

WEST AFRICA – EBOLA OUTBREAK

FACT SHEET #27, FISCAL YEAR (FY) 2015

MARCH 31, 2015

NUMBERS AT A GLANCE

25,178

Number of Suspected, Probable, and Confirmed Ebola Virus Disease (EVD) Cases in Acutely Affected Countries*
UN World Health Organization (WHO) – March 31, 2015

10,445

Number of EVD-Related Deaths*
WHO – March 31, 2015

11,974

Number of EVD Cases in Sierra Leone*
WHO – March 31, 2015

9,712

Number of EVD Cases in Liberia*
WHO – March 31, 2015

3,492

Number of EVD Cases in Guinea*
WHO – March 31, 2015

*Includes cumulative EVD cases in Guinea, Liberia, and Sierra Leone. Numbers are subject to change due to reclassification, retrospective investigation, and availability of laboratory results.

HIGHLIGHTS

- Last confirmed EVD case dies in Liberia; no new confirmed cases detected since March 20
- Sierra Leone's three-day stay-at-home period occurs with widespread compliance
- President of Guinea Alpha Condé declares a 45-day health emergency period; closes border between Guinea and Sierra Leone

USG HUMANITARIAN ASSISTANCE TO EVD OUTBREAK RESPONSE TO DATE IN FY 2014 & FY 2015

USAID/OFDA ¹	\$515,176,019
USAID/FFP ²	\$57,479,546
USAID/GH ³	\$20,076,000
USAID/Liberia	\$16,100,000
USAID/Guinea	\$3,482,000
DoD ⁴	\$360,255,000
CDC ⁵	\$391,576,136 ⁶
\$1,364,144,701	
USG ASSISTANCE TO THE WEST AFRICA EVD OUTBREAK RESPONSE ⁷	

KEY DEVELOPMENTS

- The Government of Sierra Leone (GoSL) enacted a three-day stay-at-home period on March 27–29. Approximately 8,300 three-person teams—each comprising a nurse, a social mobilizer, and a community task force member—went door-to-door to distribute soap, promote good hygiene practices, and identify possible EVD cases. The GoSL National Ebola Response Center (NERC) reported that teams focused on EVD hotspot areas and did not deploy to four districts that have no current active transmission chains. To date, the NERC has not presented definite EVD-related data resulting from the stay-at-home period.
- In order to combat growing numbers of confirmed EVD cases, on March 28 President Alpha Condé of Guinea declared a 45-day health emergency period in Boffa, Coyah, Dubréka, Forécariah, and Kindia districts, as well as the capital city of Conakry, allowing EVD response actors to strengthen EVD response efforts. The declaration provides local Government of Guinea (GoG) officials greater authority to restrict population movements and requires that all dead bodies be systematically tested and buried in a safe and dignified manner. President Condé indicated that individuals who hide EVD-positive persons or persons not part of EVD response burial teams who transport dead bodies will face criminal prosecution for endangering others.

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 funding as of March 31, 2015; total includes estimated salaries, benefits, and funding from all CDC sources. USAID/OFDA funding to CDC of \$3 million and DoD funding to CDC of \$600,000 are not included in this total.

⁷ Total funding figures reflect committed U.S. Government (USG) humanitarian and development funding to date. This number represents a subset of the total USG effort to respond to the EVD outbreak in West Africa.

REGIONAL

- On March 26, the Eastern and Southern African Trade and Development Bank pledged \$50,000 for a capacity-building grant to the Africa Against Ebola Solidarity Trust (AAEST). In partnership with the African Union (A.U.), AAEST—a charitable trust established to raise funds for training, equipping, and deploying African health workers in the fight against EVD—is aiming to build long-term local health capacity. The funds will support the establishment of the African Centers for Disease Control and Prevention, which will strengthen the response to future public health emergencies in Africa.

