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# Combating Ebola in West Africa. WAHO urges to broaden regional cooperation instead of closing borders

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The Ebola outbreak that hit West Africa started in Guinea and spread to Sierra Leone, Liberia, Nigeria, Senegal and Mali. Overall (as at March 2015) 25.050 persons were affected, leading to 10.340 deaths. The consequences of such epidemics stretches across every sector of the society: many children are left as orphans, health workers flee out of the affected countries, other non-Ebola-related health activities are frozen and non-affected countries close their borders as preventive measures, hence hindering the regional economic and trading relationships as well as the connection with the international community. This issue of Foreign Voices tries to analyze the contribution of the West African Health Organisation (WAHO) as a regional institution in addressing the Ebola outbreak and beyond.

WAHO, created in 1987, is the specialized institution for health within the Economic Community of West African States (ECOWAS). Headquartered in Bobo-Dioulasso (Burkina Faso), it has a membership of fifteen states, namely: Benin, Burkina Faso, Cap Verde, Ivory Coast, the Gambia, Ghana, Guinea, Guinée-Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone and Togo. The governing bodies are the Authority of Heads of State and Government of ECOWAS, the ECOWAS Council of Ministers and the Assembly of Health Ministers.

#### WAHO's role in combating Ebola

For the purpose of combating the Ebola outbreak, WAHO carried out different types of activities ranging from advocacy to resource mobilization and support to countries. Furthermore, a regional multi-sectoral plan was developed in collaboration with the ECOWAS Commission. The key components of the plan are as follows:

#### 1.1. Advocacy and sensitization

Activities in this area are associated with raising awareness, in particular of decision-makers. Already back in March 2014 the WAHO Director General informed the President of the ECOWAS Commission and all fifteen health ministers on the outbreak, urging them to strengthen the disease surveillance system. In July 2014 a presentation on the Ebola outbreak was made by WAHO before the 45th summit of ECOWAS's heads of state. The summit launched an official appeal to the international community for assistance in combating Ebola. In August 2014 WAHO organized an extraordinary assembly of health ministers in Accra on the Ebola outbreak ensuring that West African leadership take direct ownership of the response to the outbreak. Furthermore, WAHO management visited all fifteen countries to meet with decision-makers including heads of state and government, prime ministers, ministers, parliamentarians etc.

### 1.2. Strengthening national and regional coordination of the response to Ebola

As a matter of strengthening the regional coordination, a ministerial committee was set up by WAHO to closely supervise and monitor the response to the Ebola outbreak. Furthermore, a technical working group has been set up to coordinate the response. WAHO also deployed staff and consultants in Liberia, Guinea and Sierra Leone to participate in the national coordination.

#### 1.3. Support in strengthening diagnosis

In order to strengthen the diagnosis, WAHO provided equipment such as cars for contact tracing, infrared thermometers and safety boxes for the transportation of biological liquids through the borders. The organization also developed guidelines for border health staff dealing with Ebola cases, carried out related trainings and arranged simulation exercises.

#### 1.4. Support in strengthening case management

54 medical doctors, 52 nurses and 9 hygiene technicians have been recruited and deployed by WAHO to Liberia, Guinea and Sierra Leone for 4 months. Also 14 ambulances as well as drugs, food, and protection equipment have been provided. Furthermore, WAHO engaged in the rehabilitation of health facilities.

#### 1.5. Support in safe burials

Guidelines for safe burials have been provided to all countries as well as protection equipment and disinfection products.

#### 1.6. Resource mobilization

With the contribution of ECOWAS member states a Regional Solidarity Fund amounting USD 6 million was created. At the same time the African Development Bank provided financial assistance to ECOWAS/WAHO for an amount of USD 10 million.

#### Challenges and lessons learned

Despite all efforts, challenges in combating Ebola and beyond still exist. Coordination at both national and regional levels is key for an effective response to outbreaks. Here are some of the lessons learned and recommendations:

The health systems, including disease surveillance and response, are inherently weak. This is also true for the worst-affected countries Guinea, Liberia and Sierra Leone. Thus, strengthening national health systems should be the main focus to avoid such devastating outbreaks in the future.

What is also needed is awareness raising: As West Africa never faced an Ebola disease before, knowledge about the virus needs to be increased. This also implies raising awareness in traditional cultural practices.

Evidence showed that a regional approach is critical in managing outbreaks. Indeed with the closure of borders by non-affected countries in ourse of the latest Ebola outbreak, it became very difficult even to supply people with

food, drugs etc. Instead, WAHO member states need to broaden their cooperation and set up an integrated regional disease surveillance and response system.

The proximity of regional institutions is an opportunity to be utilized in tackling epidemics. Learning from the Ebola crisis and in compliance with the African Union decision of creating an Africa Center for Disease Control, WAHO plans to establish a regional West African Center for Disease Control and Prevention as a regional branch.

WAHO faces a severe underfinancing: Indeed the cost of the regional multi-sectoral plan for health information sharing were budgeted with around EUR 75 million but only around EUR 27 million (around 36%) have been mobilized so far. In order to avoid a delayed response to future outbreaks, a Regional Epidemics Fund at disposal of regional institutions like WAHO is critical and needs to be set up.

With regard to the health workforce, a regional team for rapid intervention against epidemics is in need. Additionally the coordination of stakeholders' interventions needs to be improved as many actors are engaged.

Finally, there is a need to document and share lessons learned from the fight against the Ebola virus disease outbreak among all member states.

#### Conclusion

To conclude let me point out that WAHO was able to strongly advocate for a regional response against Ebola outbreak. That advocacy led to the appointment of a Head of State to lead the fight against Ebola crisis, to the setting up of a Regional Solidarity Fund, to the re-opening of borders, to the mobilization of resources from regional institutions and a call on the international community for further engagement in combating the epidemics.

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\* The paper expresses the personal opinion of the author and does not



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