



Yeabu, 10 and Fatu, 5 are two of the many children who survived Ebola. They have been reunited with their families. © UNICEF Sierra Leone/2014/Sulaiman Stephens

Weekly SitRep – Reporting Period: 16-22 October 2014

Sierra Leone

Humanitarian Situation Report



SITUATION IN NUMBERS

As of 22 October 2014

3,345

of cumulative confirmed Ebola cases
(GoSL; WHO, Oct 2014)

1,001*

of confirmed Ebola deaths
(GoSL, Oct 2014)

2,220**

of children affected by Ebola
(GoSL, Oct 2014)

3.12 million (1.01 million under 5)

of children living in affected areas
(GoSL 2014)

6.34 million

Population of Sierra Leone
(GoSL 2014; OCHA, Sept 2014)

Priority Humanitarian Funding needs September 2014 to February 2015

US\$ 61 million***

Funding gap of

52%

* Deaths reported are not new but have been updated retrospectively from hospital records reviewed by GoSL & WHO. Data cleaning is ongoing therefore the figures will keep on changing as the cleaning continues.

**The Government is defining the number of children affected as: quarantined, orphaned, UASC, in treatment & discharged. Orphans are children who have lost one or both parents.

***In line with the UN inter-agency response strategy for the Ebola Outbreak, UNICEF is appealing for US \$60,997,749 for Sierra Leone over the next 6 months: (UNICEF)

Highlights

- As of 22 October 2014, the cumulative number of laboratory confirmed Ebola virus disease (EVD) cases is 3,345. The number of confirmed deaths is 1,001 with 710 survivors.*
- Of the EVD confirmed cases, around 22 percent are children and youth (0-17 years), with more than 70 child survivors. To date, 2,220 children have been identified as being affected by the Ebola crisis (1,100 girls and 1,120 boys), including 674 children who have been orphaned.**
- With the support of UNICEF, 36 adult Ebola survivors were brought together in Kenema for the first Survivors conference. The conference provided an opportunity to share experiences, receive psychosocial support and discuss reintegration challenges, such as stigmatization within families and communities.
- The President announced on 18 October 2014, that the Minister of Defence would head a new National Ebola Response Centre.
- A UNICEF charter flight arrived on 20 October 2014, with around 59 metric tons of supplies. To date, UNICEF has chartered seven flights with over 392 metric tons of supplies, funded by DFID and the World Bank.
- Funding is urgently needed to scale-up UNICEF's response to the crisis; over 52 percent of the US\$ 61 million appeal remains unfunded.

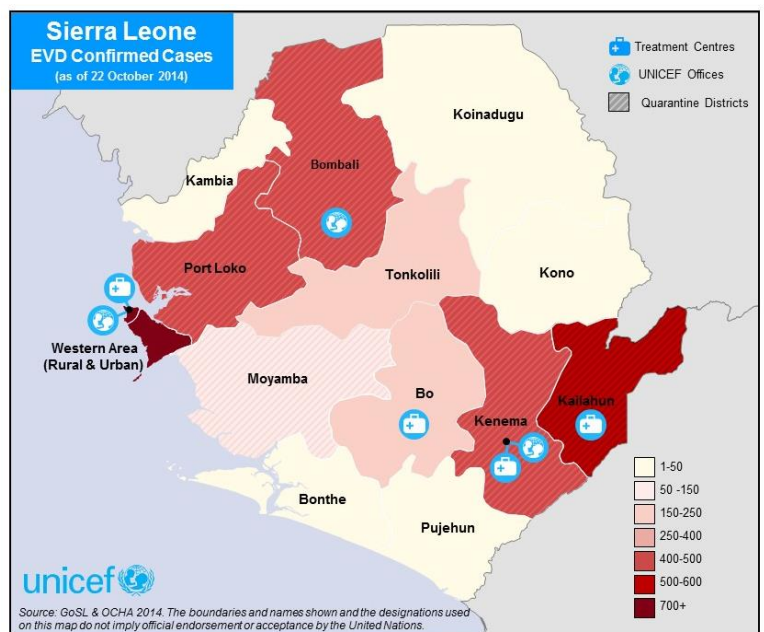
* All statistics, other than those related to UNICEF support, are from the GoSL Daily EVD SitRep issued by the Ministry of Health and Sanitation and WHO's Ebola Response Road Map Weekly Updates. For more details on breakdown of cases see: [\(MoHS\)](#) & [\(WHO\)](#)

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Situation Overview & Humanitarian Needs

The Ebola virus disease (EVD) outbreak in Sierra Leone continues to ravage the entire country with all 14 districts confirming cases. The surge in the past few weeks in the Western Area alone, including in the capital Freetown, continues to rise at an alarming rate. It is now the district with the highest prevalence of EVD, with over 870 confirmed cases. In the eastern part of the country - in Kailahun and Kenema - where the outbreak first occurred, new cases are also being reported as a result of unsafe burial practices. The districts of Bombali, Kailahun, Kenema, Moyamba and Port Loko all remain under official quarantine.

