Global Ebola Response Coalition Meeting 15 | 23 January 2015: Issues Discussed and Next Steps

The fifteenth meeting of the Global Ebola Response Coalition Core Group took place on 23 January. Given competing priorities, this was a shorter meeting than normal. The main points covered in the meeting follow.

2. The Special Envoy repeated an earlier request for Coalition participants to complete a short online survey to elicit views from those joining the Coalition meetings. He confirmed the link (http://esurveydesigns.com/wix/p44771135.aspx) had been re-circulated to ensure that it was easily accessible.

3. The meeting discussed the current epidemiological situation. The cumulative number of Ebola cases recorded is 21,797. The number of confirmed cases for the last 21 days is: in Liberia, 21; in Guinea, 109; and in Sierra Leone, 463. In total this is less than half the number of cases seen in the 21 day periods just before the end of 2014. In all three countries there is, for the first time, a week on week decline in numbers of new cases for the last 4 weeks. Most cases in Liberia continue to be in the city of Monrovia and in Grand Cape Mount County; both are running aggressive responses. In Sierra Leone, we are still seeing widespread transmission, with 11 of the districts still reporting cases within the last 21 days. There is still intense transmission in Western Area, Port Loko and Kambia. In Guinea, the trend of reducing overall numbers of new cases continues; with now around 12 prefectures showing transmission within the last 21 days: this number is down from a peak of 20 prefectures in late 2014. Transmission is still slowing down in the Forestiere region, with the main areas of transmission being in and around Conakry. The 42 day period since the last new Ebola case in Mali has passed but there is still a strong sense, from the President down, that high levels of vigilance continue to be necessary.

4. In terms of the response, there are still instances of unacceptable lengths of time between case identification and treatment, sometimes of 7-10 days. Concerns continue at the high numbers of new cases which are not on existing contact lists. The ongoing restrictions on movement of responders, continues to be a challenge: as numbers of new cases falls, so must these restrictions, to enable the chains of transmission to be identified quickly. It is important to make as much progress as possible in the response before the onset of the rainy season, which will impose a significant additional operational challenge to the response. Effective cross border surveillance is extremely important, coupled with a harmonisation of the data collection systems to support that surveillance. Safe access to health care for non-Ebola cases must be further prioritised; the widespread distribution of malaria treatments must continue.

5. It is important to note that the week on week reduction in cases will not automatically continue until we reach zero; reaching that target will not happen without the necessary adjustments to the response. Another major challenge for the response is the need for additional financing, with a possibility that organisations involved in the response may start to run out of funds in the coming months. An
injection of new resources is needed to sustain the field infrastructure to reach the target of zero cases. There is interest from the Coalition in planning for the EU conference on 3 March and further detail on this will be provided. It was noted that schools in Guinea have re-opened, with Liberia to follow very soon and Sierra Leone in the next few months. The Overview of Needs and Requirements was launched and set out the detail of the funding requirements for the period January to June 2015 (see: [http://ebolaresponse.un.org/overview-needs-and-requirements](http://ebolaresponse.un.org/overview-needs-and-requirements)). Guinea has promulgated their strategic plan for Ebola, which aims to reach zero cases in 60 days.

5. In **summary**, the Special Envoy noted the optimism about progress made, as measured by the falls in numbers of new cases; but in parallel shared a real anxiety about the challenges of getting to zero, with risks of a reduction in effort (on the back of the good progress made) as well as insufficient people and financial resources to achieve that target. Attention was necessary to the risks to the operational elements of the response, from the onset of the rainy season.