

NIGERIA'S PREPAREDNESS AND PUBLIC HEALTH RESPONSE TO OUTBREAK OF EBOLA (BUNDIBUGYO) VIRUS -2026

PRESENTED BY

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HEAD AEROMEDICAL STANDARDS

NIGERIA CIVIL AVIATION AUTHORITY

BACKGROUND

- Current outbreak announced by WHO on the 14th of May 2026
- Originated from the Ituri Province of Democratic Republic of Congo (DRC)
- 15th of May, 2026, DRC officially declared 17th Ebola outbreak
- Uganda affected due to cross border activities from DRC
- WHO Director General **Dr. Tedros Adhanom Ghebreyesus** declared Ebola Bundibugyo virus disease Public Health Emergency of International Concern (PHEIC) on the 17th of May, 2026.

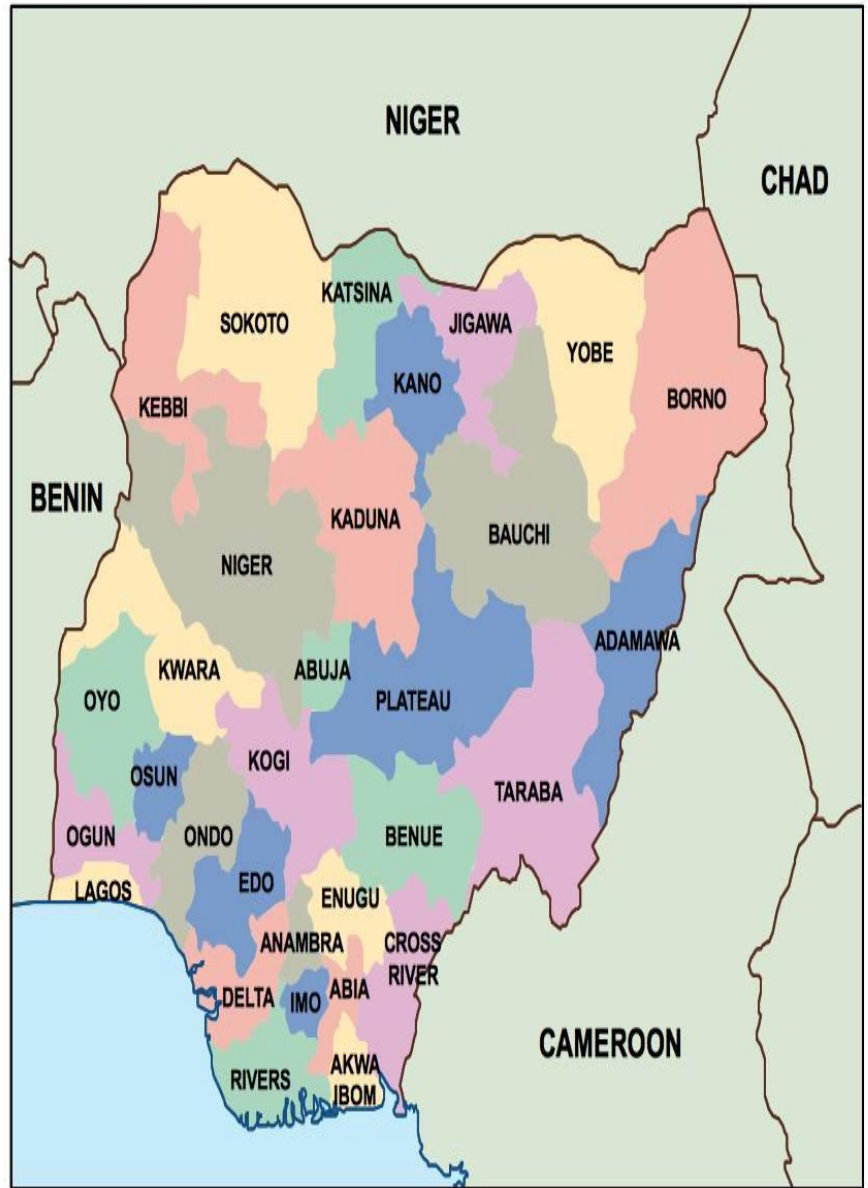
AFRICA AT A GLANCE

- Origin of all known Ebola virus outbreaks
- Frequent cross-border population movement
- High-Risk region requiring coordinated surveillance
- Nigeria serves as a key regional aviation gateway
- Preparedness is essential to prevent importation and spread



