



FEDERATED STATES OF MICRONESIA AND THE REPUBLIC OF THE MARSHALL ISLANDS

KEY DEVELOPMENTS

- In early September 2011, the Federated States of Micronesia (FSM) began identifying cases of dengue fever, followed by an outbreak of dengue fever in the Republic of the Marshall Islands (RMI) approximately one month later. As of January 11, 2011, Government of FSM (GoFSM) officials had recorded 1,082 clinical cases of dengue fever and two dengue-related deaths in Yap State, including 843 cases in Yap proper and 239 cases in four outer atolls. As of December 28, Government of RMI (GoRMI) health officials had recorded more than 1,360 clinical dengue fever cases in RMI with no dengue-related deaths.
- In response, the GoFSM and GoRMI have taken steps to treat and limit the spread of the disease with support from the U.S. Centers for Disease Control and Prevention (CDC), the U.S. Department of Defense (DoD), and the U.N. World Health Organization (WHO). USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA) staff, including an RMI-based Disaster Assistance Coordinator (DAC), continue to monitor the situation and coordinate with the CDC, GoFSM, GoRMI, and other U.S. Government (USG) agencies.
- From October 13 to November 9, a USAID/OFDA logistics officer traveled to FSM and RMI to evaluate local ports, airports, and warehouses, as well as to hold meetings regarding logistics capacity for humanitarian aid in the two countries, allowing USAID/OFDA to build working relationships with key stakeholders in advance of a disaster response. As a result of assessments, USAID/OFDA is formulating an action plan to improve capacity for storing and delivering relief supplies in the region.
- From October 13 to November 5, a USAID/OFDA communications officer conducted an assessment of communications infrastructure in FSM and RMI to determine whether USAID/OFDA's existing communications capabilities are sufficient to support a potential disaster response. The findings resulted in the creation of a Communications Plan to enhance communicative ability during a potential disaster response in FSM or RMI.

Context

- In November 2008, USAID assumed responsibility for disaster response and reconstruction in FSM and RMI from the U.S. Federal Emergency Management Agency (FEMA), reflecting the transition of FSM and RMI from U.S.-administered trust territories to independent countries. USAID and FEMA developed an Operational Blueprint to provide a framework for USG disaster response and reconstruction in the two nations, under which USAID maintains FEMA's previous commitment to supplementing host government efforts as necessary to provide humanitarian assistance in the aftermath of significant disasters.
- USAID maintains a full-time presence in FSM and RMI through the USAID DAC. Located in Majuro, RMI, and working as a part of the U.S. Embassy country teams in FSM and RMI, the DAC serves as a liaison with host governments and coordinates USG relief activities in FSM and RMI.
- An important pillar of USAID's disaster mitigation, relief, and reconstruction program is a cooperative agreement between USAID and its primary relief and reconstruction partner in the two countries, the International Organization for Migration (IOM), which maintains offices in Pohnpei and Yap states, FSM, and Majuro, RMI.

Dengue Fever Outbreak

FSM

- On September 1, 2011, the Yap State Department of Health Services identified an initial case of dengue fever in FSM. By November 21, the department had identified 400 suspected cases of the virus, prompting the governor of Yap to declare a state-wide emergency on December 1. As of January 11, GoFSM officials reported that a total of 170 people had sought treatment for dengue at hospitals in Yap State, of which three people remain hospitalized.
- By November, officials from the CDC had identified the strain of dengue fever affecting the country as DENV-2. Prior to the current outbreak, the DENV-2 virus strain had not appeared in some FSM islands since the 1990s and not in others since the 1970s, making a large portion of the population susceptible to the virus.

- In response to the outbreak, CDC and WHO entomologists worked with the GoFSM Ministry of Health (MoH) to conduct dengue fever surveillance, train local health staff, and administer household surveys of suspected dengue cases in Yap State. In addition, a WHO and Yap State EpiNet team traveled to Ulithi Atoll and Fais Island to provide clinical management advice, review surveillance systems, and meet with students and administration at the local high school regarding the outbreak.
- In December, DoD transported IV fluids from Guam on behalf of Yap authorities, delivering them via parachute drop to Fais Island as part of the annual Christmas Drop program. Yap officials subsequently reported having adequate quantities of IV fluids in Pohnpei to meet anticipated needs in Yap State.

