Seven Months on the Ground

In late 2014 Internews established the “Information Saves Lives” program in Liberia. Its aims were to investigate and respond to public rumors about Ebola; to train and empower journalists to report accurately about health issues; and to stimulate the exchange of information in response to the urgent Ebola health crisis. As we publish our last newsletter, we reflect on how our project has worked to strengthen the flow of information between the public, humanitarian agencies, and the media in Liberia. In particular, through the publication of the newsletters you have been receiving, we have sought to strengthen the quality of communications about humanitarian activities to local media while building their capacity to gather, analyse, assess and report accurate and timely Ebola-related information. In this way Internews has ensured two-way communication and provided Ebola-related information to affected populations, with the support of USAID funding through the HC3 mechanism. PSI Liberia was instrumental in the establishment of Internews’ operation in the country. We are grateful to USAID, HC3 and PSI Liberia for this support.

Through local media, and through messaging campaigns initiated by governments and international organisations, information on the containment, spread and treatment of Ebola is being provided, but Internews understands that in emergency environments like this one, it is not enough to simply deliver information – one must also listen and respond to the needs and concerns of the affected populations. We call this “two-way communication” and it gives community members a voice while also allowing local media, governments and humanitarians to have a better
understanding of the information needs of the community. To be able to do this quickly Internews developed an integrated solution through the “DeySay” SMS system which uses text messages to monitor, track and report on rumors relating to Ebola across different counties. Internews, with technological support from UNICEF, set up DeySay to provide a service to both the media and the social mobilization groups. We partnered with the the Liberian Red Cross Society, Project Concern International, UNICEF, Women Campaign International, the UN Office of the High Commissioner for Human Rights and UNMIL/Human Rights and Protection Section (OHCHR-UNMIL/HRPS) and the Liberia Peacebuilding Office - Early Warning and Response Working Group to try to detect rumors in time and to address them as they arose. The rumors have been investigated and reported in these newsletters over the past 6 months, and Internews has maintained an active role within the Social Mobilization mechanism to make sure that an active response mechanism was set up. Many thanks to Reverend Sumo for his support of Internews and our work.

Another element of the “Information Saves Lives” project has been providing support to the most committed journalists through a series of small grants, training and mentoring opportunities. Selected individual journalists and local media houses located throughout the country were thereby given support to produce content aimed at responsible health reporting in the context of the current crisis. The training and mentoring that Internews implemented over the past 6 months was aimed specifically at encouraging the production of more quality news, current affairs and documentary material in print, radio, and video related to the Ebola crisis. While some of the training and mentoring sessions were held at the participating media houses, others were hosted at the Internews offices in Monrovia. Humanitarian Journalism Trainers and guest presenters worked intensively with the selected journalists. In addition to improving basic journalism skills, these sessions focused on equipping the journalists with accurate and up-to-date information regarding the Ebola outbreak and related psychosocial health issues and helped them to connect with experts and other reliable sources to aid their reporting in future.

As part of these training workshops, Internews collaborated regularly with members of the humanitarian and NGO communities who have been willing to address our participating journalists on issues related to the Ebola crisis. We take this opportunity to thank you all. Some of the issues that we have covered include: the re-opening of schools, the ongoing vaccine trials, the psychological impacts of Ebola, Ebola waste management, safe burials, reproductive health, issues of accountability relating to the Ebola response, as well as the recent reappearance of the virus and the admirable efforts to contain it.

Internews has also developed and maintained excellent partnerships with various Liberian media civil society organizations. This includes a strong consultative relationship with the Press Union of Liberia, contributing to the judging of the Annual Press Union Awards and collaborating on a number of trainings and roundtable discussions. During our time in Liberia, Internews has also co-chaired the Ministry of Information and Cultural Affairs and Tourism working group. Many thanks to Atty. Isaac W. Jackson, Jr., Deputy Minister for Public Affairs Ministry of Information, Cultural Affairs & Tourism for his support and for this incredible opportunity.

