



Mr.
AOR, U.S. Agency for International Development
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October 30, 2014

RE: Quarterly Programmatic Report for Cooperative Agreement No. AID-OFDA-G-14-00177, "Assisting Liberians with Education to Reduce Transmission" (ALERT) Program

Dear Mr.

On behalf of Global Communities, I am pleased to submit our Quarterly Programmatic Report summarizing activities undertaken during the period of July 1 – September 30, 2014.

Should you have any questions or comments regarding any aspects of this report, please do not hesitate to contact me.

Sincerely,

CC:



Quarterly Report

Program Name/Acronym: Assisting Liberian with Education to Reduce Transmission (ALERT)

Country: Liberia

Donor: USAID/OFDA

Award Number/Symbol: AID-OFDA-G-1400177

Reporting Period (start–end dates): August 22, 2014 – September 30, 2014

PLEASE NOTE: In the context of the fast-moving Ebola response, this should not be considered an up-to-date summary of program activities.

Submitted To:

Submitted By:



Executive Summary

The first cases of Ebola Virus Disease (EVD) in West Africa were reported in March of 2014. Though the spread seemed contained later in the spring, the outbreak spiraled out of control soon after. At that time, the country was already struggling with post-war challenges including a weak economy, corrupt government and a shattered health care system. Since then, 13,703¹ people have been infected with 2,705 confirmed deaths in Liberia alone². The current outbreak is the largest ever, with the World Health Organization (WHO) declaring it a Grade 3 Emergency, its highest designation for emergency response. Global Communities responded rapidly and immediately to the crisis, repurposing existing activities under a USAID-funded Improved Water and Health and Sanitation (WASH) program towards EVD awareness efforts. Realizing a need to serve a wider population with more targeted activities, programming quickly expanded through the ALERT program. Within the first weeks of ALERT, Global Communities mobilized longstanding government and traditional leader networks to bring together key members of the community, providing education to combat the virus through increased awareness campaigns. Global Communities also identified under-supported strategies including contact tracing and burial team management, all key in the prevention and spread of Ebola. The ALERT program quickly expanded to include program implementation for all three activities by the end of Quarter 3 and all are highlighted in greater detail in this report.

1. Program Overview

On August 22, 2014 Global Communities was awarded \$758,864, by the Office of Foreign Disaster Assistance to implement the **Assisting Liberians with Education to Reduce Transmission (ALERT) program**. The ALERT program provides intensive and rapid outreach to communities at risk of exposure to EVD, as well as to communities who reside in proximity to Ebola-infected individuals. Capitalizing on existing and longstanding relationships, resources, networks, and trust built with rural communities in Lofa, Nimba, and Bong counties, Global Communities is delivering effective, accurate, and timely information to educate individuals, households and community leadership in safe and hygienic methods to reduce the risk of exposure to and contraction of EVD.

Within the reporting period, the ALERT program extended from 4 to 6 months and was awarded a total of \$7,740,608. Under this modification, activities expanded to include burial team support in all 15 counties and contact tracing in Bong County.

- **Objective 1:** Ensure a maximum level of community preparedness for and responsiveness to the exposure of EVD through effective outreach, education, messaging, and availability of critical health care workers.

2. Program Start-Up & Implementation

During the reporting period, which encompassed only the first five weeks of the program, Global Communities successfully completed start-up, a significant programmatic modification, and mobilization in all 15 counties of Liberia. These activities, outlined in greater detail below, included recruitment and hiring of local and expatriate staff, rental and procurement of vehicles to support burial, disinfection and contact tracing teams; and the rapid and large-scale initiation of activities.

1. Program Administration

Global Communities responded quickly to the Ebola outbreak by utilizing existing capacity through the USAID-funded Improved Water and Sanitation Health (IWASH) program, which has been implemented since 2010. IWASH couples infrastructure development, community mobilization and behavior change communication to improve sanitation and

¹ UNMEER External SitRep Oct 31

² WHO Ebola Response Roadmap Sit Report, Oct 22

hygiene practices. Tapping the capacities of a well-established in-country offices and experienced national and expatriate staff allowed for an extremely rapid start-up.

