



**UN EBOLA RESPONSE MPTF  
FINAL PROGRAMME<sup>1</sup> NARRATIVE REPORT  
DATE: 2018**

<p align="center"><b>Project Number(s) and Title(s)</b></p> <p>#EBO69- Project ID: 00111013 WHO's strategic response to the Ebola virus disease outbreak in the Democratic Republic of Congo (DRC)</p>	<p align="center"><b>Recipient Organization(s)</b></p> <p><b>RUNO(s)</b> <b>Project Focal Point:</b> Name: Marcia POOLE E-mail: <a href="mailto:poolem@who.int">poolem@who.int</a></p>
<p align="center"><b>Strategic Objective &amp; Mission Critical Action(s)</b></p> <p>SO5 Prevent (STEPP) No – MCA13 #69 who Strategic Respon <i>MCA13 #69 Multi-faceted preparedness</i></p>	<p align="center"><b>Implementing Partner(s)</b></p> <p>WHO and Ministry of Health, DRC</p>
<p><b>Location:</b> Democratic Republic of Congo Country or Regional</p>	<p><b>Sub-National Coverage Area:</b> <i>Mbandaka, Bikoro, Itipo and Iboko</i> Full list of countries and/or districts</p>
<p align="center"><b>Programme/Project Cost (US\$)</b></p> <p>Total approved budget as per project proposal document: MPTF<sup>2</sup>: USD 428,000</p> <ul style="list-style-type: none"> <li>• <i>by Agency (if applicable)</i></li> <li>Agency Contribution</li> <li>• <i>by Agency (if applicable)</i></li> </ul> <p><b>TOTAL:</b></p>	<p align="center"><b>Programme Duration</b></p> <p>Overall Duration (<i>4 months</i>) Project Start Date<sup>3</sup> (<i>01.06.2018</i>)  Originally Projected End Date<sup>4</sup> (<i>30.09.2018</i>)  Expected Financial Closure date<sup>5</sup>: 31.03.2019</p>
<p align="center"><b>Programme Assessment/Review/Mid-Term Eval.</b></p> <p>Evaluation Completed - No interim report <input type="checkbox"/> Yes <input type="checkbox"/> No Date: <i>dd.nm.yyyy</i></p> <p>Evaluation Report - Attached <input type="checkbox"/> Yes <input type="checkbox"/> No Date: <i>dd.nm.yyyy</i></p>	<p align="center"><b>Report Submitted By</b></p> <ul style="list-style-type: none"> <li>o Name: Marcia POOLE</li> <li>o Title: Director External Relations, WHE</li> <li>o Date of Submission: 23 January 2018</li> <li>o Participating Organization (Lead): WHO</li> <li>o Email address: <a href="mailto:poolem@who.int">poolem@who.int</a></li> </ul>
	<p align="center"><b>Report Circulated by</b></p> <ul style="list-style-type: none"> <li>o Name: (Head of Agency)</li> <li>o Date of Submission</li> <li>o Participating Organization (Lead):</li> <li>o Email address</li> </ul> <p><i>Signature:</i></p>

<sup>1</sup> Refers to programmes, joint programmes and projects.

<sup>2</sup> The amount transferred to the Participating UN Organizations – see [MPTF Office GATEWAY](#).

<sup>3</sup> The date of the first transfer of funds from the MPTF Office as Administrative Agent. The transfer date is available on the online [MPTF Office GATEWAY](#).

<sup>4</sup> As per approval of the original project document by the Advisory Committee.

<sup>5</sup> Financial Closure requires the return of unspent funds and the submission of the [Certified Final Financial Statement and Report](#).

**PROJECT/PROPOSAL/RESULT MATRIX**

**Project Proposal Title:** WHO's strategic response to the Ebola virus disease outbreak in the Democratic Republic of Congo (DRC)

Strategic Objective to which the project contributed						
Output Indicators	Geographical Area	Target <sup>6</sup>	Budget	Final Achievements	Means of verification	Responsible Organization(s).
* Deployment of technical expert whom worked in a coordination to ensure a rapid, effective response * Established and strengthened operational and logistics coordination in the affected areas to maximize the contribution to all partners.	Mandaketa, Bileon, Lipo and Tokeo	100% <sup>6</sup>		100% <sup>6</sup>		WHO, Ministry of health
Effect Indicators  If WHO rapidly established and strengthened operational coordination in the affected areas to minimize the contributions of all partners.	Geographical Area (where the project directly operated)  Mandaketa, Bileon, Lipo and Tokeo	Baseline <sup>7</sup> In the exact area of operation  1	Target	Final Achievements  100%	Means of verification	Responsible Organization(s)

<sup>6</sup> Assuming a ZERO Baseline  
<sup>7</sup> If data is not available, please explain how it will be collected.

