

Information Saves Lives

Media Newsletter
 Issue #7 - April 3-9



Welcome to the Internews Newsletter for media in Liberia. This newsletter is created with the intent to support the work of local media in reporting about Ebola and Ebola-related issues in Liberia. Internews welcomes feedback, comments and suggestions from all media receiving this newsletter and invites them to forward, share and re-post this newsletter as widely as possible.



New insights on healed Ebola patients in Liberia

Monrovia, Liberia – Healed Ebola patients can live a normal and even extraordinary life, says Professor John Fankhauser, the Medical Director at ELWA hospital in Monrovia, which is concerned with healed Ebola patients. “Liberia has nearly 1500 treated Ebola patients, all of them going about with their usual daily activities and even doing better than they were in the past.”

According to Prof. Fankhauser who regularly receives and interacts with the healed patients, all of them are immune to the virus but the duration of the immunity is yet to be established. “The immunity varies from person to person,” he added.

“Chronic pain, appetite loss, headaches, eye problems and post-traumatic stress are among the most frequent problems reported by some healed patients.”

In March 2015, a Liberian woman died of Ebola that has claimed more than nearly 3,900 lives so far, according to government figures. Several news reliable sources have quoted the government as saying the woman contracted the virus from her husband who was healed of Ebola.

The death of the Liberian woman reshaped the message on the sexual lives of healed Ebola patients that was initially sent out by the Liberian government. The Ministry of Health now recommends indefinite safe sex and abstinence within a three-month period.

Prof. Fankhauser suggests that patients tested negative in Ebola Treatment Units should abstain from sex for 90 days. It is feared that the virus which lives in the semen and vaginal secretions of healed Ebola patients could infect their sexual partners. “Some healed patients even experience sexual malfunction,” he revealed.

Besides the physical effects, healed Ebola patients equally suffer stigma within their communities. Some Organizations are suggesting that the name “Ebola Survivors” could be changed to “healed Ebola patients” in a bid not to ostracize them.

Announcement:

ELWA Hospital will have a team of 3 American eye doctors who will be in Monrovia caring for Ebola survivors on April 13, 14, and 15 from 8 am to 2 pm. This is the group from Emory University who cared for almost all of the American survivors with eye problems. Please remind any Ebola survivors that you are connected with that this group will be here next week.

This is free of charge.

For any questions that you might have, call the ELWA Hospital Survivors Clinic during the work hours at:

ELWA Hospital Survivors Clinic

John Fankhauser, MD

Phone: 0880485485; 0770485485

*Statistics on healed Ebola patients and ETUs

- There are about 1500 healed Ebola patients in Liberia and more than 50 percent of them are women and girls.
- No new confirmed cases were reported from Liberia in the week to 12 April. The last confirmed case died on 27 March. A total of 2 contacts associated with the case were being monitored as at 11 April. Heightened vigilance is being maintained throughout the country. In the 6 days to 11 April, 332 new laboratory samples were tested for EVD, none of which tested positive. All counties, with the exception of Monsterrado, have now not reported a new case for over 6 weeks.
- One Ebola treatment centres (ETCs) in Margibi County was decommissioned in the week to 12 April.
- The Dutch Mobile Laboratory in Grand Cape Mount closed on 12 April. Of the 332 new samples that were tested in the 6 days to 11 April, 65% were processed within 1 day of arrival at a laboratory.
- The total cumulative deaths recorded in Liberia according to WHO is 4486.

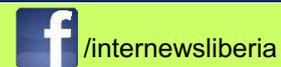
Resource:

Ebola Situation Report - 15 April 2015

<http://apps.who.int/ebola/current-situation/ebola-situation-report-15-april-2015>

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Humanitarian organization advise parents to welcome routine immunizations

Humanitarian organizations fighting Ebola in Liberia say there are still pockets of resistance in providing all children with routine immunizations. The vaccines have significantly reduced and campaigns have been bolstered to encourage community acceptance, especially as there are still doubts from the communities if the vaccine could be the Ebola vaccine given only to adults aged 18 and above.

Philippe Le Vaillant, Head of *Doctors without Borders* in Liberia commonly abbreviated MSF, says “the Liberian authorities have indicated that the number of children vaccinated each month fell by 60 percent at the end of 2014. The vaccination coverage for measles fell to 58 percent, while it would take at least 80 percent for effective protection.”

In January, about 92,000 children had not been vaccinated at all, making them vulnerable to many preventable childhood diseases, according to Le Vaillant. Feedback from several counties across Liberia say the population have fear and mistrust that make them reluctant to come for treatment in medical facilities.

Most organizations are now concerned with overcoming the losses of confidence through training and community outreach.

In neighboring Guinea, a measles outbreak was actually declared in January 2014 in the capital Conakry just before the start of the Ebola outbreak. Early March 2014, MSF teams have identified about 180 cases of measles in the Liberian capital. Beyond the figures and projections, it is essential to strengthen surveillance and investigation capabilities, says Le Vaillant.

