WHO: Ebola response in action

December 2015

No confirmed cases of Ebola virus disease (EVD) were reported in the week to 13 December. In order to effectively manage and respond to the consequences of residual Ebola risks, Guinea, Liberia, and Sierra Leone have each put surveillance systems in place to enable health workers and members of the public to report any case of illness or death that they suspect may be related to EVD to the relevant authorities.

Since July 2014 unparalleled progress has been made in establishing systems and tools that allowed us to respond rapidly and effectively. Thanks to the diligence and dedication of tens of thousands of responders, scientists, researchers, developers, volunteers, and manufacturers, we now have diagnostics, a vaccine, registered foreign medical teams, and thousands of trained responders who can rapidly deploy to outbreaks.

ON THE GROUND

WHO will continue to deploy technical experts in the 3 most affected countries and engage not only in response activities, but also in early recovery and survivor support efforts.

As case counts fall into the single digits, WHO and its partners continue to provide technical experts, guidance, and leadership.

WHO and the Global Alert and Response Network (GOARN) have deployed nearly 4 000 technical experts, including Ebola vaccination teams, on the ground in more than 70 field sites in the 3 most affected countries. There are currently over 1180 personnel in the field supporting the response and recovery efforts.

45 laboratories have been deployed since the start of the Ebola outbreak with WHO / Emerging and Dangerous Pathogens Laboratory Network (EDPLN) supporting 29 laboratories and partners providing an additional 16 labs through bilateral agreements. All of these labs tested more than 200 000 samples to support clinical care and outbreak control operations.

As part of Phase 3, the countries are retaining a core capacity of strategically located, high-quality treatment centres. This ensures complete geographic coverage with reserve bed capacity to rapidly
respond to any potential increase in cases, as well as to support the safe reactivation of essential health services.

Learn more about WHO’s response to Ebola in West Africa
http://www.who.int/csr/disease/ebola/en/
WHO’s partners http://www.who.int/csr/disease/ebola/partnerships/en/
WHO continues to support health systems in the affected countries with a focus on early recovery and rebuilding efforts. With this regards WHO:

Has distributed more than 1.48 million sets of personal protective equipment for the Ebola response.

WHO was instrumental in either building or assisting with guidance for and the construction of 70 Ebola treatment centres (ETUs) and more than 800 community care centres (CCCs) and provided 730 beds – 415 in 5 ETUs and 315 for CCCs.

Logisticians for WHO have delivered over 42 000 body bags for safe and dignified burials.
Manages a fleet of more than 600 vehicles to support surveillance and response operations activities and strengthen transportation resources.

WHO logisticians facilitated the procurement for recovery program to Guinea and Liberia, including the procurement of 1.6 million gowns for Guinea and 250 000 gowns for Liberia.

As part of Ebola Virus Disease preparedness activities, 30, 60, and 90 day targets have been set for putting in place supplies such as laboratory materials, disinfectants and sanitary equipment.

WHO manages global supplies of Personal Protective Equipment and infection control supplies for rapid deployment to any country in the world: 500 sets of Personal Protective Equipment each have been distributed to a total of 138 countries. Additional stockpiles of Personal Protective Equipment have been placed in warehouses in Accra, Ghana (30 000 sets) and Dubai (50 000 sets).

WHO logisticians continue to support the implementation of preparedness activities including evaluation of stock management, identification of transport requirements and the provision of training materials.

Stories from the field [http://www.who.int/features/ebola/en/](http://www.who.int/features/ebola/en/)
Reduced case incidence from more than 950 cases per week in September 2014 to 5 cases or fewer by July 2015.

Surveillance and monitoring remain a critical component towards ensuring all cases and deaths are reported and followed-up.

Thanks to efforts by WHO and partners, the case incidence reduced from more than 950 cases per week in September 2014 to 5 cases or fewer by July 2015. And we are on track with ending transmission by the end of December 2015.

The average time from identification of Ebola cases to hospitalization across the three countries reduced from 4 in August 2014 to less than 2 days for Liberia and Sierra Leone and 2.5 days for Guinea in April 2015.

Sustains rapid response teams that can rapidly be deployed in case a new case of Ebola virus disease is diagnosed.

Ensures that all districts affected by Ebola have access to laboratory support with the ability to test samples and return results within 24 hours.

WHO, the Emerging and Dangerous Pathogens Laboratory Network (EDPLN), and partners have evaluated novel diagnostic assays for the detection of EVD. Six diagnostic assays have been approved for UN procurement. WHO recently implemented and concluded an evaluation on 4 antigen RDTs for use on oral fluid specimens collected from dead bodies. This is the first evaluation to assess the performance of these devices on oral fluid specimens. Results are expected in December 2015.

WHO in partnership with FIND have been implementing the Cepheid Xpert® Ebola Test in Guinea, Liberia and Sierra Leone. These are currently available in 3 hospitals in Sierra Leone, 2 hospitals/labs
in Liberia and 4 labs in Guinea. Country offices are currently planning with the relevant ministries how to expand the use of the test to support EVD testing capacity. Genetic sequencing is being used as a tool to support outbreak response. Analysis of the similarities and/or differences between EBOV viruses allows responders to understand epi links within existing chains of transmission, highlight unknown relationships within clusters of cases that require further investigation, and help explain the role of viral persistence in survivor populations.

WHO and partners provided a range of training packages, including on infection prevention and control, clinical management, environmental health systems, and waste and sanitation management.

Together with its partners, WHO has contributed to training more than 8600 medical, technical and public health Ebola responders with its pre-deployment curriculums.

Pre-deployment curriculums are modular and can be customized, consisting of the fundamental aspects of Occupational Health and Safety and other pre-deployment topics such as clinical management, prevention and control procedures, safe and dignified burials, and emergency response communications.

WHO pre-deployment training packages include PROTECT, e-PROTECT and GO that are offered in different formats, including face-to-face video-lectures, e-learning and other electronic material. The online e-Protect training has been accessed in more than 180 countries.

More than 4 500 health responders received clinical management training in the affected countries. WHO produced 50 technical guidance documents covering a wide range of topics including for example case management, infection prevention and control, surveillance, safe and dignified burials, and community engagement.

WHO are currently undertaking a review of all training activities during the Ebola response. Training is increasingly focusing on improving surveillance and health system strengthening and includes topics such as triage, quality improvement and health worker protection.

Learn more:
WHO’s pre-deployment and in-service training http://www.who.int/csr/disease/ebola/training/en/
PREPAREDNESS

Supporting more than 150 countries worldwide to ensure they are ready to respond to Ebola and other public health emergencies.

WHO is working closely with countries to ensure they are adequately prepared to respond to any kind of public health emergency.

WHO is supporting more than 150 countries to ensure they are adequately prepared to respond to Ebola and other disease outbreaks.

WHO is providing dedicated and on-the-ground preparedness support to 15 priority countries in Africa to strengthen emergency response systems.

Since October 2014, WHO has conducted 336 multi-partner deployments to priority countries in the African region, covering a total of 3223 days in the field.

Over 79% of priority countries have achieved at least 50% of the preparedness tasks on the Ebola Preparedness Checklist. This is up from 7% in December 2014.

Field exercises and simulations to test response systems have been carried out in 9 priority countries in Africa.

In Guinea, Liberia and Sierra Leone the focus is increasingly on recovery and preparedness. For example, in Sierra Leone, simulation exercises are being used to validate and test rapid response plans.

Learn more: