanks, etc.), oral rehydration salts (ORS) and tents to set up temporary structures serving as an Interim Community Care Centre.

- Supported by UNICEF, sufficient supplies to address the nutrition needs of patients in Ebola Treatment Units (ETU), CCCs and health facilities in Margibi for three months were delivered this week through Save the Children UK. These included 200 cartons of ready-to-use therapeutic food (RUTF), 87 packs of 100,000 IU vitamin A (Retinol), 12 packs of 200,000 IU vitamin A (Retinol), and 343 packs of antihelminthics drug Mebendazole.
- With UNICEF support, 50 health workers from seven Outpatient Therapeutic Program (OTP) treatment sites in Montserrat were trained last week by Action contre la faim. Health workers from 11 additional OTP sites in Montserrat will be trained in the coming weeks.

**WASH**

- The completed Ministry of Defence Ebola Treatment Unit was handed over to the Liberian government last week. In addition, UNICEF is supporting water trucking to this ETU on need basis to address the problem of low yields from boreholes and intermittent supply from the city water supply network.
- UNICEF is supporting the on-going construction of the Ebola Treatment Unit located near Monrovia’s SKD Stadium, including the drilling of a new borehole to augment supply from the city mains. In addition, UNICEF is supporting ongoing repairs in the Island Clinic ETU estimated to be completed next week.
- UNICEF is working with key partners to implement a comprehensive package of water supply, sanitation facilities and hygiene-related interventions in 65 Community Care Centers across the country. UNICEF is in the process of procuring the necessary supplies.
- UNICEF is distributing hygiene kits to benefit an additional 10,500 households in Margibi County this week adding to the 15,579 families in Monrovia in previous weeks as part of UNICEF’s efforts to promote hand washing at the household level, as a key pillar to stopping the Ebola transmission.

**Communication for Development (C4D)**

- In the last week, UNICEF County Mobilisation Coordinators reached 10,276 households through door-to-door visits; and 52,942 community members and 865 traditional leaders in high transmission counties through town hall meetings and group discussions focusing on preventive behaviours addressing key modes of transmission.
- Last week, UNICEF trained county health teams and key implementing partners from five counties (Grand Bassa, Lofa, Gbarpolu, Rivercess and Grand Cape Mount) on community engagement to complement the establishment of CCCs.
- UNICEF, along with National Social Mobilisation Committee partners, conducted focus group discussions and key informant interviews to finalise a comprehensive set of key messages on safe and dignified burials that will be utilized by all local partners when engaging with communities.
- UNICEF donated nine motorbikes to the Ministry of Health and Social Welfare to facilitate social mobilisation interventions in an effort to address mobility challenges confronting county mobilisation coordinators posed by inadequate public transportation and poor road conditions after the rainy season.

**Child Protection**

- Last week, two children were referred to the ETU after showing symptoms of Ebola and are currently undergoing treatment. Additional six children were released from the ETU in Bong County and have since been reunified with families in Nimba and Margibi. Nine children (5 girls, 4 boys) will complete their 21-day observation at the interim care center and will be reunified with their relatives by the end of the week. Currently there are 10 children (4 girls, 6 boys) at the interim care center and five children (2 girls, 3 boys) at the transit center.
- 60 social workers and 50 mental health clinicians provided psychosocial, family tracing, reunification, reintegration and case management support to 1304 children (612 boys, 692 girls) in the ten most affected counties, including in Ebola Treatment Units.
- Communities in Foya (Lofa county) and Ganta (Nimba county) found local ways and means to prevent themselves from getting infected by Ebola, keeping children safe in a family environment and involving
themselves in contact tracing and reporting. This was as a result of UNICEF-supported town hall meetings on community level.