In mid-March, more than 500 children below five were vaccinated by the MSF. Strengthened infection control protocols were applied during the campaign such as the systematic control of the temperature and a medical questionnaire, disinfection of gloves between each injection, shorter queues, among others showed that it is possible to vaccinate safely in an Ebola context.

Liberia has done 2 rounds of immunization against several diseases.

Other agencies battling to roll back measles and polio in Liberia are UNICEF and WHO. They encouraged all parents in the various Counties to vaccinate their children against the deadly diseases, especially as the rainy season approaches and schools have now reopened across the nation.

Sources:

Liberia: No vaccinations for months has put children at risk

<http://www.msf.org/article/liberia-no-vaccinations-months-has-put-children-risk>

Vaccination must be scaled up in Ebola-affected countries

<http://www.who.int/mediacentre/news/releases/2015/vaccination-ebola-countries/en/>

Contact:

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Judit Rius, Liaison Officer

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msfocb-monrovia-LiaisonOfficer@brussels.msf.org

*Statistics for journalists:

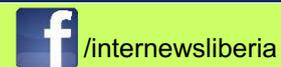
Before widespread vaccination, measles caused an estimated 2.6 million deaths each year. The disease remains one of the leading causes of death among young children globally; some 145 700 people died from measles in 2013 – mostly children under the age of 5. It is about 400 deaths every day or 16 deaths every hour.

Most measles-related deaths are caused by complications associated with the disease more commonly in children under the age of 5, or adults over the age of 20. Complications include blindness, encephalitis (an infection that causes brain swelling), severe diarrhoea and related dehydration or severe respiratory infections such as pneumonia.

MSF opened the Ebola management centre ELWA 3 in Monrovia in August 2014 while the Liberian Ministry of Health will take over the facility as of end March. A transit unit for suspected Ebola patients at Redemption Hospital

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has been running since November. MSF's Ebola management center in Foya was closed last December after Lofa County was officially declared Ebola-free. Since the beginning of the epidemic, 670 patients have survived Ebola within MSF's facilities in Liberia. MSF rapid response teams have also been recently deployed in Grand Bassa, Grand Cape Mount and Margibi counties to help health authorities responding to local outbreaks.

Last October, MSF teams distributed antimalarial preventive treatment in the western part of Liberia's capital city, targeting approximately 600,000 people.

On 21 March MSF 2015 opened a new paediatric hospital in order to increase the capacity to treat non-Ebola-related medical emergencies in Monrovia. This 24/7 hospital started with 46 beds for children under five years-old, with the capacity to extend up to 100 beds.

Discussion Topics

Below are suggested discussion topics for the local media in Liberia. These are key issues being discussed by humanitarian organizations as Liberia transitions to an Ebola recovery phase. It is important for the community members to inspire change by relaying relevant recommendations that could emerge from the Ebola-related discussions. The discussion could take the form of radio talk shows and community gatherings including Attare forum, Palaver hut forum, large family meetings, etc.

1. **Stigma in the use of the word "Ebola survivor:"**

Humanitarians are suggesting a possible change of names from 'Ebola survivor' to 'healed Ebola patients.' The change in names could help end the existing stigma in Liberia and beyond.

Sources: *UN Launches Mobile App To Help Fight Ebola Stigma*
Fighting Ebola and Its Stigma in Liberia

2. **Accountability in the use of Ebola fund:** As Liberia moves to a recovery phase and gears up for the day the country could be declared Ebola-free, issues of the management of Ebola funds have been brought to the table.

Source: *The United States' Ebola Relief Money Could Have Been Better Spent*

3. **Dismantling of Ebola Treatment Units (ETUs):**

Some organizations including IOM are suggesting possible ways of dismantling their ETUs within the upcoming months. Citizens could discuss at the positives about the ETUs and suggest possible ways the ETUs could best serve their Counties.

Source: *Rapid Guidance on the Decommissioning of Ebola Care Facilities*

4. **Approaching rainy season:** It is important for citizens to chart a way forward through open dialogues and discussion platforms. This will give them the opportunity to address challenges in fighting Ebola during the rainy season.

Source: *Rainy Season Could Increase Ebola Infections*

5. **Hopes for Ebola orphans:** Liberia in its post-Ebola recovery phase seeks better ways to reach all orphans and render to them hope and trust. Many orphans are yet to be identified and some humanitarian organizations need community help and support.

Source: *How To Help Children Orphaned By Ebola*

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Citizens' Feedback

REOPENING OF SCHOOLS

Citizens say Ebola prevention measures are strictly respected in homes and public places such as schools and markets. However, they claim there are fewer health workers who could monitor its effective implementation.

Grand Cape Mount

Bomi residents claim that pupils and students are respecting Ebola-prevention measures in schools.

Bomi

People say the EVD prevention measures are strictly respected in schools but on the contrary, there is complacency within communities, as citizens no longer respect the measures.