Fueling high transmissions rates in the Western Area, Bombali and Port Loko is that many suspected and confirmed cases are being turned away from Ebola holding centres (EHCs) and treatment units (ETUs) because they have reached full capacity. Also contributing to the increase is the movement of people across districts, including suspected and confirmed cases and those travelling to and from unsafe burials. Without proper isolation, families and communities are at a higher risk of infection, including a heightened risk for children. The crisis is having a significant impact on children, with over 2,220 affected, including 674 now orphaned. Further, almost two million children do not have access to school, as they remain closed across the country. More attention needs to be given to issues specific to children, including care, stigma and psychosocial support.



Although overall coordination and capacity has improved, delays continue in lab result confirmation, burials and timely payment of incentives for workers, increasing tensions in communities. More health workers, protective equipment, beds and treatments centres are also urgently needed. Early isolation and care, as well as continuing to work with communities to change behaviors around unsafe burial practices, are key drivers in containing the outbreak. Addressing fear and stigma are also essential components of the response.

Humanitarian leadership and coordination

The UN Mission for Ebola Emergency Response (UNMEER) held a four day meeting in Accra, Ghana, from 14 to 17 October 2014, to develop an operational framework to ensure the wider UN system adoption of a unified and coordinated approach in supporting the national responses plans. In Sierra Leone, President Ernest Bai Koroma announced on 18 October 2014, that a new body would be established to lead the Ebola response in the country. The Minister of Defence, Mr. Paolo Conteh was appointed as the Chief Executive Officer of the National Ebola Response Centre (NERC) and will report directly to the president. The previous team, the Emergency Operation Centre (EOC), chaired by the Chief Medical Officer of the Ministry of Health and Sanitation (MoHS), is being restructured to fit within the new centre. The NERC will be located in the premises of the former Special Court in Freetown, together with UNMEER, to strengthen overall coordination and effective response to the crisis.

Programme Response

In partnership with the Government, UN actors and NGOs, UNICEF is contributing to national efforts to control and respond to the Ebola crisis in Sierra Leone. UNICEF is working closely with partners to provide innovate education programmes, protection, health, WASH as well as essential medicines and personal protective equipment (PPEs). UNICEF has deployed staff to all districts, including hotspots areas to support and monitor the response. Large-scale social mobilization and communication campaigns continue throughout the country.

Communications for Development (C4D)/Social Mobilization (SM)¹

- With the support of UNICEF, a half day orientation with paramount chiefs and local councils was organized on 18 October 2014, in which 145 out of 149 paramount chiefs participated. The leaders were brought together to engage and enlist community ownership and strengthen partnerships in the overall Ebola response. The Minister of Local Government and Rural Development, the Minister of Health and Sanitation as well as the Ebola advisor to the President, the Chief Medical Officer, and the National EOC coordinator were in attendance. Presentations and discussions focused on: i) Kenema's EVD experience/response; ii) Safe burials; iii) Ebola community care centres; and, iv) Neighborhood support structures.

¹ UNICEF is the lead agency for the UN on social mobilization in the Ebola response and is co-chairing the Social Mobilization Pillar with the Health Education Division (HED) of the MoHS. The SM Pillar meets three times a week at UNICEF.

- To engage religious leaders from both Christian and Muslim groups in behaviour change practices within their congregations, the consortium working with faith based organisations and religious leaders held a consultation meeting on 15 October 2014 to work on the consolidated plan. The meeting was organized by Inter-religious Council of Sierra Leone.
- The Special Needs group has been divided into five working groups with an organization tasked as lead: i) Children, led by Save the Children; ii) People with disabilities, led by Handicap international; iii) People living with HIV, led by Network of HIV Positives in Sierra Leone (NETHIPS); iv) Sex workers led by All Walks of Life (AWOL); and v) Survivors, led by the Ministry of Social Welfare, Gender & Children Affairs (MSWGCA). Existing gaps in social mobilization interventions are being identified and a consolidated action plan is being developed for engaging these specific target groups for behavior change.

