



**UN EBOLA RESPONSE MPTF
PROJECT MONTHLY PROGRESS REPORT - VERSION 1
Period: June 2015**

Project Number and Title: 11#16 SO4 - Strengthen District Level Case Finding, Case Management, Reporting, Logistics Management and Community Mobilization and Engagement	PROJECT START DATE¹: 01-12-2014	AMOUNT ALLOCATED by MPTF <i>(please indicate different tranches if applicable)</i> \$533,447.00	RECIPIENT ORGANIZATION World Health Organization (WHO)
Project ID: 00093970			
Project Focal Point: Name: Rick Brennan E-mail: brennanr@who.int	EXTENSION DATE:	FINANCIAL COMMITMENTS \$326,690.00	
Strategic Objective (STEPP) SO1 – Stop the outbreak SO2 – Treat the infected SO4 – Preserve stability	PROJECTED END DATE: 31-12-2015	EXPENDITURES as of [30-Jun-2015] \$165,450.00	IMPLEMENTING PARTNER(S): Governments of Guinea
Mission Critical Action MCA01 – Identifying and tracing people with Ebola MCA03 - Care for persons with Ebola and infection control MCA09 – Reliable supplies of materials and equipment MCA11 – Social mobilization and community engagement			
Location: Regional; Guinea	Sub-National Coverage Areas: All affected districts in the country (high and low caseload)		

MONTHLY PROGRESS REPORT RESULTS MATRIX

OUTPUT INDICATORS					
Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for the (one month) reporting period	Cumulative results since project commencement (quantitative)	Delivery Rate (cumulative % of projected total) as of date
<i>Description of the quantifiable indicator as set out in the approved project proposal</i>					
Under MCA1					

¹ The date project funds were first transferred.



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Proportion of suspect cases investigated within 24 hours of notification	All affected districts in 3 countries	>90%	98%	95%	96.5%
Weekly Average of proportion of contacts monitored	All affected districts in 3 countries	>95%	97.5%	96%	96.7%
Under MCA03					
Number of new health care workers infected by district	All affected districts in 3 countries	0	0	31	31
Under MCA09					
Incidences of stock out of PPEs	All affected districts in 3 countries	0			
Under MCA11					
Proportion of incidences of community resistance resolved	All affected districts in 3 countries	>90%	100% (17 sub-prefectures)	--	--
EFFECT INDICATORS (if available for the reporting period)					

NARRATIVE

Situation Update *(please describe critical changes, if any, in the situation that affect the project (1-2 paragraphs))*

In terms of social mobilization and community engagement, a real shift has been initiated in order to get more participation from communities instead of sensitizing them through top down messages. About 18 social anthropologists have been engaged and strategically deployed in Ebola hotspots in Forecariah, Boke, Kamsar, Dubreka, Boffa and Conakry.

Key Achievements *(please use this section to highlight your key achievements for the month, using bullet points if preferred)*

An inter-agency platform which is composed of Communication, social mobilization experts as well as anthropologists from CDC, UNICEF and WHO has been put in place and functional. Guidance and technical advice have been done and sent down to local teams and their implementation is going-on. Four key operational plans have been designed in close collaboration between Communication, social mobilization experts and anthropologists mainly in Forecariah, Coyah, Boke, Kamsar, Dubreka, and Conakry. These plans will be implemented from July – September 2015.



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WHO Communication, social mobilization experts as well as anthropologists have supported all Ebola campaigns and mini-campaigns being implemented in Forecariah, Dubreka, Boke and currently in Conakry.

In Conakry, WHO has continued its support the work of 250 Community Surveillance Volunteers who are working in close collaboration with epidemiologists and investigators in the field of contact tracing, investigation, community deaths, etc.

Thanks to the current Grant, some costs for WHO Ebola staff have been paid as well as some key communication and social mobilization activities.

Delays or Deviations (if any, briefly describe the delays or changes in focus, approach or targets, and provide a short justification for the change (1-2 paragraphs))

Gender and Environmental Markers (Please provide disaggregated data, if applicable)

No. of Beneficiaries		Environmental Markers	
Women		e.g. Medical and Bio Hazard Waste	
Girls		e.g. Chemical Pollution	
Men			
Boys			
Total			

Additional Information (Optional)

WHO has played a lead role and has managed to convince CDC, UNICEF, the National Communication Sub Committee at the National Ebola Coordination to focus on Community participation and Community engagement. For the next three months ahead, WHO will give chance to women, youth, religious leaders, traditional leaders, taxi drivers unions, teachers, traditional healers to become key Agents for Change. Community dialogues will be conducted by these groups among their peers to discuss Ebola and other health issues in their communities.