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

- As of 30 July, the latest sitrep issued by the MOHSW, the cumulative number of suspected, probable and confirmed Ebola cases reported during Outbreak #2 in Liberia stood at 383; the total number of suspected, probable and confirmed Ebola deaths during Outbreak #2 stood at 216; and the total number of suspected, probable and confirmed Ebola cases reported among health workers since the epidemic began stood at 56.2
- To date, confirmed Ebola cases have been reported in Bomi, Bong, Lofa, Margibi, Montserrado and Nimba Counties, and probable cases have been reported in Grand Cape Mount and Rivercess Counties (one in each county). Meanwhile, the suspected Ebola case and death in Grand Gedeh County has been removed from the official totals following a negative Ebola test result.
- The capacity of the Ebola Treatment Units at Foya Borma Hospital in Lofa County and ELWA Hospital in Montserrat County are reported to be overstretched. The Ministry of Health and Social Welfare (MoHSW) is working with Médecins Sans Frontières (MSF) and other partners to resolve the situation.
- Resistance to Ebola response teams in affected communities continues to pose challenges, and in some cases, to result in security incidents. The Armed Forces of Liberia (AFL) and Liberian National Police (LNP) are working with the MoHSW to address real and potential threats.
- UNICEF provided additional sprayers, plastic buckets, safety goggles, soap and chlorine and donated a second jeep to the MoHSW to assist in the Ebola response, and continues to play a key role in social mobilization efforts. Over 130 animators continue to work in communities and towns in the most affected Counties. UNICEF has also deployed a Logistics Specialist to the MoHSW to improve logistics management.
- UNICEF’s budget for the Ebola outbreak response is US$ 1.59 million for the period between March and September 2014. The funding gap is US$ 960,000.

Situation Overview

- According to the MoHSW, between 23:00 on 28 July and 23:00 on 30 July, 34 additional suspected, probable and confirmed Ebola cases and 46 additional suspected, probable and confirmed Ebola deaths were added to the cumulative totals in Liberia. Breakdown by County is as follows:
  - Bomi: One (1) probable case and six (6) deaths.
  - Grand Cape Mount: One (1) probable case and one (1) death (*note that this is the same case*).
  - Lofa: 10 confirmed cases, five (5) probable cases and 14 deaths.
  - Montserrat: 13 probable cases and 25 deaths.
  - Nimba: One (1) suspected case and two (2) probable cases.
  - Rivercess: One (1) probable case and one (1) death (*note that this is the same case*).
- The additional cases and deaths include:
  - According to the MoHSW, a cumulative 11 new cases and eight (8) new deaths were reported among health care workers.
  - The first probable Ebola cases from Grand Cape Mount and Rivercess Counties were reported. In each county, one probable case was reported and the patient died.
- The sample from the suspected Ebola case reported in Grand Gedeh County tested negative for the virus. As such, the case (which was also recorded as a suspected death) has been removed from the official totals.

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1 Outbreak #2 began on 29 May.
2 All statistics are drawn from MoHSW Ebola SitRep #76, which reports cumulative cases as of 23:00 on 30 July.
With these changes, the total number of suspected, probable and confirmed Ebola cases reported in Liberia during Outbreak #2 now stands at 383;\(^3\) the total number of suspected, probable and confirmed Ebola deaths stands at 216; and the case fatality rate for probable and confirmed cases stands at 67 per cent. Case breakdown by County is as follows:

- **Bomi**: 16 probable and seven (7) confirmed.
- **Bong**: 16 suspected, 13 probable and 10 confirmed.
- **Grand Cape Mount**: One (1) probable.
- **Lofa**: 54 suspected, 85 probable and 54 confirmed.
- **Margibi**: Two (2) suspected, two (2) probable and two (2) confirmed.
- **Montserrado**: 27 suspected, 57 probable and 27 confirmed.\(^4\)
- **Nimba**: Two (2) suspected, four (4) probable and three (3) confirmed.
- **Rivercess**: One (1) probable.

The total number of suspected, probable and confirmed Ebola cases among health workers since the epidemic began stands at 56, of which 34 have resulted in death.

- Bomi, Bong, Lofa, Margibi, Montserrado and Nimba Counties remain the six (6) counties where confirmed Ebola cases have been reported. Probable cases have also been reported in Grand Cape Mount and Rivercess Counties (one in each county).

