According to the latest Ministry of Health Ebola Virus Disease (EVD) report, dated 20 December, the cumulative total of suspected, probable and confirmed cases of EVD in Liberia rose to 7,862. According to the same source, there were 37 confirmed new Ebola Virus Disease (EVD) cases between 10 and 18 December, representing an average rate of five new cases per day.

According to recent data from the health ministry, there have been at least 1,042 confirmed cases of children with EVD. The number of children identified by name and location as orphaned by EVD is 4,115. All of the children identified are currently receiving follow-up and psychosocial support. Over 250 volunteer contact tracers trained and engaged by UNICEF are now reporting cases of children orphaned or otherwise affected by EVD. UNICEF is working to ensure that children who have lost their parents due to EVD continue to receive care through a kinship arrangement and by doing so, prevent children from becoming institutionalized, for example, in an orphanage.

Following two separate outbreaks this week in Lonfaye-Town, Margibi County (see photo above) and Yekepa-Town, Nimba county, UNICEF joined partners in organizing social mobilizers to engage the population of the quarantined and neighboring villages in each case through house-to-house visits, town hall meetings and focus group discussions with ‘contacts' focusing on prevention practices, rapid reporting and isolation of sick family members, safe and dignified burials, addressing issues of stigma and asking residents if anyone was sick in their community. In addition, the team was able to gain approval from communities to set up a CCC in nearby Saclapea (Nimba County).

To date, UNICEF has supported the setup and management of 7 Community Care Centers (CCC), 2 Interim Care Centers (ICC) and 2 Transit Centers (TC), and has supported the deployment of 3 Rapid Isolation and Treatment of Ebola (RITE) teams with supplies and personnel to respond to hot spots*. In response to the measles cases in Lofa County, the UNICEF-supported periodic intensification of routine immunization or PIRI (in lieu of an immunization campaign which is not recommended in the Ebola context) – to rapidly reduce the number of unimmunized children against measles – is ongoing across all 15 counties. Since the beginning of the outbreak, UNICEF has procured USD 19.2 million worth of supplies to aid the Ebola response in Liberia and brought in 7,776 cubic meters of emergency aid used for Ebola prevention and treatment at the household level as well as in CCCs, RITEs, ETUs, ICCs, TCs and health facilities. As of last week, UNICEF has released 2,064 thermo-guns to aid the Ebola response, including to polling stations during the elections in the past week.

*A ‘hot spot' location is an area where there are high caseloads and deaths.

---

As of 20 December 2014¹

7,862
Cases of Ebola
(3,085 confirmed)

3,384
Deaths

1,042
Children infected

4,115
Children orphaned

2 million+
Children living in affected areas

367
Cases and 177 deaths among health care workers

UNICEF funding needs until June 2015
USD 187.1 million

Funding gap
USD 107.6 million

¹Data are based on: WHO Ebola Response Roadmap Situation Report, 24 December 2014 and official information reported by the Liberian health ministry up to 20 December 2014. 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 (MoHSW), there were 37 confirmed new Ebola Virus Disease (EVD) cases between 10 and 18 December, representing an average rate of five new cases per day.

Case incidence has been declining at a national level since mid-November, although transmission remains intense in the country. A total of 21 confirmed cases were reported in 5 counties in the week to 21 December. The district of Montserrado, which includes the capital Monrovia, continues to experience the highest EVD activity in the country, with 7 confirmed and 16 probable cases reported in the past week. In the country’s east, along the Côte d’Ivoire border, Nimba County reported 3 confirmed cases, its first cases in 9 weeks.

Transmission is persistent in the Grand Cape Mount County (6 confirmed cases) in the north of the country near the Sierra Leone border. Bong (4 confirmed cases) and Grand Bassa (1 confirmed case) were the only other counties to report cases during week 51.

In the north of the country, Lofa reported no cases for the eighth consecutive week, emphasizing the strength of response efforts in the county. Ten counties in Liberia did not report any cases in week 51.

