



WEST AFRICA – EBOLA OUTBREAK

FACT SHEET #42, FISCAL YEAR (FY) 2015

AUGUST 4, 2015

HIGHLIGHTS

- Weekly EVD caseload remains low in the region; WHO notes continuing potential for increase in new confirmed EVD cases
- GoL graduates all remaining known contacts; Liberia currently has no contacts of confirmed EVD cases
- Guinea's National Ebola Coordination Cell plans to offer EVD vaccine to estimated 1,080 remaining registered contacts

USG HUMANITARIAN ASSISTANCE TO EVD OUTBREAK RESPONSE

TO DATE IN FY 2014 & FY 2015

USAID/OFDA ¹	\$768,838,046
USAID/FFP ²	\$110,670,932
USAID/GH ³	\$20,076,000
USAID/Liberia	\$16,100,000
USAID/Guinea	\$3,482,000
DoD⁴	\$429,947,000
CDC ⁵	\$530,746,696 ^{6,7}
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\$1,879,860,674 USG ASSISTANCE TO THE WEST AFRICA EVD OUTBREAK RESPONSE⁸

KEY DEVELOPMENTS

- CDC Director Dr. Tom Frieden concluded a three-day visit to Guinea on August 2. During his visit, Dr. Frieden met with Government of Guinea (GoG), non-governmental organization (NGO), UN, and USG representatives and underscored the importance of conducting Ebola Virus Disease (EVD) diagnostic tests on corpses and maintaining vigilant surveillance and infection prevention and control (IPC) activities in Guinea.
- The Government of Sierra Leone (GoSL) Ministry of Health and Sanitation (MoHS) recently reported one additional new confirmed EVD case in Tonkolili District, raising the total recent confirmed EVD cases in Tonkolili to two. Additional high-risk contacts are under active surveillance.
- As of August 2, all 18 remaining contacts of confirmed EVD cases in Liberia—including 17 contacts in Montserrado County and one in Margibi County—have graduated from the 21-day monitoring period. The Government of Liberia (GoL) is currently not monitoring any contacts of confirmed EVD cases.

27,862 Number of Suspected, Probable, and Confirmed EVD Cases in Acutely Affected Countries*

NUMBERS AT

A GLANCE

WHO – August 4, 2015

11,281

Number of EVD-Related Deaths in Acutely Affected Countries* WHO – August 4, 2015

13,406 Number of EVD Cases in Sierra Leone* WHO – August 4, 2015

10,666 Number of EVD Cases in Liberia* WHO – August 4, 2015

3,784 Number of EVD Cases in Guinea* WHO – August 4, 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.

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 In FY 2014, CDC obligated \$17,439,000 to the West Africa EVD response, utilizing internal CDC operational resources. Of the \$513,307,696 that CDC has thus far obligated in FY 2015 as of August 4, 2015, approximately \$108,668,517 supports activities outside the United States and \$352,234,826 supports activities inside the U.S. The FY 2015 total includes actual obligations from all CDC sources, including estimated salaries and benefits through the Continuing Resolution (CR) period, which concluded in mid-December. The CR obligations, as well as internal CDC operational resources, used through the CR period are not available to be categorized as domestic or international.

⁷The CDC funding total does not include \$3 million from USAID/OFDA, \$600,000 from DoD, or CDC Foundation donations. ⁸Total funding figure includes committed U.S. Government (USG) humanitarian and development funding to date, as well as CDC's combined contribution to the international and domestic EVD response. This number represents a subset of the total USG effort to respond to the ongoing EVD outbreak.

REGIONAL

- In its most recent situation report covering the period from July 20–26, the UN World Health Organization (WHO) reported seven confirmed cases of EVD in West Africa, including four cases in Guinea and three cases in Sierra Leone. The weekly total represents the lowest weekly caseload in the region in more than one year. WHO reports that while the decline in cases is encouraging, more than 2,000 contacts remain within the 21-day monitoring period in the region, indicating a strong potential for a near-term increase in new confirmed EVD cases. For the third consecutive week, the majority—more than 71 percent—of new EVD cases originated in Conakry and Freetown, the capital cities of Guinea and Sierra Leone, respectively.
- Between July 20 and 26, one of the seven newly confirmed cases in the region originated from an unknown source of infection; the other six EVD-positive cases were found among known contacts. One of the cases—from Guinea—was a health care worker. As of July 26, the governments of Guinea, Liberia, and Sierra Leone had reported a total of 880 confirmed infections among health care workers, including more than 500 related deaths.
- From July 20–22, WHO hosted a regional meeting in Liberia's capital city of Monrovia on the ring IPC approach, which prioritizes assessments of health facilities in the areas surrounding the residences of confirmed EVD cases. The meeting—which included representatives of the governments of Guinea, Liberia, and Sierra Leone—recommended establishing shared IPC and water, sanitation, and hygiene (WASH) standards implemented by an independent regulatory body, creating a data collection and sharing platform, and developing mechanisms for inter-country collaboration on related issues, among others.

