



10-year-old Sento was reunified with her extended family upon being discharged from OICC  
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# Sierra Leone Ebola Situation Report

4 March 2015

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## HIGHLIGHTS

- As of 3 March 2015, according to the Government of Sierra Leone, the cumulative number of Ebola Virus Disease (EVD) cases is 8,383, with 3,199 deaths. During the past week there were 75 new confirmed cases of EVD.
- An “Ebola: from emergency to recovery” conference was convened in Brussels on 3 March 2015 under the organization and patronage of the European Union. The conference aimed to sustain the international mobilization and to plan the next steps in the fight both against the current outbreak and to support affected countries in their recovery. The conference was attended by President Koroma and the leaders of the two other most affected countries (Liberia and Guinea).
- On 27 and 28 February 2015, a cross-border meeting was held between Liberia, Sierra Leone, Guinea at Lofa County in Liberia, with participation of respective local governments, District Ebola Response Centre (DERC), District Health Management Team (DHMT), community leaders, traditional healers, women and youth as well as UN agencies including UNICEF and WHO. The meeting highlighted the need to empower and engage communities, and increase cross-border cooperation to promote public health security to reach zero cases as one sub-region. Officials from the three nations voiced their commitment to implement necessary measures discussed at the meeting.
- UNICEF Sierra Leone requires USD 178 million for its response to the Ebola crisis until end of June 2015. To date, USD 123.9 million has been received – 70 percent of the total.

## SITUATION IN NUMBERS

### As of 3 March 2015

**8,383**<sup>1</sup>

Confirmed cases of Ebola

**3,199**<sup>1</sup>

Confirmed deaths from Ebola

**1,012**<sup>2</sup>

Confirmed cases of infected children under age 18 registered by MSWGCA

**8,432**<sup>2</sup>

Registered Ebola Orphans

**3.12 million**

Children living in affected areas

### UNICEF funding needs to June 2015

USD 178 million

### UNICEF funding gap

USD 54 million

1. Source: Ministry of Health and Sanitation

2. Source: Ministry of Social Welfare, Gender, and Children's Affairs

## Situation Overview & Humanitarian Needs

In the week to 3 March 2015, there were 75 new cases recorded nationwide, following an overall concerning plateauing trend of case incidence. In Bombali District where there was a sudden increase in cases reported last week originating from two imported cases from Freetown, the DERC and partners have mounted a fully coordinated rapid response, with integration of social mobilizers and psychosocial support staff into teams of surveillance officers and contact tracers to support and monitor children and their communities. There have been no additional cases reported during the last three days as of 3 March 2015. In this hotspot, a cumulative total of 43 confirmed cases has been reported including 28 deaths of which five were children, with ongoing monitoring of 911 contacts. Rosanda village remains under quarantine, including 484 children being followed by the Ministry of Social Welfare, Gender, and Children's Affairs (MSWGCA) and partners with the support of UNICEF. Seven children have been admitted to the local Observational Interim Care Centre (OICC) for monitoring, of whom two were subsequently transferred to an Ebola Treatment Unit (ETU) for testing and care. Meanwhile, in Aberdeen, a fishing village in the capital of Freetown, quarantine was lifted in one of the three communities (Dance troupe). However a new outbreak attributed to a traditional healer occurred in another part of the village, involving 47 primary contacts and 121 secondary contacts all of whom have been quarantined.

Compared with twelve last week, there were 16 confirmed EVD deaths occurring in the community during the past week, representing 19 percent of the total deaths due to Ebola. Of the 16, ten deaths occurred in communities in the Western Area District. The number of districts without any reported cases during the past week stayed at six. Bo newly joined the three districts of Bonthe, Pujehun, and Kailahun continuing to report no cases during the past 42 days.

In Sierra Leone, a total of 8,383 people have contracted the virus, of whom 3,199 have lost their lives. 17,168 children have been directly affected by the Ebola crisis, half of whom have lost one or both parents to the virus.

Preparation are continuing with the involvement of all stakeholders for the safe reopening of schools nationwide scheduled for 30 March 2015.

