

OPERATION UNITED ASSISTANCE INTSUM

04 0600Z November 14



Executive Summary: *The security situation in Liberia is stable and is expected to remain so for the near term. The dry season in West Africa poses threats as multiple viral diseases other than Ebola virus disease (EVD) surface, such as malaria and Lassa fever. Medical care providers must differentiate between EVD and diseases that show similar symptoms as quickly as possible. This will reduce the number of suspected EVD cases at ETUs, which subsequently will reduce exposure and further spreading of EVD. The World Health Organization, partnered with UNICEF and the District Health Management Team (DHMT), engaged Kabala religious leaders to disseminate accurate and effective messages to their constituents. This will effectively reach many more people and mitigate the increased risk as the dry seasons enable the population to travel further distances, reaching many more areas.*

(U) Liberia

(U) Peak Season for Lassa Fever in West Africa is About to Begin: Lassa fever occurs between November to April and is an acute viral illness carried by rats. Lassa is able to spread from person-to-person after infection through blood, tissue, secretions or excretions of a Lassa virus-infected individual. If not treated in a timely manner, Lassa fever can kill 70% of personnel infected. Like malaria, Lassa's initial symptoms are the same as Ebola, including bleeding, vomiting and fevers. Lassa transmission is not as easy as Ebola transmission, but patients are placed in complete isolation in order to mitigate transmission. Lassa is widespread in parts of Liberia, Sierra Leone, Guinea, and Nigeria. Professor Robert Garry of Tulane University stated there already are dozens of cases in eastern Sierra Leone. Nigeria reported its first seasonal outbreak of Lassa fever in Oyo State on 28OCT14, one week after the World Health Organization declared the country Ebola free. According to the Center for Disease Control (CDC), the Lassa virus infects approximately 100,000 to 300,000 individuals per year in West Africa, with close to 5,000 deaths. (<http://www.bbc.com/news/world-africa-29868394>) ***Like malaria, Lassa fever has similar symptoms to EVD and will negatively affect reported suspected EVD cases during the dry season. Unlike malaria, Lassa fever spreads person-to-person. Similar to EVD, patients with Lassa fever need isolated treatment in order to improve their condition and reduce the chance of transmission. Ebola Treatment Units (ETUs) and other health care providing facilities need to ensure proper procedures to prevent cross contamination between positive EVD patients and Lassa or Ebola patients while waiting for test results.***

(U) Ebola Treatment Centers Experience a Decline in Patients: Liberia experiences unfamiliar empty hospital beds as the efforts to alleviate the Ebola epidemic continue. This is a surprising change from the previous month where Ebola patients were turned away from Ebola Treatment Units (ETUs). Now new admissions to ETUs are dropping or flat lining, the number of submitted samples to Ebola laboratories fell significantly, and the percentage of positive testing dropped for Ebola diagnosis. Malin Lager, a spokeswoman at Doctors Without Borders treatment center outside Monrovia said "The numbers are decreasing, but we don't know why," and later added, "It is too early to celebrate". The treatment center that Malin works out of has a capacity for 253 patients, had only 90 patients on 01NOV14. (<http://www.nytimes.com/2014/10/30/world/africa/ebola-liberia-who.html>, <http://www.nytimes.com/2014/10/29/world/africa/in-liberia-a-good-or-very-bad-sign-empty-beds-.html>, <http://www.voanews.com/content/health-experts-say-ebola-might-be-loosening-grip-on-liberia/2506178.html>) ***The number of Ebola patients in treatment facilities has steadily declined due to effective preventive measures and international aid in Liberia. With most aid and treatment centers stemming out of Monrovia, remote areas of the country may contain high amounts of people infected with Ebola. Many people live in areas with bad roads and little or no cell phone services, making potential treatment centers well outside the capital vital to evaluating the number of cases.***

