Situation Overview & Humanitarian Needs

Sierra Leone continues to deal with an unprecedented Ebola virus disease (EVD) outbreak – transmission remains intense and widespread. The entire health care system is strained and existing Ebola holding centres (EHCs) and treatment units (ETUs) cannot meet the needs of the increasing caseload. Health care workers are overstretched and more are urgently needed to scale-up and control the outbreak. Adding to the strain on health systems, of the 127 confirmed EVD cases among health workers, 101 have died of Ebola.

Further, confidence in the health system is extremely low with fears that people will become infected if they visit facilities for routine services. This includes many new and expecting mothers and young children. Ensuring that pregnant suspected and confirmed cases have access and are supported to have safe deliveries is critical. The current practice is for pregnant suspected cases to be referred to EHCs/ETUs but there are no services available at these facilities for routine services.

Highlights

- As of 29 October 2014, the cumulative number of laboratory confirmed Ebola virus disease (EVD) cases is 3,760. The number of confirmed deaths is 1,057 with 786 survivors.*
- Of the EVD confirmed cases, around 22 percent are children and youth (0-17 years), with more than 87 child survivors. To date, 2,719 children have been identified as being affected by the Ebola crisis (1,340 girls & 1,379 boys), including 873 children who have been orphaned.**
- Four districts are now reporting over 500 confirmed cases – Western Area (1,079), Kailahun (551), Bombali (541) and Port Loko (518).
- Almost 300 metric tons of urgently needed medical supplies arrived in Freetown this week as UNICEF steps up airlifts to help protect health workers across the country. The supplies, funded by the World Bank and DFID, arrived on four separate airlifts from Europe and China.
- Funding is urgently needed to scale-up UNICEF’s response to the crisis; over 47 percent of the US$ 61 million appeal remains unfunded.

*S 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]

**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.

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As of 29 October 2014

3,760
# of cumulative confirmed Ebola cases
(GoSL, 29 Oct 2014)

1,057*
# of confirmed Ebola deaths
(GoSL, 29 Oct 2014)

2,719**
# of children affected by Ebola
(GoSL, 28 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 47%

* 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.

**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]
facilities to support deliveries. In Freetown, a new isolation unit focusing on paediatric cases will open at the Ola During Children’s Hospital, which will aim to provide children (suspected and confirmed cases) with the special care they require.

The trend continues to be a surge in cases in the Western Area, including the capital Freetown, with the district reporting over 200 cases since last week. The districts of Bombali and Port Loko remain hotspots. Further, in Koinadugu, at least 15 cases are now confirmed in the hotspot areas in and around Niene Chiefdom — the villages of Fankoya, Kumala, Moria, Sumbaria. The district is in the north of the country and the affected chiefdom is in a remote and hard to reach area. Lack of infrastructure, including communication, is an issue with mobilizing rapid response to the area. Denial of Ebola also remains high in most areas of this district.

Unsafe burial practices, late reporting as well as delays in lab result confirmation continue to be some of the main drivers of transmission throughout the country. Further, some communities are still reluctant to provide information about suspect cases and delays in the collection of dead bodies is also contributing to high transmission rates. Although, varying across districts, the epidemiological causes of the transmission indicate that attending funerals remains the highest mode of transmission across the country. Travel, visiting hospitals and traditional healers are also causes.

Children have also been hit hard by the crisis, with over 2,719 affected, including 873 who have lost one or both parents to Ebola. These children require urgent care and psychosocial support. Stigma also remains high for child survivors. In addition, close to two million children are not going to school as they remain closed, leaving many at risk to dropping out completely, to child labour and teen pregnancy which were already at high levels prior to the outbreak.

Programme Response

In partnership with the Government, UN actors and NGOs, UNICEF is contributing to the 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

- With UNICEF support, street-to-street announcements and home visits by mobile teams in hotspot areas have been organized in Bombali and Port Loko, focusing on safe burial practices and early referral/isolation. Similar activities are planned for Bo, Kambia, Koinadugu, Moyamba, Tonkolili and the Western Area.
- In response to the new hotspots in Koinadugu, UNICEF field staff, in collaboration with the District Health Management Teams (DHMT), WHO, CDC and other partners, visited the affected chiefdom to assess the situation.
- On 24 October 2014, a UNICEF team comprised of C4D, emergency and health colleagues, met with the 13 paramount chiefs and DHMT members in Bombali to discuss the current Ebola epidemiological situation in the district and community engagement for the response. The paramount chiefs were enthusiastic to initiate community dialogue and community based interventions in their chiefdoms. The following day, five teams consisting of DHMT members, MoHS and UNICEF/WHO visited communities at high risk to request for their support for the Ebola response. The paramount chiefs with representatives of elderly, health workers, women, youth, council and influential community members participated in discussions on the way forward. They are willing to support any community initiative to fight against Ebola, including community care centres (CCCs).
- Mapping of human resource capacity for social mobilization (community mobilisers and administrative staffs at district level) among all partners is being conducted to assess a current HR situation and gaps in the country.

