This is a situation report by the Interagency Collaboration on Ebola replacing situation reports previously produced by UNMEER. The report is produced by OCHA Regional Office for West and Central Africa in collaboration with WHO and humanitarian partners. It covers the period from 10 to 16 August 2015. The next report will be issued on or around 25 August.

Highlights

- For the week ending 16 August, three new cases were reported in Guinea. No new cases were reported in Liberia or Sierra Leone.
- An Ebola survivor’s clinic has opened in Monrovia, Liberia. The clinic provides treatment, support and training for Ebola survivors, and allows the collection of valuable research data to help better understand Ebola virus disease.
- WFP plans to progressively reduce the provision of logistical services from October onwards in consultation with national governments and health partners.
- On 12-13 August, the Mano River Union (MRU) Secretariat convened a meeting in Monrovia, Liberia to discuss the US$ 7.65 million African Development Bank (AfDB)-funded Ebola Crisis Response project coordinated by the MRU, part of a wider US$ 223 million AfDB provided to the three most affected countries for Ebola response.

Epidemiological status and response efforts

- Three confirmed cases of Ebola virus disease were reported in Guinea in the period 10-16 August: two cases were reported in Conakry Prefecture and one case in Forécariah Prefecture. All cases have been isolated.
- No new cases were reported in Liberia (data until 13 August) or Sierra Leone (data until 15 August).
- Sierra Leone has ended the mandatory 21-day quarantine for 500 villagers in Tonkolili; more than 800 contacts remain under follow-up in Sierra Leone and Guinea.
- In light of the recent decrease of operational demands and logistics geographical scope, WFP plans to progressively reduce the provision of logistical services from October onwards in consultation with the national governments and health partners.
- IFRC commissioned research on ‘unsafe’ burials carried out in the three countries (Guinea, Liberia and Sierra Leone) as part of a sub-regional study on ‘Measuring Impact of Safe and Dignified Burial programmes in West Africa’. The research is currently underway in Montserrado County, Liberia. The collaborative research aims at generating qualitative and quantitative data that will detail events related to safe and unsafe burials during the Ebola outbreak in these countries.
Cross-border collaboration
- In Guinea, UNICEF continues to engage in cross border collaboration between Forecariah (Guinea) and Kambia (Sierra Leone) with bordering villages and communities organizing regular meetings to ensure a smooth flow of information.
- In Liberia, under a new project funded by USAID’s Office of US Foreign Disaster Assistance (OFDA), IOM will work with County Health Teams (CHTs) and the Ministry of Health (MoH) Disease Prevention and Control Division to provide key resources, training and mentoring support to major ports of entry and border communities in Grand Cape Mount, Lofa, Bong, Nimba, Grand Gedeh, River Gee and Maryland counties. This will complement existing support activities performed under the framework of the Border Coordination Working Group.

Guinea

Community engagement and social mobilization
- The Ministry of Interior and Security in Conakry has deployed 600 specially trained police officers to monitor traffic in the capital and surrounding areas to ensure drivers are not transporting dead bodies. The police are also present at hospitals to make sure visitors adhere to safety protocols and at cemeteries to ensure burials are conducted safely.

Health
- UNICEF is supporting a meningitis immunization campaign in 15 districts, which started officially on 8 August.
- WHO, UNICEF, and other partners supported the establishment of an Ebola Transit Center at Donka National Hospital, to help quickly isolate suspected Ebola cases and prevent transmission. UNICEF provided tents, tarpaulins and technical WASH expertise.

Food Security
- WFP has started to provide cash transfers to Ebola survivors in addition to a 30-day ration of highly nutritious food, reaching over 300 survivors so far. Transitioning to cash ensures further support during recovery for this vulnerable group.
- CEF and partners have provided counselling and therapeutic to more than 2,000 patients in Ebola treatment centres, as well as Ready-to-Use Infant formula to nearly 2,000 children and infants whose mothers have been affected by Ebola. An additional 6,800 children under five with Severe Acute Malnutrition (SAM) were treated in the most affected districts.

Agriculture
- In the framework of a World Bank (WB) funded project, FAO and its partners have distributed agricultural inputs in the most affected areas of Guinea. Planting activities are being monitored and harvesting is expected in four months.