Health

- UNICEF is supporting the MoHS in its effort to rebuild confidence and strengthen the provision of routine essential health systems across the country. Infection prevention and control (IPC) trainings will be conducted in all 1,185 in the country, targeting around 4,000 health staff and other workers. This week, the IPC training of trainers (ToT) continued to be rolled out in five districts - Bo, Bombali, Moyamba, Port Loko and Tonkolili.² The two day, ToT involved over 230 health staff who will now be tasked with onsite training at peripheral health units (PHUs) in their district. To date, 273 health staff have been trained as trainers in IPC. Further ToTs will take place next week in Kailahun, Kambia, Kono and Pujehun. The distribution of protective equipment to the 110 PHUs in Western Area was completed on 20 October 2014. The initial plan was for the IPC training to be completed by the end of October 2014 but with constraints in the global production capacity of protective coveralls, the training is most likely to be completed by mid-November.
- UNICEF supported the Reproductive and Child Health Directorate of the MoHS to revise and validate guidelines and protocols for providing maternal and new-born health (MNH) services in the Ebola context. A training for health workers on the revised guidelines will be conducted by the MoHS, with the support of UNICEF and Center for Disease Control (CDC), targeting 2,000 staff working in MNH services in all PHUs.
- UNICEF continues to work with district health management teams (DHMT) and NGO partners to support a network of community health workers (CHW) providing messages on Ebola prevention in 10 districts.

Nutrition

- With UNICEF support, the Food and Nutrition Directorate of the MoHS approved the distribution plan for nutritional commodities to all EHCs and ETUs as well as interim care centers (ICCs) for children. As a result, UNICEF distributed a 15-day nutrition supply to EVD patients, including for infants and children, to the ETU in Hastings, Freetown. The distribution included high energy fortified biscuits (BP100); ready-to-use infant formula (RUIF) and Ultra High Temperature (UHT) whole/full cream milk. Distribution of supplies to the remaining EHCs, ETUs and ICCs will be done next week.
- UNICEF and other partners supported the MoHS to adapt and incorporate the global recommendations for treatment of severe acute malnutrition (SAM) into the integrated management of acute malnutrition (IMAM) protocol.
 - The IMAM protocol has been finalized and will be submitted for printing next week in preparation for the orientation and training for scale-up planned to commence in early November 2014. This includes the revision and adaption of the screening procedures to fit the “No Touch Policy.”
 - A screening pictorial instruction booklet for mothers of children (6-59 months), will be pre-tested next week before finalization, printing and dissemination. The pictorial instruction will assist the mothers or caregivers to conduct screening of their own children in the presence of trained CHWs and/or mother support groups (MSGs). Instruction guidelines for CHWs and MSGs on how to support mothers during screening for SAM and making referrals have also been developed.

WASH

- To address the issue of the increasing EVD caseload in the Western Area and the inadequate number of beds available, UNICEF participated in an inter-agency WASH assessment mission with UNMEER, WHO and WFP to identify potential sites for new EHCs or ETUs. Three proposed sites were assessed for an initial 350 beds. WASH assessments were also completed at the EHCs and ETUs in Bo, Moyamba and Port Loko.
- UNICEF continues to support two ETUs in Hastings and Lakka (Western Area) and two EHCs in Zimmi (Pujehun) and Moyamba with waste management facilities and increased water storage.

² The training is conducted in collaboration with the MoHS, the CDC, the Ebola Response Consortium (ERC) and UNICEF with funding from DFID. The ERC comprises of IRC, Save the Children, Concern Worldwide, Marie Stopes Sierra Leone (MSSL) and Care.

- 50,000 10L collapsible jerry cans have arrived in country and will be distributed through WFP packages together with a 21-day supply of aqua tabs to support quarantined households and communities. This week, 200 pool tester kits will arrive to monitor the water quality in EHCs and ETUs. Each kit can be used for approximately 250 tests.
- With UNICEF support, through MoHS and our NGO partners, work on the rehabilitation/construction of WASH facilities at EHCs in Bo, Bombali and Kambia is ongoing.