On 19 December, UNICEF participated in an Election Day crowd management planning exercise conducted with all District Health Officers and 8 NGOs in Bong County. One of the objectives of the planning exercise was to ensure that voters practiced Ebola preventive actions during the polling exercise.

Upon a last-minute request from the MoHSW, UNICEF and WHO provided thermo-guns, which were distributed to all polling stations in Montserrado and other counties identified as the highest risk for EVD transmission. Generally, however, chlorine hand-washing stations were distributed to all polling centres, and NEC officials attempted in most locations to keep voters at least three feet apart, which was helped by low turnout.

Summary Analysis of Programme Response

Communication for Development (C4D) and Social Mobilisation

- Following two separate outbreaks this week in Lonfaye-Town, Margibi County (see photo above) and Yekepa-Town, Nimba county, UNICEF joined partners in organizing social mobilizers to engage the population of the quarantined villages and the neighboring villages in each case through house-to-house visits, town hall meetings and focus group discussions with ‘contacts’ focusing on prevention practices, rapid reporting and isolation of sick family members, safe and dignified burials, addressing issues of stigma and asking residents if anyone was sick in their community. In addition, the team was able to gain approval from communities to set up a CCC in nearby Saclapea (Nimba county).
- As of this week, 1,900 U-reporters have registered for U-report – a new SMS/text-messaging-based tool UNICEF is using for community engagement – in Montserrado, Lofa, Bong and Maryland counties.
- In collaboration with UNICEF and PCI media, the first episode of a call-in radio show – that aims to inform the public about Ebola-related issues, provide social support and resources to listeners, foster dialogue about Ebola and encourage key behaviour changes to stop the outbreak – was aired this week on UNMIL radio and Liberian Broadcasting System radio network.
- A UNICEF Community Mobilisation Coordinator (CMC) reported a dead body that was being transported from Monserrado to Margibi County to the CMC stationed in Margibi County. This triggered an alert and the community was contacted immediately by the authorities and were persuaded to not handle the dead body and waited for the burial team to arrive.
- UNICEF, together with key stakeholders in the Messages and Materials Development Working Group, developed messages geared toward continued adherence to preventive measures during the Christmas holidays and elections. A message reminder on adherence to Ebola preventive measures was sent to all registered U-Reporters.

Trends, gaps and milestones

- This week, 13,078 households across 11 counties were reached through door-to-door campaigns with Ebola prevention messages and 184 community meetings and group discussions, reaching 10,943 women, 8,718 men and 6,070 children across all counties. UNICEF facilitated 8 trainings for 1,174 community volunteers on how to use the Ebola trainers guide for door-door awareness campaigns. 35 of the 52 radio stations that UNICEF has agreements with
aired Ebola messages during reporting period. UNICEF community mobilization coordinators visited 21 districts to monitor awareness activities.

- Frontline mobilizers continue to face challenges such as inaccessibility of some communities as a result of heavy rains and bad roads.
- As reported by our frontline mobilizers, pockets of resistance remain in some counties with rumors such as “Ebola is no more” because the state of emergency was lifted, coupled with misconceptions across communities about CCCs. The ongoing election campaigns have also strengthened the view that there is no more Ebola.

Child Protection

- UNICEF is working to ensure that children, who have lost their parents due to EVD, continue to receive care through a kinship arrangement and by doing so, prevent children from becoming institutionalized, for example, in an orphanage. For Liberian families, it is natural to care for orphaned children of relatives. To strengthen this, UNICEF provides one-time cash transfers to the families that take the responsibility to care for orphaned children. As of last week, a total of 572 Ebola-affected children in Bong, Grand Gedeh, Nimba, Lofa, Montserrado, Cape Mount, Gbarpolu, Grand Bassa, Margibi and Bomi counties have benefitted from one-time emergency foster grant/cash assistance meant to serve as immediate recovery support. Verification of additional 1,500 affected by EVD is ongoing.
- In the Interim Care Center – meant for children who need to be under observation for 21 days there are currently 18 children (12 girls and 6 boys). 3 (all boys) children in the ICC annex are awaiting reunification with their families. A total of 53 children have to now benefitting from the support of the ICC.
- In the Transit Center - meant for children who survived Ebola but have no known relative or caregiver to return to after being treated - there are currently 7 children receiving family tracing and reunification services. In addition, there are currently 3 children in the Transit Center in Bong.

