**Background Information**

The outbreak of Ebola which started in 2014 mainly affected three countries in West Africa; Guinea, Liberia and Sierra Leone and there were some cases reported in Central Africa too. It is estimated that there were around 11,000 deaths reported out of the 28,000 cases that were known about. This made it the largest outbreak of Ebola on record.

The Ebola virus is spread by coming in contact with the organs, blood or other bodily fluids of an infected person. Once a person has a died, the virus can survive for several days outside the body, this is what makes the disease so contagious as many poorer countries cannot afford to properly dispose of bodies.

This outbreak of Ebola spread very quickly through the population for many reasons. For example:

* Lack of efficient healthcare
* Closely packed populations
* Poor sanitation
* Inadequate burial of the dead
* Lack of belief in the existence of such an illness

**Ebola in Sierra Leone**

The last reported case in the Ebola Outbreak of 2014 was in Sierra Leone on the 7th of November 2015 (according to data collected by the Red Cross). Since then, the people of Sierra Leone have been trying to rebuild their lives and start the recovery process that follows such a devastating outbreak. Although it was confirmed that there was no longer an immediate threat posed by the disease the impact that it will have on the countries affected will be long lived.

The disease is thought to have been brought to Sierra Leone by a women working in an infected household in Guinea. It is said that when the family became ill she travelled back to her home in Sierra Leone. This was made possible by the lack of control and security at the borders between many developing countries in West Africa. On the 12th of June a ‘state of emergency’ was declared and vigilance was increased. There were checkpoints set up along the borders and busy public places were closed to try and stop the spread of the disease.

The larger, more technologically advanced hospitals in larger cities had specific wards dedicated to treating patients suspected of having Ebola. However, in smaller towns and villages there are no hospitals and so many people gathered in community halls and small medical centres. The more people who went to these areas, the more crammed conditions became and the quicker the disease spread.

Decontamination stations were set up at the border of each village and town to try to restrict the movement of the virus. These stations involved, cleaning the soles of peoples feet to insure any raw sewage and other forms of bodily fluids were not been taken into different areas. Hand washing stations were also in operations to ensure the best possible hygiene and sanitation was in place.

Gradually, with the intervention of the West and more funding from governments in the affected countries, the virus began to be contained in specific areas. This allowed medical professionals to gain better control of the situation.

The disposal of the dead was key to controlling the disease. Using mass graves and cremation were the best ways to deal with the dangers associated with contact with infected bodies. It was important that this happened quickly and efficiently to make sure the chain was short to limit the chance of exposure.