

Government's Post Ebola plans Highlight Survivors Empowerment and welfare



Dr. Jerry Brown and Survivors being discharged from the ELWA II ETU

More than 1,500 Liberians have survived Ebola Virus Disease Outbreak in Liberia . Many have faced challenges when rejoining their families and communities as well as facing practical challenges in re-gaining em-

ployment due to fear and stigma.. Numerous efforts have been made by the Government of Liberia and its partners to empower survivors so as to meet the huge demands of the lack of basic social needs. The range of assistance include Monthly cash stipend of \$150 to 1200 survivors for 6 months for community work (survivors will be hired to act as referral mechanisms for vulnerable children, referring them to available services in close collaboration with county social worker, and providing PFA, Provision of basic business skills training for 1200 survivors to gain money management knowledge so as to best utilize the stipend, empowerment/Capacity building of survivors in PFA and the basics of child protection,

Cash assistance is given to Survivors and Victims’ families in 3 installment in the Liberian Dollars equivalent .This process is done through Mobile Money –Lone Star Company. ·Conduct individual and group therapy to reduce the level of post-traumatic stress disorder as it relates to EVD. Give out awareness on EVD and preventives methods through the Hotline, and Community awareness. Counseling Survivors and victims’ families who are distressed due to the EVD through the Hotline. ·Provide Psycho-care package (Pot set, plates, cups, few cups of rice, red oil, sardine, cube salt, etc.) to survivors/ victims’ families who are desperately in need.

LiLast EVD Survivor Discharged from the Chinese ETU



EVD Survivor Beatrice Yardolo pose for a picture with dignitaries and Chinese Medical Team

Liberia has Discharged its last Ebola patient on March 5, 2015 from the Chinese ETU in Monrovia. Beatrice Yardolo expressed on the day that she was discharged,

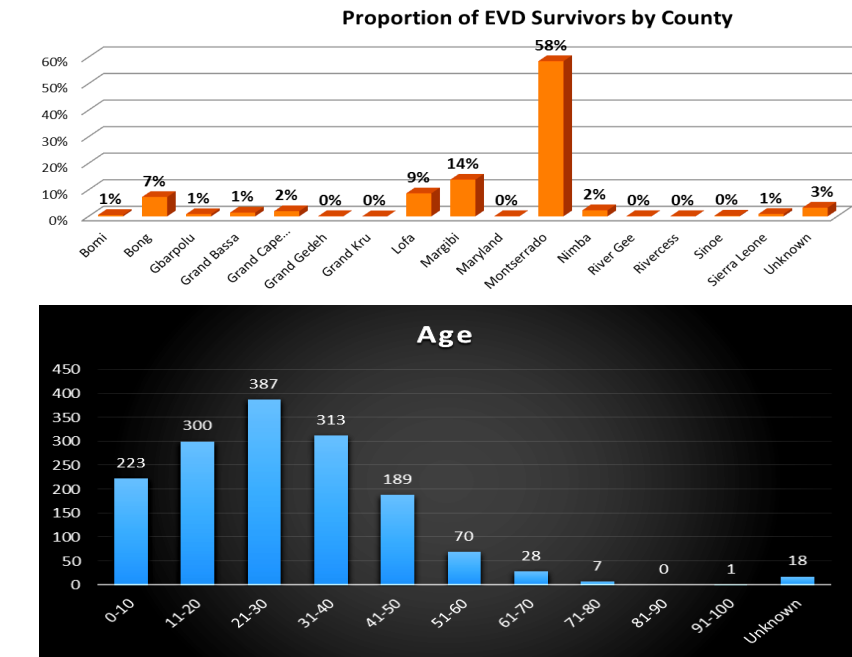
"I am one of the happiest human beings today on earth because it was not easy going through this situation and coming out alive," 58-year old English `teacher Beatrice Yardolo. She kept thanking God and the health workers at the Chinese-run Ebola treatment center in the Paynesville, Monrovia, where she was admitted on February 18, 2015 when Liberia had gone 28 days without a case. Since the outbreak began in December 2013, nine countries have been infected with the virus, and 9,807 of them have died, according to the latest figures.

