

Emergency Appeal Operation Update

Ebola Virus Disease Emergency Appeals (Liberia, Sierra Leone, Guinea, Nigeria, Senegal and Africa Coordination)

23 January, 2015- Combined Ebola Operations Update N° 14¹

Summary

IFRC's Ebola strategic framework is organized around 5 outcomes:

- The epidemic is stopped
- National Societies have better Ebola preparedness and stronger long term capacities
- IFRC operations are well coordinated
- Safe and Dignified Burials (SDB) are effectively carried out by all actors
- Recovery of community life and livelihoods

Five emergency appeals were launched to combat Ebola Virus Disease (EVD) outbreaks in Guinea, Liberia, Sierra Leone, Nigeria and Senegal. In helping stop the epidemic, the appeals employ a 5 pillar approach 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.

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 in Africa that have launched emergency operations relating to this outbreak.²

An additional coordination appeal was launched to accommodate multi-country support needs. The Ebola coordination and preparedness appeal was [recently revised](#) to reflect both the scaling-up of country level Ebola response operations and the need to complement operations with expanded global coordination and preparedness activities. The appeal will enable increased engagement in international coordination mechanisms and preparedness activities to counteract global risks of the spread of Ebola.

Statistics show that Ebola incidence is slowing down. Despite encouraging developments, the end of the epidemic will not happen on its own. Vigilance will be required in case management, surveillance and contact tracing to get to zero cases and stay there during the 42 day Ebola surveillance period before countries can be declared Ebola-free. Until then, any one mismanaged case can cause a resurgence.



Five children are hosted in an isolation unit at the Kenema treatment centre known as the kindergarten. During the 21 day quarantine period, staff at the treatment centre teach them new songs to entertain them./IFRC

¹ A single combined operations update is produced for the 5 Ebola operations 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.

To date, response resources are being focused on the priority to stop the epidemic. However, recovery planning is now underway as there is an urgent need to support those who have survived Ebola and those communities and households affected by damage and loss to livelihoods, social assets and community health care. A Federation-wide recovery assessment will be initiated in February 2015. The assessment will be conducted in Guinea, Liberia and Sierra Leone (two weeks in each country) and will look into the situation of affected people and give alternative options to respond to their needs. Findings from the assessment will contribute to a detailed recovery plan. Recovery programming will aim to restore households back to where they were before the outbreak as well as making them more resilient to future risks and epidemics.

A real time evaluation (RTE) of the IFRC response in the three main affected countries was carried out from December 2014-January 2015, with the technical assistance of John Hopkins University. Its real time nature has provided immediate learning (e.g. regarding volunteer management and PSS) to permit course corrections early in the operational timeframe. A final report will be available end January, 2015. IFRC evaluations are shared on the [public website](#).

In **Liberia** the weekly number of confirmed Ebola cases continues to fall. According to WHO, new Ebola cases halve every 2 weeks. As a result of this very promising trend, the country aims to be Ebola free by end of February. Montserrado, Grand Cape Mount and Margibi counties remain the hotspot areas of the disease in Liberia. Between 11 and 18 January 2015, 89 new suspected and probable cases were reported in Montserrado and 12 each in Grand Cape Mount and Margibi counties. As the number of new Ebola continues to go down, IFRC and Liberia National Red Cross Society (LNRCS) are discussing ways of strengthening activities at the local LNRCS chapters and establishing the LNRCS response capacity in terms of WatSan and Health.

Likewise in **Sierra Leone**, the number of weekly confirmed cases is decreasing. However, it remains the worst affected country by the epidemic so far. Transmission remains intense in the west of the country, particularly in the capital, Freetown, Port Loko and Western Area Rural. Pujehun district has been declared Ebola-free, the first to be given an all-clear after 42 days with zero recorded cases of the virus. Cumulatively, **10,273** (suspected, probable and confirmed) cases and **3,108** deaths have been recorded in Sierra Leone.

