

WEST AFRICA – EBOLA OUTBREAK

FACT SHEET #6, FISCAL YEAR (FY) 2014

SEPTEMBER 17, 2014

NUMBERS AT A GLANCE

4,963

Total Number of Suspected and Confirmed Ebola Virus Disease (EVD) Cases
U.N. World Health Organization (WHO) – September 16, 2014

2,453

Total Number of EVD-Related Deaths*
WHO – September 16, 2014

2,407

Total Number of EVD Cases in Liberia*
WHO – September 16, 2014

1,620

Total Number of EVD Cases in Sierra Leone*
WHO – September 16, 2014

936

Total Number of EVD Cases in Guinea*
WHO – September 16, 2014

21

Total Number of EVD Cases in Nigeria*
WHO – September 16, 2014

*Includes both laboratory-confirmed and suspected EVD cases.

HIGHLIGHTS

- On September 16, U.S. President Barack H. Obama announced the creation of a Joint Force Command headquartered in Monrovia, Liberia to provide regional command and control support for the U.S. military response to EVD.
- The EVD caseload continues to increase rapidly, with more than more than 2,340 cases identified in the past 21 days.
- USAID/OFDA contributed \$5.7 million in additional support for EVD response activities in Sierra Leone and Liberia.

USG FUNDING

TO THE EVD RESPONSE TO DATE IN FY 2014

USAID/OFDA ¹	\$21,293,497
USAID/FFP ²	\$6,604,891
USAID/GH ³	\$8,950,000
DoD ⁴	\$30,600,000
CDC ⁵	\$3,300,000 ⁶
\$70,748,388⁷	
TOTAL USG ASSISTANCE TO THE WEST AFRICA EBOLA OUTBREAK RESPONSE	

KEY DEVELOPMENTS

- The U.S. Government (USG) has launched a whole-of-government response to the EVD outbreak in West Africa, including increased involvement from the U.S. military. On September 16, President Obama announced that an estimated 3,000 U.S. troops plan to deploy to provide logistics support, construct EVD treatment units (ETUs), and train health care workers. Additionally, the U.S. Public Health Service Commissioned Corps plans to deploy health care workers to West Africa.
- On September 16, the U.N. released an EVD Outbreak Overview of Needs and Requirements document that highlights nearly \$1 billion worth of activities required to meet the needs of an estimated 22 million people affected by the EVD outbreak in West Africa. In addition to financial support, the six-month plan also requests foreign medical teams, support for medical evacuations, personnel, relief commodities, an air bridge, and political support and engagement. The new plan is a ten-fold increase from the \$100 million EVD response plan unveiled by the U.N. in early August.
- On September 14, USAID/OFDA provided \$3.5 million to the International Federation of Red Cross and Red Crescent Societies (IFRC) to procure personal protective equipment (PPE) and support a 60-bed ETU in Sierra Leone.
- On September 17, USAID/OFDA provided an additional \$2.2 million to the U.N. Children's Fund (UNICEF) to support household-level protection in Liberia.

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID's Office of Food for Peace (USAID/FFP)

³ USAID's Bureau for Global Health (USAID/GH)

⁴ U.S. Department of Defense (DoD)

⁵ U.S. Centers for Disease Control and Prevention (CDC)

⁶ CDC has also contributed funding for salary and benefits for hundreds of staff working on the EVD response.

⁷ Total funding figures reflect committed funding to date. To date, the USG has committed or pledged a total of more than \$175 million to the EVD response and continues to use identified needs to program toward this total.

CURRENT SITUATION

- The EVD caseload continues to increase rapidly. According to WHO, approximately 47 percent of the current suspected and confirmed EVD caseload—more than 2,340 cases—have been identified in the past 21 days. The recent increase in cases is largely due to a lag in case reporting. The current West Africa EVD outbreak has a higher caseload than all previous EVD outbreaks combined.
- The U.N. has raised concerns about the disproportionate impact of the current EVD outbreak on women and children, reporting that up to 75 percent of reported cases are women and approximately 2.5 million children under five years of age live in EVD-affected areas.

