



In this issue

Ebola Outbreak Update P.1

Niger: Concerns of Crisis P.4

Gambia: Worrying Food Insecurity P.5

Sahel Food Update P.5

Funding Overview P.6

HIGHLIGHTS

- **Hotspots:** Burkina Faso hosts violent protests, President ousted; Niger attacked by Mali-based group; insurgents take city in Nigeria.
- There are presently 13,567 cases of Ebola Virus Disease (EVD) in West Africa that have resulted in 4,951 deaths.
- Mali reports its first Ebola case. Nigeria and Senegal are declared Ebola-free.
- WHO to lead Ebola preparedness missions over next six weeks to 15 countries in West Africa.
- Northeast Nigeria to experience Crisis level food insecurity through end of 2014.
- 150,000 displaced persons from Nigeria expected in Diffa, Niger, by year's end.
- 200,000 Gambians are in urgent need of food assistance.

KEY EBOLA FIGURES

No. of Cases 13,567

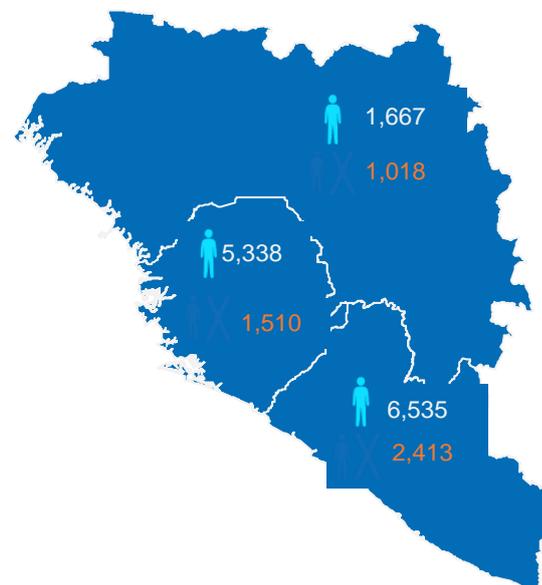
No. Of Deaths 4,951

No. Countries Affected by West Africa EVD Strain 8

Ebola Outbreak Update

Outbreak Exceeds 10,000 Cases, Major Response Scale-up Planned

The Ebola outbreak in West Africa continues to expand its reach both in terms of number of persons affected and countries impacted. As of 20 October, there are 13,567 cases (suspected, probable, and confirmed) that have resulted in 4,951 deaths. Most affected countries include Liberia, Sierra Leone and Guinea- in that order. However, the disease continues to reach beyond the region, with cases emerging in the US, Spain, and most recently Mali. Nigeria and Senegal, which both reported cases last month, have since been declared Ebola free. WHO reported this month that the number of new EVD cases in Liberia has



been steadily decreasing for the past three weeks. However, the agency cautions against drawing conclusions from this decline. The CDC also reported this month that only an estimated 40 per cent of EVD cases are likely being reported.

A Health System on the Verge of Collapse

The Ebola outbreak has had a significant impact on available healthcare in high transmission countries, already severely lacking in health care personnel and facilities preceding the crisis. Some 523 Healthcare workers (HCWs) have been infected by Ebola. Additional HCWs are imperative to respond to the crisis, however, recruiting personnel is challenging as more HCWs become infected and the infrastructure to adequately care and compensate them is not yet in place. In Liberia, HCWs threatened strikes following disagreements with national authorities over wages earlier this month. HCWs in Sierra Leone also went on strike this month following delays in the safe burial of an EVD-infected corpse.

FUNDING OF THE SAHEL STRATEGY

USD\$1.9 billion requested

USD\$ 769 million received (in SRP)

USD\$340 million received (outside SRP)

www.unocha.un.org/rowca | www.unocha.org
For updates on the Sahel response, follow @OCHAROWCA
<http://sahelnow.blogspot.com>,

“I told her, I will be back and I made it!”

- Fatima K. Kamara, 30

“I am a nurse in the Kenema Hospital. I don’t know how I got infected exactly. I can’t tell. One morning, I was feeling very sick, and decided to take the test. My mom was devastated, she was saying, ‘don’t go to the hospital, eat some soup, you’ll feel better!’, and I told her ‘no, I have to go, or you will get sick too.’ She was crying and crying, but I told her, ‘I will be back’, and I made it! Thank God I am here today, a survivor of Ebola.”