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.
Health

- Efforts to rebuild confidence and strengthen the provision of routine essential health systems continued this week in Kambia, Kono and Pujehun with the infection prevention and control (IPC) training of trainers (ToT).² A total of 55 health workers (district trainers) participated in the ToT and will now cascade the training to the 229 peripheral health units (PHUs) in these three districts. Also participating in the training were 10 members from each DHMT who will be tasked with supervising the implementation of the trainings in these 229 PHUs.

- The IPC training of PHU staff in the Western Area has started and by the end of the week, 23 of the 102 targeted PHUs will have benefited. The remaining trainings for the PHUs will be conducted by the end of November 2014. To date, over 350 health staff have been trained as IPC.

- A second shipment of IPC supplies, which included disposable surgical gowns and masks as well as infrared thermometers, heavy duty gloves and boots, arrived in Freetown on 26 and 27 October 2014 and will be distributed to all PHUs across the country.

- With UNICEF support, the Technical Community Health Working Group finalized the guidelines for integrated community case management (ICCM) to operationalize the "No Touch Policy" for community health workers (CHWs) in the Ebola context.

Nutrition

- To support supplementary feeding at five ETUs, UNICEF distributed a 15-day supply of high energy fortified biscuits (BP100) for 375 patients: 30 infants (6-12 months), 25 children (13-59 months) and 320 adults; 200 cartons of ready-to-use infant formula (RUIF) for 30 infants (0-5 months); and, 50 cartons of Ultra High Temperature (UHT) whole/full cream milk for 30 infants (6-12 months) as well as 37 cartons of BP100 to support 280 people discharged. In addition, 93 cartons of BP100, 620 cartons of RUIF and 320 cartons of UHT milk was distributed to support holding centers across the country. The distribution was conducted together with the disposable cups and spoons as well as instructions on how to use the nutrition supplies.

- UNICEF continues to support the MoHS to conduct the weekly nutrition in emergency coordination mechanism. Nutrition partners have agreed to develop a six month response plan focusing on scaling up nutrition response and interventions at district level; monitoring and evaluation (M&E) framework; coordination with other sectors (food security and livelihood, social welfare, surveillance); harmonization of information, education and communication (IEC) materials; and the coordination of food distribution to ensure timely delivery to quarantine households, treatment, holding, and interim care centers (ICCs). Subgroups in these areas will finalize the plan next week.

WASH

- UNICEF supported the newly established ETU in Port Loko with two power generators, a submersible pump and 30,000L capacity for water storage. The ETU has the capacity to support 50 beds.

- Rehabilitation of WASH facilities will be completed this week in Bombali, including the drilling of an additional water borehole to support three EHCs with a total capacity of 160 beds.

- UNICEF supported OXFAM to complete the construction of WASH facilities in Rokupa EHC (Western Area Rural) to initially support 23 beds (more in pipeline). This included supplying two 5,000L tanks and a 10,000L tank, an incinerator for waste management, as well as the rehabilitation of a well, installation of a hand pump and provision of 5kw generator.

- As part on the inter-agency response in the hotspot areas in Nieni Chiefdom in Koinadugu, UNICEF has distributed 3,000 collapsible jerry cans and 40,000 Aqua tabs for water purification (750 households will receive four 10L jerry cans, benefiting around 5,250 people).

- To increase access to safe water in these areas, the rehabilitation of four main water points is ongoing in Sumbaria village, which has a population of 850 people.

² IPC trainings will be conducted in all 1,185 PHUs in the country, targeting around 4,000 health staff and other workers.

Water and sanitation are crucial in the fight against Ebola. Opened in September 2014, with the support of UNICEF, Hastings ETU is Sierra Leone’s biggest and is equipped with three water tanks (10,000L each), a water tower with submersible pump and facilities such as latrines, showers, hand washing system and waste management. @UNICEF Sierra Leone/2014/Anne Boher
- An assessment of WASH needs in the EHCs and/or ETUs in Bo, Koinadugu, Moyamba, Port Loko and Pujehun has been completed and rapid response planning is ongoing. UNICEF in collaboration with partners are monitoring daily WASH facilities at the EHCs and ETUs in Western Area Urban and sharing results with the Ministry of Water Resources (MoWR) and the national water supply companies.
- Since June 2014, UNICEF’s WASH partners operating in seven districts have reached more than 529,690 people (75,670 households) with essential Ebola prevention messages and held 2,180 Ebola sensitization meetings.
- Major challenges in WASH include the rapidly changing response context and current funding availability.

