Highlights

- Zero (0) new Ebola Virus Disease (EVD) cases since 30 October 2021
- 16 days since the last case and 13 days since the last patient has recovered
- 100% of the Community Action Cells (CAC) in the Beni Health Zone have been operational reaching 36,705 households and raising 783 community alerts
- 100% of the 83 priority healthcare facilities in Beni Health Zone have received materials for Infection Prevention Control (IPC)
- Integrated survey with healthcare workers and facilities by the Analytics Cell is supporting IPC-WASH commission to adapt support to healthcare workers and facilities based on evidence

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 deaths from September 2021 have been validated as probable cases (3 deaths including 2 female children under 5 years old and 1 adult)
- Three Health Areas Butsili, Ngilinga and Bundji have now reported cases, all of which within the Beni Health Zone.
- 9 people have died (3 probable, 6 confirmed) and 2 adults have been successfully treated and left the Ebola Treatment Centre (ETC) on 5 November 2021.
- As of 31 October 2021, children under 5 represent 55% of all cases (5 female and 1 male).
- Since the beginning of vaccination activities, 608 people have been vaccinated, including 98 high-risk contacts and 274 contacts of contacts. Of the 608 people vaccinated, 71 are first-line responders
- 117 contacts have completed their surveillance period. There remain 227 contacts in week 3 of surveillance (90.5% continue to be visited daily)
UNICEF’s Response

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

UNICEF in collaboration with its partners:

- Supported 83 primary health care facilities with 58 M1 kits and 25 M2 kits with close monitoring and technical guidance as well as provided 17 emergency kits in the Butsili Health Area and 22 in the Bundji Health Area in Beni Health Zone. The kits contain:
  - M1 Kit: 10 Ebola posters, 10kg chlorine, 15kg detergent, 12 pairs of gloves, 2 boxes of 9 bar soaps per box
  - M2 Kit: 5 Ebola posters, 5kg chlorine, 5kg detergent, 6 pairs of gloves, 1 box with 9 bar soaps per box
  - Emergency Kit: 5 Ebola posters, 5kg chlorine, 2.5kg detergent, 4 pairs of gloves, 1 box with 9 bar soaps per box
- Provided flash thermos to 13 health facilities and WASH kits to two schools in Beni Health Zone
- Ensured bio-cleaning and decontamination of 6 healthcare facilities in Beni Health Zone
- Briefed the members of the IPC Commission on the establishment and functioning of hygiene committees within the health facilities
- Supervised installation of 35 hand washing devices installed in public places to ensure appropriate use and management

Risk Communication and Community Engagement (RCCE)

- In Beni health zone: 100% of the Community Action Cells (CAC) (295 out of 295) in the Beni health zone were operational. They visited a total of 36,700 households and raised 783 community alerts.
- In Mabalako health zone, 87% CACs (134 out of 153) were operational. They visited 8,730 households and raising 385 alerts.
- Household visits allowed CAC members to share information on the current Ebola outbreak, to explain how the disease transmits, how vaccination can reduce risks of infection and how early treatment-seeking improves survival rates significantly.

UNICEF in collaboration with its partners:

**Specific activities around confirmed cases and contacts in Beni and Mabalako Health Zones**

- Organized 47 educational talks and 150 individual engagement sessions with 403 people (including 7 family members) around case F10 in Bundji Health Area, and F11 in Kanzuli SA on the importance of vaccination, follow-up of contacts and respect of preventive measures of MVE;
- Organized community dialogue with 63 individuals including 5 close contacts surrounding the M24 case in Mabalako Health Zone on the importance of contact follow-up and early referral of patients.

**Community engagement and communication activities**

- Organized media coverage of the interview of the Head of the Provincial Division of Health in North Kivu with the local press on current EVD epidemiological situation and raise awareness on EVD preventive measures in Beni Health Zone.
- Organized community Forum discussion with 67 inhabitants of the Budji Health Area in Beni Health Zone on community involvement and the importance of monitoring contacts and vaccination for EVD
- Organized community dialogue and engagement activities reaching:
  - 17 EVD survivors (11 women) to reinforce their engagement and support to address community questions and support any alerts or suspected cases to mitigate fears associated with EVD testing
  - 1,132 school children and 24 teachers
  - 20 youth leaders
- Briefed 53 traditional healers on Ebola and addressing community questions
- Organized community engagement activities to work with 66 tradeswomen, 240 school children and 8 teachers in the Buhumbani Health Area in Mabalako Health Zone. Discussions on EVD transmission and prevention were adapted to each specific group.
• Organized 35 educational talks and 111 individual dialogue sessions with community members in the Health Areas of Linzo, Mangina, Mabalako and Aloya, in Mabalako Health Zone. Discussions focused on early detection and survival or Ebola with early treatment-seeking.
• Ensured that 10 community radios (6 in Beni and 4 in Mabalako) continue to broadcast messages on the prevention of EVD, vaccination and protection against sexual exploitation and abuse
• The RCCE commission also organized a specific group to manage and address community feedback

