Summary

Five emergency appeals were launched to combat Ebola Virus Disease (EVD) outbreaks in Guinea, Liberia, Sierra Leone, Nigeria and Senegal. The appeals employ a 5 pillar approach spelled out in an Ebola regional framework, comprising: (1) Beneficiary Communication and Social Mobilization; (2) Contact Tracing and Surveillance; (3) Psychosocial Support; (4) Case Management; and (5) Safe and Dignified Burials (SDB) and Disinfection. An additional regional appeal was launched to accommodate multi-country support needs. Smaller preparedness and response operations were financed under its Disaster Response Emergency Fund (DREF) in Mali, Cote d’Ivoire, Cameroon, Togo, Benin, Central African Republic, Chad, Gambia, Kenya and Guinea Bissau and Ethiopia, making 16 countries that have emergency operations relating to this outbreak.

In Liberia, while numbers have stabilized somewhat, geographic coverage is wider compared to previous months. Pockets of cases arising in hard-to-reach areas are making response more demanding from a logistics perspective. The operation is focusing on the community protection, sending rapid response teams to hotspots and setting up hubs in the counties to enhance coordination and response.

In Sierra Leone, as of 6th December, the cumulative number of confirmed, probable and suspected cases of Ebola is estimated to have reached 7,754, with 2,035 deaths, according to the Ministry of Health. Western Area (rural and urban), Port Loko, Tonkolili and Bombali remain the areas with highest transmission rates, with concern expressed over increasing number of infections in Kono. Over 7,050 children have been directly affected by EVD in Sierra Leone since May; almost 2,800 of them have lost at least one parent to EVD. The Red Cross has strategically deployed a health delegate in Port Loko who also covers Kambia and a delegate in Bombali who also covers Tonkolili. The Senor Health Advisor has visited Kenema and Kono and has engaged with government and NGOs to assess how Red Cross can best respond to the developing situation in Kono and other districts.

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1 A single combined operations update is produced for the 5 Ebola operations, now on a fortnightly basis
2 An operation in Democratic Republic of Congo was launched to combat the separate Ebola outbreak that is not part of the West African outbreak.
In **Guinea**, in the past two weeks, the infection rate has been decreasing, following several weeks of increases. According to the Ministry of Health and the World Health Organization, as of 5 December 2014, Guinea had a total of 2,269 cases (suspected, probable, and confirmed), and 1,407 deaths, for a fatality rate of 62%. The Red Cross Society of Guinea has completed 1,816 burials. Community resistance to Ebola eradication efforts remain in the Southeast and Southwest of the country, hindering operations.

In **Mali**, the situation has improved. No further suspected cases have been reported in the country. As of 10 December, only one confirmed case is hospitalized in the Bamako ETC and 25 of 26 contacts have been followed to date.

**Operation Updates**

Latest available cumulative data are provided below for 11 situation and programme indicators.

