

SAVING  
LIVES  
CHANGING  
LIVES

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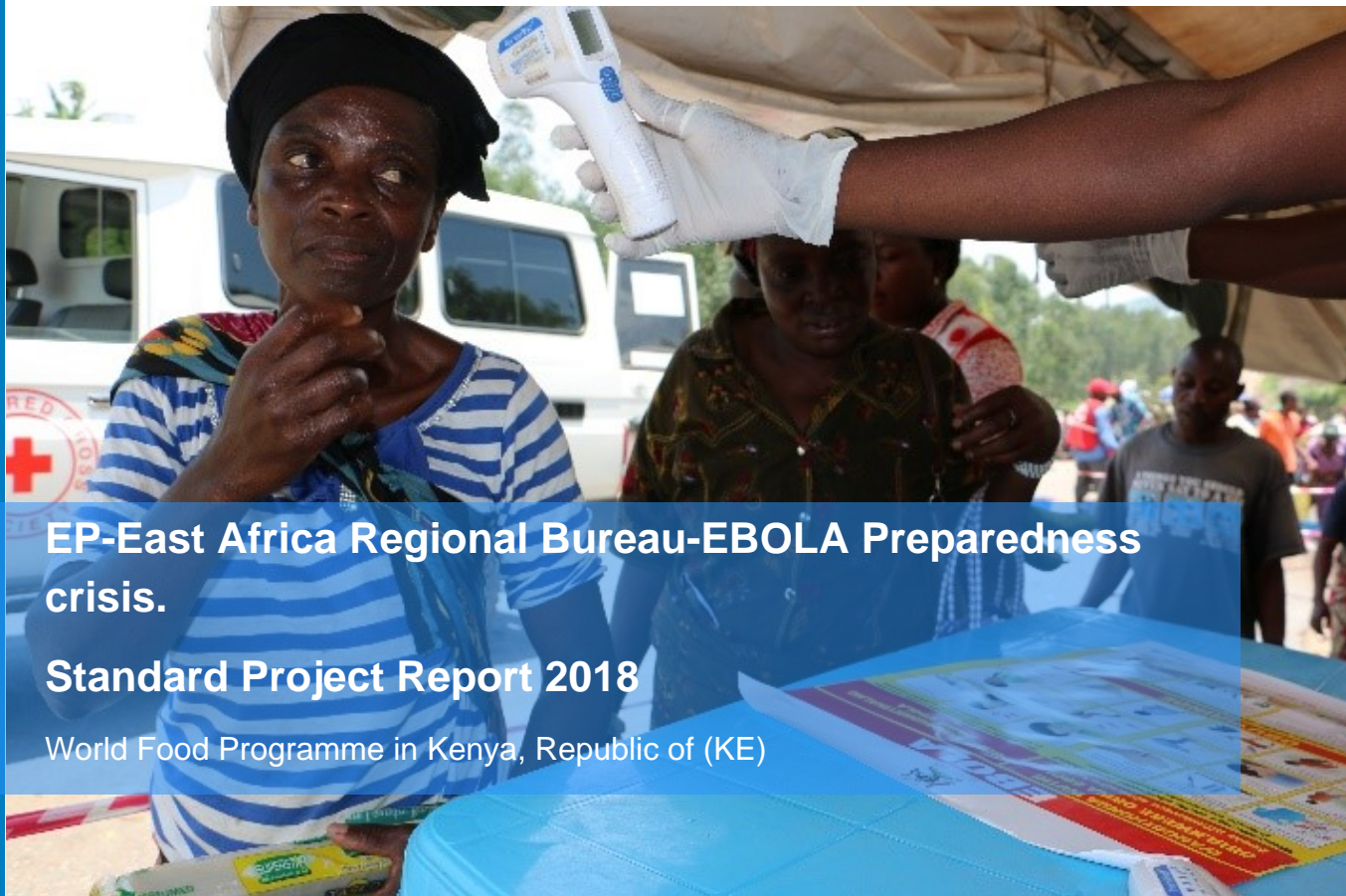
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<http://www.wfp.org/countries>  
**SPR Reading Guidance**



**EP-East Africa Regional Bureau-EBOLA Preparedness crisis.**

**Standard Project Report 2018**

World Food Programme in Kenya, Republic of (KE)

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# Regional Context

## Regional Context

Since it was first declared in North Kivu province on 1 August 2018, the Ebola Virus Disease (EVD) outbreak in Eastern DRC has remained extremely worrying with a steadily increasing number of cases and the center of gravity of the outbreak moving south towards Goma. Confirmed cases have also been reported in Ituri province. As of 31 December 2018, 608 Ebola cases and 368 deaths had been reported (confirmed and suspected). North Kivu and Ituri are among the most populated provinces in DRC. They share borders with Uganda and Rwanda and experience conflict and insecurity, with over one million internally displaced people and migration of refugees to neighbouring countries.

In addition to Uganda and Rwanda, WHO also declared South Sudan and Burundi as 'Priority 1' countries for Ebola preparedness. The high risk of spread to these countries is exacerbated by continued insecurity and attacks within the outbreak area, which has prevented proper contact tracing and vaccinations. The busy border crossing of Mpondwe in Uganda is located only about 40 kilometers from the initial centre of the outbreak area in Beni, DRC.