Preparedness
- At the request of the Ebola National Coordination Body, CDC, WHO, UNICEF and other partners are preparing for a workshop at the end of this month to review the surveillance system. The objective will be to review the four pillars of the Ebola response (infection prevention and control, social mobilization and community engagement, safe and dignified burials and surveillance) and better synergize their efforts towards a stronger early warning system.
Sierra Leone

Operations
- Following the closing down of UNMEER, based on the recommendation of the UN Headquarters Property Survey Board, the Assistant Secretary-General, Office of Central Support Services, Department of Management, approved the donation of vehicles to the Government of Sierra Leone, NGOs, and UN Agencies. The handover of the vehicles took place on 13 August.

Health
- IOM clinicians in collaboration with the Ebola Response Consortium (ERC) are providing infection prevention and control (IPC) training support at Connaught, Princess Christian's Maternity and Ola During Children’s Hospitals in Freetown and have now trained over 450 hospital personnel.
- During the past week, UNICEF supported the distribution of IPC supplies in Kambia and Pujehun health facilities. The distribution in other districts will continue this week. District Health Management Teams in Port Loko and Pujehun, Sierra Leone, organized a district infection prevention and control (IPC) review in non-Ebola health facilities, during which achievements and challenges were discussed and recommendations for improvement were made.
- The revised Safe and Dignified Burial policy has been rolled out with specific changes in the Western Area burials. New official team members from the funeral homes and previously illegal teams underwent training. In June, the Concern Worldwide team report the Safe and Dignified Burial of 47 people per day in just the Western Area, compared with 59 people per day in December 2014.

Community engagement and social mobilization
- UNICEF and partners support and engagement with traditional healers was intensified across Port Loko, Kambia and Tonkolili districts last week, as part of the “bush-to-bush” campaign. Over 789 traditional healers were engaged to garner their support to the EVD response, especially with a focus on reinforcing social mobilization efforts through participation in daily radio talk shows, among other activities.
- In Tonkolili, a joint initiative by US CDC and UNICEF to build community trust and confidence in the response was launched: on alternate days, video messages from patients at the Ebola Treatment Centre are shared with their relatives, and vice versa.
- In consultation with the National Social Mobilization Pillar, the ‘Community Engagement & ownership for sustained response to the EVD outbreak’ strategy document was finalised this week and approved by the National Ebola Response Centre. The strategy outlines the critical interventions for systematic community engagement up to chiefdom / ward and community level. The document will serve as the community engagement guideline for the National Ebola Response Centre’s “Getting to a resilient zero” strategy.

Early recovery
- The Transition Working Group undertook a series of workshops to identify the processes which will need to continue after zero +42 days; how these will be operationalised; who is best placed to undertake these responsibilities; and what would the associated cost be. Partners included representatives of the Ministry of Health and Sanitation, the Office of National Security and the National Ebola Response Centre (NERC).

Food security
- To support vulnerable households most affected by the Ebola virus and with highest levels of food insecurity, WFP is providing short term food assistance through the lean season. In Kambia district, for example, over 23 000 vulnerable people benefited from this assistance. Distributions are ongoing in other parts of the country.

Protection
- During the reporting period, every quarantined child in Tonkolili and Western Area Urban was visited as part of regular monitoring of their situation. In Port Loko district, 50 children released from quarantine received follow-up visits, and individual and group counselling sessions.
Research and development

- A ring vaccination trial for VSV-EBOV Ebola vaccine, which has produced successful results in Guinea, is being expanded by WHO into Sierra Leone.

Liberia

Operations

- From 12-13 August, the Mano River Union (MRU) Secretariat convened a meeting in Monrovia to discuss the performance of a US$7.65 million African Development Bank (AfDB)-funded Ebola Crisis Response project coordinated by the MRU, part of a wider US$223 million AfDB funding provided to the three most affected countries for Ebola response. Three main project-related themes were discussed: mobilization and compensation of medical personnel from other African countries; incentivizing and training local health workers; and promoting private sector participation, as well as key lessons and recommendations.

Community engagement and social mobilization

- UNDP launched the Community Quick Impact Project. The project aims to strengthen efforts of local and community based organizations toward reaching and staying at zero Ebola transmission, promoting recovery from the Ebola Virus Disease outbreak, and preparedness at the community level. The community based organisations will work on four thematic areas, including Ebola, water and sanitation, construction and education. The projects aim to respond to the basic priority needs expressed by communities and include a strong community participation component in the identification, design, and implementation and monitoring.

