

# Ebola: Who is Responsible for the Political Failures?

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This summer (2014), a traveler from West Africa was diagnosed and died of Ebola in Dallas, Texas (USA). This event triggered worldwide recognition of the failure to contain the local outbreak of Ebola in West Africa. World and United States political leaders were asked immediately to address their constituents and assure them that Ebola was being controlled and citizens were safe. Almost universally, political leaders throughout the world provided confused, inaccurate, and contradictory information to their publics.

For nearly a year, humanitarian health workers in the Ebola outbreak zone had warned global health organizations and national health centers of the seriousness of the Ebola outbreak and the threat of world spread. Occasional alerts were released by health groups and political leaders, but the disease had occurred before, had affected local populations in underdeveloped Africa, and had not spread beyond the local populations. While the professional media provided field reports for those interested in reading about the outbreak, the “popular shock” media missed the opportunity to inform their followers of the seriousness of the current Ebola outbreak. Those who were in West Africa and understood the urgency for control of Ebola were unable to draw the attention of health policy makers and political leaders.

Finally, a single case of Ebola found in a traveler from West Africa to the United States awoke the world to the risk of the virus. Knowing that the Ebola Virus is classified as a potential bioterrorism agent, the United States should have been one of the best-prepared nations for managing an incoming Ebola case. Political leaders in the United States had supported years of nationwide training for bioterrorism risks and billions of dollars were spent to plan and prepare for such an event. Yet, a single Ebola case in the United States showed that generous grant dollars and years of preparation of emergency and health providers for a bioterrorism event had failed. This failure rests squarely on the shoulders of federal, state, and local health departments throughout the United States who had the authority and responsibility to prepare.

Confused, conflicting, and often erroneous recommendations and opinions from “health experts” have been an embarrassment for the global health community. The political leaders that depend on health experts and health science have been betrayed. Delays and confusion in Ebola health guidelines for health care providers implies a lack of political leadership and has caused significant political damage for policy leaders and political authorities. Meanwhile, there is a growing lack of trust for health policies and guidelines by health care workers who may actually manage a potential Ebola case. With the President of the United States arguing the science of quarantine with state governors, most of the general population is at risk of losing trust in the ability of any political leader in the United States to be able to govern. It is possible that the loss of public faith in government

due to the bungling of the Ebola response in the United States affected recent elections which displaced the President’s party from the national congress. The lack of effective management of the Ebola problem by emergency and health authorities has placed United States political leaders in a similar position as those leaders who were failed by emergency managers during the national embarrassment of Hurricane Katrina (2005) response.

To add further to disappointment regarding the Ebola problem, there is an onslaught of self-appointed “experts” that write and speak about the issue. It seems that within a 4-week period, the number of Ebola experts in the world grew from a handful of dedicated humanitarian health providers and researchers to now thousands. Experts now argue the “science” of isolation or quarantine, the risk of transmission, proper personal protective equipment, and how to decontaminate. More often than not, the new experts are not aware of the best evidence and instead provide the gullible with biased pseudoscience. To confirm this observation, one need simply to read the 2007 paper by Bausch, et al or the 2014 *MMWR* report by Reaves, et al (both open resource) and compare credible scientific evidence to much of what is currently being touted by “experts.”<sup>1,2</sup>

Fortunately, Ebola Virus infection is less a risk for the world population than other potential infections. The virus is not as easily transmitted as most other dangerous viruses, and there has not been reported-widespread dissemination of the disease by asymptomatic human carriers. Admittedly, Ebola is deadly, but it is also controllable using best evidence and rational public health policy. As many have recognized, control of the current Ebola outbreak in West Africa is the primary means to protect the global community.

To answer the question of who is responsible for the political failures, both international and national, that have surrounded the current Ebola outbreak, consider the following arguments:

- Health providers who have provided care and tried to control Ebola in West Africa seem to have been generally ignored by health policy leaders.
- Political leaders were likely not informed of the potential seriousness of the current Ebola outbreak by health advisors and health authorities. Likely, because health advisors and authorities were ignoring or minimizing the risks of an uncontrolled Ebola outbreak.
- In the United States, political leaders were comfortable in the ability to handle an event such as Ebola because of decades of financial grants to emergency preparedness and health authorities to prepare for bioterrorism risks, including Ebola. In fact, the United States was not prepared.
- Health authority delay and confusion in providing information and guidelines caused political leaders to appear to be poorly managing the crisis.

- The secondary crisis of “experts” touting opinions for self-aggrandizement distracted from the true scientific evidence known for Ebola. Unfortunately, most of the “experts” were from academic institutions and rushing to publish rather than properly study and inform others.

In the end, the question of who is responsible for the political failures surrounding the Ebola crisis can be answered simply: the health community has failed the world’s political leaders and citizens.

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**References**

1. Bausch DG, Towner JS, Dowell SF, et al. Assessment of the risk of Ebola Virus transmission from body fluids and fomites. *J Infect Dis.* 2007;196(Suppl2):S142-S147.
2. Reaves EJ, Mabande LG, Thoroughman DA, Arwady A, Montgomery JM. Control of Ebola Virus disease – Firestone District, Liberia, 2014. *MMWR.* 2014;63(42):959-965.

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