(Credit:OCHA/Yasemina Guerda)



Impact on Maternal Health and Deliveries

With health systems in affected countries overwhelmed by the Ebola outbreak, other pressing health issues are being neglected. Maternal health has been notably impacted by the outbreak as fewer women seek assistance in health centers known to be treating Ebola patients and fewer maternal HCWs (including midwives) are available to assist in deliveries. IRIN reported this month that in Sierra Leone in May, and Liberia in August, the number of births attended by a health professional in Liberia dropped from 52 percent to 38 percent, while the number of women in Sierra Leone attending hospitals and health centers to give birth has dropped by 30 percent, according to the countries’ respective Health Management Information Systems.

Protection Concerns

ACAPS published a report this month highlighting a series of protection issues stemming from the EVD outbreak. Among the most alarming include: (1) deteriorating law and order in the three countries causing growing insecurity, especially in Liberia and Sierra Leone; (2) increased incidents against humanitarian workers; (3) children being extremely vulnerable, suffering from stigma and isolation if infected or related to an infected person; and (4) movement restrictions impacting livelihoods, trade, and food security.

Such issues are having a direct impact on the provision of health and humanitarian interventions with: movement restrictions hampering humanitarian access; threats, attacks and security issues increasing as fear and mistrust among the populations are growing; and HCWs being at greater risk due to lack of personal protective equipment (PPE) to treat actual and suspected Ebola patients.

EBOLA SURVIVORS: First Line Responders?

Immune to future infections, EVD survivors have and can play an increasing role in the response. In Liberia, survivors are working in the country’s first state-run orphanage and scientists are using survivor antibodies to concoct vaccination and treatment options.

www.unocha.org/rowca | www.unocha.org
For updates on the Sahel response, follow @OCHAROWCA
<http://sahelnow.blogspot.com>

United Nations Office for the Coordination of Humanitarian Affairs (OCHA) • Coordination Saves Lives

REGIONAL HOTSPOTS

OCHA is closely monitoring the situations in the following three countries which have witnessed serious de-stabilizing events in October.

BURKINA FASO

On 30 October, large-scale anti-government protests in the capital, Ouagadougou, escalated into violent clashes between protesters and riot police that have resulted in at least five protesters killed and Parliament torched. The President has since been ousted from power after 27 years as head of state, replaced by a military interim leader who has promised to cede authority to a transitional body shortly.

NIGER

On 30 October, armed groups allegedly affiliated with the Mali-based insurgent group, MUJAO, reportedly conducted three attacks in Niger: two simultaneous attacks against a police compound and a security post in a refugee camp, in Tillabery; and one attack against a village along the Malian border. A total of 13 persons were killed and several injured in the attacks.

NIGERIA

On 30 October, insurgent group, Boko Haram, attacked and assumed control of Mubi, a town in the north of Adamawa state hosting the second largest population in the state with at least 100,000 inhabitants. The scale of humanitarian concerns stemming from the attack is uncertain but expected to be significant. Preliminary reports indicate some tens of thousands of people persons fleeing on foot or motorcycle from Mubi to the state capital, Yola, where IDP sites are already reporting swells in occupancy. Mubi already hosted some 16,000 IDPs (as of September), stemming largely from the Northeast conflict. IRC and Oxfam had recently set up bases in Mubi to respond to the Northeast crisis but evacuated staff following the attacks.

Response to Date

The UN's 70-70-60 plan was kicked off as of 1 October, envisaging isolating 70 per cent of cases, ensuring 70 safe burials of EVD deaths, within 60 days. The UN Mission for Emergency Ebola Response (UNMEER) convened a high-level meeting from 16-19 October in Accra, Ghana, towards drafting an operational plan for the 70-70-60 Plan. Senior leadership in attendance

were UNMEER SRSG Anthony Banbury, Special Envoy to Ebola, David Nabarro, the Executive Director of WFP, Ertharin Cousin, and the Chief of Staff to UN Secretary General, Ban ki-Moon, Susanna Malcorra. Contributing partners to the plan included key UN agencies and the IFRC. The Plan covers the high-transmission countries, envisioning a significant scale-up in terms of staffing towards meeting the STEPP Strategy and the 70-70-60 target by 1 December. The Plan duly envisages a coordination structure at national, district and community levels. UNMEER Ebola Crisis Managers were deployed to all three countries this month to lead the inter-agency response.

