On 20 November 2015, the Government of Liberia confirmed three new cases of Ebola Virus Disease (EVD) from a family of six living in a suburb of the capital Monrovia. All of them were transferred to an Ebola Treatment Unit (ETU). One of the three confirmed cases, a fourteen year old boy, died on 23 November. His brother and father remain under treatment. Nineteen contacts, including three other family members of the boy are under observation.

No new cases have been reported since 20 November 2015, but 149 contacts and 32 health workers are being monitored. All contacts are in Montserrado.

UNICEF has provided tents, office supplies and related equipment to set up a local Ebola Command Center (ECC) near the Ebola hotspot in Montserrado County. The rapid response team of sector specialists are based at the ECC, where daily pillar and partner coordination meetings are being held.

UNICEF is co-lead for the WASH, Social Mobilization, and Mental Health and Psychosocial pillars. Nutrition and education needs and response are being implemented through the Ministry of Health County Nutrition team and the Ministry of Education District Education office with support from UNICEF technical staff.

Following the Government’s decision to administer the Ebola vaccine for the ring vaccination, UNICEF is providing technical support for community readiness, and in the development and pre-testing of key messages. The ring vaccination targets health care workers and other contacts of Ebola patients as well as secondary contacts.

All 18 schools in the hotspot have been WASH assessed. Infection prevention and control (IPC) materials have been distributed and set up in six of them. Drinking water and water for domestic use is being provided to households and health care workers under precautionary observation.

Refresher Training on Psychosocial Support and Safe School Protocols was conducted for 98 students, 11 teachers and 10 Parent Teacher Association (PTA) members at the school where the fourteen year old boy, who was confirmed as having Ebola and died on 23 November 2015, was registered.

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**HIGHLIGHTS**

- All Ebola statistics in this report are drawn from the Ministry of Health and Social Welfare (MoHSW) Ebola SitRep #1 65, which reports cumulative cases as of 27 October 2014 (from 23 May to 27 October 2014).

- On 20 November 2015, the Government of Liberia confirmed three new cases of EVD from a family of six living in a suburb of the capital Monrovia. One of the three confirmed cases, a fourteen year old boy, died on 23 November. His brother and father remain under treatment. Nineteen contacts, including three other family members of the boy are under observation.

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**SITUATION IN NUMBERS**

**As of 25 November 2015**

- 6 Days since last confirmed case
- 3 Laboratory confirmed cases over past 21 days
- 139 Contacts under follow up
- 10 Healthcare workers under precautionary observation
- 8,530 Children registered as directly affected by Ebola
- 2 million+ Children living in affected areas
- **USD 149 million** UNICEF funding needs
- **USD 10 million** UNICEF funding gap (7%)

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1 Data based on official information reported by Liberia's Ministry of Health. These details are subject to change due to ongoing recategorization, retrospective investigation and availability of laboratory tests.

2 Government of Liberia has defined the number of children 'affected' as quarantined, orphaned, unaccompanied and separated children (UASC), in treatment and discharged.
Situation Overview

- On 20 November 2015, the Government of Liberia confirmed three new cases of Ebola from a family of six living in a suburb of the capital Monrovia. All of them were transferred to an Ebola Treatment Unit (ETU). One of the three confirmed cases, a fourteen year old boy, died on 23 November. His brother and father remain under treatment. Nineteen contacts, including three other family members of the boy are under observation.

Coordination

- UNICEF has provided tents, office supplies and related equipment to set up a local Ebola Command Center (ECC) near the Ebola hotspot in Montserrado County. The rapid response team of sector specialists are based at the ECC, where daily pillar and partner coordination meetings are being held.
- UNICEF is co-lead for the WASH, Social Mobilization, and Mental Health and Psycho-Social pillars. Nutrition and education needs and response are being implemented through the Ministry of Health County Nutrition team and the Ministry of Education District Education office with support from UNICEF technical staff.
- Supplies of chlorine, back sprayers and rain boots have been provided to the ECC to support partners in decontamination of the school, health facilities and to support workers going into the community.

Health and Nutrition

- UNICEF has ensured that ready to use therapeutic food (RUTF biscuits) is available for the patients admitted to the ETU, while therapeutic milk was delivered in case it was required. In addition, two young children of health care workers who are under precautionary observation have been linked to the county health nutrition team for support.
- Together with the Ministry of Health (MoH) and partners, UNICEF marked World Prematurity Day on 17 November 2015 by supporting outreach events, conducting two ‘U-report’ polls for youth on prevention and care for premature babies and organizing mass media outreach, drawing attention to the increasing cause of death for children under 5 years (close to 34 per cent in Liberia). UNICEF is working with the MoH to implement high-impact and cost effective essential care training for new-borns such as the promotion of Kangaroo Mother Care with training planned for 540 community health workers in Grand Gedeh, Maryland and Sinoe counties by end December 2015. This is more critical in the context of the effects Ebola had on the health system, as access to health facilities was limited during the peak of the outbreak.
- 365 severely malnourished children from five highly affected Ebola counties (Bomi, Lofa, Margibi, Montserrado and Nimba) were admitted in the nutrition programme from 1-31 October 2015. 654 (97 per cent) of severely malnourished children admitted in the nutrition programme were discharged as cured in the same period.