Trends, gaps and milestones

- The lack of roads in rural communities is posing challenges for social workers to obtain information on children in remote rural communities. UNICEF is working to fill this gap through mobile data collection.

Health and Nutrition

- In response to the measles cases in Lofa county, the UNICEF-supported periodic intensification of routine immunization or PIRI (in lieu of an immunization campaign which is not recommended in the Ebola context) – to rapidly reduce the number of unimmunized children against measles – is ongoing across all 15 counties. Vaccinators are being trained simultaneously across the country on infection prevention and control measures, supervision during PIRI and on how to conduct outreach sessions in remote areas. In addition, UNICEF provided basic infection control kits, including infrared thermometers to 500 health facilities providing immunization services in the country.
- Between 27 November and 14 December, 505 patients admitted in ETUs and CCCs were provided with comprehensive nutritional care and support.
- 47 quarantined contacts at the Bong Holding Center were provided with nutritional support through joint efforts of the Ministry of Health, Bong County Health Team, Africare, Project Concern International (PCI), Save the Children, WFP, and UNICEF.

Trends, gaps and milestones

- 30 clinicians in the Ministry of Defence-1 ETU were trained on prescribing appropriate diet to EVD patients based on their assessment of nutrition-related signs and symptoms.
- 50 percent of the identified caregivers assigned to the Montserrado Interim Care Center were trained on nutritional care and support for children under five years of age.

Water, Sanitation and Hygiene (WASH)

- Through UNICEF-supported partners, hygiene promotion and Ebola awareness messages were delivered to 25,991 community members in six counties during the week: Maryland, Montserrado, Grand Kru, River Gee, Nimba, and Grand Gedeh counties. The messages focused on hand washing and personal hygiene, environmental cleanliness, safe water, construction and proper use of latrines, and EVD prevention.
- With UNICEF support, the construction of water supply and sanitation facilities have been completed at the Haindi CCC in Bong County and are underway in 9 additional CCCs across Bong, Nimba, River Gee, Bomi, Grand Cape Mount and Maryland counties.
- With support from UNICEF, the SKD ETU is now up and running, while the rehabilitation of ELWA 2 and Unity Centre
ETUs are almost complete.

**Trends, gaps and milestones**

- Gaps include challenges in on-site and off-site management of liquid wastes from the earlier constructed ETUs; and the need for rehabilitation/upgrade of water, hygiene and sanitation services within targeted urban slums.

**Education**

- In coordination with WASH and Health Cluster colleagues, UNICEF and the Ministry of Education developed initial procurement and distribution plans for key WASH-in-schools and health screening materials (hand-washing stations and infrared thermometers) to support the critical campus safety protocols within the Ministry’s School Re-opening Plan. Supplies will be pre-positioned for distribution to all Liberian schools in Q1 2015, pending endorsement by intersectoral stakeholders of a firm target date for schools to re-open.
- Advocacy by UNICEF and key sector partners within Liberia’s Education Sector Development Committee resulted in the Ministry of Education’s decision to relax student uniform requirements once schools re-open, removing traditional impediments to student enrolment and attendance which might be exacerbated by the economic strain placed on households during the Ebola crisis.

