WHO and Uganda Red Cross society sign agreement to strengthen Ebola screening at Points of Entry between Uganda and DRC

Kampala, 20 February 2019: The World Health Organization (WHO) and the Uganda Red Cross Society (URCS) have today signed a partnership agreement to strengthen Ebola screening for travelers crossing boarders across Uganda and the Democratic Republic of the Congo (DRC) with an aim of saving lives.

Under the agreement, WHO with funding from DFID Uganda, will provide USD 161,662 to complement the Uganda Red Cross Society efforts to deploy man power to manage all the 25 mapped entry points at high risk.

The support will also go towards training frontline health workers and volunteers on infection prevention and control. This activity will be undertaken jointly by the Ministry of Health, WHO and the Uganda Red Cross technical officers.

In addition, the Uganda Red Cross Society will procure and supply surveillance and screening materials at all points, while capturing data on travelers who may present “susceptible” signs of Ebola.

Travelers with symptoms related to Ebola will be taken to a care facility and provided with follow services at the different gazetted areas (Ebola treatment centers).

Other areas of support will include supported are procurement of additional equipment such as tents, furniture, hand washing facilities, thermometers and overhead costs of personnel as well as protective gears.

Standard Operating Procedures and algorithms for Ebola screening will be displayed at all the entry points and strictly followed by the screening teams and travelers. The Uganda Red Cross Society will ensure that the screening process and equipment at all entry points are standardized to increase the effectiveness in managing the Ebola preparedness process for Uganda.

With the continued spread of Ebola in DRC, Countries bordering Uganda are on high alert and have strengthened their efforts in curbing the outbreak and ensuring that the disease does not spread to their countries. For Uganda, border screening is a major area of concern for health workers in Uganda given the proximity of the epicenter of the disease. Thousands of people cross the border daily for trade, family, religious, health and education related services at both official and non-official border crossings, which increases of spreading the disease to the neighboring countries.

The situation is compounded by the influx of Congolese refugees to Uganda due to the security situation in North Kivu and Ituri provinces which are both affected by the current Ebola outbreak.

According to the Office of Prime Minister and statics from UNHCR (Feb 17th, 2019), an average of 177 refugees cross into Uganda every day from DR-Congo, bringing the total number of refugees from this country to 3008 – new arrivals this month and 6,459 this year.
Kampala, 16th February 2019: - The World Health Organization (WHO) yesterday provided scientific evidence assuring national authorities and the general public that the Ebola Virus Disease (EVD) results of the 46-year-old male who died in DRC and the body repatriated back to Uganda for burial were indeed negative for Ebola.

This followed “inconclusive” results obtained by the Uganda Virus Research Institute (UVRI) from samples using the Polymerase Chain Reaction (PCR) technology. The PCR results were inconclusive because the body had been treated with formalin that interferes with the Polymerase Chain Reaction techniques.

While the Rapid Diagnostic Test (RDT) had been used to obtain the negative results that were shared earlier, further testing using PCR is required to confirm the patient status. In this particular case, the PRC could not confirm the status due to the reason mentioned above.

This situation created some discomfort among some people but especially to health workers who were observing the 13 people in Tororo who brought the body from DRC. To assuage anxieties WHO through its system obtained and presented the Ebola test results performed from Bunia Hospital in DRC where the person died. This test result is Negative and this should put to rest any speculation over the matter.

Miss information about the disease and reports of stigmatization of the 13 people who picked the body are hence completely without any scientific basis. It should be noted that stigmatization of people especially in disease outbreaks is counterproductive as it compounds the problem creating more health and other social challenges in the community.

As of today, the Ministry of Health supported by WHO has deployed community engagement and psychosocial officers to Tororo district to address Ebola Virus Disease knowledge gaps, rumours and isolated incidents of stigmatization. This is yet another opportunity to create EVD awareness at grassroots level in the community. Capacity building in case detection, surveillance and case management are also planned for Tororo and other districts.

There is NO confirmed Ebola Virus Disease case in Uganda. Active case search continues in all communities, health facilities and on formal and informal border crossing in all districts, especially in the high-risk areas. Alert cases continue to be picked, isolated, treated and blood samples picked for testing by the Uganda Virus Research Institute (UVRI).