

# 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 CONGO: EBOLA

Appeal no. 24/03  
8 December, 2003

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 180 countries.

For more information: [www.ifrc.org](http://www.ifrc.org)

### In Brief

***THIS EMERGENCY APPEAL SEEKS CHF 265,000 (USD 205,460 OR EUR 170,150) IN CASH, KIND, OR SERVICES TO ASSIST UP TO 50,000 BENEFICIARIES FOR 3 MONTHS***

### The situation

The Ebola Haemorrhagic Fever (EHF; or Ebola for short) 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 (DRC), where it was discovered in 1976. Ebola is characterized by fever, diarrhoea, hemorrhagic syndrome, and intense fatigue. The worst outbreak occurred in the Democratic Republic of Congo (DRC) in 1995 when over 250 people died. The Republic of Congo has also experienced sporadic new outbreaks of Ebola in various regions since December 2002. The severity of these outbreaks are made more difficult by the inherent reluctance, misunderstanding, and mistrust of the local population, a lack of access to the affected areas, and the constant flow of local populations across borders. The Red Cross, with its extensive volunteer network, has proved that it can successfully gain access to these affected communities to deliver and disseminate information.



The most recent Ebola outbreak in the Republic of Congo occurred in October 2003 in the Mbanza settlement, 18 kms from Mbomo in the Cuvette Ouest region. It was the third outbreak in the last three years. These three areas have an estimated population of 50,000 inhabitants. So far 23 people have been reported dead, while about 40 people are seriously sick and receiving medical care.

The affected region is about 700 km (440 miles) from the capital, Brazzaville, and near the border with Gabon. Accessibility and cultural norms continue to hamper effective response. There is a strict restriction on people's

movements in the area. The part of the region bordering the Republic of Gabon is also closed to avoid further infections of people across the border. To minimize the spreading of the epidemic to Gabon, the Gabonese government recently decided to close a 60 km of its border with Congo.

## **Coordination**

**Government Action:** With the support of the UN's World Health Organization (WHO) office in Brazzaville, the Government dispatched experts to the affected areas. Following laboratory tests on the blood samples taken from the first eleven victims, the team confirmed that it is the Ebola Haemorrhagic fever. The Government set up an inter-agency forum to take all possible measures to fight and mitigate the effects of the epidemic. The Ministry of Health (MoH) is in charge of the coordination of this response operation, and all international organizations operate within the national contingency plan which includes two coordinating meetings per week. The IEC materials which had been developed are being used for sensitization activities in the affected areas and the surrounding villages. The government has developed a national contingency plan defining the response strategies and coordination mechanisms. Affected areas around Mbomo have been sealed off to avoid the epidemic from spreading to other areas. Epidemiologists and epidemic management teams are setting up isolation centres at Mbomo in collaboration with WHO while the sick are under surveillance at home.

The MoH, the WHO and the Congolese Red Cross (supported by the Federation) are working together to control the epidemic. Efforts are centred on four main priorities:

- medical care of the cases.
- epidemic surveillance.
- sensitization of the population.
- psychological and material support to victims and their families and those involved in the operation.

The Congolese Red Cross is working within the Government contingency plan to support the efforts of the MoH. The Red Cross committees in Mbomo, Kellé and Etoumbi are also working closely with the local authorities. The Federation delegation works closely with the Red Cross and health authorities in Brazzaville and participates at inter-agency and ad hoc meetings to implement the national contingency plan.

The WHO Regional Office for Africa (sub-regional epidemic response team for West Africa), staff from the WHO Country Office in Brazzaville, *Médecins sans Frontières* (MSF-Holland), the Congolese Red Cross and the Federation continue to support the Ministry of Health to address human, material and logistics needs. An isolation facility has been established, and contact tracing and social mobilization activities with communities in the region are ongoing.

## **Red Cross and Red Crescent action**

The Federation is working closely with the Congolese Red Cross to support the Red Cross volunteers trained in techniques to fight Ebola, including sensitization campaigns.