**Supply and Logistics**

- As of last week, UNICEF has released 2,064 thermo-guns to aid the Ebola response, including to polling stations during the elections in the past week.
- 7 RITE kits have been prepositioned with County Health Teams and Forward Logistics Bases.
- Necessary supplies to set up 15 CCCs across 12 counties are being kitted, assembled and delivered.
- As part of the overall Ebola response, UNICEF is bringing in 200+ motorbikes to conduct its outreach activities (community engagement and psychosocial support) at the district and community levels.
- The ETUs in Zorzor, Barclayville, Bopolu and Gbedia Town are in the process of receiving their first month’s delivery of medicines and medical supplies.

**Trends, gaps and milestones:**

- Lack of trucks/transport vehicles in good condition and roads with potholes caused by heavy rains make the movement of goods a challenge, causing major delays in the distribution of supplies to health facilities.
- In addition to the shortage of manpower, storage capacity is one of the main constraints in the field. There is a great need to increase the storage capacity and rehabilitate warehouse facilities. Supply and Logistics, teamed with the Ministry of Health, are conducting Rapid Logistics Capacity Assessments in the field.

**Human Resources**

In an effort to strengthen the Ebola response effort, UNICEF has currently 43 international and 199 national colleagues deployed in Monrovia and at the field/county level, in addition to engaging 6,519 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 23 December 2014, notwithstanding regular field monitoring and support visits to the field on a daily basis.

<table>
<thead>
<tr>
<th>UNICEF personnel in Liberia</th>
<th>Monrovia</th>
<th>In the field</th>
<th>Total staff strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>International staff</td>
<td>32</td>
<td>11</td>
<td>43</td>
</tr>
<tr>
<td>National staff (including third party contractors)</td>
<td>58</td>
<td>141</td>
<td>199</td>
</tr>
<tr>
<td>Additional third party contractors, social workers, contact tracers, teachers, etc. deployed for EVD response in the field, financially supported by UNICEF Liberia</td>
<td></td>
<td></td>
<td>7,134</td>
</tr>
</tbody>
</table>
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.

Some of the achievements include:

**Social Mobilization Cluster**
- As of yesterday, the roll-out of a training program for frontline social mobilizers - led by the Ministry of Health, with support from UNICEF, the Carter Centre, and WHO amongst others - covered 83 of the 88 districts across 14 of the 15 counties in a period of 30 days and is well on track to achieve the target of 10,000+ trained persons across the country. This extensive geographical coverage, further complemented by hundreds of community mobilizers trained by NGOs, will ensure that prevention and health protection messaging reaches every community, and targeted rapid responses during outbreaks can be implemented at short notice.

**Child Protection sub-Cluster**
- UNICEF, along with the Department for Social Welfare, Save the Children and other partners, is working to ensure that children remain in contact with their families when separated due to EVD.

**Nutrition Sub-Cluster**
- Through joint efforts of the Ministry of Health Nutrition Division, Bomi County Health Team, Medical Team International (MTI) and UNICEF, 30 health workers, 3 district social workers, and 3 psychosocial counselors were trained on Ebola nutrition protocols as part of restoring Essential Package of Health Services in public health facilities.

**WASH Cluster**
- To date, 45,550 basic hygiene kits have been distributed to 216,041 beneficiaries by WASH Cluster partners. UNICEF procured the majority of these kits.

**Education Cluster**
- The Education Cluster is collaborating closely with the Health Cluster and the WASH Cluster, including the Ministry of Health, the Ministry of Public Works, CDC and WHO, to ensure protocols for the safe reopening of schools meet the minimum requirements in terms of health, and water and sanitation. Discussions are on-going and focus on issues like health referral mechanisms, the need for hand washing, and collaboration between ministries at the county and district level. In the meantime, in preparation for the implementation of these protocols, the Education Cluster is mapping on-going and planned school WASH interventions in order to ensure the biggest needs are addressed and duplication avoided.

