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Serge Blaise Emaleu

World Health Organization, USA

The 2014-2015 Ebola outbreak: Lessons learned from the response

The most recent Ebola outbreak demonstrated a clear lack of preparedness from the global health and humanitarian system for an outbreak of infectious diseases and a number of weakness in the international health and emergency response infrastructure. The first case of the outbreak occurred in December 2013 in Melinda in southeastern Guinea but was only confirmed as Ebola in March of 2014. It is clear that a number of factors affected the nature of the response and that any possible combination of these factors could occur. During the post Ebola recovery period and in the interest of our study, we approached key stakeholders from relevant response organizations who were asked to describe how their organizations would have responded to case study scenario in which a non-state actor claims responsibility for new cases of Ebola in an adjacent geographical area with a previously unexposed population just like it was the case in Guinee, Libera and Sierrea Leone just before the outbreak. The study subsequently sought the views of major bilateral donors to the Ebola response to better to better understand the challenges and approaches nations would take in the event of a deliberate use and its impact on humanitarian disaster response. Our engagement amid to bring together a selected group of multi-sector participants to glean what has been learned so far and develop firm proposals for action. Whatever the next event or outbreak is and regardless of its source, the Ebola outbreak revealed weakness in the global health and humanitarian responses that must be fixed. Coordination between agencies should be increased and efforts should be engineered into the system and coordination to allow for the international community to provide what is needed, when it is needed, rather than everything at once.

Biography

Serge Blaise Emaleu is a medical doctor(M.D) and trained surgeon with over 20 years of experience. He also specialized in infectious disease/immunology through the interdisciplinary post-doctoral training program at Stanford University School of Medicine in California(USA). In 2012 He joined the Harvard School of the public in Boston Massachusetts (USA) to study the Approaches to Infection Prevention and Control (IPC) in Healthcare Settings.

dremaleu@gmail.com

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