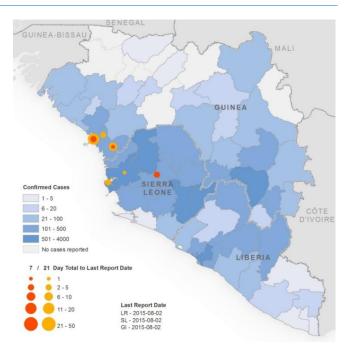
#### Interagency Collaboration on Ebola Situation Report No. 02 (12 August 2015)



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 03 to 09 August 2015. The next report will be issued on or around 18 August.

### Key points

- In week ending 09 August, 3 confirmed cases of Ebola virus disease were reported: 2 in Guinea and 1 in Sierra Leone. No new cases were reported in Liberia.
- Between 3 and 7 August, WHO held a meeting on survivors of Ebola virus disease in Freetown, Sierra Leone.
- Final results of WFP Emergency Food Security Assessments in Liberia and Sierra Leone show negative impact of Ebola epidemic on food security.
- UNICEF continues activities on social mobilization and is supporting households and orphans by providing hygiene kits.



# **Epidemic Status and Response Efforts**

- In the week ending 9 August, 3 confirmed cases of Ebola virus disease were reported: 2 in Guinea and 1 in Sierra Leone. The first case in Guinea was not a registered contact and the source of infection is currently unknown. The second case in Guinea was a community death, also with unknown source of infection. Investigations are currently underway to determine links with known Ebola cases. The case in Sierra Leone is an 8-month old baby with links to an existing cluster of cases.
- This is the third week in a row that new case numbers have been in single digits.
- No new cases were reported in Liberia between 3 and 9 August. The last 18 contacts have successfully completed the 21 day observation period and as of 3 August there are no contacts under follow-up in Liberia.
- There are still more than 1 500 contacts being followed up in Sierra Leone and Guinea. Of these, more than 600 are in Tonkolili, Sierra Leone.

# Operations developments

- Health and Protection Clusters have been deactivated in Liberia. In line with the cluster transition and exit strategy planning for Liberia, the Protection and Health clusters have transitioned to permanent mechanisms, respectively the 'Protection Partners Forum' co-led by the Ministry of Justice and OHCHR, and the 'Health Coordination Committee' led by the Ministry of Health.
- The Early Recovery Cluster in Liberia also held its last meeting on 4 August. However the hand-over to the implementation mechanism of the national Economic Stabilization and Recovery Plan (ESRP) has not yet been completed. It will be taken over by UNDP.

#### Health

- Between 3-7 August WHO held a meeting on survivors of Ebola virus disease in Freetown, Sierra Leone. The purpose of the meeting was to advance clinical care for survivors, to share ongoing research data, and to identify key knowledge gaps. The ultimate goal is to produce a Comprehensive Care Plan for EVD Survivors and, in the process, identify research needed to optimize clinical care and social well-being. http://bit.ly/1MWmISE
- On August 3 in Guinea, the National Ebola Coordination Cell announced plans to offer the VSV-EBOV Ebola vaccine to an estimated 1 080 registered contacts. While the Ebola vaccine has shown 100% efficacy in protecting contacts of cases in Guinea, the vaccine is not approved for use outside a research setting and there are limited supplies. WHO is in discussion to extend this trial to Sierra Leone for new contacts. There is a concurrent trial in Sierra Leone sponsored by CDC using the same vaccine to vaccinate health care workers.
- In Liberia, IOM is supporting county health teams (CHTs) in three counties to provide primary health services to communities through mobile clinics. In partnership with CHTs, IOM provides immunization, psychosocial support, reproductive health services, curative case services, family planning, and health education and triage at mobile clinics.

### Laboratory

Full genome sequencing is being implemented in Guinea. It has been successfully used to link cases with no known or uncertain contact with an Ebola case to ongoing chains of transmission. It has also been instrumental in highlighting the current gaps in surveillance efforts and in identifying missed chains of transmission. The additional information provided by the genome analysis assists with strengthening epidemiological surveillance activities on the ground.

### **Food Security**

- According to the results of a WFP Emergency Food Security Assessment in Sierra Leone, carried out in March-April 2015 to understand the food security situation in the aftermath of the EVD outbreak, food insecurity did not follow the geographical spread of Ebola, but it has deteriorated without distinction in both the EVD affected and non-affected communities. As such, a direct link between the level of Ebola exposure and the severity of food insecurity could not be established.
- The WFP Emergency Food Security Assessment in Liberia, carried out in May 2015, found that households directly impacted by EVD (who suffered the loss of adult family members due to Ebola) are more likely to be food insecure. One of the multiple recommendations for the short term includes prioritizing Ebola-affected households, without excluding households that are only indirectly affected.

