

CONCLUSION



Liberian Red Cross, Monrovia, Liberia - WFP/Rein Skullerud

The Ebola response has yielded dramatic results. The number of people diagnosed with the virus has dropped markedly. Liberia was declared Ebola free on 9 May 2015. This progress is the result of remarkable contributions by numerous actors who have implemented their assistance in a flexible yet strategic manner. But, in April 2015, 30 people are still contracting Ebola every week, and we still don't know the causes of all new infections. **The outbreak is not over and the response efforts must be sustained until we get to zero cases throughout the region and are able to stay at zero for several months. At the time of writing, this outcome is not a foregone conclusion.**



The effects of Ebola go well beyond the thousands of lives lost to the disease. With increased unemployment and food insecurity, reduction of an already scarce health workforce and disruption to essential services such as primary healthcare and education, **early recovery must be pursued alongside a meticulous and vigilant response. Services must be kept safe and implemented within a context of thorough and effective surveillance.** Health systems have been stretched to their limits by the outbreak, with a negative effect on maternity wards and reproductive health services as well as other non-Ebola services. Some health facilities closed all together, others were restricted to Ebola patients or offered very limited services. Birth registration and child vaccinations declined and many more services were affected.

Many schools were closed with some being converted into ETUs, leaving approximately five million children out of school since the middle of 2014. This year, schools gradually reopened in the three most affected countries but some parents still fear sending their children to study, believing for instance that a child who survived Ebola can still infect others.

On the road to recovery, overcoming stigma will be a decisive factor in rebuilding societies. Survivors face rejection from their families and neighbours. Some have lost their job or their house. Many survivors have themselves been active in combatting stigma but more work will be needed to ensure that Ebola survivors are not seen with fear.

The number of people falling below the poverty line is expected to increase by about 7.5% in Guinea, 14% in Sierra Leone and 17.5% in Liberia, compared with projections before the Ebola outbreak.⁴⁰ At the end of last year, some 520,000 people were food insecure due to Ebola, and an estimated 1,235,000 people in the three most affected countries needed immediate assistance to protect their livelihoods and prevent malnutrition at the beginning of this year.⁴¹

Siah Tamba

"As a survivor, I know what Ebola means." That's why Siah Tamba, a Liberian nurse aid, decided to work at the IOM Ebola Treatment Unit in Sinje, after having contracted the virus in June 2014.

Tamba was treated for two weeks in an ETU and was later pronounced free of Ebola. She then had to face the stigma of being a survivor: shopkeepers would not take her money, and she lost her house when the owner drove her out. "So still you are not free, even though you had been treated", she says.

The Liberian nurse aid now tries to educate others and reduce their fear of interacting with Ebola survivors. At the ETU where she works, she takes care of Ebola patients, "giving them courage, giving them hope." "I think it was necessary to come here and work in the fight of Ebola because I want to see Ebola getting out of Liberia," she says.

[Adapted from the "From Victim to Caregiver: An Interview with a Liberian Ebola Survivor", 4 February 2015, UNMEER, <https://ebolaresponse.un.org>]

40 UNDP, Socio-Economic Impact of Ebola Virus Disease in West African Countries, 2015.

41 FAO and WFP, Special Report, FAO/WFP crop and food security assessment, 5 January 2015, and Cadre Harmonisé Technical Committee 2015.

Investment in early recovery should deliver sustainable benefits to communities across the affected countries within twelve months and should contribute to the **revival of the impressive economic growth of recent years**. To be confident that future risks of Ebola can be contained, it will be important to ensure strong prevention measures are in place and to maintain high levels of preparedness across the region. This three R's approach—Response, Recovery, Revival—should tackle the vulnerabilities that allowed the outbreak to spiral upwards and should re-establish the development trajectory that Guinea, Liberia and Sierra Leone are pursuing.

Ending an epidemic is always the hardest part. The progress that we fought so hard for could still be quickly lost if we lose focus and stop being vigilant. To get to zero and stay at zero demands programmatic perfection: a perfectly calibrated final stage of the response that is complemented by adequate investment in recovery. **This outbreak of “the terrible disease” started with one infected person: that is why this time we must not fail to eliminate Ebola from the human population.**

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Sierra Leone, March 2015; Photo: WFP/Rein Skallerud