



OVERVIEW

A total of 11 confirmed cases of Ebola virus (EVD) and 1 probable case, resulting in five Deaths (+1 probable death), have been recorded in the health zones of Biena, Katwa, Musienene, and Butembo since the resurgence of the disease in February 2021, in North Kivu province. Two of the 11 cases are health professionals.

No children have been affected. A total of 11 confirmed cases of Ebola virus (EVD) and 1 probable cases.

The last two confirmed cases treated in the Katwa ETC tested negative and are considered "cured" as of Monday, March 22. The 42-day countdown to the declaration of the end of the epidemic has thus begun. The last child cared for by the "lullaby nurses" at the UNICEF-supported crèche at Katwa Hospital in Butembo has returned to his family following the recovery of his mother.

More than 66,500 people have been reached by Community Action Cells (CACs) trained people who have delivered Ebola awareness messages since the beginning of the epidemic.

929 health care providers have been briefed on Ebola prevention and other care protocols;

The funding gap for the response is currently 67%.

Epidemiological situation

-  **11 Confirmed cases + 1 Probable case**
-  **5 Deaths**
-  **6 People recovered**
-  **45% Fatality rate**
-  **1 Province affected**

UNICEF's Response

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



UNICEF has supported 69 health facilities in the Butembo, Biena, Katwa, and Musienene health zones with IPC-WASH kits which comprise handwashing gel, waste management equipment and household and PPE material.

Nearly 450 (446) health facilities in the Butembo, Katwa, Biena, Mangrudjipa and Musienene Health Zones were evaluated by a Score Card to assess their level of preparedness for infection prevention and control.



518 other health facilities in the same health zones benefited from monitoring and support for IPC activities. 1,983 health providers, including nurses, hygienists and traditional practitioners, benefited from capacity building in the field of ICP.

UNICEF supported the installation of:

- 12 sorting units in the Butembo Health Zone;
- Two water tanks of 135,000 and 1,000 liters in the Katwa Health Zones,
- The supply of 3,280 liters of water per day in the ETC and the Masoya Health Referral Center,
- The installation of 17 ICP-WASH kits in 16 hot spots in the Musienene Health Zone,
- The functionality of 49 handwashing facilities in public places.



Risk Communication and Community Engagement (RCCE)

Approximately 520 CACs from the Biena, Butembo, Musienene, Katwa and Mangrudjipa health zones conducted ETC visits to 8,396 households during which at least 500 community alerts on EVD and Covid-19 were received. Nearly 310,000 people, including women, teachers, churchgoers, members of youth associations and motorcyclists, were informed on how to prevent EVD and COVID-19, the importance of sampling, dignified and safe burials, vaccinations, contact tracing and community-based surveillance. Community dialogues on how to prevent EVD and COVID-19 reached nearly 1,497 people, including churchgoers, opinion leaders and village chiefs.

More than 50 CAC chairpersons participated in educational talks on the importance of community-based surveillance, alert escalations, early referrals of patients and contact listing.

785 health care providers, community relays and traditional practitioners benefited from training on the importance of community-based surveillance.

The CACs continued their mass sensitization activities in public places which highlighted the importance of community involvement in the fight against EVD, early referrals of patients to ETCs and contact listing. Guided visits to the Masoya ETC were organized to dispel false rumors about the care of patients.

At school level, at least 100 teachers, including 2,663 pupils from different elementary schools in the health zones of Katwa, Musienene, Mangrudjipa and 500 students were briefed on preventive measures against EVD and COVID-19, the importance of hand hygiene, sampling and safe burials during an epidemic.

Fourteen community radio stations (10 in the city of Butembo and four in the Biena health zone) broadcast messages on Ebola prevention and vaccinations.



Health and Nutrition

UNICEF, in collaboration with its National Nutrition Program (PRONANUT) partner, continued to provide nutritional support to patients and their families infected and affected by EVD in the Katwa and Masoya ETCs. Help was also given to a child who was discharged on 15 March from the Katwa Hospital crèche. In the past two weeks the ETCs:

- Treated four cases of malnutrition;
- Identified 11 cases of hypocalcemia (low blood calcium) ;
- Identified five cases of hypokalemia (low levels of potassium) ;
- Identified 22 cases of hypoalbuminemia (low blood albumin) ;

- Identified one case of cored hypoglycemia (low blood sugar);
- Informed nearly 60 family members and people accompanying patients into ETCs about the benefits of Infant and Young Child Feeding (IYCF).

During this period, only one child received peanut paste treatment for severe malnutrition at the ETC.



Psychosocial Support and Child Protection

The last child admitted to the UNICEF-supported nursery at Katwa ETC returned home with his mother, who was declared cured of Ebola and received a social reintegration kit.

Psychosocial workers trained and supported by UNICEF have provided Psychosocial Support (PSS) to people infected and affected by MVE and COVID-19. Interventions in recent weeks included confirmed Ebola patients, Ebola suspects, recovered patients, discharged persons (and their family members), frontline workers and unaccompanied children.

Approximately 284 people, including confirmed EVD and COVID-19 patients, recovered and were discharged. In addition, various non-cases and suspects received PSS - depending on their conditions - at the crèche or in the community. More than 900 (907) family members of confirmed and suspected EVD cases, including frontline staff, received psychoeducation during 100 sessions on Effective Vaccine Management (EVM), hand hygiene and EVD and COVID prevention.

UNICEF co-facilitated the training on vaccine and case management/ for 26 representatives from NGOs and the government, organized by UNFPA. In addition 20 paraprofessionals and three psychologists were trained on PSS care according to the national Gender Based Violence (GBV) protocols and the PSS support adapted to children by SAFDEF. The construction of a new nursery has been completed with a team of psychologists team now installed. They continued to provide follow-up work to about 20 vaccinated people within the framework of their activities.

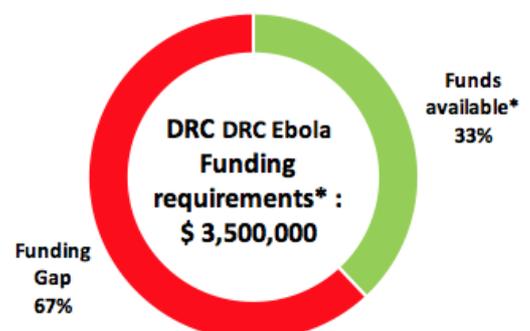


Funding Overview

In response to the reappearance of Ebola in North Kivu, UNICEF has estimated that \$3.5m is required for an immediate response (three months) within its areas of responsibility. UNICEF allocated core resources to fill the gaps and utilized flexible humanitarian thematic funding for the response. But more than ever, UNICEF needs flexible and timely funding to respond where the need is greatest as the epidemic evolves.

As of 25 March 2021, United States Agency for International Development (USAID) and the UK Foreign, Commonwealth and Development Office (FCDO) have generously contributed to UNICEF DRC Ebola response. UNICEF expresses its sincere gratitude to all donors for the contributions received to date. UNICEF needs flexible and timely funding that can be allocated quickly to where funds are needed most.

UNICEF DRC Ebola Response Funding Status



*Funds available include 300,000 USD advanced by the UNICEF



External Media

Since the announcement of new Ebola cases in North-Kivu province, the communication team published more than 30 posts on [Facebook](#), [Twitter](#) and [Instagram](#). The release of the first Ebola survivor was covered through social media and new multimedia material was uploaded on [WeShare](#).

For more information contact:

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