

AMIGOS INTERNACIONALES

ITURI EBOLA RESPONSE

OPERATIONAL PREPAREDNESS, MONITORING,
AND ACCOUNTABILITY FRAMEWORK

Quarter 3, 2026

*Prepared for public officials, institutional partners,
philanthropic stakeholders, and emergency-response partners*

FRAMEWORK AT A GLANCE

22	8	28	Daily / Weekly
Planned Activities	Response Pillars	Performance Indicators	Reporting Cycle

REPORT STATUS

Operational framework established. Field results have not yet been entered into the source monitoring workbook. This report therefore presents planned activities, responsibilities, indicators, and targets - not completed outcomes.

Version 1.0 | July 29, 2026

PUBLIC BRIEFING DOCUMENT

EXECUTIVE BRIEF

Amigos Internacionales has consolidated an operational Ebola-response framework for Ituri Province in the Democratic Republic of the Congo. The framework is designed to support coordinated field action, disciplined performance monitoring, and transparent public reporting.

The source workbook establishes:

- 22 planned operational and coordination activities for Quarter 3, 2026;
- 8 emergency-response pillars;
- 28 performance indicators with defined targets; and
- a reporting structure capable of supporting verified daily field flashes and weekly situation reports.

IMPORTANT DISTINCTION

This document is an operational preparedness and accountability framework. It does not claim that the planned activities have already been completed, and it does not present epidemiological results that were not included in the source materials. Actual field results will be added only after they are submitted and verified.

The purpose of this framework is to give public officials, donors, health partners, and other stakeholders a clear view of:

- what the response intends to do;
- how progress will be measured;
- who is responsible for each response area;
- what gaps remain; and
- how verified updates will be made available to the public.

1. PURPOSE AND SCOPE

This report translates and consolidates the Ituri Resilience 2026 operational workbook into an English-language format suitable for review by public officials and institutional partners.

Geographic focus	Ituri Province, Democratic Republic of the Congo
Planning period	Quarter 3, 2026
Primary use	Operational planning, supervision, performance monitoring, public accountability, and government or donor briefings

The framework is intended to complement, not replace, official epidemiological bulletins issued by government health authorities or international public-health agencies.

2. REPORTING PRINCIPLES

Accuracy

Only information submitted by authorized field leadership and reviewed for internal consistency will be presented as verified.

Clarity

Planned targets will be clearly separated from actual results. A target will never be presented as an accomplishment.

Timeliness

Material field developments may be published through a Daily Field Flash. A consolidated Weekly Situation Report will summarize verified progress, challenges, and next steps.

Privacy

No patient name, identifiable medical information, or image will be published without appropriate authorization. Sensitive locations may be generalized when necessary to protect patients, families, and response personnel.

Correction

When a published figure or statement requires correction, the corrected version will be dated and the change will be documented.

3. RESPONSE GOVERNANCE AND INFORMATION FLOW

Field information is expected to move through the following process:

- 1. Field teams document activities, operational figures, photographs, and urgent needs.
- 2. Pillar leads review the information for completeness and accuracy.
- 3. The provincial coordination team consolidates the information.
- 4. Amigos Internacionales reviews the material for consistency, privacy, and public-release suitability.
- 5. Verified information is published as a Daily Field Flash, Weekly Situation Report, or dated website update.

Information may be labeled as:

Status	Meaning
Verified	Reviewed and approved for publication.
Preliminary	Received but still undergoing verification.
Not Reported	No result has been submitted.
Not Applicable	The indicator does not apply during the reporting period.

4. THE EIGHT RESPONSE PILLARS

Pillar 1 - Surveillance and Contact Tracing

Rapid detection, reporting, investigation, contact identification, and 21-day follow-up to identify suspected cases quickly and interrupt transmission.

Pillar 2 - Case Management and Clinical Care

Treatment-center readiness, patient referral, admission, clinical care, psychosocial support, and access to appropriate therapies for eligible patients.

Pillar 3 - Infection Prevention and Control / WASH

Personal protective equipment, handwashing systems, triage, decontamination, healthcare-facility readiness, waste management, and safe and dignified burial capacity.

Pillar 4 - Risk Communication and Community Engagement

Community dialogue, public information, rumor management, local leadership engagement, behavior-change communication, and confidence in the response.

Pillar 5 - Laboratory and Diagnostics

Specimen collection, safe transport, testing capacity, laboratory turnaround time, reagents, equipment, and quality control.