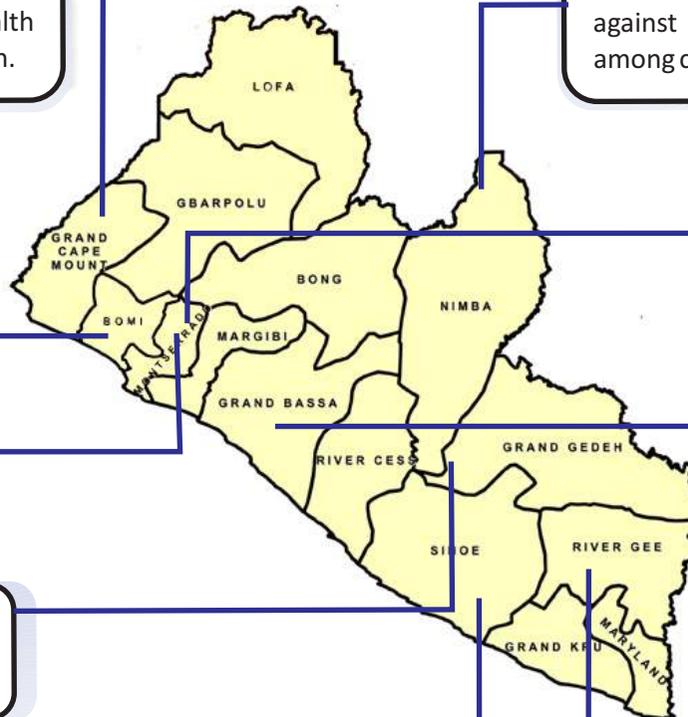
Montserrado

Citizens say Ebola prevention measures are being respected in schools.

Grand Gedeh

Basic Ebola prevention measures are strictly respected in communities, citizens say.

Sinoe



Citizens say although humanitarian NGOs (Global Communities and Crusaders for Peace Organization) are promoting the fight against Ebola through their campaigns, complacency is still rife among citizens who do not practice safety measures.

Nimba

Some healed Ebola patients are suffering from all forms of discrimination including fear and stigma within their own communities, according to Montserrado citizens.

Montserrado

Citizens report that there has been no new Ebola case in their Country for several weeks, adding that there is no need to respect Ebola prevention measures anymore.

Grand Bassa

Radio interactive talk shows have been inviting experts from the Community Care Center to talk about their activities to the communities.

River Gee

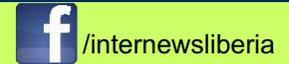
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Citizens' Feedback



EBOLA VACCINE & TREATMENT UNITS

Parents say they will not receive the Ebola vaccine unless they must have been informed and educated about it.

Gbarpolu

Montserrado citizens claim Ebola is a man-made disease, adding that they would boycott the Ebola vaccine because it is a ploy by the Western governments to roll out the disease again.

Montserrado

Parents fear taking their children to clinics and hospitals where they would be immunized for fear that the Ebola vaccine could be given to them instead.

Margibi

According to the citizens, the River Cess ETU would shut down on 15 April 2015, raising doubts about possible treatment for any new Ebola case(s) triggered by the rainy season.

River Cess

Citizens say they would not go for the Ebola vaccine because they have not been educated about it.

Maryland



FOOD DISTRIBUTION

There is fear and mistrust among parents who have stopped their children from receiving food supplied by Mary's Meal Organization. They claim it may have been poisoned with Ebola.

Bomi

BORDERS

Citizens ask why the government opened its borders with Guinea and Sierra Leone although all they three countries have been badly hit by the pandemic.

Grand Kru

Citizens say opened borders would never free Liberia from Ebola.

Maryland

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Rumors Reporting

Ebola Vaccine Trial

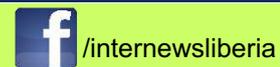
| Rumors from local people | Well-sourced and accurate responses |
|---------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Gbarpolu</p> <p>It is being rumored that the Ebola vaccine is intended to infect many more Liberians.</p> | <p>Early results suggest an experimental Ebola vaccine triggers an immune response and is safe to use. However, larger clinical trials in West Africa are needed to determine if the immune response generated by the vaccine is large enough to protect against Ebola infection. This vaccine works against the Zaire strain of Ebola currently circulating in West Africa. It doesn't contain infectious Ebola virus material, so it cannot cause Ebola infection in people who receive it.</p> <p>The vaccine is being developed by the U.S. National Institutes of Health and GlaxoSmithKline. The first doses of the vaccine for use in large clinical trials in West Africa have been delivered to Liberia.</p> <p><i>*For more information / Internews recommends journalists/communicators to contact:</i></p> <p>Centers for Disease Control and Prevention (CDC) Dr Laura Petcha, Communications Officer Phone: 0775090926 vya9@cdc.gov</p> <p>Ministry of Health and Social Welfare Janet David, Assist. Director-De-Plan Phones: 0886450778 janetdavid2g10@gmail.com</p> |

