REPUBLIC OF CONGO: EBOLA

The Federation’s mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world’s largest humanitarian organization and its millions of volunteers are active in over 181 countries.

In Brief

Appeal No. 24/2003; Operations Update no. 2; Period covered: March 2004; Appeal coverage: 67.1%;
(Click here to go directly to the attached Contributions List, also available on the website).

Appeal history:
• Launched on 8 December 2003 for CHF 265,000 (USD 205,460 or EUR 170,150) for three months to assist 50,000 beneficiaries.
• Disaster Relief Emergency Funds (DREF) allocated: N/A

Outstanding needs: CHF 87,081 (USD 68,400 or EUR 55,800)
The specific operational budget for this appeal has been adapted to reflect the impact of appeal coverage. In reality, there are no further outstanding needs.

Related Emergency or Annual Appeals:
• Republic of Congo, 2004 Annual Appeal no. 01.44/2004

Operational Summary: The epidemic was declared ended by the Government of Congo; nonetheless, there remains a risk of a further outbreak due to the persistence of animal contagion. The operational budget has been reduced, both to reflect the actual funding received as well as to adapt to the needs on the ground; as mentioned above, there are no further funding needs.

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All International Federation assistance seeks to adhere to the Code of Conduct and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response in delivering assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation’s website at http://www.ifrc.org
Background
The operation to fight the third Ebola Virus Hemorrhagic Fever outbreak which started in January 2004 continued in the districts of Mbomo and Etoumbi in the Cuvette Ouest department. There is risk of another outbreak due to the persistence of contagious diseases that affects animals in the equatorial forests. Radio broadcasts are organized by the national channel following rumours on a possible epidemic outbreak. The European Commission Agency (ECA), ECOFAC\(^1\), based in Mbomo carries out regular researches on the situation in the forests and submits reports to the authorities of the Congolese Government.

The sanitary situation has not improved. Besides, 30 cases of the measles were reported in Etoumbi. These cases have been biologically confirmed in the laboratories in Kinshasa. The situation calls for mass vaccination campaigns in Mbomo and Etoumbi. The psychosis that arose in Etoumbi during the Red Cross delegation stay and the ECOFAC sensitization tour continued. This led to the refusal of some families to receive anti-measles vaccination.

Operational Developments
The work plan that was established in line with the Emergency Appeal (24/2003) launched by the Federation and the Congolese Red Cross. It gave greater importance to the setting up of an early alert system through a well-trained, well-organized and well-managed network of community health volunteers. The ARCHI \(^2\) approach was the basis of this operation.

The Ministry of Health declared the epidemic ended on 20 January 2004.

Louis Pasteur National Laboratory has drafted a document entitled PASERVE\(^2\) which will be discussed in early March 2004 in Washington with CDC\(^3\) partners.

The Congolese Red Cross community health volunteers (CHV) were trained in February 2004 and continued with home visits to sensitize the communities in the different localities. The themes developed are vaccination of children, pregnant women and the current risks of Ebola Virus Hemorrhagic Fever (EVHF).

The CHV were supported by sub-prefects who sent letters of instructions to the chiefs of villages and quarters with copies to volunteers which they used as passes.

On the other hand, Etoumbi and Mbomo sub-prefects sensitized the populations in the different quarters about EVHF. The Mbomo sub-prefect in particular banned the sale of monkey and gorilla meat; offenders are fined or prosecuted. He is presently organizing young people in groups following the work sessions he had with the representative of PMR (European Union Multi-Sector Project) in his concern to support them in the implementation of alternative activities besides hunting.

UNICEF and the Red Cross team visited the field to assess the situation on site, and to define the basis of their partnership.

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\(^1\) ECOFAC - Central Africa Ecosystem and Forest (French acronym)
\(^2\) PASERVE - Plan d’Actions et de Surveillance Epidémiologique Renforcée du Virus Ebola (en Français); Action and Enhanced Epidemiological Surveillance Plan for the Ebola Virus (in English)
\(^3\) CDC – National Centres for Disease Control and Prevention, Atlanta, Georgia, USA
Coordination
No coordination meetings were held since the Ministry of Health announced the end of the epidemic.

Red Cross and Red Crescent Action
Training was organized with the directorate of the Congolese Red Cross and the Federation Health Delegate. Discussions were held on field activities relation to ARCHI 2010. There is a need for an integrated health programme based on:

- ARCHI 2010
- HIV/AIDS
- Income-generating activities (IGA)

There is need for strong interventions by:

- Having a permanent focal point at headquarters
- Defining proper structures for volunteer management
- Developing and implementing a policy for volunteers
- Creating mothers’ clubs
- Having a dissemination programme with audiovisual aids in the districts
- Starting income generating activities for the people
- Motivating volunteers through donations of ITN4, donation of wheelbarrows or bicycles

During the operational timeframe, the Congolese Red Cross and the Federation emphasized building the capacity of volunteers through the training of coaches in planning, follow-up, reporting and volunteer management. Meetings with coaches evaluated the results of sensitization activities carried out by community health volunteers (CHV) after the training in February, and assessed the difficulties encountered by the CHV during the operation.

Red Cross and Red Crescent Society
The Congolese Red Cross is now 40 years old and covers 90% of the country5. Regardless, the national society is not well known in the Cuvette Ouest department where there is confusion between the Red Cross and the Pink Cross6. This confusion hampered the work of national society volunteers.

Objectives, activities and results
Objective 1: Reinforce local disaster response capacity of the joint Red Cross/Community committees in the different quarters and villages in the affected districts.