In **Guinea**, during this reporting period, the Ministry of Health and the World Health Organization data have indicated that the number of new cases is decreasing and that the geographic spread is contracting- there are now 13 active prefectures, down from 17 prior to this reporting period. According to the Ministry of Health and the World Health Organization, as of 16 January 2015, Guinea had a total of 2,868 cases (suspected, probable, and confirmed), and 1,871 deaths, for a fatality rate of 65%. The Red Cross Society of Guinea has completed 2,232 burials.

In **Mali**, the health minister has declared the end of Ebola in Mali after the lapse of two incubation periods (42 days) since the last confirmed case recovered in Bamako on 6 December.

Operation Updates

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

	Operational Countries and Appeals					
	GUINEA	LIBERIA	SIERRA LEONE	NIGERIA	SENEGAL	TOTAL
	(MDRGN007)	(MDRLR001)	(MDRSL005)	(MDRNG017)	(MDRSN010)	
Cumulative Cases	2,868	8,484	10,273	21	1	21,647
Cumulative Health Care Worker Deaths	100	178	222	5	0	505
Cumulative Deaths	1,871	3,613	3,108	8	0	8,600
Fatality rate	65%	43%	30%	38%	0%	40%
Safe and Dignified Burials(SDB) conducted by NS	2,232	3,126	5,808	0	0	11,166
Trained RC volunteers currently active in Ebola	2,497	1,253	2,269	184	510	6,713
Contacts traced by NS	9,944	7,785	33,363	891	75	52,058
Houses disinfected by NS	18,232	2,291	4,771	14	0	25,308
People reached through face to face social mobilization	1,120,235	1,333,409	1,186,856	1,043,565	235,000	4,919,065
People reached through Psychosocial support	2,706	1,800	27,535	777		32,818
People treated by NS (Kenema)	N/A	N/A	629	N/A	N/A	629

NA= Not applicable - Treatment currently supported by appeals only in Sierra Leone

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

Liberia

Social Mobilization and Beneficiary Communication

A total of 90,230 people were reached through social mobilization in six counties during the reporting period.

Seven villages in Grand Cape Mount (GCM) county were considered as hotspots in the beginning of January 2015; a total of 6 positive cases were confirmed out of 11 suspected cases. Nine households were quarantined following that. A surge support of emergency health as well as PSS delegate was provided to the Chapter; two cars were also provided to ensure Chapter staff mobility to the hotspot villages. Close monitoring support from IFRC Emergency Health Delegate was provided continuously. Following up the quarantine status, GCM chapter dispatched three days food supply for the nine families immediately, in close coordination with the County Health Office.

Along with food distribution, new volunteers were identified in the nine villages. Training for new community volunteers was also carried out. The topics covered included Ebola awareness, community mobilization, contact tracing as well as PSS. After the training, volunteers carried out regular visits to the quarantined families including monitoring body temperatures. Social mobilization activities were also conducted for the surrounding households.

Red Cross engagement with community leaders in the hotspots continues involving the Chief, the Imam, Women's Council Chairlady, and Youth Leader during all activities.

Contact tracing and surveillance

During the reporting period, a total of 12 contact tracing trainings were conducted in six Chapters.

On Saturday January 3, the Ministry of Health conducted one day workshop to finalize National SOP for contact tracing. The final document is expected to be distributed to partners by the end of the month.

Challenges

The flow of communication between case investigator and contact tracers has hindered the effectiveness of work mainly in Montserrat County.

Safe and Dignified Burials and Disinfection of Houses

- There are still 15 SDB teams with about 150 personnel including office staff. These will be scaled down at the end of January to 10 teams.
- There is a plan to transition operations to the Government county health team by the end of February but discussion is still ongoing at the level of National Society and government.
- Three-day refresher training was conducted for SDB staff from 4 - 7 January 2015.
- Total bodies collected during the reporting period – 125 (of these, 109 were from communities and hospitals and 16 from ETUS), total homes disinfected were 85, total swabs taken – 71. Cumulative total of bodies collected and safely buried/cremated (23 July 2014 - 19 January 2015).