The Local Voices Liberia network, who introduce themselves in this newsletter (see article: Lifting Local Voices: Liberian journalist networking to report from across Liberia) is one of the most prominent achievements of these efforts. Despite the odds, these journalists have formed an inspiring, optimistic and enterprising network of media professionals that represent all the counties in Liberia, and who have bonded over their motivation to publish good Liberian journalism around the country into the future. While their efforts are entirely initiated within the group, Internews is pleased to endorse their aspirations and encourage you to visit localvoicesliberia.org regularly, to see their publications. Further, if you would like to tap into the local radio and journalism network in particular counties where you work, Local Voices Liberia would be a good place to start. They welcome your approaches with opportunities to collaborate and develop content.

During the past 6 months Liberia witnessed the proud national moment in May, when the country was declared “Ebola-free” and while more recently we had a sad reminder of the prevalent nature of the virus, there is an undeniable opportunity to acknowledge the considerable capacity that has been gained to battle and beat the Ebola virus, with the public, government, civil society and journalists committing to the vital flow of lifesaving information.

Internews “Information Saves Lives” is a six-month project implemented under the Health Communication Capacity Collaborative (Hc3) project and funded by USAID. The project aims at building the capacity of Liberian journalists to report accurately on the Ebola disease and on the impact of the crisis on the local population.

For more information contact: Ingrid Gercama - Health Communication Liaison Officer - igercama@internews.org - 0770461348
Internews Ebola timeline

To help remember dates of important milestones and developments during the Ebola crisis correctly, Internews has put together a timeline for Liberian journalists. What were the most important developments during the Ebola crisis in Liberia and West Africa?

2013

December, 28 2013: A two-year-old child, identified only as Emile, dies of an unidentified hemorrhagic fever in the town of Guéckédou in Guinea, followed by his mother, sister and grandmother. The family organized a traditional burial for the grandmother and by doing so spread the virus to others in nearby villages. Emile is later known as ‘case zero’ – the first Ebola patient in West Africa.

2014


March, 30 2014: The Liberian Ministry of Health declares the first official Ebola cases in Foya District, Lofa County.

March, 31 2014: Medical charity Médecins Sans Frontières (MSF) warns that the epidemic’s spread is “unprecedented.” A World Health Organization (WHO) spokesman calls it “relatively small still.”

May, 25 2014: Ebola reaches Sierra Leone. The Sierra Leonean government announces the first confirmed Ebola cases.

17 June 2014: The Liberian Ministry of Health says Ebola has reached its capital, Monrovia.

20 July 2014: Nigeria confirms its first Ebola case, a man who died in Lagos after traveling from Monrovia.

July, 23 2014: WHO starts to supply Personal Protective Equipment to Liberian Health Care workers.


July, 30 2014: Liberia shuts schools and quarantines the worst-affected communities, using troops for enforcement.

End of July 2014: Civil servants of the Government of Liberia were informed that they need not to come to work during the crisis. Also, two Samaritan Purse staff members (US nationals) become infected with the Ebola virus.

August, 4 2014: The Liberian government declares that all Ebola victims need to be cremated.

August, 6 2014: Ellen Johnson Sirleaf declares a three month state of national emergency.

August, 8 2014: WHO declares Ebola “international public health emergency.”

August, 17 2014: Doctors without Borders (MSF) has opened ELWA 3 with an initial capacity of 30 beds.

August, 19 2014: Liberian Government announces curfew from 09.00 pm to 6.00 am.

August, 20 2014: Security forces in Monrovia fire shots and tear gas to disperse crowd trying to break out of quarantine, killing a teenager called Shaki Kamara.

Late August 2014: ELWA 3 (run by MSF) can only be opened for 30 minutes in the morning, although they have extended their capacity to 120 beds. People are dying on the gravel outside the gates.

Early September: The Ebola Treatment Unit in Bong County is opened by International Medical Corps. They admit 2 patients the same day.

September, 8 2014: United States says it will send a 25-bed military field hospital to Liberia to care for foreign health workers.

September, 16 2014: Last confirmed case in Lofa County. USA authorizes military deployment to Liberia.

September, 19 2014: United Nations special mission (UNMEER) established to combat Ebola in Liberia, Guinea, Sierra Leone. Sierra Leone’s Government enforces a three-day lockdown to try to halt Ebola’s spread.

September, 23 2014 - U.S. Centers for Disease Control and Prevention (CDC) estimates between 550,000 and 1.4 million people in West Africa may have Ebola by January.

September, 30 2014: CDC confirms a Liberian traveller to the United States has Ebola; first case diagnosed in the United States.
Late September 2014: Peak in daily Ebola cases.