Border

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| <p>Maryland</p> <p>Maryland citizens rumor that the government's decision to reopen its schools and borders with Ebola-stricken countries is a hidden agenda to seek more Ebola funds.</p> | <p>It was the government's decision to reopen its borders with all three neighbouring countries – Guinea, Ivory Coast and Sierra Leone. However the Ivorian border remains closed to Liberia only. The borders were opened for several reasons including economic concerns raised by citizens who relied on cross-border trade to feed their families. It should be noted that community-based surveillance has been bolstered by various local and international NGOs operating at the borders.</p> <p>It is recommended that communities should be aware about Ebola symptoms and report to County Health Team members in case they have concerns. Several actions including safe-screening including the possibility of safely isolating and referring secondary screening have been put in place at crossing points.</p> <p><i>*For more information interviews, Internews strongly recommends journalists/communicators to contact:</i></p> <p>Danish Refugee Council Alessandra Donvito, Emergency Coordinator Phone: 0880 695809</p> <p>Projects Concern International (PCI) Liberia Jolene M. Mullins, Country Representative, Health & Nutrition Manager Phone: 0880711148 jmullins@pc-lib.org</p> |
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Unsafe sex

Monterrado

It is being rumored that healed Ebola patients are intentionally spreading the virus by having unsafe sex with non-infected partners.

Liberia's Ministry of Health and Social Welfare now recommends a three-month indefinite safe sex and abstinence for healed Ebola patients. Other experts including Prof. Fankhauser suggest that patients tested negative in Ebola Treatment Units should abstain from sex for up to 90 days. It is feared that the virus which lives in the semen and vaginal secretions of healed Ebola patients could also infect their sexual partners. "Some healed patients even experience sexual dysfunction.

**For more information interviews, Internews strongly recommends journalists/communicators to contact:*

Ministry of Health and Social Welfare

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targbehjwreh@yahoo.com

World Health Organization (WHO)

Olivia Pratt Dennis, Social Mobilization Officer
Phone: 0770114949 / 0886984377
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Rainy Seasonal Fears

Rivercess

It has been rumored that Ebola will resurface during the rainy season in Rivercess County.

The approaching rainy season could wash away roads, complicating logistics for aid delivery and movement of health care worker, as noted by the World Health Organization (WHO). Citizens in Rivercess County are advised to continue practicing Ebola prevention measures to keep Liberia at zero-Ebola confirmed case.

WHO office in Liberia in collaboration with the Ministry of Health noted that the virus attacks the vascular system in the blood and it takes about 45 days before an area is declared clear of the disease. The Ministry said the incubation period for this disease is from 3 to 21 days.

**For more information / Internews recommends journalists/communicators to contact:*

Incident Management System / Ebola operation Center

Francis Kateh, Deputy Incident Manager
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World Health Organization (WHO)

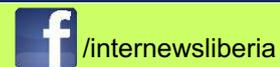
Olivia Pratt Dennis, Social Mobilization Officer
Phone: 0770114949 / 0886984377
dennis@who.int

United Nations Mission for Ebola Emergency Response

Dr. Joa Okech, FCM Margibi & Montserrado County
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Schools

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| <p>Nimba</p> <p>Citizens fear that any potential Ebola outbreak will target mainly children.</p> <p>Grand Kru</p> <p>It is being rumored that teachers hire secret agents to infect their students and pupils with the Ebola virus.</p> | <p>Citizens are encouraged to continue sending their children to school while practicing surveillance because all schools in Montserrado are well-equipped and practice Ebola prevention measures. Only County Health Teams and Social Mobilization Workers who are recognized by their badges and jackets comb the communities to encourage community members including teachers, parents and students to come forth for the routine vaccine.</p> <p>Similarly, teachers could act as liaison persons between students / pupils and parents who sometimes still believe Ebola is present in schools. Teachers could be vigilant on opportunities to acquire training on reporting rumors and could also join local coordination meetings that would inform local responders on what people are talking about within their respective communities.</p> <p><i>*For more information / Internews recommends journalists/communicators to contact:</i></p> <p>National Teachers Association in Liberia Samuel Johnson, Secretary General Phone: 0886472496 samuelyjohnsonsr@gmail.com</p> <p>Teachers Welfare Council of Liberia Aaron Kpayea, Secretary General Phone: 0888070693 tewcol1@gmail.com</p> |
| <p>Bong</p> <p>It is being rumored that the Liberian government seeks more Ebola funds by deliberately infecting EVD materials provided to schools in Bong County.</p> | <p>It is recommended that <i>Attare centers, palava huts</i> and Parents Teachers' Association (PTA) meetings could be ideal community gatherings that bring parents, teachers, community leaders and women, to address rumors and how to seek common solutions / recommendations to the Ebola-related rumors.</p> <p>Media should continue encouraging their communities to follow the Ebola preventative measures and to trust that organizations responding to the Ebola outbreak have been able to trace the people with whom the woman came in contact. Media should remind their communities that the fight against Ebola is a collaborative strategy by the government, development partners, donors and the local population.</p> |

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**For more information / Internews recommends journalists/communicators to contact:*

Teachers Welfare Council of Liberia

Aaron Kpayea, Secretary General
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 tewcol1@gmail.com

Children Assistance Rescue Mission

Jarvis B. Bestman, Senior Executive Director
 Phone: 0886235123; 077037883

Children Assistance Program

Elizabeth Blama, Executive Director
 Phone: 0886047750; 077259746

Ebola Treatment Unites (ETUs)

River Gee

Citizens rumor that all sick persons who were taken to the Community Care Center in River Gee County have never come back alive and their whereabouts are unknown.