Pillar 6 - Logistics and Operations

Warehousing, supply delivery, transportation, personnel deployment, telecommunications, security support, maintenance, fuel, and operating-budget availability.

Pillar 7 - Coordination and Leadership

Emergency-operations meetings, situation reports, cross-pillar decisions, resource mobilization, financial analysis, and accountability for follow-up actions.

Pillar 8 - Vaccination, When Applicable

Ring vaccination, vaccination of response personnel, ultra-cold-chain compliance, mobile teams, community acceptance, informed consent, and management of adverse events following immunization.

5. QUARTER 3 OPERATIONAL ACTIVITY PLAN

The source work plan identifies 22 activities organized into five operational areas.

Administration and Coordination

- Monthly meetings with the national coordination team;
- Weekly meetings with the provincial coordination team;
- Participation in Ebola cluster meetings; and
- Field supervision visits to assess implementation and community impact.

Epidemiological Surveillance

- Active case finding in communities and health facilities;
- Support for rapid reporting by health workers and community leaders;
- Collection, investigation, and verification of community alerts and rumors;
- Supervision of contact tracing and follow-up; and
- Strengthening surveillance at points of entry and exit.

Infection Prevention and Control / WASH

- Installation of handwashing stations in strategic locations;
- Support for waste management and treatment;
- Decontamination of premises and high-density locations;
- Strengthening patient triage systems in health facilities; and

- Establishment of facility scorecards and performance-improvement support.

Laboratory and Case Management

- Psychosocial support for survivors and affected families;
- Support for identification and listing of contacts; and
- Support for secure specimen transport.

Risk Communication and Community Engagement

- Mapping community leaders, associations, and other response stakeholders;
- Community dialogue and public forums;
- Behavior-change communication activities;
- Radio spots and broadcast programs; and
- Focus-group discussions with community leaders.

6. PERFORMANCE MONITORING FRAMEWORK

The operational workbook establishes 28 key performance indicators. The indicators below will be used to measure progress once verified results are submitted.

SURVEILLANCE AND CONTACT TRACING

No.	Performance Indicator	Target
1	Percentage of health facilities reporting data daily	100%
2	Average time from symptom onset to notification	7 days or less
3	Percentage of confirmed cases with at least 20 contacts identified	100%
4	Percentage of contacts actively followed for 21 days	At least 90%

CASE MANAGEMENT AND CLINICAL CARE

No.	Performance Indicator	Target
5	Number of available and occupied beds in Ebola Treatment Centers	Based on site capacity
6	Case fatality rate among confirmed cases	Continuous reduction to below 20%
7	Average time between confirmation and admission to an Ebola Treatment Center	24 hours or less
8	Proportion of eligible patients receiving investigational treatments	100% of eligible patients

INFECTION PREVENTION AND CONTROL / WASH

No.	Performance Indicator	Target
9	Percentage of health facilities with functional IPC supplies, including PPE and handwashing facilities	100%
10	Percentage of exposed healthcare workers trained in IPC protocols	100%

No.	Performance Indicator	Target
11	Number of Safe and Dignified Burial teams deployed	Based on health-zone needs
12	Number of Safe and Dignified Burials completed	100% of suspected and confirmed Ebola-related deaths

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT

No.	Performance Indicator	Target
13	Number of community dialogues held and percentage of targeted communities reached	100% of targeted health areas
14	Percentage demonstrating adequate knowledge in Knowledge, Attitudes, and Practices surveys	At least 85%
15	Number of major rumors identified and addressed	100%
16	Percentage of households expressing confidence in the response	At least 80%

LABORATORY AND DIAGNOSTICS

No.	Performance Indicator	Target
17	Average time from specimen collection to delivery of the result	24 hours or less
18	Number of operational laboratories and specimen-collection teams	Based on geographic coverage needs
19	Daily specimen-testing capacity	At least 100 specimens per day per laboratory

LOGISTICS AND OPERATIONS

No.	Performance Indicator	Target
20	Delivery time for essential supplies to the field	48 hours or less
21	Budget availability for operational needs	100% of documented needs covered
22	Number of personnel deployed in the affected area	Based on the approved deployment plan

COORDINATION AND LEADERSHIP

No.	Performance Indicator	Target
23	Frequency and quality of coordination meetings	Daily, with 100% of scheduled meetings held
24	Timeliness and accuracy of situation reports	Published daily within 24 hours

No.	Performance Indicator	Target
25	Resource-mobilization rate and needs analysis	100% of the approved action plan funded

