UNICEF-Liberia
Ebola Outbreak: SitRep #8
2 April 2014

Key Points

• The total number of suspected and confirmed Ebola cases reported in Liberia has risen to 14, and related deaths have risen to six\(^1\)
• The number of confirmed cases still stands at two, including one patient who died last week in Lofa County and one patient who is in isolation at a hospital in Margibi County
• Samples from the new suspected cases have been taken for testing in Guinea
• A small team from MSF is arriving from Guinea today to discuss extending MSF support to Liberia with funding from ECHO, which has committed 800,000 EURO to the response in the sub-region
• A small team of experts from the United States Center for Disease Control (CDC) will arrive in the coming days to provide technical assistance to the Ministry of Health and Social Welfare (MoHSW)
• UNICEF’s Deputy Representative held separate meetings with the Minister of Health and an ECHO representative to discuss past, present and future collaboration to control the outbreak
• UNICEF C4D materials are now in circulation in Lofa, Margibi and Montserrado Counties, and are being utilized by County Health Teams, workers and volunteers, as well as key partner organizations

Situation Overview

At the daily meeting of the National Task Force (NTF) on Health Emergencies, relevant staff from the MoHSW and key partners provided the following updates:

SURVEILLANCE, VERIFICATION AND CASE MANAGEMENT:

• The number of suspected and confirmed Ebola cases reported in Liberia has risen to 14, while related deaths have risen to six. The new cases include the following:\(^2\)
  o A woman in Foya, Lofa County (deceased)\(^3\)
  o A hunter treated at a hospital in Tappita, Nimba County (deceased)
  o Four patients at Phebe Hospital in Bong County (under observation, may have Lassa fever, patients include one nine-year-old child)
  o A patient in Saclepea, Nimba County\(^4\)
• Counties of high concern for Ebola now include Lofa, Bong, Nimba, Margibi and Montserrado.
• The woman who tested positive for Ebola in Foya, Lofa County, before travelling to Margibi County on Monday (31 March) is in a newly established isolation unit at Firestone Duside Hospital, Margibi County. Her two children and husband are under quarantine for a period of 21 days in a housing unit not far from the hospital; samples have been taken from each of them for testing; and county health authorities have sensitized the family and as well as the community to the importance of the quarantine.
• The taxi driver who transported the woman remains under surveillance and a sample has been taken from him for testing. A MoHSW surveillance officer is also tracking a second taxi driver and a motorbike rider who both transported the infected woman after she arrived in the Montserrado/Margibi area.
• A small team from MSF will land at Roberts International Airport (RIA) in Margibi County this afternoon to discuss extending MSF support in case management to the MoHSW. Meanwhile, MSF has facilitated the establishment of a second Institut Pasteur lab in Guékédou, Guinea, to complement the existing lab in Conakry. A number of new samples from Liberia are being sent to these labs for testing.

\(^1\) These figures were as of 8 AM on 2 April.
\(^2\) Again, these figures are as of 8 AM on 2 April.
\(^3\) Like the confirmed Ebola patient under treatment at Firestone Duside Hospital in Margibi County, this woman reportedly had contact with the woman who tested positive for Ebola before succumbing to the disease last week.
\(^4\) This patient reportedly came from Guinea.
BUDGET AND DONOR SUPPORT:
- ECHO has reportedly committed a total of 800,000 EURO to the Ebola response in the sub-region. An ECHO representative from Abdijan, Côte d'Ivoire, is in Liberia to discuss using part of these funds to support MSF in Liberia and possibly to fill other gaps.
- The Chinese government has indicated to the Minister of Health that it may provide support.
- The MoHSW and partners continue to make reference to gaps in key components of the response budget. Needs include:
  - Additional support for training those in charge of WASH activities such as environmental spraying, mixing chlorine solutions, etc.
  - More support for interpersonal communication, especially in urban areas.
  - Additional tents for use as isolation units and more personal protective equipment (PPE) kits.
- A master document mapping overall support to the response budget is not available. The lack of this document is somewhat hindering response, as partners and donors are unclear as to where exactly the gaps exist. The Minister of Health directed the Deputy Minister, who is also the Chief Medical Officer (CMO), to request a list of contributions to date (including human, financial and material) from each partner, so as to facilitate better coordination/additional commitments.

INFORMATION AND REFERRAL MANAGEMENT:
- The Deputy Minister/CMO appeared on two radio programmes, including UNMIL Radio, this morning to update the public on the situation.