Sierra Leone

Social Mobilization and Beneficiary Communication

Community engagement and social mobilization promotes the adoption of strategies to prevent EVD infection, helps communities to gain a better understanding of EVD and dispels misconceptions about the disease.

The Red Cross is an active member in the established social mobilization taskforces in all the 14 districts across the country tasked in promoting safe and culturally acceptable burial practices, and engage communities about the need to isolate and appropriately treat those with clinical symptoms of EVD. With the support of the SLRC health team in HQ, the list of exiting community group has been updated and further trainings are planned from 25 January 2015. More than 2,000 people have been identified as mother and peer educator youth clubs members, and each of them will receive hygiene items to support their involvement in community social mobilisation.

Construction of Community Red Cross information kiosks has started in Bombali. This will be followed by constructions in Port Loko, Western Area and Tonkolili. In total, the Red Cross will construct 140 information kiosks and hand washing stations in all the 14 districts.

In Kono, 30 social mobilisation volunteers were trained in the reporting period and are now actively engaged in raising awareness in the community especially in most remote areas that are difficult to access. Red Cross social mobilization activities were fed into district social mobilization work plan activities that will be running until April 2015.

As part of mass media, the weekly Red Cross TV show and radio programmes were aired. These programmes have a nationwide reach.

Challenges:

- Inaccessibility of some areas remain a challenge, more vehicles are needed to support volunteers to reach these areas
- Discrimination and stigmatisation against survivors is still widely reported

Planning

- ToT integrated training for social mobilisation and beneficiary communication officers targeting 70 participants. The training will be held in Freetown from 22 January 2015.
- Training at community level for community groups and leaders
- Child friendly activities/education on Ebola prevention nation wide

Contact tracing

As the epidemic declines, the goal of quality enhanced contact tracing is to ensure improvements in timeliness and quality of contact tracing efforts; strengthening of the links between contact tracing and surveillance teams and to immediately evacuate all ill contacts to health care facilities.

The Red Cross had 389 active volunteers in contact tracing in the reporting period. To date, RC has registered and followed up approximately 33,363 contacts across the country.

The RC is also complementing the Ministry of Health at district level and other partners in rolling out the community event based surveillance project which has the following objectives;

1. Establish a system for identifying emerging clusters of EVD transmission at the earliest possible stage.
2. To feedback information both to District level, District Ebola Response Command Centres (DERC) and local communities to adapt and intensify real-time EVD responses
3. To identify and stop all chains of EVD transmission in the community and to empower communities to take action to stop chains of transmission.
4. To improve health outcomes by increasing the timeliness in which EVD suspected cases are identified and receive care

Challenges

- Poor transport and communication network in some districts makes it difficult for effective surveillance and contact efforts.
- Movement of EVD-suspected people across different administration boundaries hampers effective surveillance.

Planning

- The training for the 40 surveillance and contact tracing in Kono is planned for next reporting period.

Psychosocial Support

The RC with other implementing partners have put forward strategies to implement joint psycho-social support for SDB team members. IFRC is already conducting a confidential survey in this respect assessing volunteers and staff on their feeling and the perception of community members towards them and their families. A PSS consultant from the Norwegian Red Cross is expected in the country in the coming weeks to support the process and develop PSS strategy for the RC.

Safe and Dignified Burials and Disinfections:

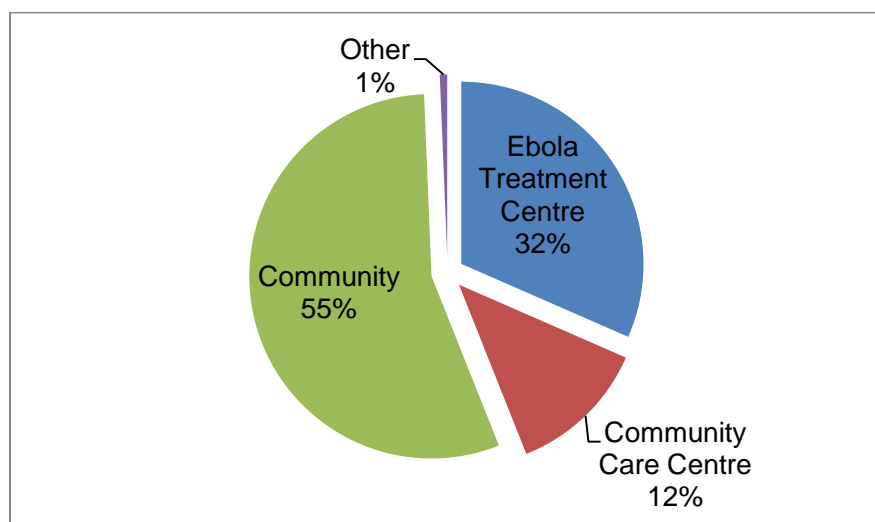
The Red Cross has a total of 54 burial active nationwide (see district breakdown in table 1.1 below). This consists of approximately 45% of all the teams across the country. A total of 509 safe burials were conducted in the reporting period averaging 73 burials a day. So far, approximately 100% of the burials have been conducted within the recommended 24 hours after receiving the alert.

The mobile data collection system used by the Red Cross has been rolled out to Concern, the other main burial partner in the Western Area and will be rolled out to the SMART consortium (World Vision, CRS and CAFOD) as soon as possible. This enables GPS plotting of bodies and collects key data on time for responses and circumstances of death. It is also expected that this system will enable death certificates to be issued efficiently.

Table 1.1

District	Burial Teams	This Week	Cumulative
Bo	4	91	804
Bombali	4	34	549
Bonthe	3	14	111
Kailahun	3	49	755
Kambia	2	0	40
kenema	3	21	420
Koinadugu	2	12	56
Kono	5	12	90
Moyamba	2	23	59
Port Loko	5	34	502
Pujehun	2	20	96
Tonkolili	4	17	108
Western Rural	6	77	676
Western Urban	9	105	1,542
TOTAL	54	509	5,808

As shown in figure 1.1 below, 55% of the bodies buried this reporting period were picked up from the community, 32% from ETCs, 12% from CCCs while 1% were picked from other places.

Figure 1.1**Challenges**

- Swab teams are not fully integrated into burial teams thus creating a negative impact on burial data and decontamination process
- Swabbing teams strike action last week resulted in twenty eight bodies left unattended, due to failure of NERC to pay the salary backlog again.

Planning

- In liaison with the branch administration, there is need for continuous monitoring of SDB activities to ensure compliance with quality standards and IPC through refresher trainings.

Case Management in Kenema and Kono, IFRC ETC

	Cumulative Kenema	Cumulative Kono
Admissions	585	44
Deaths	247	16
Discharges	284	11
Transfers	49	6

Highlights

Four new Ebola treatment centres (including the Kono ETC) have opened in the last week, increasing Sierra Leone's capacity to over 1,200 treatment beds and 437 community care centre beds, which is more than six times the number of current cases. Despite this, the WHO estimates that around 500 more treatment beds and over 750 additional community centre beds are needed.

The second IFRC Ebola treatment centre, located in Kono District was officially opened on 10th January 2015, and has admitted 44 patients in total so far. The new treatment centre can accommodate 40 patients and is being operated by approximately 150 national and international staff. The ETC can be scaled up

immediately in the event of another sudden spike in Ebola cases, with adequate prepositioned supplies to set up an additional ward if needed.

IFRC treatment centre, Kono

In Kono, training of 22 new nurses is ongoing to address the shortfall in staffing. The “kindergarten” facility for children is scheduled to open in the next few days which will be staffed with 8 local Ebola trained survivors, the team will be scaled up to 12 to effectively manage the kindergarten. Currently, children are being held in a rented house in Koidu town and will be transferred to the kindergarten as soon as it is opened.

Guinea

Social mobilization and beneficiary communication.

