

REPORT

# Ebola Outbreak in West Africa

SPANISH RED CROSS



## RED CROSS STRATEGY

The standard recommended Public Health interventions, (WHO standards), for stopping the Ebola outbreak include early identification of cases, isolating and treating all patients in Ebola Treatment Centres (ETC), establishing rigorous contact tracing and safe and dignified burials practices supported by coherent social mobilisation.

These public health activities have been characterised by the Red Cross as the "Five Pillars of Intervention" for Ebola response, known as:



### SAFE AND DIGNIFIED BURIALS

Red Cross deals with safe and dignified burials in all Ebola affected countries, ensuring respectful treatment of those who succumb to the disease and protecting communities. This is a critical task typically done by volunteers and undertaken in the most dangerous moment. Volunteers must wear personal protective equipment and work in teams. Some affected communities are far away and those teams need to travel up to eight hours to perform the duty.

*30.000 burials have been performed in a safe way and respecting local culture*



### COMMUNITY ENGAGEMENT AND SOCIAL MOBILISATION

Red Cross helps distributing educational materials and promoting health and door to door visits, in communities that may have to deal with the outbreak. As part of the Red Cross efforts, millions of people receive lifesaving information. To promote this participation different means are used: radio, TV spots, posters, SMS, social networking information.

*6,400,000 people reached*



### CONTACT TRACING AND SURVEILLANCE

A work of extreme importance in stopping the spread of the disease is the control and monitoring of people who have been in contact with Ebola affected individuals.



### PSYCHOSOCIAL SUPPORT

Ebola devastates families and communities, therefore, providing emotional support that is solid and culturally sensitive remains a priority. There is a need of reducing stigma and discrimination that can occur when someone is suspected to have contracted the disease, has been exposed to the virus or has been working in the affected regions.

*323,000 people supported*



### CASE MANAGEMENT

Patients have quick access to adequate health services for isolation and treatment.

*1,300 people admitted*

The main priorities for Spanish Red Cross (SRC) in the Ebola Fight are:

**Contribute to contain the epidemic and support the recovery of the population most affected by the disease, protecting livelihoods, improving health conditions and strengthening preparedness and community resilience as well as fighting fear and stigma.**

Spanish Red Cross is actively involved in the Ebola operation launched by the International Federation of Red Cross and Red Crescent Societies (IFRC). In addition to the intervention in the affected countries, Red Cross is strengthening Ebola preparedness programs in neighbouring countries such as Gambia, Guinea Bissau, Mali and Senegal.

## ACTION LINES

### 1. RESPONSE IN WEST AFRICA

#### ➤ EBOLA TREATMENT CENTERS (ETC)

Following the request of the Ministry of Health of Sierra Leone and in coordination with IFRC, SRC deployed in early August 2014 a Basic Health Care ERU (Emergency Response Unit) to Sierra Leone. Initially, the possibility of supporting and strengthening management of cases in the hospital in Kenema region, was raised. However, safe conditions and appropriate support services to manage Ebola cases (isolation capacity, patients and staff flow) were not guaranteed, so a new ETC was built in Kenema by SRC.

Due to the spread of Ebola disease in late November/ early December 2014 to Kono district (which borders Kenema, Kailahun and Guinea), a large number of suspected Ebola cases in Koidu hospital, and the lack of suitable and safe treatment facilities in the hospital itself, a new ETC was built in Kono district.

IFRC requested SRC construction team to be deployed one more time to Koidu city for the construction of the new ETC, as this team was involved in the construction of the previous one. Lessons learned from Kenema and improvements were incorporated to the new ETC.

Materials from the Basic Health Care ERU, as well as local procurement and additional shipments (PPE, medicines, construction materials, vehicles, sat phones...) were required to build the ETC. It comprised different areas: patients registration and triage, waiting areas, high and low risk area, pharmacy, warehouse, happy shower, morgue, waste pit.

SRC has supported IFRC with the construction and management of 2 ETC with up to 60 beds each (Kenema ETC/ Kono ETC). The following actions are performed in the ETC:

- Case management
- Epidemiological surveillance and health care
  - Case definition and triage
  - Staff and patients flow control
  - Case Management
  - Personal Protective Equipment: donning and doffing
- Water and sanitation/Infection Prevention and Control (IPC):
  - Disinfection procedures
  - Chlorine management and handling
  - Waste management
  - Dead body management
- Patient transport:
  - Safe ambulance Disinfection
- Psychosocial support
- Health promotion activities



42 Spanish Red Cross International Delegates (different profiles: coordination, FAD, IT / Telecom, health, WASH Logistics, TL) have collaborated on the launch and commissioning of the centres, especially in the area of health care and medical assistance, water and sanitation and Infection Prevention and Control (IPC).

