

EMERGENCY APPEAL



International Federation of Red Cross and Red Crescent Societies
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

REPUBLIC OF THE CONGO: EBOLA OUTBREAK

Appeal no: 07/03
25 February 2003

The Federations mission is to improve the lives of vulnerable people by mobilising the power of humanity. It is the worlds largest humanitarian organisation and its millions of volunteers are active in 178 countries. For more information: www.ifrc.org

IN BRIEF

THIS APPEAL SEEKS CHF 176,000 (USD 129,793 or EUR 120,206) IN CASH, KIND AND SERVICES TO ASSIST 50,000 BENEFICIARIES FOR 3 MONTHS

The Situation

Since December 2002, the Republic of Congo has experienced new outbreaks of the extremely dangerous Ebola Haemorrhagic Fever (EHF) in the remote forest towns of Mbomo and Kellé, Western Cuvette Region, situated near the border with Gabon. As of 18 February 2003, a total of over 80 suspected Ebola cases, including 69 deaths, have been reported. The epidemic began in the Mbomo hunting zone where the first Ebola epidemic raged in 2001 - 2002. The authorities were first alerted when a clan of gorillas in the region started dying sometime in December. The outbreak is characterized by fever, diarrhoea, hemorrhagic syndrome, and intense fatigue. The outbreak is expected to continue as new cases are still being reported in the affected zone.



The situation is made more difficult by the inherent reluctance, misunderstanding, and mistrust of the local population, a lack of access to the affected area (particularly in the zone of Kellé), and the constant flow of local populations across borders.

In the Cuvette Ouest region, schools are closed and the population's movements are strictly forbidden. The part of the region bordering the Republic of Gabon is also closed to avoid the epidemic cross the border.

The Government Ministry of Health (MoH), the World Health Organization (WHO), and the Congolese Red Cross (CRC) are working together to respond to and control the epidemic. The Government of Congo has allocated 40 million CFA for the operation (the equivalent of USD 65,564 or EUR 61,000). Two WHO experts are now on site while more are expected in the next few days. The Federation's Delegation is working closely with the CRC to support the 62 Red Cross volunteers already trained in techniques to fight Ebola, including sensitization campaigns.

The Disaster

The Ebola epidemic is linked to the consumption of infected primates. Passed on by infected body fluids, Ebola kills anywhere from 50 to 90 percent of its victims through massive internal bleeding, depending on the strain. There is no known cure. The disease was named after a river in Congo's neighbouring Democratic Republic of Congo, where it was discovered in 1976. The worst outbreak in that country was in 1995 when over 250 people died. This current outbreak is the second reported in little over a year in the remote forest region of the Republic of Congo. A similar Ebola outbreak left over 50 people dead from October 2001 to February 2002.

There were 4 epidemic episodes (3 in Mbomo and 1 in Kellé), with 61 cases (35 in Mbomo and 24 in Kellé), 50 of whom died (27 in Mbomo and 23 in Kellé), and more than 453 contacts (392 in Mbomo and 61 in Kellé). A team comprised of the Government, WHO, MSF-Netherlands and the Congolese Red Cross responded to the emergency.

Support is urgently needed to bring this current epidemic under control. Immediate actions are required to care for the sick, activities related to epidemiological surveillance will have to be increased while the current disaster awareness activities will be scaled up. The capacities of the local Red Cross for disaster response to future Ebola outbreaks will also need to be increased.

Sources from Global Outbreak Alert and Response Network (GOARN) indicated that as of 18 February 2003, a total of over 80 suspected Ebola cases, including 69 deaths, have been reported in Kellé district (65 suspected cases, 59 deaths) and Mbomo (8 suspected cases, 5 deaths). Some of the suspected AHFS cases are currently isolated in Kellé hospital and others are ill at home both in Kellé and Mbomo. Ebola has been confirmed in the 5 samples taken from clinical cases in Kellé by Centre International de Recherches Médicales de Franceville (CIRMF), Gabon.