### Major Developments and Challenges

- The Ebola Treatment Units (ETUs) at Foya Borma Hospital in Lofa County and ELWA Hospital in Montserrado County are both beyond capacity.
  - The ETU at ELWA, which was built to hold 18 patients, is now housing 25 patients. Expansion of the unit remains stalled following the withdrawal of Samaritan’s Purse from the unit. In addition to managing the ETU itself, Samaritan’s Purse was also in charge of expanding the unit. A construction consultant from MSF is due to arrive this weekend to begin work next week. Liberian security forces will be asked to attend the construction site to prevent any violent demonstrations by the community, which gathered several times last week to protest the expansion of the unit.
  - The ETU in Foya is currently staffed by Liberian workers, following the withdrawal of Samaritan’s Purse. However, MSF has dispatched a four-person team of expat workers from its centre in Guéckédou, Guinea. This team will be escorted to the ETU site by the AFL and the LNP. By next week, MSF hopes to have a permanent presence of staff at the ETU.

- Challenges in the swift burial of bodies of deceased Ebola victims is also complicating the response effort.
  - As of this morning, an area of ELWA, Montserrado County, was holding 14 bodies of Ebola victims. The Red Cross planned to deploy a team to bury these bodies today, following a security assessment by an advance team including the Liberian National Police (LNP), who would also accompany the burial team itself.
  - The Red Cross has reportedly established three teams to assist in burying the bodies of Ebola cases, including those at ELWA. Security of these teams remains a concern, and LNP has been activated to assist.

- Resistance among communities to contact tracing, burial teams and expansion of Ebola Treatment Units also remains a major challenge to the Ebola response. For example, a contact tracing team in Bomi County was chased out of a community by a group armed with cutlasses. The MoHSW has engaged the AFL and the LNP to bolster security for these teams and operations.

- The impact of the outbreak on the morale of health workers is another challenge to the response, as workers in some hospitals, such as JFK in Monrovia, have refused to report to work. To address low morale and fears, the Case Management Committee of the Ebola Incident Management System has:
  - Scheduled disinfection of several major hospitals where Ebola victims have been held and/or died, to be completed by Sunday.
  - Established 38 teams to go to six counties, train health workers in facilities there and deliver key supplies. The counties include Bomi, Gbarpolu, Grand Cape Mount, Lofa, Margbi and Nimba.

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\(^3\) As previously mentioned, all statistics are drawn from MoHSW Ebola SitRep #76, which reports cumulative cases as of 23:00 on 30 July.

\(^4\) Two confirmed cases were also removed from the tally for this County.
(Montserrado County health workers have already received this training). The Committee is seeking 27 additional vehicles to support these teams (11 are available).
  
  o Developed a phased approach to the full re-opening of major hospitals, following the disinfection and training of health workers.

**UNICEF Response**

As a member of the Ebola National Task Force, UNICEF continues to provide critical social mobilization/communications, case management/health and logistical support to the national response.

**CASE MANAGEMENT/HEALTH:**

- UNICEF donated an additional 15 sprayers (16 litres each), 15 plastic buckets with faucets, 15 pairs of safety goggles, 1,800 bars of soap (110 grams each) and 250 heavy duty gloves to the MoHSW to assist in infection control (spraying of Ebola-affected areas, etc.).

**LOGISTICS:**

- UNICEF also donated a second jeep to the MoHSW to assist in the Ebola response. UNICEF has also deployed a Logistics Specialist to the MoHSW to improve logistics management. It will be recalled that UNICEF also rented a truck for use by the MoHSW for an initial period of two weeks (extendable), and donated seven (7) motorbikes earlier in the epidemic.

**UNICEF Funding Needs:**

- UNICEF’s budget for the Ebola response from March to September 2014 is US$ 1.59 million. The following support has been provided to date: US$ 306,355 in approved funds from the UN Central Emergency Response Fund (CERF); US$ 100,000 from the Japan National Committee for UNICEF; US$100,000 from the US OFDA (provided through the UNICEF Regional Office for West and Central Africa); US$ 30,000 from the UK Department for International Development (re-programmed funds); and US$ 93,000 from the UK Committee for UNICEF. The funding gap is US$ 960,000.

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