- The Beneficiary Communications Delegate held a training of trainers in Conakry, and Ben Comms trainings are ongoing in Kissidougou.
- Radio shows are being broadcast 6 times a week on Radio-Television Guinea, the national radio and television channel. Twice-weekly shows are being aired on regional radio stations in Kissidougou, Guéckédou, Macenta, and Telimele.
- Preparations are ongoing for the upcoming KAP survey.
- 1,120,235 people have been reached by social mobilization efforts.

SDB and disinfections

- Total Safe and Dignified Burials in this response: 2,232.
- 18,232 houses have been disinfected since the beginning of the epidemic.
- Disinfection and spraying appears to be largely misunderstood in some communities; messaging is being developed to explain and mitigate any potential resistance.

Contact Tracing and Surveillance:

- 164 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.

Case management

- It should be noted that case management is being done bilaterally in Guinea. The French red Cross has a treatment centre in Macenta which has so far admitted 159 patients, confirmed 83 Ebola cases and discharged 22.

Nigeria

On 20 October, WHO declared Nigeria Ebola-free. Lack of new funding has limited activities during the reporting period to the 48 volunteers working at the airport screening passengers. As reported previously, additional funding for volunteer allowances could be provided to enable the National Society to continue to play its role in preventing the outbreak from reoccurring in populous Nigeria.

Challenges:

- Lack of EVD preparedness activities in the country
- Lack of EVD IEC materials in the country
- Lack of allowances for the volunteers to continue EVD preparedness activities
- Lack of funds to conduct monitoring and supervision by the IFRC and NRCS

Way forward:

- As long as EVD is still in the region and Nigeria being a key country in West Africa it is at risk. IFRC is considering extension of the appeal to focus on EVD preparedness interventions
- Allocation of funds to Nigeria would enable the National Society to continue with preparedness activities.

Senegal

On 17 October, WHO officially declared Senegal free of Ebola. 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](#) 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. In total, more than 500 volunteers have been active in Ebola response. During the religious Maouloud feast, The Senegalese Red Cross Society has mobilized 510 Red Cross volunteers who reached 235,000 beneficiaries through public awareness activities including 2 caravans, 286 group discussions, 34 hand washing demonstrations, 3 movies. Furthermore, the Red Cross volunteers have distributed 50,000 flyers and 300 leaflets on Ebola.

Logistics and supply chain

The main activities in the Ebola treatment centre (ETC), safe and dignified burial (SDB) and case tracing require constant supply of Personal Protection Equipment and disinfection material. A robust supply chain is in place to deliver all protective equipment supplies and to effectively support the operation. IFRC Global Logistics Service (GLS) through international procurement has secured constant supplies for the hospital and for the SDB teams. All provided equipment meets the EU standards, specifically the overall cover complies with high level of protection against biological hazard and resistance to penetration by infective agents due to mechanical contact with contaminated liquids. To date, 84,898 body bags and more 2500 SDB kits and over 110'000 protective equipment "kits" for the hospital have been ordered and are being delivered. Protective equipment supply chain for Kono and Kenema is secured till May.

In each country, teams of Logistics experts support the operation and the National Society by providing technical support and advice, by implementing IFRC logistics procedures and contributing to enhancement of the logistics structure, systems and capacities including warehouse management, fleet management and local procurement. In addition to the first ERU Logistics deployed in Sierra Leone last year (joint deployment British RC7 Swiss RC and Finish RC) who is phasing out and being replaced by long term logisticians, a new Logistics ERU (joint deployment Finish and Danish RC) was deployed in December to support the set-up of Kono hospital. To date we have 11 Logistics delegates in Sierra Leone (including ERU), 5 Logistics delegates in Liberia and 7 Logistics delegates in Guinea.

Nairobi ZLU is supporting the operations and Dubai is coordinating Mobilisation of In-Kind donations. 3 Mobilisation tables are regularly updated and available on DMIS. A regional Logistics coordinator was hired and is in place. He is currently visiting the 3 countries to finalise logistics plan of action for emergency phase and recovery phase. A Swiss RC staff on-loan reinforced GLS GVA team to support consignments consolidations, ensure coordination with Global Logistics cluster and to participate to the Ebola cell.