<table>
<thead>
<tr>
<th>Operational Countries and Appeals</th>
<th>GUINEA</th>
<th>LIBERIA</th>
<th>SIERRA LEONE</th>
<th>NIGERIA</th>
<th>SENEGAL</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(MDRGN007)</td>
<td>(MDRLR001)</td>
<td>(MDRSL005)</td>
<td>(MDRNG0017)</td>
<td>(MDRSLN010)</td>
<td></td>
</tr>
<tr>
<td>Cumulative Cases</td>
<td>2,269</td>
<td>7,690</td>
<td>7,754</td>
<td>21</td>
<td>1</td>
<td>17,735</td>
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<tr>
<td>Cumulative Health Care Worker Deaths</td>
<td>59</td>
<td>174</td>
<td>106</td>
<td>5</td>
<td>0</td>
<td>344</td>
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<tr>
<td>Cumulative Deaths</td>
<td>1,407</td>
<td>3,161</td>
<td>2,035</td>
<td>8</td>
<td>0</td>
<td>6,611</td>
</tr>
<tr>
<td>Fatality rate</td>
<td>62%</td>
<td>41%</td>
<td>26%</td>
<td>38%</td>
<td>0%</td>
<td>167%</td>
</tr>
<tr>
<td>Safe and Dignified Burials(SDB) conducted by NS</td>
<td>1,816</td>
<td>2,724</td>
<td>2,719</td>
<td>0</td>
<td>0</td>
<td>7,259</td>
</tr>
<tr>
<td>Trained RC volunteers active in Ebola</td>
<td>2,216</td>
<td>7,321</td>
<td>2,269</td>
<td>184</td>
<td>80</td>
<td>12,070</td>
</tr>
<tr>
<td>Contacts traced by NS</td>
<td>8,228</td>
<td>6,522</td>
<td>26,842</td>
<td>891</td>
<td>75</td>
<td>42,558</td>
</tr>
<tr>
<td>Houses disinfected by NS</td>
<td>17,052</td>
<td>2,068</td>
<td>3,681</td>
<td>14</td>
<td>0</td>
<td>22,815</td>
</tr>
<tr>
<td>People reached through social mobilization</td>
<td>1,053,062</td>
<td>1,146,938</td>
<td>897,895</td>
<td>1,043,565</td>
<td>0</td>
<td>4,141,460</td>
</tr>
<tr>
<td>People reached through Psychosocial support</td>
<td>1,052</td>
<td>1,533</td>
<td>15,436</td>
<td>740</td>
<td>0</td>
<td>18,761</td>
</tr>
<tr>
<td>People treated by NS (Kenema)</td>
<td>NA</td>
<td>NA</td>
<td>354</td>
<td>NA</td>
<td>NA</td>
<td>354</td>
</tr>
</tbody>
</table>

**Source:** WHO Sitreps, Ministries of Health (Guinea, Liberia, Sierra Leone, Nigeria, Senegal) and IFRC

**Liberia**

**Social mobilisation**

Numbers reached through social mobilization continued to climb, surpassing the 1 million mark cumulatively. There were a total of 1,151 volunteers active in EVD operations during the reporting period. (Social mobilisation 1,086, Contact tracing 65).

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3People reached through door to door campaign. Mass campaign figures not included.
Contact tracing and surveillance

The contact tracers are facing logistical challenges due to the distance they have to travel to reach villages which make effective tracing of contacts difficult. There is still denial of the existence of Ebola in many villages. Procurement of 15 motorbikes was approved by the Procurement Committee, with the purchase order to be issued for delivery this coming week. The motorbikes will improve logistics in the counties.

Psychosocial Support

Psychosocial Support training was carried out for relevant chapter staff in Monrovia from 8 – 10 December 2014.

Safe and Dignified Burials and Disinfection of Houses

Of the 119 bodies collected during the reporting period, 118 were cremated and one was buried as instructed by Ministry Of Health. MoH has decided that the IFRC / LNRCS SDB office has to move out of the current premises at the old MoH building within the next two weeks because the Montserrado Health team has to move there. The facilities they suggested for the team were found to be unusable. Renovations are continuing at the SDB compound on 18th Street. There is a problem finding premises for washing SDB vehicles as the chlorine is considered an environmental hazard. This might also not be possible at the new premises.

There are increasing problems in convincing families to release their deceased relatives to the SDB. This is largely due to misinformation that cremation had been stopped by the government. There is no news yet from Government authorities regarding the proposed burial plot in Monrovia.

Case Management

To support community-based household protection, a total of 1,860 community protection kits have been preposition in 10 counties along with 1,610 hygiene kits. A total of 18 health officers, 10 field officers and 2 humanitarian officers have been trained in community-based protection.