VACCINATION, WHEN APPLICABLE

No.	Performance Indicator	Target
26	Vaccination coverage among contacts and response personnel	At least 90%
27	Compliance with ultra-cold-chain requirements at -80 degrees Celsius	100%
28	Community vaccine-acceptance rate	At least 85%

7. CURRENT READINESS STATUS

As of the date of this report, the following preparedness and accountability components have been established:

- The French operational workbook has been translated into English.
- The 22 planned activities have been organized into a clear operational structure.
- The 28 performance indicators and targets have been consolidated.
- A Daily Field Flash template has been developed.
- A Weekly Situation Report template has been developed.
- A website archive structure has been proposed for dated public updates.
- A verification and privacy process has been defined.

CURRENT DATA LIMITATION

The source monitoring workbook does not yet contain actual field results. Therefore, no activity count, case figure, testing figure, contact-tracing figure, or expenditure total is represented in this report as an accomplished result.

8. DAILY FIELD FLASH FORMAT

A Daily Field Flash will be used only when a material development occurs. It will normally include:

- Date and reporting period;
- Location;
- Key verified development;
- Confirmed operational figures;
- Actions taken;
- Immediate challenges;
- Urgent needs;
- One to three approved photographs with captions;
- Verification status; and
- Name or role of the approving field authority.

9. WEEKLY SITUATION REPORT FORMAT

The Weekly Situation Report will provide a more complete account of the response and will include:

- Executive summary;
- Changes during the reporting week;
- Activities completed by response pillar;
- Progress against key indicators;
- Operational constraints;
- Supply and logistics status;
- Funding and resource gaps;
- Community engagement and rumor trends;
- Photographic documentation;
- Priorities for the following week; and
- Verification and approval information.

10. PUBLIC ACCOUNTABILITY AND WEBSITE PUBLICATION

The Amigos Ebola response page should contain a permanent section titled:

EBOLA RESPONSE SITUATION REPORTS

The public section should show the latest verified update, Daily Field Flashes when warranted, Weekly Situation Reports, a dated report archive, the current monitoring framework, and a clear distinction between preliminary information and verified results.

Each public report should remain available as a dated PDF so that officials, institutional partners, donors, and the public can review the progression of the response over time.

11. RESOURCE CATEGORIES TO BE TRACKED

Future reports should identify verified needs and costs under the following categories:

- Surveillance and contact-tracing support;
- Field communications and data systems;
- Specimen collection and transport;
- Laboratory reagents and equipment;
- PPE, handwashing, decontamination, and waste-management supplies;
- Safe and dignified burial readiness;
- Patient referral and treatment-center support;
- Community engagement and radio communication;
- Vehicle, fuel, maintenance, and security support;
- Field personnel, supervision, and accommodations; and
- Vaccination and ultra-cold-chain support when applicable.

No funding request should be published without a documented purpose, responsible lead, expected result, and verified cost basis.

12. INFORMATION FOR PUBLIC OFFICIALS AND INSTITUTIONAL PARTNERS

This framework is designed to help public officials and institutional partners assess the response in a disciplined manner.

Officials and partners will be able to see:

- the planned response structure;
- the measurable targets;
- the actual verified results as they become available;
- the difference between progress and remaining need;
- the timing and purpose of resource requests; and
- the documented priorities for the next reporting period.

This approach allows support decisions to be based on verified operational evidence rather than general appeals.

13. CONCLUSION

The Ituri Ebola Response Operational Preparedness, Monitoring, and Accountability Framework establishes a clear foundation for action and transparent reporting.

It brings together operational planning, response-pillar leadership, measurable targets, field verification, privacy protections, and public accountability. Its value will be demonstrated through consistent use: field information must be submitted, reviewed, verified, and published on a disciplined schedule.

Amigos Internacionales is prepared to maintain the public reporting structure and to present verified daily or weekly updates as field information becomes available.

IMPORTANT NOTICE

SCOPE OF THIS DOCUMENT

This document is based on the Ituri Resilience 2026 operational workbook provided to Amigos Internacionales. It is an operational planning and accountability document, not an official outbreak declaration or government epidemiological bulletin. Official case counts and national public-health determinations remain the responsibility of the appropriate government health authorities and recognized public-health agencies.

Source document: Ituri Resilience 2026 - Operational Activity Plan, Indicator Monitoring Matrix, and Pillar Summary

Prepared by: Amigos Internacionales

Website: www.amigosii.org