



International Medical Corps staff set up an Ebola screening and referral unit at the Ingongo Health Facility in Bulape Health Zone, Kasai province.

As of September 24, there have been 48 confirmed and 10 probable cases of Ebola virus disease (EVD), including 40 deaths (30 confirmed and 10 probable) in the Kasai province of the Democratic Republic of the Congo (DRC). Rapid response to this outbreak has provied challenging, given that it's an isolated province with an already overburdened health system and chronic poverty-related food insecurity. The Ebola Zaire strain that is present in Kasai is particularly dangerous, with a mortality rate up to 90%.

Few airlinks to the region exist, with the World Health Organization (WHO) and UNHAS partnering to bring a air travel to Bulape Health Zone in response to the outbreak. Médecines Sans Frontières (MSF) was able to establish an 18-bed Ebola Treatment Center (ETC) at the Bulape General Hospital, though this was quickly overwhelmed, with confirmed and suspected cases being treated in the same area, which goes against proper infection prevention and control (IPC) practices. The larger community served by the hospital is also no longer able to access services, as the full health facility had become a "red zone," with serious risk of EVD transmisison. As a result, community members have begun to turn toward tradiitonal healers.

Concerns about the disease are widespread, as Ebola has been detected in more areas within Bulape Health Zone. There are rumors of community members fleeing affected areas, which could lead to the virus spreading outside of Kasai province into neighboring provinces, or even over the border into Angola. Vaccinations are available for some frontline health workers, but the supply of vaccines is not sufficient.

FAST FACTS

- On September 4, the DRC Ministry of Health officially declared an outbreak of Ebola virus disease (EVD) in the Bulape and Mweka health zones in Kasai province. Since then, the virus has spread to Bambale, Bulape and the surrounding community, Dikolo, Ingongo and Mpianga health areas, inside of Bulape Health Zone.
- According the the World Health Organization, as of September 24, there have been 48 confirmed and 10 probable cases of EVD, and 40 deaths (30 confirmed, 10 probable) in Bulape Health Zone.
- Kasai province is extremely isolated, sometimes requiring multiple days of driving from Kinshasa to Tshikapa, the provincial capital, during the rainy season. Very few air routes reach the province, though an airstrip in Bulape is being established.
- Significant gaps exist in the response, including case management capacity, blood supplies, IPC/WASH support and more.

OUR RESPONSE

- International Medical Corps has been responding in the DRC since 1999, and currently has offices in Goma and Kinshasa.
- Our Rapid Response Team (RRT)
 has deployed to Kasai, where staff
 members have set up a temporary
 isolation unit at the Ingongo Health
 Facility in Bulape Health Zone,
 improving patient flow while a
 screening and referral unit is under
 construction.
- Staff members also are training several DRC-based organizations on Ebola-specific topics.

International Medical Corps Response

International Medical Corps first began operations in the DRC in 1999 and has extensive experience with EVD, both in and outside of the DRC. We were key players in responses to outbreaks of EVD in West Africa in 2014–2016 and in DRC between 2018 and 2022, and have made contributions to research that have informed treatment protocols. Consequently, our rapid response teams (RRTs) have mobilized rapidly to respond to this critical outbreak in Kasai, assessing needs on the ground and leading surveillance working groups at both the national and provincial levels. We have deployed qualified health personnel to support case management, provide training in IPC and risk

communication and community engagement (RCCE), and help manage efforts involving water, sanitation and hygiene (WASH).

International Medical Corps has set up an isolation and triage room at Ingongo Health Facility, about 11 kilometers from Bulape, and is setting up a screening and referral unit that should be functional by September 26. Our team has begun procuring personal protective equipment (PPE), pharmaceuticals and critical cleaning supplies (including chlorine) to support the response.

As part of ongoing efforts by International Medical Corps' LEARN initiative to strengthen infectious disease capacity in the DRC, we are equipping local and national non-governmental organizations with the critical skills needed to respond effectively to Ebola. Leveraging both globally recognized materials and DRC Ministry of Health-approved content, LEARN has customized its training curriculum to address key Ebola-specific topics: IPC; RCCE; safe and dignified burials;, triage, isolation and notification; transmission-based precautions; community-based surveillance; contact tracing; and safe, effective, and accountable programming. By delivering these targeted modules directly to DRC-based organizations, the project strengthens their readiness and capacity to act at the community level, ensure that local actors can more effectively support containment efforts.

One of our mental health and psychosocial support specialists is working in several health facilities responding to EVD—including the ETC at the Bulape General Hospital—to ensure that they have the mental health support required for first responders, patients, and community members.

Support is critically needed to ensure that International Medical Corps can continue responding to this Ebola outbreak. Immediate procurement of appropriate supplies—including PPE, IPC equipment and WASH supplies—is especially important, as is the ability to support key personnel in the field as they respond to the outbreak and conduct training.