Liberia

- The WHO reports that approximately 57 percent of the 2,407 suspected, probable, and confirmed EVD cases in Liberia were identified in the past 21 days. Of the 1,296 suspected EVD-related deaths in Liberia, WHO reports that 563 have been confirmed as EVD cases, as of September 9.
- According to the U.N.'s Overview of Needs and Requirements, a total of 3.37 million people in Liberia require assistance as a result of the EVD outbreak. The U.N. reports that there are currently 41 humanitarian partners active in Liberia and that approximately \$473 million is needed to respond to EVD in Liberia.
- The Disaster Assistance Response Team (DART) continues to support the Government of Liberia (GoL) and U.N. agencies to plan, construct, and run ETUs throughout Liberia. On September 12, the International Medical Corps (IMC) opened an initial 10 beds at a new USAID/OFDA-funded 70-bed ETU in Bong County, Liberia. The DART also provided two generators to support the Island Clinic ETU in Monrovia, scheduled to open in the coming days.
- The GoL recently approved an additional ETU at the Samuel K. Doe (SKD) Stadium in Monrovia, which humanitarian actors report may be able to accommodate up to 600 beds. The GoL approved the use of a large structure behind SKD Stadium as a humanitarian warehouse.
- Additionally, the GoL approved the construction of up to eight additional ETUs outside of Montserrado County by the Armed Forces of Liberia (AFL). AFL personnel are working with CDC, USAID, DoD, Médecins Sans Frontières (MSF), and WHO to determine ETU locations and provide design specifications.
- On September 17, USAID/OFDA contributed \$2.2 million to UNICEF to procure and distribute 50,000 household protection kits in Liberia. In response to the current shortage of EVD treatment facilities in Liberia, UNICEF plans to distribute household protection kits to people who exhibit EVD symptoms but do not have access to ETU care. UNICEF is training ETU staff, contact tracers, and case investigation teams to distribute the kits and train recipients to properly use them to minimize the risks of EVD transmission for home-based patients. Each household protection kit contains a bucket, a sprayer, garbage bags, gloves, protective gowns, surgical masks, soap, and chlorine.
- On September 15, the U.N. Development Program (UNDP) reported that economic projections for Liberia—which experienced an economic growth rate of 8.7 percent in 2013—are being revised downwards due to the current EVD outbreak. UNDP also cautioned that approximately 57 percent of Liberia's 4 million inhabitants live below the poverty line, making them particularly vulnerable to shocks and crises, such as the current EVD outbreak.

Nigeria

- WHO continues to report 21 suspected, probable, and confirmed EVD cases in Nigeria. WHO reports that EVD had resulted in eight deaths in Nigeria as of September 13.
- As of September 8, all EVD cases in Nigeria continue to be traceable to a single index case, according to the Government of Nigeria (GoN) Federal Ministry of Health. The GoN, with support from CDC, continues to identify and monitor people who may have had contact with EVD patients.

Sierra Leone

- The WHO reports that approximately 40 percent of the 1,620 suspected, probable, and confirmed EVD cases in Sierra Leone were identified in the past 21 days. Of the 562 suspected EVD-related deaths in Sierra Leone, WHO reports that 514 have been confirmed as EVD cases, as of September 13.
- According to the U.N.'s Overview of Needs and Requirements, a total of 6.34 million people in Sierra Leone require assistance as a result of the EVD outbreak. The U.N. reports that there are currently 18 humanitarian partners active in Sierra Leone and that approximately \$220 million is needed to respond to EVD in Sierra Leone.

- The Government of Sierra Leone (GoSL) has planned a three-day nationwide “House to House Ebola Talk” from September 19–21. The GoSL has requested that all residents remain at home during the campaign, which is designed to educate households about EVD, as well as identify new EVD cases and refer them to treatment. Similar house-to-house campaigns have previously been conducted in Sierra Leone on immunizations, bed nets, and birth registration.
- On September 14, USAID/OFDA contributed \$3.5 million to IFRC to support the Sierra Leone Red Cross Society (SLRCS) EVD response. Funding from USAID/OFDA will be used to procure PPE and support a newly opened ETU in Kenema District. As of September 15, IFRC had opened an initial 10 beds in the Kenema ETU and plans to expand the facility to 60 beds in the coming weeks.

Guinea

- The WHO reports that approximately 33 percent of the 936 suspected, probable, and confirmed EVD cases in Guinea were identified in the past 21 days. Of the 595 suspected EVD-related deaths in Guinea, WHO reports that 429 have been confirmed as EVD cases as of September 13.
- According to the U.N.’s Overview of Needs and Requirements, a total of 3.86 million people in Guinea are in need of assistance as a result of the EVD outbreak. The U.N. reports that there are currently 34 humanitarian partners active in Guinea and that approximately \$194 million is needed for the response.