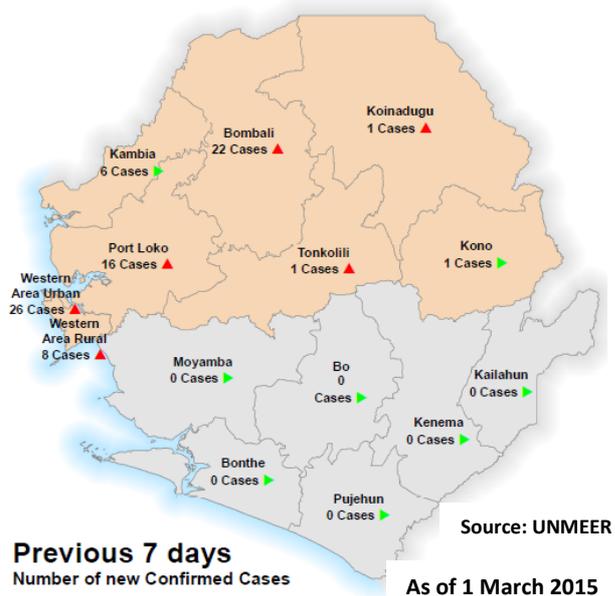
## Summary Analysis of Programme Response

### Health

UNICEF continued to support the Ministry of Health and Sanitation (MoHS) to roll out the training of staff in Peripheral Health Units (PHU) in the three districts of Western Area, Port Loko and Bombali on the revised guidelines on maternal and newborn health care in the context of Ebola. During the reporting period, an additional 206 health personnel were trained, bringing the cumulative total to 1,028 trained personnel. The training was carried out jointly by national and district trainers, now completed in Western Area and Port Loko, and continues in Bombali and three more districts (Tonkolili, Kono and Kailahun).

The roll out of the training of Community Health Workers (CHW) in the "No Touch Policy" guidelines continued in Koinadugu district. 68 PHUs trainers from PHUs were trained, and in turn they trained 200 CHWs in three chiefdoms (Sinkunia, Kasonko and Dang). 5,727 CHWs have now been trained cumulatively nationwide.

The MoHS team that investigated reported cases of measles in six districts (Western Area, Porto Loko, Tonkolili, Kambia, Bombali and Bo) has concluded that active transmission is suspected in all six districts. In addition, eight blood samples tested earlier in the month from two districts, Western Area and Bombali, have tested positive for measles. Immediately following this conclusion, the technical Expanded Program on Immunization (EPI) teams from the MoHS, UNICEF and WHO met, and a nationwide campaign is under discussion.



## Nutrition

In the last week, as part of the Integrated Management of Acute Malnutrition (IMAM), a total of 17,141 children under five were screened at the community level in 61 out of 149 chiefdoms (490 communities). Severe acute malnourished (SAM) was identified in a total of 157 children, of which 108 were admitted for treatment at the Outpatient Therapeutic Feeding Programme (OTP), while 23 children who had SAM with medical complications were referred to an inpatient facility (IPF) to receive paediatric and nutrition care. A total of 851 children were enrolled in the program by the end of the week. 91 boxes of Read to Use Infant Formula (RUTF) were consumed.

UNICEF is providing 16 Ebola Treatment Units (ETUs), 47 Ebola Holding Centres (EHCs), seven ETU/EHCs, nine interim care centres (ICCs) and 15 observational interim care centres (OICCs) as well as 40 Community Care Centres (CCCs)<sup>1</sup> directly with nutrition supplies<sup>2</sup>. A number of Ebola Care Centres, including those on school premises, have closed during the previous week in line with preparations for back to school. As a result, nutritional support is being provided to a fewer number of centres this week.

Nutrition supplies have been prepositioned at district medical stores (DMS) for replenishment to all ETUs, EHCs, CCCs, ICCs and OICCs as well as to support quarantined households and infants under six months of age who are separated or have lost one or both parents. RUIF is being supplied regularly to all infants below six months of age affected by EVD. UNICEF continues to support the Food and Nutrition Directorate to ensure a harmonized nutrition response for the EVD outbreak through Nutrition in Emergency Coordination meetings.