(U) JOA

(U) Religious Leaders in Kabala will Disseminate Information on Ebola: Working with United Nations International Children's Emergency Fund (UNICEF) and the District Health Management Team (DHMT), the World Health Organization (WHO) engaged over one hundred Kabala leaders on its new strategy to stop the spread of the Ebola Virus Disease (EVD) in the Koinadugu District. This meeting brought together religious leaders and trained them on disseminating effective Ebola messages to Koinadugu citizens. WHO, UNICEF, and DHMT taught the religious leaders to use their various places of worship to sensitize the local populace that existed in the district before this time. During the presentation, Joy R. Rebecca (WHO) informed attendees that the training and materials provided would give the religious leaders correct Ebola messages during their sermons in mosques and churches in hopes to contain and eliminate Ebola transmission. (http://news.sl/drwebsite/publish/printer_200526543.shtml) ***In order to contain EVD, communities must control transmission at their level, and to mitigate transmission, community leaders must educate their residents on EVD. Due to their close proximity to the population and social status, religious leaders can effectively convey these messages to the populace and widely distribute accurate information on regular intervals. An example is the***

United Methodist leaders that have implemented text-messaging technology that sends daily prevention tip texts signed by local area bishops to Frontline SMS, a cloud-based text messaging service. The service then forwards the messages to local residents of Sierra Leone and Liberia.

(U) Senegalese Government Boosts Ebola Awareness Through SMS Campaign: As part of a massive public awareness effort, Senegal's Ministry of Health sent four million Short Message Service (SMS) texts to the public, warning of the dangers of Ebola and how to prevent it. The messages, driven by the WHO-supported "mDiabetes" platform, targeted people living in the capital city of Dakar and St-Louis, a heavily populated region in the country. Through the SMS campaign launched in partnership with major mobile phone operators in Senegal, people were encouraged to alert health authorities of anyone showing signs of a fever and bleeding by calling a toll-free number. The government distributed messages ahead of large-scale public events, including football matches and rallies. (<http://www.who.int/features/2014/senegal-ebola-sms/en/>) ***In addition to the Senegalese Governments quick response with EVD control measures, an SMS-based alert system served a vital role in the educating process of the local populace. Although only roughly 45% of Liberia's population has access to mobile phone services, Liberia and other countries throughout the JOA could benefit from this system as a means to quickly inform the local populace of Ebola-related information.***

(U) UNICEF to Double Staff in Ebola-Affected Countries: The United Nations Children's Fund (UNICEF) announced today that the program plans to boost staff in countries on the frontlines of the Ebola outbreak in West Africa. At United Nations Headquarters, Dr. Peter Salama, Global Ebola Emergency Coordinator for UNICEF, told reporters that the agency will double its staff from 300 to 600 in the three most-affected countries (Guinea, Liberia and Sierra Leone) where children account for one-fifth of all Ebola cases. (<http://reliefweb.int/report/liberia/unicef-double-staff-ebola-affected-countries-un-health-chief-deplores-lagging-vaccine>) ***Additional staff will increase healthcare workers capabilities to treat locals and double the current aide capability in country. Specialized treatment and care towards children will increase local morale, decrease infant and toddler mortality, and reduce suspected, probable, and confirmed EVD cases.***

(U) Possible Unofficial Border Patrols Occurring in the Ivory Coast: On 01NOV14, Gregory Warner, a reporter from NPR news, reported the Ivory Coast Government "mobilized" committees of local farmers to conduct unofficial border patrols in order to assist with border security. The Ivory Coast officially closed its border with Liberia and Guinea on 23AUG14 in order to prevent Ebola infected individuals from crossing the border. According to Warner, farmers will report anyone who comes into the country, especially along the smaller, less known crossing areas. He also noted the government initiated a number of behavioral health changes like no shaking hands, bushmeat consumption, and frequent hand washing. (<http://www.npr.org/2014/11/02/360859159/citizen-patrols-guard-borders-from-ebola>) ***These border patrols are likely ineffective. As previously stated, cross border movement of individuals infected with EVD remains a concern for all of West African Nations. (Reference: 20141102 JFC-UA INTSUM)***

(U) Weather

(U) 24 Hour Weather:

By late afternoon, isolated thunderstorms and showers will form over River Gee, Sinoe, and Grand Gedeh counties which will restrict rotary wing flights. These isolated thunderstorms and showers will move westward through Rivercess county, possibly reaching Roberts International Airport and the Barclay Training Center and move offshore from 1800 to 0200 on the 5th. In the North, we expect isolated thunderstorms to impact operations in Lofa county from 1700 to 2300. Tonight, we expect marginal impacts to rotary wing assets due to ceilings and visibility overnight in North and South.

