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DREF Final Report

Cote d'Ivoire: Ebola virus disease preparedness

 International Federation
of Red Cross and Red Crescent Societies

DREF operation	Operation n°: MDRCI006
Date of Issue: 19 April 2014	Glide number: EP-2014-000039-CIV
Date of disaster: 23 March 2014	Date of Final Report: 29 October 2014
Operation start date: 19 April 2014	Operation end date: 18 July 2014
Host National Society: Cote d'Ivoire Red Cross	Operation budget: CHF 60,950
Number of people affected: Communities at risk in Bloléquin, Danané, Odienné, Ouaninou, Sipilou, Tabou, Tai, Toulepleu and Zouan-Hounien	Number of people assisted: 174,593 individuals (127,069 households)
Host National Society presence (n° of volunteers, staff, branches): 200 volunteers	
N° of other partner organizations involved in the operation: IFRC, ICRC, and French Red Cross and Ministry of Health	

A. Situation analysis

Description of the disaster

Cote d'Ivoire with a population of approximately 22 million shares borders with many countries including Guinea and Liberia, which have been especially affected by the Ebola Virus Disease (EVD) outbreak. In February 2014, there was an outbreak of the virus in Guinea, which has since spread to Liberia, Nigeria, Senegal and Sierra Leone and causing untold hardship; and hundreds of deaths in these countries. In the Democratic Republic of Congo (DRC), an outbreak of the EVD has also been reported, but is considered of a different origin than that which has affected West Africa. As of 22 October 2014, a total of 9,895 cases, and 4,871 deaths had been recorded, which were attributed to the EVD. A suspected case of EVD was reported in a Liberian village, which borders Cote d'Ivoire, thus triggering the Red Cross of Cote d'Ivoire (RCCI) to initiate a preparedness operation, which was supported by this DREF.

Due to the very high risk of EVD spreading to the Ivorian territory, the Ministry of Health (MoH) adopted a policy on prevention and is asking the general population particularly in border villages to remain extremely vigilant and report to the emergency services any evocative signs of EVD such as fever, vomiting, headache and bleeding. In addition to the enormous and tragic loss of human life in West Africa, the EVD epidemic is having devastating effects on economies in a variety of essential sectors by halting trade, hurting agriculture and scaring investors of both affected and neighbouring countries. To halt the spread of the virus, the countries most affected by EVD have implemented quarantines in areas where risk of infection is high while neighbouring countries such as Cote d'Ivoire have imposed restrictions on the movement of people and goods, including border closures. These measures, in turn, have reduced internal and regional trade, transport and tourism.

The pressure remains on Cote d'Ivoire to scale-up preparedness activities, particularly in the border villages following the deteriorating situation in EVD affected neighbouring countries, specifically Guinea and Liberia. Although the RCCI has concluded activities planned under this DREF operation ([MDRCI006](#)), more still needs to be done to contain the disease, including strengthening the capacity of volunteers and coordination

networks through training on social mobilisation and logistics, as well as the repositioning of personal protective equipment (PPE). In this regard, the IFRC West Coast regional representation supported the RCCI develop a plan of action that may culminate into an emergency operation. Key recommendations as a result of this operation included:

MoH

- To revitalize local committees and strengthen capacity to fight against EVD epidemics (in case it spreads into Cote d'Ivoire).
- To strengthen the capacity and mobility of health workers in the field.
- To ensure regular monitoring (weekly) of health centres along the Ivorian-Liberian and Ivorian-Guinea borders.

RCCI

- To revitalize and strengthen health coordination of the various local committees.
- Develop and disseminate the RCCI contingency plan on epidemics

IFRC

- Extend the DREF in the case of continued spreading of EVD in neighbouring countries,
- To support evaluation of the first awareness campaign;
- To increase training on the use of PPE, contact tracing and dead body management,
- To support the RCCI in developing a plan of action on epidemic preparedness.

Netherlands Red Cross and Spanish Red Cross replenished this DREF. A balance of CHF 1,031 will be returned to the DREF. The IFRC, on behalf of the Red Cross of Cote d'Ivoire would like to extend thanks to all partners for their generous contributions.