Sierra Leone

Social Mobilization and Beneficiary Communication

- The Sierra Leone Red Cross (SLRCS) continues to scale up social mobilization activities in high transmission areas such as Bombali, Tonkolili, Port Loko and Western Urban and Western Rural.
- 9,312 households reached through door to door campaigns
- 38,619 people were reached by 180 volunteers in 81 communities across 6 SLRCS Branches conducted Ebola awareness sessions from 1st to 5th December 2014 through house to house, meetings and Focus group discussions.
- 35 phones were programmed with MAGPI software for Beneficiary Communication volunteers attached to SDB. The phones would collect data from bereaved family members during collection and burying of dead bodies.
- 2 weekly one hour interactive Radio Broadcasts was broadcast on national radio
- One hour live interactive weekly Television program broadcast on national TV
- Social mobilization reach is shown below:

<table>
<thead>
<tr>
<th>District</th>
<th>Male</th>
<th>Female</th>
<th>Children</th>
<th>Total</th>
<th>HH Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kailahun</td>
<td>618</td>
<td>943</td>
<td>879</td>
<td>2440</td>
<td>175</td>
</tr>
<tr>
<td>District</td>
<td>Male</td>
<td>Female</td>
<td>Children</td>
<td>Total</td>
<td>HH Reached</td>
</tr>
<tr>
<td>----------------</td>
<td>------</td>
<td>--------</td>
<td>----------</td>
<td>-------</td>
<td>------------</td>
</tr>
<tr>
<td>Bombali</td>
<td>2,615</td>
<td>2,792</td>
<td>3,147</td>
<td>8,554</td>
<td>1,779</td>
</tr>
<tr>
<td>Bo</td>
<td>4,775</td>
<td>1,207</td>
<td>2,166</td>
<td>8,148</td>
<td>712</td>
</tr>
<tr>
<td>Port Loko</td>
<td>1,825</td>
<td>1,767</td>
<td>2,487</td>
<td>6,079</td>
<td>1,707</td>
</tr>
<tr>
<td>Western Urban</td>
<td>1,261</td>
<td>1,660</td>
<td>3,293</td>
<td>6,214</td>
<td>803</td>
</tr>
<tr>
<td>Western Rural</td>
<td>2,484</td>
<td>2,505</td>
<td>2,145</td>
<td>7,134</td>
<td>851</td>
</tr>
<tr>
<td>Tonkolili</td>
<td>3,220</td>
<td>3,418</td>
<td>5,352</td>
<td>11,990</td>
<td>2,552</td>
</tr>
<tr>
<td>Kenema</td>
<td>12,695</td>
<td>18,816</td>
<td>6,319</td>
<td>37,830</td>
<td>315</td>
</tr>
<tr>
<td>Moyamba</td>
<td>563</td>
<td>630</td>
<td>978</td>
<td>2,171</td>
<td>418</td>
</tr>
<tr>
<td>Grand Total</td>
<td>30,056</td>
<td>33,738</td>
<td>26,766</td>
<td>90,560</td>
<td>9,312</td>
</tr>
</tbody>
</table>

- **602** Ebola flyers were distributed in Bombali in partnership with UNICEF and MoH. Emphasis has been placed on:
  - House to house campaign celebrating survivors, stigma and discrimination, and early reporting to CCCs.
  - Focus group discussion with children and religious authorities
  - Hygiene promotion (hand washing with children)
  - Mobilization of existing mothers and youth peer educators clubs has started nationwide to reinforced sensitization on how to prevent Ebola

**Contact Tracing and Surveillance:**

Clarification has been reached on the role of Sierra Leone in contact tracing with the MoHS who have stated that RC can use our trained volunteers as part of the national CT effort. We have also clarified that SLRC volunteers who are trained as contact tracers can work more than the traditional three day week and can therefore offer a comprehensive 21 day follow up to contacts as per standard procedures.

Challenges remain however in linking our volunteers within the national system to ensure they are playing a meaningful and coordinated role. We have therefore linked up with UNFPA / MoHS in Port Loko, Kambia, Bombali and Tonkolili to establish clear geographical coverage and coordination ensuring RC is focused on specific areas whilst retaining ability to be mobile and respond to hotspots. Discussions are ongoing at the district level.