Under the supervision of the Government-Partners mission, 126 Red Cross volunteers are actively involved in supporting relief efforts to bring the current epidemic under control. Volunteers are involved in:

- community mobilization activities in the affected districts of Mbomo, Kellé and Etoumbi;
- surveillance of people who had come into contact with the deceased at Mbomo, Mbanza, Olloba and Ewo;
- burial of corpses at Mbanza and Mbomo;
- spraying and fumigating affected areas.

The Federation's health delegate has been working closely with the Red Cross and health authorities in Brazzaville. He has been attending inter-agency meetings to implement the national contingency plan.

## **Needs Assessment**

WHO experts, the Ministry of Health, the Public Health National Laboratory and the Red Cross are in the field continuously assessing the situation and needs. The Emergency Warning and Response Unit together with Afro WHO are working closely together to identify additional competences in epidemiology management and logistics.

**Statistics from 13 October to 6 December 2003**

<b>Total number of cases</b>	43
<b>Total number of the sick</b>	20
✓ <i>Hospitalised</i>	5
✓ <i>Receiving home treatment</i>	15
<b>Total number of deaths</b>	29
✓ <i>Mbomo: 23</i>	20
✓ <i>Mbanza: 3</i>	3
<b>Total number of contacts</b>	- 114
✓ <i>Mbomo: 76</i>	76
✓ <i>Mbanza: 37</i>	37
✓ <i>Ewo: 01</i>	1

*Source: MoH*

**Immediate Needs**

The immediate needs are:

- protection materials (barrels for the preparation of the disinfectants, boots, gloves, body bags, aprons).
- sanitation materials (spades, rakes, cutlasses and hoes).
- updating the skills volunteers and training of new ones.
- sensitization materials (megaphones, posters, leaflets, tee-shirts, markings).
- disinfectant materials (vaporizers and chlorine).
- production of Red Cross Ebola kits.
- income generating micro projects to support communities.
- production of certificates of recognition for volunteers.
- volunteer incentives, operationalisation of anti-Ebola clubs, for six months
- continuous monitoring of the situation.
- emergency stocks.
- vehicle leasing, as well as bikes and motorbikes with spare parts kits.

**Anticipated needs**

If no sustainable measures are taken on time, this epidemic will affect many more people and could easily spread in other villages and districts. The situation is currently at a standstill because many people are sceptical about the use of prevention and protection against the epidemic. It is therefore necessary to reinforce the capacity of the Red Cross disaster management local committees of Mbomo, Kellé, and Etoumbi, for a quick response to the epidemics.

This capacity building should comprise of the following:

- upgrading the skills of Red Cross and local community response teams on disaster management, on the ARCHI 2010 approach, epidemics surveillance, needs identification in emergency situations and reporting.
- emergency stock management for future disaster responses such as Ebola kits, sanitation materials, etc.
- support to the issuing of hazard cards and planning emergency activities for regional authorities and local NGOs.

**The Proposed Operation**

The Red Cross operation will last three months. The operation will emphasize a reduction of risky behaviour of the populations in Kellé, Mbomo, Etoumbi and other neighbouring villages in Sangha, Likouala, Cuvette Centrale,

Lekoumou, Niari and Kouilou. The epidemic and disaster response capacity of the Red Cross will be reinforced. The operation will also address the fundamental principles of the movement.

### **Objectives and activities planned to reach the objectives.**

#### **Objective 1: reinforce local disaster response capacity of the joint Red Cross/community committees in the different quarters and villages in the affected districts.**

##### **Activities related to objective:**

- identification of one field resource person to support volunteer's activities, to ensure the respect of protection rules by volunteers and in the dissemination of messages.
- identify a resource person based at the RC head office in Brazzaville to support the RC management of the operations. S/he will attend inter-agency meetings and will ensure regular reporting.
- setting of a local Red Cross epidemics response teams in each of the 31 villages in the three districts;
- training/retraining of 430 community members, 10 per village/community on communication techniques;
- provide welfare support to the Red Cross volunteers engaged in the operations;
- production and distribution of 15,000 leaflets, 5,000 posters, 50 drawings, 500 aprons, and 500 t-shirts to be used during sensitization sessions in the 43 villages/communities of the affected areas;
- establishing 43 ten-member anti-Ebola clubs and equipping them with protection materials in each village.