## WASH

As the lead agency for WASH, UNICEF is coordinating the WASH sector in the Ebola response, helping to identify and fill gaps, in addition to monitoring the functionality of WASH facilities in Ebola Care Centres (ECCs) and supporting capacity building of Implementing Partners in WASH information management. UNICEF continues to support 28 ETUs and EHCs in eight districts with an essential WASH package (sanitation facilities, waste management and water supply for drinking, personal hygiene and disinfection). UNICEF is also ensuring access to essential WASH services for all CCCs supported by UNICEF, including for those undergoing decontamination and decommissioning.

During the week, a 2,410-metre pipeline connection for the ETU in Waterloo (ADRA) was completed with support from UNICEF and the Ministry of Water Resources (MoWR). The centre now has a regular piped water supply after months of relying on water being delivered by truck. In addition, six 10,000 litre tanks have been installed to provide water to Ebola affected communities, and more than 1 million litres of water was delivered to affected communities including Ebola Care Centres by MoWR with the support of UNICEF.



ETU in Waterloo provided with a regular piped water supply © UNICEF / 2015 / Moyo

Through UNICEF's WASH implementing partners, a total of 10,333 persons including 4,265 children were reached during the past week with Ebola prevention messages including the importance of hand washing with soap. To date, UNICEF's WASH partners have reached more than 674,736 people (approximately 112,456 households) with essential Ebola prevention messages. An additional 2,094 persons in quarantined households, totaling approximately 57,417 people to date, have benefited from WASH supplies distributed through WFP packages.

## Community Care Centres (CCCs)

Since 17 November 2014, UNICEF-supported CCCs have triaged 8,228 patients, admitted 588 (7 percent), and conducted rapid ambulance transfers for 257 (3 percent) patients across five districts. In the past week, the number of patients triaged was 992 at UNICEF-supported CCCs, representing a 16 percent reduction in patients triaged from the previous week (1,176). This reduction is most likely due to the closure of 15 CCCs during this reporting period, bringing the total

<sup>1</sup> UNICEF as well as other agencies CCCs

<sup>2</sup> Supplies include high energy fortified biscuits (BP100), ready-to-use infant formula (RUIF) and Ultra High Temperature (UHT) whole/full cream milk for Ebola patients and survivors – including for children.

number of UNICEF-supported CCCs from 46 to 31. There were 32 new admissions in CCCs across five districts, representing a ten percent increase from the previous week (29). 28 percent of admitted patients presented within 48 hours of symptom onset during the reporting period.

### 7 day status update 24 February – 2 March 2015

District	Number/ Type of CCC	Implementing Partner	Triaged	Admitted	Transferred	% Ebola Suspects
Bombali	9 x 8 beds	World Hope	158	10	12	13.9%
Tonkolili	7 x 8 beds	Concern Worldwide	216	0	0	0%
Kambia	12 x 8 beds	Marie-Stopes	510	19	18	7.3%
Western	1 x 24 beds	Action Aid	1	1	0	100%
Kono	2 x 8 beds	Partners in Health	107	2	0	1.9%
<b>TOTAL</b>	<b>284 beds</b>		<b>992</b>	<b>32</b>	<b>30</b>	<b>6.3%</b>

\*All data received through RapidPro, a SMS-based data collection platform, is cleaned continuously and adjusted, including for those previously reported.

**Decommissioning of select CCCs:** In line with preparations for the safe reopening of schools, the closure of select Ebola Care Centres (ECC), including CCCs on or near school premises, have commenced under the leadership of the National Ebola Response Centre (NERC), with MoHS and partners. In each district, the District Health Management Team (DHMT), in collaboration with the District Ebola Response Centre (DERC) Social Mobilization pillar, is continuing discussions with the community during this transition, in order to ensure that communities are fully engaged in this process, just as they were when the CCCs were first constructed.

