

## October Monthly Report: Interagency Stewardship

PROPOSAL TITLE:		EBOLA RESPONSE INTERAGENCY STEWARDSHIP			
Strategic Objective to which the Proposal is contributing	Zero Ebola Cases in Guinea, Sierra Leone and across Region (including Liberia)				
Effect Indicators	Geographical Area (where proposal will directly operate)	Baseline In the exact area of operation	Target <sup>1</sup>	Progress October	Means of verification and Responsible Org.
Zero Ebola Cases	Guinea, Sierra Leone and Region	3,3,0	0,0,0	3,0,0	WHO situation reports; ECMs, RIECL
<b>MCA [13]</b>					
Output Indicators	Geographical Area	Target	Progress October	Means of verification	Responsible Org.
Stakeholders contribute to the National Ebola Response: Stakeholders contribute to the formulation of the Ebola Response Country Operational Plans	Guinea Sierra Leone	70% stakeholders attend and participate	70%	Reported by Government and UNSGE office	ECMs, RIECL
Cross-border, regional and international coordination maintained: Ebola Response Coordination Board functioning successfully	Guinea and Sierra Leone	70% stakeholders attend meetings	70%	Notes of weekly stakeholder meetings; board meetings	ECMs, RIECL

### Key Highlights

- The Guinea elections were held on October 10: President Conde was re-elected. Work by ECM Guinea and colleagues helped ensure that **Ebola was not used as a political issue** during the campaign and that Ebola response activities continued throughout the campaign.
- WHO held the three-level meeting in Freetown, Sierra Leone from 12-14 October attended by ECMs Sierra Leone and Guinea. Discussion included future work for ECMs and partners on the **planning frameworks for intensified Ebola surveillance in 2016, Rapid Response Team composition, and survivor care, screening and counselling.**

<sup>1</sup> Number of cases in last week of the month

- At the ICE Coordination Board it was agreed at the ECMs/RC would provide information about the **planned timelines and hand-over for closure of national structures and responsibilities for responding to flare-ups<sup>2</sup>**. ECMs would discuss the RRT elements and secure formal agreements from partners regarding their commitment to provide the necessary services to cover three events in parallel up to the end of 2016. The ECMs would conduct an in country validation of RRTs including a first simulation exercise.
- ECMs continued to encourage the UN country teams to review the draft **Overview of Needs and Requirements** that will become a public document at the beginning of November.
- RIECL acted in absence of ECM Sierra Leone from 25 September and organized the visit of David Nabarro on October 5-6, 2015<sup>3</sup>.

### **Regional and International Coordination**

During October a series of meetings took place, including the monthly Interagency Collaboration on Ebola (ICE) Board meeting on 8 October, followed by WHO's 3 Level meeting with all 3 countries attending in Conakry, Guinea. ECMs Guinea and Sierra Leone attended both meetings.

The Interagency Collaboration on Ebola held the eighth Coordination Board meeting on 8 October. The Board recognised the importance of preserving strong national and international capacities that have the capacity to respond to flare ups across the region. There was consensus that rapid-response team capacity is not strong enough at present. It was agreed Ebola Crisis Managers (ECMs) and OCHA will work with WHO to develop standard operating procedures (SOPs) that recommend minimum standards and guide the contributions of partners in country. Simulations will be planned for December and January to assess capacity<sup>4</sup>.

A second action point was that the ECMs/RC would provide information about the planned timelines and hand-over for closure of national structures and responsibilities for responding to flare-ups<sup>5</sup>. The UN agencies, funds and programmes and partners need to be ready to respond any future flare-ups and maintain enhanced vigilance at least until the end of 2016. ECMs should work with international partners to agree who is the "provider of last resort" and what standards of service they can commit to (e.g. highest quality staff deployments). The roles of the RCs, OCHA, WRs and the ECMs for the residual response (RRTs, risk management regarding reintroduction) and throughout 2016 would be clarified with partners. Several management options for the overall response were discussed and it was agreed to capacitate UN systems (RC and UNCT) with emergency and incident management capacity in support of government defined leadership and management.

It was agreed RCs would define the required capabilities and resources to ensure that RC offices are capacitated to manage/coordinate processes, including RRTs and survivor support, from December 2015 onwards. OCHA would extend its support to operations in Guinea and Sierra Leone until end March 2016 enabling the RCs to ensure (a) functionality of incident management systems and Rapid Response Teams, (b) comprehensive support to Ebola survivors and (c) 3W functions.

---

<sup>2</sup> Source: ICE Coordination Board Minutes

<sup>3</sup> Source: P.Graaff Travel Report eTR111515

<sup>4</sup> Source: ICE Coordination Board Minutes

<sup>5</sup> Source: ICE Coordination Board Minutes

Regarding survivors, it was agreed a consistent definition of survivors, common principles for support and description of the minimum assistance they should be able to access, across all three countries, would be helpful. The immediate priority - over the next month – is to ensure that people who have survived an EVD infection are able to access support. The minimum assistance should include five priority areas: Communication of accurate information about survivors to their communities and beyond (including to reduce stigmatization); screening of body fluids for persistent virus and access to appropriate health care (including psychosocial support); financial support (including monthly cash transfers); provision of food and nutrition supplements when appropriate; and assistance with Water, Sanitation and Hygiene. It was agreed the ECMs (with the support of RCs) would convene in-country consultations to agree leadership and responsibilities for each of these five categories of programming.