Of those, 9,249 cases, including 4,117 deaths, were in Liberia, which six months ago was reporting more than 300 new cases each week. At the height of the epidemic in a country whose health infrastructure had been ravaged

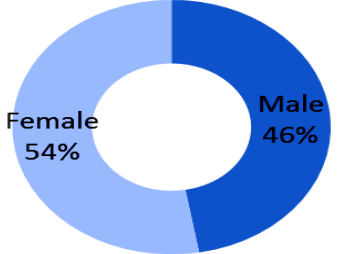
by two back-to-back civil wars and overflowing health clinics . But a huge national and international response helped stem the spread.

Of 45 samples tested nationwide last week, none were positive, WHO said, adding that it was first time there had been no new confirmed cases since May 26, 2014. The outlook was less positive in Guinea and Sierra Leone, the other countries affected by the outbreak, which jointly reported 132 new confirmed cases few weeks ago.

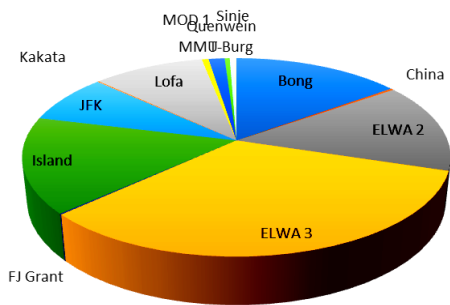
Analysis of line-listed EVD SURVIVORS (n=1,536)



EVD Survivors by sex



EVD Survivors by ETU of Discharge



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Health Minister Designate , Dr. Bernice Dahn

Some achievements of Dr. Bernice Dahn during her tenure as Chief Architect for Health Services/CMO

Since 2005, the country has made great effort to rebuild the health system through reform and introduction of the basic package of health services (BPHS) under the National Health Policy and Plan 2007 – 2011 and later the Essential Package of Health Services (EPHS) under the National Health Policy and Plan 2011 – 2021 all of which defined the type of services to be delivered at every level of care, inclusive of the minimum levels of resources required to provide the package, namely infrastructure, equipment, drug availability and human resources. As chief architect, the total number of health facilities has increased from 618 in 2010 to 725 in 2014, according to the HMIS data. This corresponds with one health facility for 5,500 people. In 2014, there were 35 hospitals, 51 health centres and 639 clinics (as well as 137 pharmacies). Overall, 22% of the health facilities were private – for – profit of which nine out of ten were located in Montserrado and Margibi Counties. Facility density ranged

from 1.0 per 10,000 population in Bong County to 2.9 in Sinkor County. The total number of clinical health workers increased from 1,396 in 1998 to 4,653 in 2010. The overall total workforce also grew by approximately 19% from 8,072 in 2011/12 to 9,589 in 2012/13. As of October 2014 there were over 10,000 health workers (October 2014 MOH database of public sector health workers) that were either on Civil Service payroll and/or receiving donor – funded incentives. The public health workforce included 117 physicians (0.03 per 1,000 population), 436 physician assistants (0.08 per 1,000 pop), 2137 nurses (RN/LPN) (0.4 PER 1,000 POP) and 659 midwives (0.12 per 1,000 pop) which presented a 30% increase for 50 – 60% increase for the other three core health professionals since 2009. Through the collaborative efforts of the Ministry of Health Incident Management System, partners, line ministries, donors, health care workers, response teams and communities, the

EVD Outbreak was brought under control by the close of the year. Two-thirds of children under one received pentavalent 3 vaccines and 95% received pneumococcus first dose vaccines. Liberia introduced Pneumococcus Conjugate Vaccine (PCV) and named an ambassador for immunization. Distributed 900,000 insecticide treated nets to health facilities for ANC clients. Screened and surgically repaired 59 fistula victims (32 were completely dry after surgery) and 10 survivors were economically empowered and reintegrated into their communities, while 24 awaits the completion of their training cycle program; Finalized the National Donation Guidelines of Liberia (NDGL) and the National Medicine Policy of Liberia pending official launch by the Ministry of Health. Planned, organized and hosted the 15th Assembly of ECOWAS Health Ministers Meeting in Monrovia in April 2014;