Humanitarian actors have been supporting the Ebola response through food distribution, community engagement and logistics support, *inter alia*. WFP have distributed over 15,000 MT of food to over one million people in the three high transmission countries since April 2014; transported over 13 MT of critical goods; and transported more than 1,300 aid workers through UNHAS flights.

The UN's [Overview of Needs and Requirements](#) requests USD\$1 billion to combat and contain the disease. The Secretary General's Multi-Donor Trust Fund for Ebola is currently funded at USD\$116 million.

Preparedness

Preparedness measures are underway. Over the next six weeks, WHO is leading joint missions to Guinea Bissau, Mali, Senegal and Cote d'Ivoire, Ghana, Benin, Togo, Burkina Faso, Mauritania, the Gambia, Nigeria, Cameroon, Central African Republic, the Democratic Republic of Congo, and Angola, in order to assess the situation, identify current gaps and required international support.

WHO is working with partners to coordinate the technical assistance that these countries require to implement the tasks that should be completed within 30, 60 and 90 days. These tasks are outlined in the Consolidated Checklist for Ebola Virus Disease Preparedness. Immediately following the missions, preparedness experts will stay on to assist countries in filling identified gaps.



A resident of a village in SE Guinea takes home her family's food rations from the WFP General Distribution site in Guekedou. Credit: WFP/ Aliou DIONGUE

www.unocha.org/rowca | www.unocha.org
For updates on the Sahel response, follow @OCHAROWCA
<http://sahelnow.blogspot.com>

United Nations Office for the Coordination of Humanitarian Affairs (OCHA) • Coordination Saves Lives

Niger: Compounded Drivers for Crisis in Diffa

Large-Scale Displacement, Rising Cholera, and Floods Sound Alarm

Insecurity in Northeast Nigeria is having an adverse impact on displacement in the Niger, notably in the Diffa region, bordering Borno state (Nigeria)— the Nigerian state hardest hit by insurgent attacks over the past 16 months. Since May 2013, the number of persons displaced from Nigeria to Niger's Diffa region has ballooned to 105,000— with 150,000 persons expected by year's end.

The International Rescue Committee reports that over 60 per cent (or 61,184 displaced persons) of the total displaced occurred between January to September of this year. The displaced are comprised both of Nigerian refugees and Nigerien returnees; further profiling is necessary to determine the numbers of each group.

Resources Needed for Most Vulnerable

Nigerien national authorities, in collaboration with humanitarian actors, continue to provide assistance to both the displaced in Diffa and the host communities, struggling to absorb heightened populations amid acutely scarce resources. Two inter-agency missions led by national authorities took place in mid-September to assess and ensure the integration of HIV/AIDS activities into humanitarian response programming and to evaluate coordination mechanisms and strengthen preparedness measures to respond to large-scale population influxes as seen in the past year and as expected to increase. The missions concluded with commitments to improve coordination, facilitate information availability and sharing, and increase distribution of anti-retroviral drugs and STD medication.

Looming Threat: Cholera

Humanitarian partners have sounded the alarm for a worrying upwards trends in cholera cases in Niger. From 1 January- 7 October, some 1,365 cases of cholera resulting in 51 deaths have been reported, over 600 cases reported in September alone. The most affected area is the Tahoua region, with over half of the cases. Of great concern, however, is the Diffa region, where some 72 cases have been reported with the potential to affect the over 100,000 displaced persons who are living in over-crowded and unhygienic living quarters and lack of WASH and Health facilities.