At the national level Red Cross has been asked to lend human resources / volunteers in support of a national community surveillance initiative developed by MoHS and ten other partners. A pilot project has been initiated in Bo by MoHS and International Rescue Committee and plans are being developed to scale-up nationwide. It’s clear that with almost 800 trained contact tracers, the RC can play an increased national role in contact tracing and we have expressed an interest in being active at the planning and operational phases.

- **26,842** contacts registered and followed up by Red Cross volunteers to date
Psychosocial Support:
- 777 volunteers trained and active in PSS
- 15,436 affected family members and survivors reached through Psychosocial support pillar to date

Safe and Dignified Burials and Disinfections:
- 823 safe and dignified burials have been carried out by Red Cross burial teams in Sierra Leone in the past 2 weeks. No volunteer or staff member has become infected.
- Training of the new burial teams was completed over the past two weeks and we are now at 49 teams trained. Note that the numbers below relate to operational teams – some teams are awaiting vehicles but these have arrived now and teams will soon be 100% operational.
- Approximately 100% of burials conducted by the Red Cross are performed within 24 hours.
- 823 houses and public places disinfected in the week

Case Management in Kenema IFRC ETC
Over 1,500 treatment beds are needed in a setting that is safe for patients and healthcare workers. Each treatment centre should have a capacity of 50 to 100 beds. There are 12 operational ETCs with approximately 550 available beds, and total bed capacity of 800. They are run by the MoHS, Médecins Sans Frontières, Save the Children, China, IFRC, Plan International, Partners in Health, and other partners.

The IFRC ETC in Kenema remains fully operational with all 60 beds occupied. 42 of the beds are for confirmed cases but plans are underway to increase the confirmed cases beds to 48 to cater for growing needs.

<table>
<thead>
<tr>
<th>Personnel</th>
<th>National</th>
<th>International</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses</td>
<td>36</td>
<td>6</td>
</tr>
<tr>
<td>WatSan (IPC)</td>
<td>80</td>
<td>4</td>
</tr>
<tr>
<td>Clinician</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Support staff</td>
<td>33</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>149</strong></td>
<td><strong>19</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Cumulative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions</td>
<td>354</td>
</tr>
<tr>
<td>Deaths</td>
<td>151</td>
</tr>
<tr>
<td>Discharges</td>
<td>149</td>
</tr>
<tr>
<td>Transfers</td>
<td>25</td>
</tr>
</tbody>
</table>

- The treatment centre has also opened an interim Observation Unit for children under 5 of admitted parents, the number of children in this unit is included in count of suspect cases.
- There are ongoing construction work inside high risk area in the Red Cross ETC, to accommodate the need for increased number of confirmed beds, as the need for available beds in probably and suspected area are reduced. Contingency plan for increasing probably and suspected beds is in place if the need will arise.
In general new cases admitted appear more severely ill upon arrival due to difficulties with transport of patients from holding centres to the ETC, specifically, the situation in Kono is worrying as there is currently a huge shortage of health personnel at the holding centres in the district.

Lack of space in holding centres in the Western area continues to leave a number of symptomatic patients to be cared for by relatives – sometimes for up to 4 days – which poses significant risks for the community.

Cross-infection issues remain critical, particularly during transport and in holding facilities as suspected cases are often kept together with confirmed cases.

Migrations between chiefdoms or districts remain a big challenge in the implementation of quarantine by-laws. With the holidays approaching, more population movements might occur across the country.

An assessment in Kono was carried out by the IFRC and the Canadian Red Cross and findings indicate an urgent need to establish treatment facilities. Following discussions with authorities and partners, the SLRCS and the IFRC has requested immediate surge capacity through deployment of Logistics, IT, Telecom and basic health unit (Ebola Treatment Unit configuration) emergency response units (ERU). The ERU alert has gone out to movement partners with emergency response unit capacity on 10 December.

Security
In the last week, there were three incidents concerning the Red Cross burial teams in Waterloo, Kambia and Kono. Prior to this, physical or verbal attacks were very rare as the Red Cross is well regarded in Sierra Leone.

