



UNICEF social mobilizers targeted hotspot areas in Moyamba District this week where secret burials are still reported.

UNICEF/Sierra Leone 2015

# Sierra Leone Ebola Situation Report

14 January 2015



## HIGHLIGHTS

- As of 13 January 2015, the cumulative number of laboratory confirmed Ebola virus disease (EVD) cases is 7,816. The number of confirmed deaths is 2,702.
- The World Health Organization (WHO) report indications that Ebola case incidence may be levelling off in Sierra Leone. But the country remains the one with the highest numbers of new cases.
- Preparations are underway for a second mass distribution of anti-malaria treatments in Ebola hotspots. An estimated 2.5 million are expected to be reached in the coming days in a joint operation between the Ministry of Health and Sanitation (MoHS), UNICEF and MSF.
- The UNICEF-led Family Tracing and Reunification (FTR) network have identified 15,258 children as being directly affected by the Ebola crisis (7,664 girls & 7,594 boys), with 7,968 children having lost one or both parents to Ebola and 552 unaccompanied or separated from their caregiver. 9,103 Ebola-affected children have been provided with psychosocial support.
- The new head of UNMEER, Ismail Ould Cheik Ahmed, made his first visit to Sierra Leone saying he was optimistic Ebola could be defeated in 2015 but warning a huge effort was still required.
- A new World Bank [study](#) released this week found the Ebola emergency has had a wide-reaching impact on the economy of Sierra Leone, with businesses reporting average 40% drops in revenue since July/August. Reduced business hours introduced in the Western Area Surge remain in place in the capital.
- UNICEF Sierra Leone requires USD 178 million for its response to the Ebola crisis until end of June 2015. To date, USD 113.9 million has been received – 64 percent of the total.

## SITUATION IN NUMBERS

**13 January 2015**

**7,816**

Confirmed Cases of Ebola

**2,702**

Confirmed Deaths from Ebola

**7,968**

Registered Ebola Orphans (latest data 12 Jan)

**3.12 million (1 million under-5)**

Children living in affected areas

**UNICEF funding needs to June 2015**

US\$ 178 million

**UNICEF funding gap**

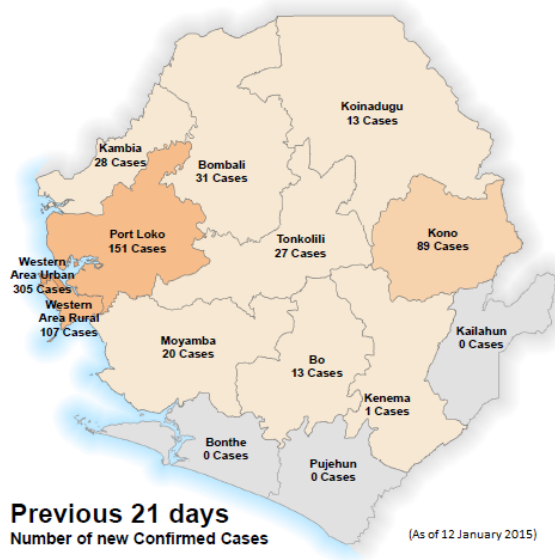
US\$ 64 million

## Situation Overview & Humanitarian Needs

In the week to 11 January, the weekly caseload continued to decline with the country recording the lowest number of confirmed cases (184) for at least ten weeks. The previous week had seen 276 cases, with 351 the week before that.

Following recent trends, more than half of national cases were recorded in the Western Area (rural and urban) in and around the capital Freetown. In the south, the district of Pujehun, on the border with Liberia, has now gone more than 42 days without a case, and three other districts in the south and east have not had a case in the last week (Bonthe, Kailahun, Kenema). Hotspots persist in the Western Area (Urban and Rural), Port Loko, Kambia and Kono.

Reporting by social mobilization (SM) partners from the districts improved significantly with 12 out of 14 districts reporting this week. A total of 8,235 social mobilizers were trained to support SM activities in Bo, Bombali, Kailahun, Kambia, Kono, Tonkolili and Western Area Urban. These social mobilizers reached 26,499 households through inter-personal communication and engaged 618 religious leaders and 223 paramount chiefs and other community leaders in supporting intensified social mobilization efforts.