All of the five CCC Implementing Partners have finalized community engagement plans on the CCC decommissioning with specific key messages to be delivered to the communities covering pre-decommissioning, during decontamination and post-decommissioning phases. Five district level and chiefdom level workshops have been completed in each district. The community engagement plan has been incorporated in the WASH Standard Operating Procedure at the Case Management pillar and will be used as a protocol during any ETU/CCC decommissioning. Discussions around the second phase of CCC decommissioning and repurposing of select CCCs have started in some districts. In the district of Kambia, social mobilization activities related to CCC decommissioning have been halted pending final decisions on the reopening of schools there. Of the 18 CCCs that were selected for closure, 15 have closed in the past week, leaving a total of 31 CCCs currently operational. As the fight to end Ebola is far from over, the remaining CCCs will continue to operate and support affected communities.

### Communication for Development (C4D) and Social Mobilization (SM)<sup>3</sup>

Under the UNICEF-supported Hotspot Busters initiative, social mobilizers covered 34 hotspot<sup>4</sup> communities nationwide including twelve that were newly identified, reaching 55,316 households through door-to-door community sensitization. The mobilizers reported 53 suspected cases of Ebola, of which 43 were identified in the hot spot communities visited, while ten suspected cases were identified in communities other than hotspots. 43 suspected cases were referred within 48 hours to an Ebola Care Centre (ETU, EHC, CCC). A total of 4,036 traditional and religious leaders were engaged in promoting safe and dignified burials, the handling of sick persons and dead bodies, as well as re-integration of Ebola survivors and demystifying rumours about Ebola. This model of community engagement in hotspot areas is being replicated across all partner agencies.



In Koinadugu, social mobilization continues at the village level, with involvement of local leaders and the community.  
© UNICEF / 2015 / Sierra Leone

<sup>3</sup> UNICEF is the lead agency for the UN for social mobilization and community engagement and is co-chairing the Social Mobilization pillar with the Health Education Division (HED) of the MoHS

<sup>4</sup> HFAC classifies hot spot communities as any community with a minimum of two confirmed positive cases of EVD

During the week of 21 to 28 February 2015, social mobilizers from UNICEF's five implementing partners (IPs)<sup>5</sup> visited 1,018 villages and reached out to 7,963 households around the CCCs in Bombali, Kambia, Kono, Tonkolili and Western Area for active case finding, community surveillance, and community engagement to ensure that sick people are referred to CCCs in a timely manner. 649 women and youth networks and 358 paramount chiefs were engaged in community dialogues, focusing on key messages around safe and dignified burials, back to school, sustaining preventive behaviours and preventing complacency at the community level, emphasizing "Ebola is not gone yet." Out of a total of 322 cases of sick people referred to the CCCs by social mobilizers of CCC implementing partners, more than half (251) were from Kambia and the remaining from Bombali (31), and Tonkolili (40).

UNICEF continues to provide technical support to Social Mobilization (SM) pillars in all 14 districts. This week, the Kambia SM pillar held a coordination and micro planning workshop as part of national efforts led by the MoHS and UNICEF to improve coordination, quality and integration of SM activities with other pillars of the response. 35 participants from 24 partner organizations focused on opportunities to improve their collaboration at the chiefdom level to strengthen community-led activities to address cases, contacts, quarantines and burials.

Three weeks after the surge of cases in Aberdeen, quarantine was lifted in one of the three communities (Dance troupe). However a new outbreak attributed to a traditional healer occurred in another part of Aberdeen, involving 47 primary contacts and 121 secondary contacts all of whom have been quarantined. Five teams consisting of 60 mobilizers were deployed with contact tracers and visited 94 households and reached 368 people in the community. In order to minimize any delays in responding in Western Area Urban, pre-emptive planning involving WASH assessments, prepositioning of supplies, and organization of integrated rapid response teams is commencing in 14 wards considered to be high risk.

