

Equatorial Guinea | Marburg Virus Disease

Emergency appeal №: MDRGQ003 First launched on 25/March/2023	Glide №: EP-2023-000027-GNQ
Final report issued on: 17/12/2025	Timeframe covered by final report: From 25/03/2023 to 31/12/2024
Number of people targeted: 380,000	Number of people assisted: 201,922
Funding coverage (CHF): CHF 330,838 through the IFRC Emergency Appeal CHF 130,844 Federation-wide	DREF amount initially allocated: CHF 800,000



Red Cross of Equatorial Guinea volunteers sensitized populations on how to prevent Marburg and other epidemics. / Photo by Red Cross of Equatorial Guinea

A. SITUATION ANALYSIS

Description of the crisis

On 13 February 2023, the Ministry of Health (MoH) of Equatorial Guinea received reports of a cluster of deaths due to an unknown illness in two northeastern districts of the continental region of Equatorial Guinea (Nsok-Nsomo and Ebibeyin). A total of nine people died from 7 January to 6 February with symptoms like a viral haemorrhagic fever infection. On 13 February the MoH declared an outbreak of Marburg virus disease (MVD), a highly virulent viral haemorrhagic fever. It was the first time the disease had been detected in the country.

Samples were collected and sent for testing in Dakar, Senegal. One tested positive for Marburg virus disease (MVD). According to government information, initial alerts and deaths were traced back to public events which, according to local religious and cultural customs, brought together dozens of people.

The most affected area was Bata, the most populous city in Equatorial Guinea with approximately 300,000 people. National response coordination moved to Bata under instructions of the Ministry of Health. This included all sub-commissions.

The outbreak lasted for four months and affected five districts in four of Equatorial Guinea's eight provinces. A total of 17 laboratory-confirmed cases (5 healthcare workers) and 12 deaths were recorded. All the 23 probable cases reported died. Four patients recovered from the virus. ¹

On 26 April 2023, the last confirmed case of MVD left the treatment center after testing negative for MVD twice. No new confirmed cases have been reported since then. The outbreak was declared over on 8 June 2023, after no new cases had been reported for 42 days.

At the request of the Ministry of Health, several agencies deployed to the affected area in Equatorial Guinea to support the set-up of the response, including the Equatorial Guinea Red Cross Society (EGRCS) and IFRC, with an initial DREF allocation. This included setting up surveillance systems, case management, infection prevention and control, laboratory capacities, and risk communication and community engagement (RCCE).

The World Health Organization (WHO) praised the Equatorial Guinean government for its swift and effective response to the outbreak. The WHO also noted that the outbreak was a reminder of the importance of preparedness for epidemics and pandemics.²

¹ [Proceso de revisión de las intervenciones realizadas durante la Epidemia de la Fiebre Hemorrágica por virus Marburgo en Guinea Ecuatorial \(RAA\).](#)

² <https://www.afro.who.int/countries/equatorial-guinea/news/marburg-virus-disease-outbreak-equatorial-guinea-ends#:~:text=Brazzaville%2FMalabo%20%E2%80%93%20The%20outbreak%20of.and%20other%20post%2Drecovery%20support.>

Summary of response

From 23 February to 11 March 2023, an IFRC team made up of a CEA senior Officer, and health coordinator spent two weeks in Equatorial Guinea after the first confirmed case of the Marburg virus disease. The team supported the Red Cross of Equatorial Guinea and the government through the Ministry of Health (MoH) and the Ministry of Social Affairs (MoSA) on risk communication and community engagement (RCCE), Infection prevention and control (ICP), and logistics. 100 volunteers and 4 supervisors were briefed on risk communication and community engagement (RCCE) activities in Ebebyein (40), Mongomo (40) and Nsok-Nzomo (20). In addition, 24 volunteers were trained in CEA in Bata, and a volunteer database was created for attendance lists and payment forms.



Joint visit with NS, UNICEF and IFRC in Nsok Nzomo. / Photo by Red Cross of Equatorial Guinea

The National Society deployed 125 volunteers and 8 staff to work in the affected areas. The volunteers disseminated messages to raise awareness of the risks, the modes of transmission, and the necessary preventive measures to adopt. Outreach activities like educational talks in schools, churches and mosques were carried out and communication materials were distributed. Mass awareness activities such as animations of radio broadcasts, and broadcasting of messages with megaphones were carried out.