The National Society is very active in community engagement with interventions including door to door, town hall meetings, radio broadcast in the local language and TV programme broadcast nationally. The end of this week will see the final scale-up of the operation in Sierra Leone ensuring that each district has a skilled group of social mobilization volunteers to intensify and amplify key messages to the communities. SLRC and IFRC underscore the need to have safe access to communities for volunteers to carry out their work. Meetings have been held with community and religious leaders, politicians and security forces regarding this issue.

Guinea

Social mobilization and beneficiary communication.

- 2,216 volunteers have been mobilized for this response.
- 1,053,062 people have been reached by social mobilization efforts.
- 3 mobile data collection trainings have been completed: Conakry, Kissidougou, and Gueckedou, for a total of 37 people, including 6 Red Cross Society of Guinea supervisors. Mobile data collection will improve information management for Safe and Dignified Burials and other activities. Training will continue until all Prefectures are trained and able to implement.
- Beneficiary Communications team selected volunteer trainers who will participate in upcoming Training of Trainers
- Six 1-hour participatory radio shows on the national Radio-Television station have been produced.
- 1 sports radio and TV show on Safe and Dignified Burials have been produced.
SDB and disinfections

- Total Safe and Dignified Burials in this response: 1,816
- Safe and Dignified Burials trainings are ongoing across the country.
- 151 houses were disinfected during this period, for a total of 17,052 for the entire response.

Contact Tracing and Surveillance:

- 712 contacts were traced by the Red Cross Society of Guinea during this period. Contact tracing remains difficult because of the movement of contacts around the country. Contact tracing remains a challenge, despite the President’s Decree of 13 August, forbidding contacts of Ebola patients from traveling.

Security

On 1st December, a Safe and Dignified Burial Team from the Red Cross Society of Guinea was attacked in Conakry. The family of the deceased had given their authorization for the volunteers to proceed with a safe burial. A crowd began to throw stones at the five volunteers and police officers. The members of the Red Cross team and police officers left the scene. A vehicle belonging to the Red Cross Society of Guinea was vandalised, as was a motorbike. Both were set on fire. All members of the Red Cross team lost property. Parts of the vehicle were stolen. On 3rd December, an ICRC vehicle was stopped by a group of people in the middle of the road, and surrounded by people acting aggressively and shouting threats.

Following these incidents an emergency security meeting was held, bringing together all members of the Red Cross Movement in Guinea. The main actions taken to improve relations with the community center on communication activities. Radio and TV ads on behalf of the Red Cross have been produced in 6 languages. They explain why the Red Cross has to conduct safe and dignified burials, and implore communities to let teams go about their work, in the same way as during the cholera outbreak in 2012.

Nigeria

On 20 October, WHO declared Nigeria Ebola-free. Highlighted progress during the reporting period includes:

Beneficiary Communication and Social Mobilization:

- 31 Branch Secretaries and Health Coordinators were trained as trainers on ECV, Ebola, PSS and presentation skills from 15 branches in Nigeria from 2 - 4 December 2014. Trained trainers have planned to carry out trainings of volunteers in the 15 branches as part of preparedness: Federation and the NHQ will support the branches finically so that they can carry out the planned interventions.
- A total of 150 t-shirts and 3,000 leaflets were printed and distributed
- A total of 85,479 people were reached through port health, dissemination of IEC materials and social mobilization and beneficiary communication. The volunteers at the port of entry are working hard and sometimes not recognized by the airport officials / this is a challenge sometimes for the volunteers

Senegal

On 17 October, WHO officially declared Senegal free of Ebola. Despite this success, Senegal remains a high-risk country and strengthening of response capacity and preparedness is vital for early and effective response to potential new cases.
IFRC’s Emergency Appeal launched in September supports the Senegalese Red Cross to respond to the ongoing Ebola outbreak risk through information and communication, education, awareness raising, social mobilization and regional collaboration.

Training activities reached 50 volunteers, 60 teachers, and 23 Red Cross staff. Sensitization activities reached 500 persons at Dakar University and 893 pupils in 7 schools in Dakar.