Early October 2014: USAID decides to support the construction of 18 Ebola Treatment Units. Cuba sends 53 doctors and nurses to Liberia on a mission to treat Ebola patients, the second group of volunteers from that country.

October 17, 2014: WHO raises death toll to 4,546 people out of 9,191 cases.

October 21, 2014: Médecins Sans Frontières (MSF) says it will start trials of experimental Ebola drugs at its treatment centres in November.

October 29, 2014: Ebola appears to be slowing in Liberia, WHO says.

November 2014: Government of Liberia has formally approved the building of Community Care Centers (CCCs) because there would not be enough space in the ETUs for all the Ebola patients. All regions in Liberia have ETUs and functioning laboratories.

November 7, 2014: Médécins Sans Frontières (MSF) announces a significant decline in Liberian Ebola cases, for reasons which are not fully understood.

November 13, 2014: The Liberian Government ends the state of emergency.

December 10, 2014: Time magazine names The Ebola Fighters as its Person of the Year.

December 24, 2014: National Cemetery in Disco Hill community is opened. The cemetery was opened to bury Ebola victims in a safe and dignified manner.

2015

Early January 2015: End of night curfew in Liberia. Crematorium in Marshall is closed.

February 16, 2015: Ministry of Education starts the process of re-opening of schools in Liberia.

February 19, 2015: Last Ebola patient released from the Chinese Ebola Treatment Unit at the SKD Stadium.


March 20, 2015: Liberia records its first case of Ebola in more than two weeks.

March 25, 2015: Médecins Sans Frontières (MSF) has turned over the ELWA ETU to the Ministry of Health.

May 9, 2015: Liberia passes 42 days without a new Ebola case and is declared officially Ebola free by the WHO.

June 28, 2015: a 17-year-old boy from Margibi County dies from an unknown cause. A day later the Ministry of Health and CDC receive a positive Ebola test from the laboratory.

July 2, 2015: three confirmed Ebola cases in Liberia. The 17 year old boy that has died and 2 more people that lived in his house.

July 8, 2015: the Ministry of Health officially announces two new confirmed cases in Liberia. This makes the total of five confirmed cases (one deceased plus four additional confirmed Ebola positive cases) in Liberia.

July 17, 2015: Total of 6 confirmed cases. A women from the Nedowein community has travelled to Monrovia, bringing the virus back to Montserratadu County.

July, 20 2015: Two Ebola patients are discharged from the Ebola Treatment Unit. Two other Ebola cases have been successfully treated and are awaiting the test results of their second Ebola test. They are scheduled to be released by the end of the week.

Sources:


Chronology of Events (Source: IMS): Can be requested at the Incident Management System at the Ministry of Health. Contact shadrachbestman@gmail.com for contact details of the IMS.

Media contacts:

Ministry of Health
Shadrach Bestman, Press Officer
shadrachbestman@gmail.com

Centers for Disease Control and Prevention (CDC)
Jana Telfer, Communications Specialist
Phone: 0775090926
jtelfer@cdc.gov

WHO
Liberia Communications Office
Phone: 0886516803

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Internews Ebola glossary

During the Ebola outbreak in West-Africa, many new words and terms have been added to our day-to-day speech, our newspapers and radio reports. To explain some of these terms that are either newly introduced during the Ebola outbreak, uncommon or specialized, Internews has created an ‘Ebola glossary’. A glossary, also known as a vocabulary, is an alphabetical list of terms in a particular domain of knowledge with the definitions for those terms.