The EVD operation, in contrast to other natural disaster operations, is more unpredictable in its nature in terms of vehicle requirements and planning. The EVD has unpredictable trending pattern and consequently, the operations in Sierra Leone, Guinea and Liberia, in their given and challenging task of Safe and Dignified Burials could not initially accurately predict their vehicle needs as their response was based on the rising death tolls. Each country has individual and different needs dependant on organisational structure, funding and donor response. In August and early September 2014 since the initiation of operations, the effect of the EVD has grown, largely affecting communities and health

infrastructures. The demand for vehicles escalated in late September and early October culminating at the start of November. To date, the GLS Fleet Unit has received the following firm orders:

- Sierra Leone -144 VRP Rental Vehicles and 30 Purchased for Donation
- Guinea-125 VRP Rental Vehicles and 35 Purchased for Donation and 154 motorbikes.
- Liberia -37 VRP Rental Vehicles and 10 Purchased for Donation

The vehicles have been deployed by air, sea and overland predominantly using the Vehicle Rental Program (VRP) fleet via the Global Fleet hub in the UAE and Regional Fleet hub in Dakar. The Global Fleet Unit responded with a 'surge' response sending Fleet Officers from Zimbabwe and Kenya to Liberia, Senior Fleet Officers from UAE to Senegal and the Global Fleet Coordinator to Sierra Leone.

Human resources

The size and scope of the Ebola response and its expanding nature have demanded a large-scale, flexible and timely human resource response, drawing on coordinated action of partners and established surge support tools of the IFRC.

- Delegates deployed 107 (72 currently deployed in-country in Guinea, Liberia, Sierra Leone and Ghana)
- Emergency Response Unit (ERU) deployments: 55 ERU team members
- Ebola Treatment Centre (ETC) deployments: 196
- Field Assessment and Coordination Team (FACT): 24 team members.
- Head of Emergency Operations (HEOPs): 3
- Regional Disaster Response Team (RDRT): 12 RDRT members

Funding

	GUINEA	LIBERIA	SIERRA LEONE	NIGERIA	SENEGAL	AFRICA coordination and preparedness	Total
	(MDRGN007)	(MDRLR001)	(MDRSL005)	(MDRNG017)	(MDRSN010)	(MDR60002)	
TOTAL AMOUNT SOUGHT:	28,509,039	24,464,985	40,396,719	1,619,444	1,380,962	15,882,441	112,253,590
TOTAL RECEIVED TO DATE:	14,314,587	17,646,332	46,781,365	631,304	185,226	4,157,298	83,716,112
APPEAL COVERAGE TO DATE:	50%	72%	116%	39%	13%	26%	75%

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.

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Saving lives, changing minds.



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.