(U) Five Day Weather Outlook:

FOR PLANNING ONLY

MONROVIA, LIBERIA 5-DAY FORECAST

AS OF 2000 HRS ZULU 03 NOV 14

FORECAST	Tue 04 Nov 14		Wed 05 Nov 14		Thu 06 Nov 14		Fri 07 Nov 14		Sat 08 Nov 14	
TEMPS	LO: 75F/24C	HI: 85F/29C	LO: 73F/23C	HI: 84F/29C	LO: 75F/24C	HI: 83F/28C	LO: 75F/24C	HI: 83F/28C	LO: 73F/23C	HI: 86F/30C
	WIND CHILL N/A	HEAT INDEX 95F/35C	WIND CHILL N/A	HEAT INDEX 90F/32C	WIND CHILL N/A	HEAT INDEX 93F/34C	WIND CHILL N/A	HEAT INDEX 85F/29C	WIND CHILL N/A	HEAT INDEX 93F/34C
WINDS	10G15 KTS	10G15 KTS	2 KTS	6 KTS	4 KTS	7 KTS	4 KTS	7 KTS	3 KTS	7 KTS
SKYVIS/WX CONDITIONS	4 MI / 1500FT	5 MI / 1500FT	4 MI / 2000FT	5 MI / 1500FT	4 MI / 1500FT	5 MI / 2000FT	5 MI / 1500FT	5 MI / 2000FT	4 MI / 1500FT	5 MI / 2000FT
DA / PA	MAX DA: +2249FT	MAX PA: +117FT	MAX DA: +2060FT	MAX PA: +126FT	MAX DA: +2161FT	MAX PA: +135FT	MAX DA: +1757FT	MAX PA: +135FT	MAX DA: +2172FT	MAX PA: +154FT
SOLAR / LUNAR DATA	BMINT: 0542 SR: 0628 MR: 1631	EENT: 1908 SS: 1822 MS: 0407	BMINT: 0542 SR: 0629 MR: 1722	EENT: 1908 SS: 1821 MS: 0502	BMINT: 0542 SR: 0629 MR: 1813	EENT: 1908 SS: 1821 MS: 0557	BMINT: 0542 SR: 0629 MR: 1906	EENT: 1908 SS: 1821 MS: 0652	BMINT: 0542 SR: 0629 MR: 1959	EENT: 1908 SS: 1821 MS: 0747
ILLUM DATA	DARK PERIOD 1:35	MOON PERIOD 4:07 / 4:52	DARK PERIOD 0:40	MOON PERIOD 5:02 / 4:52	DARK PERIOD 0:00	MOON PERIOD 5:42 / 4:52	DARK PERIOD 0:00	MOON PERIOD 5:42 / 4:52	DARK PERIOD 0:51	MOON PERIOD 5:42 / 4:01
	82%	89%	90%	95%	96%	99%	99%	100%	100%	99%
RW DAY	TS	TS		TS		TS		TS		TS
RW NIGHT	TS	TS		TS		TS		TS		TS
FIXED WING	TS	TS		TS		TS		TS		TS
SHADOW UAV	C TS C	C TS C	C	C TS C	C	C TS C	C	C TS C	C	C TS C
TRAFFICABILITY	P	P		P		P		P		P
PERSONNEL	P	T	P	T	P	T	P	T	P	T
TIME	00 06 12 18	00 06 12 18	00 06 12 18	00 06 12 18	00 06 12 18	00 06 12 18	00 06 12 18	00 06 12 18	00 06 12 18	00 06 12 18

FORECASTER : DET 4, 18WS

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