

Containing Ebola – A success story from an “unexpected” place

By

Kasirim Nwuke
Addis Ababa,
Ethiopia
9 October 2014

The world is in the grips of a media frenzy, perhaps panic and hysteria, the cause of which is Ebola viral disease (EVD), a hemorrhagic fever (without a known cure) that has killed close to 4000 in three west African countries, namely Liberia, Guinea and Sierra Leone. The driver of the frenzy and panic is the arrival of Ebola in the USA and the positive diagnosis of the disease in a nurse in Spain. Nigeria, too, had experienced an Ebola outbreak. But unlike the rest of the world, concern about Ebola as an imminent, competing cause of death of Nigerians in Nigeria has fast receded from the headlines of most Nigerian newspapers and as headline news in the nightly news broadcast of national TV networks.

The first case of Ebola in West Africa's Mano River region, according to reports, was reported in Guinea in late 2013. It was said to have occurred in the southeast of the country where it shares borders with the two other Mano River countries of Sierra Leone and Liberia. In March 2014, the World Health Organization (WHO) announced that the Ministry of Health of Guinea had notified it of an outbreak of EVD in the county's south-east. By April the virus had spread to Sierra Leone and Liberia. It remained an interesting news item during this time. The World Health Organization described the outbreak as relatively small and urged calm. Then in July it was "smuggled" into Nigeria by an American of Liberian descent, Mr. Patrick Sawyer and the world suddenly woke up to the reality of what it was beginning to be confronted with.

The point of entry of Ebola into Nigeria (Lagos, an urban agglomeration of more than 21 million residents), the sheer size of Nigeria, the mode of entry of the disease into the country (by air), and the (negative) preconceived notions of Nigeria and Nigeria's government by the outside world raised fears of an imminent global public health emergency. According to one non-Nigerian commentator on CNN, the default belief in the international community was that Nigeria would become the major “exporter” of Ebola to the rest of the world.

Many “assessments” and predictions by international agencies were negative, dire and alarmist. Especially after Ebola was "re-exported" from Lagos to Port-Harcourt, Nigeria's oil and gas hub,

in the Niger Delta region. The WHO issued an alert following the confirmation of Ebola death in Port Harcourt that *“the outbreak of EVD in Port Harcourt has the potential to grow larger and spread faster than the one in Lagos because of multiple risk exposures.”* According to the Washington Post, Dr. Thomas R. Frieden of the United States Centers for Disease Control and Prevention (CDC) stated that he "stopped sleeping" the day he learnt of the export of Ebola to Nigeria.

These doomsday predictions have been rubbished by the evidence out of Nigeria. Weeks ago, the Nigerian Federal Minister of Health, Prof. Onyebuchi Chukwu, declared "We (Nigeria) have contained the situation. Ebola is no longer in the streets anywhere in Nigeria." His Rivers State counterpart, the Health Commissioner, Dr. Parker, stated on the same day, "I can assure you that the disease has been covered. People should not panic. The number of deaths from Ebola (in Rivers State) is lower than deaths from road accidents."

Many in and outside Nigeria thought that Nigerian government officials were being too hasty in declaring victory over Ebola. In the past week, however, the WHO, the CDC, and many others agree with Nigerian officials that the country has succeeded in containing the spread of Ebola within its territory. Dr. Thomas R. Frieden of the CDC during a recent media briefing described Nigeria as "the antidote to Ebola", as evidence that Ebola can be stopped/controlled.

Nigeria's success in containing the outbreak of Ebola within its territory is due, in my view, to a number of factors, the most important of which has been the leadership response to it. Soon after news of the arrival of Ebola in Lagos broke, the Nigerian Ministry of Health, drawing upon lessons learned from its efforts to contain polio and with guidance from the Nigerian Centre for Disease Control, declared an Ebola emergency. Concrete actions to reflect the emergency quickly followed. The federal government and the Lagos State government, with support from some development partners, set up the Ebola Incident Management Centre, which later became the Emergency Operations Centre.

Within ten days of the outbreak of Ebola in the country, President, Goodluck Jonathan, declared "as a government, we promise Nigerians that we will do everything humanly possible to contain Ebola". He followed this up by convening a meeting of the 36 state Governors to discuss and agree a national strategy for containing Ebola. This rapid leadership response created trust and assured most Nigerians that their government – at the state and Federal levels – is on their side, is ready and capable to confront the threat, and will protect them.