# WHO's strategic response to the Ebola virus disease outbreak in the Democratic Republic of Congo (DRC)

## Final Report

### Background and Situational Evolution

On 24 July 2018, the Government of the Democratic Republic of the Congo (DRC) announced the end of the country's ninth recorded outbreak of Ebola virus disease (EVD). The swift conclusion of the outbreak, just 11 weeks after the first case was confirmed on 8 May, is testament to both the strong leadership of the DRC Ministry of Health, and the rapid, coordinated action of the many partners who contributed to the response. Although DRC has been affected by EVD outbreaks in the past, this outbreak was the most complex to date. Whereas previous outbreaks had been geographically isolated, this incident involved transmission at three separate locations, including Mbandaka, a city home to over 1 million people. The location of Mbandaka, on DRC's border with neighboring countries, and with connections via the Congo river to the country's capital, Kinshasa, meant there was a real risk of that the disease could cross international borders, and that it could take root in an urban environment, where it would be much more difficult to stop.

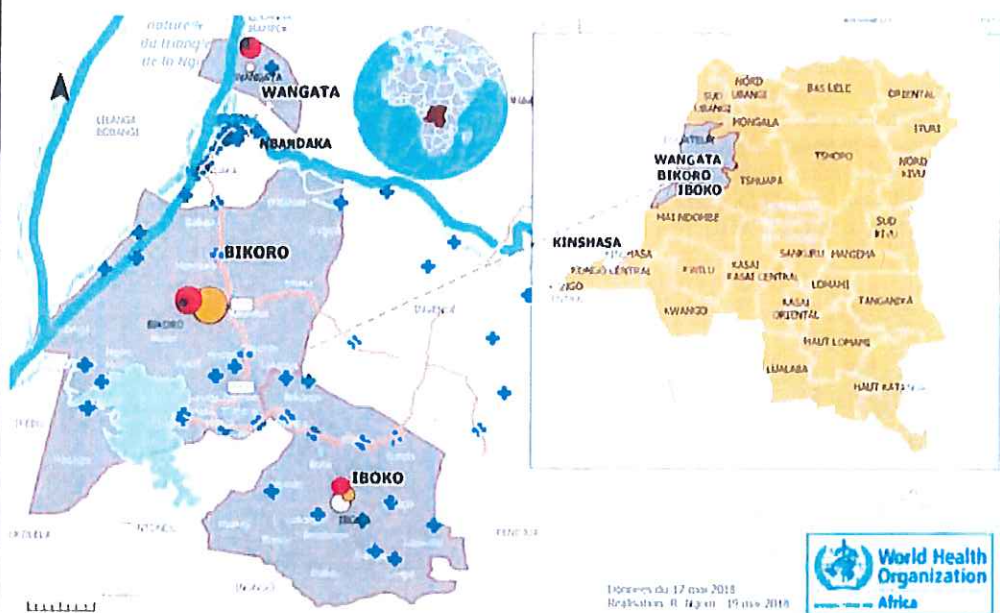


Figure 1: Health zone in the Equator Province reporting EVD cases.

This report describes how these risks were averted thanks to a rapid, coordinated and comprehensive response; a response led by the DRC Government, supported by WHO, and executed by a wide range of national, regional and international partners. Such a response would not have been possible without the foresight and generosity of donors.

Those donors who so quickly committed resources to funding the requirements of the strategic response plan played a crucial role in enabling WHO and partners to deliver a comprehensive and coherent response during the outbreak. This outbreak marks the first time that WHO and partners have exceeded their rapid appeal target funding. According to tracking by OCHA, the total funds received by all partners for response amount to US\$63 million, against a target of US\$57 million. WHO's appeal for US\$27 million was matched by US\$30 million of firm pledges, and an additional US\$5.8 million replenishment of the WHO Contingency Fund for Emergencies (CFE).