## Child Protection<sup>6</sup>

**Registration:** 446 additional children (212 boys and 234 girls) were documented by the Ministry of Social Welfare, Gender and Children's Affairs (MSWGCA), UNICEF and partners during the period of 23 February to 2 March 2015 as being affected by the Ebola Virus disease (EVD). Of this number, 429 (202 boys and 227 girls) are in quarantine in their homes as a result of exposure to an infected person. 83 children (42 boys and 41 girls) were identified as having lost one or both parents, and 53 children (32 boys and 21 girls) were documented as being unaccompanied. The cumulative number of children documented by UNICEF through the Family Tracing and Reunification (FTR) network is 17,168 (8,523 boys and 8,645 girls) of which 8,432 (4,183 boys and 4,211 girls) have lost one or both parents, and 739 (349 boys and 390 girls) were separated or unaccompanied.



Two-year-old Grace, a survivor, is welcomed back into her community in Bombali  
© UNICEF / 2015 / Davies

**Family Tracing and Reunification:** During the period of 23 February to 2 March 2015, 32 children were identified by the FTR network as requiring support to be reunified with their families, with 20 (71 percent) children provided with FTR support. Cumulatively, 1,894 children have been identified for FTR since the beginning of the outbreak, and 1,498 (79 percent) have been reunified with their families.

**Psychosocial Support:** 226 children out of 238 (95 percent) in need of psychosocial services (PSS) received one-on-one counselling and group counselling support within their communities during this reporting period. Counselling support is provided as part of the follow up on children after quarantine, when reunified or placed in alternative care. To date, a total of 10,275 out of 12,327 (83 percent) children and their families have benefited from specific psychosocial support services.

**Observational Interim Care Centres (OICCs):** Currently there are 14 OICCs covering eleven districts with a total capacity of 275 beds. The OICCs provide care for asymptomatic contact children with no caregivers. Of these 14 OICCs, six were receiving children during the past week. As of 1 March 2015, a total of 61 contact children were in quarantine in the six centres: three in Moyamba, 18 in Bombali, 18 in Kenema, eleven in Port Loko Town and nine in Western Urban. Between 23 February and 1 March 2015, 26 children were newly admitted to the centres, and 19 children were reunified with their families following discharge. OICC status data are reported on a daily basis through the RapidPro SMS service.

<sup>5</sup> World Hope International, Marie Stopes International, Partners in Health, Concern Worldwide and Action Aid

<sup>6</sup> 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

**Interim Care Centres (ICCs):** There are currently seven ICCs receiving children out of eleven that are functional. The ICCs provide care and support for surviving (non-contact) children with no caregivers, as a last resort. Between 23 February and 1 March 2015, 123 children were receiving care in the ICCs: Bo (one), Moyamba (26), Bombali (nine), Kenema (two), Port Loko - Lungi (39), Western Rural (26), and Western Urban (20). Three children were newly admitted and eleven children were reunified with their families. All children received psychosocial support. Following quarantining and monitoring of Saint Georges ICC in Western Rural District, four children were subsequently found to be symptomatic and transferred to an Ebola Holding Centre, where they all tested negative for EVD. UNICEF and partners, surveillance and quarantine teams are continuing work to ensure safe quarantine, monitoring and support for the children at the centre.

**Child Protection District Coordination:** 577 referrals were made to the protection desks (289 boys and 288 girls) between 23 February and 1 March 2015. This is more than double the number of referrals received during the previous week, indicating a marked increase in the utility of the desks. 345 of the cases (60 percent) were immediately referred to appropriate partners for assessment and follow up. 722 units of services were provided to children as a result of referrals from the protection desk. 337 children benefited from psychosocial services and 285 children benefitting from other services such as food, water and other non-food items. 34 referrals to OICCs and twelve referrals to ICCs were made through the protection desks, of which 26 and three resulted in actual admissions respectively, after verification and deliberation of multiple alternative options to find the best solution for each child. All of the desks are manned fulltime by two MSWGCA staff. Some of the desks are also supported by NGO partners to ensure coverage seven days a week.

## Education

All seven technical working groups for school reopening (protocol implementation, supply and logistics, social mobilization, teacher training, WASH in Schools, accelerated learning and school feeding) continued to meet this week to monitor progress on preparing schools for safe reopening. Training of teachers resumed this week, with the Training of Trainers (TOTs) in all 14 districts. 28 Master Trainers were trained on EVD prevention, social mobilization, and psychosocial support, with another 14 Master Trainers trained on the Guidance Note and Protocol for Operating Safe Schools. Thus, a total of 42 Master Trainers have been trained, who will in turn train 420 TOTs (30 per district), with cascading of training to 9,000 teachers, representing one teacher for each school. Each trained teacher will orient other teachers in their respective schools.

