

# FINAL REPORT



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 OUTBREAK

20 July 2004

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; Final Report; Period covered: December 2003 to March 2004; Final appeal coverage: 67.1%. ([Click here to go directly to the attached Contributions List](#) and [here for the Final Financial Report](#)).**

#### 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.
- Two Operations Updates were issued. (See reference table at bottom of this page).
- Disaster Relief Emergency Funds (DREF) allocated: N/A

**Related Emergency or Annual Appeals: Republic of Congo 2004 Annual Appeal no. 01.44/2004 – [http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual04/014404.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual04/014404.pdf)**

*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>*

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*For longer-term programmes, please refer to the Federation's 2005 Annual Appeal for the Republic of Congo no. 05AA036 – [http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/05AA036.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/05AA036.pdf)*

Emergency Appeal 24/2003 dated 8 December 2003	<a href="http://www.ifrc.org/cgi/pdf_appeals.pl?03/2403.pdf">http://www.ifrc.org/cgi/pdf_appeals.pl?03/2403.pdf</a>
Operations Update no. 1 dated 4 March 2004	<a href="http://www.ifrc.org/cgi/pdf_appeals.pl?03/240301.pdf">http://www.ifrc.org/cgi/pdf_appeals.pl?03/240301.pdf</a>
Operations Update no. 2 dated 4 April 2004	<a href="http://www.ifrc.org/cgi/pdf_appeals.pl?03/240302.pdf">http://www.ifrc.org/cgi/pdf_appeals.pl?03/240302.pdf</a>

## **Background and Summary**

The third Ebola Virus Haemorrhagic Fever (EVHF) epidemic occurred in Cuvette Ouest Region of the Republic of Congo in the village of Mbanza, 18 kilometres situated on the main road linking Mbomo and Sembé in October 2003. Five traditional hunters supposedly collected the carcass of a wild boar. The consumption of the meat resulted in serious diarrhoeal outbreak claiming 29 victims out of 35 cases in the district of Mbomo, representing a lethal rate of 82.8% (6 out of 7).

A coordinated response under the auspices of the national contingency plan and its objective 5 was carried out by the Ministry of Health in collaboration with WHO, the Congolese Red Cross<sup>1</sup>, the Federation and MSF-Holland to control the epidemic. The operation aimed at ensuring a reduction by half of behaviours at risk vis-à-vis Ebola epidemic amongst the populations of the 43 villages (about 50,000 inhabitants) of the main concerned districts of Kellé, Mbomo and Etoumbi and other neighbouring forest departments, notably Sangha, Likouala, Cuvette Centrale, Lekoumou, Niari and Kouilou.

The Federation delegation in Brazzaville launched Emergency Appeal 24/2003 to support the Congolese Red Cross in its response to the urgent needs of the affected populations. The National Red Cross Societies of Great Britain, Finland, Japan and Sweden responded favourably: Appeal coverage was 67%.

On 20 January 2004, the Ministry of Health declared that the third epidemic has been brought under control but warned of risks of a new epidemic may recur due to the persistence of contagious disease affecting a great number of animals in the forest.

It is worth recalling that the Republic of Congo has already experienced two Ebola epidemics since 2001 which claimed 180 deaths out of 207 cases (in Mbomo and Kellé in the Cuvette Ouest department), representing a lethal rate of 87%. (Please refer to the Republic of Congo country page on the Federation website).

## **Coordination**

Routine activities continued with Inter-Agency Coordination Committee to re-launch the Extended Vaccination Programme (PEV) and the campaign against the measles. Health authorities continue with their routine activities. The WHO team is no longer present in the field but continue to work closely with the Inter-Agency Coordination Committee.

## **Analysis of the operation - objectives, achievements, impact**

This operation defined five specific objectives for implementation.

### **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**

- § Recruitment of the head of the Congolese Red Cross department of Disaster Management as Field Coordinator.
- § Appointment of the Disaster Management department National Coordinator as headquarters coordinator.
- § Recruitment of a regional resource person with experience in ARCHI 2010.
- § Training of 15 trainers of community health volunteers (CHV) who retrained 168 volunteers.
- § Effective deployment of the 168 CHV grouped in 44 networks in 34 localities (besides the 68 CHV trained in Kellé). These CHV carried out sensitization activities on EVHF and on other health issues e.g. vaccination, malaria.
- § Sanitary coverage of 24,912 persons out of the 35,094 inhabitants of the three districts (71%).
- § Recruitment of 28 apprentices or associates to CHV. The latter carried out activities with the trained CHV, and also act as community relays.
- § Training of 25 coaches (local and district) and of the Congolese Red Cross department director in Ewo to assure activities and volunteers follow up in the districts and villages.