[<click here to go directly to the final financial report or here to view the contact details>](#)

Summary of response

Overview of Host National Society

The IFRC provided CHF 60,950 from the DREF to support the RCCI on EVD preparedness activities for three months. The overall objective was to ensure preventing the spread of EVD into Cote d'Ivoire regions near the borders with Guinea and Liberia (Bloléquin, Danané, Odienné, Ouaninou, Sipilou, Tabou, Tai, Toulepleu and Zouan-Hounien). The National Society's trained volunteers supported the operation by carrying out awareness campaigns to increase knowledge on the means of EVD transmission and methods of prevention. This DREF operation also aimed to strengthen the capacity of the National Society staff and volunteers to deliver preventative and referral messages to the communities at risk of EVD.

Overview of Red Cross Red Crescent Movement in country

The RCCI has the operational advantage of having the IFRC West Coast regional representation in Abidjan. It allows for quick access and delivery of IFRC technical support including learning and capacity building. A Regional Disaster Response Team (RDRT) member was also deployed to support the operation, whilst the RCCI received bilateral support from in-country partners including French, Finnish and Netherlands Red Cross; and the ICRC.

Overview of non-RCRC actors in country

The MoH set-up a National Committee for the response against the EVD (NCFE), which hosted meetings attended by the key structures namely, the National Institute of Public Health, the Institut Pasteur, Red Cross Red Crescent Movement, United Nations agencies such as UNICEF, UNOCI and WHO, as well departments of the Ministry of Interior. In this committee, the RCCI and IFRC were part of the commission of awareness and prevention.

Needs analysis and scenario planning

Due to the new arrival of the EVD in the region, the population of Cote d'Ivoire and other West African countries had limited knowledge, including the mode of transmission and behaviours to avoid contracting the disease. Due to its highly-infectious nature many people are fearful and it is important to reduce rumours and misconceptions related to risks through Information, Education & Communication (IEC) activities.

Although there is no confirmed case in Côte d'Ivoire, some suspected cases were presented and followed up by the MoH. The RCCI preparedness operation has somewhat contributed to having no cases in Cote d'Ivoire whilst vigilance in monitoring travellers is being practiced at boarder post. However, the same activities need to reach more people as the spread of EVD can overtake the preventative measures in place.

Risk Analysis

The RCCI through the DREF support has been committed to supporting the MoH through social mobilisation campaigns that help to prepare the population at risk to prevent outbreaks in Cote d'Ivoire. The National Society has also ensured reducing the risk of getting EVD for staff and volunteers by increasing knowledge and ensuring that PPE is properly positioned.

B. Operational strategy and plan

Overall Objective

The overall objective of the DREF operation was to prepare the RCCI through reinforcement of volunteers and material for a possible outbreak and also to undertake social mobilisation activities alongside the MoH.

Proposed strategy

The proposed strategy was in line with the IFRCs strategy for neighbouring countries of Guinea as well as the strategy of government of Côte d'Ivoire. The activities planned primarily included the following:

- Preparedness for response through volunteer training in communication around epidemics and behavioural change;
- Supporting the MoH in prevention activities, epidemiological surveillance and social mobilization;
- Pre-positioning personal protective equipment and related training; and
- Adaption and production of information, education and communication material linked with community social mobilisation activities.

Operational support services

Human resources (HR)

Through the DREF support, the RCCI trained and deployed 151 volunteers from nine local committees, supported by four trainers (2 RDRT from RCCI and 2 national disaster response team (NDRTs) members to the different departments of Bloléquin, Danané, Odienné, Ouaninou, Sipilou, Tabou, Tai, Toulepleu and Zouan-Hounien. The four trainers were coordinated by the RCCI health coordinator.

The IFRC West Coast regional representation deployed a RDRT to complement the available regional surge capacity on emergency preparedness. The RDRT support was mainly directed on the training of volunteers and social mobilisation activities.