NIGERIA: RISK PROFILE AND PREPAREDNESS CONSIDERATION

- **Population:** Over 230 million people, making her Africa's most populous country
- **High Density urban centres** such as Lagos, Kano, Port Harcourt and Abuja facilitate rapid disease transmission if cases are not detected
- **Multiple International Airports, land borders and seaports** increase the risk of importation and cross border spread.



CURRENT OUTBREAK SITUATION

- Latest reports - **4586 Confirmed cases**
- **2130 deaths** reported across the **Democratic Republic of the Congo (DRC)** and **Uganda**. (12/08/2026)
- **High case fatality rate (CFR) approximately 46.8%.**
- **Most affected age group is 14–45 years**, representing the economically active population.
- **Regional and international public health risk -high** due to continued cross-border movement with potential international spread.
- **Currently no approved vaccine or specific antiviral treatment for Bundibugyo Ebola Virus Disease**

OUTBREAK CONTROL

Consequently, outbreak control relies heavily on **rapid public health interventions**, including:

- **Early detection and prompt case reporting.**
- **Immediate isolation** and clinical management of confirmed cases.
- **Strict Infection Prevention and Control (IPC)** measures in healthcare settings.
- **Comprehensive contact tracing and active surveillance.**
- **Dignified Safe burial practices.**
- **Community engagement, public risk communication, and strengthened surveillance systems.**

OBJECTIVES OF PREPAREDNESS

- Public health education and enlightenment
- Detect any cases
- Contain detected cases
- Respond swiftly to any suspected cases
- Protect Health Workers
- Sustain Health Services

FOCUS OF PREPAREDNESS

Accordingly, Nigeria's preparedness is focused on

- Early detection
- Immediate isolation
- Optimized supportive care
- Strict infection prevention and control
- Safe sample handling
- Contact tracing readiness and safe referral systems
- Risk communication and workforce protection.
- Adequate provisions for medical countermeasures
- Risk Stratification

NIGERIA'S STATUS PRESENTLY

- As at 14th August, 2026 no reported case of EVD
- Adherence to WHO guidelines and the IHR (2005)
- Regular briefings by the Coordinating Federal Minister of Health and Social Welfare Prof. Muhammad Ali Pate
- Frequent updates by the Director General of the Nigeria Centre for Disease Control(NCDC) Dr. Jide Idris
- Weekly meetings online/physical by various stakeholders

NIGERIA'S PREPAREDNESS MEASURES

- Commenced with a meeting convened at the instance of His Excellency, the President Commander in Chief of the Federal Republic of Nigeria, Asiwaju Bola Ahmed Tinubu GCFR
- Headed by Chief of Staff to the President, Rt. Honourable Femi Gbajabiamila
- Sensitization /public awareness through:
 - Press briefings by Ministry of Health & Social Welfare, and Nigeria Centre for Disease Control & Prevention (NCDC)
 - Virtual meetings by stakeholders in aviation, the general public, ministry/departments of health, immigration and customs services.

NIGERIA'S PREPAREDNESS/RESPONSE MEASURES

- Funding allocation to all 36 states and Federal Capital Territory.
- Enhanced Surveillance with tighter health screening protocols at Points Of Entry by Port Health Services personnel.
- Public Health Advice with emphasis on community awareness, hygiene and early reporting of symptoms.