The Ebola outbreak also underscored the important point, often lost in policy and leadership debates, that symbols can be an important instrument of civic pedagogy. Soon after the smuggling of Ebola into Nigeria by Mr. Patrick Sawyer, the American of Liberian descent, was announced, the Nigerian media went into high gear. Or frenzy. Perhaps, hysteria. Some of the reports could have been misleading and alarmist, but they served a useful purpose nonetheless. They stoked fear and anxiety, even among members of the relatively secure ruling class. Members of the Nigerian Parliament were shown on national TV channels giving expression to this fear by desisting from shaking hands and extravagantly using alcohol-based hand sanitisers. They deferred and acknowledged one another by engaging in what some described as "Ebola handshake" – parties raised their right hand slightly, propping it up in some cases with the left

hand, and, bowing slightly, exchanged greetings. Some observers in the media laughed this off as a vacuous response by clueless politicians to an emerging public health emergency.

But it was not. The "Ebola handshake" quickly caught on. Handshakes became less common in public places. The price of hand sanitizers rose from N200 to N1000 in just one week as traders sought to make the most of a windfall profit opportunity. The "Ebola handshake" of the Parliamentarians and their use of hand sanitizers as a first response underscored once again the central role that symbols can play as an important instrument of civic pedagogy.

The leadership response was not only political, technocratic and symbolic, it was also courageous. Southern Nigerians love to bury their loved ones in elaborate ceremonies. These burials are conducted, for the most part, not in cemeteries but at home, in the village and are laden with age-old cultural practices which must be observed. The Federal government did not spare this very sensitive aspect of our culture. President Goodluck Jonathan's government banned the international and interstate movement of corpses. The President personally pleaded with Nigerians not to transport corpses across state boundaries, while also assuring any Nigerian who buried a loved one away from home of the government's support, after the emergency was over, should they wish to exhume the corpse and rebury in the deceased's home state and village.

Another act of courage on the part of the Nigerian government was the decision to postpone the resumption of primary and secondary schools until there was good evidence that the spread of Ebola had been stemmed. This was a very courageous decision because the private sector is a major provider of primary and secondary education in Nigeria, and postponing the resumption of schools was a direct hit on the businesses of persons of influence, including political influence. Educational institutions, private and public, were further directed to set up Ebola surveillance desks and have at least two trained personnel on their payroll to handle suspected Ebola cases.

Courage was evident in other decisions as well - the government was courageous in declaring the outbreak even as it knew that doing so was not without risks to the economy; courage displayed by the owners of the private hospital in Lagos where the American of Liberian descent was treated and died in announcing that an Ebola patient had died in its ward even though they knew that doing so will cost them clients and significant loss of revenue; courage displayed by the doctor who refused to succumb to pressure from the Economic Community of West African States (ECOWAS) to release Mr. Sawyer even though she knew that doing so would probably have saved her own life and the life of her colleague.

Nigerian officials were also very wise in the decisions that they made. They did not dismiss or ignore the possibility that some people under quarantine/surveillance might escape (or take time off). This happened. A senior official of ECOWAS escaped surveillance in Lagos and traveled to Port Harcourt to seek treatment. The doctor who treated him Port Harcourt became infected and infected another person. They both died. There were calls that the ECOWAS diplomat who survived should be prosecuted. But the government, recognized that any threats to prosecute or statements or actions to that effect, could be unhelpful as they will discourage persons who had "taken a vacation" from the isolation wards from returning from their vacation.

The leadership response was calm, focused, determined, very robust and aggressive. Unlike The Gambia, Zambia, and Chad, Nigeria did not close her international borders. Instead, Nigeria, recognizing the enormity of the problem, was the first to offer financial support (in the amount of \$3.5 million US) to the three Mano River countries to help them tackle the epidemic.

Another factor in Nigeria's favor was that Ebola entered Nigeria as a "middle class disease". It came in on an airplane, was smuggled in by a middle-class American of Liberian descent, who was taken to a Lagos hospital that caters mostly to the "considerably non-poor". It landed in Lagos, an urban agglomeration that is the hub of Nigeria's media industry; a State, which according to the 2011 Annual Socio-Economic Report issued by Nigerian National Bureau of Statistics has a literacy level of more than 87%, total radio access rate of 86.2% (against the national average of 82.9%) and 93% access to television (against the national average of 44.7%). In these circumstances, it is very easy to alert the public of a public health emergency, superstition is unlikely to hold sway and health care workers are unlikely to be seen as purveyors of death and as a consequence murdered.

In Liberia, Guinea and Sierra Leone, Ebola started as a disease of poverty in remote corners of the countries. It remains a disease of poverty and of the poor for the most part, in the villages and the teeming slums. This is significant. The poor in Africa, regrettably, are largely voiceless and are never heard even when they have a voice, not even when influential international non-profits such as Doctors Without Borders raise alarms on their behalf.