Logistics and supply chain

The specialized PPE kits were procured by IFRC at Geneva level; however all other necessary items including IEC materials were procured locally with the support of the IFRC regional logistics. In terms of transportation, the RCCI used the two 4x4 available in its fleet. Please note that there was an overspend on the "Distribution & Monitoring" line of 3,603 CHF (against 1,500 CHF), which was offset by an underspend of on the "Transport & Vehicle Costs" line of 3,625 CHF, and was a result of the coding used at the onset of the

operation, and led to a variance. Furthermore, Logistics Services (procurement of PPE at Geneva level) was not budgeted for, which results in an unplanned expenditure of 2,500 CHF.

Communications

The RCCI used its internet website to share achievements of this operation. Visibility of the work of Red Cross volunteers was ensured during the operation through local media and visibility material.

Security

The IFRC West Coast regional representation office ensured that a security map was in place and also prepared a security brief for its staff members deployed to work with the National Society in close consultation with the ICRC, which has permanent presence in the country.

Planning, monitoring, evaluation, & reporting (PMER)

Continuous monitoring has been covered by the National Society's local branches, the national headquarters in close cooperation with the IFRC West Coast regional representation. During the same period, the RCCI employed a PMER officer who has been under the coaching of the IFRC regional PMER unit on generic monitoring and reporting practice.

Two field monitoring missions were carried out with the help of a RDRT to ensure that the national campaigns and guidelines have been met. These missions included the following activities;

- Exchanging information on the sub-regional situation and calling for extreme vigilance,
- Evaluation of the awareness campaigns, which showed that the messages were understood by the population and local authorities,
- Reporting of possible suspected cases, registered or not,
- Increasing participation of the local committee.
- Collecting feedback from the local branches, administrative and local health authorities,
- Strengthening the reporting system,
- Discussing about challenges and recommendations,
- Sharing strategies.

The monitoring missions have also highlighted the fact that:

- No EVD suspected cases have been registered so far according to local health data.
- Volunteers from RCCI local branches are devoted and mastered the technical awareness tools.
- The prevention messages against the EVD are well accepted by communities.
- The consumption of bush meat is still continuing in some areas including Fisher-dam (Ivorian-Liberian border, 20 km from Toulepleu).

C. DETAILED OPERATIONAL PLAN

Early warning & emergency response preparedness

Early Warning & emergency response preparedness	
Outcome: The immediate risks to the health of affected populations are reduced	
Output 1.1: The capacity of Cote d'Ivoire Red Cross to prepare for potential Ebola response is strengthened	
Achievements	
1.1.1	The RCCI trained 19 staff members and 151 volunteers from nine local committees (Bloléquin, Danané, Odienné, Ouaninou, Sipilou, Tabou, Tai, Toulepleu and Zouan-Hounien) supported by an IFRC deployed regional disaster response (RDRT) team member.
	This first training session was held at the RCCI's headquarters facilitated by the communication sub-committee of the National Committee for the Fight against epidemics (CNLE) of the MoH. The training helped to strengthen the capacity of staff in the prevention of EVD.

At the end of the training, participants were able to:

- ✓ Describe the signs of EVD,
- ✓ Describe the modes of contamination,
- ✓ Control measures for prevention.

Table 1: List of participants

Structure	Area	Participants	Number
IFRC	Abidjan	RDRT	02
ICRC	Abidjan	Coordinator	03
		Head of programme	01
		Regional Disaster Reduction Team	01
		Volunteers	02
Coordinator of zone	Man Guiglo	NDRT (National Disaster Reduction Team)	02
Local committees	Abidjan	Health coordinators	08
Total			19

The trainings focused on epidemiological aspects of the EVD and the means of prevention, which have allowed volunteers to be aware of:

- ✓ Actions to take in case of an epidemic outbreak (before, epidemiological alert, during and after the epidemic);
- ✓ Pathways of disease transmission and barriers (bush meat, F-chart, hand washing, disinfection)

In addition, this mission helped define the operational plan which improved planning and coordination of various awareness campaigns.