Donor response

Ebola Emergency Appeals Consolidation

TIMEFRAME: 2014-2015

Refreshed on 22-Jan-2015 at 08:26

TOTAL AMOUNT SOUGHT:	112,253,590
TOTAL RECEIVED TO DATE:	83,716,112
APPEAL COVERAGE TO DATE	75%

	Cash contributions CHF	Inkind Goods & Transport CHF	Other Income CHF	Total CHF
BUDGET				112,253,590
FUNDING				
Opening Balance				
Income				
American Red Cross	3,273,683			3,273,683
Australian Government	50,441			50,441
Australian Red Cross	222,864			242,779
Austrian Red Cross (from Austrian Government)	1,165,159			1,165,159
Belgian Federal Government	2,407,190			2,407,190
Bill & Melinda Gates Foundation	2,872,958			2,872,958
British Red Cross	832,654	300		878,799
British Red Cross (from British Government Foundation)	20,180,570			20,234,945
China Red Cross, Hong Kong branch	75,745			75,745
Czech Government	130,033			130,033
Danish Red Cross	50,000			212,533
Danish Red Cross (from Danish Government)	77,557			77,557
European Commission - DG ECHO	5,413,388			5,413,388
FIATA-Intl Fed Freight Forwarders Assoc.	29,541			29,541
Finnish Red Cross	143,888	162,531		354,365
Finnish Red Cross (from Finnish Government)	700,313			700,313
French Red Cross	14,835			27,286
French Red Cross (from Total)	400,368			400,368
German Red Cross	21,726	335,091		356,817
Icelandic Red Cross	874,155			874,155
Icelandic Red Cross (from Icelandic Government)	195,600			195,600
Irish Red Cross Society	36,101			41,136
Israel - Private Donors	9,653			9,653
Italian Government Bilateral Emergency Fund (from Italian Government)	1,203,910			1,203,910
Japanese Government	3,269,491			3,269,491
Japanese Red Cross Society	450,183			450,183
KPMG International Cooperative(KPMG-I)	99,393		-4,970	94,424
Luxembourg - Private Donors	2,824			2,824
Monaco Government	24,030			24,030
Nestle	42,000		-2,100	39,900
Norwegian Red Cross	93,972			93,972
On Line donations	88,607			88,607
Portuguese Red Cross	1,804			1,804
Qatar Red Crescent Society	9,501			9,501
Red Crescent Society of Islamic Republic of Iran	35,000			35,000
Red Cross of Monaco	118,325			118,325
Shell	61,599		-3,080	58,519
Sime Darby Berhad	142,332		-7,117	135,215
Spanish Government	6,966,381			6,966,381
Spanish Red Cross	294,963	4,050		299,013
Sundry Income			3	3
Swedish Red Cross	2,632,895			2,632,895
Swiss Government	2,500,000			2,500,000
Swiss Red Cross	308,312	127,872		468,989
Swiss Red Cross (from Swiss Government)	1,000,000			1,000,000
Switzerland - Private Donors	572			572
Taiwan Red Cross Organisation	26,415			26,415
The Canadian Red Cross Society Government)	88,110			117,140
The Netherlands Red Cross	4,129,839			4,129,839
The Netherlands Red Cross (from Netherlands Government)	1,034,663	182,260		1,216,923
The Netherlands Red Cross (from Netherlands Red Cross Silent Emergency Fund)	3,860,836			3,860,836
The Republic of Korea National Red Cross	100,715			100,715
Tulow Guinea Limited	60,000			60,000
UNICEF - United Nations Children's Fund	181,376		-9,069	172,307
United States Government - USAID	49,086			49,086
World Cocoa Foundation	10,146,442			10,168,909
	247,558			247,558
Total Income	82,474,686	812,104	-26,332	83,716,112
TOTAL FUNDING				83,716,112
COVERAGE				75%

ADDITIONAL CONTRIBUTIONS TO THE OPERATION (based on information Logistics received from partners)

	Total CHF
Bilateral Contributions	
British Red Cross	3,123
Danish Red Cross	105,109
Finnish Red Cross	126,311
French Red Cross	20,000
Norwegian Red Cross	335
Spanish Red Cross	563,590
Swiss Red Cross	39,500
The Canadian Red Cross Society	2,939,020
Total Bilateral Contributions	3,796,988