Notable new hires include George Woryonwon who was seconded from the Ministry of Health and Social Welfare (MoHSW) to Global Communities for the duration of the ALERT program. At MoHSW, Mr. Woryonwon oversaw community-level environmental health through a network of trained Environmental Health Technicians (EHTs) who were engaged under the IWASH program. Through ALERT, Mr. Woryonwon oversees the training of burial teams throughout Liberia. All team members, including drivers, are retrained monthly in World Health Organization (WHO) protocols on safe burial practices and infection control.

Also deployed during the reporting phase were three additional expatriate staff to support logistics and program management as well as review the security protocols for a quickly expanding operations.

2. Community Health Education/Behavior Change

During the reporting period, Global Communities launched social mobilization and Ebola education activities under the Community Health Education and Behavior Change subsector in Lofa, Nimba and Bong Counties. These targeted Community Meetings and Dialogue Sessions (CMDS) bring together proven and respected leaders to provide education on the Ebola Virus. The CMDS also provide a forum for local leaders and health officials to develop education strategies for their communities on how to prevent and stop the spread of EVD. At community level meetings, attendees receive soap to encourage hand washing and good hygiene practices, wristbands with WASH written five times to remind the wearer to wash their hands five times a day, and radios to listen to regular programming on prevention awareness.

The CMDS are held at the County, Health District and Health Catchment levels. Attendance usually includes local officials from the Government of Liberia, Ministry of Internal Affairs (MIA) and Ministry of Health and Social Welfare (MOHSW), as well traditional leaders including Paramount, Clan and Town Chiefs. During the reporting period Global Communities held close to 36 CMDS attended by over 617 different communities.

Highlights per county:

Lofa – During the week of September 15th, representatives from 68 communities attended CMDS in five Health Catchment Areas. Highlights of the sessions include positive reaction to the educational video shown to raise awareness about EVD. Participants requested the video be screened outside the dialogue sessions to help fight against continued denial of the disease and community burials. Community Health Workers (CHW), including Natural Leaders and general Community Health Volunteers (gCHV) attended the sessions.

Nimba –District-level meetings were held in both Gbehlay-geh and Zoe-geh. At the beginning of the sessions participants were polled to see if they believed Ebola existed. In Gbehlay-geh 35 participants did not believe Ebola was real and in Zoe-geh, 34 denied the existence of the virus. By the end of both dialogue sessions, all participants believed the virus was real and had action items to bring back to their communities.

Bong – At a county-level CMDS held in Bong County on September 9th, the plenary highlighted the following cross-cutting resolutions based on action items agreed upon in the sub-group discussions including:

- Regular washing of hands with soap and water
- Do not accept strangers/family members in your home who have been away for a long time
- Report all sick cases to community leaders
- Do not touch dead or sick persons
- Do not wash dead bodies

Sub-groups included; Tribal Governors, District Commissioner, Gbarnga Zonal Heads, County Administration, Religious Leaders, and Social Workers (CSOs, NGOs, Motor Cyclist and Vehicle Unions, etc)

3. Burial and Health Team Support

Activities planned for health team support under the original ALERT award included a monthly danger stipend, provided only to EHTs in Lofa County. After observing the rapid spread of EVD and the urgent response needs throughout the country, Global Communities rapidly expanded the scope and depth of ALERT. Recognizing the importance of burial teams in breaking the transmission chain, Global Communities engaged the County Health Teams (CHT) in every county in Liberia by providing logistics and management support to burial and disinfection teams. The Government of Liberia did not have the human or material resources to support the burial teams at the scale necessary to respond to the level of crisis the Ebola outbreak presented. By working with the government and CHT, Global Communities guarantees correct safety measures are undertaken throughout the burial process and that the teams have the adequate supplies for this activity.

Additional support includes, initial training and regular retraining of burial and disinfection teams; payment of monthly incentives to team members, leaders and supervisors; monthly phone scratch cards; and the provision of personal protective equipment (PPE), disinfection supplies, vehicles and driver services, and fuel. This model operationalizes burial teams under the CHT and is unique to Global Communities. It also reinforces existing government health actors and as a result, builds local capacity to respond to future, similar outbreaks.

By the end of the reporting period, burial teams were active and operational in nearly seven counties of Liberia. At the time of writing, Global Communities had completed the development of 41 burial teams in every county of Liberia. All teams are equipped with vehicles, fuel, and appropriate PPE and disinfection supplies.