The local media in River Gee is encouraged to continue investigating with their health workers and Social mobilization Teams on rumors that could stop families from sending their sick persons to hospitals. They could also regularly invite Community Care Center (CCC) workers on their radio talk show by encouraging citizens to have confidence in their work and provide them with the utmost support and collaboration.

It is also recommended that journalists integrate themselves with it County Health Teams activities that would provide them with accurate information and knowledge on what happens to sick people who were taken to CCC.

**For more information / Internews recommends journalists/communicators to contact:*

Global Communities

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World Health Organization (WHO)

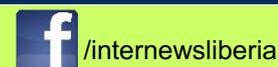
Olivia Pratt Dennis, Social Mobilization Officer
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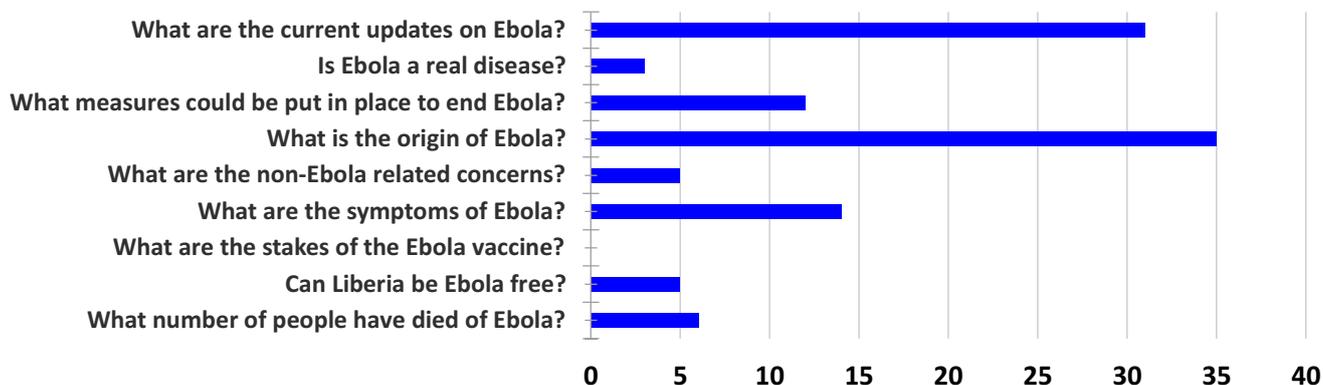
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The most frequently asked questions in the Geopoll survey (April 2015)

Information Needs Analysis



FREQUENTLY ASKED QUESTIONS FROM COUNTIES

Sinoe County:

1. When will Liberia be declared Ebola-free?

The World Health Organization office in Liberia in collaboration with the Ministry of Health noted that the virus attacks the vascular system in the blood and it takes about 45 days before an area is declared clear of the disease. The Ministry said the incubation period for this disease is from 3 to 21 days. In this case, the last Ebola patient in Liberia died on 27 March 2015.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

2. What is Ebola?

The World Health Organisation defines the Ebola virus disease (EVD), formerly known as *Ebola haemorrhagic fever* as a severe, often fatal illness in humans. The virus is transmitted to people from wild animals and spreads in the human population through human-to-human transmission. The average EVD case fatality rate is around 50%.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

3. Is Ebola real?

The current outbreak in West Africa, (first cases notified in March 2014), is the largest and most complex Ebola outbreak since the Ebola virus was first discovered in 1976. There have been more cases and deaths in this outbreak than all others combined. It has also spread between countries starting in Guinea then spreading across land borders to Sierra Leone and Liberia, by air (1 traveller) to Nigeria and USA (1 traveller), and by land to Senegal (1 traveller) and Mali (2 travellers).

The most severely affected countries, Guinea, Liberia and Sierra Leone, have very weak health systems, lack human and infrastructural resources, and have only recently emerged from long periods of conflict and instability. On August 8, the WHO Director-General declared the West Africa outbreak a Public Health Emergency of International Concern under the International Health Regulations (2005).

Available at: http://www.health.ny.gov/diseases/communicable/ebola/docs/ems/revised_bems Ebola_training_guide_line_final.pdf

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River Gee County:

4. How many people have died of Ebola in Liberia since its outbreak?

| Total Cases (Suspected, Probable, and Confirmed) | Laboratory-Confirmed Cases | Total Deaths |
|--------------------------------------------------|----------------------------|--------------|
| 10042 | 3151 | 4486 |

Available at: <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/case-counts.html>

5. What causes Ebola?

It is thought that fruit bats of the *Pteropodidae* family are natural Ebola virus hosts. Ebola is introduced into the human population through close contact with the blood, secretions, organs or other bodily fluids of infected animals such as chimpanzees, gorillas, fruit bats, monkeys, forest antelope and porcupines found ill or dead or in the rainforest.