Liberia

- EVD response actors continue to investigate possible contacts related to the most recent EVD case in Liberia, who died on March 27 at the Monrovia Medical Unit following approximately one week of treatment. As of March 30, the Government of Liberia (GoL) Incident Management System had not reported a new confirmed EVD case since March 20.
- According to CDC and WHO, detecting a resurgence of EVD in Liberia requires a continued focus on EVD response activities, including clinical diagnosis and testing of suspected or probable EVD cases; EVD surveillance at border crossings; community event-based surveillance; consistent testing of dead bodies for EVD; and health care worker surveillance. In addition, CDC and WHO are advocating for strengthening the national health system, including improving general disease surveillance and information systems, bolstering health care worker training and development, and expanding laboratory capacity.
- The GoL Ministry of Health (MoH)—in coordination with CDC, WHO, the UN Mission for Ebola Emergency Response (UNMEER), and the International Organization for Migration (IOM)—held a workshop from March 24 to 26 in Voinjama town, Lofa County, on EVD-specific cross-border management and community-based orientation and training, UNMEER reported. Approximately 170 participants from the GoL Bureau of Immigration and Naturalization, community leaders, health care workers from nearby areas, and local and international non-governmental organizations (NGOs) attended the workshop. Select personnel received focused training on the standard operating procedures regarding EVD cross-border screening and border crossing reporting procedures. The workshop also included a community-based surveillance component for community leaders on local monitoring. In addition, the workshop encompassed training in use and management of infection prevention and control (IPC) materials. As part of the workshop, UNMEER also facilitated a visit by CDC and WHO representatives to the Koudandou crossing point between Liberia and Guinea to assess the readiness and availability of IPC materials.

Sierra Leone

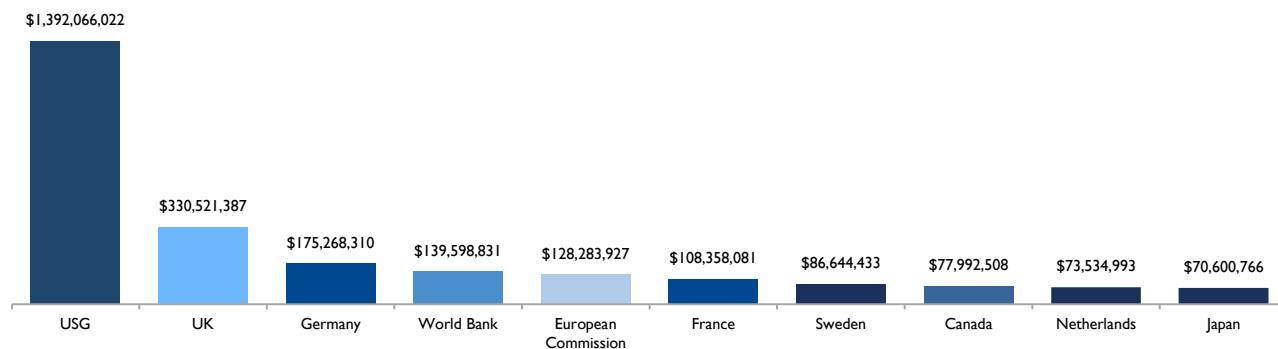
- The GoSL-directed three-day stay-at-home period on March 27–29 took place with general compliance by populations in Sierra Leone. USAID/OFDA partner IOM supported the campaign with more than 30 IOM-trained social mobilizers participating in the three-person teams conducting house-to-house distributions of soap, hygiene awareness activities, and identification of suspected EVD cases. A member of the USG Disaster Assistance Response Team (DART) accompanied IOM staff to areas of Freetown on March 27 to observe activities by the teams.
- In response to a NERC request to distribute food assistance during the stay-at-home period, the UN World Food Program (WFP) and other relief organizations delivered food in 14 areas of Freetown on March 27 and 28. The NERC reported some issues during distributions in two areas, including large crowds and looted food supplies. Populations received approximately 360 metric tons of food during the two-day distribution, according to WFP.
- In response to ongoing EVD transmission in Sierra Leone, the NERC is collaborating with partners to conduct comprehensive contact tracing and case investigation activities to mitigate the potential for additional cases. Despite intensified efforts in recent weeks, the GoSL reports that only 67 percent of the 33 new confirmed EVD cases reported March 16–22 were on existing contact lists—a decrease from the 84 percent of new confirmed cases on contact lists during the week of March 9. The NERC surveillance pillar members—CDC, WHO, UNMEER, the UN Population Fund, and other supporting organizations—are collaborating to conduct more thorough contact tracing as new confirmed EVD cases occur, thereby raising the percentage of new EVD cases that come from existing contact lists.