4. Contact Tracing in Bong

Just as important as the dead body management components, contact tracing is also an essential function for preventing the spread of Ebola. Contact tracing is the process by which those who have come in direct contact with a probable or confirmed Ebola victim are identified and monitored for a period of 21 days to see if they develop symptoms. As EVD is spread through direct contact with bodily fluids of an infected person, this process establishes a clear line of transmission to stop the spread as early as possible. Global Communities supports the WHO revised contact tracing strategy which decentralizes teams from the county to the district level, increasing the capacity of each district to follow up with new contacts. In Bong County, Global Communities provides motorcycles and fuel to the eight teams and well as incentive payments and management oversight in coordination with the County Surveillance Officer (CSO).

Contact tracing supervisors in Bong County began by the third week of project implementation. In total, 16 WHO trained contact tracing supervisors were placed among the eight districts of Bong County. Work also began, in coordination with the CSO, to supervise the contact tracing teams and distribute monthly incentive payments. Global Communities provided eight motorcycles to the Bong County Health Team to ensure the mobility of contact tracing teams.

3. Progress Against Indicators

Pending final approval of our baseline report, due 90 days from original award, the below indicator targets and reported data may change with the next quarterly report.

Community Health Education / Behavior Change		Target	Reporting Period	Cumulative to Date
1	# of CHWs trained and supported (total and per 10,000 population within project area), by sex	20	M: 29 F: 6 Total: 471	M: 29 F: 6 Total: 471
2	# and % of CHWs specifically engaged in public health surveillance	N/A	N/A	N/A
3	# and % of community members utilizing target health education message practices	N/A	N/A	N/A
4	Number and percentage of CHWs in Bong specifically engaged in contact tracing activities	28	16	16

Communicable Disease		Target		Reporting Period			Cumulative to Date		
1	# of Global Communities-supported burial teams that are active and operational	76		20			20		
2	# of bodies collected and buried by burial teams (disaggregated by sex); disaggregated by location and burial team	Bong	N/A	M	F	Total	M	F	Total
				28	17	45	28	17	45
		Lofa	N/A	M	F	Total	M	F	Total
				4	9	31	4	9	31
		Nimba	N/A	M	F	Total	M	F	Total
				N/A	N/A	9	N/A	N/A	9
3	# of bodies reported buried by the community or other actors, including the approximate date and location of burial	N/A		N/A			N/A		

4. Challenges Encountered

Challenges encountered during this reporting period included rapidly procuring a large volume of vehicles in a country already overburdened by high demand and low supply and the general logistical challenges of getting adequate materials to the burial teams.

In addition, supply chain of necessary PPE has been an obstacle for many implementing partners. The body bags initially available from MoHSW stores were substandard, often tearing, leaking or not equipped with proper handles. In order to reduce the risk of contamination that body bags pose, Global Communities provided stretchers to all burial teams and advised using two bags for each of the deceased.

During the early intervention stages of ALERT, some burial team trainers and other Global Communities staff were met with misinformed or fear-based violent reactions. Many communities in areas that have not had adequate education on Ebola, or engagement with traditional leaders, still struggle to accept that the virus is real. But as we have seen with our community mobilization efforts, these negative reactions can be reversed through county-level education dialogues, particularly those that engage traditional and other respected community leaders.

At the outset of ALERT implementation, Global Communities quickly identified the need for burial team support and contact tracing. In order to fully support these additional activities, we requested additional funding through a modification. However, we encountered funding challenges due to restrictions on end of fiscal year funding and only received a modification for a portion of the total costs. As a result, Global Communities rented vehicles to support burial and disinfection teams for a longer period of time than originally anticipated while waiting for the second modification to cover additional vehicle procurement.

Extremely bad roads, particularly in the southeast part of the country, necessitated a very specific, durable fleet of vehicles to ensure the safety of our drivers and staff and their overall efficiency.

5. Vehicle Summary

During the reporting period, Global Communities procured 23 vehicles, all available and sourced in Liberia from Liberian suppliers. The program also procured 28 Suzuki Motorbikes, also sourced in Liberia from Liberian suppliers. To supplement these procurements, the program rented 57 vehicles from Liberian suppliers also sourced in Liberia.

In accordance with 22 CFR 228.19, Global Communities prefers to purchase U.S. manufactured vehicles. However, as the need for vehicles was urgent to support program activities such as burial teams, and US manufactured cars are not available in Liberia, Global Communities did not use geographic code 937 to procure vehicles.