**Ebola Virus Outbreak**

The World Health Organization defines Communicable diseases as illnesses that are spread from one person to the other through bacteria, virus, parasites and or fungi organisms (WHO, 2017). The research herein shall focus on the Ebola Virus outbreak as one of the various communicable diseases. The Ebola Virus disease is recorded by the Centers for disease control and prevention as the worst ever in history. Ebola Virus outbreak has been reported in different countries of West Africa.

**Ebola Outbreak Description**

The Ebola outbreak was first identified in Guinea, West Africa and was reported in December, 2013. It spread to the immediate neighboring countries of Liberia and Sierra Leone in the year 2014. The other countries that got this communicable disease include; Mali, Italy, Nigeria, Spain, Senegal, United Kingdom and United States. According to CDC (2017), the dates that the Virus was reported in the other countries are as listed below:

* September 2014, in the United States.
* May 2015, in Italy.
* October 2014, in Mali.
* July 2014, in Nigeria.
* December 2014, in Spain.
* August 2014, in Senegal.
* December 2014, in the United Kingdom.

**Epidemiological determinants and risks factors linked with the outbreak**

The outbreak of the Ebola disease in Guinea and the uncontrolled spreading within its jurisdiction and beyond is attributed to a number of factors. According to Rico et al (2016), the determinants included the family stubbornness to isolation plea and rejection of clinical intervention. In addition, the constant family and community movement heightened the transmission as relatives visited their kin in neighboring prefectures. Others were traveling across to seek medical redress, and the movement accelerated the spread of the outbreak. The other determinant was a slow detection of the outbreak such that by the time WHO and relevant bodies detected it, it had already spread far and wide. In addition to the delayed detection, the detection preparedness of the team was insufficient and inadequate.

The risk factors associated with the outbreak included the overcrowding of Guinea population and surrounding countries especially in the urban areas, making it easy for the spread of the outbreak among individuals. The overcrowding had a close correlation with increased population movement from one area to the other.

**Ebola disease transmission route**.

The Ebola disease is classified as a communicable disease. This therefore implies that it can be transferred from one person to the other either directly or indirectly. According to WHO (2018), the main route of transmission of the disease is through direct physical contact with bodily fluids that are affected by the virus. The fluids include vomit and blood. To a lesser degree, fluids such as urine, saliva, breast milk, tears and semen can also be potential routes. Indirectly, the disease can be transmitted through direct contacts with objects or surfaces that have contacted the virus.

***How Ebola outbreak would impact a school community*.**

Having seen the multidimensional focus that Ebola disease takes, it is critical to understand how it can impact any system in existence. For a school system, the likelihood of Ebola outbreak and transmission would be severe and almost uncontained. This is attributed to the closeness that students and pupils have with each other, notwithstanding the overcrowding generally observed. Children’s naivety and willingness to help their grade mates in problematic situations would expose them to contacting the disease in the case where a fellow student needs first aid attention and the classmates offer the first aid without the necessary precautions.

In addition, a school system is characterized by sharing of resources like washrooms and washbasins. This increases the risks of the spread in the event that one of the students has the disease. Therefore, the impact on the functioning of such a system would be to close down it operations until the outbreak is contained failure to which dozens of the individuals would end up getting the disease due to the environment’s vulnerability. The response activities would be targeted on every participant due to the dense population to ensure that no gap is left open that can steer the spread of the virus. These would imply greater cost implications, but which are better than cure.

*Reporting Protocols of Ebola Outbreak at the Community*. In the eventuality that Ebola outbreak is reported in the community, immediate communication is paramount to ensure that the disease is contained as soon as possible. Appropriate response and containing of the situation is a product of efficient and effective communication to the right protocol. Therefore, the immediate communication would be to the health workers in the community as well as the leaders so that they can act promptly as they communicate with other health officials who are needful in such a scenario. The management in collaboration with the ground health workers can call in the relevant department for example the WHO or the United Nations body mandated to handle such incidences. The management informs the other government agencies that are in charge of health so that the community is attended from all possible angels to prevent the spread of such a disease.

*Recommended strategies for the prevention of Ebola Outbreak in the community*. Since the Ebola virus is communicable, there are measures that are necessary to put in place to enhance prevention of the disease from spreading out. The strategies recommended would have more to do with protecting the individuals from contacting the disease and on having an apt system in place that is elaborate and accurate for effective communication among public health workers (Fallah, Skrip, d'Harcourt, & Galvani, 2015). Therefore, the first recommended strategy is a public education strategy. This involves the empowerment given to the people in a community on how to identify an Ebola patient and more importantly, the safety precautions when handling such a patient such as wearing of protective gloves.  This strategy would also be relevant to public health workers who are mainly the people in direct and constant contact with Ebola victims.

The second strategy would be having an efficient proactive system. This mainly would be based in the health workers hands. The system would be highly operational and accurate on the basis of reporting Ebola incidences and on immediate evacuation plans of isolating the healthy from the unhealthy in a way that the spread can be curtailed within hours after identification of the disease. In a community such apt measures would ensure that in the present and in the future, an Ebola report does not accelerate to levels as witnesses in West Africa in the 2014-2015 period.

In conclusion, Ebola disease is highly communicable. The public should be made aware of the safety precautions that can help them steer off contacting the virus. On the other hand, the health system should be endowed with resources needed to handle Ebola outbreak quickly and efficiently to reduce and fight its spread.

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