

INSIDENPHIL

National Public Health Institute of Liberia (NPHIL)...Preventing & Controlling Public Health Threats

SEPTEMBER 2021

BREAKTHROUGH ACTION DONATES BAGS TO ENHANCE EBOLA VACCINE EXERCISE

Breakthrough ACTION, a United States Agency for International Development (USAID) Flagship Social and Behavior Change (SBC) Project, led by Johns Hopkins Center for Communication Programs has donated a consignment of 26 Back Bags to enhance the Ebola Vaccine Exercise scheduled to kick off shortly.

The Bags were presented by Dr. Saratu Olabode-Ojo, Chief of Party of Breakthrough ACTION to Dr. Benjamin Vonhm, Medical Specialist in office of the Director-General of NPHIL and also Principal Investigator of the Ebola Vaccine Project. The bags are intended to be used by vaccinators in the field.

Breakthrough Action Country Director, Dr. Saratu Olabode-Ojo, left and Dr. Benjamin Vonhm of NPHIL, right

"If the Public interest is going to be increased, we need to ensure that health security issues are highlighted amongst our country's emerging health priority needs"

Jane Macauley Director General, NPHIL

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NPHIL CONCLUDES BILL AND MELINDA GATES FOUNDED PROJECT

The National Public Health Institute of Liberia (NPHIL) has concluded a project, title: Taking Strides to Enhance True Campaign Coverage. The project was a 100,000 Dollars grant awarded to NPHIL by the Bill and Melinda Gates Foundation and implemented through the division of Global Health and Partnership in collaboration with the Expanded Program on Immunization (EPI) of the Ministry of Health. The project was executed in 14 months, from June 2020-Aug 2021.

It objectives were to evaluate the degree to which known monitoring of activity among vaccination campaign staff influences coverage and efficiency, including cost-effectiveness of vaccination in rural Liberia.

The project also aimed at determining the level of impact of an innovative intervention in the immunization campaign activities. It provided justifiable reasons for the integration and application of technology to yield concrete outcomes and provided convincing evidence for the use of electronic gadgets during immunization campaign to measure early performance in real-time.

The first five months of the project was focused on campaign's planning, the procurement of necessary equipment, identifying and mapping target communities, and developing training materials.

During the course of the project, virtual training was conducted for participants and supervisors from Margibi and Montserrado Counties as well as refresher training on the use of the electronic gadgets and the role and responsibility of each participant's involvement in the campaign.

At the end of the training exercises, 120 persons were trained and grouped according to the distribution plan. They were all deployed in the field and with the skills acquired administered the immunization campaign with the use of electronic gadgets.

NPHIL AND NWASH COMMISSION SIGNED MoU ~ from page 5

And shall rely on the jurisdiction, standard capability and water quality test result(s) of NPHIL before issuance of licenses or certificates for community water points, packaged drinking water (sachet, bottled or jugged) as well as imported water brands to guarantee Inter-Agency Collaboration within the WASH-SECTOR.

The parties furthered agreed that NPHIL shall ensure that all drinking water sources and or products are tested for microbial, physical and chemical contents and results shared with the **NWASH** Commission and shall also ensure that adequate and quality interventions employed through regular collaboration with NWASH Commission to ensure quality water community, district and county levels.

NPHIL will periodically inform NWASH Commission about its programs and activities relative to the subject of this Agreement, including water quality test data for compliance monitoring and certification or licensing as well as coordinate with NWASH Commission on all public health emergencies with WASH implications.

The Parties agreed to institute a separate BUT harmonized fee regime that will ensure adequate provision of services to the public. NPHIL fees shall be for testing purpose (i.e replenishment of reagents, laboratory supplies and services) while the NWASH Commission fees shall be for overall compliance.





