

Global Ebola Response Coalition
24 July 2015
Issues Discussed and Next Steps

The thirty-eighth meeting of the Global Ebola Response Coalition Core Group took place on 24 July. The main points covered in the meeting follow.

Status of the outbreak

1. Participants discussed the status of the outbreak. The number of people newly diagnosed with Ebola in week 29 (ending on 19 July) is 26, with 22 in Guinea and 4 in Sierra Leone. There were no new cases reported in Liberia. The total number of people diagnosed with Ebola to date has exceeded 27,700.
2. In both Guinea and Sierra Leone, positive developments include the reduction in the number of transmission chains and increases in the proportion of people diagnosed with Ebola who are coming from contact lists. Participants expressed concerns about the presence of active transmissions in the capitals and recent infections of health care workers, which could give rise to new flares and underscore the need for improvements in Infection Prevention and Control (IPC) and triage procedures.
3. In Guinea, the people diagnosed with Ebola in Conakry are associated with transmissions from Dubréka and Forécariah. The proportion of people diagnosed with Ebola coming from contact lists (95%) is seen as a significant improvement. Most of the contacts associated with a transmission chain in Boké have been released, indicating that this transmission is close to being closed off. In Forécariah, only one transmission chain remains active in the area. The number of missing contacts in Guinea has also been significantly reduced.
4. In Sierra Leone, no new transmissions have been reported in Kambia and the one remaining transmission chain in Port Loko seems well under control. Containing the outbreak in Freetown is still a challenge.
5. In Liberia, the total number of people diagnosed with Ebola remains at six. As one of the people recently diagnosed with Ebola had died at home in Montserrado, it is feared that new infections may result. Accordingly, the 42-day countdown to zero has not yet commenced. While investigations are ongoing, it seems likely that the recent flare in Liberia is linked to a survivor, rather than a missed transmission. A systematic programme of screening, care, engagement and support for survivors will be a key element of the next phase of the response.

Progress of the response

6. Participants discussed the progress of the response. In both Guinea and Liberia, the level of confidence by policymakers and implementing partners in the response strategy has improved. The level of engagement from the Ministries of Health needs to be strengthened. More work is required to encourage people to seek non-Ebola health services.

7. In Guinea, the “cerclage” strategy is seen as having a highly positive result. UNICEF has strengthened community engagement activities and IFRC has been visiting households to distribute hygiene kits, mosquito nets, and handwashing materials. IFRC has also been providing psycho-social support for survivors and maintaining its capacity to carry out safe burials. A workshop will be held in Conakry at the end of July to bring together national Red Cross societies in Guinea, Guinea-Bissau, Liberia, and Sierra Leone to promote cross-border cooperation. MSF noted that the recent shift of cases to Conakry has increased the complexity of meticulous contact tracing, given the density of populations in urban areas. In light of this, it is encouraging that 95% of the people newly diagnosed with Ebola in Guinea last week came from known contact lists. The need to maintain surveillance in “silent” districts was emphasised, as there have been concerns about the underreporting of Ebola-related deaths.

8. In Sierra Leone, participants noted that the most recent reports of people diagnosed with Ebola in Freetown have been particularly complex. The National Ebola Response Centre has been revising the strategy to get to zero. The revised strategy focuses on community ownership, envisages enhanced accountability for all actors in the response, and emphasizes the need to maintain vigilance and capacity in the silent districts through simulation exercises. A meeting to share experiences on cross-border activities was recently held, involving participants from seven border districts out of the 14 districts in Sierra Leone, as well as counterparts in Forécariah, Guinea.

9. A review of the implementation of Operation Northern Push in Sierra Leone at the 30-day mark has been undertaken. The implementation of this operation in Kambia and Port Loko has been viewed as a success. Community ownership has been emphasized as a critical element of the operation. Village task forces have been established, involving youth leaders, village heads, traditional healers and religious leaders. The implementation of by-laws remains an issue, with seven people currently in detention. In one recent case, the detention of a pregnant woman for violating the by-laws was associated with a still-birth. There is an increasing recognition that with the stronger engagement of villages and communities, the strict enforcement of by-laws is becoming superfluous and counter-productive.

Update on African Union Ebola Conference

10. On 20-21 July, the African Union hosted the “International Conference on Africa’s Fight Against Ebola” in Malabo, Equatorial Guinea. The Conference was attended by the Presidents of Sierra Leone, Equatorial Guinea, Ghana, Guinea Bissau, Mali, Mauritania, Togo and Zimbabwe, together with the Ministers of Health from many African countries.

11. The African Union Health Ministers adopted the Statute of the African Centre for Disease Control and Prevention (CDC), establishing the African CDC as a specialized technical institution tasked to promote the prevention and control of diseases in Africa. It is envisaged that the African CDC will be located in Addis Ababa, with five regional CDCs in North, South, East, West and Central Africa, respectively. The precise locations of these regional CdCs are still to be determined. The African CDC will have a Board composed of 16 members: the Director of the African CDC, 10 Member Ministers representing the five AU regions, two members from the AU, two members from the AU Commission, and one representative from regional health organisations.

12. At the Conference, the Health Ministers of Guinea, Liberia and Sierra Leone also presented their national Ebola recovery plans, with a focus on health. Approximately USD \$9 million was pledged by African Union members (Equatorial Guinea, Benin, Nigeria, and Sudan).

Any other business

13. In WHO, an Ebola Interim Assessment Panel was established pursuant to a decision of the World Health Assembly in January. The report of the Panel was issued on 7 July. WHO has moved quickly to take concrete steps in response to the report, including by establishing an Advisory Group to provide guidance on the proposed reforms. The Special Envoy has been invited to chair the Advisory Group, which will have its first meeting next week.

14 The Special Envoy will also be travelling to Conakry next week, and then to Dakar for a meeting of the Coordination Board.

Summary

13. In summary, the following issues were highlighted:

- In the review of the current epidemiology, encouraging signs were reported - a majority of people newly diagnosed with Ebola are coming from contact lists; transmission chains are well defined; there is a higher quality of the response; and the incentive structure for people under quarantine is improving.
- In Sierra Leone, there has been progress with the surge in Kambia and Port Loko, while challenges remain with Western Area Urban.
- There are concerns about the possibility of Ebola transmission from survivors and about the challenges of restarting non-Ebola health services.
- In Liberia, a high risk case in Montserrado which may give rise to more infections means that the 42-day countdown cannot begin immediately.
- IFRC highlighted difficulties at the community level – reticence and stigmatisation, and the need for psycho-social support to survivors, as well as sustaining safe and dignified burials.
- The complexity of new cases in urban areas has caused difficulties for meticulous contact tracing.
- There is increasing recognition that the strict enforcement of by-laws and the use of coercive measures can be counter-productive.
- The Africa Union meeting in Malabo has led to the positive outcome of an agreement to establish an African CDC.
- An Advisory Group on the reform of WHO's health emergency work has been launched and will have its first meeting next week.
