

GLOBAL CONTEXT

On August 1st, 2018, an Ebola outbreak was declared in Eastern DR Congo. As of 8th August, in Nord Kivu Province the Ministry of Health reported a total of 44 cases (27 probable and 17 confirmed), with 54 suspected cases currently under investigation. There have been 35 deaths in Nord Kivu and two in Ituri Province. Both Ituri cases are deceased, and both were classified as probable. Under the leadership of the Congolese Ministry of Health and the World Health Organisation, Medair and other partners are working to prepare and respond.

WEEKLY UPDATE

In the past week:

- After an initial surge in reported probable and confirmed cases (to 43 by August 5th), case rates slowed significantly in the following days (44 by August 8th). This is partly because some probable cases have tested negative.
- A laboratory has been established in Beni to enable swift testing of blood samples from suspected or probably Ebola cases.
- Blood sample analysis has confirmed that the Zaire Ebola virus strain (the same as the previous outbreak in Equateur province) is the causal agent; however, the two epidemics are not linked.
- The rVSV-ZEBOV vaccine will be used to prevent the spread of the virus; the first vaccinations began in Beni on 8th August. Primary care providers will receive the vaccine first, as they are considered at greatest risk.
- A total of six health zones have confirmed or probable cases as of 8th August: Mabalako, Beni, Butembo, Oicha and Musienene in Nord Kivu and Mandima in Ituri Province.¹
- Ebola Treatment Centres are being established in Mangina, Beni, and Goma.

MEDAIR RESPONSE SUMMARY

Medair supports 47 health facilities in Eastern DR Congo, with Health, Nutrition, and WASH related interventions. Medair's first priority is to ensure that suspected Ebola cases can be safely identified, isolated and referred at these health centres, in order to:

- 1) Ensure suspected Ebola patients receive timely care
- 2) Prevent further spread of Ebola Virus Disease
- 3) Enable affected populations to continue to access quality primary health care in a safe environment

Beginning with areas where the risk is most elevated, Medair will ensure that supported health centres are equipped to triage patients at the entrance to the health centre before isolating suspected Ebola cases in a temporary isolation area, while arranging for referral.

Health centre staff will be trained on how to consistently implement screening, isolation and referral without exposing themselves or other patients to the risk of being infected with Ebola Virus Disease. To support this, they will be equipped with personal protective equipment and receive instruction - derived

¹ Ministry of Health Situation Report, August 9th 2018. Data up to August 8th.

from the WHO guidelines for responding to Ebola in DR Congo - on how to safely screen and isolate suspected Ebola patients.

The health centres that Medair supports are included as an annex.

PROGRESS UPDATE: BENI

- Field team assessed minimum standards at 12 health facilities, planned key messages, and a provisional screening and referral system
- Two health promoters received briefings from the communication commission
- Terms of Reference were developed for internal approval
- Initial checks have been carried out on the availability of budgeted materials in local markets
- Protection of staff: Medair has implemented screening and mandatory hand washing at its bases in Beni and Goma
- Checks have been carried out at the two health centres that Medair uses for staff who are ill to ensure that these centres have a screening and referral system in place.

PROGRESS UPDATE: BUNIA

- Health supervisors were briefed August 2nd – 3rd on initial communications to health facilities and communities, and how these basic messages should be presented
- Health supervisors travelled to the Gety, Lita, Boga and OICHA health zones on 4th August; teams went to the Rethy and Mola health facilities in Rethy health zone on 6th August. They are carrying out preparedness assessments and they will return on 10th August
- An Ebola response lead has been designated. He represented Medair at a general planning meeting on August 7th.