**Education**
- The Emergency Radio Education Programme (EREP) continues broadcasting daily lessons across a network of 41 radio stations nationwide. On 23 and 24 October 2014, a rapid assessment of 1,710 households with school age children, across seven districts (Bo, Bonthe, Kenema, Kailahun, Moyamba, Port Loko and Pujehun) was conducted to determine if children were engaging in programme. At the time of the visit, 47 percent of the households had children listening. Some of the reasons for school-going children in these households not listening included, low awareness about the programme, lack of radios and batteries as well as broadcast coverage. On 28 October 2014, a meeting was held with the Minister of Education, the UNICEF Representative and Education Development Partners to addresses these challenges.

**Child Protection**
- As of 28 October 2014, the Family Tracing and Reunification (FTR) network has identified 2,719 children as being directly affected by the Ebola crisis in all but one district — 1,340 girls (49 percent) and 1,379 boys (51 percent), with the majority coming from Tonkolili (427) and Kenema (402). The highest age group affected are between 5 and 9 years, accounting for 35 percent of all affected children. Of the affected children, 732 are under 5 (27 percent); 939 are between 5 and 9 (35 percent); 688 are 10 to 14 years old (25 percent) and 340 are 15 to 17 (13 percent). There are over 87 child survivors.
- 873 children have been orphaned by Ebola out of which 658 (328 girls, 330 boys) have lost both parents and 215 (99 girls, 116 boys) have lost one parent. Children in quarantine comprise 2,047 of the total affected and are receiving food supplies from MoHS/WFP. Further, 402 children have received psychosocial support (PSS); 46 have benefitted from interim care after release from treatment or found separated; 132 have been reunified with families; and 472 have been provided with food outside of quarantine, such as in the ICCs.
- The finalised *Psychosocial Support Manual for Ebola Affected Communities* is being rolled out through 13 NGO partners in every district. Key staff including from the Ministry of Social Welfare, Gender and Children’s Affairs (MSWGCA) are currently being equipped to provide PSS to affected communities. With UNICEF support, 40 persons were trained this week as PSS trainers in Kailahun and Pujehun, including protection staff, religious leaders and members of surveillance teams.

**Media & External Communication**
- UNICEF continues to respond to queries and interview requests from international media, including with Canal Sur, KCRW Radio in Los Angeles, Channel 4, BBC, 20 Minutes newspaper in Spain and a Japanese weekly magazine, Josei Seven. UNICEF facilitated the visit of Israel TV, channel four (ITV), to the Hastings ETU in Freetown as well as interviews with two child survivors, a six and eight year old, who were among the 44 survivors discharged last week from Hastings.
- The public service announcement (PSA) on Ebola by UNICEF Goodwill Ambassador David Beckham continues to be screened in public screening platforms in Freetown and on National TV, gaining wide audiences. UNICEF continues to be active in social media platforms including the Sierra Leone Facebook page and on Twitter.

**Supply and Logistics**
- Four chartered flights arrived this week with around 284 metric tons of supplies including protective equipment for EHCs, ETUs and PHUs as well as tents and construction materials for care centres, consumables and free health care

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1. 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).
2. 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.
3. The pillar meets once a week at the MSWGCA.
4. Affected children have not yet been reported in Koinadugu.
5. The ages of 14 of the affected children (13 girls, 7 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.
(FHC) medicines. To date, over 676 metric tons of supplies have arrived in Sierra Leone on 11 UNICEF chartered flights, with funding provided by the World Bank and DFID.

**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. To date, US$ 32.5 million has been received, 53 percent of the appeal.

- UNICEF greatly appreciates the contributions that have been received to date from the Governments of Ireland and Japan, DFID, ECHO, OFDA/USAID, SIDA, OCHA, the World Bank, SLFA, and the UK 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: 5 November 2014**

UNICEF Sierra Leone Facebook: [https://www.facebook.com/unicefsierraleone](https://www.facebook.com/unicefsierraleone)
UNICEF Sierra Leone Twitter: [https://twitter.com/UnicefSL](https://twitter.com/UnicefSL)
UNICEF Sierra Leone YouTube: [https://www.youtube.com/user/UNICEFS](https://www.youtube.com/user/UNICEFS)

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7 Ebola Virus Disease Outbreak - Overview of Needs and Requirements - September 2014: [OCHA](http://www.unocha.org) & UNICEF Ebola Response Appeal: [UNICEF](http://www.unicef.org)

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### Summary of Programme Results

Given the rapidly evolving context in the country, UNICEF is currently adjusting its performance indicators and methods for data collection, monitoring and evaluation. Changes will be reflected in upcoming situation reports.