#### **Objective 2: provide food and materials support to affected persons and families.**

##### **Activities related to objective:**

- support to 86 families (two families per village/community) in setting up community based micro-projects which aim at changing food and eating habits.
- since certain materials belonging to the affected families will have to be destroyed and to avoid further contamination, the Red Cross will support 86 families with new materials such as cooking pots, plates, buckets, soap, clothing, blankets, bed sheets and mattresses.
- provide food support (Red Cross kits) for affected families

#### **Objective 3: provide psychological support to affected persons and families and the general population**

##### **Activities related to objective:**

- setting up three psychological support teams per affected district.
- Red Cross volunteers will pay visits to affected families to provide moral and psychological support to sensitise them on preventive measures.
- Red Cross volunteers will support the tracing and resettlement of the displaced families.

#### **Objective 4: support regional health authorities and Red Cross committees with protection and sensitisation materials.**

##### **Activities related to objective:**

- participate in daily joint interagency assessment missions and coordination meetings to monitor the evolution of the epidemic in the affected districts.
- in close collaboration with the WHO and MoH, the 126 volunteers will conduct visits to families of affected people. Suspected cases will immediately be reported to the nearest health centres.
- support the teams (Red Cross volunteers and the community) with protection and disinfecting materials (boots, gloves, disinfectants, soap, blankets, body bags etc.).
- to better mitigate the effects of a possible outbreak in future, distribute emergency stocks of kitchen sets (cooking pots, plates, and buckets), soap, clothing, blankets, bed sheets and mattresses at the local Red Cross.

#### **Objective 5: advocate on behalf of the victims and their families.**

**Activities related to objective:**

- carry out advocacy activities to influence government and public actions to provide more support to the fight against the current Ebola epidemic and to engage in better preparedness for response to other outbreaks.
- promote the fundamental principles of the Red Cross movement during the operation.

**National Society / Federation plan of action**

**December 2003 and January 2004**

- identification of one field resource person and one resource person based at the Red Cross head office and setting up of a local Red Cross epidemics response teams;
- training/retraining of 430 community members on communication techniques;
- setting up of three psychological support teams per affected district;
- providing welfare support to the RC volunteers engaged in the operations;
- production and distribution of IEC materials;
- social mobilization sessions in the 43 villages/communities;
- setting up of 43 ten-member anti-Ebola clubs and equipping them with protection materials;
- participating in daily joint interagency assessment missions and coordination meetings;
- planned visits of 126 volunteers to families of affected people to report suspected cases;
- tracing and resettlement of displaced families;
- organising advocacy activities to influence government and public actions and engage in better preparedness for response during other outbreaks;
- promotion of the fundamental principles of the RC movement during the operation;
- support to the teams with protection and disinfecting materials;
- support to 86 families with micro-projects;
- support 86 families with new materials such as cooking pots, plates, buckets, soap, clothing, blankets, bed sheets and mattresses;
- provide food support (Red Cross kits) for affected families;
- provide moral and psychological support;
- monitoring, evaluation and reporting.

**February 2004**

- social mobilization sessions continue in the 43 villages/communities;
- visits to affected families by 126 volunteers;
- participation in daily joint interagency assessment missions and coordination meetings;
- provision of welfare support to the Red Cross volunteers engaged in the operations;
- organisation of advocacy activities to influence government and public actions;
- promotion of the fundamental principles of the Red Cross movement during the operation;
- monitoring, evaluation and reporting activities.

**March 2004**

- maintenance/distribution of emergency stocks of kitchen sets (cooking pots, plates, and buckets), soap, clothing, blankets, bed sheets and mattresses at the local Red Cross;
- social mobilization sessions continue in the 43 villages/communities;
- 126 volunteers continue visits to families of affected people;
- participate in daily joint interagency assessment missions and coordination meetings;
- provide welfare support to the Red Cross volunteers engaged in the operations;
- advocacy activities to influence government and public actions;
- promote the fundamental principles of the Red Cross movement during the operation;
- monitoring, evaluation and reporting activities;
- final evaluation.

## National Society Capacity Building

This operation will lead to improved and increased capacity of the national society through visibility and the recruitment and training of new members. Pre-positioned stocks will strengthen national society disaster preparedness for a response to new outbreaks.