Ebola then spreads through human-to-human transmission via direct contact (through broken skin or mucous membranes) with the blood, secretions, organs or other bodily fluids of infected people, and with surfaces and materials (e.g. bedding, clothing) contaminated with these fluids.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

6. What is the current situation of Ebola in Liberia?

At the moment there is no known Ebola case. Humanitarian organisations fighting the disease are encouraging strict surveillance, campaigns to end Ebola and the respect of Ebola prevention measures. Efforts are now geared towards protecting border regions with Guinea and Sierra Leone that have been badly hit by the disease.

Available at: <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/case-counts.html>

Nimba County:

7. Is Ebola a man-mad disease?

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Ebola then spreads through human-to-human transmission via direct contact (through broken skin or mucous membranes) with the blood, secretions, organs or other bodily fluids of infected people, and with surfaces and materials (e.g. bedding, clothing) contaminated with these fluids.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

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8. What are its signs and symptoms?

Sudden onset of fever, intense weakness, muscle pain, headache and sore throat are typical signs and symptoms. This is followed by vomiting, diarrhoea, rash, impaired kidney and liver function, and in some cases, both internal and external bleeding.

Laboratory findings include low white blood cell and platelet counts, and elevated liver enzymes.

The incubation period, or the time interval from infection to onset of symptoms, is from 2 to 21 days. The patients become contagious once they begin to show symptoms. They are not contagious during the incubation period.

Ebola virus disease infections can only be confirmed through laboratory testing.

Available at: <http://www.cdc.gov/vhf/ebola/symptoms/>

9. How can Ebola be prevented?

Good outbreak control relies on applying a package of interventions, namely case management, surveillance and contact tracing, a good laboratory service, safe burials and social mobilisation. Community engagement is key to successfully controlling outbreaks. Raising awareness of risk factors for Ebola infection and protective measures that individuals can take is an effective way to reduce human transmission.

Available at: www.protectivemasksdirect.co.uk/world-health-organisation-ebola-virus-956-p.asp

Montserrat County:

10. What is the origin of Ebola in Liberia?

On March 30, 2014 Liberia confirmed its first two cases of Ebola virus disease. By 23 April 2014 there were 34 cases and six deaths from Ebola in Liberia. By June 17, 2014 sixteen people had died from Ebola in Liberia. Doctors would get infected early on, because they would think the patient had malaria. Malaria is extremely common in Liberia; for example in 2010 there were nearly 1.3 million cases of malaria in a country of about 4 million.

The first deaths from Ebola in Monrovia occurred by 17 June 2014 when seven died from Ebola. The dead included a nurse along with some from her household. The nurse was treated at Redemption Hospital located west of Monrovia. At the time there were about 16 cases reported in Liberia overall.

Available at: <http://www.who.int/csr/disease/ebola/one-year-report/liberia/en/>
<http://edition.cnn.com/2014/04/23/health/africa-ebola/>

11. In what month will Liberia be declared Ebola-free?

The World Health Organization office in Liberia in collaboration with the Ministry of Health noted that the virus attacks the vascular system in the blood and it takes about 45 days before an area is declared clear of the disease. The Ministry said the incubation period for this disease is from 3 to 21 days. In this case, the last Ebola patient in Liberia died on 27 March 2015.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

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12. Why is there a careless attitude around Ebola prevention measures?

Although Liberia enjoys a relatively calm atmosphere with no Ebola cases, there is absolutely no need for complacency especially with regards to the prevention measures. The country has not been declared Ebola free and its neighbours – Guinea and Sierra Leone are still battling to roll back the disease.

Available at: <http://www.aljazeera.com/news/2015/03/ebola-case-ends-liberia-countdown-virus-free-150321003004879.html>

Maryland County:

13. When will Liberia be declared Ebola-free?

The World Health Organization office in Liberia in collaboration with the Ministry of Health noted that the virus attacks the vascular system in the blood and it takes about 45 days before an area is declared clear of the disease. The Ministry said the incubation period for this disease is from 3 to 21 days. In this case, the last Ebola patient in Liberia died on 27 March 2015.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

14. How can we stop the Ebola virus from spreading?

- Wash your hands frequently or use an alcohol-based hand sanitizer.
- Avoid contact with the blood and body fluids (such as urine, feces, saliva, sweat, urine, vomit, breast milk, semen, and vaginal fluids) of any person, particularly someone who is sick.
- Do not handle items that may have come in contact with an infected person's blood or body fluids.
- Do not touch the body of someone who has died from Ebola.
- Do not touch bats and nonhuman primates (apes and monkeys) or their blood and fluids and do not touch or eat raw meat prepared from these animals.
- Avoid facilities in West Africa where Ebola patients are being treated. The U.S. Embassy or consulate is often able to provide advice on healthcare facilities that are suitable for your medical needs.
- Report any potential unprotected Ebola exposure or illness promptly.
- Seek medical care immediately if you develop fever, fatigue, headache, muscle pain, diarrhea, vomiting, stomach pain, or unexplained bruising or bleeding.