Child Protection³

- UNICEF is working with partners to reunite unaccompanied and separated children (UASC), including orphans, with family members through an extensive family tracing and reunification (FTR) network, which also provides children with psychosocial support (PSS). As of 21 October 2014, the FTR network has identified 2,220 children as being directly affected by the Ebola crisis in 12 of the districts⁴ – 1,100 girls (49 percent) and 1,120 boys (51 percent), with the majority coming from Kenema (402), Tonkolili (382) and Western Area Urban (247). The highest age group affected are between 5 and 9 years, accounting for 35 percent of all affected children. Of the affected children, 611 are under 5 (28 percent); 770 are between 5 and 9 (35 percent); 562 are 10 to 14 years old (25 percent); and, 272 are 15 to 17 (12 percent).⁵ There are over 70 child survivors.
- 674 children have been orphaned by Ebola out of which 521 (262 girls, 259 boys) have lost both parents and 153 (68 girls, 85 boys) have lost one parent. Children in quarantine comprise 1,569 of the total affected and are receiving food supplies from MoHS/WFP. Further, 68 children have received PSS; 43 have benefitted from interim care after release from treatment or found separated; 125 have been reunified with families; and 470 have been provided with food outside of quarantine, such as in the ICCs.
- A survivors' conference bringing 36 Ebola survivors together with 30 supporters, religious and traditional leaders took place in Kenema district on 16 and 17 October 2014. This is the first conference planned to provide an opportunity for survivors to tell their story, receive PSS and to address stigmatization challenges they face when reintegrating back into their communities. Harrowing and moving stories were shared about resilience and survival. The Psychosocial manual for Ebola affected communities, developed with UNICEF support, was officially launched at the conference.
- UNICEF supported the release of 45 survivors, including 12 children from the ETU in Hastings, Freetown on 21 October 2014. 39 of the families, relatives and communities were contacted by partners and mediation conducted for acceptance of the survivors. 5 children (3 girls, 2 boys) were reunified with their families at the time of discharge. 7 children were referred to an ICC (4 girls, 3 boys) and are receiving PSS.
- 37 FTR partners were trained on psychosocial support using the Ebola PSS manual. The training, facilitated by GOAL Ireland and UNICEF, targeted the MSWGCA field based staff, senior management and NGO partners. Training plans were developed and will be rolled out to the districts from 22 to 31 October 2014.
- With the surge in infection rates in Bombali and Port Loko, there are increasing needs for PSS and FTR. The pillar is facing challenges to provide these services to contact children, but is working to recruit survivors to address this gap.



Alice, one of the many nurses working on the front lines at the EHC in Port Loko, takes care of Lamine, 14 months, who lost both of his parents to Ebola. Lamine has tested negative. Alice says if there is no one else, she will take care of him. © UNICEF Sierra Leone/2014/Tanya Bindra

³ UNICEF is the lead agency for the UN on child protection in the Ebola response and is co-chairing the Child Protection, Psychosocial and Gender Pillar with MSWGCA. The pillar meets once a week at the MSWGCA.

⁴ Affected children have not yet been reported in Kambia and Koindugu.

⁵ The ages of five of the affected children (4 girls, 1 boy) is not yet known. UNICEF is working with the MSWGCA to obtain disaggregated data for infants 0-5 months and 6-12 months, currently the data is group with one year olds.

Education

- With technical and financial support of UNICEF, the Ministry of Education, Science and Technology (MEST) conducted a one-day ToT for 52 participants on monitoring initial access and mobilizing households around the emergency radio education programme (EREP).⁶ Participants from each district included the Deputy Director of the MEST district office, a representative from the Sierra Leone Teachers' Union and a representative from the Head Teachers Council as well as 10 participants from collaborating NGO partners. Following the ToT, more than 1,180 teachers already on payroll and 80 supervisors will be trained to monitor the EREP, with at least 40 percent being female. Monitors will be in all 394 wards across the country and will track household access to the EREP. Mobilizers will be tasked with highlighting the importance of supporting school-age children to engage in programme. The training of the monitors/mobilizers is planned for 29 October 2014.
- UNICEF is working with the MEST to improve the quality of the EREP, including the hiring of a media institution to strengthen and build capacity around script writing, presentation, production and monitoring.