**Media Coverage**
Communication Development officer Phil Dixon on 400 community volunteers trained on safe burials (Liberia News Agency)
A new photo story with pictures from Christine Nesbit Re-forming a family splintered by ebola (Medium)
Communication specialist Sarah Crow on Keklula who saved family from Ebola and now wants to go to nursing school (Huffington Post)
UNICEF mentioned in story about survivors network (Liberian Observer)
### 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>3,672,701</td>
<td>18,915,656</td>
</tr>
<tr>
<td>Nutrition</td>
<td>7,289,263</td>
<td>10,736,999</td>
<td>1,198,075</td>
<td>9,538,924</td>
</tr>
<tr>
<td>Health and HIV/AIDS</td>
<td>25,546,857</td>
<td>70,812,058</td>
<td>33,683,300</td>
<td>37,128,758</td>
</tr>
<tr>
<td>WASH</td>
<td>22,405,806</td>
<td>45,378,144</td>
<td>18,651,355</td>
<td>26,726,789</td>
</tr>
<tr>
<td>Child Protection</td>
<td>8,079,681</td>
<td>12,239,127</td>
<td>1,644,037</td>
<td>10,595,090</td>
</tr>
<tr>
<td>Education</td>
<td>4,593,643</td>
<td>14,532,090</td>
<td>16,000</td>
<td>14,516,090</td>
</tr>
<tr>
<td>Cross Sectoral</td>
<td>4,981,002</td>
<td>7,667,614</td>
<td>4,522,914</td>
<td>3,144,700</td>
</tr>
<tr>
<td>Cluster/Sector Coordination</td>
<td>0</td>
<td>3,117,296</td>
<td>0</td>
<td>3,117,296</td>
</tr>
<tr>
<td>Funds under allocation</td>
<td></td>
<td></td>
<td>16,073,751</td>
<td>-16,073,751</td>
</tr>
<tr>
<td>Total</td>
<td>85,811,397</td>
<td>187,071,685</td>
<td>79,462,133</td>
<td>107,609,552</td>
</tr>
</tbody>
</table>

*Programmable amount

**UNICEF received from OFDA a total of $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
24 December 2014

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>TARGETS</th>
<th>TOTAL RESULTS</th>
<th>% TARGET REACHED</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EPIDEMIOLOGY</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of EVD cases with onset in the past week(^1)</td>
<td>UNICEF</td>
<td>Pillar / Sector</td>
<td>UNICEF</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
<td>148/7819</td>
</tr>
<tr>
<td>Percentage of EVD cases with onset in the past week due to contact at community level, within the health sector, or during funeral / burial procedures(^2)</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>COMMUNICATION FOR DEVELOPMENT</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of county Social Mobilization taskforces (SMT) reporting on the dashboard each week(^3)</td>
<td>100% (15)</td>
<td>100% (15)</td>
<td>11</td>
</tr>
</tbody>
</table>

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\(^1\) Reports against week ending December 15. The most current report is #214 for December 15, just 1 of 7 day week.

\(^2\) Not currently reported by the MoH, in discussion with the MoH database managers to create template for analysis.

\(^3\) Four (4) county social mobilization teams are unable to send in their updates for this week and are also unreachable as they are working in hard to reach areas.
<table>
<thead>
<tr>
<th>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 guidelines⁴</th>
<th>100% (15)</th>
<th>100% (15)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of counties with at least one security incident or other form of refusal to cooperate in past week⁵</td>
<td>13% (i.e. 2/15 counties)</td>
<td>13% (i.e. 2/15 counties)</td>
</tr>
<tr>
<td>Percentage of patients who present at a CCC within 48 hours of becoming ill with any symptoms that could be EVD⁶</td>
<td>80%</td>
<td>80%</td>
</tr>
<tr>
<td>CCC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of Community Care Centers (CCCs), Rapid Isolation Treatment for Ebola (RITE), Interim Care Centers (ICC) and Transit Centers (TC) functional against target set for the current reporting period⁷</td>
<td>100% (15 CCCs, 10 RITEs, 2 ICCs, 2 TC/holding facility)</td>
<td>100% (31 CCCs, 10 RITE, 4 ICCs, 4 TCs/holding facility)</td>
</tr>
<tr>
<td>Percentage of Community Care Centers (CCCs), Rapid Isolation Treatment for Ebola (RITE), Interim Care Centers (ICC) and Transit Centers (TC) established after a community dialogue process aligned with Global SOPs or according to norms established in country</td>
<td>100% (15 CCCs, 10 RITEs, 2 ICCs, 2 TC/holding facility)</td>
<td>100% (31 CCCs, 10 RITE, 4 ICCs, 4 TCs/holding facility)</td>
</tr>
<tr>
<td>WASH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of all Ebola Community Centers: Community Care Centers (CCCs), Rapid Isolation Treatment for Ebola (RITE), Interim Care Centers (ICC) and Transit Centers (TC) provided with essential WASH services⁸</td>
<td>100% 56 (27 ETUs 15 CCCs, 10 RITEs, 2 holding centers/T C, 2 ICCs)</td>
<td>100% 76 (27 ETUs 31 CCCs 4 ICCs, 10 RITE, 4TC/holding centers)</td>
</tr>
<tr>
<td>PROTECTION</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of EVD-affected children provided with care and support, including psychosocial support⁹</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