Participants at the just ended NAPHS workshop

HEALTH AUTHORITIES AND PARTNERS BRAINSTORM ON HEALTH SECURITY

rA three-day national workshop to assess the National Action Plan for Health Security (NAPHS) Implementation Evaluation ended in Monrovia, with a call from the Director General of the National Public Health Institute of Liberia (NPHIL), Madam Jane A. MaCauley to promote issues with a high degree of acceptability to concentrate all efforts and resources required to strengthen health security.

According to the NPHIL Boss, if the public interest should increase, there is a need to ensure that health security issues are highlighted amongst the country's emerging health priority needs. The discussions focused on biosafety and biosecurity, food security, emergency response operations, real-time surveillance among others.

Speaking on behalf of the World Health Organization (WHO), the Acting Country Representative Dr. Yoti Zabulon lauded the Liberian Government for its commitment in building a resilience health system. He noted that the assessment was necessary, especially at the time when there was emergence of new diseases across major borders.

For her part, the Country Director of the United States Center for Disease Control and Prevention (US-CDC) Dr. Rachael Idowu pledged the United States Government's continuing support to the health sector of Liberia. She recounted the numerous support in the areas of disease surveillance, laboratory diagnostics and other health related projects.

The three-day events were intended to review the NAPHS activities, mobilize resources, and work with the One Health Platform in its implementation. With contribution from partners, Liberia supports IHR (International Health Regulation) in its commitment to ensuring harmonious implementation of the REDISSE (Regional Disease Surveillance System Enhancement) Project and also in furthering the ideals of One Health.

The workshop was held from August 16-18, 2021 at the Golden Gate Hotel. Representatives from the World Health Organization, United States Center for Disease Control, USAID and the World Bank attended the workshop.



Minister Jallah, Director Nagbe, and US-CDC Country Director

HEALTH AUTHORITIES HEIGHTEN SURVEILLANCE AT BORDERS

In the wake of a confirmed Ebola case as announced by the Government of Ivory Coast, the National Public Health Institute of Liberia (NPHIL) in collaboration with the Ministry of Health (MoH) and partners have heightened surveillance at counties bordering the Ivory Coast and the Republic of Guinea.

Recently, an 18-year-old Guinean girl who travelled from Guinea to Abidjan was confirmed of the Ebola Virus Disease (EVD) by health authorities in the Ivory Coast.

The Government of the Republic of Liberia through the National Public Health Institute of Liberia (NPHIL) and the Ministry of Health (MoH) have step up its surveillance efforts to protect the country against any spilled over. Health authorities are advising people living in counties bordering the Ivory Coast and Guinea to take the following public health measures:

- Wash your hands regularly with soap and clean water;
- Avoid contact with bats;
- Visit a health facility immediately when you feel sick.

Meanwhile, NPHIL, MOH and partners are appealing to the general public to take the necessary preventive measures and kindly report cases of fever to the nearest health facility. The health authorities say they will continue to improve rapid response teams at county, district and community levels through the County Emergency Operations Centers (EOCs) and to provide technical, financial and logistical support.



Dr. Willimena Jallah Minister of Health, MoH



Jane Macauley Director General, NPHIL



Thomas K. Nagbe Director, DIDE, NPHIL



Acting Country Representative



The National Public Health Institute of Liberia (NPHIL) and the National Water Sanitation and Hygiene Commission (NWASHC) Commission have entered into a Memorandum of understanding relative to the provision of Water Sanitation and Hygiene Services including the issuance of certificate.

The Memorandum of understanding was signed on Wednesday, September 1, 2021 at the NPHIL's Head Office in Congo Town.

The two entities agreed to establish a unified collaboration as defined by their statutory functions and or powers under which the provision of WASH services as well as the issuance of relevant certificates, clearance and licenses will be implemented.

The parties further agreed to regulate all water, sanitation and hygiene services (i.e. issuance of WASH Sectoral certificates, official licenses and certificates based on the issuance of water quality test results and relevant public health certificate/clearance(s) from NPHIL. Under the MoU, the NWASH Commission shall develop standards, guidelines, policies and specify technical standard for water testing Laboratory to meet quality WASH services which will be communicated to the public and implemented by NPHIL and WASH related government Ministries and Agencies.