The 'epidemiologic curve' (number of new cases per week) showed no signs of declining by the end of the reporting period and the epidemic is expected to continue well into 2019. The protracted nature of this outbreak further increases the risk to neighbouring countries. The Ministries of Health in all the four Priority 1 countries have set up national Ebola preparedness task forces to coordinate the overall preparedness efforts, supported by WHO and other partners such as WFP, UNICEF and the U.S. Centre for Disease Control (CDC). Significant resources have also been committed by national governments through their existing health system to strengthen Ebola prevention and preparedness.

## WFP Objectives and Strategic Coordination

To help save lives through increased Ebola prevention and preparedness within the region, the WFP Regional Bureau Nairobi's more specific objectives included the following:

- To prevent spread of Ebola to any country in the region, including through increased screening and isolation capacity at Points of Entry from DRC;
- To strengthen national preparedness and response capacity, including through provision of common logistics services to Ministries of Health and other partners;
- To support the Ebola response in DRC if and when required.

In terms of strategic coordination, the Regional Bureau liaised closely with WHO both at regional and country levels, including to identify key items and services that WHO might require from WFP in the event of an Ebola response within the region. In addition, WFP organized three donor briefings in Nairobi together with WHO, which were attended by an increasing number of other UN agencies as well. The briefings provided an opportunity to network with key donors and to outline WFP ambitions and requirements, especially with regard to plans for the regional common logistics services facility in Entebbe, Uganda, for which a concept note with specific funding requirements was developed and shared with key donors.

## Regional Achievements

On 8 August 2018 – a week after EVD was declared in Eastern DRC – RBN started deploying staff to the four countries identified by WHO as Priority 1 for Ebola preparedness, namely Uganda, Rwanda, Burundi and South Sudan. This resulted in identification of needs for WFP support, which were identified in close collaboration with WHO and the Ministries of Health in each country. In addition, initial WFP-internal preparedness ('IR-PREP') funding was mobilized. Regional support needs were identified, including the need to set up a regional common logistics services facility in Entebbe, Uganda, and to appoint a Regional Ebola Preparedness Coordinator based in Nairobi, Kenya.

The work done at the country level helped inform the drafting of a Regional Concept of Operations (ConOps). The main initial WFP focus was on preventing Ebola from spreading to any of the Priority 1 countries through provision of border infrastructure at Points of Entry from DRC such as screening and isolation units (tents and containers). Isolation units were also provided at district hospitals and thermal temperature scanning equipment was installed at Entebbe Airport in Uganda. In addition, free storage and transport was provided to partners and several ambulances purchased to safely transport suspected Ebola victims.

A risk assessment was conducted by Regional Bureau Nairobi staff in Uganda in September/October 2018. Recommended risk mitigation measures included: (a) revision of the SOPs for conducting food distributions in EVD contexts to minimize potential spread of the disease; and (b) the distribution of Personal Protective Equipment

(PPEs) to WFP staff.

In addition, WFP as the UN lead agency for logistics common services commenced the establishment of a regional common services logistics facility in Entebbe, Uganda, with the objective of facilitating fast movement of humanitarian assistance and personnel, pre-empting and effectively addressing the most critical logistics constraints in the event of a regional Ebola crisis. For this purpose, a UN Humanitarian Response Depot (UNHRD) staff member was deployed to Uganda in order to look into potential warehousing and prepositioning issues.

In addition, the health supply chain structures of each Priority 1 country were mapped out and civil-military advice provided to country offices by a dedicated civil-military advisor in anticipation of a potential need to link up with national militaries as part of a WFP Ebola response. WFP Regional Bureau Nairobi also provided engineering advice on the design and construction of Ebola Treatment Units (ETUs) and isolation centres. Finally, WFP Regional Bureau Nairobi provided information management support, including a cumulative overview of assistance provided (infographics and progress matrix) as well as input to twice-weekly corporate WFP Ebola preparedness and response sitreps.

# Project Results

## Activities and Operational Partnerships

Across the four Priority 1 countries, partly thanks to IR-PREP funding received at the regional level, WFP had by the end of the reporting period:

- Put in place logistics coordinators in each country;
- Set up more than 50 screening and isolation units (mainly tents and modified containers) along the border to DRC, which helped identify more than 300 Ebola alert cases;
- Procured 13 ambulances for transport of suspected Ebola victims;
- Provided free storage and transport to partners engaged in the Ebola preparedness effort;
- Provided engineering advice on ETU design and construction in three countries;
- Developed SOPs on blood sample transportation;
- Transported 12 blood samples through UNHAS in South Sudan;
- Procured 200 sets of Personal Protective Equipment (PPEs) to enhance staff safety in the event of an Ebola response;
- Implemented two double-distributions of food to refugees in Uganda near the DRC border to reduce the risk of cross-contamination at large gatherings;
- Begun setting up a regional common logistics services facility in Entebbe, Uganda, based on agreements reached with the Uganda Ministry of Health and WHO.

