United Nations Mission for Ebola Emergency Response (UNMEER)
Weekly Situational Analysis - 26 October 2014

1. This crisis will get worse before it gets better. The number of Ebola virus disease (EVD) cases continues to increase and has now reached 10,141 with 4922 deaths. The first case has been reported in Mali, a two-year-old girl who subsequently lost her life and may have had contact with up to 43 individuals while symptomatic. Another case has also been reported in the US, a medical worker returning from Guinea.

2. The health consequences of EVD are severe. Yet the longer the outbreak continues, the greater also will be the economic, social and political cost. Concerns grow as to political and social stability, food security and economic livelihoods across all three of the most affected countries - Guinea, Liberia and Sierra Leone. Isolated riots and demonstrations have occurred, restrictions of movement have increased tensions, farm production is anaemic, and reduced trade and economic activity is leading to job losses, including in the international mining sector and service industries.

3. In response to the worsening situation, countries within the region or linked by major air routes, continue to tighten restrictions on travel to and from the affected countries. This is despite clear statements from the WHO, World Bank and others, that such strategies will not contain the spread of EVD, will hinder the humanitarian response to the crisis, and worsen the economic strain on these now increasingly isolated economies.

4. Implementation of the EVD response continues with calm urgency. A clear operational framework, developed by the UN system and key partners, has now been agreed to start 'bending back the curve' of the number of EVD cases. If the framework targets - 70 per cent of cases isolated and 70 per cent of burials conducted safely and in a dignified manner - can be met by December 1 (70-70-60), it will be possible to bring this EVD outbreak under control.

5. UNMEER SRSG Banbury has now consulted with the leaders of the most affected countries on the operational framework, which will support the on-going implementation of tailored national response plans. UNMEER will continue to play a role as 'crisis manager' across each of the affected countries, supporting the efforts of others and filling gaps where appropriate.

6. Meeting agreed targets will be conditional on achieving a rapid scaling up of contributions by key partners. The international community is making significant contributions. Pledges to the OCHA Ebola Virus Outbreak Overview of Needs and Requirements now total USD 491 million (of a required USD 988 million) and to the Ebola Response Multi-Partner Trust Fund now total USD 116 million, yet much more is needed. Rapidly converting pledges made, into deposits received, and then assistance delivered, is also vital.

7. The WHO has now released estimates of the volunteers and health infrastructure required to meet the goal of 70-70-60. It is acknowledged these needs may shift, and require adjustment overtime, as the crisis evolves. Yet projections are a useful way to characterise the potential scale of the EVD response. Up to 4388 beds may be required in 50 Ebola treatment units (ETUs) across Guinea, Liberia and Sierra Leone. There are currently 1126 (25 per cent) beds already in place. An estimated 28 laboratories (12 are operational) are also required for case confirmation supported by up to 20,000 contact tracing workers. A further 230 teams to ensure safe burials may be required.

8. Perhaps the key gap remains the availability of foreign medical teams to manage and staff ETUs. There are currently firm commitments from teams for only 30 of the 50 ETUs required. Safety is the primary obstacle to filling this gap - EVD has so far claimed the lives of 244 health workers. Steps are urgently being taken to try and make operating in EVD affected countries safer for health workers (and other international volunteers). The European Union has announced a medevac operation for international health workers to be put into action on a case-by-case basis. Appropriate in-country treatment facilities for medical staff are also in development, and well advanced in both Liberia (US military) and Sierra Leone (UK military).

9. Preparedness in countries close to the outbreak is becoming increasingly critical. The WHO is currently deploying a rapid response team to Mali, to complement the existing preparedness team. All key partners have a role to play in supporting the countries in West Africa to be ready to confront a potential outbreak. The Economic Community of West African States will hold a Summit for Heads of State next month to discuss the EVD crisis and preparedness is expected to be a key focus.