In addition, as part of the ongoing school needs assessment, 13 districts successfully completed data collection and the remaining Western Rural District is expected to complete data collection this week. Data entry has commenced and is expected to be completed by the end of the next reporting period.

A draft report was completed for the comprehensive Emergency Radio Education Programme (EREP) monitoring that was carried out between November and December 2014. 11,834 randomly selected households from all 394 wards of Sierra Leone were involved. This report showed that awareness levels of EREP were remarkably high, with 82 percent of households reporting that all school-aged children had heard of EREP. Listenership of EREP lessons was high for all lesson levels (69 percent Preschool lesson level, 62 percent Primary School lesson level, 71 percent Junior Secondary School lesson level, and 76 percent Senior Secondary School lesson level). The Ministry of Education, Science and Technology (MEST) is finalizing the report to be shared.

As part of the ongoing listenership rapid assessment of the Radio Education Programme, this week 969 households covering two districts (Western Rural and Urban) were visited by UNICEF implementing partners to determine if children were engaging in radio lessons. They found that 51 percent of households had children of primary school age listening to the Radio Education Programme.<sup>7</sup>



Midwives in Tonkolili receive training on revised guidelines on maternal and newborn health care © UNICEF / 2015 / Kamara

<sup>7</sup> Listenership coverage is defined here as the proportion of households with school age children who have at least one child listening to the Radio Lesson of his/her age level during lessons broadcast time, as directly observed by monitors

## Supply and Logistics

There were no charter this week. Two commercial flights delivered yellow fever vaccine for EPI and rapid diagnostic tests for Malaria Programmes. To date, 33 UNICEF supported charters have delivered 1,700 metric tons of essential supplies in response to the Ebola crisis in Sierra Leone. During the past week, 1,550 survivor kits were delivered to eight districts. National distribution of therapeutic food started on 3 March 2015 and is scheduled to be completed within the next day. Preparations are ongoing for the distribution of 17,000 solar radios, as well as hygiene kits and cleaning materials for safe school re-opening.

## Human Resources

As of 2 March 2015, the total number of international staff in the country office is 47, of whom 16 are deployed in the field. Out of 151 national staff members, 64 are based in the field. The total number of staff on surge and stand-by-partner staff is 33, with 26 in Freetown and seven in the field. These staff members, including the 674 outsourced third party and government staff continue to support the CCCs.

UNICEF Personnel in Sierra Leone	Freetown	In the field	Total Staff Strength
International Staff	47	16	63
National Staff	87	64	151
Staff on Surge and SBP	26	7	33
Outsourced third party / government staff for CCCs	674 <sup>8</sup>		

## Media & External Communication

International media interest picked up this week, with a visit to one of UNICEF's Child Protection partners by the editor of the London Evening Standard and an AP journalist. Also in the week, a BBC TV crew filmed UNICEF's work with the MoHS to train government health staff in the revised maternal and newborn health guidelines. This was also picked up in the local press by the Exclusive Newspaper. Meanwhile, [Radio World](#) highlighted UNICEF's support to the school radio project. In the national press, an [article](#) in the Awareness Times mentioned UNICEF's support to the Sierra Leone Water Company to improve safe water access. This was also mentioned by the Ariogbo Newspaper.

An article written by the team for the main [UNICEF website](#) highlighted the work of social mobilisation in enabling Ebola survivors to be accepted back into their communities without stigmatisation. Separately, a blog [post](#) was published by a Communication For Development (C4D) staff member on the results of focus group discussions around CCCs.

Social media postings continued on a daily basis on [Facebook](#), [Twitter](#) and Instagram. During the reporting period, on Facebook there were 78 new page likes, 640 post likes, 12 post comments, and 56,461 posts views on the site. On Twitter we recorded 53 new followers, 73 re-tweets and 82 mentions.