RMI

- On October 20, 2011, GoRMI MoH officials confirmed three cases of dengue fever in RMI, marking the first reported outbreak of the disease in the country's history. On October 28, the GoRMI declared a state of emergency due to the outbreak on Majuro Atoll, the capital of RMI and the most heavily populated of RMI's 34 atolls and islands. By early December, cases of dengue fever had appeared on Ebeye, Enewetak, and Utirik atolls. As of December 5, GoRMI health officials reported that the outbreak had subsided on Majuro Atoll.
- In response to the outbreak, the GoRMI Environmental Protection Authority (EPA) had completed larvicide and adulticide application in approximately 95 percent of houses in Ajeltake town on Majuro Atoll as of November 30 and continues to apply pesticides in affected areas. GoRMI EPA personnel worked with assistance from a five-person U.S. Naval Medical Research Unit #2 (NAMRU-2) team, which deployed to Majuro in November to provide expert advice and practical assistance in spraying insecticide around both public and residential buildings.
- To date, the GoRMI has drawn \$100,000 from the joint USG-GoRMI Disaster Assistance Emergency Fund (DAEF) for the response. The DAEF is a contingency fund to which the USG will contribute on an annual basis until 2023, with the GoRMI providing matching funds. The DAEFs represent the first source of disaster response funding for FSM and RMI and must be used before additional USG aid may become available.

USG Coordination

- On July 11, 2011, in support of the Pacific Partnership 2011 FSM program, USAID held a Humanitarian Assistance/Disaster Response workshop in Pohnpei, enabling U.S. and FSM disaster response specialists to review plans for weather warnings, disaster response activities, and emergency declarations. The exercise allowed participants to identify areas for improvement in FSM national and Pohnpei State disaster management plans, as well as the USG Operational Blueprint.
- In early October 2011, representatives from USAID/Pacific Islands based in Manila, the Philippines, and FEMA joined the USAID DAC to conduct a policy review of the Operational Blueprint with FSM and RMI national disaster authorities, staff from the U.S. embassies in Majuro and Kolonia, and other donors. The team also held town meetings in both countries to inform and encourage participation from non-governmental organizations, civil society, and the private sector.
- The USAID DAC attended a disaster tabletop exercise with the U.S. Army on Kwajalein Atoll, RMI, (USAKA) on December 7, 2011. The purpose of the exercise was to enhance the capacity of USAKA and RMI partners to prepare for, respond to, and recover from a severe weather event, as well as to help identify shortcomings and update their respective emergency action plans accordingly.

Logistics

- In FY 2012, USAID/OFDA continues to work through IOM to preposition emergency relief supplies in three strategic locations in FSM and RMI. Commodities include communications equipment, water purification technologies, water storage solutions, tarpaulins, health kits, medical supplies for field hospitals, and generators.
- In addition, USAID/OFDA is preparing to meet the logistical challenges associated with responding to a potential disaster in FSM or RMI. Through IOM, USAID/OFDA is prepositioning basic emergency camp resources in Chuuk and Yap states, FSM, for up to 25 disaster response personnel from the USG and implementing partners, as well as establishing a system to immediately deploy standby resources in the event of a disaster response.

Disaster Preparedness

- USAID/OFDA supports disaster preparedness in FSM and RMI through capacity building activities for local and national government officials by way of The Asia Foundation's (TAF) Pacific Islands Disaster Risk Management Program 2. In FY 2011, USAID/OFDA awarded \$750,000 to TAF's three-year program for national and regional

disaster management trainings in FSM and RMI, as well as 12 other South Pacific nations. The program also includes initiatives to develop and adapt training materials relevant to the region for use by national governments.

- USAID/OFDA is procuring five portable reverse osmosis machines through IOM for donation to the GoRMI National Disaster Committee. The water filtration systems are capable of producing up to 200 gallons of drinking water per day, and their portable nature will help the GoRMI to respond to water shortages that occur in remote locations.
- In FSM, USAID/OFDA has launched the Climate Adaptation and Disaster Risk Education (CADRE) Pilot Project to raise awareness of climate change adaptation and disaster preparedness in both schools and communities on the island of Pohnpei, through \$60,000 to IOM. To date, the CADRE Project has partnered with the Gaining Early Awareness and Readiness for Undergraduate Program to access nearly 400 eighth grade students at six elementary schools on island.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for response efforts in FSM and RMI can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
The Center for International Disaster Information: www.cidi.org or +1.202.821.1999.
Information on relief activities of the humanitarian community can be found at www.reliefweb.int.