A total of 7,816 people have contracted the virus of whom 2,702 have died. 15,258 children are directly affected by the crisis, around half of whom have lost one or both parents to Ebola.

## Summary Analysis of Programme Response

### Health

UNICEF continued to support the Ministry of Health and Sanitation and District Health Management Teams (DHMTs) to conduct the training of health personnel on the revised guidelines for the **appropriate management of childhood illnesses and the administration of EPI vaccines during the Ebola outbreak**. During this week, trainings of trainers were conducted at district levels in 6 districts namely Bo, Kenema, Pujehun, Kailahun, Bonthe and the Western Area, where an additional 91 district trainers were trained. The trained district trainers are mainly chiefdoms supervisors who will cascade the trainings in their respective PHUs where 2 staff per PHU will be trained. The PHU trainings will commence this week.

The training of Community Health Workers (CHW) in the revised guidelines on "**Integrated Community Case Management (iCCM) and community based Maternal and Newborn Health care**" including the "No Touch Policy" continued, supported by UNICEF. 278 CHWs from 4 chiefdoms in Port Loko, and 820 CHWs in Kambia were trained. This brings the cumulative total of CHWs trained in the "No touch policy" to 3,749.

The process of preparing for the second phase of the **Mass Drug Administration (MDA) of malaria drugs** continued with the transfer of funds to the 8 districts implementing the campaign and the distribution of drugs from Freetown to district level. Around a million doses of ACT procured by UNICEF were distributed to the 6 rural districts implementing the MDA. The actual campaign is scheduled from 16 to 19 January.

### Nutrition

In the last week, as part of the **Integrated Management of Acute Malnutrition (IMAM)**, a total of 15,459 children under 5 were screened at the community level in 60 out of 149 chiefdoms (294 communities). A total of 204 severe acute malnourished (SAM) children being identified, of which 154 SAM cases were admitted for treatment at the OTPs, while 34 children with SAM with medical complications were referred to an inpatient facility (IPF) to receive pediatric and nutrition care. In five districts<sup>1</sup> SAM cases were treated in 164 peripheral health units (PHUs), which continue to provide nutrition treatment services. A total of 181 boxes of RUTF were consumed.

<sup>1</sup> UNICEF currently has NGO partnerships in five districts (Bombali, Kambia, Kono, Moyamba, Port Loko) and is in the process of establishing partnerships in every district. In the remaining eight districts, the district nutritionist through the DHMT, screens children and refers children for SAM but only reports to the MoHS and UNICEF on a monthly basis. UNICEF also provides the nutrition supplies for these children.

UNICEF is providing 24 Ebola Treatment Units, 10 ETU/Ebola Holding Centres, 56 EHCs, 21 interim care centres (ICCs)<sup>2</sup> and 19 observational interim care centres (OICCs) as well as 47 CCCs directly with nutrition supplies. Supplies include high energy fortified biscuits (BP100), ready-to-use infant formula (RUIF) and Ultra High Temperature (UHT) whole/full cream milk for Ebola patients and survivors – including for children. Nutrition supplies are also prepositioned at district medical stores (DMSs) for the replenishment for all ETUs, EHCs, CCCs, ICCs and OICCs, as well as to support quarantined households countrywide.

*UNICEF engaged in the following capacity building activities in the last week:*

Trained many of the CCC staff in Kambia on the utilization of nutrition supplies<sup>3</sup> provided by UNICEF through the MoHS (DMS). Training was also given to the DERC coordinator and his assistant, the Ebola Field Crises Manager, the UK representative for the DERC and the District Nutritionist. The training focused on specific requirements and provisions for different age categories of young children, older children and adults (especially women) in ETUs, CCCs, OICC/ICC and QHH as well as for the young children whose mothers have died or are infected and are in the community.

## WASH

As lead agency for WASH, UNICEF is coordinating the WASH sector Ebola response. UNICEF continues to support 24 ETUs and EHCs in eight districts with an essential WASH package (sanitation facilities, waste management and water supply for drinking, personal hygiene and disinfection), with a total capacity of 476 beds. UNICEF has also ensured that a total of 46 CCCs with more than 400 beds in five districts continue to have adequate access to essential WASH services. To date, approximately 39,953 people in quarantined households and communities have benefited from WASH Supplies distributed through WFP packages. A total of three OICCs in Port Loko and Western areas continued to have access to safe WASH services benefiting more than 83 Children through support provided by UNICEF WASH partners.