## Funding

In line with the UN inter-agency response strategy for the Ebola Outbreak, UNICEF humanitarian action for children (HAC) is appealing for USD 178 million for Sierra Leone to support the needs of children and communities affected by the Ebola crisis until end of June 2015. To date, USD 123.9 million has been received, 70 percent of the current appeal.

UNICEF greatly appreciates the contributions that have been received to date including from DFID/UKAID, OFDA/USAID, the World Bank, the African Development Bank, SIDA, the Governments of Canada, Germany, Ireland, Italy, Japan, the Netherlands, Norway, Switzerland, and the United Arab Emirates, ECHO, OCHA, and the Danish, Japan, Swedish, Swiss and UK Committees for UNICEF, as well as the US Fund for UNICEF, and the private sector.

## Next Situation Report: 11 March 2015

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<sup>8</sup> Reduction from 942 last week reflects decommissioning of 15 CCCs

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## Programme Results (Period 25 – 02/03/2015)

UNICEF and Pillar/Sector Results for EVD response (04 March 2015)				
Indicators	Pillar / Sector		UNICEF	
	Target	Results	Target	Results
<b>EPIDEMIOLOGY</b>				
Percentage of EVD cases with onset in the past week	0%	0.87% (73/8,374)	NA	NA
<b>COMMUNICATION FOR DEVELOPMENT</b>				
Percentage of District Social Mobilization Taskforces (SMT) reporting on the dashboard each week (UNMEER)	100% (14)	50% (7/14)	100% (14)	50% (7/14) <sup>9</sup>
Percentage of districts with list of identified key religious leaders (including priests, imams, pastors, tribal leaders) or community groups who promote safe funeral and burial practices according to standard guidelines (UNMEER)	100% (14)	100% (14/14)	100% (14)	100% (14/14)
Percentage of districts with at least one security incident or other form of refusal to cooperate in the past week (UNMEER)	0% (0)	29% (4/14)	0% (0)	29% (4/14) <sup>10</sup>
Radio stations airing daily messages on Ebola	100% (64)	97% (62/64)	100% (64)	97% (62/64)
Districts where all radio stations air Ebola content every day	100% (14)	100% (14/14)	100% (14)	100% (14/14)
Households receiving Inter-Personal Communication on Ebola prevention messages (on a quarterly basis)	100% (886,480)	99.6% (882,849/ 886,480)	60% (532,000)	146% (779,339/ 532,000)
<b>CCCs</b>				
Percentage of CCCs functional against target set for the current reporting period (UNMEER)	100%	Not available this week <sup>11</sup>	100% (31)	100% (31/31) <sup>12</sup>
Percentage of CCCs established after a community dialogue process aligned with Global SOPs or	100%	Not available this week	100% (31)	100% (31/31)

<sup>9</sup> Bombali, Kailahun, Kenema, Moyamba, Pujehun, Tonkolili and Western Area Urban

<sup>10</sup> Bombali, Kambia, Tonkolili and Western Area Urban

<sup>11</sup> Data currently unavailable on progress of decommissioning of CCCs not supported by UNICEF