**INTERNEWS EBOLA GLOSSARY**

<table>
<thead>
<tr>
<th>Terminology</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Agent</strong></td>
<td>The agent is the cause of the disease. When studying the epidemiology of most infectious diseases, the agent is a microbe—an organism too small to be seen with the naked eye. Disease-causing microbes are bacteria, virus, fungi, and protozoa (a type of parasite). They are what most people call “germs.”</td>
</tr>
<tr>
<td><strong>Biohazard risk</strong></td>
<td>Something that poses a risk to humans, animals or the environment. For example: the body fluids of an Ebola patient are very infectious: the fluids are a biohazardous risk to healthy Liberians.</td>
</tr>
<tr>
<td><strong>Case fatality rate</strong></td>
<td>The percentage of people that die because of getting infected with the Ebola virus. The case fatality rate can be calculated by looking at what percentage of Ebola patients died as a result of getting infected with the Ebola virus.</td>
</tr>
<tr>
<td><strong>CCC</strong></td>
<td>Acronym for: Community Care Center; health facilities that were established by the Ministry of Health and partners during the Ebola crisis. The facilities are designed to isolate patients from their healthy family members and community members to avoid further spread of the Ebola virus.</td>
</tr>
<tr>
<td><strong>Cluster</strong></td>
<td>A number of cases of a disease, which are closely grouped in time and place. For example: “the Nedowein cluster in Margibi has 6 confirmed Ebola cases”.</td>
</tr>
<tr>
<td><strong>Confirmed case</strong></td>
<td>A confirmed case means that a patient has been positively tested for the Ebola virus. The test has been sent to a laboratory where lab technicians have tested the virus. The test results have come back positive.</td>
</tr>
<tr>
<td><strong>Contact tracing</strong></td>
<td>Activities conducted to find people that have come in direct contact with a sick Ebola patient.</td>
</tr>
<tr>
<td><strong>Contacts</strong></td>
<td>Contacts are people that have come in direct contact with a sick Ebola patient.</td>
</tr>
<tr>
<td><strong>Contagious</strong></td>
<td>Capable of being transmitted from one person to another by contact or close proximity.</td>
</tr>
<tr>
<td><strong>Ebola</strong></td>
<td>A disease in humans and nonhuman primates (monkeys and chimpanzees) caused by the.. Ebola virus ; characterized by high fever and severe internal bleeding ; can be spread from person to person. Acronym: EVD – Ebola Virus Disease.</td>
</tr>
<tr>
<td><strong>Ebola test</strong></td>
<td>A blood test that healthcare workers do when a patient is suspected to have Ebola. The test is then sent to the laboratory to be tested by a professional lab technician.</td>
</tr>
<tr>
<td><strong>ETU</strong></td>
<td>Ebola Treatment Unit: health facility that is established to treat Ebola patients.</td>
</tr>
<tr>
<td><strong>Hemorrhagic fever</strong></td>
<td>A disease in humans and monkeys that is caused by and virus and causes internal bleeding and high fever. Other haemorrhagic fevers include Lassa fever and the Marburg virus.</td>
</tr>
</tbody>
</table>
### Hazard pay
Hazard pay means additional pay for performing hazardous duty or work involving physical hardship. Work duty that causes extreme physical discomfort and distress which is not adequately alleviated by protective devices is deemed to impose a physical hardship.

### Host
A person or other living organism that can be infected by an infectious agent under natural conditions.

### Humanitarian crisis
A sudden event that includes high levels of suffering that puts basic human welfare in danger on a larger scale.

### Incentive
A payment to stimulate greater output or investment (ILO) or something that encourages a person to work harder. An incentive does need to be monetary. A financial incentive is not subjective to minimum regulations as opposed to a ‘wage’. This means that an incentive can be as low or high as the employer and the employee agree to.

### Incubation period
The period in between which a person got infected with a virus and the onset of symptoms of infectious disease. With Ebola, it takes up to 21 days for a person to demonstrate signs and symptoms of the virus.

### IPC
Acronym: stands for Infection Prevention Control. Infection Prevention Control measures aim to ensure the protection of the general community and the sick population and their health care workers from an infectious diseases (in this case, Ebola).

### Isolation
Separating people from having contact with other people. In the Ebola outbreak: separating people that are sick from the healthy people to make sure Ebola will not spread further.

### Mortality rate
The mortality rate is a measure that can show how many people have died during a specified interval of time.

### Outbreak
An outbreak is a sudden increase in occurrences of a disease in a particular time and place.

### Risk benefits
Risk benefit is the non-official term used by protesters in Liberia to describe the ‘hazard pay’ they belief they are entitled to because of exposing themselves and their family to ‘risky’ situations.

### Safe burial
The burial of an Ebola patient that is conducted safely by the County Health Team. A burial of an Ebola patient needs to be conducted safely so as not to put others in danger of getting infected with the Ebola virus.