Available at: <http://www.cdc.gov/vhf/ebola/pdf/infections-spread-by-air-or-droplets.pdf>

15. Why should Ebola patients have sex three months after they must have been healed?

The Liberian Ministry of Health and Social Welfare now recommends indefinite safe sex and abstinence within a three-month period. Other health workers suggest that patients tested negative in Ebola Treatment Units should abstain from sex for up to 90 days. It is feared that the virus which lives in the semen and vaginal secretions of healed Ebola patients could also infect their sexual partners.

Margibi County:

16. What brought Ebola to Liberia?

The Ebola outbreak began in West Africa in early 2014, and it is the worst outbreak of this virus in history. The Ebola virus has a high mortality rate: in the three countries most affected by the outbreak — Guinea, Sierra Leone and Liberia — about 70 percent of the infected people have died. The disease first affected Guinea before crossing over to Liberia.

Available at: <http://www.livescience.com/48235-ebola-outbreak-news.html>

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17. Is Ebola a man-made virus?

The current outbreak in West Africa, (first cases notified in March 2014), is the largest and most complex Ebola outbreak since the Ebola virus was first discovered in 1976. There have been more cases and deaths in this outbreak than all others combined. It has also spread between countries starting in Guinea then spreading across land borders to Sierra Leone and Liberia, by air (1 traveller) to Nigeria and USA (1 traveller), and by land to Senegal (1 traveller) and Mali (2 travellers).

The most severely affected countries, Guinea, Liberia and Sierra Leone, have very weak health systems, lack human and infrastructural resources, and have only recently emerged from long periods of conflict and instability. On August 8, the WHO Director-General declared the West Africa outbreak a Public Health Emergency of International Concern under the International Health Regulations (2005).

Available at:

http://www.health.ny.gov/diseases/communicable/ebola/docs/ems/revised_bems_ebola_training_guideline_final.pdf

18. Can the Ebola virus survive in smoked meat?

WHO strongly advises that the consumption of Bushmeat especially in Ebola endemic regions should be discouraged.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

Lofa and Grand Cape Mount Counties:

19. Are there still Ebola cases in Liberia?

At the moment there is no known Ebola case. Humanitarian organisations fighting the disease are encouraging strict surveillance, campaigns to end Ebola and the respect of Ebola prevention measures. Efforts are now geared towards protecting border regions with Guinea and Sierra Leone that have been badly hit by the disease.

20. *How do people contract the Ebola virus?*

It is thought that fruit bats of the *Pteropodidae* family are natural Ebola virus hosts. Ebola is introduced into the human population through close contact with the blood, secretions, organs or other bodily fluids of infected animals such as chimpanzees, gorillas, fruit bats, monkeys, forest antelope and porcupines found ill or dead or in the rainforest.

Ebola then spreads through human-to-human transmission via direct contact (through broken skin or mucous membranes) with the blood, secretions, organs or other bodily fluids of infected people, and with surfaces and materials (e.g. bedding, clothing) contaminated with these fluids.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

Grand Kru County:

21. Is Liberia Ebola-free?

Liberia has seen the most deaths in the West African Ebola outbreak, which has killed more than 10,000 people. But since it has recorded no new case as of 28 March 2015, it began counting down the 42 days countries must wait before being declared Ebola-free. But it should be noted that Liberia cannot be completely Ebola-free as long as Guinea and Sierra Leone still report new cases.

Available at: <http://allafrica.com/stories/201404240750.html>

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Grand Gedeh County:

22. How does Ebola cross over to humans?

It is not entirely clear how the virus is transmitted from bats to people, although the most likely route is through contact with bodily fluids. Bats infected with Marburg virus in the lab shed the virus in their mouths, so wild bats might spread it by leaving traces on fruit that is later eaten by other animals. Knowing the host species for the other filoviruses is crucial.

Available at: <http://www.nature.com/news/the-ebola-questions-1.16243>

23. Is Ebola a disease that kills?

Ebola kills humans. The disease also negatively affects country's growth and strategic development plans.

Available at: <https://www.kpmg.com/Africa/en/IssuesAndInsights/Articles-Publications/Documents/Business%20and%20economic%20impact%20of%20Ebola.pdf>

24. Is Ebola an air-borne disease?

Ebola is not a respiratory disease and is not spread through the airborne route. Airborne spread happens when germs float through the air after a person talks, coughs, or sneezes. Those germs can be inhaled even after the original person is no longer nearby. Direct contact with the infectious person is NOT needed for someone else to get sick. Germs like chicken pox and TB are spread through the air.