The effectiveness of the response also owes a great deal to all donors who have helped to strengthen the capacity of the WHO Health Emergencies Programme (WHE) over the past two years, including the many donors who have contributed funds to the CFE. This outbreak represented an acid test of the WHE programme's ability to respond quickly, effectively and predictably, and as this report shows, the programme was more than equal to the challenge.

Maintaining these high standards in the face of increasing natural and man-made threats is the next challenge; it is a challenge that the WHE programme and donors must meet by continuing to work together. At the time of writing a new

potential outbreak of EVD is being investigated in the east of DRC. If confirmed, it would mark the third such outbreak in the country in under 2 years — an unprecedented occurrence. But although EVD rightly commands international concern and attention, it is important to note that it is a single dimension to the complex, multidimensional health and humanitarian challenges faced by the people of DRC. WHO has pledged to fight for one billion more people better protected from health emergencies, and one billion more people enjoying better health and wellbeing by 20123. DRC will be on the front line of that fight.

**Narrative section:**

The essential steps towards containing EVD were the same for this outbreak as for all previous EVD outbreaks, with the exception that there is now a safe, effective, though as-yet unlicensed vaccine available for use in emergency situations. However, understanding the extent of transmission, ensuring care for infected patients, engaging communities and tracing contacts might sound simple on paper, but in remote communities surrounded by dense equatorial forest, and with a diverse cast of partners each with separate roles and responsibilities, a clear plan and clear leadership were crucial. Within 9 days of the first confirmed case, WHO and the Government of DRC maintained the momentum of the initial rapid response by producing a Strategic Response Plan for all partners based on the implementation of proven strategies for the prevention and control of EVD outbreaks, including: Strengthened multi-sectoral coordination and established and strengthened operational and logistics coordination in the affected areas to maximize the contribution to all partners .

**Key Achievements:**

**Strengthened multi-sectoral coordination**

WHO rapidly established and strengthened operational coordination in the affected areas to maximize the contributions of all partners. The first health sector meeting was held within 24 hours of the outbreak declaration. WHO held daily coordination meetings at the regional, national, and local levels to review the evolution of the outbreak, and identify impediments to the implementation of the strategic response plan. Throughout the course of the epidemic WHO published daily internal situation reports for partners, and comprehensive external situation reports each week. Over 360 technical experts were deployed through WHO, many of whom worked in a coordinating role to ensure a rapid, effective response.



*Figure 2: A view of Iboko village as seen from an arriving helicopter on 19 June. Photo credit: WHO*

All the strategies of Response Plan for all partners were underpinned by a huge operational support and logistical efforts to ensure team and equipment got to where needed fast, often in remote areas with extremely limited existing infrastructure. Through logistics partners coordination over the course of the outbreak, 20 000 follow up and visits were carried out to check the health status of 1706 contacts identified during the outbreak and 854 alerts to potential EVD cases were investigated.



Figure 2: Offloading WHO vehicles in Mbandaka airport. Photo credit: WHO, Fred Urlep

- **Delays or Deviations – NOT APPLICABLE**
- **Gender and Environmental Markers - NOT APPLICABLE**

<b>No. of Beneficiaries</b>	
<b>Women</b>	
<b>Girls</b>	
<b>Men</b>	
<b>Boys</b>	
<b>Total</b>	

<b>Environmental Markers</b>
e.g. Medical and Bio Hazard Waste
e.g. Chemical Pollution

- **Best Practice and Summary Evaluation**

No outbreak of Ebola can be beaten by one country, or one organization alone. This outbreak was brought to an end through collaboration and strong leadership. The DRC Ministry of Health wasted no time in responding, inviting support where needed, and informing the public about the risks of the disease. The leadership of the DRC Government undoubtedly saved lives. WHO set a new benchmark for the organization's ability to mount a rapid and effective response to an outbreak of Ebola. WHO teams were on the ground investigating the first alert, developing the response plan that everyone worked from, raising the funds for all partners in the response, facilitating the arrival and use of vaccines and the establishment of all the other support pillars. We did so under the strong leadership of the Ministry every step of the way and working arm-in-arm with specialized partners.

In the same spirit of collaboration, we must now redouble our efforts to tackle the many other challenges that face DRC. In the time that 29 people died from Ebola during the May-July outbreak, hundreds more died from cholera, typhoid, measles and other preventable causes. Every year, 300 000 children under the age of 5 die of mainly preventable causes. Large swathes of the country are in the grip of a complex humanitarian crisis. 4.4 million internally displaced persons. 13.1 million people need emergency aid; 10.5 million people need emergency public health support; and 4.4 million are internally displaced. Violence and insecurity further disrupt already weakened transportation, education and healthcare systems, complicating access to basic services. We must build on the momentum of this Ebola response to improve health services for all Congolese. They deserve to be protected from all health risks, not only those that make headlines.