At least 34,000 displaced persons in Diffa need access to water purification and some 2,000 latrines. Response efforts are being led by the Ministry of Health in collaboration with UN, NGO and Red Cross partners. WHO is prepositioning



Rouké Amadou has fled Boko Haram violence in her hometown in Nigeria. OCHA/Franck Kuwou

Floods in Niger

As estimated 68,483 persons (9,492 households) in Niger were affected by floods this year; 36 people were killed, 8,187 homes destroyed, and nearly 3,000 hectares of land were destroyed. Most affected areas include Tillabery in the southwest of the country (bordering Burkina Faso), where over 18,000 people were affected by floods and seven killed, and over 2,000 homes destroyed.

www.unocha.org/rowca | www.unocha.org
For updates on the Sahel response, follow @OCHAROWCA
<http://sahelnow.blogspot.com>

United Nations Office for the Coordination of Humanitarian Affairs (OCHA) • Coordination Saves Lives

cholera kits in 30 districts in the south of the country to help with diagnosis and treatment of the disease. Additional resources are needed to respond to cholera affected areas.

The Gambia: Worrying Food Insecurity

Deteriorating Food Security After Late and Little Rains

The food security situation in The Gambia is deteriorating. As in other Atlantic coastal countries of the Sahel belt, the rainy season this year began several weeks late, and rainfalls remained erratic and insufficient. Now entering the critical season with risks of locust invasion, epidemics and floods, a bad harvest in The Gambia will have dire consequences for the food security of thousands of families, and negatively impact the nutritional status of their children.



Farmers in the Gambia's Central River Region are worried about their harvests. Credit: OCHA/Ivo Brandau

8,000 Gambian children suffer from SAM

As of September 2014, a third of Gambia's 1.8 million inhabitants were food insecure. Of those, 200,000 have already crossed the emergency threshold and need urgent food assistance. Across the country, 50,000 children are acutely malnourished, 8,000 of them in the highest category of severity.

Priority interventions include food, nutrition and agricultural assistance but humanitarian operations in The Gambia are chronically under-funded. This year, USD\$ 18.3 million are required to address the needs of the country's most vulnerable. To date only USD\$ 4 million, or 21 per cent, has been received.

Sahel Food Update

Crisis Level Food Insecurity in Northeast Nigeria

In a joint report this month, WFP and FAO underlined the impact that poor rains, conflict, and the Ebola outbreak have had on food availability this year. A late start to the rainy season in Chad, Mauritania, Niger, and Senegal has extended the agricultural lean season, forcing vulnerable households to adopt irreversible coping mechanisms. Although the rainy season has largely resumed across the Sahel, countries along the Atlantic Coast (i.e. southern Mauritania to Guinea Bissau, northeast Nigeria, and northern Ghana, Nigeria, and Togo) are still experiencing rainfall deficits of upwards of 50 per cent which is negatively impacting agricultural productivity in this sub-region.

www.unocha.org/rowca | www.unocha.org
For updates on the Sahel response, follow @OCHAROWCA
<http://sahelnow.blogspot.com>

Conflicts in the region are duly having an impact on food security. FEWSNET reported this month that insecurity related to the insurgency conflict in Northeast Nigeria is leading to increased population displacements and the disruption of livelihoods. Poor households in worst affected areas in southern Borno and Yobe States and those in the Lake Chad region and northeastern Adamawa state will continue to face Crisis (IPC Phase 3) acute food insecurity levels through December.

HNO/SRP Revisions – UPDATE

The Sahel countries will be updating their respective Humanitarian Needs Overviews in the next month and using these findings to ultimately revise the Strategic Response Plan for the region to be published in February 2015.

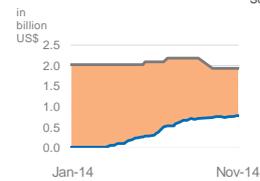
Sahel Funding Status Overview

Needs and Requirement Overview to be Launched mid-September

All figures in US\$ ■ Funding available ■ Unmet Requirements

Source: Financial Tracking Service, <http://fts.unocha.org>

SRP REQUIREMENTS	US\$ 1,941 million
SRP FUNDING	US\$ 769 million
SRP UNMET REQUIREMENTS	US\$ 1,172 million
FUNDING OUTSIDE SRP	US\$ 340 million



40%
Funded

The Sahel Strategic Response Plan (SRP) is currently funded at 40 per cent, receiving USD\$769 million against its revised USD\$1.9 billion requirement. This represents a USD\$23 million increase as compared to the last reporting period. USD\$340 million was committed to humanitarian activities outside of the SRP. A mid-year review of the SRPs at country level in the Sahel is on-going. More funding is urgently required to address the pressing needs in the Sahel and to build resilience.