PROGRESS UPDATE: NATIONAL / GLOBAL LEVEL

- Two members of Medair's Global Emergency Response Team have confirmed plans to join the in-country response, and are seeking their visas.
- Goma logistics have imported 100 contactless thermometers to aid screening and are in the process of procuring personal protective equipment.
- Budgets have been prepared for OFDA, showing the cost of additional activities relating to Ebola response in the 23 health centres supported under COD190-191.
- ECHO have contacted Medair and are keen that we use some emergency response funding from COD180-181 to play an active role in the response.
- Marketing & Relationships have published a press release and video relating to the response (English and French versions). M&R plan to launch a funding appeal online, and an initial mail campaign within Switzerland.

PLANNED ACTIVITIES

Following the announcement of the outbreak, Medair's planning has focused on ensuring the safety of its staff working in the field, enabling them to continue their vital work in supporting 47 health centres in Beni Territory and the surrounding areas.

Medair will support the response at health centres through its existing projects by establishing protocols and equipping staff to screen patients at supported health centres and to safely isolate and refer suspected Ebola cases.

In the coming week, health centres will be evaluated in terms of likelihood of receiving suspected cases, and will be prioritised accordingly.

Where possible, Medair is also helping to coordinate the Ebola response. It is liaising closely with partners to ensure that its work achieves its objective of mitigating disease spread and complements that of other humanitarian organisations.

CHALLENGES & NEEDS

Programmes

- Coordination—both internal and external coordination.
- Balancing more comprehensive preparedness versus quick action in the context of the outbreak: Ebola is highly infectious and mortality rates are 50% at best.
- Balancing response to Ebola with previous commitments to primary health care: health and nutrition needs persist in all of the areas we're working with people less likely to seek appropriate healthcare during an Ebola outbreak due to fear of being infected with Ebola.
- Delays in procurement and availability of PPE for primary health centres.

Health zones in Lubero and southern areas of Ituri have no confirmed cases, but are at high risk of receiving suspected cases.

Lubero

- Coordination mechanisms in Lubero Territory are not active, health centres are not prepared to screen, isolate, and refer suspected cases, there is no referral system, and no place where cases can be treated.
- Community Health Workers have not been briefed on key messages they can share with the community.
- The local MOH in Lubero is waiting for Medair to conduct training for their staff to participate in, rather than taking the lead themselves.

Ituri

- The Governor, provincial health authorities, and OCHA are concerned that Ebola preparedness activities in Ituri may create panic, causing communities to flee. Consequently, activities by humanitarian actors are severely restricted.
- Health centres are not prepared to screen, isolate, and refer suspected cases, there is no referral system, and no place where cases can be treated.
- Medair may require more health supervisors to continue current project work and also complete Ebola preparedness activities.

Support

- Some Ebola-specific supplies are not available in-country and must be ordered from Nairobi.
- Medair's commitment is not clearly defined, making procurement difficult. Medair is trying to be proactive and is receiving support from donors, but faces some restrictions from the coordination mechanisms. Planning relies on knowing *what* activities are to be done, in *which* health centres, and *when*.

Medair is a humanitarian organisation striving to relieve human suffering in some of the world's most remote and devastated places. We bring relief and recovery to people in crisis, regardless of race, creed, or nationality. In Eastern DR Congo, Medair supports 47 health facilities, with funding from OFDA, ECHO, SDC, the Common Humanitarian Fund and private funders.