### Signs and symptoms
Signs and symptoms that a person is suffering from because of getting infected with the Ebola virus include: a fever that starts quick-quick, weakness, headache, body pain, sore throat, vomiting, running stomach, rash, red eyes, and/or bleeding from the nose or the mouth.

### Social mobilization
Activities organized to mobilize groups of people for a particular cause.

### Source of transmission
The way a person becomes infected with an infectious virus. Example: CDC is investigating the source of transmission of the Ebola cases in Margibi. They are considering sexual transmission. This means that the 17-yr-old Ebola victim might have gotten sick because of having unprotected sex.
Suspected case  A suspected case of Ebola is a patient that has a fever that comes quick-quick and shows three or more of the symptoms of the Ebola virus. A person can also be a ‘suspected’ Ebola case because they have been in contact with a dead person that died of Ebola or with a dead body that died of an unexplained cause (CDC calls this a ‘person under investigation’).

Symptomatic treatment  Treating the signs and symptoms that a person can experience because of being infected with the virus, rather than treating the virus itself. Since there is no cure for the Ebola virus, doctors try to help Ebola patients survive by giving them symptomatic treatment.

Trial vaccine  A clinical trial that aims at making sure a vaccine is safe and working before pharmacies are allowed to sell the vaccine.

Vaccines  A fluid that provides active immunity to a particular disease, by training the body to fight off that disease. This means that when a person is vaccinated, the likelihood that they will then become infected with that virus is very small.

Virus carrier  A person or animal that is not sick but is able to transmit the virus to others anyway.

Media contacts:

Centers for Disease Control and Prevention (CDC)
Jana Telfer, Communications Specialist
Phone: 0775090926
jtelfer@cdc.gov

Sources:

Case definitions & Q&A (CDC):

Case definitions (WHO):

Liberian Labor Law (Source: Ministry of Labour):

Glossary (Source: Colombia University):
Some locals from Bong County indicate that teachers and students have not been going to school since Minister George Werner announced the new Education policy.

Some locals from Montserrado County state that children stopped going to school after the new Education policy of Minister Werner was declared.

Some citizens from Sinoe County would like to know if the government will refund their school fees or WAEC fees when schools close.

Some locals rumour that there are too many points to illegally cross the borders in the country.

Residents from Lofa County state that the Lofa County Health Team has officially stated that they have vaccinated 90% of the children whose parents were initially hesitant. Parents initially believed that the vaccinations were intended to infect their children with the Ebola virus.

Some citizens from Grand Gedeh County would like to know when Liberia will be declared Polio free.

Some citizens from Lofa County state that the only Ebola Treatment Unit (ETU) in the county has been demolished, and that cars and motorbikes previously used by the ETU staff were donated to the County Health Team.

Locals from River Gee County would like to see the Ebola Treatment Center that was built by ARC turned into a nursing center.
**NEW CASES**

Citizens from Montserrado County would like to know why Liberia was declared Ebola-free. They'd also like to know if Ebola re-entered Liberia because the 17-yr-old Ebola victim ate a dead dog.

Montserrado

**BORDER SECURITY**

Locals in Grand Cape Mount County question the government’s decision to open to borders and would like to know if the borders can be closed again. They would also like to know what the government is doing to prevent illegal entry.

Grand Cape Mount

Residents from Grand Gedeh County say that UNHCR conducted a training for BIN officers at the border posts in the county. The officers were trained in recognizing the signs and symptoms of the Ebola Virus and the enforcement procedures of the Ebola infection prevention protocols.

Grand Gedeh

**RESTORATION OF HEALTH SERVICES**

Locals from Maryland County report that INGO Partners in Health has donated a health facility to the Ministry of Health. The facility has 100 beds available to treat patients. Locals are worried about the distance of the facility from the city. They feel as if the facility is far away from the city, which makes it difficult for families to transport sick people to the clinic.

Maryland

**BUSH MEAT**

Locals from River Cess County indicate that citizens in River Cess County have started selling bush meat again.

River Cess
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Residents from Bomi County say that Radio Bomi has started airing a drama program. The drama helps listeners to understand how they should follow Ebola protocols and afterwards ask listeners to call in and share the lessons they have learned from the drama.

Citizens from Bomi County also indicate that the Ebola Task Force meetings have restarted on Thursdays, and that several NGOs have started the distribution of infection prevention control materials to locals in the counties.

