

UNICEF-Liberia Ebola Virus Disease: SitRep #50¹ 5 September 2014

**This report provides an update on UNICEF's response to the Ebola emergency in Liberia. All statistics, other than those related to UNICEF support, are from the SitReps issued by the Ministry of Health and Social Welfare (MoHSW) through the Ebola National Task Force.*

Summary

- According to the MoHSW, in the past week,² 321 new suspected, probable and confirmed cases of Ebola and 222 new deaths were reported in Liberia.
- With the additional cases, as of 3 September, the cumulative number of suspected, probable and confirmed Ebola cases reported during Outbreak #2³ stood at 1,863; the total number of suspected, probable and confirmed Ebola deaths reported during Outbreak #2 stood at 1,078; and the total number of suspected, probable and confirmed Ebola cases reported among health care workers during both outbreaks stood at 153.⁴
- Confirmed Ebola cases have been reported in 10 of Liberia's 15 counties, and suspected and probable Ebola cases have been reported in three additional counties.
- The Ebola Treatment Units (ETUs) at JFK Medical Center in Montserrado County, ELWA Hospital in Montserrado County and Foya Hospital in Lofa County remain filled beyond capacity. ELWA-3 is being expanded, which will ease some but not all of this burden.
- The mobile lab at ELWA-3 is now operational, and plans are going forward to establish additional mobile labs in the country.
- The UN Country Team has decided to activate the cluster approach for the emergency response, in which UNICEF will play active and lead roles.
- Over the past week, UNICEF trained 120 general Community Health Volunteers (gCHVs) to conduct outreach in Montserrado County; finalized two new posters carrying revised key messages on Ebola; field tested newly developed training materials for use in preparing Ebola outreach workers; recruited and oriented additional field coordinators for key counties; commenced distribution of Water, Sanitation and Hygiene (WASH) materials to households in West Point community, Montserrado County; provided four additional tents for use in establishing an Ebola holding centre in Bong County; and donated 6,000 additional kg of chlorine to the MoHSW. Meanwhile, the Child Protection, Education and Nutrition sections began planning and implementing new Ebola-related interventions and activities.
- The total budget for UNICEF's six-month Ebola response plan, which covers a six-month period, currently stands at US\$ 6,085,255, of which US\$ 3,794,664 remains unfunded. Due to the severity of the outbreak, UNICEF expects this budget to increase up to eightfold. Support is urgently needed to implement and sustain the plan in the medium- to long-term.

Situation Overview

- Over the past week, 321 new suspected, probable and confirmed Ebola cases and 222 additional Ebola deaths were reported in Liberia.
 - 16 of the new cases and five of the new deaths were among health care workers.
 - Montserrado reported the highest number of new cases (141), followed by Lofa (65), Margibi (62), Bong (20), Bomi (12), Nimba (9), Grand Bassa (6), River Gee (4), and Grand Cape Mount (2).
 - No new cases were reported in Gbarpolu, Grand Gedeh, Rivercess and Sinoe.

¹ UNICEF will shift to the new, emergency SitRep form mandated by UNICEF HQ next week. The old format was maintained this week to provide time for the development of appropriate indicators for inputting into the emergency format.

² "The past week" refers to the period from 28 August, the date of the last UNICEF Ebola SitRep, to 3 September, the date of the latest MoHSW Ebola SitRep.

³ Outbreak #2 began on 29 May.

⁴ All cumulative statistics are drawn from MoHSW Ebola SitRep #111, which reports cumulative cases as of 23:00 on 3 September.

- With these changes, the total number of suspected, probable and confirmed Ebola cases reported in Liberia during Outbreak #2 now stands at 1,863 (369 suspected, 886 probable and 608 confirmed);⁵ the total number of suspected, probable and confirmed Ebola deaths stands at 1,078 (254 suspected, 399 probable and 425 confirmed); and the case fatality rate for probable and confirmed cases stands at 55 per cent. Breakdown by County is as follows:
 - Bomi: 64 cases (one suspected, 32 probable, 31 confirmed), 34 deaths.
 - Bong: 150 cases (85 suspected, 41 probable, 24 confirmed), 43 deaths.
 - Gbarpolu: One case (suspected); no deaths.
 - Grand Bassa: 46 cases (21 suspected, 12 probable, 13 confirmed), 19 deaths.
 - GCM: 11 cases (two suspected, five probable, four confirmed), 10 deaths.
 - Grand Gedeh: Three cases (suspected), two deaths.
 - Lofa: 636 cases (53 suspected, 345 probable, 238 confirmed), 327 deaths.
 - Margibi: 245 cases (126 suspected, 89 probable, 30 confirmed), 111 deaths.
 - Montserrado: 584 cases (50 suspected, 309 probable, 225 confirmed), 451 deaths.
 - Nimba: 111 cases (20 suspected, 50 probable, 41 confirmed), 75 deaths.
 - River Gee: Nine cases (six suspected, three probable); five deaths.
 - Rivercess: One case (confirmed), one death.
 - Sinoe: Two cases (one suspected, one confirmed), no deaths.
- The total number of suspected, probable and confirmed Ebola cases among health workers since the epidemic began now stands at 153, of which 76 have resulted in death.
- To date, confirmed Ebola cases have been reported in 10 counties – Bomi, Bong, Grand Bassa, Grand Cape Mount, Lofa, Margibi, Montserrado, Nimba, Rivercess and Sinoe Counties; and suspected and probable cases have been reported in three counties – Gbarpolu, Grand Gedeh and River Gee.