In Nigeria, in contrast, Ebola affected a stratum of the population that is likely to be heard by the leadership. Contact tracing (18,500 face-to-face visits) in Nigeria succeeded in large part because members of this class are more educated on average, have a high disposable income, have at least one mobile telephone number, belong to effective and influential networks, and, because of their connections to the leadership, knew that they could, if needs be, get government to act.

Any analysis of Nigeria's success in containing Ebola (and the failure in the Mano River countries, particularly Liberia) that ignores the class dimension of the intervention will be incomplete. After all, typhoid fever, a disease reaching epidemic proportions in poor neighbourhoods of major cities, kills many more Nigerians a year than Ebola can ever kill in each outbreak episode. And in Liberia, the class divide between Americo-Liberians (or descendants of freed slaves) who in the main constitute the ruling elite and native Liberians who dominate the bottom of the Liberian pyramid remains wide and is not without consequence for the delivery of essential social services, including healthcare.

Ebola showed up in the two richest states of the Nigerian Federation, Lagos and Rivers, each with a GDP bigger than the combined GDP of Liberia, Guinea and Sierra Leone. These two states have ample resources to, independent of the Federal Government, mount an adequate response to Ebola. Deep mobile telephony penetration and the legal requirement of telephone number registration made it easy to track contacts, and reasonably high access to television and radio (private and public) as well as an urbanization rate of more than 50% made for effective public campaign and outreach.

The corporate (private) sector also played an active role. Years of corporate social responsibility (CSR) activism that began in the Niger Delta paid enormous dividends. The Dangote Group donated N152 million to support the Federal Government's efforts in the anti-Ebola campaign. Heirs Holdings and the Elumelu Foundation donated N50 million; SEPLAT, an indigenous oil company, donated over N50 million; and Total and Shell donated utility vehicles, electronic fuel vouchers and medical supplies. Indeed, way before Mr. Patrick Sawyer smuggled Ebola into Nigeria, some multinational firms operating in Nigeria, such as the American Bureau of Shipping (ABS) had been disseminating Ebola IEC materials to staff members and their families, with the aim of protecting their most important asset, their staff, and contributing to maintaining the health of the communities where they operate. This part of Nigeria's success needs to be recognized.

Other contributors to Nigeria's success include patriotism and patriotic anger; a patriotism which led to some misguided Nigerians physically assaulting identified Liberians in Lagos; love of country and its people; national self-confidence as summarized by the President's assurance that his government "will do everything humanly possible to stop the spread of Ebola" in the country; a free and vibrant media; a liberalized and competitive mobile telephony sector that enhanced mobile telephone ownership (which made contact tracing easy); a growing economy with resultant higher levels of disposable income which has made telephone ownership more affordable; and competitive national and state politics (Lagos State and Rivers State are controlled by the opposition). With elections due later this year, the political parties and the governments that they lead had a compelling reason to act together in the national interest to address a looming national public health emergency.

In the final analysis, leadership was the key to Nigeria's success. The leadership response assured Nigerians that their government was there for them and will provide needed treatment. This assurance coupled with the availability of treatment - in the governmental and non-governmental/private healthcare sectors - raised the level of trust and confidence in government and provided a sufficient impetus for contacts to come forward to be treated instead of going into hiding.

Nigeria's success in stemming the spread of Ebola within its territory shows that the country's health system is reasonably strong (and much stronger than widely believed); Nigerians by and large listen to and follow the guidance of their government; the faith and trust of Nigerians in their governments are much higher than some caterwauling members of the media and Nigeria's eternal critics would like the world to believe, and that Nigerian officials - high and low - are very dedicated to their country and are very competent in what they do even as they operate in a very challenging political, ethnic, and religious environment.

Nigeria defies the easy "narrative of the single story" (to use the lovely phrase of Nigerian writer Chimamanda Ngozi Adichie). It never ceases to surprise, never ceases to amaze, always producing lots of food for thought that should upend the stereotypical ways in which she is viewed by the outside world (and in some cases by her citizens).

Ebola is a terrible disease. It is also (unlike HIV/AIDS, malaria, cancer) a super-efficient killer. As a killer, it is efficient in two ways. It kills very quickly. (If it cannot kill you quickly, it very

quickly leaves you alone.) And because it is highly contagious, it reduces the out-of-pocket expenses of families on burials and funerals to zero. As a disease, it is a very cruel killer: It is a killer that denies the dying the warm touch of a loved one, the care, love and comfort they so desperately need, and death with dignity. No final rites. No graveside prayers.