The National Society coordination team was deployed to the areas of operation to improve coordination and respond to the emergency. This team participated in strategic and operational coordination meetings organized by the government, to which all national and international stakeholders were invited. The National Society's participation in these meetings was characterized by its alignment with the country's priorities and its complementary actions with other actors.

In addition, to ensure the participation of volunteers in the implementation of actions aimed at breaking the chain of transmission in case of death, the National Society identified potential volunteers who would work in safe and dignified burial (SDB), one of the areas in which the Government requested support. SDB starters, replenishment and training kits including body bags were procured and are prepositioned. Additionally, five disinfectant kits were procured, and the National Society donated them to the government.

Regarding the organization, structural and governance situation and challenges the National Society is going through, members of the governance and the executive board need to adhere to the appropriate procedures for good governance of the operation. The National Society facilitated the entry of the necessary technical resources to accompany the response actions and the mobilization of additional resources that ensured the response actions. A National Society Development consultant was recruited with the objective of ensuring that the National Society was equipped to respond to emergencies through a holistic and risk-informed approach to National Society disaster and crisis preparedness. This consultancy aimed to support and strengthen the National Society on governance, organizational structure, financial sustainability, preparedness, to the auxiliary role of public authorities.

The IFRC has supported the National Society with deployments of staff from the Yaoundé cluster delegation, as well as surge deployments from its roster of experts. A lessons learned workshop was held on 13 June 2023 in Yaoundé and operational achievements and challenges were discussed. The main recommendations presented were:

1. Provide Epidemic Preparedness training for volunteers.
2. Invest in continuous capacity building for volunteers.
3. Draft internal processes and SOPs for finance, administration, human resources, logistics and other departments.
4. Develop a National Society Human Resources plan.
5. IFRC must strengthen support to the NS in clarifying the roles and responsibilities of governance and the executive.
6. IFRC must continue to strengthen the positioning of the NS and thus strengthen its role as an auxiliary to the public authorities.
7. IFRC will increase support to the NS in capacity building in operational areas such as Health, Disaster Management, ERP, CEA and overall National Society Development.
8. Support the NS in strengthening the capacity of the branches (committees).
9. The IFRC should establish a permanent presence in Equatorial Guinea.
10. Develop an Epidemic Preparedness plan in agreement and in coordination with the local authorities and other humanitarian agencies.
11. Support the NS in developing a Strategic Plan.

Based on the above recommendations, a decision paper was approved on the opening of the IFRC's operational office (a program coordination office to be embedded into Equatorial Guinea Red Cross) and to obtain the IFRC's legal status agreement (LSA) in the country. Since September 2023 a program and operations manager and NSD consultant were in the country supporting the planning of the Emergency Appeal epidemic preparedness actions and NSD activities for the next two years.

In 2024, the Red Cross of Equatorial Guinea (RCEG) made significant strides in strengthening its capacity to deliver services and programs. The RCEG completed the rehabilitation of their headquarters and embarked on the journey of complete digital transformation of the National Society (NS). In this journey, the RCEG was able to acquire new computers for their staff and train them on how to use the computers for effective services delivery. They also acquired new equipment which has now enabled the NS to enjoy a better internet access. The NS also started the process to acquire an ERP system and train its staff on how to use it. The above achievements were realized in synergy thanks to the IFRC Capacity Building Fund (CBF), and the emergency appeal on Marburg, which was completed in December 2024. Moreover, the IFRC donated four vehicles to support the NS in their activities and programs. The RCEG also made progress in financial management and reporting, with a completed financial audit and annual report for 2021 to 2023.