NIGERIA'S PREPAREDNESS/RESPONSE MEASURES (CONT'D)

States and the FCT must maintain Ebola preparedness, the pace of readiness should reflect each State's importation and transmission risk.

NCDC grouped States into three preparedness tiers:

1. **High Risk:** Known Trade/travel routes with international airports/seaports, porous borders and ground crossing (Lagos, FCT, Rivers, Kano, Enugu, Borno, Akwa Ibom, Cross River, Taraba, and Adamawa.)
2. **Moderate Risk:** Ogun, Nasarawa, Kaduna, Plateau, Kogi, Niger, Jigawa, Katsina, Bauchi, Ebonyi, Abia, and Bayelsa.
3. **Baseline Preparedness:** All remaining states

RISK STRATIFICATION

Risk stratification may change as the situation evolves.

Preparedness as earlier stated, must focus on:

1. Early detection
2. Immediate isolation
3. State Level Preparedness

In the spirit of shared national preparedness, Honourable Commissioners of Health are requested to provide leadership for coordinated Ebola readiness across all Local Governments and Wards.

REFERENCE VIDEOS

- <https://www.youtube.com/watch?v=qG6J4tiWRMw>
- <https://www.youtube.com/watch?v=wj6yJ1sTnhI>
- https://youtu.be/e8_i6EgEdBQ
- <https://www.youtube.com/watch?v=qG6J4tiWRMw>









Exit
Concourse







Nigeria Health Declaration Portal

All travellers entering Nigeria must complete a health declaration form before boarding. Submit yours digitally to receive an instant QR-verified PDF confirmation.

 **Start Your Declaration**

 **Learn How It Works**

 Takes under 5 minutes

 Mobile-friendly

 Secure & Encrypted

 Instant QR Code

 **Declaration Process**

1

Fill in Personal & Travel Details





NIGERIA CIVIL AVIATION AUTHORITY

Corporate Headquarters: Nnamdi Azikwe International Airport, Domestic Wing, Abuja.
Tel: +234 916 201 1222, +234 906 201 1226.

REF No: NCAA/AMS/DG/77/VOL.1/748

Date: 26th June, 2026

To: ALL FOREIGN AND DOMESTIC AIRLINES, AIR NAVIGATION SERVICE PROVIDERS,
AERODROME OPERATORS AND OTHER SERVICE PROVIDERS

Subject: RE: MANDATORY HEALTH DECLARATION FOR PASSENGERS, AIRCREW, DIPLOMATS, AND
OTHER TRAVELLERS ARRIVING IN NIGERIA

BACKGROUND

Following the Nigeria Civil Aviation Authority (NCAA) circular dated 30th May 2026 with reference number NCAA/AMS/DG/77/VOL.1/746, it has been observed that some airlines have not fully complied with the directives contained therein.

The Authority views this development with serious concern, as strict compliance with regulatory directives is essential for maintaining aviation safety, operational efficiency, and adherence to established standards within the industry in collaboration with other agencies to prevent the spread of any infectious diseases.

The Nigeria Civil Aviation Authority is working closely with the Federal Ministry of Health, the Nigeria Centre for Disease Control (NCDC), Port Health Services, State Ministries of Health, and relevant international public health organizations to ensure a coordinated and effective response.

ACTION REQUIRED:

1. Effective immediately, all Passengers, Aircrew, Diplomats, and other persons entering Nigeria shall complete the Nigeria Centre for Disease Control (NCDC) Health Declaration Form through the designated portal <https://healthapp.ncdc.gov.ng> BEFORE BOARDING.
 2. Airlines are required to disseminate this information to all passengers prior to boarding and take the necessary measures to facilitate full compliance with the Health Declaration requirement.
 3. Failure to ensure compliance would result in the imposition of appropriate sanctions, and airlines shall be held liable and penalized for each non-compliant passenger.
 4. All service providers are to maintain heightened vigilance and adhere to all existing public health protocols and directives issued by the Authority.
 5. All service providers shall promptly report any suspected case of communicable disease identified on board in accordance with applicable regulations.
- Effective inter-agency coordination and strict compliance with preventive measures remain essential in safeguarding passengers, crew members, and the general public.