Education

- Refresher Training on Psychosocial Support and Safe School Protocols was conducted for 119 students, teachers and Parent Teacher Association (PTA) members from the school where the fourteen year old boy who was confirmed as having Ebola and died on 23 November 2015 was registered.
- The school administration called an emergency meeting for parents on 24 November 2015 to update them about the situation and measures the school is taking to ensure safe learning environment for children. Reports received indicate that more parents have sent their children to school as they are more confident about the safety of their children at school.
- School infection prevention and control (IPC) kits have been distributed to the school where the boy who died was registered, as well as six neighboring schools to reinforce the observance of safe school protocols.
- The ongoing distribution of Teaching and Learning Materials (TLM) has so far covered 1,501 schools in Bong, Bomi, Margibi and Montserrado counties, reaching 334,916 (28 per cent) students and 24,105 teachers.

Child Protection

- The Government of Liberia has identified 8,530 children (4,129 boys and 4,401 girls)1 as affected2 by Ebola. To date, 15,758 children (7,116 boys and 8,642 girls) have been provided with care and support including psychosocial support (PSS). More specifically, 7,858 children (1,837 having lost both parents/caregivers, and 6,021 having lost one parent/caregiver) have been registered by UNICEF supported social workers to date.

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1 Ministry of Gender, Children and Social Protection (MoGCSP) data as of 8 November 2014. Numbers have remained static owing to the MoGCSP presently responding to the latest Ebola outbreak.
2 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/primary caregivers due to the Ebola Virus Disease.
A one-day training of 33 psychosocial support outreach workers for the Ebola hotspot response took place on 24 November 2015. They training covered psychological first aid, safe community entry, PSS in emergency response, child protection concerns during an emergency response and active listening.

Payments have commenced for the last phase of the one-off cash grant to children affected by Ebola. These grants are expected to be provided to over 2,000 children.

An emergency preparedness meeting for alternative care and the review of the standard operating procedures (SOPs) on Ebola was held with relevant child protection partners on 23 November 2015. The objective was to use lessons learned from the ongoing response to review protocols developed for Interim Care Centers, infection prevention and control and alternative care.

The MoH and a partner are conducting a five-day training for 45 participants from various partners, mental health clinicians and social workers on techniques for working with children, including listening to children, engaging in child friendly activities in groups and working with parents.

Social Mobilization and Communication for Development (C4D)

- In the wake of the new Ebola outbreak, UNICEF’s C4D section supported the Ministry of Health and the social mobilization pillar to develop a response strategy based on lessons learned from the previous outbreak in Margibi County, in consultation with community leaders in the current hotspot area. The strategy mainstay is to cut the transmission of Ebola by raising awareness, but avoiding undue panic in communities and in schools; re-establishing IPC and control measures; and ensuring reporting of sick persons and of all deaths. This is being achieved with intensive engagement of traditional and religious leaders, and robust community engagement activities by frontline social mobilizers.
- UNICEF developed research tools and conducted key informant interviews in the hotspot on 21 November 2015. The interviews underscored the need for intensive counselling due to elements of doubt and fear that residents will be stigmatized by other communities.
- UNICEF supported the training of an initial 60 community volunteers/social mobilizers and five supervisors who were deployed in the hotspot area. To avoid resistance and reticence, and as recommended by the community leaders, all the trainees were recruited from the same area. UNICEF co-facilitated some of the sessions and provided standard monitoring, reporting, and rapid assessment tools for use by all partners in community engagement activities in both the hotspot and ‘ring’ communities.
- Through a UNICEF-funded network of seven Monrovia based radio stations and 30 community radio stations located across the country, the frequency of radio spots were increased beginning 20 November 2015, reminding communities to report Ebola signs and symptoms, and all deaths.
- Following the Government’s decision to administer the Ebola vaccine for the ring vaccination of health care workers and other contacts of Ebola patients as well as secondary contacts, UNICEF is providing technical support for community readiness and in the development and pre-testing of key messages through the message and material development technical working group.
- UNICEF has equipped the Community Health Team of Paynesville and the National Health Promotion Division of the MoH with over 15,000 pieces of information, education and communication (IEC) materials on Ebola signs and symptoms, Ebola prevention and handwashing. In addition, UNICEF has funded the reprinting of over 25,000 new Ebola prevention materials, including posters for community handwashing stations.