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⁴ Currently working on cooperative reporting arrangements with the Inter-Religious Council (IRC) of Liberia and Carter Center. Data should start come in three weeks.

⁵ No recent security incident reported.

⁶ No recent security incident reported.

⁷ Currently not reported; recently agreed with government partner on the establishment of a systems for data collection at the CCC level using the RapidPro platform. Presently at the design and system construction stage. Presently at the design, system construction and testing stage; also undergoing talks with MoHSW Information to ensure smooth implementation.

⁸ Changes in the numbers is brought about by the latest approved number of ICCs, RITEs and other similar facilities being planned by the MoHSW.

⁹ UNICEF supported the construction of these CCCs (a combination of providing tents and WASH supplies, constructing WASH facilities, finance, etc.)

⁰ Changes in the numbers is brought about by the latest approved number of ICCs, RITEs and other similar facilities being planned by the MoHSW.

¹¹ 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.
Percentage of children who are without a primary care giver due to EVD reintegrated with their families or provided with appropriate alternative care.\(^\text{10}\) | 100% | 100% | 35/50 | 35/50 | 70% | 70% |

**HEALTH**

Percentage of patients admitted to CCCs who are tested for EVD infection and whose test result is available within 36 hours\(^\text{11}\) | 100% | 100% |

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**UNICEF Liberia Humanitarian Performance Monitoring Indicators**

<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</td>
<td>250,000</td>
<td>174,911 (70.0%)</td>
</tr>
<tr>
<td>Ebola treatment/care centers equipped with medical supplies(^\text{12})</td>
<td>52</td>
<td>16 (31%)</td>
</tr>
<tr>
<td>Percentage of Ebola patients who received nutrition support(^\text{13})</td>
<td>100%</td>
<td>502 (100.0%)</td>
</tr>
<tr>
<td>Households equipped with hygiene kits in Ebola-affected areas</td>
<td>150,000</td>
<td>32,932 (22%)</td>
</tr>
<tr>
<td>Teachers trained on Ebola awareness and prevention</td>
<td>11,000</td>
<td>5,995 (55%)</td>
</tr>
</tbody>
</table>

**Next SitRep: 31 December 2014**

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

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\(^\text{10}\) Currently, UNICEF and partners can only report on the identified EVD affected children. UNICEF and cluster members are training tracers to help identify more EVD affected children.

\(^\text{11}\) Currently not reported; recently agreed with government partner on the establishment of a systems for data collection at the CCC level using the RapidPro platform. Presently at the design, system construction and testing stage; also undergoing talks with MoHSW Information to ensure smooth implementation.

\(^\text{12}\) The numerator is the total number of ETU + CCC operational to date; number has been constant as new PCAs are still being developed.

\(^\text{13}\) Patients in treatment facilities only; Data from new ETU and CCC admissions reported weekly.