

WHO/AFRO Response to the Ebola Virus Disease (EVD) outbreak

An update by the Regional Director

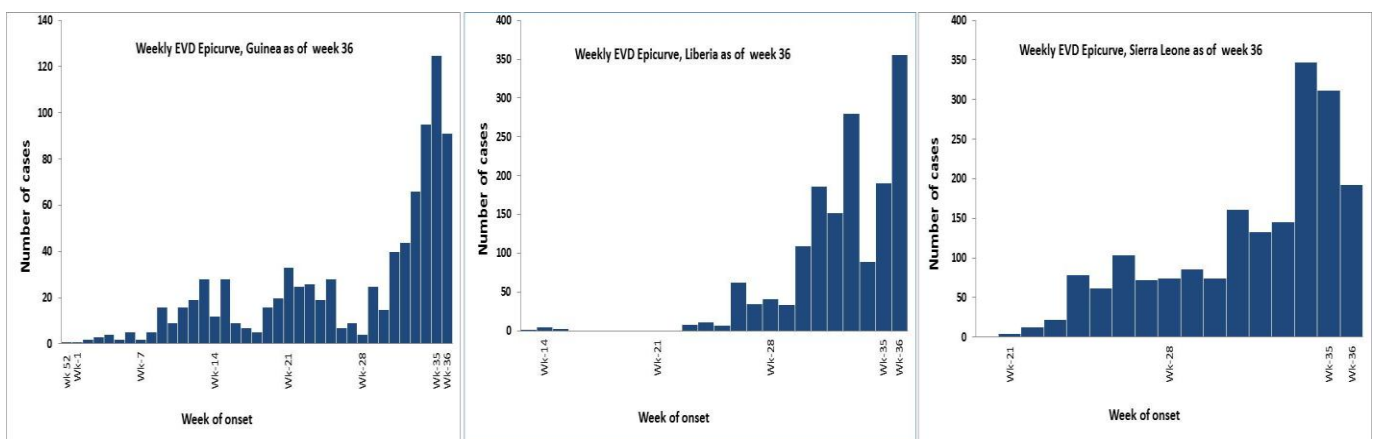
12 September 2014

A. CURRENT SITUATION

- (i) As of 10 September 2014, three countries (Guinea, Liberia and Sierra Leone) continue to report confirmed cases of Ebola Virus Disease (EVD). New confirmed cases have been reported in the following localities of the three countries: **Guinea** (Conakry, Guékedou, Macenta, Siguri, Forécariah and Kérouane); **Liberia** (Grand Cape Mount and Lofa) and **Sierra Leone** (Kenema, Port Loko, Western Area Urban, Western Area Rural, Kono, Tonkolili, and Bombali). Laboratory results for the new suspected cases in **Democratic Republic of the Congo** are expected today. **Nigeria** and **Senegal** have not reported any new confirmed case since 5 September 2014 and 29 August 2014 respectively.
- (ii) In total, **126** new EVD cases (confirmed, suspected or probable) were reported on 10 September 2014. Over the same period, **52** deaths occurred.
- (iii) The table below summarizes data from the country SITREPs as of 10 September 2014:

Countries	New cases/deaths		Cumulative number		Health Care Workers	
	Cases	Deaths	Cases	Deaths	Cases	Deaths
Guinea	22	2	899	568	57	28
Liberia	59	46	2407	1296	169	82
Nigeria	0	0	21	8	11	5
Sierra Leone	42	3	1478	536	56	30
Senegal	0	0	1	0	0	0
DR Congo	3	1	66	37	9	7
Total	126	52	4872	2445	302	152

- (iv) The below graphs for Guinea, Liberia and Sierra Leone below indicate an increasing number of cases by week.



B. NEW IMPORTANT DEVELOPMENTS

Since the last report, the following major developments have occurred:

- (i) The Executive Council of the African Union held its Sixteenth Extraordinary Session on 8 September 2014 in Addis Ababa, Ethiopia. The Council took Decision Ext/EX.CL/Dec.1(XVI) on the Ebola Virus Disease outbreak in which it, inter alia, expressed concern about the extent of the EVD casualties and the need for a response that goes beyond the fragile health public systems of the affected countries. The Executive Council called upon Member States to urgently lift all travel bans and restrictions. It also decided to expand the mandate of the AU Special Emergency Assistance Fund for Drought and Famine in Africa to include public health emergencies and other calamities.
- (ii) The United Nations, under the leadership of the Secretary-General, is setting up a global platform to deliver 12 critical actions to control the EVD. These actions are intended not only to stop the transmission of the EVD but also to mitigate the social and economic consequences of the outbreak. The platform will operate at global, regional and country levels. The Director-General of WHO will lead the public health component of the outbreak response, which will fit in the overall platform.
- (iii) The East African Community (EAC) will hold a Regional High Level Multisectoral Ministerial Meeting for Ministers Responsible for Health, Transport, EAC Affairs and Immigration on Emergency Preparedness and Response to Ebola Virus Disease Outbreak from 16 to 17 September 2014 in Nairobi. The aim of the meeting is to identify the ways and means for effectively arresting the spread of the disease. The meeting will bring together health and transportation ministers and experts from the five EAC states and neighbouring countries, as well as officials from WHO.
- (iv) WHO is initiating the disbursement of the African Development Bank grant provided for the EVD outbreak response. The first tranche, totaling US\$ 37.5 million, will mainly support laboratories, procurement of personal protective equipment, medical waste management, IT software for emergency alert and response, health information management systems, training and deployment of health personnel, rehabilitation and isolation units.
- (v) WHO has disbursed a total of US\$ 756 130 from the accounts of the African Public Health Emergency Fund (APHEF) to support Democratic Republic of the Congo, Guinea, Liberia and Sierra Leone in their fight against Ebola.

C. FUNDING UPDATE

As of 12 September 2014, WHO has signed 14 donor agreements amounting to a cumulative total of US\$56.9 million to support Ebola outbreak response activities. Of the US\$56.9 million, the majority of the funding has been earmarked for procurement of preventive and management supplies (including personal protective equipment, essential medicines and medical/laboratory supplies, disinfectants, etc.); training and deployment of health officers (including incentives for local health care workers); rehabilitation and construction of Ebola isolations units; etc. As the epidemic evolves, WHO resource mobilization teams are working hard to identify additional funding opportunities to support response efforts.

D. KEY CHALLENGES

- (i) The expansion of bed spaces and the establishment of treatment centres are major challenges. In addition, the affected countries have continued to experience critical shortages of staff to maintain the appropriate functionality of these centres.
- (ii) Standard precautions for infection prevention are not systematically implemented by the health workers in main hospitals, leading to continued infection among health workers.
- (iii) Community resistance continues to affect response activities in certain areas despite the sensitization conducted.
- (iv) Some families in Liberia and Sierra Leone are refusing the removal of dead bodies in the absence of a Laboratory test. In addition, the burial teams have highlighted the inadequacy of supplies for appropriate interventions (e.g. vehicles, PPEs, rainboots, stretchers, etc).

- (v) Rejection of Ebola survivors is a concern in some areas in Sierra Leone. Affected children, rejected by the Community in Dolo Town (Liberia), are living in a school building.
- (vi) Allowances for health workers and support staff are not paid in time.
- (vii) Some countries are refusing to allow their citizens deployed in affected areas to come back after completing their mission. This will hamper efforts to mobilize experts across the Region.