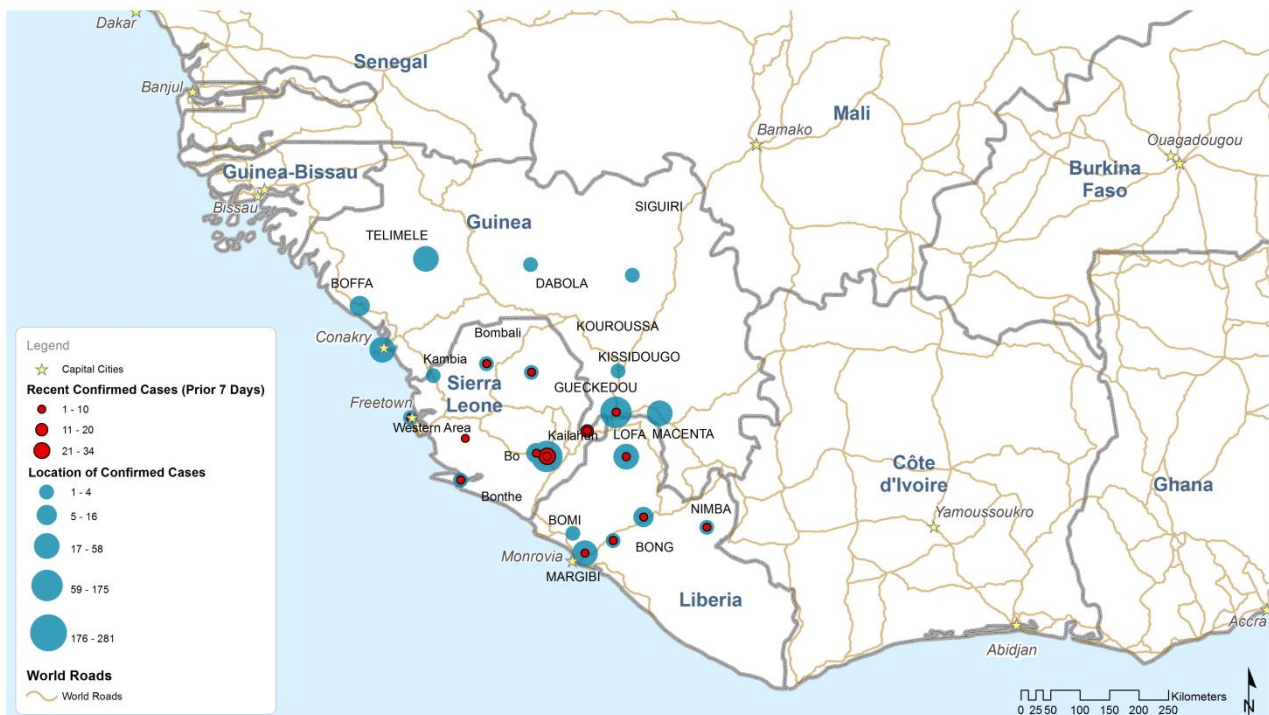


## DISEASE OUTBREAK UPDATE: EBOLA OUTBREAK RESPONSE IN WEST AFRICA 28 July 2014

### CONFIRMED CASES OF EBOLA

MAP DATE: 24 July 2014



Map Scale (A3): 1:5,200,000  
Data source: WHO GIS & VSHOC;  
Map Production: Health Security (HSE)  
Global Preparedness, Surveillance and  
Response Operations (PSR)  
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## SUMMARY

WHO has established a Sub-regional Operations Centre in Conakry, Guinea, and has begun the work of coordination and support for affected countries with appropriate expertise, guidance, and supplies.

The Director General led a teleconference with donors and partners from more than 20 organizations regarding WHO's response to the outbreak.

Activities are currently focused on the need to step up implementation of key outbreak containment strategies, including community involvement.

## DISEASE UPDATE

WHO continues to monitor the evolution of the Ebola virus disease outbreak in Guinea, Liberia, and Sierra Leone. Between 21 – 23 July 2014, 108 new cases and 12 deaths were reported from the three countries. These include confirmed, probable, and suspect cases. The respective Ministries of Health continue to work with WHO and its partners to implement outbreak containment measures.

As of 24 July 2014, the cumulative number of confirmed cases attributed to EVD in the three countries stands at 814, including **456 confirmed deaths** (see Table 1).

**Table 1: Confirmed cases and deaths from Ebola virus disease in Guinea, Liberia, and Sierra Leone, as of 23 July 2014**

	New <sup>1</sup>	Confirmed
<b>Guinea</b>		
Cases	12	311
Deaths	5	208
<b>Liberia</b>		
Cases	25	84
Deaths	2	60
<b>Sierra Leone</b>		
Cases	71	419
Deaths	5	188
<b>Totals</b>		
Cases	108	814
Deaths	12	456

1. New cases were reported between 21 and 23 July 2014.

## UPDATE: WHO support to Member States continues

### Guinea

In Guinea, a high-level political delegation from the Government conducted a three-day field visit to Gueckedou, where community deaths continue to occur and health workers have experienced community resistance. The delegation engaged with local and opinion leaders in an effort to build relationships of trust. It was hoped this would foster cooperation and acceptance of outbreak control measures.