PROTECTION

- The U.N. reports that up to 75 percent of EVD cases to date have been women. Humanitarian actors attribute this to women’s traditional role as caregivers, noting that they are more likely to care for sick family members, which puts them at heightened EVD risk. Women are also more likely to work as nurses, midwives, cleaners, and cross-border traders; all careers that the U.N. has identified as being particularly at-risk for EVD transmission.
- The U.N. estimates that 2.5 million children under the age of five currently live in areas affected by EVD. In addition to the risk of contracting EVD, children also face the added risk of losing parents and caretakers. The outbreak has also led to school closures across affected countries and has severely disrupted health services, leaving many children without access to education and routine care, including life-saving vaccinations. Additionally, the EVD outbreak has significantly disrupted health care systems in affected countries, limiting access to maternal and newborn care.

LOGISTICS AND RELIEF COMMODITIES

- The U.N. estimates that the EVD response will require more than 2,900 metric tons (MT) of relief commodities each month—including PPE, body bags, chlorine, medical supplies, and lab supplies.
- The Logistics Cluster—the coordinating body for humanitarian logistics activities, comprising U.N. agencies, non-governmental organizations, and other stakeholders—reports that road transport and cargo off-loading capacity will continue to be hampered by heavy seasonal rains, predicted to continue through November.
- The U.N. has reported plans to establish three aviation hubs to ensure the continuous delivery of essential equipment and supplies to EVD-affected areas. The U.N. and the Logistics Cluster are currently in discussions with relevant parties, including government and humanitarian actors, to determine the locations and requirements for these hubs.
- USAID/OFDA continues to airlift relief commodities into EVD-affected countries. Humanitarian partners are using USG relief commodities—including PPE, plastic sheeting, water treatment supplies, and body bags—to conduct EVD screenings, protect health care workers, and construct ETUs.

FOOD SECURITY AND LIVELIHOODS

- The U.N. World Food Program (WFP) reports that food prices have risen along the borders of Guinea and Senegal since the start of the EVD outbreak. In particular, palm oil prices have increased by 40 percent and coffee prices have increased by 50 percent since mid-August. WFP also notes that traders have reported a 50 percent drop in market activities.
- The USAID-funded Famine Early Warning Systems Network (FEWS NET) predicts that between September 2014 and March 2015, Stressed—IPC 2—food insecurity or higher is expected for at least 20 percent of the population in EVD-

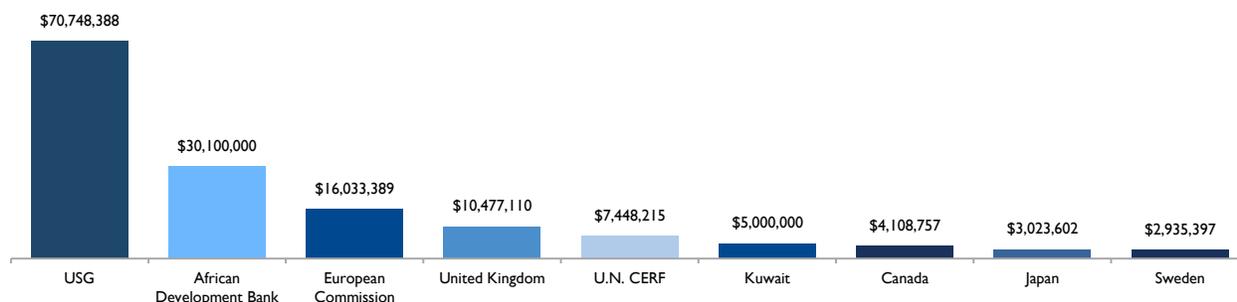
affected areas of Sierra Leone and Liberia⁸. A smaller proportion of the population is expected to face illness and market disruptions in Guinea, where Minimal—IPC 1—acute food insecurity is expected. FEWS NET predicts that food insecurity will likely particularly affect households with ill family members and the urban poor.

- As of September 15, WFP has delivered approximately 3,000 MT of food commodities to more than 147,000 people affected by the EVD outbreak in Guinea, Liberia, and Sierra Leone. To date, USAID/FFP has provided a total of \$6.6 million in food commodities—including 5,629 MT of lentils, rice, soy-fortified bulgur, vegetable oil, and yellow split peas—to support the WFP regional EVD emergency operation.