Joseph, 7, engages in the EREP, supported by UNICEF, in his New England neighborhood in Freetown. © UNICEF Sierra Leone/2014/Yolanda Romero

HIV/AIDS

- UNICEF is working with its partner HAPPY⁷ as well as HIV clinic staff, social workers and HIV support groups to reach out to people living with HIV and encouraging them to continue their lifesaving antiretroviral treatment – this includes targeting more than 500 children and 1100 women on ARV in Western Area (rural and urban) Bombali, Kenema, Kailahun, Pujehun and Port Loko. In its fourth week of implementation, HAPPY is working in these seven districts to trace HIV defaulter patients, with focus on children and pregnant women/lactating mothers. Around 35 to 40 percent were defaulters in September 2014. UNICEF is also working with the National AIDS Control Programme to procure and distribute protective equipment to 135 HIV clinics and 160 tuberculosis treatment centers across the country to ensure continuity of services to their patients while protecting staff.

Media & External Communication

- UNICEF continues to provide international media with interviews, with requests increasing significantly this week with the first Survivors conference held in Kenema. UNICEF facilitated interviews with survivors and UNICEF child protection staff with the BBC, Russian Television, AFP, Australian TV, Sky News, Canadian TV and Reuters. Survivors were directly interviewed through Skype and the telephone, and media is keen to continue following their stories. UNICEF also assisted with media coverage of the Survivors conference, with reporters from the Canadian Broadcasting Corporation, CCTV and VOA in Kenema.
- UNICEF facilitated the production of a public service announcement ([PSA on Ebola](#)) by UNICEF Goodwill Ambassador David Beckham. Broadcasting has started on national television and screening on public platforms in Freetown. The PSA has also been distributed to the Sierra Leone Football Association (SLFA) for dissemination to their stakeholders across the country. It will also be screened on town/community halls and other areas during sensitization campaigns. UNICEF remains active on social media, including the Sierra Leone Facebook page and on Twitter.

Supply and Logistics

- With funding from the World Bank and DFID, another UNICEF chartered flight arrived on 20 October 2014, with around 59 metric tons of supplies, amounting to US\$ 642,000. The supplies included protective coveralls, gloves, face shields, goggles, masks, boots, boot covers, body bags, essential medicines and consumables as well as collapsible water containers, stretchers for burial services and vacutainers for blood sample collection.

⁶ The EREP broadcasts daily one-hour lessons across a network of 41 radio stations nationwide, coordinated by the Sierra Leone Association of Journalists (SLAJ) and the Independent Radio Network (IRN). Different timeslots have been allocated throughout the day for primary, junior and secondary schoolchildren.

⁷ UNICEF's partner, HIV and AIDS Prevention Project for Youths (HAPPY), is working to alleviate the impact of HIV on children, focusing on tracing and ensuring they continue their treatment.

- To date, over 392 metric tons of supplies, worth over US\$ 3.6 million has arrived in Sierra Leone on seven UNICEF chartered flights, with funding provided by the World Bank and DFID. Supplies included PPEs, essential medicines, nutrition and medical supplies. Around 333 metric tons have been distributed from the central medical store (CMS) in Freetown to 12 district medical stores (DMSs), 33 EHCs and four ETUs, covering about one month of needs.
- The distribution of infusions, oral rehydration salts (ORS), surgical gloves, chlorine, coveralls, body bags, essential medicines and consumables was completed for five EHC's in four districts during the reporting week.

Funding

- In line with the UN inter-agency response strategy for the Ebola Outbreak, UNICEF is appealing for US\$ 61 million for Sierra Leone to support the needs of women and children affected by the Ebola crisis. This appeal will cover six months of the emergency response, from September 2014 to February 2015.⁸ To date, US\$ 29.6 million has been received, 48 percent of the appeal.
- UNICEF greatly appreciates the contributions that have been received to date from the Government of Japan, ECHO, DFID, OFDA/USAID, OCHA, the World Bank, SLFA, and US Fund for UNICEF, and private sector (Dawnus and Heidelberg Cement). Continued funding from donors is urgently needed to ensure that UNICEF and its partners can meet the rapidly growing needs of women and children affected by the crisis.

Next Situation Report: 29 October 2014

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UNICEF Sierra Leone YouTube: <https://www.youtube.com/user/UNICEFSL>

UNICEF Ebola Response Appeal: http://www.unicef.org/appeals/files/20140915_HAC_Ebola_Response.pdf

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⁸ Ebola Virus Disease Outbreak - Overview of Needs and Requirements - September 2014: [OCHA](#) & UNICEF Ebola Response Appeal: [UNICEF](#)