Please ensure strict compliance.


Capt. Donald Spiff
Director of Operations, Licensing and Training Standards
For: Director General, Civil Aviation



WHAT IS EBOLA VIRUS DISEASE



Ebola disease is a **severe and often deadly** illness caused by a group of viruses known as orthoebolaviruses.

The disease affects **humans and some animals**.



Ebola can spread quickly if infection **prevention measures** are not followed



But people can **survive** the disease when they report early and receive **medical care** early.



For more information,
call the NCDC toll-free line:

6232

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WHERE DOES EBOLA COME FROM?



Fruit bats are believed to be the natural hosts of Ebola viruses.



The virus may spread to humans through contact with infected wild animals, such as bats, monkeys, chimpanzees, gorillas, forest antelopes, and porcupines.



Once a person becomes infected, the virus can spread from person to person through direct contact with infected body fluids.



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DOES EBOLA SPREAD THROUGH THE AIR OR MOSQUITO BITES?

No. Ebola does not spread through:



the air like flu or COVID-19



mosquito bites



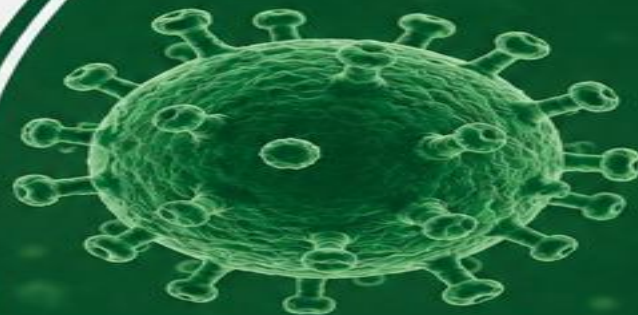
casual contact such as
waving at someone



properly cooked food
or treated water



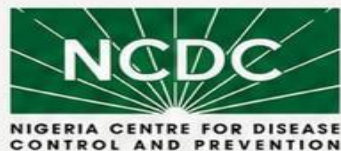
People infected with Ebola
do not spread the disease
until they develop symptoms.



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HOW EBOLA SPREADS

Ebola spreads through direct contact with:



blood or body fluids
of a sick person



body fluids of someone
who died from Ebola



contaminated objects
such as bedding, clothing,
needles, or medical equipment



infected wild animals



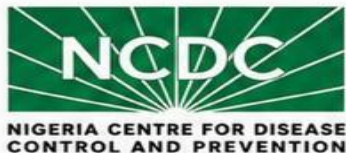
Body fluids that may spread Ebola
include blood, vomit, diarrhea, saliva,
urine, sweat, breast milk, and semen



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KNOW THE SYMPTOMS ACT EARLY PREVENT EBOLA

The **symptoms of Ebola** may appear suddenly and can include:



