WFP’s Response to the Ebola Outbreak in DRC - 24 December 2018

WFP has provided food assistance to 86,000 people affected by Ebola in DRC since August 2018.

Despite the joint efforts of the government and the wider response community to halt the spread of the epidemic, the outbreak has spread in the provinces of North Kivu and Ituri, and there is a high risk that it might extend further afield.

The World Health Organization (WHO) has declared this tenth Ebola outbreak in DRC the second largest in history, with 580 confirmed and probable cases and over 330 deaths.

COMPLEX OPERATING ENVIRONMENT

The context of this particular Ebola outbreak is exceptional: Beni territory in North Kivu, the epicentre of the crisis, is an active conflict zone. Some of those who need to be monitored and treated for Ebola live, or flee into, areas controlled by armed groups. Such areas are difficult and risky to access, requiring intensive negotiations to plan the nature and duration of interventions. Not all the armed groups cooperate with medical response teams. Indeed, meaningful dialogue is unlikely with militias such as the Allied Democratic Forces (ADF), allegedly responsible for the killing of civilians in the Beni territory since 2014.

The volatile security environment and a relatively mobile population mean the epidemic has spread to new areas, including some previously declared Ebola-free. Intensive efforts to trace people who have been in contact with Ebola patients continue. Some hide from medical teams, out of fear and misconceptions about Ebola and how it spreads. At least 200 people who could be carrying the virus have not been traced by medical response teams. Equally worrying, many new cases cannot be traced back to registered Ebola patients, meaning they contracted Ebola from unknown carriers. Community resistance to medical response teams remains a major challenge, especially in the newly-contaminated areas.

The vaccination campaign is ongoing, with more than 49,000 people vaccinated since the start of the crisis. So far, it has prevented the epidemic from spiralling out of control, but inoculation alone will not extinguish it as infected people cannot be traced, or refuse treatment.

Given the complex environment, WHO experts foresee an expansion of the epidemic southwards. Presidential and legislative elections scheduled to take place on 23 December, as well as the post election period, could lead to a spike in transmissions, in the event of political instability and displacement. Experts reason that DRC’s tenth Ebola is likely to persist for several more months.

WHAT IS THE ROLE OF WFP?

- WFP supports the medical response to Ebola, led by the Ministry of Health and WHO.
- Its role is two-fold: first, to provide operational support to medical response teams through a range of logistical services; second, to help contain the spread of the virus by providing food and nutrition assistance to people affected by the disease.
- Food parcels from WFP on a weekly basis ensure that those suspected of carrying Ebola, and their families, don’t need to leave their homes to buy food while under medical observation. The more suspected cases stay in one place, the less likely it is the virus will spread.
SCALING UP WFP FOOD AND NUTRITION ASSISTANCE

As of 12 December, WFP has reached over 86,000 people with food since August. They include “contacts” of Ebola patients, discharged patients, health-care staff, frontline personnel and those who have recovered from the virus. People who have been in contact with Ebola carriers, and who may therefore be carrying the virus, constitute 90 percent of the caseload. They receive maize flour, beans, vegetable oil, salt, fortified flour and special nutritional paste on a weekly basis. New lists of potential virus carriers are shared every 48 hours by the Ministry of Health. WFP responds within 48 hours, in cooperation with distributing partner CARITAS. This helps contain the spread of the virus. At the end of November, WFP, in partnership with a group of Ebola survivors, began food distribution to about one hundred other Ebola survivors. Distributions will continue each month, for a year.

Thirty WFP national and international staff are working directly on the Ebola response and additional distribution teams are being formed and deployed to step up distributions and support WHO in Butembo town and southern Ituri province, where new cases have been reported.

WFP LOGISTICAL SUPPORT

WFP expanded its warehouse capacity in Beni with the erection of two Mobile Storage Units (one for food and one for WHO supplies). Due to the high number of cases reported south of Beni, logistics staff were deployed there to help WHO build a new Ebola Treatment Centre.

A new community football pitch laid out by WFP in Beni was opened on 4 December, replacing a nearby pitch used to build an extension to an Ebola Treatment Centre.

Around 90 metric tons of various commodities are delivered per week to WFP’s cooperating partner, CARITAS, using WFP trucks. Additionally, some 140 cubic metres of cargo are dispatched weekly to WHO partners, warehouses and health centres.

PREPAREDNESS

The Ebola Strategic Coordination team is adopting a ‘big ring approach’ in towns south of Beni, including, Goma and Lubero. This is designed to prevent the spread of Ebola. The approach consists mainly of vaccinating health workers operating in these areas. However, the level of insecurity in the North Kivu province is particularly concerning, with frequent abductions and attacks by armed groups. The risk of Ebola spreading further remains high. WFP is preparing to react promptly to new outbreaks in other parts of DRC, especially in urban areas.

The European Civil Protection and Humanitarian Aid Operations, (ECHO) is funding WFP’s Ebola response.

FUNDING

The Ebola response remains underfunded and WFP is currently reviewing its requirements for the months to come. Additional funding will be required to sustain WFP’s support to the Ebola response in the continued fight against the virus.