Locals from River Cess County say that awareness raising activities have started again since the Ministry of Health has announced the new cases in Margibi County.

Some citizens from Sinoe County would like to know if Ebola will hit the county on the 26th of July, when the country celebrates Independence Day. There will be many social gatherings around the country and people will travel far to meet their family. These citizens believe that this will increase the spread of the Ebola virus to other counties, beyond Margibi and Montserrado.

Farmers from Grand Bassa County are asking if the Government or partners have any funding available for farmers. They report to have been massively hit by the previous Ebola outbreak and ask for support.
New cases

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<td>Two Ebola victims are still in treatment at ELWA Ebola Treatment Unit but will be released this week. They have been tested negative once for the Ebola virus and are still awaiting the test results for the second Ebola test.</td>
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<td>Some residents from Grand Cape Mount County rumour that Montserrado County has a new confirmed Ebola case.</td>
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Even though the Ministry of Health declared that the patients would be released last Friday, they’ve been retained additional days so healthcare workers could monitor their health.

Ministry of Health
Shadrach Bestman, Press Officer
shadrachbestman@gmail.com

Personal Protective Equipment

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<td>Personal Protective Equipment are designed to protect healthcare workers against getting infected with the Ebola Virus. If a PPE has been used by healthcare workers to treat patients, it is very dangerous to re-use the suit.</td>
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<td>Citizens in Montserrado County rumour that locals have broken into an Ebola Treatment Unit and stolen Personal Protective Equipment (PPEs). The fact that non-medical professionals wear PPEs to protect them from the rain, according to these citizens, is not correct and poses a dangers to the population of Montserrado County.</td>
<td>PPEs that have been used by doctors or nurses to treat Ebola patients should be burned after use. The Ebola virus can survive in and on objects and materials that have come in contact with body fluids of Ebola patients. It is for this reason that when an Ebola Treatment Unit closes down, the ETU needs to dispose the medical waste of the patients (bed cloth, PPE, toilet paper, needles etc.) in the correct way. If the disposition of medical waste is not done properly, people could get infected again.</td>
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<td><strong>Montserrado County</strong></td>
<td>If the PPE has never been used to treat patients, in theory, the PPE can be used again safely. However, if the rumour is true and people have stolen PPEs from an ETU – it is sensible for citizens to be concerned.</td>
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Information Saves Lives

**Rumors Reporting**

**Montserrado County**

Some locals from Montserrado County rumour that the county has 16 confirmed Ebola cases.

**Grand Cape Mount**

Some residents from Grand Cape Mount County rumour that Montserrado County has a new confirmed Ebola case.

The Ministry of Health has disclosed that the two Ebola patients that were undergoing treatment at ELWA Ebola Treatment Unit were discharged on the 20th of July. Before being discharged the patients tested negative for the Ebola virus twice.

Two Ebola victims are still in treatment at ELWA Ebola Treatment Unit but will be released this week. They have been tested negative once for the Ebola virus and are still awaiting the test results for the second Ebola test.

Even though the Ministry of Health declared that the patients would be released last Friday, they've been retained additional days so healthcare workers could monitor their health.

Ministry of Health
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**Personal Protective Equipment**

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Personal Protective Equipment are designed to protect healthcare workers against getting infected with the Ebola Virus. If a PPE has been used by healthcare workers to treat patients, it is very dangerous to re-use the suit. PPEs that have been used by doctors or nurses to treat Ebola patients should be burned after use. The Ebola virus can survive in and on objects and materials that have come in contact with body fluids of Ebola patients. It is for this reason that when an Ebola Treatment Unit closes down, the ETU needs to dispose the medical waste of the patients (bed cloth, PPE, toilet paper, needles etc.) in the correct way. If the disposition of medical waste is not done properly, people could get infected again.