WHO Africa Region Director Visits Liberia



Dr. Moeti posed for a picture with high level staff of MOH and partners

Regional Director for Africa of the World Health Organization (WHO), Dr. Matshidiso R. Moeti, has paid a three day visit to Liberia. Her visit will include significantly, a meeting with President Sirleaf at the Foreign Ministry. Dr. Moeti's itinerary was loaded with meetings, including a visit to the Redemption Hospital and Zuma Town at St. Paul Bridge Community and finally held a joint press conference with the Ministry of

Foreign Affairs. In a meeting with senior staff at the Ministry of Health, Dr. Moeti expressed her pleasure to be in Liberia at that very positive moment when things worked wonderfully to the Ebola epidemic in the country and the sub-region. She acknowledged the formidable leadership of departing Health Minister Dr. Gwenigale and Health Minister-designate Dr. Bernice Dahn have demonstrated throughout the Ebola Virus Disease outbreak response. The WHO Africa Region Director said that the national approach has now made Liberia move toward zero cases. "I am very optimistic that on the 9th of May, wherever we will be, we will be jumping up and down that Liberia has been declared Ebola-free. I am very confident of that", she said. In a rather more serious tone, she admitted that "WHO have learned a lot," she stressed. She stated that "in a next outbreak, while WHO

will be sending data managers and epidemiologists, they will also include social scientists, who know how to communicate with the communities from the very beginning of such outbreak". She also praised President Ellen Johnson Sirleaf for leading the robust response Liberians exhibited toward the on-going Ebola fight. At the meeting, she was presented with a very beautiful embroidered Quilt as gift from the Ministry of Health. Following the discussions, Dr. Moeti was taken on a guided tour of the facilities of newly erected Ebola Operation Center of the Incidence management system which is headed by Deputy Minister Tolbert Nyenswah. On her departure, she expressed her optimism that with the level of organization and readiness, Liberia will surely go to Zero and will adequately and timely respond to future outbreaks.

Findings of the KAP study

Awareness, knowledge and about EVD

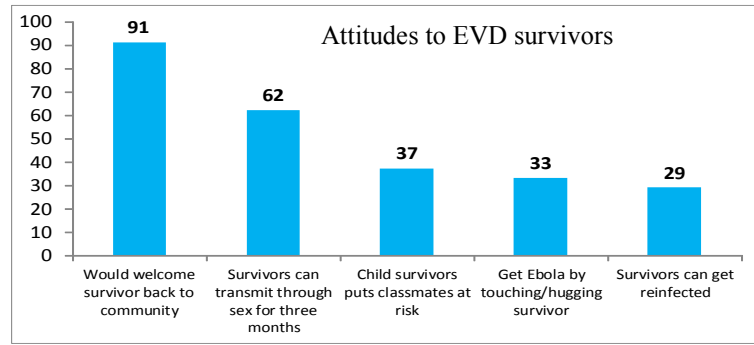
- 100% Awareness of Ebola
- 99% reported three or more correct forms of transmission
- 84% mentioned vomiting as an Ebola symptom
- 80% mentioned diarrhoea as an Ebola symptom
- 96% said Ebola could be prevented by avoiding funeral or burial rites that involve touching or washing the body
- 95% said Ebola could be prevented by avoiding physical touch with a person showing symptoms of Ebola

Misconceptions about EVD

- 33% said Ebola could be spread by mosquito bites
- 26% believed Ebola could be prevented by bathing in salt and hot water

Risk perceptions and attitudes

- 73% perceived no risk of getting Ebola – because they felt they were following all the preventive messages.
- 95% and more: accepted Ebola preventive strategies (isolation of symptomatic persons, ETU referrals, support for contact tracing, and quarantine of affected communities).



Government and partners validate robust investment plan



Cross section of participants of High level staff and partners at the validation workshop

The Government of Liberia, along with partners has embarked on critical and strategic priorities in the Health Sector. Government and its partners have instituted numerous initiatives to revitalize and strengthened the health sector which was completely devastated by the EVD Outbreak Key among these efforts was the development of a ten year National Health and Social Welfare Policy and Plan and the essential package of health services. The Investment package was designed to With these initiatives, a number of significant achievements were scored in the health sector including the attainment of MDG 4 and improvement in access to health and social services from 40% - 80%, among others.