<table>
<thead>
<tr>
<th>UNICEF Results Table. Period 16th September 2014–15th March 2015</th>
<th>UNICEF Target</th>
<th>Total Cumulative UNICEF Results</th>
<th>% Target reached</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COMMUNICATION FOR DEVELOPMENT</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radio stations airing daily messages on Ebola</td>
<td>64</td>
<td>65</td>
<td>102%</td>
</tr>
<tr>
<td>Districts where all radio stations air Ebola content every day</td>
<td>13</td>
<td>13</td>
<td>100%</td>
</tr>
<tr>
<td>House Holds receiving Inter-Personal Communication on Ebola prevention messages</td>
<td>886,480</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Structures in Ebola affected areas provided with essential commodities package</td>
<td>1,185</td>
<td>94</td>
<td>8%</td>
</tr>
<tr>
<td>Health personnel in health facilities trained in infection prevention and control and Ebola triage</td>
<td>2,000</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Community Health Workers (CHW) trained on revised guidelines on provision of community-based maternal, newborn and child health (MNCH) care</td>
<td>6,000</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td><strong>HIV and AIDS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV positive women (including pregnant women) continuing to receive ARTs</td>
<td>1,142</td>
<td>N/A</td>
<td>No data</td>
</tr>
<tr>
<td>HIV positive children continuing to receive ARTs</td>
<td>539</td>
<td>N/A</td>
<td>No data</td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Treatment centres providing nutrition support to Ebola patients</td>
<td>5 (700 patients)</td>
<td>N/A</td>
<td>No data</td>
</tr>
<tr>
<td>Children 6-59 months screened for SAM and referred for treatment</td>
<td>70 % (18,000)</td>
<td>N/A</td>
<td>No data</td>
</tr>
<tr>
<td><strong>WATER, SANITATION &amp; HYGIENE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Care Centres provided with essential WASH services</td>
<td>40</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Ebola Treatment and Holding Centres supported through coordination of emergency WASH response (and remediation of water supply and sanitation problems in 20% of centres)</td>
<td>70 (14)</td>
<td>48 (13)</td>
<td>69% (93%)</td>
</tr>
<tr>
<td>Non-Ebola Health centres in Ebola affected areas provided with hand-washing stations</td>
<td>562</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>People in quarantine households receiving WASH support (as part of “home protection and support” kit)</td>
<td>420,000</td>
<td>53,328</td>
<td>13%</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radio Lesson Listenership Coverage during EREP monitoring**</td>
<td>No target (100%)</td>
<td>46.8% (based on 1,710 Households from 7 Districts)</td>
<td>N/A</td>
</tr>
<tr>
<td>Teachers trained on psycho social support, Ebola prevention, and safe and protective learning environments</td>
<td>7,000</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Radio stations broadcasting emergency learning programmes</td>
<td>41</td>
<td>41</td>
<td>100%</td>
</tr>
<tr>
<td><strong>CHILD PROTECTION</strong>*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ebola affected children and caregivers provided with psychosocial support</td>
<td>5,000</td>
<td>402</td>
<td>8%</td>
</tr>
<tr>
<td>Affected children placed in interim care</td>
<td>TBD</td>
<td>46</td>
<td>N/A</td>
</tr>
<tr>
<td>Affected children reunified with their families</td>
<td>TBD</td>
<td>132</td>
<td>N/A</td>
</tr>
<tr>
<td>Affected children and adult survivors who receive non-food items</td>
<td>TBD</td>
<td>132</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>SOCIAL PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extremely poor households directly affected by the EVD that receive a cash transfer through the national safety net programme</td>
<td>5,100</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

*Intervention started, but monitoring mechanism not yet established.

**Listenership coverage is defined as the proportion of Households with school going age children that are actually observed by monitors to have at least one child listening to the Radio Lesson of his/her age Level during lesson broadcast time.

***Partial data reported from 6 out of 10 current partners. Affected children are: children in quarantine, in treatment centres, and discharged; including children who have lost one or both parents to Ebola, and children who are separated or unaccompanied. Denominator and target currently under revision.