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**Personal Protective Equipment**

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<td></td>
<td>Additionally, it is important to keep in mind that PPEs are especially designed to protect health care workers from getting Ebola. As such, PPEs should be in the hospital not on the streets. PPEs are expensive and are not produced nor sold in Liberia. They need to be shipped in from other countries which can take up to weeks. Having a good stock of PPEs is of vital importance to combat the spread of the virus in Liberia. Remember, the lack of proper protection equipment for health care workers last year in July and August caused many doctors and nurses to die of the Ebola virus. Many health care workers stopped coming to work out of fear. This caused the number of Ebola cases to increase drastically in the country.</td>
</tr>
</tbody>
</table>


ICRC Video on waste disposal from the ETUs (Source: ICRC): https://www.youtube.com/watch?v=nFwfoSOe3Yc


**Ministry of Health**
Shadrach Bestman, Press Officer
shadrachbestman@gmail.com

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**Queen Sheba**

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<tbody>
<tr>
<td>Montserrado County</td>
<td>Ebola is not spread by Queen Sheba. Ebola is a disease in humans and nonhuman primates (monkeys and chimpanzees) caused by the Ebola virus. A virus is a tiny parasite which can infect living things. Ebola originated in West Africa when a 2-yr-old ate bush meat and got infected with the virus. Ebola can also be spread from person to person.</td>
</tr>
</tbody>
</table>
| Some residents from Montserrado County rumour that Queen Sheba’s arrival in July last year caused many people to die from Ebola. They believe that she has come back again to reintroduce the virus to Liberia. | Centers for Disease Control and Prevention (CDC)
Jana Telfer, Communications Specialist
Phone: 0775090926
jtelfer@cdc.gov |

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Poll: six months rumor reporting from 15 Counties in Liberia

From February to July 2015, Internews has collected hundreds of rumors from locals all over Liberia through a two way system called the ‘Dey Say’ SMS system. Volunteers throughout the country text message their concerns to Internews via this system, and local radio producers and county based journalists call Internews on a weekly basis to report the most discussed rumors in their counties. On a weekly basis Internews feeds back a summary of the most discussed rumors per county to the humanitarian community and Liberian media outlets via its dedicated newsletter.

In this newsletter Internews looks back in time: what trends can be identified when looking back over the reported rumors? What did ‘dey say’ in Liberia in the last months? Below is an analysis of the most ‘talked about’ topics per month.

February: Hot topics: trail of Ebola vaccine, school re-opening.
- Citizens rumor that the Government is trying to infect people with the Ebola virus again by injecting them with the Ebola trial vaccine. They believe that Ebola is a man-made disease created by the Government to make money.
- Locals also rumor that the schools are not ready to welcome students again. They are worried that the Ebola infection prevention kits that were handed out by the Ministry of Education and UNICEF contain spray that is intended to infect children with the Ebola virus.

March: Hot topic: Border re-opening
- Citizens rumor that the Government has reopened borders and schools so that more people can get infected with the Ebola virus. They say the Government has reopened the borders to receive more funding from its partners as the virus is gradually declining in the country.
- Locals rumor that the screening process at the border is not effective because of the huge number of people that are crossing.

April: Hot topic: Measles and polio immunization campaign
- Locals rumor that the upcoming Measles and Polio immunization campaign is intended to infect people with the Ebola virus. Doctors and nurses, according to these locals, are infecting children with the Ebola trial vaccine and not, as they say, with an immunization vaccine.

May: Hot topic: Polio and Vitamin A Immunization campaign
- Citizens rumor that the Polio and Vitamin A immunization campaign is actually bringing Ebola back this rainy season. Mothers are refusing to take their children for the immunization activities as they believe that the vaccine is really the Ebola trial vaccine.

June: Hot topic: School closure/New Ebola outbreak
- Citizens in Liberia rumor that the Ministry of Education is closing schools by the end of June because of a new Ebola outbreak in the country.
- Some citizens in Liberia rumor that there are Ebola cases in Redemption and JFK hospital. They say the Government is hiding these cases as the country will lose investors if the Government reports new cases.
- Citizens in Liberia rumor that there are new Ebola cases in Lofa County. They believe that the Liberian and USA governments are trying to bring back Ebola this rainy season.

July: Hot topic: New Ebola cases
- Some citizens rumor that the Government is pretending that there are confirmed Ebola cases in Margibi County just so they can get more money from their partners.
- Locals rumor that the 17-yr-old boy who got infected with the Ebola virus died from eating a poisoned dog and not from the Ebola virus.
Letter from Local Voices Liberia network
Lifting Local Voices: Liberian Journalists Networking to Report from Across Liberia

Reporting from and about rural communities in Liberia has always been challenging for big media institutions in Liberia. The President of the Press Union of Liberia (PUL), Abdullah Kamara, has often stressed the challenge in getting news from rural communities. Many journalists from the rural areas in Liberia struggle to report local voices on a bigger platform. As a result, community issues from outside Monrovia are underreported in the national media and do not get the attention they deserve. To respond to this need, we - 16 journalists from across Liberia’s 15 counties – have set up the Local Voices Liberia network.

