

**Global Ebola Response Coalition**  
**26 June 2015**  
**Issues Discussed and Next Steps**

The thirty-fourth meeting of the Global Ebola Response Coalition Core Group took place on 26 June. 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 the week ending on 21 June is 20, with 12 in Guinea and 8 in Sierra Leone.
2. In Guinea, four prefectures (Boké, Conakry, Dubréka, and Forécariah) have reported people newly diagnosed with Ebola. In Boké and Dubréka, the situations are stable and the transmission chains are well understood. The diagnosis of one person with Ebola in Conakry who could not be linked to a transmission chain was worrying. In Forécariah, the number of transmission chains is decreasing. The general assessment of Guinea is that the understanding of the transmissions is now better than ever.
3. In Sierra Leone, people newly diagnosed with Ebola have been reported in three districts: Kambia, Port Loko and Western Area Urban. More areas within these districts are reporting transmissions and this geographic expansion appears to be mainly linked to the movement of people seeking to avoid quarantines.

**Status of the response**

4. Participants discussed the status of the response. Concerns were expressed about how the use of quarantines resulted in people leaving quarantined areas and hiding, thereby widening the geographic scope of the transmissions. Where quarantines have been enforced by military personnel, there is a greater likelihood that they will be viewed with suspicion by the affected population. It is essential to improve the conditions of quarantine in order to encourage cooperation, such as by providing food or access to water. One village in Forécariah under quarantine requested the drilling of a borehole so that the people could have easier access to water.
5. Participants reported instances in which individuals or entire responder organisations have left the affected countries without adequate notice or coordination. It was emphasised that the departures or rotation of critical people involved in the response efforts can have significant consequences. As the drawdown for resources is occurring, the need for cooperation between the national authorities and the international community is increasingly important.
6. As part of its social mobilization efforts, IFRC has launched a 7-minute video entitled “The Story of Ebola”. It will be available in English, French and Portuguese, as well as in the local languages. The English version of the video can be found at the following link: <https://www.youtube.com/watch?v=TZI-FayZkvg>

7. In Sierra Leone, the launching of Operation Northern Push has led to the intensification of efforts to improve contact tracing and quarantine conditions, to expand the use of anthropology, to increase the role of local leaders, and to enhance cross-agency event management. Surge activities in the hotspot areas of Port Loko, Kambia and Western Area Urban continue, with an emphasis on deepening community involvement. The National Ebola Response Centre is meeting with the local chiefs on a regular basis. UNICEF is working with partners to double the people involved in social mobilisation. In Bo, cases of malaria have increased due to the rainy season and limited access to healthcare.

8. In Guinea, the President announced a new intensification of the reinforced health emergency, with efforts focusing on the empowerment of local leaders and the implementation of innovative actions to get to zero. MSF has established a small isolation unit in Boké and is expanding outreach and social mobilization activities in Forécariah. Medical doctors will be incorporated in all teams undertaking contact tracing. IFRC reported the establishment of an interactive radio programme to enhance community engagement, supported by the distribution of 1,000 solar radios. When the radio programme began its operations, it received 22 calls from listeners expressing regret for an attack and burning of a Red Cross ambulance in Dubréka in late May. UNICEF has concluded an inventory of water points in Forécariah, which has highlighted the need for repair and for more boreholes to improve access to water.

9. In Liberia, efforts are underway to rebuild regular health services and strengthen infrastructure. A border surveillance system has been in place for the last six weeks and there is close monitoring of the situation in neighbouring countries. The Liberian parliament was briefed on the importance of keeping borders open, while strengthening surveillance to keep the borders safe. There is a need to maintain a response capacity in Liberia, so that case investigations and laboratory testing can continue. Regarding non-Ebola health care, paediatric hospitals are reported to be at full capacity, resulting in patients being turned away. Patients are presenting late and severe symptoms, demonstrating an ongoing reluctance of the population to seek medical assistance on a timely basis.

10. In Guinea-Bissau, participants observed an awareness about the risks of Ebola transmission. Taxi operators bringing people across the border are compiling their own contact lists and collecting the contact information of people crossing the border. More work is needed on tightening the coordination structure, expanding cross-border cooperation, and implementing preparedness plans, preventive measures, infection control and alert mechanisms. Participants emphasised that preparedness is not a one-time exercise but requires continuous work and ongoing activities. Monitoring of both border crossings on land and maritime corridors is critical, as fishing villages on the islands off of Guinea-Bissau bring together fishermen from a range of countries from Gambia to Cote d'Ivoire. Exchanges of information between the Ministries of Health of Liberia, Guinea and Sierra Leone and their counterparts in Guinea-Bissau should be encouraged.

## Update on the Secretary-General's International Ebola Recovery Conference

11. The Secretary-General's International Ebola Recovery Conference is two weeks away. Invitations have been sent out to Member States, international development banks, international organisations, the private sector and NGOs. From the three affected countries, the Presidents and Finance Ministers have confirmed their participation. To date, high-level participation from the World Bank, the European Union and the African Development Bank has been confirmed.

12. Confirmations have been received from a number of donor countries, at the ministerial level. UNDP will convene a second Member State briefing on the Conference in New York on Monday, 29 June. It will be important to continue to create opportunities for development partners to discuss how they will approach the conference.

13. There has been great interest in the recovery plans that will be presented by the three countries and the Mano River Union. These plans and other logistical and practical information will be made available on the websites for the Conference:

English: <https://ebolareponse.un.org/recovery-conference>

French: <https://ebolareponse.un.org/fr/conference-relevement>

14. Participants discussed a number of side-events during the week of the Conference

- **7 July:** UNICEF and OCHA will be sponsoring an event for civil society organisations to provide input on the events of 9 and 10 July, mainly focusing on community engagement.
- **8 July:** Michael McDonald will be organising an event on "Data strengthening, situation awareness and coordination".
- **10 July:** Denis Gilhooly will be organising an event on "Ebola innovation for impact".

## Summary

15. In summary, the following issues were highlighted:

- The ongoing response efforts underscore the importance of having detailed investigation of individual transmission chains, high quality data, good detection systems and dependable support for quarantined communities. There is hope for optimism, so long as the drive and common direction is maintained.
- There is greater clarity on the key elements on this phase of the response – there is a need not only to address the disease but also to help communities maintain their capacity to reduce their risk of the disease.
- Quarantines should not be implemented through coercion; rather, they should be accompanied by incentives and positive conditions to encourage cooperation.

- The increasing engagement of local communities helps to reduce risks, as seen by the example of taxi drivers along the Guinea-Bissau border who have taken on the initiative of compiling their own contact lists.
- Coordination is key to ensure the alignment of actions between national authorities and international responders.
- Facilitating access to services is a vital part of contributing to community engagement.
- Preparedness in Guinea-Bissau should not be seen as a one-time exercise, but is a continuous process. There is a need for sharing of experiences from Guinea, Liberia and Sierra Leone.
- The response strategy has moved from the phase of building beds and burials teams, to looking at populations, to the current phase of looking at individuals and having a granular understanding of transmission chains, contacts and risks. Such a detailed perspective allows responders to reach out the affected communities, to understand and address their needs, and to encourage them to cooperate with and participate in the response. In this new phase, it will be critical to avoid creating any barriers between the responders and the affected communities, by creating disincentives for participation through the imposition of fines and penalisation of behaviour.

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