In Mali, coordination has taken place through daily induction meetings at WHO, regular meetings of a task force and of committees. The IFRC team has engaged in ongoing training of volunteers and managers in the National Society on safe and dignified burial (25 participants), with facilitation from Médecins Sans Frontières.

Support from the Sahel Regional Representation helped develop a work plan for communication, including the development of key messages. A technical meeting among partner National Societies and the Mali Red Cross shared information on implementation of the Ebola action plan and helped ensure coordination around the National Society’s contingency plan. A visit from International Medical Corps (IMC) sought to establish a partnership on Ebola prevention and response with the Mali Red Cross, similar to the MoU they have signed in Liberia.
## Funding

<table>
<thead>
<tr>
<th></th>
<th>GUINEA</th>
<th>LIBERIA</th>
<th>SIERRA LEONE</th>
<th>NIGERIA</th>
<th>SENEchal</th>
<th>AFRICA coordination and preparedness</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL AMOUNT Sought</td>
<td>(MDRG007)</td>
<td>(MDRLR001)</td>
<td>(MDRSLO05)</td>
<td>(MDRNG017)</td>
<td>(MDRSN010)</td>
<td>(MDR60002)</td>
<td>99,264,816</td>
</tr>
<tr>
<td></td>
<td>28,509,039</td>
<td>24,464,985</td>
<td>40,396,719</td>
<td>1,619,444</td>
<td>1,380,962</td>
<td>2,893,667</td>
<td></td>
</tr>
<tr>
<td>TOTAL RECEIVED TO DATE</td>
<td>9,740,325</td>
<td>10,853,401</td>
<td>33,822,558</td>
<td>631,347</td>
<td>167,164</td>
<td>2,850,026</td>
<td>58,064,821</td>
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<tr>
<td>APPEAL COVERAGE TO DATE</td>
<td>34%</td>
<td>44%</td>
<td>84%</td>
<td>39%</td>
<td>12%</td>
<td>98%</td>
<td>58%</td>
</tr>
</tbody>
</table>

**Multilateral donors to IFRC Ebola appeals**

- American Red Cross
- Australian Government
- Bill and Melinda Gates Foundation
- British Red Cross (including from British Government and Children’s Investment Fund Foundation)
- China Red Cross Hong Kong branch
- Danish Red Cross
- Danish Red Cross (from Danish Government)
- European Commission - DG ECHO
- Finnish Red Cross
- French Red Cross (including from Total)
- German Red Cross
- Icelandic Red Cross
- Japanese Government
- Irish Red Cross Society
- Japanese Red Cross Society
- Japanese Government
- Israel (Private Donors)
- Luxembourg (Private Donors)
- Italian Government
- Monaco Government
- Norwegian Red Cross
- Qatar Red Crescent Society
- Red Crescent Society of Islamic Republic of Iran
- Red Cross of Monaco
- Shell
- Sime Darby Berhad
- Spanish Red Cross
- Swedish Red Cross
- Switzerland (private donors)
- Swiss Red Cross (including from Swiss government)
- Taiwan Red Cross Organisation
- The Canadian Red Cross Society (from Canadian Government)
- The Netherlands Red Cross (from Netherlands Government)
- The Republic of Korea National Red Cross
- Tullow Guinea Limited
- UNICEF
- United States Government - USAID
Contact information

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For Performance and Accountability (planning, monitoring, evaluation and reporting):

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How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC’s vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC’s work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.
AFRICA EBOLA 2014