AFRICA EBOLA 2014

Refreshed on 22-Jan-2015 at 13:40

At a glance

EMERGENCY APPEALS

Appeal Code	Appeal Name	Appeal Timeframe		Budget	Funding	Coverage	Gap	Income	DREF	Expenditure	Balance	Commitments	Exp/Bud
MDR60002	Africa - Ebola Coordination and prep	19-Aug-14	31-Dec-15	15,882,441	4,157,298	26%	11,725,143	4,157,298		1,635,145	2,522,154	940,975	10%
MDRGN007	Guinea - Ebola Virus Disease	26-Mar-14	30-Jun-15	28,509,039	14,314,587	50%	14,194,452	14,317,361	0	5,178,912	9,138,449	2,007,638	18%
MDRLR001	Liberia - EVD Outbreak	09-Apr-14	30-Jun-15	24,464,985	17,646,332	72%	6,818,653	17,505,496	0	5,158,586	12,346,911	683,499	21%
MDRNG017	Nigeria - Ebola Virus Disease	08-Aug-14	31-May-15	1,619,444	631,304	39%	988,140	631,304	0	500,611	130,693	45,093	31%
MDRSL005	Sierra Leone - Ebola Virus Disease	06-Apr-14	15-Jun-15	40,396,719	46,781,365	116%	-6,384,646	46,466,584	0	14,752,128	31,714,456	7,772,981	37%
MDRSN010	Senegal - Ebola Virus Disease	08-Sep-14	28-Feb-15	1,380,962	185,226	13%	1,195,736	185,226	253515	350,686	88,054	700	25%
TOTAL EMERGENCY APPEALS				112,253,590	83,716,112	75%	28,537,478	83,263,270	253,515	27,576,068	55,940,717	11,450,886	25%

DREF OPERATIONS

Appeal Code	Appeal Name	Appeal Timeframe		Budget	Funding	Coverage	Gap	Income	DREF	Expenditure	Balance	Commitments	Exp/Bud
MDR42002	Americas - Ebola Preparedness	21-Oct-14	21-Jan-15	100,000	0	N/A	0	0	100000	70,985	29,015		71%
MDRBJ014	Benin - Ebola Virus Disease	27-Aug-14	27-Nov-14	50,204	0	N/A	0	0	50204	35,534	14,670		71%
MDRCF018	Central African Rep - Ebola Virus Di	29-Aug-14	29-Dec-14	48,697	0	N/A	0	0	48697	34,063	14,634		70%
MDRCI006	Côte d'Ivoire - Ebola Preparedness	18-Apr-14	18-Jul-14	60,950	0	N/A	0	0	59919.04	59,919	0		98%
MDRCM019	Cameroon - Ebola Virus Disease	24-Aug-14	25-Jan-15	49,922	0	N/A	0	0	49922	23,840	26,082		48%
MDRET014	Ethiopia - Ebola Virus Preparedness	29-Oct-14	29-Jan-15	46,641	0	N/A	0	0	46641	21,294	25,347		46%
MDRGM009	Gambia - Ebola Virus Disease Prepare	15-Sep-14	30-Jan-15	46,856	0	N/A	0	0	46856	36,805	10,051		79%
MDRGW002	Guinea Bissau - Ebola Virus Prepared	08-Oct-14	08-Jan-15	49,168	0	N/A	0	0	49168	33,602	15,566		68%
MDRKE031	Kenya - Ebola Virus Disease Prepared	23-Sep-14	23-Dec-14	59,127	0	N/A	0	0	59127	53,802	5,325		91%
MDRML010	Mali - Ebola Preparedness	18-Apr-14	31-Aug-14	57,715	0	N/A	0	0	50131.66	50,132	0		87%
MDRSN009	Senegal - Ebola Virus Disease	11-Apr-14	24-Aug-14	54,848	0	N/A	0	0	53627.34	53,627	0		98%
MDRTD013	Chad - Ebola Virus Disease Preparedn	12-Sep-14	12-Dec-14	54,766	0	N/A	0	0	54766	25,698	29,068		47%
MDRTG005	Togo - Ebola Virus Disease	27-Aug-14	27-Nov-14	49,530	0	N/A	0	0	49530	39,268	10,262		79%
TOTAL DREF OPERATIONS				728,424	0	0	0	0	718,589	538,568	180,021		74%

West Africa Ebola Outbreak

Cumulative Cases

19 January 2015



No cases in previous 21 days

Country	Cases	Deaths	TOTAL
Guinea	2,871	1,876	Cases 21,689
Liberia	8,478	3,605	Deaths 8,626
Sierra Leone	10,340	3,145	

Country-level and total cases/deaths sourced from WHO SitRep Jan 18

Map distribution date: 14 January 2015

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 Sante; Liberia - Ministry of Health and Social Welfare; Sierra Leone - Ministry of Health and Sanitation

Information is subject to revision as more data becomes available.

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