The response so far

Government Action

Co-ordination meetings are being organized by the Congolese Government with relevant partners to work out a plan of action to respond to the disaster. To control the spread of the highly infectious virus, the Congolese government has ordered that all the schools and churches in Kelle be closed, and people are required to stay at home. Government officials are considering ways of cordoning off the entire region but this is unlikely to be successful given problems of access and the many forest trails in the affected area.

The joint Government, WHO and Red Cross mission continues to monitor the evolution of the epidemic, treat suspected cases of Ebola and work with organizations and communities on social mobilization activities.

Red Cross and Red Crescent Action

From 7 to 17 December 2002, the Red Cross carried out assessment missions in Kellé, Mbomo and Etoumbi districts. With Federation support in 2001 and 2002, 62 volunteers of the Congolese Red Cross have been trained to respond to an eventual Ebola outbreak. The training included some aspects of Community-based First Aid (CBFA) and Ebola response techniques (public education, sensitization, surveillance and reporting). The Federation also supported the teams and local Red Cross committees with bicycles and materials for the operation and capacity building.

The proposed Red Cross operation forms a fundamental part of the national response plan. Under the supervision of the Government-partners mission, these same volunteers are actively involved in social mobilization activities to bring the current epidemic under control. The Red Cross has been provided with emergency stocks, 5 bicycles per committee, information and education materials, office supplies, visibility materials (T-shirts, bibs) and funds for the welfare of volunteers. The Red Cross is actively participating in interagency co-ordination meetings.

A tripartite meeting was held with the ICRC, the Federation, and the CRC where joint Red Cross Movement actions were discussed. The Federation has been working closely with the Congolese Red Cross to assess the current EHF epidemic and to provide the needed response. The Delegation has been providing regular information bulletins on the epidemic. The Delegation has supported the CRC with 3.5 million CFA francs (7,000 CHF) for immediate emergency interventions. The Regional Disaster Response Team for Central Africa (ERDAC) Federation trained CRC persons are supporting the operation.

Other Agencies' Action

The WHO's country office is supporting the National Control Committee (including international partners - UN, Red Cross, European Union, French Co-operation and ECOFAC). Two teams from the Congolese MoH and the Laboratoire National de Santé Publique are in the field carrying out an immediate assessment and evaluate the situation.

The WHO is supporting the MoH with staff from the Central Africa sub-regional team. WHO Global Alert and Response and AFRO are working closely to identify additional technical support in epidemiology and logistics.

Apart from the WHO, which is the lead organization, the Red Cross, the Médecins sans Frontières-Hollande are the major organizations in the field. The MSF and the Red Cross through support from the International Federation of Red Cross and Red Crescent Societies Delegation in Brazzaville, have put in place, a kit of protection materials and medicines.

Other specialized institutions involved include The Nocht Institute for Tropical Medicine (Germany), Canadian Science Centre for Human and Animal Health/Health (Canada), Centers for Disease Control and Prevention, Atlanta, USA (CDC), European Network for Diagnostics of "Imported" Viral Diseases (ENVID), European Programme for Intervention Epidemiology Training (EPIET), Institute of Tropical Medicine (IMT- Antwerp), Belgium, Museum National d'Histoire Naturelle, France and Washington State University, USA.

Co-ordination

The Government is co-ordinating the operation, working with the WHO experts, Red Cross, MSF-H, and the Congolese MoH. The medical doctors in the affected districts play a significant role in influencing community behaviour and attitudes towards the epidemic.

At the Red Cross level, the Director of Health will supervise the overall operation, while actively participating in all interagency meetings. The CRC will be supported by the Regional Disaster Response Team for Central Africa (ERDAC) team members.

The Needs

Assessment of Needs

WHO, MoH officials, the Laboratoire National de Santé Publique, and the Red Cross are in the field carrying out an immediate assessment and evaluation of the situation. WHO Global Alert and Response and AFRO are working closely to identify additional technical support in epidemiology and logistics. A further 38 volunteers will be identified and offered refresher courses in community sensitization, social mobilization, and preventive health to enhance the capacity of the National Society to fight or contribute to the fight against the epidemic.