Health

- A fourth survivors’ clinic in Liberia opened during the first week of August at Redemption hospital in the north of Monrovia. In the clinic, patients receive treatment for the most common symptoms as well as training and advice on how to stay vigilant by maintaining proper hand hygiene and other practices.
- Counties are increasingly reporting suspect cases and more blood samples and swabs are being analysed, which is a positive trend. However, the response by swab collection teams is still too slow and there is a need for more consistent messaging on blood samples and swabs in order to gain trust from communities and families.

Logistics

- At the end of August, the Logistics Cluster will cease to provide storage and transportation services. The cluster and WFP Common Services are also working on the handover of Logistics assets to government entities.

Protection

- The closure of health facilities and limited health services due to the Ebola outbreak disrupted birth registrations in Liberia, leaving thousands of children without citizenship and in danger of being trafficked or illegally adopted. WHO, UNICEF, and other partners are supporting the Government to clear this backlog by providing resources to register these children and issue them birth certificates. So far, over 12,000 certificates have been issued to children previously missed.

Preparedness / Other countries

- In Guinea Bissau, preparedness support continues to be provided at the central level and in two priority regions (Tombali and Gabu). Activities implemented by WHO and partners during the reporting period with national authorities include: a mapping of local partner activities and coordination meetings in Tombali and Gabu (involving regional authorities and WHO, NADEL, LVIA, Red Cross, AIPO, Plan International, UNICEF); establishment of community event-based surveillance project with CDC, IOM and WHO support; border post
visits and assessments in Gabu region by the WHO Representative and sub-regional teams; and a simulation exercise run with IMC, INASA, and Portugal to test safe sample collection and shipment.

- In Guinea-Bissau, UNICEF support in Ebola has focused on trainings in Education, Protection and C4D (Youth)Training sessions on Ebola education protocol in schools have also been provided in Quinará, Tombali, Gabú and Bolama/Bijagos regions to 27 regional inspectors and 1,136 teachers from 558 schools.

- In Cameroon from 10-14 August, WHO led a preparedness strengthening team follow-up visit to review the country’s level of preparedness and provide technical assistance in the areas of surveillance and points of entry. During the visit, the Ministry of Health, WHO and partners – including US CDC, MSF, UNICEF, KOICA, Governments of France, Germany, and the United Kingdom – were able to update Cameroon’s national operational plan for preparedness.

- The Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation (CAPSCA) programme is an International Civil Aviation Organization (ICAO) global Technical Assistance programme implemented by several UN and aviation partner organisations. CAPSCA provides technical assistance to States to implement the WHO International Health Regulations (IHR) and ICAO international Standards and Recommended Practices (SARPs). To date, eleven (11) CAPSCA Assistance Visits (AVs) have been undertaken in the West African States of Benin, Burkina Faso, Ghana, Guinea, Guinea Bissau, Ivory Coast, Liberia, Mali, Nigeria, Sierra Leone, and Togo. Ten more AVs are planned to be conducted in 2015.

High level meetings

- In Liberia, OCHA has facilitated the Special Humanitarian Action Committee (HAC) meeting with the High Level Panel on Health Crises on 6 August and ensured the participation of key EVD responders such IMC, MSF, IRC, ACF and the Red Cross. OFDA/DART, EU and Swiss Cooperation also attended and raised several points and lessons learned.

Funding

- The overall requirements for the Updated Overview of Needs and Requirements (ONR) (January 2015) are US$ 2.27 billion from October 2014 until June 2015, which includes US$ 1.5 billion from October 2014 to March 2015 (initial ONR requirements).

- According to a recent review undertaken by the Office of the Special Envoy on Ebola, a total of US$ 294.4 million will be needed for the period from July to October 2015, to undertake critical activities in furtherance of the Ebola response. Moreover, the review also reports that the UN Agencies, IOM and IFRC have so far secured US$ 129.7 million.

- Thus, in light of the resource requirements and the funds secured, the resource gap faced by the UN system, IOM and IFRC for the period from July to October 2015 will total US$ 164.8 million.