WFP worked in close cooperation with WHO, Ministries of Health (MoH) and national Ebola preparedness task forces on designing and implementing these activities, which were based on specific MoH requests. All activities were conducted through direct WFP implementation, using commercial contractors as necessary. Monitoring of all activities is being undertaken by the monitoring & evaluation unit of the WFP Regional Bureau Nairobi.

## Results

On 30 August 2018 WFP was allocated USD 294,800 in IR-PREP funds to support regional Ebola preparedness, which allowed the Regional Bureau to scale up preparedness both at regional level and in support to country offices. An additional amount of USD 187,440 was allocated to purchase Personal Protective Equipment (PPE) and to recruit a Health Advisor to ensure safety of frontline WFP staff. The total IR-PREP funding amount allocated to the region in 2018 was USD 482,240. No direct donor funding was received at the regional level during the reporting period.

At country level, as a result of a funding request to DFID initially drafted by Regional Bureau, USD 1.7 million was received by the WFP Uganda Country Office for Ebola preparedness, which allowed it to further strengthen preparedness, including through procurement of additional isolation tents and ambulances and construction of an Ebola Treatment Unit (ETU).

IR-PREP funding proposals were also drafted for Uganda, Rwanda and Burundi, of which Uganda received USD 296,155, Burundi USD 398,385 and Rwanda USD 298,136.

Overall, WFP has advanced a total of USD 1.5 million in internal WFP IR-PREP funding for the Nairobi region at both regional and country level for Ebola preparedness. This has allowed deployment of key coordination, logistics and information management staff—including a Regional Ebola Preparedness Coordinator—as well as the early purchase of relevant supplies and equipment, significantly strengthening the regional Ebola preparedness efforts as illustrated below.

Within a week of the declaration in DRC of the current Ebola outbreak on 1 August 2018, a rapid needs assessment was conducted by WFP. As a result the alarm was raised on the need for improved border screening and isolation to prevent Ebola from spreading to Uganda and other countries. At that time, tens of thousands of people were crossing from DRC to Uganda at the busy Mpondwe border crossing point on market days, just 40 km from the key outbreak area at the time in Beni, DRC, largely without screening for signs of Ebola.

Partly as a result of WFP support in setting up screening and isolation units at Points of Entry with DRC, more than 300 Ebola alerts were since picked up and investigated along the border areas. Through UNHAS, WFP has facilitated transportation of blood samples in South Sudan, and supported development of SOPs related to the transportation of samples. Through this, WFP ensured that results of blood tests came back quicker, which helped reduce the risk of further transmission. Fortunately, no Ebola cases were confirmed in the region during the

reporting period.

WFP support has also facilitated the four Priority 1 countries to become more prepared for an Ebola outbreak in the highly probable event that the current Ebola outbreak will spread beyond DRC at some point. WFP support included procurement of ambulances for safe transport of suspected Ebola victims and provision of engineering support for site identification and design of ETUs, which WFP was requested to construct by national Ministries of Health in Uganda, South Sudan and Burundi.

In addition, WFP has been supporting the Ministries of Health with Ebola preparedness logistics coordination as well as health supply chain mapping, information management (e.g. mapping of border points) and civil-military coordination guidance. Lastly, initial preparations for the set-up of a regional common logistics services facility, including agreements reached with the Government of Uganda and preliminary discussion with the MONUSCO forward logistics base in Entebbe as a potential physical location for this facility, has further contributed to strengthening regional Ebola preparedness.

Throughout its activities, WFP aims to strengthen Government capacities whenever possible, including through handover of long-lasting equipment such as ambulances. Even if the current Ebola outbreak is contained in DRC, it is expected that WFP's prevention and preparedness efforts will be of value also for future outbreaks in the region through strengthened national and regional Ebola preparedness and response capacities.

## Implementation of Evaluation Recommendations and Lessons Learned

A 2016 joint WHO/WFP lessons learned exercise from the 2014-16 West Africa Ebola crisis, during which more than 11,000 people died, identified the following key lessons:

- WHO should strengthen operational emergency response capacity and clearly define its operational needs
- WFP should define the services it can offer to partners and undertake preparedness measures.

While WFP is now better prepared than it was in the lead up to the West Africa Ebola crisis—partly thanks to significant internal funding advances—there was still a need to clearly define the kind of services that WFP is able to offer to partners for Ebola preparedness and response. In addition, while WHO had strengthened its operational response capacity since the West Africa crisis, its operational needs vis-à-vis WFP's potential support capacity were still not entirely clear. Based on these lessons, WFP proactively engaged with WHO, Ministries of Health and national Ebola preparedness task forces to clearly outline WFP's potential support role, partly drawing on examples from West Africa and the current DRC response. This was followed up with detailed discussions with WHO and Ministries of Health on specific WFP support requirements, which became the basis for WFP's Ebola preparedness support during the reporting period.

# Figures and Indicators

## Data Notes

Cover page photo © WFP/Lydia Wamala

A woman has her temperature checked at the Uganda/DRC border crossing