RCCI volunteers in the border regions with Guinea and Liberia (Bloléquin, Danané, Odienné, Ouaninou, Sipilou, Tabou, Tai, Toulepleu and Zouan-Hounien) (See table 2), were trained as follows:

Table 2: Schedule of field activities

<i>Date</i>	<i>Communities</i>	<i>Number of volunteers trained</i>
	Danané	15
May 31	Odienné	13
June 1st	Tabou	20
June 2 and 3	Ouaninou	24
June 3	Taï	09
June 4	Bloléquin	25
June 4	Sipilou	13
June 5	Toulepleu	23
June 5	Zouan-Hounien	09
TOTAL		136

1.1.2 90 PPE kits (low protection) and 10 PPE kits (high risk) were procured, and have been pre-positioned at the IFRC West Coast regional representation office, which is based in Abidjan.

Challenges

- The number of volunteers trained (170) equates to 85 per cent of the intended target (of 200). It was decided that volunteers once trained would be deployed to communities bordering areas with Liberia,

which were identified as especially at risk; and not as was originally planned in the main towns. As such there was not provision in the budget to cover all of the expenditures that this revision to the strategy entailed, e.g. per diem, transportation of volunteers etc. and therefore the number of volunteers trained had to be reduced. Despite these efforts to remain within the budget, there was an overspend of 2,911 CHF on the “Volunteers” line as a result of this revision to the strategy, but can be partially offset against an underspend of 1,522 CHF on the “Training & Workshops” line.

- Furthermore, RCCI staff training was not budgeted for sufficiently (250 CHF only was budgeted on the “Training” line), which resulted in unplanned expenditures. It was decided that in order to ensure that the operation reached all of the target areas within the agreed timeframe, more staff were required for the training of volunteers; and therefore a training was carried out, which included two RDRT, and three National Disaster Response Team (NDRT) members who would be deployed to the field. As such there was an overspend of 6,115 CHF on the “National Society Staff” line, which covered the costs of the participants of the training, e.g. per diem, accommodation and transportation.
- As noted, RCCI volunteers were not trained on the use of PPE kits. The training of volunteers was focus on awareness conducting about Ebola. Only the EVD trainers received training on the use of the PPE kits; as there was not budget available to carry out volunteer training, though this is planned through other sources of funding.

Lessons Learned

None reported.

Output 1.2: Increased public awareness about EVD (signs and symptoms, transmission risk factors, actions for suspected cases, its prevention and control measures)

Achievements

- 1.2.1 RCCI produced IEC materials comprising 1,000 flyers on EVD, which was distributed to the target communities Fifty (50) picture boxes were also produced to allow volunteers carry out awareness activities. Each local branch received picture boxes according to the numbers of volunteers engaged for the intervention: Bloléquin (4), Danané (6), Odiénné (5), Ouaninou (12), Sipilou (4), Tabou (4), Tai (2) Toulepleu (6), Zouanhouien (2) ; and also at national headquarters (5)
- 1.2.2 Community discussions were included in the EPoA in line with the IFRCs strategy for EVD preparedness in West Africa but were not carried out during the course of the operation.
- 1.2.3 Radio spots could not be made because of challenges accessing radios however market days were chosen instead for disseminating the messages.
- 1.2.4 The RCCI volunteers carried out awareness campaigns in 188 municipalities bordering Guinea and Liberia reaching an estimated 174,593 individuals (27,069 households): 91,724 children, 41,286 women and 41,583 men, which equates to 349 per cent of the intended target (50,000 individuals). Each volunteer carried out awareness campaigns for 30 days. The awareness campaigns focused on the epidemiological aspects of EVD and the means for preventing and containing the spread that has enabled communities to understand the risk of exposure and need to adopt good hygiene behaviour. The EVD preparedness campaigns communication tools were developed by the NCFE to ensure compliance with the messages broadcasted by the government.

Challenges

- As noted, radio spots could not be made because of challenges accessing radios; but other means of mass media were identified and used.

Lessons Learned

None reported.

Output 1.3: Community epidemiological surveillance is set up / enhanced

Achievements

- 1.3.1 Throughout the duration of the operation, the RCCI participated in weekly meetings organized by the

NCFE to consolidate the results of awareness and ensure harmonization of activities with those of the Ministry of Health. The following were observed during the week meetings:

Positive:

- Good collaboration between local committees, administrative and health authorities.
- The authorities are ready to support local branches in order to achieve common goals.
- The availability and commitment of the Red Cross volunteers was appreciated by local authorities.
- The presence and participation of the medical corps in some communities for training (Tai, Toulepleu Zouan-Hounien and Sipilou).