INTERNATIONAL RESPONSE

- Between April 1 and September 17, international donors provided more than \$154.6 million to support EVD response activities in West Africa, according to the U.N.
- In the U.N.'s Overview of Needs and Requirements, the U.N. proposes a three- to four-fold scale-up of international presence in EVD-affected countries. The U.N. estimates that the response will require approximately 1,000 international health care workers and 2,000 international humanitarian aid workers.
- On September 16, the World Bank approved a \$105 million grant for EVD-containment efforts in Guinea, Liberia, and Sierra Leone. The grant—which includes \$52 million for Liberia, \$28 million for Sierra Leone, and \$25 million for Guinea—will help communities cope with the economic impact of the crisis and support the rebuilding of essential public health systems. The new grant is part of the \$200 million EVD emergency mobilization first announced by the World Bank in early August.
- The Government of the People's Republic of China (GoPRC) plans to deploy an additional 59 medical personnel and a mobile laboratory to Sierra Leone. The GoPRC announced on September 12 that it plans to provide approximately \$32.5 million in humanitarian assistance—including food commodities, relief supplies for disease control, emergency treatment facilities, and financial support—to help control the EVD outbreak.

2014 TOTAL FUNDING FOR THE EBOLA RESPONSE* PER DONOR



* Funding figures are as of September 17, 2014. All international figures are according to the U.N. Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking Service and based on international commitments during the 2014 calendar year, while USG figures are according to the USG and reflect USG commitments from FY 2014, which began on October 1, 2013.

CONTEXT

- EVD is a severe illness transmitted through direct contact with the blood, body fluids, and tissues of infected animals or people. There is currently no cure or preventive vaccine for EVD.
- On August 4, U.S. Ambassador Deborah R. Malac declared a disaster due to the effects of the EVD outbreak in Liberia. U.S. Chargé d'Affaires Kathleen FitzGibbon declared a disaster in Sierra Leone on August 13. On August 15, U.S. Chargé d'Affaires Ervin Massinga declared a disaster in Guinea.
- The USG deployed a field-based DART on August 5 and established a corresponding RMT based in Washington, D.C. The DART—comprising disaster response and medical experts from USAID/OFDA, CDC, and DoD—is working to identify key needs stemming from the EVD outbreak, amplify humanitarian response efforts, and coordinate all USG efforts to support the EVD response.

⁸The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC 1—to Famine—IPC 5.

USG HUMANITARIAN ASSISTANCE TO THE EBOLA RESPONSE PROVIDED IN FY 2014¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA			
UNICEF	Health	Liberia	\$2,224,044
CDC	Health	Guinea, Liberia, Sierra Leone	\$3,000,000
Global Communities (GC)	Health	Liberia	\$758,864
IFRC	Health	Liberia	\$1,000,000
IFRC	Health	Sierra Leone	\$3,500,000
IMC	Health	Liberia	\$4,906,604
International Rescue Committee (IRC)	Health	Liberia	\$2,969,196
UNICEF	Logistics Support and Relief Commodities	Liberia	\$680,333
UNICEF	Health	Guinea, Liberia, Sierra Leone	\$600,000
U.N. Humanitarian Air Service (UNHAS)	Logistics Support and Relief Commodities	Guinea, Liberia, Sierra Leone	\$250,000
USAID/OFDA-Airlifted Relief Commodities	Logistics Support and Relief Commodities	Liberia	\$531,750
	Program Support		\$872,706
TOTAL USAID/OFDA ASSISTANCE TO EVD RESPONSE EFFORTS			\$21,293,497
USAID/FFP			
WFP	Food Assistance	Liberia	\$6,604,891
TOTAL USAID/FFP ASSISTANCE TO EVD RESPONSE EFFORTS			\$6,604,891
USAID/GH			
WHO	Health	Guinea, Liberia, Nigeria, and Sierra Leone; additional support to neighboring at-risk countries	\$8,950,000
TOTAL USAID/GH ASSISTANCE TO EVD RESPONSE EFFORTS			\$8,950,000
DOD			
DoD		West Africa	\$30,600,000
TOTAL DoD ASSISTANCE TO EVD RESPONSE EFFORTS			\$30,600,000
CDC			
CDC	Health	West Africa	\$3,300,000
TOTAL CDC ASSISTANCE TO EVD RESPONSE EFFORTS			\$3,300,000
TOTAL USG ASSISTANCE TO EVD RESPONSE EFFORTS IN FY 2014			\$70,748,388⁷

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 disaster responses around the world 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.

USAID/OFDA bulletins appear on the USAID website at
<http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>