Annex I: Health centres supported by Medair

| # | Province | Health Zone | Health Area | Can screen, isolate & refer? | | | Funding Partner |
|----|-----------|-------------|--------------|------------------------------|----|----|-----------------|
| 1 | Ituri | Lita | Katoto | No | No | No | OFDA |
| 2 | Ituri | Lita | Bahwere | No | No | No | OFDA |
| 3 | Ituri | Lita | Zumbe | No | No | No | OFDA |
| 4 | Ituri | Fataki | Jina | No | No | No | OFDA |
| 5 | Ituri | Fataki | Bule | No | No | No | OFDA |
| 6 | Ituri | Nizi | Iga Barrière | No | No | No | OFDA |
| 7 | Ituri | Komande | Luna | No | No | No | OFDA |
| 8 | Ituri | Gety | Bukiringi | No | No | No | OFDA |
| 9 | Ituri | Gety | Kagaba | No | No | No | OFDA |
| 10 | Ituri | Boga | Tchabi | No | No | No | OFDA |
| 11 | Ituri | Rethy | Rethy | No | No | No | Pooled Fund |
| 12 | Ituri | Rethy | Mola | No | No | No | Pooled Fund |
| 13 | Nord Kivu | Oicha | Kainama | No | No | No | OFDA |
| 14 | Nord Kivu | Oicha | Mbau | No | No | No | OFDA |
| 15 | Nord Kivu | Oicha | Masosi | No | No | No | OFDA |
| 16 | Nord Kivu | Oicha | Kitevya | No | No | No | OFDA |
| 17 | Nord Kivu | Beni | Mukulya | No | No | No | OFDA |
| 18 | Nord Kivu | Beni | Paida | No | No | No | OFDA |
| 19 | Nord Kivu | Kalunguta | Butuhe | No | No | No | OFDA |
| 20 | Nord Kivu | Kalunguta | Mabuku | No | No | No | OFDA |
| 21 | Nord Kivu | Kalunguta | Kalunguta | No | No | No | OFDA |
| 22 | Nord Kivu | Kalunguta | Vurondo | No | No | No | OFDA |
| 23 | Nord Kivu | Kalunguta | Kivethya | No | No | No | OFDA |
| 24 | Nord Kivu | Mutwanga | Lubiraha | No | No | No | OFDA |
| 25 | Nord Kivu | Mutwanga | Luolo | No | No | No | OFDA |
| 26 | Nord Kivu | Kayna | Mulinde* | No | No | No | ECHO-SDC |
| 27 | Nord Kivu | Alimbongo | Bingi* | No | No | No | ECHO-SDC |
| 28 | Nord Kivu | Alimbongo | Kalungu | No | No | No | ECHO-SDC |
| 29 | Nord Kivu | Alimbongo | Alimbongo | No | No | No | ECHO-SDC |
| 30 | Nord Kivu | Alimbongo | Bunyatenge | No | No | No | ECHO-SDC |
| 31 | Nord Kivu | Alimbongo | Lunyasenge | No | No | No | ECHO-SDC |
| 32 | Nord Kivu | Lubero | Bukununu* | No | No | No | Pooled Fund |
| 33 | Nord Kivu | Lubero | Baraka | No | No | No | Pooled Fund |
| 34 | Nord Kivu | Lubero | Kagheri | No | No | No | Pooled Fund |
| 35 | Nord Kivu | Lubero | Kaghuli | No | No | No | Pooled Fund |
| 36 | Nord Kivu | Lubero | Kasima | No | No | No | Pooled Fund |
| 37 | Nord Kivu | Lubero | Kasalala* | No | No | No | Pooled Fund |
| 38 | Nord Kivu | Lubero | Katolo | No | No | No | Pooled Fund |
| 39 | Nord Kivu | Lubero | Kipese* | No | No | No | Pooled Fund |
| 40 | Nord Kivu | Lubero | Kisima* | No | No | No | Pooled Fund |
| 41 | Nord Kivu | Lubero | Kiviriri | No | No | No | Pooled Fund |
| 42 | Nord Kivu | Lubero | Lubero Cité | No | No | No | Pooled Fund |

| | | | | | | | |
|----|-----------|----------|---------|----|----|----|-------------|
| 43 | Nord Kivu | Lubero | Mubana | No | No | No | Pooled Fund |
| 44 | Nord Kivu | Lubero | Vukendo | No | No | No | Pooled Fund |
| 45 | Nord Kivu | Lubero | Kisaka | No | No | No | Pooled Fund |
| 46 | Nord Kivu | Kibirizi | Bulindi | No | No | No | ECHO-SDC |
| 47 | Nord Kivu | Kibirizi | Kilambo | No | No | No | ECHO-SDC |

All health facilities are primary health centres, unless indicated with a * (referral centres)