UN Mission for Ebola Emergency Response (UNMEER)
External Situation Report
13 February 2015

KEY POINTS
- UNDP Administrator begins visit of affected countries
- UNMEER SRSG reviews efforts in Guinea
- Enhanced cross-border efforts critical part of response efforts

Key Political and Economic Developments
1. UNDP Administrator Helen Clark arrived in Accra, Ghana, on 11 February, en route to Guinea, Liberia and Sierra Leone. She met with SRSG Ismail Ould Cheikh Ahmed to discuss ongoing response efforts. Over the course of the next week, the Administrator will visit all three countries most-affected by the disease to affirm the UN’s continued commitment to addressing the response efforts and support for the recovery process. UNDP is working with the national authorities and local, regional and international partners, including the African Development Bank, the European Union and the World Bank, on an Ebola Recovery Assessment, and in support of national EVD recovery strategies. The Administrator arrived in Conakry, Guinea on 12 February.

2. SRSG Ould Cheikh Ahmed also arrived in Conakry on 11 February. On 12 February, the SRSG conducted working visit to Forecariah, where he met with the Prefect, religious leaders, community leaders and Ebola response partners, including WHO, WFP, IFRC, and the French Red Cross, among others. He also visited the ETC operated by French Red Cross and met with UNMEER staff in Guinea. In Forecariah, the SRSG observed that while community resistance remains high largely due to mistrust and misinformation about Ebola, the high number of cases may also be due to a level of acceptance by a segment of the community who continue to provide reports about sick patients. It was also observed that response capacities in the area are still limited. Response partners have requested for additional experts and logistical support. For instance, there are no laboratory on site and only 6 ambulances for the entire prefecture. Cross-border monitoring challenges were also reported with the border with Sierra Leone where there are only three official border posts. Cross-border transmission reported to be prevalent as sick patients reportedly cross into Guinea (from Sierra Leone) for treatment. UNMEER is fast tracking a surge response capacity to Guinea and will work with national authorities and other response partners to accelerate efforts across the board.

Response Efforts and Health
3. In total, 22,903 confirmed, probable, and suspected cases of EVD have been reported in the three most affected countries. There have been reported 9,194 deaths.

4. Related to the community resistance challenges highlighted above, WHO reported over 30 unsafe burials were reported in the week to 8 February, and contact tracing also remains a challenge in many areas in Guinea. The high number of community deaths and reported unsafe burials, combined with widespread reports of security incidents related to the EVD response, underscore the need to improve community engagement strategies in many areas of the country.

5. In Liberia, UNMEER and WHO and the officer-in-charge (OIC) of Jorwah clinic visited Boata village in Pantakpai district, Bong County to meet with community members. The village which borders Guinea has about 18 households, is remote and not easily accessible (approx. 6 km NW of Jorwah). The visiting team found that the community is aware of EVD and its symptoms and assured the team that they will report any individual who shows EVD symptoms to the Jorwah health facility. One of the community members informed that an old man died in Wulkaye, Guinea on 10 February and a Boata community health committee member attended the burial. The OIC of the Jorwah clinic advised the community to monitor the person when he returns.

6. In Sierra Leone, WHO is supporting training for social mobilization, contact tracing and community surveillance teams on psychosocial support and sensitivities to the community and families around
grief. WHO is also strengthening the capacity of the District Mental Health Units (DMHU) to provide adequate community grief counselling. Additionally, a five-person WHO training team has arrived in Sierra Leone to support the MOH, Health Education Division and work with partners to rapidly rollout a communications training package to improve community engagement between affected communities and frontline staff.

Logistics

7. The WFP-led Emergency Telecoms (ET) Cluster is providing internet connectivity in 61 locations across the three Ebola-affected countries, ensuring reliable internet access for 1,502 humanitarian personnel. Last week in Sierra Leone, the ET Cluster provided MSF with 60 mobile phones for patients being treated at MSF-managed Ebola Treatment Units (ETUs) throughout the country. The ET Cluster also installed Internet connectivity at the Government Hospital in Koidu, as well as inter-agency wireless hotspots at UN compounds in Koidu.

8. In coordination with the Logistics Cluster, the Private Sector Ebola Response Trade Exhibition was launched in Freetown on 11 February. The purpose of the Trade Exhibition was to provide a forum for strengthening relationships between the logistics and procurement focal points in the private and humanitarian sectors, with a view to facilitating local procurement in support of the Ebola Response.


10. UNMEER Geo-Information Management Services (UNMEER GIMS) v1.0, web mapping application can be freely accessed at http://www.unmeer-im-liberia.website.

Resource Mobilisation

11. The OCHA Ebola Virus Outbreak Overview of Needs and Requirements, now totaling USD 2.27 billion, has been funded for USD 1.25 billion, which is around 55% of the total ask.

12. The Ebola Response Multi-Partner Trust Fund currently has USD 136.8 million in commitments. In total USD 140 million has been pledged.

13. All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA’s Financial Tracking Service (http://fts.unocha.org) of their contributions via the e-mail address: fts@un.org.

Outreach and Education

14. From 10 to 12 February, persistent rumours about spraying/disinfecting schools disrupted school activities in Conakry, due to general fear of contamination. At the Sangoyah primary school (Matoto), the school director was forced to let students return home following rumours that a Guinea Red Cross team was to spray/disinfect the school, which in fact was not true. In Kaloum, Dabola and Kankan similar observations were recorded at a number of schools for the same reason. Such rumours are denied by the authorities, including the National Coordinator of the Ebola Response who has publically stated that ‘… schools and other public places are not areas to be sprayed’ and that spraying only applies to the homes of people affected by the Ebola virus disease. An inter-agency meeting organized on 10 February in Gueckedou, Guinea, considered the rehabilitation of the rural radio in Gueckedou to be an urgent priority that will assist in curbing the spread of false information on EVD.

Essential Services

15. In Sierra Leone, the WHO Infection Prevention and Control (IPC) and clinical mentorship team continues its Training Roadshow by providing training and mentoring in areas of highest transmission (Port Loko, Kambia, Kono and Moyamba districts). The team is looking into how to provide clinical training for the transition and recovery planning, as well as identifying Foreign Medical Teams (FMT) staff in country to recruit them as clinical trainers.

Upcoming Events

16. NTSR

Attachments and resources

17. Reliefweb: Maps on the EVD response