<sup>12</sup> Adjusted target reflects 15 decommissioned CCCs

according to norms established in country (UNMEER)				
Percentage of patients admitted to CCCs with a provisional diagnosis of possible EVD who received a confirmatory positive or negative test (rapid or laboratory test) within 36 hours of admission to treatment facility	100%	Not available this week	100%	Not available this week
Percentage of admitted patients who present at a CCC within 48 hours of becoming ill with any symptoms that could be EVD (UNMEER)	100%	28% (9/32)	100%	28% (9/32)
<b>WASH</b>				
Percentage of all Ebola community treatment and holding centres with essential WASH services <sup>13</sup>	100% (94)	72% (69/94)	100% (52)	69% (36/52)
CCCs provided with essential WASH services <sup>14</sup>	100% (58)	100% (58/58)	100% (46)	100% (46/46)
Non-Ebola health centres in Ebola-affected areas provided with hand-washing stations	100% (1,162)	100% (1,162/1,162)	100% (1,162)	100% (1,162/1,162)
People in quarantine households receiving WASH support (as part of "home protection and support" kit)	100% (420,000)	14% (57,417/420,000)	100% (420,000)	14% (57,417/420,000)
<b>CHILD PROTECTION</b>				
Percentage of EVD-affected children provided with care and support, including psychosocial support	100%	83%		
Percentage of children who have lost one or both parents/caregivers or who are separated from their parents/caregivers reintegrated with their families or provided with appropriate alternative care	100%	80% (1,489/1,869)		
EVD-affected children provided with psychosocial support	100% (12,327)	83% (10,275/12,327)	100% (12,327)	83% (10,275/12,327)
EVD-affected caregivers provided with psychosocial support	75% (15,000)	69% (10,416/15,000)	75% (15,000)	69% (10,416/15,000)
EVD-affected children placed in interim care	TBD	688	TBD	688
EVD-affected children reunified with their families	TBD	1,498	TBD	1,498
EVD-affected children and adult survivors who receive non-food items	100% (13,033)	76% (9,969/13,033)	100% (13,033)	76% (9,969/13,033)
<b>HEALTH</b>				

<sup>13</sup> All Ebola treatment and holding centres including those undergoing decommissioning continue to be provided with WASH services for the decontamination process

<sup>14</sup> Those CCCs closed to patient care and undergoing decommissioning continue to be provided with WASH services for the decontamination process

Health structures in EVD affected areas provided with essential commodities package	100% (1,185)	101% (1,195/1,185)	100% (1,185)	101% <sup>15</sup> (1,195/1,185)
Health personnel in health facilities trained in infection prevention and control and Ebola triage	100% (2000)	218% (4,368/2,000)	100% (2000)	218% <sup>16</sup> (4,368/2,000)
Community Health Workers (CHW) trained on revised guidelines on provision of community-based maternal, new-born and child health (MNCH) care	100% (6,000)	96% (5,727/6,000)	100% (6,000)	96% (5,727/6,000)
<b>HIV AIDS</b>				
HIV positive women (including pregnant women) continuing to receive ARTs	NA	NA	100% (1,142)	80% (916/1,142)
HIV positive children continuing to receive ARTs	NA	NA	100% (539)	56% (300/539)
<b>NUTRITION</b>				
Treatment centres providing nutrition support to Ebola patients	100% (134)	100% (134/134)	100% (134)	100% (134/134) <sup>17</sup>
Children 6-59 months screened for SAM and referred for treatment	70% (18,885)	91% (17,141/18,885)	70% (18,885)	91% (17,141/18,885) <sup>18</sup>
<b>EDUCATION</b>				
Radio Lesson Listenership Coverage during EREP monitoring	100%	51% (491/969 Households in 2 districts)	100%	51% (491/969 Households in 2 districts)
Teachers trained on psychosocial support, Ebola prevention, and safe and protective learning environments	7,000	42 Master Trainers trained	7,000	42 Master Trainers trained <sup>19</sup>
Radio stations broadcasting emergency learning programmes	100% (41)	100% (41/41)	100% (41)	100% (41/41)
<b>SOCIAL PROTECTION</b>				
Extremely poor households directly affected by the EVD that receive a cash transfer through the national safety net programme	8,000	0 <sup>20</sup>	NA	NA

<sup>15</sup> Adjusting to changing needs, essential commodities packages were distributed to more health structures than originally planned, thus overachieving the target

<sup>16</sup> It was initially planned for 2 staff to be trained for each PHU, however, due to changing needs plans were adjusted so that IPC training was provided for all staff in PHUs, thus overachieving the original target

<sup>17</sup> Adjusted target reflects decommissioned treatment centres

<sup>18</sup> Excludes figures from 1 district

<sup>19</sup> Training to cascade to 9,000 teachers, one for each school. This target was adjusted based on request from MEST

<sup>20</sup> Cash transfer reported last week was a limited one-time transfer targeting EVD-affected children, survivors as well as survivors of sexual abuse in 4 districts; larger scale transfer targeting extremely poor households scheduled to start in the coming weeks