Highlights

- 292 of the 295 Community Action Cells (CAC) members visited 36,107 households, reaching 119,071 people (45,104 women and 24,352 children) in Beni Health Zone
- The Code of Conduct, including PSEA, has been signed by the Psychosocial, Vaccination commissions as well as the MoH coordination
- Household and healthcare facilities surrounding new confirmed cases were decontaminated and mattresses have been replaced

Situation Overview

- As of the 31 October 2021, eight cases (5 female and 3 male) have been confirmed, the last case reported on 30 October 2021. Three Health Areas Butsili, Ngilinga and Bundji have now reported cases, all of which within the Beni Health Zone.
- 6 people have died, 1 has tested negative and 1 currently still under treatment at the temporary Ebola Treatment Center in the General Reference Hospital in Beni
- As of 31 October 2021, children under 5 represent 50% of all cases (3 female and 1 male), however only 10% of contacts listed. Children under 5 are listed from 8 of the 19 Health Areas of Beni Health Zone
- Preliminary sequencing conducted indicates that this outbreak is likely linked to the 2018-2020 Nord Kivu/Ituri 10th Ebola outbreak and was initiated by transmission from a persistently infected survivor or a survivor who experienced relapse
- As of 31 October, 552 active contacts are being followed from residing in 14 of the 19 Health Areas of Beni Health Zone. Of these contacts, 63.8% have been vaccinated either in previous or the current outbreak.
UNICEF’s Response

Infection Prevention and Control (IPC)/Water, Hygiene and Sanitation (WASH)

UNICEF, in collaboration with its partners have supported:

- Systematic decontamination of households and healthcare facilities where cases have lived and/or sought healthcare, from 25-31 October this included the provision of 21 mattresses to replace those lost during decontamination
- Briefings of 25 supervisors on WASH-IPC in healthcare facilities to support healthcare workers in improved facility-based IPC measures (e.g. setting up a triage; waste management)
- 41 households, 2 schools, 6 churches, 2 hotels & 1 market have received WASH kits (bucket with tap and other key hygiene materials) in addition to critical information on hygiene practices for both Ebola and COVID-19, in neighborhoods surrounding the recent cases
- Risk assessments for healthcare workers have been conducted in the recently affected healthcare facilities in order to identify their need for vaccination and safety to continue to provide care

Risk Communication and Community Engagement (RCCE)

- From the 29-31 October, in the Beni Health Zone 292 of the 295 Community Action Cells (CAC) members visited 36,107 households. In the Mabalako Health Zone 100 of the 153 CACs visited 11,690 households. Their visits ensure that families are aware of the current Ebola outbreak, how the disease transmits and how, vaccines can reduce risks of infection and how early treatment-seeking improves survival rates significantly.
- Over the past 3 days, the CAC have raised 429 alerts (including 6 community deaths) to surveillance teams for further investigation
- Targeted actions around new cases from the 28-31 October in both Beni and Mabalako Health Zones have included 23 community dialogue sessions with members of local community groups and 2 structured formative sessions with motorcycle groups and high risks contacts.
- The RCCE commission continues to support the vaccination and WASH-IPC commissions with community dialogue activities to facilitate community participation in both vaccination and decontamination
- Community engagement activities have included church information sessions (reaching 446 individuals in Beni Health Zone) and dialogue sessions with motorcyclists, market committee members and village savings and loan associations (reaching 240 individuals in Mabalako Health Area)
- Specific sessions were organized with female community leaders focusing on Safe and Dignified Burial (SDB) practices and the role(s) of communities and families during such events
- The RCCE commission provides systematic support to other commissions in the Beni Health Zone, which in the reporting period have included: Surveillance (listing case contacts); Vaccination (referral of 18 people); IPC (decontamination of 2 households); SDB: (supporting 14 safe burials)

Health and Nutrition

- Systematic support and adapted advice on early child feeding practices is provided to those accompanying child and infant patients in the ETC (from 25 to 31 October, 17 accompanying persons were in the ETC)
- From the 25 to 31 October an average of 6 patients per day in the ETC for EVD testing were fed according to the treatment phase, including 2 children under 5 years of age (24-59 months)
- Of the patients waiting for EVD test results, 1 case benefited from the correction of metabolic disorders, as 2 adults with acute malnutrition, including 1 breastfeeding woman with SAM and 1 man with MAM, who were referred to the appropriate facilities for care on their discharge.
- As of 31 October, there is no child under 5 years old is currently in the ETC.
- Anthropometric equipment, including scales, weighing pants for Salter scales and Middle Upper Arm Circumference (MUAC) measurement materials have been provided to the Malepe, Mukulya and Boikene
health centers and to 3 isolation centers in Bundji, Butsili and Kanzulizuli Health Areas in the Beni Health Zone