Developments and Challenges

- The Government of Liberia and international partners on the ground continue to struggle to control the Ebola epidemic. The primary challenges remain:
 - Too few facilities where suspected Ebola cases can be isolated, and/or treated. This includes the existing ETUs in Lofa (Foya ETU) and Montserrado (JFK and ELWA Hospitals), which are constantly full.
 - Too few burial, case investigation and contact tracing teams to meet the needs.
 - Difficulty establishing stringent infection control measures, as illustrated by continued reports of Ebola cases among health care workers.
- The utility of case totals for Liberia has come into question, with many deeming the statistics highly unreliable due to a number of challenges to comprehensive contact tracing, timely case investigation and rapid Ebola testing.
- ELWA-3 ETU, which is run by Médecins Sans Frontières (MSF), is under expansion, and a mobile lab has been established at the unit to expedite testing. The lab is being run by the US Center for Disease Control (CDC) and National Institute of Health (NIH).
- Two US naval personnel have arrived in country for the purpose of establishing an additional lab.
- The mobile labs are urgently needed to improve turn-around on Ebola testing.
- The World Food Programme (WFP) expects to increase its food supply by 700 per cent in the next six months, which could aid families affected by Ebola, as well as the rising cost of food that has accompanied the outbreak.

UNICEF Response

The UN Country Team has activated the cluster approach to the Ebola response, in which UNICEF will play an active/lead role. Meanwhile, the agency has continued to provide key support in the areas of social mobilization, health and WASH, and has expanded its Ebola-related efforts in the areas of child protection, education and nutrition. Details on all of these efforts are provided in the following sections.

⁵ All statistics are drawn from MoHSW Ebola SitRep #111, which reports cumulative cases as of 23:00 on 5 September.

SOCIAL MOBILIZATION: Over the past week UNICEF:

- Worked with a “core group” of social mobilization partners – namely WHO, Rebuilding Basic Health Services (RBHS), the CDC, MSF and UNMIL, led by the MoHSW – to finalize two new posters on Ebola signs, symptoms and prevention, including “what to do if”. UNICEF will print hundreds of thousands of these materials next week, for dissemination use by the MoHSW and all partners (including Government, NGO, UN and corporate).
- Field tested new training materials for all actors involved in interpersonal communication (IPC) outreach, including a training PowerPoint, training manual and flipbook for use by trained outreach workers. The agency plans to circulate these materials, which were developed by the aforementioned “core group”, to all actors working in the area of social mobilization, with the aim of promoting harmonization of messaging and standardization of training materials.
- Trained (together with the MoHSW, WHO, CDC and RBHS) 120 general Community Health Volunteers (gCHVs) in Montserrado County (UNICEF covered the costs of the trainings and served as lead trainers). These 120 gCHVs are the first of over 1,000 UNICEF plans to train countrywide, and to support with stipends for up to six months.
- Recruited and oriented, for immediate deployment, six additional field coordinators to be based in Bomi (1), Bong (1), Nimba (2) and Monsterrado (2). These coordinators will bolster the existing coordinators in Lofa (2) and Bong (1).

HEALTH: Over the past week UNICEF:

- Provided technical support to the contact tracing sub-committee of the national Incident Management Committee (IMC), and provided funding for contact tracers in Lofa County
- Provided four tents and 150 mattresses for the establishment of an Ebola holding centre in Bong County.
- Worked with the MoHSW and partners to review bottlenecks and develop steps for the re-opening of health facilities nationwide.
- Worked with the MoHSW and partners to develop revised guidelines for the safe provision of community-based services (integrated community case management) by gCHVs.

NUTRITION: Over the past week UNICEF:

- Co-led (with the MoHSW) the activation of the nutrition coordination (sub-cluster) meeting, which was attended by key international and national actors
- Prepositioned therapeutic nutrition supplies for patients in ETUs, as well as in Integrated Management of Acute Malnutrition (IMAM) sites through the MoHSW.
- Led the technical review and development of a modified IMAM protocol and updated Infant and Young Child Feeding (IYCF) policy in the context of Ebola.
- Trained 150 gCHVs in Montserrado County on the revised IMAM guidelines, emphasizing the “no-touch” guide for community assessment of severe acute malnutrition.