Following three days of deliberation the investment plan was validated and endorsed, and will be presented by the President of Liberia at a pledging (Donor) conference in Washington, DC, from 17-19 April, 2015 spear headed by the World Bank.

These investment areas will focus on nine key components which will contribute collectively to address critical health systems preconditions to attain the defined targets. They are summarized as follows:

- Fit for purpose productive & Motivated Health Workforce**– The Health Sector investment priorities will focus on the implementation hiring plan to absorb up to 4133 public sector health workers into government payroll based on priority restoration needs. The sector will focus on ensuring hazard pay

and benefits to health workers are sustained to maintained their motivation levels

- Re-engineered health infrastructure**-The infrastructure priorities will focus on updating the norms for infrastructure, equipment and transport, and institutionalization of fleet and logistics management, to facilitate better management and efficient use of the available transport and logistics system. In the transition period, the priorities include the decommissioning of the ETUs and CCCs and reposition the existing WASH and other resources to health facilities, schools and border areas and establishment of triage and isolation infrastructure in all health facilities.
- Epidemic Preparedness and system**-The sector is focused on improving and sustaining the quality of surveillance at a level able to detect suspect EVD cases in areas with, or without active EVD transmission. Nationally, an Emergency Operations Centre (EOC) is being established, including an incident Management System (IMS) to coordinate the response. Eventually this together with the enhanced public health laboratory network will form part of the Public Health Institute, also to be supported in this plan. In addition, significant cross border collaboration is prioritized in the context of the Mano River Union to ensure information and resource synchronization. .
- Management capacity for medical supplies and diagnostics** -The sector will focus on asset transfer and transition of medical supplies and diagnostics capacities used during the EVD response to the routine health services, and scale up the purchase of essential medicines and supplies for all the reopened facilities. Accelerate procurement according to quantified needs (for drugs, supplies, equipment & machinery).
- Enhancement of quality services delivery systems**-The sector will accelerate capacity improvements in warehousing and distribution, purchase required essential supplies and incorporate all equipment (like incinerators for medical waste) remaining after EVD response into regular system. In the investment plan period the sector focus shall be to build adequate capacity for management of required medicines and supplies at all levels.

In the transition phase, the sector focus shall shift towards ensuring effectiveness of care and patient – centeredness of services, in line with the EPHS, to rebuild the trust with communities. In the health system restoration period, the overall focus shall be to restore and enhance serve delivery systems to ensure quality of care for clients and a safe working environment for health staff. The additional priorities shall focus on ensuring a comprehensive look at issues of quality of care addressing all its six dimensions (safety, effectiveness, timeliness, efficiency, equity and patient-centeredness).

- Comprehensive Information, research and communication management**-The information, research and communication systems were highlighted as a key weakness, limiting the availability and use of information to guide decision making in the line with this, the sector will prioritize the following interventions to strengthen the overall capacity for information management.
- Sustainable community engagement**-In the immediate period, the sector will focus on deepened community engagement, through sustained social mobilization strategies using community volunteers. In the transition period, the health sector will focus on integrating the developed community systems into the formal health services for preparedness and response to epidemics and disasters. These structures include the County and District task forces, County and District disaster management committees, County rapid response teams and Community health development committee. Development of messages for restoration of health care services focusing on why people need to seek timely care, safety of the health facilities will be prioritized.
- Leadership and governance capacity**
- Efficient health financing systems**-The health sector will work towards putting in place sustainable health financing systems that will ensure efficiency and equity in use of health resources.

Expanded program on Immunization Launches Integrated Measles Campaign to Boost Routine vaccines coverage



A child being given Polio Vaccine

Measles is one of the leading causes of death among children under 5 even though a safe and cost-effective vaccine is available. Compared to other vaccine-preventable diseases, measles is particularly contagious and is associated with significant mortality.

Before the EVD Outbreak, Coverage Was Reaching Target (2013 89% coverage (Penta 3) with efforts to increase utiliza-

Government of Liberia Celebrates one year of EVD Outbreak response



Cross Section of Attendees at the Decoration Memorial Services

Government Officials Health Partners, members of the international community , and the general citizenry converged at the Presbyterian church at the corner of Broad and Johnson streets to observe the 99th memorial ceremonies of Decoration day in Liberia. The second Wednesday in March each year is set aside to remember the dead. Activities marking the day include Memorial Service, cleaning of the various Cemeteries

tion of services & raise awareness beyond Polio campaigns alongside a Focus on Urban Montserrado .