Guinea

- Between March 23 and 29, the GoG and WHO reported 57 new confirmed EVD cases, including six health care workers and 15 community deaths. Continued health care worker infections at non-EVD health facilities and EVD-positive community deaths remain of significant concern as unknown EVD transmission chains persist across western Guinea.
- Approximately 68 percent of new EVD cases originated from Conakry and Forécariah, and nearly all of the reported cases were in western Guinea; however, the GoG documented two new cases in Siguiroi Prefecture, which borders Mali, and three new cases in Fria Prefecture, representing the first confirmed EVD cases reported in each prefecture since February 1 and January 2, respectively.

2014 & 2015 TOTAL FUNDING FOR THE EBOLA RESPONSE*

PER DONOR



* Funding figures are as of March 31, 2015. All international figures are according to the UN Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking Service and based on international commitments during 2014 and to date in 2015, while USG figures are according to the USG and reflect USG commitments from FY 2014 and FY 2015, which began on October 1, 2013, and October 1, 2014, respectively.

CONTEXT

- EVD is a severe illness transmitted through direct contact with the blood, bodily 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. U.S. Chargé d’Affaires, a.i, Andrew Young declared a disaster in Mali on November 17.
- The USG deployed a field-based DART on August 5 and established a corresponding Response Management Team (RMT) based in Washington, D.C. The DART—including disaster response and medical experts from USAID and CDC—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.

USG HUMANITARIAN ASSISTANCE TO THE EVD OUTBREAK RESPONSE PROVIDED IN FY 2014 & 2015¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
REGIONAL			
A.U.	Health	Guinea, Liberia, Sierra Leone	\$10,000,000
CDC	Health	Guinea, Liberia, Sierra Leone	\$3,000,000
UN Children’s Fund (UNICEF)	Health	Guinea, Liberia, Sierra Leone	\$600,000
UN Humanitarian Air Service (UNHAS)	Logistics Support and Relief Commodities	Guinea, Liberia, Sierra Leone	\$250,000

OCHA	Humanitarian Coordination and Information Management	Guinea, Liberia, Sierra Leone	\$2,042,536
USAID/OFDA-Airlifted Relief Commodities	Logistics Support and Relief Commodities	Guinea, Liberia, Sierra Leone	\$19,026,877
Overseas Development Institute (ODI)	Humanitarian Studies, Analysis, or Applications	Guinea, Liberia, Sierra Leone	\$30,011
	Program Support		\$6,108,034
LIBERIA			
Action Contre la Faim (ACF)	Health, Protection, Water, Sanitation, and Hygiene (WASH)	Liberia	\$1,013,803
American Refugee Committee (ARC)	Health	Liberia	\$7,633,633
BRAC	Protection	Liberia	\$1,177,902
CARE	Health	Liberia	\$1,652,992
ChildFund	Health, Protection	Liberia	\$3,502,025
Concern	Health, Protection	Liberia	\$6,806,343
Catholic Relief Services (CRS)	Health	Liberia	\$960,447
Global Communities	Health	Liberia	\$20,768,606
GOAL	Health	Liberia	\$4,702,667
Heart to Heart International (HHI)	Health, Protection	Liberia	\$7,001,161
International Federation of Red Cross and Red Crescent Societies (IFRC)	Health	Liberia	\$1,000,000
International Medical Corps (IMC)	Health, Protection	Liberia	\$23,767,075
IOM	Health	Liberia	\$28,048,894
International Rescue Committee (IRC)	Health, Protection	Liberia	\$17,465,373
Jhpiego	Health	Liberia	\$2,814,287
John Snow Inc. (JSI)	Health	Liberia	\$3,164,720
Medical Teams International (MTI)	Health	Liberia	\$4,021,836
MENTOR Initiative	Health	Liberia	\$3,926,216
Mercy Corps	Health, Humanitarian Coordination and Information Management	Liberia	\$12,000,000
Partners in Health (PiH)	Health, Protection	Liberia	\$24,393,170
Plan USA	Health	Liberia	\$1,508,821
Project Concern International (PCI)	Health, Logistics Support and Relief Commodities, Protection	Liberia	\$11,354,485
Samaritan's Purse	Health, Logistics Support and Relief Commodities	Liberia	\$7,782,027
Save the Children/U.S. (SC/US)	Health, Protection, WASH	Liberia	\$8,276,263
U.S. Public Health Service	Health	Liberia	\$4,988,272
UNICEF	Health, Logistics Support and Relief Commodities, Protection, WASH	Liberia	\$54,260,411
Welthungerhilfe (WHH)	Health, WASH	Liberia	\$1,955,645

WFP	Logistics Support and Relief Commodities	Liberia	\$45,008,916
WHO	Logistics Support and Relief Commodities, Health, Protection	Liberia	\$35,000,000
SIERRA LEONE			
CRS	Health	Sierra Leone	\$548,619
Christian Aid	Health, Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities, Protection	Sierra Leone	\$945,690
GOAL	Health, WASH	Sierra Leone	\$2,005,780
IFRC	Health	Sierra Leone	\$13,000,000
IMC	Health, Protection	Sierra Leone	\$5,164,183
IOM	Health	Sierra Leone	\$3,469,410
IRC	Health	Sierra Leone	\$4,400,000
Medair	Health	Sierra Leone	\$2,858,272
Oxfam/Great Britain (Oxfam/GB)	Health	Sierra Leone	\$690,646
PiH	Health, Protection	Sierra Leone	\$7,881,461
UNICEF	Health, Protection, WASH	Sierra Leone	\$16,080,214
WFP	Humanitarian Coordination and Information Management, Logistics Support and Relief Commodities	Sierra Leone	\$10,000,000
WHO	Health	Sierra Leone	\$4,000,000
World Vision	Logistics Support and Relief Commodities	Sierra Leone	\$2,472,525
GUINEA			
CRS	Health	Guinea	\$4,041,621
ChildFund	Health, Protection	Guinea	\$1,500,000
French Red Cross (FRC)	Health	Guinea	\$4,505,445
Helen Keller International (HKI)	Health	Guinea	\$1,719,455
Internews	Risk Management Policy and Practice	Guinea	\$799,846
IOM	Logistics Support and Relief Commodities	Guinea	\$2,300,000
IFRC	Health	Guinea	\$1,999,552
IMC	Health	Guinea	\$14,854,760
Plan International (Plan)	Health, WASH	Guinea	\$2,111,738
Relief International (RI)	Health, Logistics Support and Relief Commodities	Guinea	\$4,000,000
SC/US	Health	Guinea	\$1,499,203
Terres Des Hommes	Health, Protection, WASH	Guinea	\$875,000
UNICEF	Protection, WASH	Guinea	\$6,000,400
WFP	Health, WASH	Guinea	\$2,500,000
MALI			

CRS	Health	Mali	\$954,122
IMC	Health	Mali	\$2,000,000
IOM	Health	Mali	\$2,033,983
UNICEF	Health	Mali	\$400,000
World Vision	Health	Mali	\$550,646
TOTAL USAID/OFDA ASSISTANCE TO EVD RESPONSE EFFORTS			\$515,176,019
USAID/FFP			
CRS	Food Vouchers	Guinea	\$1,325,443
Mercy Corps	Emergency Food Assistance	Liberia	\$8,970,000
PCI	Cash Transfers, Agricultural Input Vouchers	Liberia	\$8,030,564
Save the Children (SC)	Cash Transfers	Sierra Leone	\$4,384,010
WFP	WFP Regional Emergency Operation	Guinea, Liberia, Sierra Leone	\$34,769,529
TOTAL USAID/FFP ASSISTANCE TO EVD RESPONSE EFFORTS			\$57,479,546
USAID/GH			
Johns Hopkins Center for Communication Programs (JHCCP)	Health	Guinea, Liberia, Sierra Leone; neighboring at-risk countries	\$7,288,500
WHO	Health	Guinea, Liberia, Sierra Leone; neighboring at-risk countries	\$12,787,500
TOTAL USAID/GH ASSISTANCE TO EVD RESPONSE EFFORTS			\$20,076,000
USAID/Liberia			
GoL MoH	Health	Liberia	\$6,600,000
UNICEF	Education	Liberia	\$9,500,000
TOTAL USAID/Liberia ASSISTANCE TO EVD RESPONSE EFFORTS			\$16,100,000
USAID/Guinea			
Jhpiego	Health	Guinea	\$3,482,000
TOTAL USAID/Guinea ASSISTANCE TO EVD RESPONSE EFFORTS			\$3,482,000
DoD			
DoD		Liberia	\$360,255,000
TOTAL DoD ASSISTANCE TO EVD RESPONSE EFFORTS			\$360,255,000
CDC			
CDC	Health	West Africa	\$391,576,136
TOTAL CDC ASSISTANCE TO EVD RESPONSE EFFORTS			\$391,576,136
TOTAL USG ASSISTANCE TO EVD RESPONSE EFFORTS IN FY 2014 & 2015			\$1,364,144,701

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds.

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>