

One of the major problems during the outbreak was the lack of capacity. With only 30% of the required capacity available, many of the contagious incoming patients had to go back to their communities, thereby infecting others. This problem made the outbreak harder to control and patients harder to contain.

In addition, due to the lack of capacity, patients with other diseases couldn't get the treatment they needed since all of the beds in all hospitals were already crowded with ebola patients. This situation caused many other deaths, not directly from Ebola Virus, but from the health care system that was overwhelmed by the outbreak.



Even though the majority of the treatment centers didn't have enough capacity for more people, two-thirds of the 696 beds in Liberia's Ebola treatment centers were empty in November 2014 due to the lack of trust by the community not only in their health system but also in western medicine.

Most of these West African countries which have been affected by the outbreak, also suffered a civil war not so long ago. Political corruption, poor economy and bad health system pushed the community not to believe in the healthcare provision that health workers were offering.





Interview

Salieu Karim Sesay Ebola Survivor Corps - Project Manager

+a pool of Health Workers
Sierra Leone

Insights

from the health workers of Sierra Leone









Nosocomial Infections

Lack of Trust

AL Smins TO CLEAN UP EACH PATIENT

HARD&RISKY PATIENT TRANSPORTATION

PEOPLE THOUGHT

E D L Awas

WITCH-CRAFT

the HEALTH-CARE PROVISION



Lack of Resources

The biggest reason for the lack of capacity during the 2014 West Africa Ebola Outbreak was that Liberia, Guinea and Sierra Leone are some of the poorest countries in the world. They didn't have enough resources and financial capabilities to implement rapid treatment centers for Ebola patients.



Slow Logistics

Besides the insufficient resources in the affected countries, there was another factor that slowed down the containment operations which was that the logistics weren't fast enough. Due to the size and mass of the plain beds, they couldn't receive all the help they needed in hospitals and treatment centers.







Plain Hospital Beds



The options in the market are currently limited to plain hospital beds which are not covering the specific needs of an epidemic scenario, another option to consider might be the bio containment units, however they are not suitable for open isolation approach and are extremely expensive and custom made.

What if the people in remote areas could produce their hospital beds with their **local resources**?

Would design help **building trust** in poor healthcare systems?



Feasibility Goals

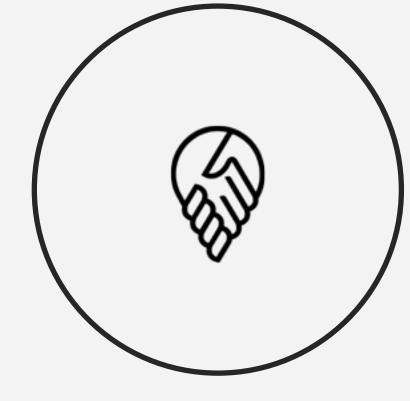


Functionality Goals















COST-EFFICENCY

EASY SHIPMENT

RAPID & EASY INSTALLATION

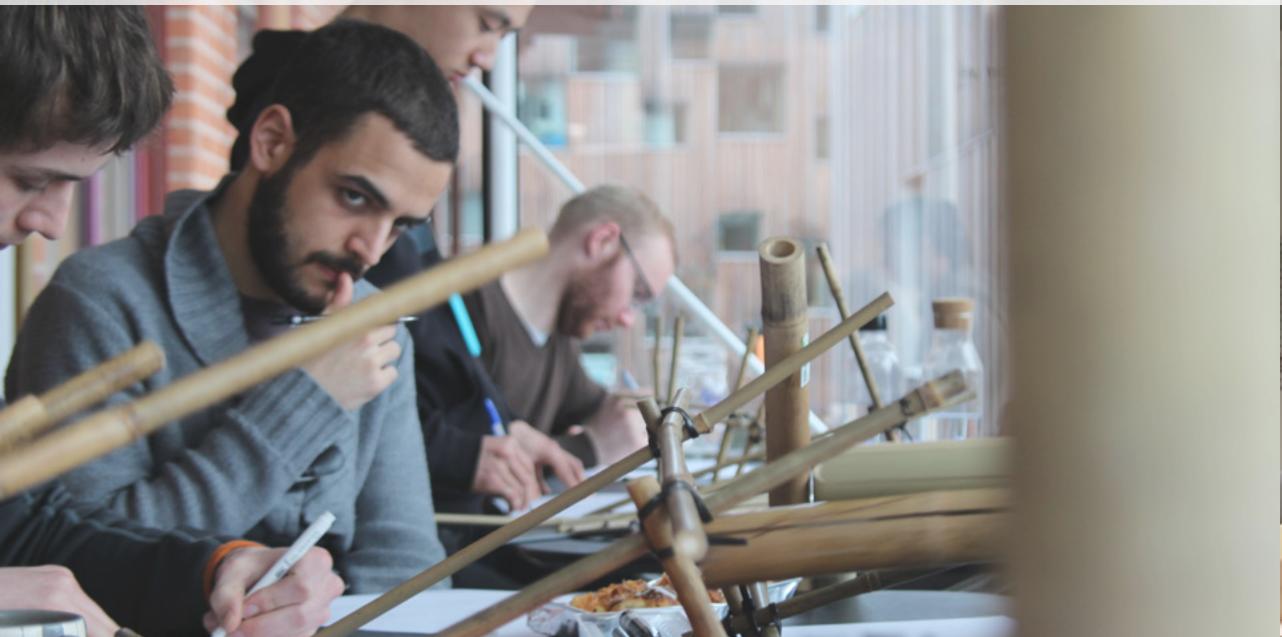
LOCAL PRODUCTION

PRIVACY BARRIER

EASY DECONTAMINATION OF THE BED

TRANSPORTATION OF THE PATIENTS







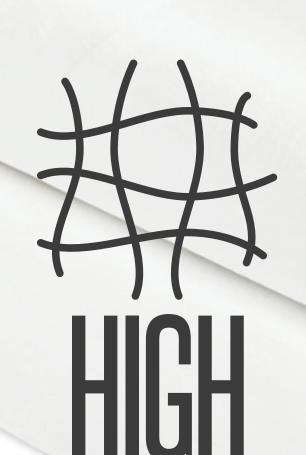


Tyvek





MICROBIAL BARRIER



TEAR

RESISTANCE







Instead of sending actual beds, what if the solution could be about sharing the most valuable resource ever;







Sharing the knowledge of building a containment bed with resources which could be accessible for a rapid response anytime.





