Operational risk assessment

Risk	Likelihood	Impact	Mitigating actions
National Society institutional fragilities	high	high	<ul style="list-style-type: none"> • An adequate risk assessment was conducted analysing different areas and processes. The outcome of this assessment was added in the 2024 Unified Plan. • An NSDiE plan was developed considering the key areas of improvement for the National Society. • All layers within the IFRC system were engaged to ensure the NS and the IFRC teams in the country had appropriate support.
A highly politicized environment can lead to misinterpretation of	high	medium	<ul style="list-style-type: none"> • HD and communication efforts were made to highlight and explain our principled humanitarian work at the National Society and IFRC level.

humanitarian action and damage to reputation.			<ul style="list-style-type: none"> • The NS and IFRC ensured monitoring and responding to rumours or miscommunications, including on social media. • Coordinated National Society efforts at national and local levels to ensure proactive community engagement and acceptance.
Supply chain disruptions, procurement delays and compliance issues.	medium	high	<ul style="list-style-type: none"> • Timely initiation of procurement. • Use of the international supply chain to ensure IFRC minimum quality standard and avoid delays in procurement of eligible items. • Strengthen the National Society logistics capacity. • Promote compliance with strict IFRC financial management and procurement rules. • Tenders and contracts with suppliers were monitored by IFRC supply chain management.
Late reporting and late reconciliation of cash advances, subsequent cash flow delays.	high	high	<ul style="list-style-type: none"> • A Program and Operations Manager was recruited to support the NS. • Identified means of communication at operational and strategic levels allowing regular monitoring and follow-up.
Fraud and corruption/misuse of aid	high	high	<ul style="list-style-type: none"> • The IFRC has strict financial procedures and an accountability framework in place. • The RCEG had an external audit early in 2024. • The NS will have financial procedures and guidelines drawn up. • The IFRC's Office of Internal Audit and Investigations monitors the effectiveness of the organization's risk management and internal control systems. • In addition, the IFRC undergoes regular external reviews. • Any suspicion of fraud and corruption can be reported through the integrity line. • IFRC staff are required to follow the relevant online training.
Sexual exploitation and abuse by RRC staff or volunteers.	medium	high	<ul style="list-style-type: none"> • Internal protection mechanisms ensure that IFRC and National Society staff and volunteers have been briefed on sexual abuse prevention and child protection, sign the Movement's Code of Conduct (COC), and are required to report suspicions of SEA or other violations of the CoC through various systems, such as the Integrity Line.

B. OPERATIONAL STRATEGY

Following the end of the epidemic in 2023, it was agreed to focus the rest of the operation on disease surveillance/prevention, and on National Society strengthening/preparedness. In 2024; the following activities were implemented: National Society Epidemic Preparedness, through Infection (Epidemic) Prevention and Control (IPC) approach and trainings, Risk Communication and Community Engagement (RCCE) activities, including trainings on safe and dignified burials (SDB), Protection, Gender and Inclusion and Community Engagement and Accountability (CEA). In addition, National Society capacity-building activities including strengthening the NS organizational structure, HR management and volunteer management were also implemented as planned.

C. DETAILED OPERATIONAL REPORT

 Health & Care including Water, Sanitation and Hygiene (WASH) <i>(Mental Health and psychosocial support / Community Health / Medical Services)</i>	Female > 18: 981	Female < 18:
	Male > 18: 941	Male < 18:

Objective:	<i>Strengthening holistic individual and community health of the population impacted through community level interventions and health system strengthening</i>
-------------------	--

	Indicator	Actual	Target
Key indicators:	<i>#People reached with health promotion and prevention messages</i>	1,922 ³	380,000
	<i># volunteers reached with preparedness trainings.</i>	124	300

During the response to the outbreak, the IFRC supported the National Society in scaling up its capacity to respond to epidemics. The NS could achieve the following:

- 124 volunteers trained in Risk Communication and Community engagement for epidemic response and deployed to the field for a period of 3 months.
- Visibility materials for volunteers as well as mass awareness equipment (brochures, megaphones, etc.) were provided
- Alongside the RCCE activities, volunteers also undertook active case finding within the communities.
- 20 volunteers trained in IPC and Safe and Dignified Burials alongside UNICEF and WHO SDB teams, including Infection Prevention and Control.
- Trained volunteers conducted 226 home visits, reaching 578 people (314 men and 264 women) with health promotion and prevention messages.
- Trained volunteers conducted 228 information sessions, reaching 307 people (117 men and 190 women) with health promotion and prevention messages.
- Trained volunteers organized awareness campaigns, reaching 1,037 people (510 men and 527 women) with health promotion and prevention messages.
- 20 RCEG volunteers were trained on mental health and psychosocial support.