The NWASH Commission Will Inspect all WASH related entities, administer its regulations/compliances and or collaborate with NPHIL public health teams to monitor the quality of all drinking water including packaged water (imported or locally produced) as well as the certification of community water points.



DG Macauley and CEO Whitefield signed the MoU



Mr. Amos Gborie briefing the Press about the MoU



The people, and the Actions



[L-R]: Miss Cooper IRC, DG Macauley NPHIL, and Dr. Zabulon, (WHO) Mrs Soud/ USAID and Dr. Idowu, CDC



Madam Olubunmi Ojo and Dr. Antonio Oke, Facilitors



Officer Kowo of the AFL, Dr. Monday (WHO)
And Kwakwa Yealu



Some Participants at the workshop



Members of the high table listening During the presentation



Dr. Rachel Idowu and Theresa of the CDC



A participant making a point



Workshop facilitators

The people, and the Actions



Participants at the workshop



Some participants at the high table



Mr. Nagbe making a presentation



Madam Olubunmi Ojo making a point while her counterpart, Dr. Oke listens



View of the workshop hall



Officer Kowo of the AFL making a presentation



Mrs. Roseline George making a presentation



Dr. Denise Allen of the US-CDC making a point

Guinea Confirmed One Case of Marburg Hemorrhagic Fever



The World Health Organization (WHO) Liberia Country Office in August notified the National Public Health Institute of Liberia (NPHIL) of a confirmed case of Marburg Hemorrhagic Fever in Gueckedou, the Republic of Guinea. The patient was a male and resident of Temessadou, a Sub-Prefecture of Gueckedou. The Guinean Health Authorities were alerted by community members of Koundou Lengo Bengou which is 54 kilometers away from Gueckedou. This is the first time Marburg, a highly infectious disease that causes hemorrhagic fever, has been identified in the country, and in West Africa.

Gueckedou, where Marburg has been confirmed, is also the same region where cases of the 2021 Ebola outbreak in Guinea as well as the 2014–2016 West Africa outbreak were initially detected.

Marburg, which is in the same family as the virus that causes Ebola, was detected less than two months after Guinea declared an end to an Ebola outbreak that erupted earlier this year.

Efforts are underway to find the people who may have been in contact with the patient. As the disease is appearing for the first time in the country, health authorities are launching public education and community mobilization to raise awareness and galvanize support to help curb widespread infection. Liberia joins the World to applaud the alertness and the quick investigative action by Guinea's health workers. The potential for the Marburg virus to spread far and wide means we need to interrupt its transmission.

Gueckedou prefecture borders Liberia from Foya District, Lofa County and there are active socio-economic activities across the three countries (Sierra Leone, Liberia and Guinea). With the afore mention notification, Liberia has heightened cross-border surveillance to quickly detect any cases, with all neighboring counties on HIGHEST alert. The Ebola control systems are in place in Liberia and the health sector is finalizing "Marburg Preparedness and Response plan. Marburg is transmitted to people from fruit bats and spreads among humans through direct contact with the bodily fluids of infected people, surfaces and materials. Illness begins abruptly, with high fever, severe headache and malaise. Many patients develop severe hemorrhagic signs within seven days. Case fatality rates have varied from 24% to 88% in past outbreaks depending on virus strain and case management. Although there are no vaccines or antiviral treatments approved to treat the virus, supportive care – rehydration with oral or intravenous fluids – and treatment of specific symptoms, improves survival. A range of potential treatments, including blood products, immune therapies and drug therapies, are being evaluated.

In Africa, previous outbreaks and sporadic cases have been reported in Angola, the Democratic Republic of the Congo, Kenya, South Africa and Uganda.



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