At a glance

<table>
<thead>
<tr>
<th>EMERGENCY APPEALS</th>
<th>Appeal Code</th>
<th>Appeal Name</th>
<th>Appeal Timeframe</th>
<th>Budget</th>
<th>Funding</th>
<th>Coverage</th>
<th>Gap</th>
<th>Income</th>
<th>DREF</th>
<th>Expenditure</th>
<th>Balance</th>
<th>Commitments</th>
<th>Exp/Bud</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDR60002</td>
<td>Africa - Ebola Coordination and prep</td>
<td>19-Aug-14 31-May-15</td>
<td>2,893,667 2,851,709</td>
<td>99%</td>
<td>41,958</td>
<td>2,861,202</td>
<td>557,669</td>
<td>2,303,534</td>
<td>203,436</td>
<td>9%</td>
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<td></td>
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<tr>
<td>MDRGN007</td>
<td>Guinea - Ebola Virus Disease</td>
<td>26-Mar-14 30-Jun-15</td>
<td>26,509,039 9,701,264</td>
<td>34%</td>
<td>18,807,775</td>
<td>9,748,651</td>
<td>0</td>
<td>1,692,607</td>
<td>8,056,044</td>
<td>1,430,420</td>
<td>6%</td>
<td></td>
<td></td>
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<tr>
<td>MDRLR001</td>
<td>Liberia - EVD Outbreak</td>
<td>09-Apr-14 30-Jun-15</td>
<td>24,464,985 10,766,548</td>
<td>44%</td>
<td>13,698,437</td>
<td>10,611,848</td>
<td>0</td>
<td>2,130,305</td>
<td>8,481,543</td>
<td>1,192,115</td>
<td>9%</td>
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<td></td>
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<tr>
<td>MDRNG007</td>
<td>Nigeria - Ebola Virus Disease</td>
<td>08-Aug-14 31-May-15</td>
<td>1,619,444 631,452</td>
<td>39%</td>
<td>987,992</td>
<td>631,452</td>
<td>0</td>
<td>410,911</td>
<td>220,544</td>
<td>54,563</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MDRSL005</td>
<td>Sierra Leone - Ebola Virus Disease</td>
<td>06-Apr-14 28-Feb-15</td>
<td>1,380,962 167,803</td>
<td>12%</td>
<td>1,213,159</td>
<td>167,803</td>
<td>259,042</td>
<td>12%</td>
<td></td>
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</table>

TOTAL EMERGENCY APPEALS | 99,264,816 57,932,429 58% | 41,332,387 | 57,246,580 | 1,253,515 | 10,298,573 | 48,201,522 | 10,610,697 | 10% |