Besides the ETC construction, SRC worked in the recruitment and training of local staff (200 people) following the protocols established by the World Health Organization and MSF.

More than 1,000 patients were admitted in both centres.

### ➤ SOCIAL MOBILISATION AND PSYCHOSOCIAL SUPPORT PILLARS

Social mobilization and beneficiary communication pillar is essential to promote necessary behavioural change for reducing transmission. Community understanding, engagement, ownership and implementation of prevention and control measures is ensured through effective social mobilization and two-way communication with beneficiaries, community leaders and religious leaders to prevent further transmission and control the outbreak.

In coordination and collaboration with other actors involved in the control of the disease within and outside the Red Cross Movement (WHO, UNICEF, IFRC, etc.), SRC contributes to social mobilization in order to raise awareness and knowledge in the communities regarding Ebola prevention and control measures, with special emphasis on attitude and behaviour change activities.

Special attention to key groups such as women and youth in countries affected by the disease, and in neighbouring countries. Youth groups, mothers' groups, farming cooperatives, traditional leaders and associative groups are involved.

Psychosocial support is also a priority during an Ebola outbreak. To engage people and families in a meaningful dialogue to address stigma, dispel rumours or misperceptions of the disease, and highlight the importance of seeking early treatment and provide opportunities for communities to voice their say and ask questions using different communication mediums, is fundamental for disease control.

Planned activities within this action line include:

- Risk factors analysis and identification at the community level
- Community mobilization for prevention, response, psychosocial support and the fight against stigma and discrimination.
- Red Cross staff and volunteer training on:
  - ✓ transmission routes and preventive measures
  - ✓ tools for community mobilization activities
  - ✓ psychosocial support
  - ✓ safe and dignified burials
  - ✓ epidemiological surveillance and contact tracing
  - ✓ basic family protection measures including livelihoods
- Support to safe and dignified burials activities (includes mobilizing volunteers and staff and the equipment and supplies needed to ensure effective and safe management).

SRC is currently developing a bilateral project in partnership with Sierra Leone Red Cross Society in order to reduce Ebola Virus disease related mortality and morbidity, through social mobilization and psychosocial support.

Two main outcomes have been identified: 1) National Society has better Ebola preparedness 2) Recovery of community life and strengthen the population at risk.

This nine-month project is running since January, up to September, with a geographical scope focused in Tonkolili and Moyamba districts.

From the beginning, SRC has supported National Societies of the region (Liberia RC, Guinea RC, Sierra Leone RC, Mali RC, Guinea Bissau RC) in their response to stop the epidemic with donations to support contingency plans.

## **2. ACTIVITIES AT EU LEVEL AND FOR INTERNATIONAL ORGANISATIONS**

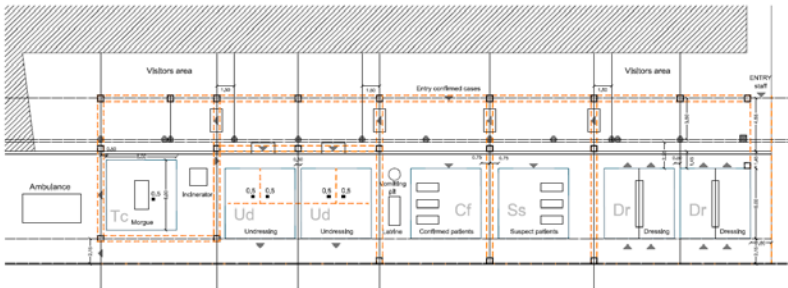
### ➤ EBOLA TREATMENT CENTER TRAINING

Taking the advantage of the experience working in the ETCs, and with the aim of serving RC delegates and other institutions working in the fight against the epidemic, SRC organized Pre-Deployment training courses (PDC) for all the

staff to be deployed to Ebola environments, in collaboration with IFRC. In this training, participants acquire knowledge and skills to perform their work in a ETC, under the required safety conditions.

This introductory training course is offered to all experienced delegates who are about to be deployed for the first time to an Ebola environment. The purpose of the training is to ensure that all trained staff has sufficient knowledge of the disease and its transmission routes and is able to adopt safe behaviour and work efficiently in a well-designed ETC. The two-day training combines theory, practice and an opportunity to meet colleagues returning from West Africa Ebola outbreak operation. The training is relevant for nurses, doctors, water and sanitation specialists, paramedics and other staff that will be working in an ETC.