WASH: Over the past week UNICEF:

- Conducted hygiene promotion/Ebola awareness creation sessions in seven counties – namely Montserrado, Gbarpolu, Grand Cape Mount, Nimba, Grand Gedeh, River Gee, Maryland and Grand Kru.
- Provided 36,000 bars of soap (90 grams); 450,000 Aquatab tablets; and 18,000 plastic buckets (10 liters) to the MoHSW for prevention of Cholera and Ebola. Distribution of these materials, which can benefit 9,000 families (about 45,000 people), began in West Point community of Montserrado County.
- Provided an additional 6,000 kg of chlorine (to the MoHSW for disinfection activities in three ETUs.
- Continued work on upgrading the piped water supply network in West Point, Montserrado. The three water tanks (5,000 liters each) mentioned in last week’s SitRep have been installed to boost the storage capacity of water kiosks in three locations. Connecting the tanks to the urban water pipe network will follow.
- As part of the plan to increase the number of Ebola treatment centres in Liberia, worked with WHO on installing a water support system in Island clinic Ebola treatment centre in Montserrado County, and designed the water and sanitation system in a new treatment centre, to be established at the ATS Stadium in central Monrovia.

- Assessed the water supply situation in Dolostown near Monrovia. This was completed jointly by UNICEF and the Liberia Water and Sewer Corporation.

CHILD PROTECTION: Over the past week UNICEF:

- Supported the MoHSW in commencing hiring of 60 community-based social workers who will provide psychosocial support to Ebola-affected families in all counties, and will assure appropriate placement for children orphaned or abandoned as a result of Ebola.
- Supported to the MoHSW to commence hiring of 50 Mental Health Specialists who will provide psychosocial support to all patients in ETUs and holding centers, as well as to their families.
- Supported the running of:
 - Two safe homes for children in isolation (one in Monrovia, one in Bong) for child “contacts” who are in 21-day isolation; and
 - Two half-way homes for children without parental care for child survivors and “non-contacts” who were orphaned by Ebola and have no parental care.
- Initiated support to the MoHSW to create a Survivors network, which will include a plan to provide paid engagement of survivors in community mobilization activities.
- Committed to supporting the MoHSW to purchase one vehicle to transport children, as well as 16 motor bikes for use by social workers.

EDUCATION: Over the past week UNICEF:

- In collaboration with the Ministry of Education (MoE), WHO, MoHSW and ESDC partners, supported development of a plan to train and deploy teachers, principals, and education officers to lead community-level social mobilization, awareness, and prevention efforts in all 15 counties. This plan would cover 4,400 schools/communities, ~20,000 teachers and ~1.8 million children ages three to 17 and their families.
- In coordination with the MoE and partners, initiated development of educational radio programming plan to facilitate learning-at-home during the Ebola crisis. This programming would target at least 500,000 children ages three to 11 and their families in all 15 counties.
- In collaboration with MoE, began designing a holistic Back-to-School strategy to support re-opening of schools, including disinfection of facilities where required; distribution of WASH-in-Schools materials and training on their use; and sensitization within communities to address stigmatization, enhance psycho-social support mechanisms and reinforce Back-to-School safety assurances.

UNICEF FUNDING NEEDS:

- The total budget for UNICEF’s six-month Ebola response plan, which covers a six-month period, currently stands at US\$ 6,085,255, of which US\$ 3,794,664 remains unfunded. Due to the severity of the outbreak, which is now affecting 13 of Liberia’s 15 counties and which experts expect will take up to nine months to bring under control, UNICEF expects this budget to increase by up to eightfold, and is currently revising it. Support is urgently needed to implement and sustain the plan in the medium- to long-term.

UNICEF Contacts

- **Sheldon Yett, Representative**
Tel: +231-(0)770-25-7100 (office), +231-(0)770-26-7100 (mobile), Email: syett@unicef.org
- **Dr. Fazlul Haque, Deputy Representative**
Tel: +231-(0)770-25-7400 (office), +231-(0)770-26-7400 (mobile), Email: fhaque@unicef.org
- **Prabhu Prabhakaran, Resource Mobilization Specialist**
Tel: +231-(0)770-25-7103 (office), +231-(0)770-26-7103 (mobile), E-mail: pprabhakaran@unicef.org
- **Rukshan Ratnam, Communications Specialist**
Tel: +231-(0)770-25-7110 (office), +231-(0)770-26-7110 (mobile), E-mail: rratnam@unicef.org