Fever



Weakness and tiredness



Headache



Muscle and body pains



Sore throat



Vomiting



Diarrhoea



Stomach pain

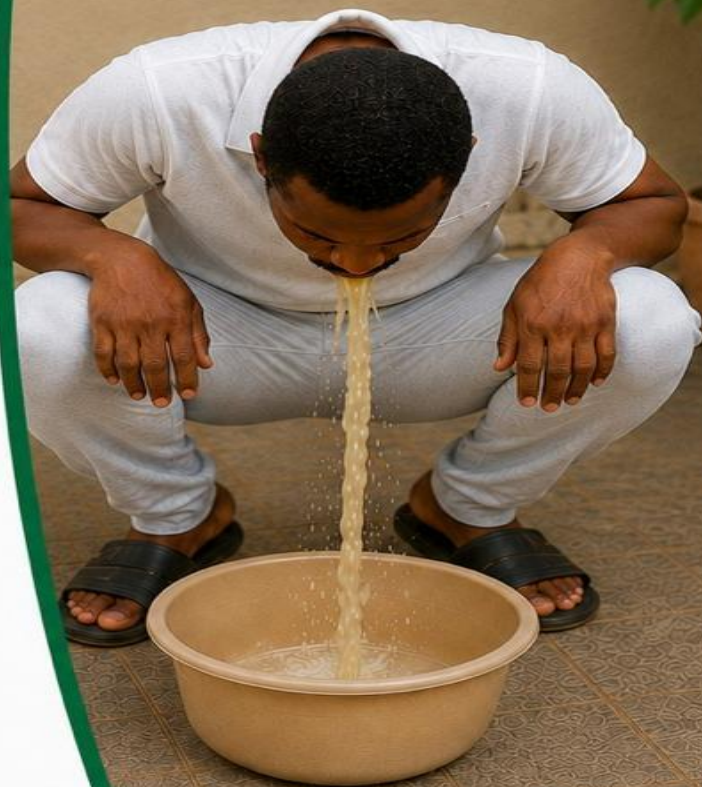


Rash



Unexplained bleeding or bruising

Symptoms usually appear **between 2 and 21** days after exposure to the virus.



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WHO IS MOST AT RISK OF EBOLA?



Healthcare Workers



**Caregivers and Family Members
of Persons Sick with Ebola**



**People Involved in
Burial Ceremonies**



Laboratory Workers



**People Exposed to
Infected Animals**



**Travellers with Exposure
in Affected Areas**



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IS THERE A TREATMENT OR VACCINE FOR THE EBOLA VIRUS CAUSING THE CURRENT OUTBREAK?



Currently, there is **no** licensed vaccine or specific approved treatment for the Ebola virus species causing the current outbreak (Bundibugyo virus disease).



However, **early medical care** can significantly improve survival.



Supportive treatment provided early in **designated treatment centres** can save lives.



Supportive treatment includes fluids, treatment of symptoms, and management of complications.



If you or any member of your family develops fever or other Ebola-like symptoms after travel to an affected area, or comes in contact with a person suspected of having Ebola, please **seek medical attention immediately**.



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PROTECT YOURSELF PROTECT YOUR FAMILY PREVENT EBOLA



Wash

your hands regularly with soap and clean water



Use

alcohol-based hand sanitiser when soap and water are unavailable



Avoid

contact with blood or body fluids of sick people



Avoid

direct contact with people who may have Ebola



Avoid

unsafe burial practices or contact with dead bodies



Avoid

contact with sick or dead wild animals



Ensure your meat is properly handled and thoroughly cooked



Seek medical care early if symptoms develop



Follow ALL public health advice when travelling to affected countries



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call the NCDC toll-free line:

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THERE IS NO EBOLA IN NIGERIA



24 MAY 2026



Nigeria has no confirmed Ebola case.



Because of outbreaks reported in the Democratic Republic of the Congo (DRC) and Uganda, Nigeria is strengthening preparedness, surveillance, public awareness, and response systems.



Ebola outbreaks in other countries remind us that infectious diseases can cross borders.

PEOPLE IN NIGERIA ARE ADVISED TO



Remain calm, and do not panic



Stay informed through trusted sources such as the Nigeria Centre for Disease Control and Prevention (NCDC), Federal and State Ministries of Health and Social Welfare, WHO, UNICEF, and other development organisations.



Avoid spreading or listening to rumours, false information, or unverified social media messages.



Follow ALL public health advisories



Practice good hygiene, and seek medical attention promptly if symptoms develop after travel to an affected area or contact with a suspected case.



