

Global Ebola Response Coalition Meeting
12 December 2014
Issues Discussed and Next Steps

The Secretary General's Ebola Envoy chaired the tenth meeting of the Global Ebola Response Coalition Core Group on 12 December. The main points covered in the meeting follow.

2. The Chair firstly welcomed Ismail Ould Cheick Ahmed, the newly appointed Head of UNMEER, who would be taking up this position during the first half of January 2015.
3. WHO updated on the **latest epidemiological situation**. The number of reported cases in Sierra Leone now exceeds that in Liberia. Data from the last 21 days further illustrates the increase in numbers of people with Ebola in Sierra Leone. In Guinea, there is still substantial and intense transmission in areas around Conakry and in Guinea Forestiere; also more cases are being seen close to the border with Mali. In Sierra Leone, cases continue to increase in Western Areas; with a specific flare in the mining district of Kono, near the border with Guinea. In Liberia, there has been no increase in case numbers but the daily incidence is stalled at around 10 persons with Ebola per day. This still means there is substantive transmission, particular in the area around Monrovia.
4. Detail on the **Western Area Surge (WAS)** was shared from Sierra Leone. The WAS is a Sierra Leone initiative, driven by the President with strong political and community support. It is a process to hunt the virus in the Western Areas, where transmission rates remain very high. The purpose of the WAS is to reduce transmission and prevent new cases. It will encourage people who are sick to present at health facilities, by giving them greater confidence in those services. Intense planning is currently going on with many stakeholders involved: local, national and international, to ensure all the resources are in place as part of an integrated response. In seeking out people with Ebola infection, there will be a comprehensive process of social mobilisation, reaching deep into the communities and individual households, to identify those infected and to trace all contacts. The process will start slowly and gather pace as December progresses and the asset base expands. It is recognised the WAS will put the response system under intense strain, as cases are discovered and need to be isolated and treated. The WAS should be seen as an opportunity to set new standards in the way in which we operate, not being seen as exceptional but as the "new normal". The WAS is a real collaborative effort, with many actors; and an excellent illustration of the solidarity needed to get ahead of the outbreak
5. Given the move towards synergized and localized implementation, as part of **the response**, there is greater effort in contact tracing and case finding at district level, and a shift from building structures to ensuring effective utilisation of treatment beds, care centres and holding facilities. Integration and coordination in the response is vital and the Coalition is an important means to enhance that: indeed

coalitions are being established to enhance coordination at the national and local levels. There is concern in Guinea as the capacity in some Centres is very stretched and where many cases are not on existing contact lists. Integrated surveillance is a top priority and focus should be fully maintained on that, as part of the shift from dealing with the consequences of the virus, to seeing it as a public health driven response. Case finding, laboratory support and contact tracing activities need to be fully integrated, particularly at district level. Unless there is effective joint action at district level, there is a risk that the virus becomes endemic in the population for many months to come. More effective community engagement is a key part of the response.

6. Other key issues highlighted as important in the response were; infections of health workers are increasing and there is concern that health workers are not identifying Ebola infections amongst themselves quickly enough. There is a need to consider the role of private sector services at community level as well as the effective coordination of transport assets. International responders continue to come to countries in the region. The African Union is scaling up its contribution to the cadre of international responders through ASEOWA, with ongoing deployments. Cross border movement is a core issue which needs to be factored in to the response. Coordination between the countries is a key part of the response, as illustrated by the Liberia Government's transfer of support to Sierra Leone, in the form of laboratories and medical teams and the recent cross border meeting in Monrovia.

7. The participants discussed ongoing work on **risk, recovery and revival**, noting again it is important to begin our thinking on recovery now. The Presidents of the affected countries were all prioritising issues of recovery and it is commonly understood this work had to be country owned and led. Support to essential services now will reduce the burden of recovery later. There are already several lines of action underway to support the recovery: WHO, UNDP, the World Bank, AfDB, ECA are all active in this area. It is important these efforts are all well co-ordinated between the various actors, and fully integrated across the critical areas, so ensuring that economic, societal and health investments are complementary and mutually supportive.

8. A set of guiding principles for this work had been circulated by the Ebola Envoy before the meeting: these could form the basis of a framework for action. The Envoy's office is starting to map groups addressing the short and long term aspects of risk management, recovery of systems and revival of societies - and to identify the roles different actors seek to play.

9. Economic issues were noted to be broad and relevant at various levels, in varying timeframes: public finances are under extreme strain; on employment issues, there were serious concerns around the viability of many small and medium sized enterprises; the extent of non-performing loans was a cause for concern and commercial financing may not be all of the solution. Governance, particularly risk management capacity and activities to strengthen resilience are also important.

Preparing needs assessments would be a core part of the immediate work, once the approach to that is agreed.

10. **In summary**, the Chair thanked all for their participation. He reflected on: the importance of synchronised and localized responses; the importance of people's engagement in the outbreak as well as in responses; the need for well-functioning surveillance, case finding and contact tracing; evidence of improved coordination of partners (and the continued need to improve it further especially when responses are being readjusted to changing circumstances); the need to increase intensity, quality and reach in the areas where transmission was intense; the continued importance of strong logistics; the variegated picture, with each of the many micro-outbreaks requiring a slightly different response; the urgent need for effective cross border activity, which will be addressed at political - as well as technical - levels; the importance of flexibility to redeploy within and between countries; the economic challenges countries are facing, particularly with regard to public finances and access to work, especially for poorer people; and the ongoing challenges of food insecurity and closed schools.

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