Immediate needs

As the epidemic is continuing, there is an urgent need to:

- intensify social mobilization, sensitization and education activities, in line with the National MoH plan,. Cultural norms and taboos lead people to wash dead persons' remains and to reject pieces of advice from the Government authorities, the humanitarian agencies and in some cases the Red Cross;
- recruiting and training an additional 38 volunteers in the 3 Red Cross committees in the most affected areas (Kellé, Mbomo and Etoumbi);
- reinforcing logistics means through an addition provision of emergency stocks (bicycles, motorbikes), information materials (leaflets, posters, image boxes, megaphones);
- reinforcing the committees with protection and disinfecting materials;
- building the disaster response capacity of the CRC.

Anticipated later needs

This epidemic will continue to affect a greater number of people in the Cuvette Ouest region if measures are not taken. The situation is exacerbated by the population's reluctance to apply the protection and prevention measures. There is therefore a need to reinforce the local disaster preparedness capacity of the Mbomo, Kellé end Etoumbi Red Cross branches for a rapid epidemic response. This should includes:

- Refresher courses for Red Cross regional emergency response team on ARCHI 2010 approach, epidemics surveillance and reporting, emergency needs identification techniques and reporting;
- Maintaining emergency stock of disaster response materials such as Ebola kit, sanitation materials, etc.;
- Support risk mapping and disaster planning activities of the regional government authorities and local NGOs.

The Proposed Operation

The operation envisages the reinforcement of local disaster response capacities and in supporting health authorities and Red Cross committees through visits and sensitization in the affected communities. Other important actions will include the supply of protection and social mobilization materials and household items and providing psychological and material support to affected families and reinsertion of survivors in their communities.

The Red Cross operation will last three months to efficiently and effectively respond to the epidemic. The proposed Red Cross operation which is according to the plan of action of the MoH, will also address the fundamental principles of the movement. The volunteers will use the ARCHI 2010 approach in addressing issues such as HIV/AIDS.

The volunteers in Mbomo, Kellé end Etoumbi Red Cross branches districts will report daily to MoH local co-ordination body while the content of social mobilization messages and materials will be

prepared in collaboration and under authority of the national MoH. In consultation with the Head of Delegation for Congos, the Federation Co-ordination and liaison person will provide liaison between Red Cross and partners in Congo and with Federation and partners outside of Congo.

Objectives and Activities planned w

Objective 1: Reinforce local disaster response capacity.

This objective will be achieved through the following activities:

- Recruitment and train 38 new volunteers (2 volunteers in each of the 19 villages affected by the epidemic in the districts of Kellé and Mbomo) with a view to creating buffer teams at the community level This will increase the number of volunteers actively involved in the operation from 62 to 100.
- Organize a refresher course for the 62 volunteers trained in 2001 to provide an emergency response to this Ebola outbreak.

Objective 2: Support health authorities and local Red Cross committees.

This objective will be achieved through the following activities:

- In consultation and collaboration with the MoH, WHO and technical partners, provide 100 volunteers for a period of 3 months to participate in visits to communities to communicate prevention measures and messages and conduct visits to affected families for detection and referral of suspected cases in the 3 districts of Kellé, Mbomo and Etoumbi.
- Participate in daily joint interagency assessment missions to monitor the evolution of the epidemic in the affected districts.

Objective 3: Procurement of protection and social mobilization materials and material support/household items.

This objective will be achieved through the following activities:

- Secure necessary pro forma invoices for the protection and social mobilization materials and material support/household items.
- Procure protection equipment, social mobilization items, and household items.

Objective 4: In consultation and collaboration with MoH and technical partners in the field, provide psychological and material support to affected families.

This objective will be achieved through the following activities:

- Conduct regular visits to affected families for moral and psychological support.
- Provide material support to replace destroyed household items.
- Provide psychological and social support in the reinsertion of survivors in their communities.