Education
• UNICEF continues to support frontline social mobilization training efforts under the Ministry of Education’s Ebola Response Plan, with 77 education personnel at national level, 298 at county level and 4,880 at district level trained to-date on Ebola awareness, prevention and home protection messages. Door-to-door outreach has been initiated by teachers and principals in at least 75 of 98 education districts in all 15 counties nationwide. Plans are under development to rapidly mobilize additional teachers to increase awareness and prevention efforts in EVD epidemic hotspot communities.
• With technical assistance from UNICEF, the education ministry has begun broadcasting its Emergency Education Radio Programme “Come to School” over radio stations in Monrovia and greater Montserrado County. The content includes Early Childhood Development, Guidance Counselling, Language Arts, Social Studies/Civics, Math for Life, and Science for Life and is broadcasted daily, targeting children from pre-K through grade 12 and their families. The programme is intended to keep children educationally engaged in the wake of nationwide school closures due to the state of emergency and will include key messages about EVD protection and prevention.

Programme Results
UNICEF is currently refining its programme results framework and indicators, while also developing methods and sources for data collection, monitoring and evaluation. Revised or additional indicators for all programmes will be developed and reported in future situation reports.

<table>
<thead>
<tr>
<th>UNICEF Results Table Period 16 September 2014–15 March 2015</th>
<th>UNICEF Target</th>
<th>Total Cumulative UNICEF Results</th>
<th>% Target reached</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Communication for Development</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># Counties where social mobilization taskforces met in the last week</td>
<td>15</td>
<td>12</td>
<td>80%</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># Ebola treatment/Care centers equipped with medical supplies</td>
<td>85</td>
<td>15</td>
<td>18%</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>134</td>
<td>29%</td>
</tr>
<tr>
<td># Health care workers trained in no touch/revised preventive maternal, new-born and child health protocols</td>
<td>3,200</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td># Ebola-affected infants and young children 0-12 months who cannot be breastfed received replacement feeding</td>
<td>900</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td># Children 6-59 months admitted for SAM treatment</td>
<td>4,000</td>
<td>325</td>
<td>8%</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># Ebola treatment/Care centers equipped with essential WASH facilities</td>
<td>85</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td># Non-Ebola Health centers in Ebola affected areas equipped with Hand washing station</td>
<td>470</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td># Households equipped with hygiene kits in Ebola affected areas</td>
<td>150,000</td>
<td>15,579</td>
<td>10%</td>
</tr>
<tr>
<td># Schools equipped with hand washing stations</td>
<td>4,400</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
Media and External Communications

Spokespersons for UNICEF have been featured in global print, radio, television and online news programming highlighting UNICEF’s role in the response, while field visits for international media crew have also been arranged. Samples of resulting coverage include:

- **Country Representative Sheldon Yett on the training of survivors as caregivers** (Reuters)
- **Communications Specialist Rukshan Ratnam on survivor stigma** (IRIN News)
- **Regional Communications Specialist Laurent Duvillier in a Q&A on the Ebola situation** (RT International)
- **Communications Specialist Rukshan Ratnam on Ebola orphans (German)** (Blick—Switzerland)
- **Global Innovations Co-Lead Chris Fabian on the use of mobile technology to fight Ebola** (Huffington Post) and also here (Techcrunch)
- **Liberia’s Minister of Gender on the impact of Ebola on women** (Eba Deeply)
- **Regional Communications Specialist Laurent Duvillier on UNICEF’s provision of PPE to vaccinators** (Front Page Africa)
- The United Nations global Twitter account highlighted UNICEF Liberia staff stories posted on Facebook
- **A video PSA of a survivor and nurse produced by UNICEF** with the Ministry of Health was uploaded to YouTube and picked up by media outlets, including the Washington Post
- **A video PSA of Christian and Muslim religious leaders** produced by UNICEF with the Ministry of Health were uploaded to YouTube and picked up by media outlets including Yahoo! News

Funding

The funding need at the launch of the Ebola outbreak appeal in September 2014 was estimated at USD 64.7 million for six months, 44 per cent of which has been funded. UNICEF has been able to respond to the Ebola outbreak in Liberia thanks to generous contributions from USAID/OFDA, World Bank, Japan, Sweden, Canada, Belgium, Republic of Korea, Switzerland, Gates Foundation, CERF, Anadarko Petroleum, Dawnus UK, and the UNICEF national committees of USA, UK, Japan, Korea, and Hong Kong.

International support is urgently needed to rapidly scale up activities to reverse the trajectory of the outbreak. The current needs are have gone up and are now estimated at USD 93 million.

Next SitRep: 12 November 2014

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