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<sup>1</sup> Congolese Red Cross - <http://www.ifrc.org/where/country/check.asp?countryid=184>

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§ Production of 200 tee-shirts, 200 aprons, 1,500 leaflets, 1,000 posters, 300 guides for CHV, 300 attendance certificates, 100 images boxes on sick persons' surveillance, vaccination and malaria. Images boxes and attendance certificates are yet to be handed to volunteers.

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

#### **Results obtained**

- § Support to 86 families (2 per village) in setting up community based micro projects which aim at changing food and eating habits.
- § Education sessions have been organized by volunteers on balanced diet. Practical exercises are being organized on available foods in the region, the staple food, the introduction of missing foods, the search of taboos about foods, and the proposals of weekly menus for children of less than three years and the elderly. What emerges from these education sessions are the following:
- Ø Three major foods are available in the Department of Cuvette Ouest.
  - Ø There almost exists no taboo about the consumption of domestic animals.
  - Ø There exist many taboos about wild animals according to regions, religions and families. Of the proposed solutions, an emphasis is put on the intensification of grassroots education on balanced diet and planting of fruit trees and on the organization of campaigns of culinary demonstrations.
- § A session of culinary demonstration was been organized at Etoumbi with the participation of women (members of the upcoming Mothers Club) and local coaches from Etoumbi district (about 24 women and 15 coaches). The demonstration consisted of transformation of available local produces (cassava, yam, plantains, fish, chickens, etc.) in different dishes. The session was appreciated by the participants. According to the owner of Etoumbi community pharmacy (who visited the Congolese Red Cross headquarters in Brazzaville on 14 March), women continue everyday to try out cooked meals. She wished she could be trained in the cooking of maize-based dishes. Proposals of supplies and sales of salted-fish have been made to women and Mauritian owners of shops.
- § Regarding the implementation of micro-projects, working sessions have been organized with volunteers and the Eco-systems des Forêts de l'Afrique Central (ECOFAC) team. A visit of fish-breeding ponds was made at Mbomo.

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

#### **Results obtained**

The current operation having started soon after the end of the epidemic, psychological support has not been integrated in the activities to be carried out.

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

#### **Results obtained**

- § Home visits are made after volunteers had been deployed. Sub-prefects' authorizations were sufficient to allow volunteers approach communities.
- § Sensitization activities on Ebola have been carried out consecutively with vaccination campaign against the measles, vitamin A distribution and forceps administration to pregnant women. According to 15 networks reports, a census of 101 sensitized pregnant women have been taken, 201 children aged less than one year have been vaccinated. Of this total, 196 received incomplete vaccination (97.5%). Considering the CHV lower level in the administration of vitamin A doses and the confusion among the population between the Red Cross and the Pink cross, it has been decided to postpone the vitamin A and the forceps administration by the CHV.
- § The training of community health agents by the Congolese Red Cross on first-aid, the setting up of fixed vaccination posts in some villages. The distance between one village and another and the low population density renders the realization of these activities difficult (a vaccination centre cannot be set up for three children aged one).
- § The Red Cross volunteers and community were supported with minimal protection and disinfecting materials.

**Objective 5: Advocate on behalf of the victims and their families**

**Results obtained**

Working sessions were held with various institutions:

§ **Inter-agency Coordination Committee meetings.**

An advocacy session took place with the involvement of the Congolese Red Cross in the Extended Vaccination Programme (PEV) routine, the diseases surveillance and the National Vaccination Day to fight polio and the measles.

§ **Work session with the WHO Resident Representative.**

The Congolese Red Cross is involved in the different stages of the installation of community radio stations and the Congolese Red Cross volunteers are participating in the activities organized.

§ **Working session with MSF- Holland in Brazzaville and Kellé**

A collaboration frame was worked out at the national level as well as at the field level in Kellé to involve the volunteers in the field. Another work session took place with MSF-H team based in Kellé.