Available at: <http://www.cdc.gov/vhf/ebola/pdf/infections-spread-by-air-or-droplets.pdf>

Grand Bassa County:

25. Did Ebola originate from a failed scientific laboratory test?

It is not entirely clear how the virus is transmitted from bats to people, although the most likely route is through contact with bodily fluids. Bats infected with Marburg virus in the lab shed the virus in their mouths, so wild bats might spread it by leaving traces on fruit that is later eaten by other animals. Knowing the host species for the other filoviruses is crucial.

Available at: <http://www.nature.com/news/the-ebola-questions-1.16243>

26. Can a person be infected with Ebola twice in a life-time cycle?

Health experts say the healed patients are all immune to the virus but the duration of the immunity is yet to be established. The immunity varies from person to person.

See page 1 of this newsletter.

27. What support has the government given to Ebola-stricken families?

The Liberian government is partnering with humanitarian agencies like Save the Children and UNICEF to adapted approaches that could be more effective in containing future transmissions and to better respond to the changing needs of children and families who have been affected by the outbreak. Ebola orphans are identified and kept under the care of trusted community members and family relatives. The trusted members are paid a monthly amount per child and there are regular follow-ups by the partners to ensure the physical, psychological and health safety of the orphans.

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Bong County:

28. Why has the World Health Organisation not declared Liberia Ebola-free following no reported case?

Although Liberia has recorded no new Ebola case since 28 March 2015, it began counting down the 42 days (two cycles of the 21-day Ebola incubation period) before being declared Ebola-free. But it should be noted that Liberia cannot be completely Ebola-free in so far as its border countries - Guinea and Sierra Leone still report new cases.

Available at: <http://allafrica.com/stories/201404240750.html>

29. How long can Liberia be free from Ebola?

The government and its partners fighting Ebola say that Liberia can be declared Ebola-free after 42 days, but would still remain vulnerable to the disease if other Ebola-affected countries that share a common border with Liberia have not been declared Ebola-free as well.

Available at: <http://allafrica.com/stories/201503190987.html>

30. Why does Ebola have no special cure?

Currently, there is no licensed medicine or vaccine for Ebola virus disease, but several products are under development.

Available at: <http://www.who.int/csr/disease/ebola/faq-ebola/en/>

Bomi County:

31. How long does it take for a country to be declared Ebola-free?

The World Health Organization office in Liberia in collaboration with the Ministry of Health noted that the virus attacks the vascular system in the blood and it takes about 45 days before an area is declared clear of the disease. The Ministry said the incubation period for this disease is from 3 to 21 days. In this case, the last Ebola patient in Liberia died on 27 March 2015.

Available at: <http://www.who.int/mediacentre/factsheets/fs103/en/>

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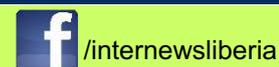
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Resources for the media

Ebola Situation Report - 15 April 2015

<http://apps.who.int/ebola/current-situation/ebola-situation-report-15-april-2015>

Liberia: No vaccinations for months has put children at risk

<http://www.msf.org/article/liberia-no-vaccinations-months-has-put-children-risk>

Vaccination must be scaled up in Ebola-affected countries

<http://www.who.int/mediacentre/news/releases/2015/vaccination-ebola-countries/en/>

Liberia: Countdown to Zero - Liberia's Goal for Ebola-Free Country

<http://allafrica.com/stories/201503190987.html>

Liberia: In 21 Days - Liberia Could Be Declared Ebola Free If...

<http://allafrica.com/stories/201404240750.html>

The Ebola questions

<http://www.nature.com/news/the-ebola-questions-1.16243>

HOW EBOLA IS SPREAD

<http://www.cdc.gov/vhf/ebola/pdf/infections-spread-by-air-or-droplets.pdf>

Ebola virus disease

<http://www.who.int/mediacentre/factsheets/fs103/en/>

Ebola Virus Disease (EVD) In - Service EMS Training Outline

http://www.health.ny.gov/diseases/communicable/ebola/docs/ems/revised_bems_ebola_training_guideline_final.pdf

Signs and Symptoms

<http://www.cdc.gov/vhf/ebola/symptoms/>

World Health Organisation Ebola Virus

www.protectivemasksdirect.co.uk/world-health-organisation-ebola-virus-956-p.asp

Origins of the 2014 Ebola epidemic

<http://www.who.int/csr/disease/ebola/one-year-report/virus-origin/en/>

New Ebola case ends Liberia countdown to be virus-free

<http://www.aljazeera.com/news/2015/03/ebola-case-ends-liberia-countdown-virus-free-150321003004879.html>

2014 Ebola Outbreak in West Africa - Case Counts

<http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/case-counts.html>

Ebola outbreak: Death toll rises to over 140 in Liberia, Guinea

<http://edition.cnn.com/2014/04/23/health/africa-ebola/>

2014 Ebola Outbreak: Full Coverage of the Viral Epidemic

<http://www.livescience.com/48235-ebola-outbreak-news.html>

Liberia: a country – and its capital – is overwhelmed with Ebola cases

<http://www.who.int/csr/disease/ebola/one-year-report/liberia/en/>