- **Story on the Ground**

**WHO communications products - 2018 Ebola response in Equateur province, DRC**

**05/08: New Ebola outbreak declared in Democratic Republic of the Congo**

Press release

<https://www.who.int/news-room/detail/08-05-2018-new-ebola-outbreak-declared-in-democratic-republic-of-the-congo>

**05/11: WHO and partners working with national health authorities to contain new Ebola outbreak in the Democratic Republic of the Congo**

Press release

<https://www.who.int/news-room/detail/11-05-2018-who-and-partners-working-with-national-health-authorities-to-contain-new-ebola-outbreak-in-the-democratic-republic-of-the-congo>

**05/14: Ebola vaccines being shipped to Kinshasa**

Video for broadcast distribution

<https://www.unmultimedia.org/tv/unifeed/asset/2154/2154151/>

**05/21: Ebola vaccination begins**

Video for distribution by broadcasters

<https://www.unmultimedia.org/tv/unifeed/asset/2158/2158489/>

**05/29: Ebola vaccine - new vaccine, new tools, new hope**

Video for social media (YouTube, Twitter, Facebook, Instagram)

<https://youtu.be/FknjFw2h-l8>

**06/08: Survivors of Ebola virus disease head home**

Video for social media (YouTube, Twitter, Facebook, Instagram)

<https://youtu.be/w-sdU9VV97A>

**06/09: At one-month mark in Ebola outbreak, the focus shifts to remote areas**

Press release

<https://www.who.int/news-room/detail/09-06-2018-at-one-month-mark-in-ebola-outbreak-the-focus-shifts-to-remote-areas>

**06/12: WHO Director General in DRC**

Video for distribution by broadcasters

<https://www.unmultimedia.org/tv/unifeed/asset/2173/2173959/>

**06/13: An Ebola survivor is welcomed home**

Video for distribution by broadcasters

<https://www.unmultimedia.org/tv/unifeed/asset/2175/2175392/>

**06/14: Ebola response - Social anthropologist Julienne Anoko works with affected communities**

Video for social media (YouTube, Twitter, Facebook, Instagram)

<https://youtu.be/LkkvKddOaJ8>

**06/19: Returning home after surviving Ebola in the Democratic Republic of the Congo**

Feature story

<http://afro.who.int/news/returning-home-after-surviving-ebola-democratic-republic-congo>

**06/20: An Ebola survivor returns home**

Video for social media (YouTube, Twitter, Facebook, Instagram)

<https://youtu.be/Rj-Edi4P00A>

**06/27 - Bringing Ebola vaccine to remote communities in the Democratic Republic of Congo**

Feature story

<http://afro.who.int/news/bringing-ebola-vaccine-remote-communities-democratic-republic-congo>

**06/27 - Follow up of contacts ends in DRC Ebola**

Video for social media (YouTube, Twitter, Facebook, Instagram)

<https://youtu.be/wiwl9qc4lY>

**06/29 - Contact tracing**

Video for distribution by broadcasters

<https://www.unmultimedia.org/tv/unifeed/asset/2190/2190132/>

**07/06 - An inclusive response: reaching Batwa communities to combat Ebola**

Feature story

<http://afro.who.int/news/inclusive-response-reaching-batwa-communities-combat-ebola>

**07/24 - Ebola outbreak in DRC ends: WHO calls for international efforts to stop other deadly outbreaks in the country**

Press release

<https://www.who.int/news-room/detail/24-07-2018-ebola-outbreak-in-drc-ends--who-calls-for-international-efforts-to-stop-other-deadly-outbreaks-in-the-country>

**07/24 - Ebola outbreak in DRC ends - what made a difference?**

Video for social media (YouTube, Twitter, Facebook)

<https://youtu.be/kcTawNsWjIQ>

**07/24 - Video message from Dr Tedros on the ending of the Ebola outbreak in Democratic Republic of the Congo**

Video for social media (YouTube, Twitter, Facebook)

<https://youtu.be/e7yGcD3Tlus?list=PL9S6xGsoqIBU5u1OIs2eduxnxxGKudkcv>