Results obtained

- 168 CHV were organized in 44 networks in 34 localities; all except the 68 trained in Kéllé were deployed.
- 28 associates were recruited.
- 25 local and district coaches and the national society Director of the department were trained. The UNICEF health and nutrition administrator also participated in the training. The themes developed are: monitoring, planning, reporting, volunteers’ management and motivation. To motivate volunteers, coaches proposed that:
  1. 17 out of 22 volunteers attend refresher courses.
  2. Volunteers have exchange programmes.
  3. Volunteers be provided with bicycles and working tools, be supported to start income generating activities, be given certificates and assist in the construction of headquarters. There were also proposals that they be given food items such as milk, eggs, salted fish, rice, medicine and be taken care of if they fall ill. In addition, there were proposals to award scholarships to volunteers and to engage Red Cross workers in Brazzaville. One coach suggested a stipend of 2,000 FCFA per CHV after a six month period.

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4 ITN – Insecticide treated mosquito nets
5 Source: Congolese Red Cross Quinquennial Plan 2004-2008
6 Pink Cross is a group associated with witchcraft, and widely perceived by the public as the source of the Ebola epidemic.
• 200 T-shirts, 200 aprons, 1,500 leaflets, 1,000 posters, 300 CHV work guides, 300 attendance certificates, and 100 image boxes on sickness surveillance were produced.
• There was a vaccination and malaria campaign.

Objective 2: Provide food and materials support to affected persons and families.

Results obtained
• Eighty-six (86) families (two per village) were assisted to set up community-based micro projects to change the community’s eating habits.
• One cookery demonstration was organized in Etoumbi where Mothers’ Clubs and coaches from Etoumbi district participated. Locally available food items such as cassava, manioc, banana, fish, chicken and yams were cooked.
• A private fish-breeding pond (a micro-project) was visited in Mbomo. Proper assessments should be done before implementing projects. A strong partnership should be formed to be able to influence the people to change their attitudes and strong beliefs.
• Affected families received food items from the Congolese Red Cross. Distributions have stopped as the Ministry of Health has declared an end to the epidemic.

Objective 3: Provide psychological support to affected persons and families and the general population.

Results obtained
No results are reported at this time. Greater detail will be provided in the Final Report for this Appeal.

Objective 4: Support regional health authorities and Red Cross committees with protection and sensitization materials.

Results obtained
• Home visits were carried out. Activities were carried out alongside a vaccination campaign against the measles and vitamin A and the distribution of forceps to pregnant women. According to the 15 available network reports, 101 pregnant women have been sensitized, and 196 out of 201 children under five were vaccinated (98%).
• In close collaboration with the WHO and the Ministry of Health, (MoH), the volunteers will visit affected families. Suspected cases will immediately be reported to the nearest health centres.
• CHV in Etoumbi could not discuss Ebola following rumors that the Red Cross was the source of the epidemic; this relates to the confusion between Red Cross and Pink Cross (see footnote on page 3). Sub-prefects issued letters to Red Cross volunteers to serve as passes and to allow them to meet with the communities. CHV ensured that pregnant women were given forceps and children were reached out to for vaccination. Regardless of the sub-prefects’ letters, some families still rejected the volunteers; others refused to register their children for fear of witchcraft.
• In Mbomo, the sub-prefect went into the quarters to support the volunteers. The sale of monkey meat was banned.
• German Red Cross pledged to provide the national society volunteers and the community with materials for protection and disinfecting.

Volunteers encountered the following difficulties:
• Some families were reluctant to welcome the volunteers
• Some families hid their children so they could not be vaccinated. One mother got hysteric because her child was trained as a CHV
• Some parents did not have vaccination cards
• Some homes were too far from vaccination centres.
• Some health workers lacked commitment.
Objective 5: Advocate on behalf of the victims and their families.

Results obtained

• The contact with UNICEF has been maintained for possible collaboration with the Congolese Red Cross. The UNICEF Health and Nutrition Administrator participated in the training of coaches, training of women in nutrition and in cookery demonstrations.
• The work session that took place with the collaboration of national laboratory biologist highlighted the role of the Red Cross in setting up an early alert system.
• The meeting with the Cuvette Ouest health department Director at Ewo was an opportunity to brief him on the activities implemented in the zone. The director appreciated the good work done by the CHV during the epidemic and called for more training. He deplored the misconduct of the few volunteers who misunderstood voluntary service, and he regretted the reluctance of people in his department to support the operation.

Red Cross and Red Crescent Movement -- Principles and Initiatives
All the activities implemented by the Red Cross volunteers were based on the fundamental principles of the International Red Cross and Red Crescent Movement. Volunteers were urged to uphold the principles especially in the wake of confusion between the Red Cross and the Pink Cross.

National Society Capacity Building
The training of coaches helped in capacity building. The themes developed (monitoring, planning, reporting, volunteers’ management, volunteers’ motivation, etc) enabled the coaches to understand the scope of their tasks and fulfill them better. The volunteers were provided with work aids (t-shirts, aprons, guides and leaflets); this will improve the visibility of the Red Cross in the department.

The 24 women who participated in the training organized themselves in Mothers’ Clubs to effectively support the Etoumbi network.

Conclusions and recommendations

• There is need for dissemination programme with audio-visual aids in the district villages. The Federation must contact the ICRC to ensure the funding of this activity.
• The health situation in Kellé should be closely monitored
• There is need to train Red Cross staff on governance and ARCHI 2010.
• Volunteers should be motivated by giving them sensitization and protection materials

Contributions list below; click here to return to the title page.
### Republic of Congo - Ebola

#### ANNEX 1

**APPEAL No. 24/2003**

**PLEDGES RECEIVED**

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**Sub/Total Received in Cash**

|  | 177,919 | CHF | 67.1% |

**Kind and Services (Including Personnel)**

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**Additional to Appeal Budget**

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**Sub/Total Received**

|  | 0 | CHF | | | |