- 34 members (15 women and 19 men) of the Psychosocial commission were briefed on the practices of the infant and young child feeding in the context of the Ebola

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### Psychosocial Support and Child Protection

**Psychosocial workers in the community:**

- Follow up and support to newly listed contacts including (including healthcare workers) expressing fear and stress
- Psychological support to 3 discharged non-case patients and 5 waiting for negative swabs of deceased family members
- Psychological support and preparation to the members of 6 families at SWAB; 94 psychoeducation sessions reaching 989 individuals in the Health Areas of Malepe, Ngongolio, Rwangoma, Kanzuli, Butsili, Mandrandele and Kasanga

**Psychosocial workers at the Ebola Treatment Centre and isolation centers:**

- Psychological support and accompaniment to 5 patients
- Psychological support to 73 persons accompanying a patient to the ETC
- Announcement of negative test and support to return home for individuals
- Construction of a semi-durable crèche has begun. The creche will be used for children whose parents are being tested and/or treated for Ebola or who have been orphaned and are awaiting family placement

**Activities related to the recent cases**

- Informing the family of the positive Ebola test results
- Psychological support to the family for decontamination, contact tracing and vaccination
- Psychological debriefing for those close contacts (family, community and healthcare facility)
- Preparation and orientation of the 25 contacts to participate in vaccination and received household decontamination
- Support and guide 43 family affected members on how to safely engage and participate in an Safe and Dignified Burial (SDB)
- Facilitate suspected contacts to seek testing at the ETC

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### Gender Based Violence/ Gender/PSEA

- Briefing and signing of the code of conduct by 34 members of the Psychosocial commission, 41 members (8 women and 33 men) of the Vaccination commission, 5 new UNICEF staff and the Ebola response Coordination members
- Of the 45,432 Ebola information center consultations on U-report, 1,439 were related to prevention of sexual exploitation and abuse.
- Supported the local NGO partner REMED and the CAC supervisors to develop a mechanism for PSEA monitoring

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### Integrated Outbreak Analytics (IOA)

- Analyses specifically focusing on Ebola risks for children under 5 years found that, prior to the two new cases of children. To date, children represent less than 10% of all contacts and that only 9 of the 19 Health Areas in Beni Health Zone. Furthermore, children under 5 are not being listed as contacts from healthcare facilities as much as adults. Similar findings were also raised by the Analytics Cell during the 10th outbreak, which highlight the critical gaps in identifying small children as contacts and the need to reinforce identification of children via healthcare facility registries
- The coordination and surveillance teams are working on steps to improve contact listing for children under 5 years
The IOA Cell has developed a Healthcare Facility Survey (adapted from the 10th outbreak) to better understand IPC risks among different age categories. The data will be used to develop targeted and evidence-based activities to better support healthcare workers in case identification and prevention of transmission based on context.

**UNICEF Response Plan & Funding Overview**

On 26 October, UNICEF published response plan for an initial three months. Through a community-based approach, the response plan target in priority the health zone affected by EVD and surrounding health zones and will contribute to the response plan developed by the Government of DRC. UNICEF’s response is two-fold:

1. Ensure immediate life-saving response in affected health areas
2. Strengthen prevention and preparedness activities in surrounding health areas/zones

UNICEF needs US$4,390,000 for a first immediate three months critical response to the EVD epidemic in North Kivu considering the scenario of a likely increase in the number of EVD cases.

These funds will enable UNICEF to quickly scale up its response, promote integrated life-saving interventions and use a community-based approach to provide more timely, effective, and efficient support to affected communities and children.

UNICEF has already allocated US$ 750,000 of its core funding to meet critical first line needs until additional funding is secured. But more than ever, UNICEF needs flexible and timely funding to respond where the need is greatest as the outbreak evolves.

<table>
<thead>
<tr>
<th>Areas of intervention</th>
<th>Requirements (US$)</th>
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<tbody>
<tr>
<td>Coordination, Governance and Technical Support</td>
<td>240,000</td>
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<tr>
<td>WASH and Infection Prevention and Control measures</td>
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<td>Risk Communication and Community Engagement</td>
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<tr>
<td>Child protection</td>
<td>420,000</td>
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<td>Health and Nutrition</td>
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<td>Integrated Outbreak Analytics</td>
<td>150,000</td>
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<tr>
<td>Gender, GBV and Prevention of Sexual Exploitation and Abuse</td>
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</tr>
<tr>
<td>Operational support costs</td>
<td>750,000</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>US$4,390,000</strong></td>
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</tbody>
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**External Media**

- Since the announcement of the Ebola outbreak in North-Kivu province, the communication team published 37 posts on Facebook, Twitter and Instagram, reaching more than 1.2 million people. New multimedia material was uploaded on We Share;
- Two press releases were published on 9 October (in French and English) and on 13 October (in French and English).

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