UNICEF WASH has completed a **WASH status assessment for all Ebola care centres** including CCCs and is now working with WASH sector partners on contingency plans to mitigate the effect of water shortages during the dry-season peak (from mid-February).

UNICEF WASH in collaboration with Ministry of Health and Sanitation has identified an Ebola solid and liquid waste dumpsite and a stakeholders' meeting is planned for next week to discuss the way forward.

Since the last reporting period, an additional 13,331 persons including 3,876 children have been reached with Ebola prevention messages including the importance of hand washing with soap. Since June 2014, UNICEF's WASH partners operating in seven districts have reached more than 588,655 people (approximately 88,535 households) with essential Ebola prevention messages.

## Communication for Development (C4D) and Social Mobilization (SM)<sup>4</sup>

UNICEF supported Health For All Coalition (HFAC) **social mobilizers who covered 112 hotspot communities nationwide** during the week 5-11 January, reaching 95,598 households through **door-to-door community sensitization**. The mobilizers identified a total of 290 suspected cases of Ebola (152 from hotspot communities and 138 from non-hotspot communities); of these 93 cases were referred to holding centres/treatment centres within 48 hours. Over the last three weeks, both the number of hotspots and the number of suspect cases identified by the hot spot mobilizers have continued to decline in all districts.

Social mobilization activities to raise awareness and the utilization of UNICEF CCCs in Bombali, Kambia, Kono, Tonkolili and Western Area Rural was conducted by social mobilizers from World Hope International, Marie Stopes International, Partners in Health, Concern Worldwide, and Action Aid respectively. The 200 mobilisers, trained on social mobilization strategies and community engagement, sensitized 193 communities in five districts through door-to-door visits, megaphone announcements, community meetings, and at religious meetings in churches and mosques.

<sup>2</sup> One centre operates as an OICC and ICC.

<sup>3</sup> BP 100, UHT, and RUIF.

<sup>4</sup> UNICEF is the lead agency for the UN for social mobilization and community engagement and is co-chairing the Social Mobilization pillar with the Health Education Division (HED) of the MoHS.

## Community Care Centres

Since 17 November, UNICEF-supported CCCs have triaged 1,541 patients and admitted 237 patients across 5 districts. The number of **patients triaged at UNICEF-supported CCCs has increased by more than 50%** since early December emphasizing the important role played by these facilities in building community trust and ensuring sick individuals seek professional assessment. Furthermore, the most recent data demonstrates a 37% increase in the number of patients seeking care less than 48 hours after the onset of symptoms.

In Kono District, 1 CCC opened during the period, bringing the total number of open CCCs to 3. Three patients were admitted during the period. In the Western Area, the 24-bed Newton and Hamilton CCCs are open and receiving patients as part of the Western area surge. Data are pending. In Kambia, 10 out of 12 CCCs are now open with the remaining 2 sites undergoing final preparations for opening. 111 patients were triaged in the last week; no admissions or ambulance transfers were reported. During the last week, President Dr Ernest Bai Koroma visited Kambia District and recognized the role of the CCCs. His senior advisor attended 2 CCC site openings.

In Bombali District, the 15 CCCs are operational and were responsible for the triage of 94 patients during the period. There were 17 admissions and 11 ambulance transfers. In Tonkolili District, the 13 CCCs are operational and were responsible for the triage of 100 patients during the period. There were 4 admissions and 1 ambulance transfer.

During the period, there were 24 new admissions in CCCs in 4 districts (data still pending for Western Area CCCs). Among sites in Bombali, Tonkolili and Kambia 30% of admitted patients presented within 48h of symptom onset during the reporting period.