## **Guinea**

In **Guinea**, there are 1,261 Ebola survivors. To address the specific needs tied to their condition an Ebola Survivors Workshop was held on 5-7 October in Kindia, aimed at articulating a targeted Response Strategy<sup>6</sup>. Key government ministries and over 40 national and international actors met over three days to hear from survivors, physical and mental health experts and stigma and socio-economic specialists. The outcome of the meeting was the agreement of an inter-sector strategy to support Ebola survivors.

ECM Guinea held the regular monthly meeting of ambassadors attended by the Ambassadors of Germany, Spain, USA, European Union, France, Japan and Russia<sup>7</sup>. Dr. David Nabarro also attended along with the UN Resident Coordinator. The meeting discussed the epidemiology, the political and security situation and the plan for the roll out of Phase 3 of the Ebola response strategy.

At the Ebola Emergency Response Team (ERT) Guinée regular meeting on October 20<sup>8</sup> it was agreed that in order to tackle the outbreak there needed to be a rotation of teams; strengthening the intervention of social anthropologists; and strengthening use of vaccination. In response to the de-brief from the ICE meeting held earlier in the month it was agreed that the group would set up a working group to work under the facilitation of OCHA for the establishment of the rapid response mechanism . Heads of agencies or organizations would designate the persons who will work on the issue by the next Board of November 5, 2015. Regarding survivors, a small team is working on the Strategic Plan for survivors following the Kindia workshop. A first draft of the document will be presented to the National Coordinator and will be shared with the ERT to identify priority interventions for support. It was noted that a round table will be organized in Dakar by the UN General Secretariat on lessons learned from UNMEER . Subsequently, a mission will visit Guinea to meet all partners and national coordination response to Ebola. Also that UNDP will organise a sub-group to look at how best to harmonise agencies support for cash transfers for those affected by Ebola.

The ECM attended an international meeting organised by the French government on the Ebola response along with Dr Sakoba and the Ambassador of France to Guinea.

---

<sup>6</sup> Source: ICE Situation Report, No.8

<sup>7</sup> Source: Meeting notes, ICE Guinea

<sup>8</sup> Source: meeting notes ERT Guinea October 20

## **Liberia and Regional Efforts**

**In Liberia** the Survivors Network is the umbrella group coordinating and overseeing activities in support of Ebola survivors in the country<sup>9</sup>. An integrated response including clinical health care, psycho-social support, economic and livelihood support as well as legal protection is promoted. Partners such as the Red Cross, MSF, MDM, IMC, WFP, IOM, OHCHR/UNMIL and UNICEF are providing support packages and counselling to about 1,200 survivors. Four health facilities have a dedicated survivors' care wing; however they are all in Monrovia and Bomi and a better coverage country-wide is critically needed.

Peter Graff spent a week in New York briefing UN agencies and partners on the status of the response, the work of the agencies and the transition from the UN to national authorities in the coming months.

## **Sierra Leone**

RIECL acted in absence of ECM Sierra Leone from 25 September and organized the visit of David Nabarrao on October 5-6, 2015<sup>10</sup>. Discussions were held with the Government and partners focused largely on two areas - transition and survivors. Regarding the former the main concerns included the lack of capacity and coordination. Regarding the latter there was frustration about the lack of a clear timeline, and process for prioritization, for survivor testing. The conclusions were that the UN and particularly the ECM and WHO have a key role to play in helping support the transition and regarding survivors, it was important to ensure survivor testing and counseling is dealt with as an operational issue informed by science with clear articulation of outstanding policy, technical and operational problems to be resolved.

The ECM highlighted to partners in the interagency meeting on October 5 that there are a number of different transition processes underway simultaneously. At national level between the NERC and the Ministry of Health and Sanitation (MoHS), the Office of National Security (ONS) and Ministry of Social Welfare, Gender and Children's Affairs (MoSWGCA) at 0 +90. Such processes will influence how the international partners operate. The ECM requested the participants to outline their transition plans based on their activities, add their views on the Frontline forum regarding value and focus going forward.

Sierra Leone has over 4,000 EVD survivors including 1,579 children, the largest number of Ebola survivors in the region<sup>11</sup>. The "Comprehensive Package for EVD Survivors" is a Government of Sierra Leone-developed support programme for survivors, with an integrated approach, which includes health care, psychosocial and livelihood support. Project Shield was launched on 5 October and is designed to speed up and pilot the comprehensive care for survivors and fast-track semen testing and counseling for survivors.

At the Ebola Development Partners meeting on October 20<sup>12</sup>, there was a discussion on the future of the interagency group. It was agreed the number of meetings would be reduced: possibly every 2 weeks

---

<sup>9</sup> Source: ICE Situation Report, No.8

<sup>10</sup> Source: P.Graaff Travel Report eTR111515

<sup>11</sup> Source: ICE Situation Report, No.8

<sup>12</sup> Source: Ebola Development Partners Meeting Minutes, October 20 2015

until end of outbreak; once a month until 5 February; quarterly after. Some of the areas of work being undertaken by the ECM and her team included: the UN transition itself, set up of the RRT, Disaster Management Capacity, capability, National Day of Remembrance, Overview of Review and Requirements (ONR), lessons learned (separate exercise) and evaluation.