Health and Nutrition
• UNICEF in collaboration with its partners continued follow-up and supervision of patient (suspected) nutrition at the ETC:
  - 20 patients (3 children and 17 adults) fed according to their needs/ treatment phases
  - 3/3 children on breast milk substitute as required during their ETC transit (100%)
  - 22/22 Mothers/caregivers of children < 23 months old counseled on ANJE-U at the ETC (100%)
• 30 members of the communication committee (women: 6 and men: 24) were briefed on the key messages on Infant and Yong Child Feeding Practice
• UNICEF is monitoring of the recruitment process of the pediatrician as well as evaluation and needs identification for the Malepe Isolation Centres in Beni Health Zone

Psychosocial Support and Child Protection
UNICEF in collaboration with its partners provided:

Psychosocial workers in the community:
• Psychological support to 8 suspects waiting test results in the 7 in the isolation in Beni Health Zone
• Psychological support to 21 individuals discharged as negative
• Psychological support to 9 affected families including (59 individuals)
• Support during 9 swabs and Safe and Dignified Burials (SDB) in Beni Health Zone

Psychosocial workers at the Ebola Treatment Centre and isolation centers:
• Psychological preparation of the families at the announcement of the release of a discharged negative patient for 14 negative test results (15 suspected cases at the investigation)
• Support for individuals and families around 16 new test results (all negative) in Beni Health Zone
• Psychological support to 51 caregivers and visitors at the ETC and Isolation Centres
• Follow-up and psychological support to 15 affected families, 2 children separated from their parents, 14 discharged patients, 2 orphaned children and 2 EVD survivor

Psycho-education support
• 54 psychoeducation sessions for 535 participants in the health areas of Tuungane, Ngilima, Mabolio, Malepe, Kanzuli, Mangina, Butsili and Rwangoma in Beni Health Zone

Gender Based Violence/ Gender/PSEA
• PSEA briefing and signing of the Code of Conduct was organized for 2 psychologists and 8 Psychosocial Commission members (TPS)
• Meeting with the humanitarian actors operating in the 7 health areas which to date do not have PSEA complain mechanisms in Beni Health Zone to identify further options for reporting
• Implementation of a plan to strengthen community structures and their involvement in the PSEA complains mechanism

Integrated Outbreak Analytics (IOA)
• In depth healthcare worker and facility survey complete (n=209 structures, 99% CI and 5% ME)
• Study results have been presented to the coordination, IPC-WASH, surveillance and RCCE commissions to develop action plans based on evidence
Key results include:
- 62% of healthcare workers report having received training in IPC-WASH (57% in health posts vs. 73% in health centers)
- 95% of healthcare workers in healthcare centers vs. 63% in dispensaries and 50% of traditional practitioners feel able to apply IPC guidelines to work/facility
- 19-38% report sterilization and 19-45% report decontaminating/cleaning of beds as part of a healthcare worker’s role to stop Ebola transmission
- 50% of traditional practitioners and 42% of dispensaries workers report having no material for sterilization

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.

As of today UNICEF allocated US$ 835,000 of its core funding as well as funding received from the Regional Office to meet critical first line needs. Thanks to the generous contribution of SIDA through flexible funds, UNICEF was able to recover US$595,000 of the frontloaded core fundings.

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>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination, Governance and Technical Support</td>
<td>240,000</td>
</tr>
<tr>
<td>WASH and Infection Prevention and Control measures</td>
<td>1,160,000</td>
</tr>
<tr>
<td>Risk Communication and Community Engagement</td>
<td>840,000</td>
</tr>
<tr>
<td>Child protection</td>
<td>420,000</td>
</tr>
<tr>
<td>Health and Nutrition</td>
<td>710,000</td>
</tr>
<tr>
<td>Integrated Outbreak Analytics</td>
<td>150,000</td>
</tr>
<tr>
<td>Gender, GBV and Prevention of Sexual Exploitation and Abuse</td>
<td>120,000</td>
</tr>
<tr>
<td>Operational support costs</td>
<td>750,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>US$4,390,000</strong></td>
</tr>
</tbody>
</table>

External Media
Since the announcement of the Ebola outbreak in North-Kivu province, the communication team published 52 posts on Facebook, Twitter and Instagram, reaching more than 1.3 million people.

For more information contact:

Edouard Beigbeder  
Representative  
UNICEF DRC  
Email: ebeigbeder@unicef.org

Katya Marino  
Deputy Representative  
UNICEF DRC  
Email: kmarino@unicef.org

Jean Metenier  
Senior Coordinator  
UNICEF DRC (Goma)  
Email: jmetenier@unicef.org

Typhaine Gendron  
Chief of Emergency  
UNICEF DRC  
Email: tgendron@unicef.org