³ These are the people who were reached directly by through operation activities. Indirectly, it is estimated that the mass awareness campaigns have reached over 200,000 people through the different channels.

In total, 1,922 people (981 female and 941 male) were reached directly with health promotion and prevention messages. Indirectly, it is estimated that the mass awareness campaigns have reached over 200,000 people through the different channels.

Two major challenges emerged during this operation (limited response capacity of the National Society, and the difficulty to bring in international support, including human resources). To overcome this, the IFRC supported the NS by conducting a NSDiE- National Society Development in Emergency analysis, which resulted in the development and implementation of a NSDiE plan. Additionally, the IFRC backed by the Red Cross of Equatorial Guinea initiated the process to establish a Legal Status Agreement (LSA) between the IFRC and the Government of Equatorial Guinea. Discussions with Government authorities towards the signing of this LSA are in progress.



Protection, Gender and Inclusion

Female > 18:

Female < 18:

Male > 18:

Male < 18:

Objective: *Communities identify the needs of the most at risk and particularly disadvantaged and marginalized groups, due to inequality, discrimination and other non-respect of their human rights and address their distinct needs*

	Indicator	Actual	Target
Key indicators:	<i># of volunteers and staff trained in PGI to understand their role, and responsibility in identifying and responding to PGI risks in the communities.</i>	124	300
	<i># of volunteers and staff that read and sign the code of conduct.</i>	124	300

The 124 volunteers involved in the operation were trained in PGI. The trainings were organized in an integrated manner, thereby enabling all the volunteers involved to be equipped with knowledge on all the themes, including health promotion and prevention, as well as PGI.

Moreover, all 124 volunteers were told of the importance of signing the code of conduct, which they all agreed to sign.



Community Engagement and Accountability

Objective:

	Indicator	Actual	Target
Key indicators:	<i>#of volunteers and staff trained on RCCE and community feedback management</i>	124	149

The community outreach of the National Society has proven to be one of the most significant resources to support the fight against epidemics. The 124 volunteers selected for the operation were trained in CEA techniques. Equipped with this knowledge, they reached all affected and at-risk locations in 03 districts (Ebibeyin, Mongomo

and Nsok-Nsomo), and the city of Bata for 03 months during the active period of the epidemic. This outreach also served to collect community feedback which was then used to adapt the RCCE strategy in the response.

Enabling approaches



National Society Strengthening

Objective:			
Key indicators:	Indicator	Actual	Target
	<i>Number of NSDiE plan with concrete action points</i>	1	1
	<i>#of staff and volunteers involved</i>	124	300

A surge NSDiE surge delegate was deployed to support the NS. He conducted a NSD assessment of the NS and came out with a NSDiE plan, which is now being implemented to strengthen NS preparedness.

Moreover, the operation enabled the NS to have 124 volunteers who are trained in health and hygiene promotion, PGI, and CEA.



Coordination and Partnerships

Objective:			
Key indicators:	Indicator	Actual	Target
	<i>Insert indicators here</i>		

The RCEG is well-recognized as a humanitarian actor by the government, which is reflected in its by-laws and regulations, as well as the tax exemption and annual contributions it benefits. The government has also called upon RCEG capacity and volunteers as a primary partner for epidemic response.

The government also recognizes the IFRC Secretariat's International Organization status and is facilitating the registration in country, which will be materialized by the signing of an LSA. Nevertheless, given tight control by government official's political situation, the processes can be lengthy and cumbersome.



Objective:

**Key
indicators:**

Indicator

Actual

Target

The IFRC intends to open an office in Equatorial Guinea to ensure sustained and continued support to RCEG. IFRC deployed a Program and Operations Manager in the country, alongside an NSD consultant. Additional support to the NS continues to be provided through the Yaoundé Delegation.

D. FINANCIAL REPORT

The total funding requirement for the operation was CHF 3,000,000, out of which CHF 330,838 were received from various donors, representing a 11% coverage of the appeal. The IFRC is thankful to the donors who supported this operation.

Since the remaining appeal activities are transitioning to the 2025 Unified Plan, any unspent amount of the funds received for this appeal will be spent under the Red Cross of Equatorial Guinea's 2025 Unified Plan and reported against thereafter.