COORDINATION WITH COUNTY HEALTH TEAMS, GOVERNMENT AGENCIES AND OTHER MINISTRIES:
- The Deputy Minister of Health/CMO, her Director of Disease Prevention and Control, the WHO Liberia representative and the CMO of UNMIL returned from their one-day visit in Lofa County yesterday (1 April). The team met with the County Superintendent, County Health Team (CHT) and UNMIL senior officials. Among the requests made by county authorities were support for an isolation unit in Voinjama and the urgent provision of PPEs, IV fluids and other disease control materials for the hospital in Foya.
- Meanwhile, MoHSW staff and Dr. Moses Massaquoi of the Clinton Health Access Initiative (CHAI) visited the infected patient and her family in Margibi County yesterday (1 April); successfully ensured her isolation and that of her family members; and facilitated a training for health workers at Firestone Duside Hospital (the workers had refused to accept the infected patient without this preparation).
- Reports from partners, including Global Communities, indicate a notable level of government coordination in the response to Ebola in Lofa County, where the Superintendent, CHT, District Health Officers (DHOs) and other local authorities have been holding regular meetings with partners. Similar efforts are being initiated in Bong and Nimba Counties, though they are currently minimal. Reports on these coordination meetings do not, however, appear to be reaching Monrovia.
- The Legislature is pushing the Minister of Health to support closure of the borders, but he is not approving the measure on several grounds. He will speak at the Legislature on the issue today.
- A County Health Officer (CHO) from Gbarpolu attended the NTF to request MoHSW and/or Ministry support with logistics to facilitate monitoring and awareness activities in the county.

COORDINATION WITH PARTNERS:
- UNICEF continues to lead the Emergency Communications-Health Promotion Committee of the NTF and to provide critical support to the WASH Committee (see below for details).
- As indicated, MSF has been successfully engaged by the MoHSW, largely with the support of the Dr. Massaquoi of CHAI. The team will bring with them one Ebola kit containing over 200 items needed for case management. They will discuss bringing two additional kits and staff from the Ebola unit of MSF in Brussels in the coming days, to further support the MoHSW in the Ebola response. The MoHSW plans to request that MSF also help establish a lab in Liberia to test Ebola specimens.
- ArcelorMittal provided 10 PPEs to Fireside Duside Hospital to prepare the staff to accept the infected patient and establish an isolation unit. The steel manufacturing company, which has an iron ore mining site in Yekepa, Nimba County, also flew in a consultant to assist them. The consultant reportedly worked on the Ebola outbreak in Uganda.
• Save the Children, Samaritan’s Purse, IRC, Global Communities, Liberian National Red Cross, Population Services International (PSI), Plan-Liberia, BRAC, Pentecostal Mission Unlimited (PMU), Liberia Teacher Training Program (LTTP) and UNFPA all continue to support the response.
• Concern Worldwide has offered to disseminate the UNICEF-developed/MoHSW-approved Ebola brochures to areas of rural Bong and Nimba Counties.
• WHO and CHAI continue to provide advisory support to the MoHSW, and it is hoped that WHO will deliver 1,000 PPEs to Liberia from Ghana by Friday.
• USAID is donating coolers for use in storing samples. The coolers are expected to arrive by Friday. The US government has also facilitated the dispatching to Liberia of a small team of technical experts from the Center for Disease Control (CDC) to provide technical assistance to the MoHSW.

UNICEF Response

UNICEF’s Deputy Representative met with both the Minister of Health and his Deputy to discuss the Ebola outbreak. UNICEF reconfirmed its commitment to support the Ministry to the fullest extent possible, but requested more information on exact needs. The Minister said such information would be provided.

HEALTH AND COMMUNICATION FOR DEVELOPMENT (C4D):
• Since yesterday, one primary development has been the active dissemination of C4D materials across the country.
  o The 30,000 copies of the Ebola brochure, which were developed by UNICEF and printed by Plan and UNFPA, are being disseminated to CHTs and other partners in the field for use in outreach.
  o The key spot messages and dramas UNICEF developed are being disseminated via ELBC and UNMIL Radio, and a team is taking the messages to Foya, Lofa County, via Bong County. ELWA Radio, which has a shortwave frequency, has also been approached to carry the messages.
• In addition, UNICEF, in collaboration with the Emergency Communications Committee, has made contact with the Inter-Religious Council of Liberia (IRCL) about using their existing network of churches and mosques across the country for further dissemination of key Ebola messages.
• Meanwhile, a revised Ebola brochure has been drafted and is awaiting approval from the MoHSW.

WASH:
• The materials provided to date by the UNICEF WASH programme have been distributed as follows:
  o The two 72-metre tents have been sent to Lofa and Bong, respectively, for use in establishing isolation units at hospitals
  o The chlorine and soap has been divided between Lofa and Margibi Counties
• The MoHSW has indicated that it will require additional tents to establish more isolation units. UNICEF is in discussion with the MoHSW regarding the number of tents required and their intended use.

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