§ **Collaboration with UNICEF**

Ø Discussions consisted in a future collaboration between the Congolese Red Cross and UNICEF. This collaboration will end up with the signing of a memorandum of cooperation. The UNICEF Health and Nutrition Administrator accompanied the Red Cross on the second field mission and participated in the training of coaches and targeted women in nutrition, associative life and organized culinary demonstrations. Local coaches will later be trained in nutritional surveillance and supplied with armbands to engage in surveillance of malnourished persons. The Red Cross kindergarten school in Etoumbi is on the verge of being reopened and equipped. Some coaches are being supplied with bicycles to facilitate mobility.

Ø The working session that took place in Louis Pasteur National Laboratory in Brazzaville in the PASERVE framework allowed a more clear idea on the actions already taken by the Congolese Red Cross in the early warning domain.

§ **ECOFAC in Etoumbi and Mbomo**

Ø The working sessions helped them benefit from the Congolese Red Cross experience in the Income Generating Activities and discussed about a possible collaboration.

Ø The meeting with the Cuvette Ouest Department health director in Ewo allowed him to brief on the activities carried out in the region. He appreciated the commendable work done by the volunteers during Ebola epidemics and urged that be more trained. On the other hand, he deplored the misbehaviour of some volunteers who have a biased understanding of voluntary service and the reluctance of the population of his department vis-à-vis the volunteers' actions.

**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**

§ An increase of the number of CHV from 64 to 228, and an increase in the number of villages covered from 18 to 35.

§ Deployment of 15 trainers in community health to be used in other departments. This is the first initiative of the kind according to head of DPP department.

§ Existence of four coaches at the intermediary level and 22 local coaches out of 35 identified at the local level.

§ The staff, volunteers and coaches at headquarters, urban committee and departmental levels have more knowledge in the ARCHI 2010 processes thus enabling a wiser choice and implementation of priorities. The implementation of the plan of action allowed the counterpart to better understand ARCHI 2010 Strategy.

§ Information, Education and Communications tools exist and used by volunteers

§ The data base on all the trained and experienced Red Cross volunteers exists.

§ There is more visibility of the Congolese Red Cross.

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- § The 24 women who participated in the training organized themselves in a ‘mothers’ club’ which constitutes an effective support to Etoumbi network.
- § The national society is equipped with a four-wheel-drive vehicle for supervision. The British Red Cross (through DFID funding) is providing a four-wheel drive vehicle to improve the mobility of the Red Cross local committees in the Cuvette Ouest Region.

### Lessons learned

- § The delay in fundraising hampered the start of the preventing activities of the third epidemic outbreak and the participation to the epidemic mitigation activities. However, the implementation of activities in the post-epidemic period in a situation where the contamination of disease continues in the forest (death of gorillas in the forest and their displacement toward inhabited zones) helps prevent any new possible outbreak, if sensitization activities continue to be carried out and are well monitored, and ensure an early warning system.
- § The experimentation of ARCHI 2010 Strategy has helped the Congolese Red Cross draw the lessons and choose its activities multiplication approach in the field, considering the specificities of the Congo (vast country sparsely populated with poor communication system).
- § The integration of other priorities during volunteers training sessions interested other partners such as UNICEF, PNLP and PEV; this can result in reinforcing collaboration with the Congolese Red Cross.
- § The short time of the operation does not permit to implement income generating activities. However, it helped assess the possible activities to be carried out and precautions to be taken for a successful implementation of projects in view of ECOFFAC experience and the population mentality of eternal assisted.
- § The absence of community development NGOs and associations in the districts can turn to an opportunity for the Congolese Red Cross to position itself as a development partner.
- § The confusion between the Red Cross and the Pink Cross continues to pose major risks for the Red Cross staff and volunteers as well as the acceptance of their activities by the communities. An IEC programme is essential.
- § Despite the sub-prefect’s authorization, lots of families were reluctant to the volunteers’ visits. In Mbomo, the sub-prefect accompanied the volunteers in the quarters to campaigns on Ebola and put a ban on the selling and purchase of the monkey meat.
- § Some mothers hid their children. One woman became hysteric because her child was trained as a CHV in Engobé while a number of families refused to register their children in fear of being killed by sorcerers.
- § The lack of vaccination cards (most women do not preserve their vaccination record).