<table>
<thead>
<tr>
<th>DREF OPERATIONS</th>
<th>Appeal Code</th>
<th>Appeal Name</th>
<th>Appeal Timeframe</th>
<th>Budget</th>
<th>Funding</th>
<th>Coverage</th>
<th>Gap</th>
<th>Income</th>
<th>DREF</th>
<th>Expenditure</th>
<th>Balance</th>
<th>Commitments</th>
<th>Exp/Bud</th>
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</thead>
<tbody>
<tr>
<td>MDR42002</td>
<td>Americas - Ebola Preparedness</td>
<td>21-Oct-14 21-Jan-15</td>
<td>100,000</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>100,000</td>
<td>2,705</td>
<td>97,295</td>
<td>3%</td>
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<tr>
<td>MDRBJ014</td>
<td>Benin - Ebola Virus Disease</td>
<td>27-Aug-14 27-Nov-14</td>
<td>50,204</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>50,204</td>
<td>29,548</td>
<td>20,656</td>
<td>4,300</td>
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<tr>
<td>MDRCD015</td>
<td>Democratic Republic of Congo - Ebola</td>
<td>29-Aug-14 29-Nov-14</td>
<td>256,399</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>256,399</td>
<td>120,557</td>
<td>135,842</td>
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<tr>
<td>MDRCF018</td>
<td>Central African Rep - Ebola Virus Disease</td>
<td>29-Aug-14 29-Dec-14</td>
<td>48,697</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>48,697</td>
<td>150</td>
<td>48,547</td>
<td>11,992</td>
<td>0%</td>
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<tr>
<td>MDRCI006</td>
<td>Côte d'Ivoire - Ebola Preparedness</td>
<td>18-Apr-14 18-Jul-14</td>
<td>60,950</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>59,919.04</td>
<td>59,919</td>
<td>0</td>
<td>98%</td>
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<tr>
<td>MDRCM019</td>
<td>Cameroon - Ebola Virus Disease</td>
<td>24-Aug-14 24-Nov-14</td>
<td>49,922</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>49,922</td>
<td>33,549</td>
<td>16,373</td>
<td>8,960</td>
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<tr>
<td>MDERT014</td>
<td>Ethiopia - Ebola Virus Preparedness</td>
<td>29-Oct-14 29-Jan-15</td>
<td>46,641</td>
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<td>N/A</td>
<td>0</td>
<td>0</td>
<td>46,641</td>
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<tr>
<td>MDRGM009</td>
<td>Gambia - Ebola Virus Disease Prepare</td>
<td>15-Sep-14 15-Dec-14</td>
<td>46,856</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>46,856</td>
<td>36,796</td>
<td>10,060</td>
<td>79%</td>
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<tr>
<td>MDRGW002</td>
<td>Guinea Bissau - Ebola Virus Prepared</td>
<td>08-Oct-14 08-Jan-15</td>
<td>49,168</td>
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<td>734</td>
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<td>MDRKE031</td>
<td>Kenya - Ebola Virus Disease Prepared</td>
<td>23-Sep-14 23-Dec-14</td>
<td>59,127</td>
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<td>0</td>
<td>0</td>
<td>59,127</td>
<td>53,802</td>
<td>5,325</td>
<td>91%</td>
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<tr>
<td>MDRML010</td>
<td>Mali - Ebola Preparedness</td>
<td>18-Apr-14 31-Aug-14</td>
<td>57,715</td>
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<td>N/A</td>
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<td>0</td>
<td>57,715</td>
<td>50,132</td>
<td>7,583</td>
<td>87%</td>
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<tr>
<td>MDRSN009</td>
<td>Senegal - Ebola Virus Disease</td>
<td>11-Apr-14 24-Aug-14</td>
<td>54,848</td>
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<td>0</td>
<td>54,848</td>
<td>53,627</td>
<td>1,221</td>
<td>98%</td>
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<tr>
<td>MDRTD013</td>
<td>Chad - Ebola Virus Disease Preparedn</td>
<td>12-Sep-14 12-Dec-14</td>
<td>54,766</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>0</td>
<td>54,766</td>
<td>25,764</td>
<td>29,002</td>
<td>47%</td>
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<tr>
<td>MDRTG005</td>
<td>Togo - Ebola Virus Disease</td>
<td>27-Aug-14 27-Nov-14</td>
<td>54,930</td>
<td>0</td>
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<td>0</td>
<td>0</td>
<td>54,930</td>
<td>29,752</td>
<td>19,778</td>
<td>9,388</td>
<td>60%</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL DREF OPERATIONS | 984,823 0 | N/A | 0 | 983,792 | 497,034 | 486,758 | 36,157 | 50% |

www.ifrc.org
Saving lives, changing minds.
West Africa Ebola Outbreak
Total Cases: Guinea (30 Nov), Liberia (28 Nov), Sierra Leone (1 Dec)

Country | Cases | Deaths | TOTAL
--- | --- | --- | ---
Guinea | 2,134 | 1,260 | 3,394
Liberia | 7,168 | 3,016 | 10,184
Sierra Leone | 6,599 | 1,398 | 7,997
Mali | 8 | 6 | 14

Total cases and deaths sourced from WHO Situation Report 26

Map distribution date: 4 December 2014

New cases and deaths include “Probable/Suspected” and “Confirmed”.

Sources: GADM, Natural Earth, STEWARD Project, Africa Albers Equal Area Conic Projection, WGS 1984; Guinea - Organisation mondiale de la Santé; Liberia - Ministry of Health and Social Welfare; Sierra Leone - Ministry of Health and Sanitation

Information is subject to revision as more data becomes available.

All changes in new cases need to be carefully assessed against the context on the ground. Large changes in the number of new cases can occur for a number of reasons apart from increased or diminished caseload.

GLIDE #: EP-2014-000039-GIN/LBR/SLE