## Child Protection<sup>5</sup>

**Registration:** 492 additional children were documented by MSWGCA/UNICEF and partners during the period 1–12 January as being affected by the Ebola Virus Disease. Of this number, 421 children (199 boys and 222 girls) are in quarantine in their homes as a result of exposure to an infected person. Eighteen were confirmed to be Ebola positive (9 boys and 9 girls). Thirty children (13 boys and 17 girls) or 6% of the children documented are single or double orphans, and 22 (10 boys and 12 girls) or 5% are documented as unaccompanied or separated. The cumulative number of children documented by UNICEF through the Family Tracing and Reunification (FTR) network is 15,258 (7,594 boys and 7,664 girls) of which 7,968 (3,985 boys / 3,983 girls) have lost one or both parents and 552 (253 boys / 299 girls) are unaccompanied.

**Development of District Social Welfare Plans:** Technical assistance was provided to the MSWGCA to **develop district level technical guidance notes on the provision of Child Protection, Psychosocial Services with Gender considerations for the EVD response**. In addition, a two day technical working group (TWG) meeting was convened on 6 -7 January 2015 leading to the development of 14 District level programme response plans. The purpose of the plans is to scale-up humanitarian assistance and to strengthen the resilience and adaptive capacities of EVD survivors and affected population, especially children, to better cope with the impact of the risks and hazards of the EVD epidemic. The meeting was attended by 45 persons from the relevant MSWGCA departments and social service officers from all the 14 districts and UNICEF Child Protection team.



UNICEF supported the MSWGCA running a 3-day training workshop for OICC staff. *UNICEF/Sierra Leone 2015*

**Family tracing and reunification:** In the reporting period 1–12 January the UNICEF-led **Family Tracing and Reunification (FTR) network** identified 98 children who required support to be reunified with their families: 98 (100%) were reunified. Cumulatively 1,676 children have been identified for FTR since the beginning of the outbreak and 1,033 (62%) were reunified with their families.

<sup>5</sup> UNICEF is the lead agency for the UN on child protection in the Ebola response and is co-chairing the Child Protection, Psychosocial and Gender pillar with MSWGCA.



**Psychosocial Support (PSS):** A total of 127 out of 176 (72%) in need of psychosocial services received one-on-one counselling and group counselling support within their communities during this reporting period. **Counselling support is provided as part of the follow up on children when they are reunified or placed in alternative care.** To date, 9,103 out of 10,972 (83%) children identified in need of PSS have benefited from specific psychosocial support services.

**Relief Items:** In the reporting period 50 children were identified as requiring relief items, and items for four (8%) were distributed. Cumulatively, items for 10,241 children have been identified and 6,936 (68%) were provided. **The relief items are to support either discharge from treatment centres, or during reunifications or follow up.** The items consist of non-food items including clothing, slippers, sleeping items, bedding, blankets, hygiene materials such as soap, toothbrush and toothpaste and sanitary pads, utensils - cooking pots, drinking cups, and recreational items including toys, games, exercise books and crayons. In the last week an additional 850 FTR relief packages were prepositioned by UNICEF with the MSWGCA in Bo (100), Bonthe (50), Moyamba (100), Kenema (100), Kailahun (150), Kono (250) and Tonkolili (100).

**Observational and Interim Care Centres:** There are currently 13 functioning OICCs covering 12 districts with a total capacity of 262 beds. The OICCs provide care for contact children with no caregivers. For the week 8–12 January, 86 contact children were at the OICCs: Port Loko district with 22 children, Bo district with 21 children, Kono district with 17 children, followed by Moyamba and Bombali each with 7 children, and Kenema and Western Urban with 6 children. Cumulatively 193 children have been admitted in OICCs so far.

There are currently 12 ICCs out of total of 14 that are functional and receiving children, and during the reporting period are lodging 188 children in the districts of Moyamba (24), Port Loko (42), Western Rural (83), Western Urban (22), Kailahun (6), Kenema (4), Kono (2), and Bo (5). 45% are boys and 55% girls. The ICCs provide care and support for surviving children with no caregivers.

**Protection Desks:** Seven protection desks are fully functioning in 13 districts, and 4 are partially functioning due to staffing shortages. In the week 4–10 January, 29 referrals were made to the desks, and 29 were responded to and the cases closed. 25 of these referrals were to OICCs, 3 to ICCs, and 1 for FTR.