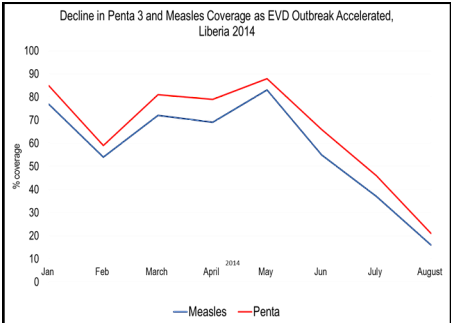
A justification of such strategy was a statistical explanation that 33% (49,628) of under 1 population live in Montserrado with 9 out of 10 people living in densely populated Monrovia District. Only 98/241 facilities in the county provide RI services. Out of these, 80% of these are private facilities. Montserrado has more unvaccinated children than all other counties combined (2012) with 5971 children missing Penta 3 and 12,938 children missing Measles.

According to the 2102 RI coverage survey, Lack of Information is a key reason for under Vaccination with bother reasons which caused a negative Impact of EVD on Routine Immunization such as fewer health care workers or closed facilities, Health workers were afraid to provide services, parents afraid of health care workers and facilities and rumors of the “Ebola vaccine”.

This led to the low coverage of the Periodic intensification of Routine Immuniza-

tion (PIRI) Dec. and February rounds. The Effect of these reasons resulted into Measles outbreaks in Montserrado, Grand Bassa and Bong Counties whereas an outbreak in Maryland county.

With this situation, the Expanded program on Immunization (EPI) will on May 8-14, 2015. conduct the National Integrated Measles Campaign which will be



Graph showing the decline of Measles and Penta Vaccines Coverage

targeting all children under the age of five years old in order to to Reach Children with Measles Vaccine and Increase Routine Immunization Coverage .

which are the “ final resting places of our loved ones among others.

This year’s observance coincides with a one year celebration of planned activities to mark the commemorate the events. this one year anniversary presents an opportunity for a series of events across Liberia to mourn for those who have been lost, highlight the achievements in the containment of the disease and remaining challenges to get to zero. The Celebration draws its significance from the devastation caused by the Ebola Virus Disease outbreak which severely affected our national Socio-economic fabric by taking away 3,747 lives. They are being considered s ‘Heros’ and individual whose demise draw the attention of the international community to the devastation caused by the EVD outbreak.

The devastation caused by the impact of the of Ebola Virus Disease in Liberia cannot be overemphasized .The current Ebola Virus Disease outbreak in West Africa, (initial cases identified in March 2014), is the larg-

est and most complex Ebola outbreak resulting in more cases and deaths than all previous instances combined.

Liberia is among one of three countries most severely affected by the outbreak. The outbreak exposed weaknesses of the healthcare system, which has taken a heavy toll on Liberians directly affected, as well as their families and health care workers involved in direct care in the response.

There are 3,143 cumulative confirmed cases and 3,747 cumulative confirmed deaths. There are nearly 4,000 children who have lost one or both parents to Ebola. Of the 371 healthcare workers infected with the disease, 179 have died. At present, over 1,400 people have survived the virus. Men, women and children have fought valiantly throughout these challenging times. At this one year anniversary, it may now be an important moment to recognize individuals, families and communities through a national set of commemoration events

Important Message for Routine Vaccination

TAKE YOUR BABY TO THE CLINIC FOR VACCINES 5 TIMES BEFORE THEY REACH 1 YEAR OLD



DON'T WAIT! YOUR BABY'S PROTECTION IS IN YOUR HANDS

Vaccinate all your children below 1 year of age against Polio, Measles, Tetanus, TB, Whooping Cough, Diphtheria, Hepatitis B, etc.

Measles & Polio Vaccines and Deworming Campaign

from **May 8-14, 2015**

Carry all children under 5 years old to any health clinic, hospital or vaccination site to get their Measles and Polio Vaccines and worm Medicine

Bring your child's vaccination card with you

Vaccines help give your child a Healthy start!

all vaccines for children are **Free and Safe!**

And Partners