### Social mobilization

- In Guinea, Conakry remained the focus of social mobilization efforts. In a combined project by UNICEF and the Ministry of Transportation passengers' temperature were checked and hand-washing ensured at Conakry's major traffic junctions. More than 1.8 million passengers have been checked since July 20.
- 600 police officers in Conakry, Guinea, are being trained on Ebola prevention and sensitization by UNICEF and the Ministry of Interior and Security. These officers will support the Ministry of Transportation in securing Conakry's major traffic junctions and to secure cemeteries and hospitals.
- In Guinea, UNICEF has launched a system for the monitoring of services provided to orphans by NGOs. This will help UNICEF and the Ministry of Social Action generate real-time reports and better understand the situation of children who have lost one or both parents. 85 social workers have been trained to use this system.
- In Liberia, UNICEF participated in county consultative meetings in Grand Cape Mount, Montserrado and Sinoe counties regarding deaths and safe and dignified burials. Similar meetings will be facilitated in other counties. 455 general community health volunteers have received refresher trainings to support integrated community case management services in the three counties. Additional materials on recognition of Ebola signs/symptoms and the revised management protocols have been incorporated in all trainings for health workers.

# Water, Sanitation and Hygiene

- In Guinea, UNICEF provided individual hygiene kits to 82 children who lost one or both parents in Kindia and Dubréka, bringing the total number of Ebola-affected children who have received individual hygiene kits to 7,677 (including 5,874 children who have lost one or both parents to the disease).
- In Liberia, the Ministry of Education (MoE), Education and WASH clusters have convened their members on 7 August to validate guidelines for WASH in schools to be sent by the Ministry of Education to all school authorities. This is the last step following similar validation sessions in the 15 counties.
- In collaboration with the Republic of Sierra Leone Armed Forces (RSLAF), a total of 21 traveling monitors and 80 staff of the Passenger Welfare Organization (PAWEL) have been deployed at 47 crossing points in the three chiefdoms of Bramaia, Gbileh Dixon and Samu, in Sierra Leone. Their purpose is to promote EVD awareness, resupply handwashing stations, support border agents and capture mobility pattern data between designated crossing points.

## Logistics

At the immediate onset of re-emergence of Ebola in Tonkolili district, Sierra Leone, identification of the nearest Forward Operating Base (FOB) was critical. A logistics supply unit has been placed in Tonkolili to support the partners in the response. Based on the experience above, WFP and partners have been requested to map out all the FOBs in the country as part of the readiness interventions for future intervention.

### **Preparedness**

In Guinea-Bissau, which neighbours Guinea, two WHO sub-offices have been established and staffed to support Gabu and Tombali regions and two regional Emergency Operations Centres (EOCs). Community-level activities (surveillance, social mobilization) have been reinforced, and community engagement enhanced through volunteers and community leaders. Regular cross-border information exchange occurs between Guinea and Guinea-Bissau. Logistics support to Guinea Bissau will be provided through the WHO/WFP logistics framework agreement to meet ongoing equipment needs. WHO is also assisting in the establishment of a strengthened triage and alert system.

# High level meetings

- Dr. Tom Frieden, Director of the US Centers for Disease Control, concluded a three-day visit to Guinea on 2 August. During his visit, Dr. Frieden met with representatives from the Government of Guinea, nongovernmental organizations, the UN, and the United States Government. He underscored the importance of remaining vigilant, applying infection prevention and control measures, and collecting and testing samples from deceased individuals to confirm deaths from Ebola virus disease in Guinea.
- OCHA 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.

# **Upcoming events**

13 August 2015. Meeting of the Security Council. The meeting will highlight the role of regional and subregional organizations in fighting pandemics and examine how to plan strategically for transnational problems, such as the outbreak of Ebola virus disease.

### **Funding**

The IFRC has revised its Ebola emergency appeals in the three worst affected countries to introduce early recovery activities while continuing to focus on stopping the epidemic. The appeals aim to reach close to 23 million people in Guinea, Liberia and Sierra Leone and will run through 2017. The total amount of funding now being sought is 215.7 million Swiss francs, an increase of 89 million Swiss francs. The appeal is currently 53 per cent funded.