## Education

As part of the ongoing rapid assessment of the **Emergency school radio programmes**, this week 1,051 households covering five districts (Western Urban and Rural, Porto Loko, Kambia and Kono) were visited by UNICEF implementing partners to determine if children were engaging. **47% of households had children of primary school age listening to the education programmes.**

UNICEF, with the assistance of its Implementing Partners, organized Focus Group Discussions (FGD) with children of different age groups to learn about how children are affected by not attending school and how they spend their time. The subsequent FGD reports will inform the development of child friendly education material and tools to sensitise children about Ebola.

## Supply and Logistics

**One full charter arrived this week delivering 83 MT of PPE, medicines and nutrition supplies** for the Ebola response. To date, 27 UNICEF supported charters have delivered 1,503 MT of essential supplies in response to the Ebola crisis in Sierra Leone. Also this week, anti-malarials were distributed to six Districts for the second round of the mass distribution campaign.

## Human Resources

As at 14 January 2015, the total number of IP staff in the country office is 58; 13 of these have been deployed in the field. Out of 145 national staff members, 41 are based in the field. The surge and stand-by-partner staff is 17; 15 in Freetown and 2 in the field. These staff members, including the 942 outsourced third party and government staff continuing to support the CCCs.

UNICEF Personnel in Sierra Leone	Freetown	In the field	Total Staff Strength
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International Staff	45	13	58
National Staff	104	41	145
Staff on Surge and SBP	15	2	17
Outsourced third party/ government staff for CCCs	942		

## Media & External Communication

The External Relations and Advocacy (ERA) team provided three days of support this week to a television crew from a Dutch children's news [programme](#). Their [reports](#) should raise greater awareness of the position of children within the Ebola emergency across various European outlets. Several reports this week highlighted UNICEF's work with children in the Ebola crisis, including the [Huffington Post](#), an article in *Expresso Portugal* and [Al-Jazeera](#). UNICEF's profile photos of CCC workers in Bombali District received prominent coverage in [The Guardian](#), and the material was widely shared on social media and reposting sites. The office also supported a regional [press release](#) on measles vaccinations. Nationally, our work with survivors continued to receive [coverage](#) and an article also mentioned our role in the rapid [response](#) in Kono District. Finally, UNICEF's collaboration with the #IsurvivedEbola project attracted much international attention, with coverage on a variety of outlets including [Fox News](#), [NBC](#), [The Daily Mail](#), and [Deutsche Welle](#).

Social media postings continued on a daily basis on [Facebook](#) and [Twitter](#). During the reporting period on Facebook there were 15 new page likes, 250 post likes, 11 post comments, 42 shares and 6,242 posts views on the site. On Twitter we gained 46 new followers and received 332 mentions with 38 retweets.

## Funding

In line with the UN inter-agency response strategy for the Ebola Outbreak, UNICEF humanitarian action for children (HAC) is appealing for USD 178 million for Sierra Leone to support the needs of women and children affected by the Ebola crisis until end of June 2015. To date, USD 113.9 million has been received, 64 percent of the current appeal.

UNICEF greatly appreciates the contributions that have been received to date including from the Governments of Canada, Germany, Ireland, Italy, Japan, The Netherlands and United Arab Emirates, DfID, ECHO, OFDA/USAID, SIDA, OCHA, the World Bank, and the Swedish, UK and US Fund for UNICEF, as well as the private sector.

## Security

Nothing to report.

## Next Situation Report: 21 January 2015

UNICEF Sierra Leone Facebook: <https://www.facebook.com/unicefsierraleone>  
 UNICEF Sierra Leone Twitter: <https://twitter.com/UnicefSL>  
 UNICEF Sierra Leone YouTube: <https://www.youtube.com/user/UNICEFSL>

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## Programme Results (Period 06 – 12/01/2015)