Operational Strategy

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2023/2-2025/11	Operation	MDRGQ003
Budget Timeframe	2023/2-2024/12	Budget	APPROVED

Prepared on 04 Dec 2025

All figures are in Swiss Francs (CHF)

MDRGQ003 - Equatorial Guinea - Marburg Outbreak

Operating Timeframe: 26 Feb 2023 to 31 Dec 2024; appeal launch date: 27 Mar 2023

I. Emergency Appeal Funding Requirements

Total Funding Requirements	3,000,000
Donor Response* as per 04 Dec 2025	330,838
Appeal Coverage	11.03%

II. IFRC Operating Budget Implementation

Planned Operations / Enabling Approaches	Op Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	0	0	0
PO02 - Livelihoods	0	0	0
PO03 - Multi-purpose Cash	0	0	0
PO04 - Health	77,751	70,751	7,000
PO05 - Water, Sanitation & Hygiene	0	0	0
PO06 - Protection, Gender and Inclusion	0	15,294	-15,294
PO07 - Education	0	0	0
PO08 - Migration	1,606	1,812	-206
PO09 - Risk Reduction, Climate Adaptation and Recovery	24,198	36,526	-12,328
PO10 - Community Engagement and Accountability	0	74,259	-74,259
PO11 - Environmental Sustainability	0	0	0
Planned Operations Total	103,555	198,643	-95,088
EA01 - Coordination and Partnerships	3,935	3,935	0
EA02 - Secretariat Services	657,294	798,807	-141,513
EA03 - National Society Strengthening	154,651	122,207	32,443
Enabling Approaches Total	815,879	924,949	-109,070
Grand Total	919,434	1,123,592	-204,157

III. Operating Movement & Closing Balance per 2025/11

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	1,130,838
Expenditure	-1,123,592
Closing Balance	7,246
Deferred Income	0
Funds Available	7,246

IV. DREF Loan

* not included in Donor Response	Loan :	800,000	Reimbursed :	0	Outstanding :	800,000
----------------------------------	--------	---------	--------------	---	----------------------	----------------

Operational Strategy

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2023/2-2025/11	Operation	MDRGQ003
Budget Timeframe	2023/2-2024/12	Budget	APPROVED

Prepared on 04 Dec 2025

All figures are in Swiss Francs (CHF)

MDRGQ003 - Equatorial Guinea - Marburg Outbreak

Operating Timeframe: 26 Feb 2023 to 31 Dec 2024; appeal launch date: 27 Mar 2023

V. Contributions by Donor and Other Income

Opening Balance							0
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
DREF Response Pillar				800,000	800,000		
European Commission - DG ECHO	198,878				198,878		
Japanese Red Cross Society	30,764				30,764		
On Line donations	1,115				1,115		
Red Cross of Monaco	9,836				9,836		
The Canadian Red Cross Society (from Canadian Gov	90,244				90,244		
Total Contributions and Other Income	330,838	0	0	800,000	1,130,838	0	
Total Income and Deferred Income					1,130,838	0	

Contact information

For further information, specifically related to this operation please contact:

In the Equatorial Guinea Red Cross-National Society

- **National President:** Basilio NDONG BEYENG, bndongbeyeng@gmail.com, +240 222 270 436
- **Secretary General;** Juan José EKUNA ESONO, ekunaesono6@hotmail.com, +240 222 277 498
- **Operational Coordination:** Mariano ESONO, Head of Logistics, +240 222 267 156

In the IFRC

- **IFRC Regional Office for Africa DM coordinator:** Rui Alberto Oliveira, Strategic Lead, Preparedness & Response, rui.oliveira@ifrc.org +254 780 422276
- **IFRC Country Cluster Delegation:** Adesh TRIPATHEE, Head of Delegation, adesh.tripathee@ifrc.org , +237650659991

For IFRC Resource Mobilization and Pledges support:

- **IFRC Regional Office for Africa** Name, title, email, phone Louise Daintrey; Head of Strategic Engagement and Partnerships; Email: louise.daintrey@ifrc.org

For In-Kind donations and Mobilization table support:

- **Global Logistics Services** - Name, title, email, phone
- **Logistics Coordinator**, Name, title, email, phone

Reference documents



Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPoA)

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.