National Society / Federation plan of action

February 2003:

- Finalise the recruitment of a Federation Co-ordinator and liaison person for the 3 month operation.
- Recruit and train 38 new volunteers (2 volunteers in each of the 19 villages affected by the epidemic in the districts of Kellé and Mbomo) with a view to creating buffer teams at the level of the community.
- Organize a refresher course for the 62 volunteers trained in 2001 to provide emergency Ebola response.

February to May 2003:

- Provide 100 volunteers for a period of 3 months to participate in visits to communities for communication of prevention measures and messages and conduct visits to affected families for detection and referral of suspected cases in the 3 districts of Kellé, Mbomo and Etoumbi.
- Participate in daily joint Interagency assessment missions to monitor the evolution of the epidemic in the affected districts.

February 2003:

- Secure necessary pro forma invoices for the protection and social mobilization materials and material support/household items.
- Procure protection equipment, social mobilization and household items

February to June 2003:

- Conduct regular visits to affected families for moral and psychological support.
- Provide material support to replace destroyed household items.
- Provide psychological and social support in the reinsertion of survivors in their communities.
- Evaluate the project (June, 2003) and submit final report.

Communications and advocacy

Since the identification of EHF in 1976, the International Federation has supported a number of response efforts by national societies to outbreaks. It is proposed to conduct an information mission to document the present outbreak and profile the CRC's actions. The objectives would include providing material for the web news pages, Federation News, possible press releases, photographs and audio-visual material for training and other purposes. This material would be made available for use by national society information departments and the media.

National Society Capacity Building w

Through the training and recruitment of new volunteers, the present capacity of the CRC will be reinforced at both the national as well as local levels in the 3 districts. The visibility of the Red Cross will be increased. Through the propositioning of stock, the Red Cross disaster response capacities will be reinforced.

Monitoring and Evaluation w

At the national level, the monitoring of the project will be done by the Director of Health. He will participate in all national meetings. Reports will be written and timely corrective actions taken to improve the operation. At the local level, the persons responsible for the operations will assure regular monitoring of the activities. A final evaluation will be carried and a final report produced.

Capacity of the National Society w

The CRC has 13,000 volunteers among whom, there are 765 trained in CBFA at the national level, the Director General is being assisted by 8 technicians. The CRC has 8 members trained in Emergency response (ERDAC). The 2 local committees have 62 trained volunteers. The region is equipped with an HF radio in Etoumbi which facilitates the flow of information.

Present Capacity of the Federation w

The operation is being supported by the Federation's head of delegation and the health delegate. The Federation office in Brazzaville is allocating its available logistics, financial management services, and other resources to the CRC for the operation.

Budget Summary

See Annex 1 for details.

Abbas Gullet
Director
Disaster Management and Co-ordination

Didier J. Cherpitel
Secretary General

		ANNEX 1
<u>BUDGET SUMMARY</u>	APPEAL No. 07/2003	
Congo : Ebola		
TYPE	VALUE	
RELIEF NEEDS	IN CHF	
Shelter & constructions	3'000	
Clothing & textiles	13'000	
Food & seeds	5'000	
Medical & first aid	5'000	
Utensils & tools	12'000	
Other relief supplies	3'000	
TOTAL RELIEF NEEDS		41'000
<u>CAPITAL EQUIPMENT</u>		
Vehicles	7'000	
Telecom. equipment	8'000	
Other equipment	6'000	
<u>PROGRAMME SUPPORT</u>		
Programme support (6.5% of total)	11'000	
<u>TRANSPORT STORAGE & VEHICLE COSTS</u>		
Transport and storage		
Vehicle costs	12'000	
<u>PERSONNEL</u>		
Expatriate staff	17'000	
National staff	39'000	
<u>ADMINISTRATIVE & GENERAL SERVICES</u>		
Travel & related expenses	3'000	
Information expenses	23'000	
Administrative & general expenses	9'000	
TOTAL OPERATIONAL NEEDS		135'000
TOTAL APPEAL CASH, KIND, SERVICES		176'000
LESS AVAILABLE RESOURCES (-)		0
NET REQUEST		176'000