Who are we? We are reporters, producers and broadcasting journalists from county-based media houses (producing media on social media networks, print, television and chalkboard) who combine their skills in Local Voices Liberia. The individual qualities of its members have diversified the possibilities of the network to share information on multiple modes of mass communication media. Our Local Voices Liberia network is dedicated to reporting the ‘untold stories’, bridging the information gap between rural communities and the world.

Ebola, post-Ebola recovery and health reporting
With a website already setup and running, we have been reporting on the Ebola crisis, post-Ebola recovery and June 2015’s resurgence of the virus in the country. The website has also featured and reported on a wide range of community health issues including reporting distribution, and other news from rural communities all over Liberia. The Local Voices Liberia website will be on the Ebola crisis and recovery phase, integrated measles vaccine, the nationwide mosquito net a resource and medium for big news outlets inside and outside of the country.

Members of Local Voices Liberia have been trained and mentored by Internews, an international media development NGO. They have also received equipment to continue reporting ethically and professionally. The 16 members of Local Voices Liberia spent four weeks between February and July 2015 learning the basic skills of humanitarian reporting, to help support their coverage of the Ebola virus outbreak, as well as other health issues facing West Africa.

With massive prospect, Local Voices Liberia is planning its future. The network has already obtained its article of incorporation and non-for-profit business registration documents with two eyes on communicating accurate and balanced information to its audience. Local Voices Liberia is also planning to recruit more female reporters from the counties. The network believes that they need to increase female participation when it comes to reporting on women’s issues from the counties. In the next couple of months the network will be reporting on sexual reproductive health and maternal mortality during the Ebola crisis, the abuse and trafficking of drugs across the country, and post-Ebola recovery.
Internews “Information Saves Lives” is a six-month project implemented under the Health Communication Capacity Collaborative (Hc3) project and funded by USAID. The project aims at building the capacity of Liberian journalists to report accurately on the Ebola disease and on the impact of the crisis on the local population.

For more information contact: Ingrid Gercama - Health Communication Liaison Officer - igercama@internews.org - 0770461348
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For more information contact: Ingrid Gercama - Health Communication Liaison Officer - igercama@internews.org - 0770.534.892

**Local Voices Network**

**Eric S. GBASUE**
Voice of Grand Kru (Grand Kru County)
egbasue.vgk@gmail.com
0777.725.847

“This network will report on social vices impeding community dwellers progress and will also commit to development and humanitarian reporting.”

**Emmanuel S.D. MULBAH**
Bong Mines Community Station (Bong County)
sdmulbah@gmail.com
0886.594.913 / 0777.670.476

“With the level of dedication have seen from its members, this network will be one of the best sources of information from the counties.”

**Ben B. TOGBAH JR**
Radio Joy Africa (Kakata, Margibi County)
bentogbah1997@gmail.com
0889.711.919 / 0776.962.394

“As professional reporters, Local Voices Liberia will inform the world about what’s happening to Liberia rural villages and what they are doing to change their lives.”

**Max K. KLAH**
Voice of Sinoe (Greenville, Sinoe County)
maxkklah1962@gmail.com
0886.818.314

“This media platform will be a gateway to disseminate information to Liberia and the world at large.”

**Alfred Sirleaf**
Dailly Talk (Montserrado)
daillytalknews@yahoo.com / 0770.534.892

“This network can be one of the best new media outlet because it will cover every part of the country due to presence of its reporters cross the counties.”

**Henry B. GBOLUMA**
Voice of Kpo (Gbarpolu County)
kporadiogbarpolu@gmail.com
0888.019.242 / 0880.373.614

“This network will provide the platform for local voices to be lifted and heard for participatory decision making process for an ever changing society.”

**Foday D. SESAY**
Radio Bom (Tubmanburg, Bomi County)
dfoday70@gmail.com
0777.008.527

“I believe this media platform will help lift the voices of locals to impact change on their lives.”