The result: Leaders of 19 out of 23 villages pledged their commitment to embrace the EVD outbreak response measures. The remaining four villages later made contact with local authorities and expressed their willingness to participate in the response. The national authority also established administrative and law enforcement mechanisms to prevent violence towards response teams.

With this newly established openness, WHO was able to deploy social mobilization teams to educate villages on recognizing the signs and symptoms of EVD, how to handle patients, how to properly hand wash, and whom to contact if they suspect they or someone they know has EVD.



*Dr Sylvain Faye, an anthropologist, teaches villagers how to properly hand wash. Photo by: WHO/Tarik Jasarevic*

Community health worker Hina Teguiano says, despite previous resistance, “We are ready to continue working with [these] communities until they understand the importance of medical interventions for Ebola in our region.”

### Liberia

In Monrovia, the WHO Regional Director, Dr Luis Sambo, began an official visit to the three affected countries. He held meetings with the President of Liberia, H.E. Mrs Ellen Johnson-Sirleaf; the Minister of Health, Dr Walter Gwenigale; and other high-ranking government officials to review the current situation and explore the best ways to rapidly contain the outbreak in Liberia and in West Africa. Additional meetings were held with international and local non-governmental organizations, UN agencies, and other stakeholders to enhance collaboration and coordination.



*USAID development officer Bethany Gaddis delivers backpack and hand spray equipment along with boot covers, masks, and disposal bags for biohazardous waste to Clement Peter, WHO Liberia office-in-charge and John Linger, Asst. Minister for Administration at the MOH Liberia. Photo by: WHO/Christina Banluta*

As leaders assess and take decisions on next steps, activities to address the outbreak must go on. WHO and the Government of the United States of America recently delivered personal protective equipment (PPE) and other medical supplies to Liberia to ensure the safety of its health-care workers.



*Training on the correct use of PPE for health-care workers. Photo by WHO/Christina Banluta*

In conjunction with the arrival of PPE in Liberia, a training session was held in Montserrado County. Health-care workers from 260 health facilities have been trained in how to handle patients suspected of having Ebola and how to protect

themselves from exposure and transmission. “We are training everybody who works in health facilities – from security guards, ambulance drivers, cleaners to professional health workers,” said Mrs Rose Macauley (right, in the photo below) who is in charge of training for the MOH Liberia. Foday Gallah (left, in the photo below), an ambulance nurse, was one of many who was trained in how to properly use PPE.

### Sierra Leone

Since his arrival in Kailahun, Sierra Leone, in late June, WHO logistician Jose Rovira has participated in the burial of more than 50 Ebola victims. In the course of his work in Sierra Leone, he has trained 20 volunteers from the national Red Cross and the Ministry of Health in safe burial practices. Ensuring proper burial of the deceased is an important step in preventing further spread of EVD.



*WHO has trained partners from the national Red Cross and the MOH in safe burial practices as part of the effort to prevent further transmission of Ebola.*

*Photo by: WHO/T.Jasarevic*

In addition, efforts are now underway to engage in contact tracing and follow-up. “To succeed in actively finding the sick people, community participation is vital,” explains Dr Zabulon Yoti, WHO team leader and emergency coordinator in Kailahun. “With financial support from partners,

we recruited, trained, and equipped 20 volunteers with mobile phones in each of the 14 chiefdoms. Some 300 volunteers are charged with contact tracing and alerting the Ministry of Health [of] any suspect cases or deaths. The programme is producing results.”



*WHO and Public Health Canada prepare to cross from Guinea to Sierra Leone to establish a mobile laboratory in Kailahun. Photo by: WHO/Saffea Gborie*

WHO also assisted Public Health Canada to set up a mobile laboratory in Kailahun. Activities on social mobilization are ongoing and have included the involvement of traditional and religious leaders in an effort to overcome community fear and resistance, particularly in rural areas.

Despite these efforts, the opinion among all those involved in the response is unanimous: more resources are needed. According to Dr Yoti, “We need to step up the response and we need to do it fast. We need more experts on the ground, more funding, and more logistical support.”

### Nigeria

In Nigeria, a case reported to a private clinic with symptoms of EVD. A sample has been taken, but the courier company refused to transfer the sample to the WHO CC at the Institut Pasteur in Dakar, Senegal, for testing. The patient has since died. The sample has not yet been transferred or

tested. Logistics is coordinating transport of the sample to the WHO CC.

### **Change in Grading Level**

On 24 July 2014, Dr Margaret Chan, WHO Director General, together with Dr Anarfi Asamoah-Baah, Deputy Director-General, and Dr Luis Sambo, Regional Director of the Africa Regional Office, led a teleconference with nearly 100 participants from our donors and partners from more than 20 agencies and organizations to provide them with an update about WHO’s response to Ebola.



The teleconference was well received by donors, many of whom expressed interest in providing additional financial, in-kind, and technical support to WHO and the affected countries. Donors expressed appreciation to WHO for its commitment to issue a comprehensive Ebola response plan with inputs from WHO and the three countries within a week.

In light of ongoing events in the three countries, as well as the recent case in Nigeria, and based on comments from donors and partners, the Director General took the decision on 24 July to raise the event level to Level 3. In the Emergency Response Framework (ERF), this allows WHO to release additional funds and resources to the Ebola outbreak response. The Emergency Response Framework can be accessed on the WHO website: [http://www.who.int/hac/donorinfo/g3\\_contributions/en/](http://www.who.int/hac/donorinfo/g3_contributions/en/).