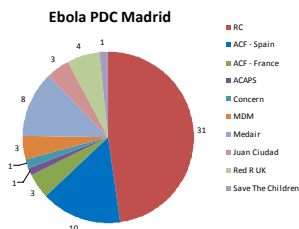
This training resource gives the possibility of practising real situations.



An ETC “simulator” reproducing as closely as possible an ETC structure, was built in Madrid, in order to add realism to the training and improve quality. This simulator consisted on different areas to practice the correct flow of patients and staff within the centre, dressing / undressing area, patient isolation area (suspected, probable, confirmed), dead body management, waste management and ambulance area .

Participants from Red Cross National Societies as well as other international organisations have attended the training (Canadian Red Cross, British Red Cross, Australian Red Cross, American Red Cross, Norwegian Red Cross, ACF, MDM, Save The Children, MEDAIR, ACAPS, Juan Ciudad, Concern...)

More than 15 trainings have been facilitated and more than 200 participants benefitted from them.



## ➤ EBOLA TREATMENT CENTER CONSTRUCTION GUIDE

Based on the experience gained in the field, the Ebola Treatment Centres “construction guide” intends to contribute sharing knowledge within RC and outside. This guide covers technical recommendations arising from practical experience: differentiation between areas of high risk and low risk, incinerators, chlorinated water control and chlorine proportions, natural water, light, safe distance between beds and tents, roofed corridors.

The essential humanitarian needs for the welfare of patients are covered in the guide. Required needs and characteristics the centres must have to become a place for dignity and hope, are described in the guide.



Very important requirements apart from medical care, disease isolation and infection prevention and control is that patients could have a dignified care trying to minimize isolation requirements and feelings. Due to the special characteristics of the disease and the fear and stigma involved in the process, is therefore important that the Ebola Treatment Centres are open spaces. This would help decreasing fear and isolation for patients and relatives.

The guide is a tool that facilitates decision-making and planning to future interventions and could help treating Ebola affected populations in a safe and dignified way.

### ➤ EBOLA ON-LINE TRAINING

Spanish Red Cross developed an online training in different languages, focused on Ebola disease and accessible to RC staff and other organisations.



### ➤ STAFF RETURNING FROM EBOLA-AFFECTED COUNTRIES

Due to the active presence of SRC in the response to Ebola virus outbreak in West Africa and the presence of Red Cross delegates in the affected areas, follow up protocols were developed for monitoring and detecting first symptoms of possible infections of delegates on their return, in collaboration and coordination with Spanish Public Health authorities.

Due to this and in order to track delegates health, a procedure was agreed in coordination with Spanish Public Health authorities. The procedure for internal use was approved by the Public Health Commission and Centre for sanitary alerts and emergencies.

This procedure intended to:

- Identify Red Cross delegates who might have been exposed to the Ebola virus in the West African countries affected by the epidemic.
- Ensure follow-up for 21 days after the last exposure, in order to detect early symptoms and diagnose or exclude the disease.
- Take appropriate control measures to prevent the occurrence of secondary cases.

### ➤ ASSISTANCE TO IRREGULAR IMMIGRATION

SRC works in the context of various agreements signed with the Spanish government, in providing basic assistance (clothing, food, health care..) and protecting health and lives of people arriving to Spanish coasts, as well as in settlements in different locations throughout Spanish geography (Huelva, Seville, canary islands...). This services are provided through "Immediate Emergency Response Team (ERIE)- Humanitarian Aid to Immigrants"-



Following the Ebola outbreak in West Africa and given the possibility of receiving immigration from Ebola affected countries, different guidelines were developed for the staff working in the Immediate Emergency Response teams (ERIE), in order to be prepared for the possibility of an affected person arriving to any of the centres or services that SRC is running:

- Reception centres (Humanitarian Aid, Asylum seekers and Refugees..)
- Temporary centres for immigrants (Ceuta and Melilla)
- CIE
- Asylum room at Madrid and Barcelona airports

### ➤ SPANISH AUDIENCE SENSITIZATION

Raising awareness and fighting stigma has been a key role for SRC at the national level.

SRC has developed a Red Cross website with specific information for Ebola. <http://www.cruzroja.es/enfermedadebola/>

Visits to ETC in Madrid have been organized in order to provide general information sessions on Ebola and our work in West Africa ( brief introduction to the disease and working in a treatment centre with a subsequent tour of the different areas in the simulator) .

Red Cross and non-Red Cross members have attended these visits: Red Cross volunteers, media, Governmental institutions, private enterprises, donors, Spanish Ministry of foreign affairs, AECID, Nursing associations, PAHO, Spanish Ministry of Defence, Madrid Health services, Hospital managers, RC staff and relatives.

More than 45 sessions have been facilitated with more than 800 people reached.