UNICEF and Pillar/Sector Results for EVD response				
Indicators	Pillar / Sector		UNICEF	
	Target	Results	Target	Results
Percentage of EVD cases with onset in the past week		2,24% (175/7,816)		
Percentage of EVD cases with onset in the past week due to contact at community level, within the health sector, or during funeral / burial procedures				
Percentage of District, Social Mobilization taskforces (SMT) reporting on the dashboard each week (UNMEER)	100% (14)	50% (7/14)	100% (14)	86% (12/14) <sup>6</sup>
Percentage of districts, counties etc. with list of identified key religious leaders (including priests, imams, pastors, tribal leaders) or community groups who promote safe funeral and burial practices according to standard guidelines (UNMEER)	100% (14)	100% (14/14)	100% (14)	100% (14/14)
Percentage of Districts with at least one security incident or other form of refusal to cooperate in past week (UNMEER)	0% (0)	29% (4/14)	0% (0)	42% (6/14) <sup>7</sup>
Percentage of CCCs established after a community dialogue process aligned with Global SOPs or according to norms established in country (UNMEER)	100% (200)	25% (50)	100% (42)	112% (47/42)*
Radio stations airing daily messages on Ebola	100% (64)	97% (62/64)	100% (64)	97% (62/64)
Districts where all radio stations air Ebola content every day	100% (14)	100% (14/14)	100% (14)	100% (14/14)

<sup>6</sup> All districts except Moyamba and Western Area Rural have submitted reports

<sup>7</sup> Bombali, Kambia, Koinadugu, Kono and Pujehun and Western Area

House Holds receiving Inter-Personal Communication on Ebola prevention messages (in a quarterly bases)	100% (886,480)	28% (244,346/886,480)	60% (532,000)	28% (244,346/886,480)
Percentage of CCCs functional against target set for the current reporting period (UNMEER)	100% (200 <sup>8</sup> )	25% (50/200)	100% (47)	89% (42/47)
Percentage of patients who present at a CCC within 48 hours of becoming ill with any symptoms that could be EVD (UNMEER)	100%	30% (7/23)	100%	30% (7/23)
Percentage of all Ebola community treatment and holding centers with essential WASH services	100% (94)	72% (69/94)	100% (94)	72% (69/94)
CCCs provided with essential WASH services	100% (200)	NA	100% (47)	98% (46/47)
Non-Ebola health centres in Ebola- affected areas provided with hand-washing stations			100% (1,162)	100% (1,162/1,162)
People in quarantine households receiving WASH support (as part of “home protection and support” kit)			100% (420,000)	10% (39,953/420,000)
Percentage of EVD-affected children provided with care and support, including psychosocial support	100%	83%		
Percentage of children who have lost one or both parents/caregivers or who are separated from their parents/caregivers reintegrated with their families or provided with appropriate alternative care.	100%	62% (1,033/1,676)		
EVD-affected children and caregivers provided with psychosocial support.			100% (10,972)	83% (9,103/10,972)
EVD-affected children placed in interim care			TBD	403
EVD-affected children reunified with their families			TBD	1,033
EVD-affected children and adult survivors who receive non-food items			100% (10,241)	68% (6,936/10,241)

<sup>8</sup> This target is under revision in line with changing approaches.



Percentage of patients admitted to CCCs with a provisional diagnosis of possible EVD who receive a confirmatory positive or negative test (rapid or laboratory test) within 36 hours of admission to treatment facility			NA	NA
Health structures in EVD affected areas provided with essential commodities package			100% (1,185)	101% (1,195/1,185)
Health personnel in health facilities trained in infection prevention and control and Ebola triage			100% (2,000)	218% (4,368/2,000)
Community Health Workers (CHW) trained on revised guidelines on provision of community-based maternal, new-born and child health (MNCH) care			100% (6,000)	44,2% (2,651/6,000)
HIV positive women (including pregnant women) continuing to receive ARTs			100% (1,142)	75% (856/1,142)
HIV positive children continuing to receive ARTs			100% (539)	20% (109/539)
Treatment centres providing nutrition support to Ebola patients**			100% (150)	118% (177/150)
Children 6-59 months screened for SAM and referred for treatment			70% (18,885)	81.9% (15,459/18,885)
Radio Lesson Listenership Coverage during EREP monitoring			100%	46.5% (489/10,510HH)
Teachers trained on psycho social support, Ebola prevention, and safe and protective learning environments	7,000	NA	7,000	NA
Radio stations broadcasting emergency learning programmes			100% (41)	100% (41/41)
Extremely poor households directly affected by the EVD that receive a cash transfer through the national safety net programme	8,000	8,000	NA	NA

\*All CCCs are being established following a community dialogue process.

\*\*= targets set for Jan-February 2015. Result is all the operational centres supported with nutrition supplies.