## Monitoring and Evaluation

The Red Cross health and social services director will be in charge of monitoring the project at the national level. He will attend all meetings convened at the national level and provide regular reports and adapted responses in line with the situation on the field. At the local level, those in charge of the operation would ensure that a regular monitoring of activities is carried out. A final evaluation will be carried out and a final report drafted.

The Federation will second two resource persons (RDRT) to support the national societies in the management, evaluation and reporting on activities of the Ebola operations.

## Capacity of the National Society

The national society has 13,000 volunteers with 891 of them trained in CBFA. At the national level, the Director General is being assisted by eight technicians. The CRC has eight members trained in emergency response (ERDAC). The three local committees have 126 volunteers trained in Ebola response techniques. Red Cross Committees of the three districts have been operational since the first outbreak in 2001.

In the field, the 126 volunteers who participated in the previous operation in Mbomo, Kellé and Etoumbi districts are available to respond to the current emergency. In any case, an upgrading of their skills is necessary. However, if the current trend persists they will need to be reinforced with new volunteers whose skills will need to be upgraded through training that includes some aspects of Community-Based First Aid (CBFA) and Ebola response techniques (public education, sensitisation, surveillance and reporting). The region has an HF radio in Etoumbi and this facilitates information flow. A vehicle has recently been donated by the Federation and PNS to facilitate movement of RC teams.

## Present capacity of the Federation

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

The Federation Regional Office in Yaoundé has trained eight members of the Congolese Red Cross in emergency disaster response. These people are available and will provide all the necessary support. They will be assisted by their sister national societies in the DRC if needed.

## Budget summary

See Annex 1 for details.

*For further details please contact:*

- *Terry Carney, Federation Desk Officer, Phone: 41 22 730 4298; Fax: 41 22 733 0395; email: [Terry.carney@ifrc.org](mailto:Terry.carney@ifrc.org)*
- *Momodou Lamin Fye, HoD, Congos, +243 8188 45582/98311445, [hod.kinshasdel@wireless.ifrc.org](mailto:hod.kinshasdel@wireless.ifrc.org)*
- *Dr. Akadiri Razack, Health Delegate, Congos +243 815150403/98601693; [rv\\_akadiri@h2com.com](mailto:rv_akadiri@h2com.com)*

*All International Federation Assistance Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.*

*In line with the Minimum Reporting Standards, the first operations update on this appeal will be issued within 30-days of the launch and the second will be issued over the course of the operation; a final narrative and financial report will be issued no later than 90 days after the end of the operation.*

*This operation seeks to administer to the immediate requirements of the victims of this disaster. Subsequent operations to promote sustainable development or longer-term capacity building will require additional support and these programmes are outlined on the Federation website.*

*For support to or for further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>*

Abbas Gullet  
Director  
Disaster Management and Coordination

Markku Niskala  
Secretary General

**BUDGET SUMMARY**

APPEAL No. 24/2003

**Republic of Congo - Ebola**

TYPE	VALUE
<b>RELIEF NEEDS</b>	<b>IN CHF</b>
Utensils & tools	21,000
Other supplies	51,000
<b>TOTAL RELIEF NEEDS</b>	<b>72,000</b>
<b><u>CAPITAL EQUIPMENT</u></b>	
Vehicles	23,000
Computers & telecom. equipment	5,000
<b><u>PROGRAMME SUPPORT</u></b>	
Programme support (6.5% of total)	17,000
<b><u>TRANSPORT STORAGE &amp; VEHICLE COSTS</u></b>	
Vehicle costs	32,000
<b><u>PERSONNEL</u></b>	
Expatriate staff	17,000
National staff	76,000
<b><u>ADMINISTRATIVE &amp; GENERAL SERVICES</u></b>	
Travel & related expenses	2,000
Information expenses	11,000
Administrative & general expenses	10,000
<b>TOTAL OPERATIONAL NEEDS</b>	<b>193,000</b>
<b>TOTAL APPEAL CASH, KIND, SERVICES</b>	<b>265,000</b>
<b>LESS AVAILABLE RESOURCES (-)</b>	<b>0</b>
<b>NET REQUEST</b>	<b>265,000</b>