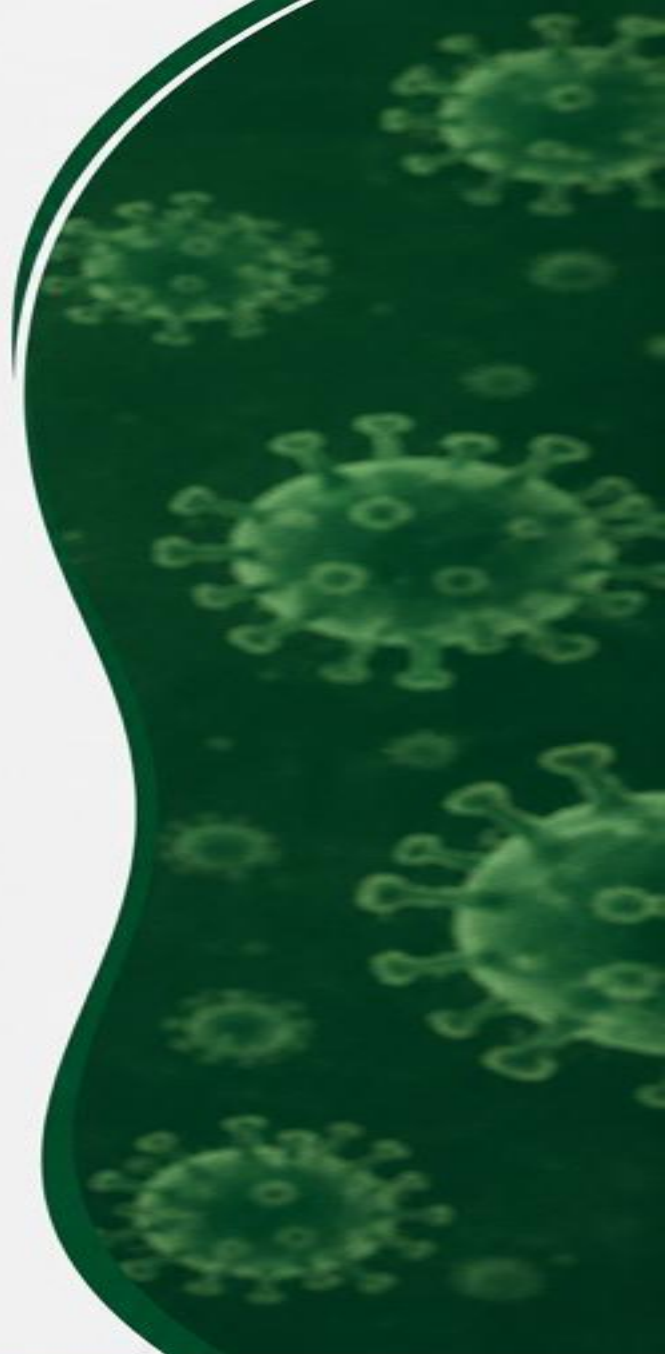
Vigilance and preparedness remain Nigeria's best protection against Ebola.



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CONCLUSION

Purpose of Nigeria's preparedness premised on:

- Prevention of importation/spread of EVD
- Strengthen early detection and prompt management of detected/ suspected cases
- Enhance Public Health protocols at all Points Of Entry
- Standardize screening and surveillance procedures nationwide.

CONCLUSION (CONT'D)

- Ensure compliance with the IHR (2005)
- Protect travellers, frontline personnel and the general public.
- **Scope** applies to all designated Points Of Entry in the Federal Republic of Nigeria.
- **Collaborating Agencies** are:
 - Federal Airport Authority Of Nigeria
 - Nigeria Civil Aviation Authority
 - Nigeria Immigration Services
 - Nigeria Customs Services

CONCLUSION (CONT'D)

Nigeria's successful containment of previous Ebola importation (2014) made possible by:

- Early recognition
- Decisive leadership
- Rapid coordination
- Disciplined contact tracing
- Strict Infection Prevention and Control
- Public trust.

The window for preparedness is before the first reported case and so far Nigeria has taken this step and is continuously reviewing strategies on improving any existing ones.

THANK YOU



QUESTIONS