Water, Sanitation and Hygiene (WASH)

- WASH assessments have been carried out in the community affected by the most recent Ebola outbreak, including in all 18 schools and one health facility.
- Four hand washing stations were installed at one affected school, one in one affected health centre and six in six affected households that are under precautionary observation.
- All the households under precautionary observation have been provided drinking water. Water for general domestic use will also be trucked daily.
- The ten high risk health care worker contacts are being housed together at a rented property where UNICEF is providing drinking water and water for domestic use.

Media and External Communication

- UNICEF Representative in Liberia, Sheldon Yett, warns against complacency in the fight against Ebola (Reuters).
## Programme Results

### UNICEF and Pillar/Sector Results for EVD Response

**Liberia, 25 November 2015**

| Indicators                                                                 | Pillar / Sector | UNICEF | |
|----------------------------------------------------------------------------|-----------------|--------|
| **EPIDEMIOLOGY**                                                          |                 |        |
| Registered Ebola children who lost one or both parents/primary caregivers  | 8,530           | 8,530  |
| **COMMUNICATION FOR DEVELOPMENT**                                         |                 |        |
| Households reached with interpersonal communication on Ebola prevention    | 1,000,000       | 817,605| 82% |
| Sub-prefectures Chiefdoms and/or counties reporting resistance/reticence to cooperating with front line workers in the past week | 0               | 1/15   |
| Households reached with Inter-Personal Communication for National health campaigns (Integrated Measles, Polio, and Deworming campaign) | 500,000         | 614,825| 123%|
| Proportion of population surveyed who indicated discriminatory attitude towards Ebola survivors | <3%             | 37%<sup>3</sup> (435/1,165) |
| Proportion of population surveyed who rejected alternatives to traditional burials/funerals | <3%             | 17%<sup>4</sup> (194/1,155) |
| **COMMUNITY CARE CENTRES/RITES**                                          |                 |        |
| CCCs established                                                          | 25              | 12     |
| CCCs functional                                                           | 14              | 8      |
| CCCs decommissioned                                                        | 4               | 4      |
| CCCs converted/transformed into Alternate Care Centres                    | 4               | 2      |
| RITES pre-positioned for Rapid Response                                    |                 | 16     |
| RITES utilized in hot spot communities                                    |                 | 3      |
| **WASH**                                                                  |                 |        |
| Ebola community, treatment and holding centres with essential WASH services | 29<sup>5</sup>  | 24     | 83% |
| Non-Ebola health centres in Ebola-affected areas provided with hand washing station and/or WASH support | 270            | 270    | 100%|
| People benefiting from household WASH kits in Ebola-affected areas         |                 | 450,000| 100%|
| **CHILD PROTECTION**                                                      |                 |        |
| Ebola-affected children provided with minimum package of psychosocial support (PSS) services | 189,630        | 15,758 | 8%  |

<sup>3</sup> KAP Survey, December 2014
<sup>4</sup> KAP Survey, December 2014
<sup>5</sup> 25 CCCs, 4 transit centres/holding centres
<sup>6</sup> 12 CCCs, 2 transit centres /holding centres
Registered children who lost one or both parents/primary caregivers due to Ebola and child survivors of Ebola who received a minimum package of support/nationally agreed package, including family tracing and reunification or placement in alternative family based care | 3,691 | 4,436 | 120% | 3,691 | 4,436 | 120%

**HEALTH**

Health structures in Ebola-affected areas provided with Infection, Prevention and Control (IPC) supplies | | | | 470 | 270 | 57%

Community Health Workers trained in Ebola prevention and case management | | | | 650 | 650 | 100%

**NUTRITION**

Ebola patients receiving nutrition support | | | | 1,094 | 994 | 91%

Children suffering from severe acute malnutrition (SAM) admitted for treatment | | | | 13,925 | 9,317 | 67%

Infants 0-6 months who cannot be breast fed, receiving ready to use infant formula | | | | 40 | 38 | 95%

**EDUCATION**

Teachers trained in Ebola prevention | 12,114 | 11,082 | 91% | 6,000 | 5,995 | 100%

Schools equipped with minimum hygiene package for Ebola prevention compliant with protocols\(^6\) | 4,400 | 4,619 | 105% | 4,400 | 4,619 | 105%

Children enrolled in schools equipped with minimum hygiene package | 1,153,316 | 1,196,010 | 104% | 1,153,316 | 1,196,010 | 104%

Children enrolled in schools benefiting from the distribution of learning kits | 1,196,010 | 334,916 | 28% | 1,196,010 | 334,916 | 28%

Teachers trained in providing psycho social support | | | | 10,000 | 6,163 | 62%

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**Next SitRep:** 9 December 2015

**Who to contact for further information:**

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\(^7\) Report received were from Bomi, Lofa, Margibi, Montserrado and Nimba counties with admissions for the month of October 2015 at 365

\(^6\) The higher number of accomplishment is due to the inclusion of schools that were not included in the original validated list, and schools that were not officially registered with the MoE but have enrolled students for this school year.