[Contributions List and Final Financial Report below; click here to return to the title page](#)

# Republic of Congo - Ebola

ANNEX 1

APPEAL No. 24/2003

## PLEDGES RECEIVED

18/01/2005

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
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### CASH

REQUESTED IN APPEAL CHF ----->					<b>TOTAL COVERAGE</b>	
					<b>265,000</b>	<b>67.1%</b>
BRITISH - GOVT/DFID		49,020	GBP	108,628	05.01.04	
FINNISH - RC		20,000	EUR	30,970	19.12.03	
JAPANESE - RC		8,318	USD	10,801	19.12.03	
SWEDISH - RC		160,000	SEK	27,520	09.12.03	
SUB/TOTAL RECEIVED IN CASH				177,919	CHF	67.1%

### KIND AND SERVICES (INCLUDING PERSONNEL)

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED IN KIND/SERVICES				0	CHF	0.0%

### ADDITIONAL TO APPEAL BUDGET

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	

**INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES**

Interim report	
Annual report	
Final report	X

**Appeal No & title: 24/2003 Congo Republic - Ebola**  
**Period: years 2003, 2004, up to January 2005**  
**Project(s): P**  
**Currency: CHF**

**I - CONSOLIDATED RESPONSE TO APPEAL**

FUNDING	CASH		KIND & SERVICES		TOTAL INCOME
	Contributions	Comments	Goods/Services	Personnel	
Appeal budget less Cash brought forward	265,000				
<b>TOTAL ASSISTANCE SOUGHT</b>	<b>265,000</b>				
<u>Contributions from Donors</u>					
British Red Cross (DNGB)	108,628				108,628
Finnish Red Cross (DNFI)	31,200				31,200
Japanese Red Cross (DNJP)	4,749				4,749
Swedish Red Cross (DNSE)	27,520				27,520
<b>TOTAL</b>	<b>172,097</b>				<b>172,097</b>

**II - Balance of funds**

<b>OPENING</b>	
CASH INCOME Rcv'd	172,097
CASH EXPENDITURE	-170,877
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<b>CASH BALANCE</b>	<b>1,220</b>

**Appeal No & title: 24/2003 Congo Republic - Ebola**

**Period: years 2003, 2004, up to January 2005**

**Project(s): P**

**Currency: CHF**

**III - Budget analysis / Breakdown of expenditures**

Description	APPEAL Budget	CASH Expenditures	KIND & SERVICES		TOTAL Expenditures	Variance
			Goods/services	Personnel		
<u>SUPPLIES</u>						
Shelter & Construction		629			629	-629
Clothing & Textiles						
Food & Seeds		102			102	-102
Water & sanitation						
Medical & First Aid		267			267	-267
Teaching materials						
Utensils & Tools	21,000	619			619	20,381
Other relief supplies	51,000	5			5	50,995
<b>Sub-Total</b>	<b>72,000</b>	<b>1,622</b>			<b>1,622</b>	<b>70,378</b>
<u>CAPITAL EXPENSES</u>						
Land & Buildings						
Vehicles	23,000					23,000
Computers & Telecom equip.	5,000					5,000
Medical equipment						
Other capital expenditures		3,105			3,105	-3,105
<b>Sub-Total</b>	<b>28,000</b>	<b>3,105</b>			<b>3,105</b>	<b>24,895</b>
<u>TRANSPORT &amp; STORAGE</u>						
Warehouse & distribution		3,508			3,508	-3,508
Transport & vehicles	32,000	20,950			20,950	11,050
<b>Sub-Total</b>	<b>32,000</b>	<b>24,458</b>			<b>24,458</b>	<b>7,542</b>
<u>PERSONNEL</u>						
Personnel (delegates)	17,000	24,917			24,917	-7,917
Personnel (regional, national staff)	76,000	43,462			43,462	32,538
Consultants		1,526			1,526	-1,526
Workshops & training		13,855			13,855	-13,855
<b>Sub-Total</b>	<b>93,000</b>	<b>83,760</b>			<b>83,760</b>	<b>9,240</b>
<u>GENERAL &amp; ADMINISTRATION</u>						
Travel & related expenses	2,000	9,356			9,356	-7,356
Information expenses	11,000	10,622			10,622	378
Admin./general expenses	10,000	26,849			26,849	-16,849
<b>Sub-Total</b>	<b>23,000</b>	<b>46,827</b>			<b>46,827</b>	<b>-23,827</b>
<u>PROGRAMME SUPPORT</u>						
	17,000	11,107			11,107	5,893
Operational provisions						
Transfers & contributions						
<b>TOTAL BUDGET</b>	<b>265,000</b>	<b>170,877</b>			<b>170,877</b>	<b>94,123</b>