While Nigeria celebrates her success in stopping the spread of Ebola within her territory she has not forgotten that she is not yet in safe harbour.. Nigeria is well aware that as long as EVD continues to ravage countries with which she shares a common destiny, she cannot be complacent and cannot say in truth that she has succeeded in stemming the spread of Ebola. It is thus in this context that the recent announcement by Nigerian authorities that 200 Nigerian healthcare workers have volunteered for service in the three seriously Ebola-affected sister West African countries can be best understood and appreciated.

The views expressed in this article are solely the views of the author; Author can be reached by email at o.kasirim.nwuke@gmail.com

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References/hyperlinks:

- a. <http://www.smh.com.au/world/nigerias-president-goodluck-jonathan-declares-state-of-emergency-over-ebola-20140809-1027c0.html>
- b. <http://www.iol.co.za/news/africa/jonathan-blames-madman-for-ebola-crisis-1.1734048#.VEKkgCpXuGY>
- c. <http://www.ibtimes.co.uk/nigeria-ebola-free-president-goodluck-jonathan-tells-un-1467150>
- d. Special Broadcast by Rivers State Governor Amaechi on Ebola
<http://www.elombah.com/index.php/reports/25272-special-broadcast-by-governor-rotimi-amaechi-on-ebola-outbreak-in-rivers-state>
- e. <http://www.channelstv.com/2014/09/04/gov-amaechi-meets-religious-traditional-rulers-ebola/>
- f. <http://nigerianpilot.com/i-spent-n1-1bn-on-ebola-gov-amaechi/>
- g. F.O Fasina, A. Shittu, D. Lazarus, O. Tomori et al. Transmission Dynamics and Control of Ebola Virus Disease Outbreak in Nigeria July to September 2014 Euro Surveillance Vol 9. Issue 40, 09 October 2014 available at <http://eurosurveillance.org/ViewArticle.aspx?ArticleId=20920>
- h. <http://www.thisdaylive.com/articles/ebola-in-contact-tracing-fg-orders-more-liberians-in-calabar-to-lagos-for-screening/184648/>
- i. <http://www.tribune.com.ng/news/news-headlines/item/15045-ebola-we-uncovered-96-high-risk-cases-through-contact-tracing-rivers-govt>
- j. <http://www.news24.com/Africa/News/Nigeria-Ebola-free-Goodluck-tells-UN-20140925>
- k. <http://www.dailytrust.com.ng/daily/top-stories/30368-planes-and-viruses-nigeria-confronts-ebola-scare>
- l. <http://www.thisdaylive.com/articles/ebola-in-rivers-ecowas-official-may-face-manslaughter-charges/187726/>
- m. <http://nigerianpilot.com/nigeria-is-ebola-free-health-minister/>
- n. <http://nationalmirroronline.net/new/ebola-is-not-on-nigerian-streets-minister/>
- o. <http://psnnational.org/index.php/sections/state-branches-page/11-latest-news/319-nigeria-was-prepared-before-first-ebola-virus-case-says-chukwu>
- p. Allow children to return to school <http://www.ionigeria.com/allow-children-go-back-school-health-minister/>
- q. 591 Nigerian volunteers registered to help fight Ebola in Liberia and Sierra Leone
<http://www.jointsarena.net/2014/10/591-nigerians-volunteers-registered-to.html>
- r. <http://www.vanguardngr.com/2014/08/lagos-state-govts-response-ebola/>
- s. <http://healthnewsng.com/lagos-state-government-releases-emergency-response-numbers-for-ebola-disease/>
- t. <http://thenationonlineng.net/new/four-governors-at-buharis-declaration/>
- u. <http://leadership.ng/columns/386173/ebola-fasholas-impressive-leadership>
- v. <http://dailypost.ng/2014/10/02/jonathan-pdp-take-credit-containing-ebola-governor-fashola/>
- w. If Ebola hits Lagos, we are in big trouble
<http://www.thenewstribune.com/2014/08/15/3332263/if-ebola-hits-lagos-were-in-big.html>

- x. <http://www.quora.com/Now-that-Ebola-has-reached-Lagos-Nigeria-how-much-of-a-risk-is-there-of-it-going-global>
 - y. Nigeria's Jonathan declares state of emergency over Ebola
<http://www.reuters.com/article/2014/08/08/us-health-ebola-nigeria-jonathan-idUSKBN0G81WB20140808>
 - z. <http://businessdayonline.com/2014/09/ebola-challenge-nigeria-stays-action-on-schools-resumption-but-indecision-has-deep-implications/>
- aa.