Negative:

- The prohibition of the consumption of bush meat is not respected everywhere on Ivorian territory.
- There is a high risk of loosening of administrative and / or health in monitoring and awareness if no supervision.

1.3.2 In each locality targeted by the DREF operation, the volunteers carried their activities including surveillance with the support of the Committees of Supervisors set up by the Health Districts offices. In addition, an epidemiological surveillance focal point was identified locally (188 focal points) to ensure continuity and sustainability of awareness campaigns. Two monitoring missions were carried out on the field with the help of a RDRT to ensure that national campaigns and guidelines were met.

1.3.3 As reported on against 1.3.1 and 1.3.2.

Challenges

- As noted, radio spots could not be made because of challenges accessing radios; but other means of mass media were identified and used.

Lessons Learned

None reported.

Contact information

For further information specifically related to this operation please contact:

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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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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

Disaster Response Financial Report

MDRCI006 - Côte d'Ivoire - Ebola Preparedness

Timeframe: 18 Apr 14 to 18 Jul 14

Appeal Launch Date: 18 Apr 14

Annual Report

Selected Parameters

Reporting Timeframe	2014/4-2015/9	Programme	MDRCI006
Budget Timeframe	2014/4-2015/7	Budget	BUDGET9
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget		60,950				60,950	
B. Opening Balance							
Income							
<u>Other Income</u>							
<i>DREF Allocations</i>		60,950				60,950	
C4. Other Income		60,950				60,950	
C. Total Income = SUM(C1..C4)		60,950				60,950	
D. Total Funding = B + C		60,950				60,950	

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance							
C. Income		60,950				60,950	
E. Expenditure		-59,919				-59,919	
F. Closing Balance = (B + C + E)		1,031				1,031	

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Budget Timeframe	2014/4-2015/7	Budget	BUDGET9
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			60,950			60,950		
Relief items, Construction, Supplies								
Water, Sanitation & Hygiene	480		2,405			2,405	-1,925	
Medical & First Aid	5,000		5,009			5,009	-9	
Teaching Materials	5,500		1,487			1,487	4,013	
Total Relief items, Construction, Sup	10,980		8,901			8,901	2,079	
Logistics, Transport & Storage								
Distribution & Monitoring	2,000		5,103			5,103	-3,103	
Transport & Vehicles Costs	8,500		2,750			2,750	5,750	
Logistics Services			2,500			2,500	-2,500	
Total Logistics, Transport & Storage	10,500		10,353			10,353	147	
Personnel								
International Staff	6,000		4,224			4,224	1,776	
National Society Staff			6,155			6,155	-6,155	
Volunteers	16,500		15,286			15,286	1,214	
Total Personnel	22,500		25,665			25,665	-3,165	
Workshops & Training								
Workshops & Training	3,850		1,365			1,365	2,485	
Total Workshops & Training	3,850		1,365			1,365	2,485	
General Expenditure								
Travel	1,500		4,802			4,802	-3,302	
Information & Public Relations	4,000		2,698			2,698	1,302	
Office Costs	1,000		362			362	638	
Communications	1,900		2,037			2,037	-137	
Financial Charges	1,000		81			81	919	
Total General Expenditure	9,400		9,979			9,979	-579	
Indirect Costs								
Programme & Services Support Recove	3,720		3,657			3,657	63	
Total Indirect Costs	3,720		3,657			3,657	63	
TOTAL EXPENDITURE (D)	60,950		59,919			59,919	1,031	
VARIANCE (C - D)			1,031			1,031		

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Budget Timeframe	2014/4-2015/7	Budget	BUDGET9
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

IV. Breakdown by subsector

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
BL2 - Grow RC/RC services for vulnerable people							
Disaster response	60,950		60,950	60,950	59,919	1,031	
Subtotal BL2	60,950		60,950	60,950	59,919	1,031	
GRAND TOTAL	60,950		60,950	60,950	59,919	1,031	