Liberia

- The GoL reported zero new EVD cases from July 31–August 2. As of August 2, all 18 remaining contacts of confirmed EVD cases in Liberia—including 17 contacts in Montserrado and one in Margibi—had graduated from the 21-day monitoring period. The GoL is not currently monitoring any contacts of confirmed EVD cases. CDC and USAID/OFDA partners—including Concern Worldwide, Global Communities, International Medical Corps (IMC), International Rescue Committee (IRC), Save the Children/U.S. (SC/US) and the UN Children's Fund (UNICEF)—continue to support EVD preparedness and risk mitigation activities in Margibi and Montserrado counties.
- Liberia's last four confirmed EVD cases were discharged as survivors from the ELWA 3 EVD treatment unit (ETU) on July 20 and 23. During the week ending August 2, the four recently released survivors participated in the WHO- and CDC-supported GoL men's health screening program. The four men provided samples for semen testing and received counseling; to date, the GoL, WHO, and CDC have enrolled 60 male EVD survivors in the program, which includes EVD testing and survivor counseling. Of those, 26 survivors have participated in follow-up visits, receiving test results and psychosocial counseling, as needed.
- On July 29, the GoL Incident Management System (IMS) relocated Liberia's national call center from the country's former emergency operations center (EOC), established in October 2014, to its permanent home at Liberia's new EOC. The new EOC, which became operational in early June 2015, was established adjacent to the GoL Ministry of Health in Montserrado to support its capacity to manage public health emergencies. The call center answers all EVD-related calls to the national 4455 hotline, and dispatch services in response to calls reporting EVD cases or dead bodies. Since August 2014, more than 150,000 people have used the 4455 hotline to report suspected cases of EVD.

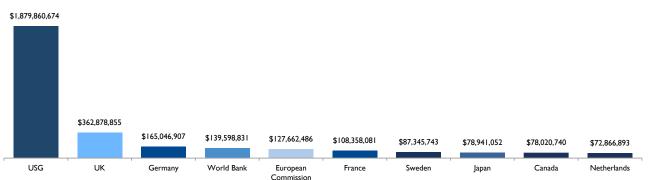
Sierra Leone

- As of August 3, the National Ebola Response Center (NERC) had reported that there are no missing contacts identified in connection to the one new confirmed EVD case in Sierra Leone between July 27 and August 2. The Government of Sierra Leone (GoSL) Ministry of Health and Sanitation (MoHS) recently reported one additional new confirmed EVD case in Tonkolili District and noted additional high-risk contacts are under active surveillance.
- Between August 3 and 4, USG Disaster Assistance Response Team (DART) staff attended a two-day WHO-sponsored conference on clinical care for EVD survivors in Sierra Leone's capital city of Freetown. Nearly 100 participants—
 including EVD survivors from Guinea, Liberia, and Sierra Leone and representatives from UN agencies and NGOs—
 attended the conference. In addition to providing a forum for EVD survivors to articulate the unique challenges faced

during recovery, a primary objective of the conference was to reach consensus on different aspects of managing clinical care for EVD survivors, particularly sexual and reproductive health issues. Conference participants expressed a need to develop guidance for the maternal and neonatal care of EVD survivors. During the conference, EVD survivors recounted several challenges faced during and after convalescence, including adverse psychological effects, community stigmatization and re-integration difficulties, diminished livelihoods, and persistent physical pain.

Guinea

- During the week ending August 2, the Government of Guinea (GoG) reported only one confirmed EVD case. The case—a registered contact from Conakry's Ratoma sub-prefecture—had been missing for approximately two weeks. Surveillance teams located the woman on July 31 and subsequently transferred her to Conakry's Nongo ETU.
- On August 3, the National Ebola Coordination Cell reported that all remaining contacts in Conakry's Matam subprefecture and Fria Prefecture had graduated from observation in recent days. As of August 2, 18 suspected and confirmed EVD patients were receiving care at ETUs throughout Guinea. Of these, the Nongo ETU was treating 13 EVD-positive patients and four suspected EVD cases, while the ETU in Forécariah was caring for one suspected EVD case.
- On August 3, the National Ebola Coordination Cell announced plans to offer the EVD vaccine to an estimated 1,080 registered contacts remaining in Guinea.
- CDC Director Dr. Tom Frieden concluded a three-day visit to Guinea on August 2. During his visit, Dr. Frieden met with GoG, NGO, UN, and USG representatives to discuss EVD response priorities and long-term strategies to reinforce Guinea's health care system and support EVD survivors. Dr. Frieden also conducted visits to the Nongo ETU, the U.S. Defense Threat Reduction Agency diagnostic laboratory, one of Conakry's community-level EOCs, and Conakry's health directorate. While in Guinea, the CDC Director stressed the importance of maintaining vigilant surveillance and IPC activities.
- On July 29, the DART accompanied staff from USAID/OFDA partner UNICEF to observe social mobilization
 activities in Conakry's Kaloum, Matam, and Ratoma sub-prefectures. The DART's visit to Matam included a briefing by
 the sub-prefecture's health directorate and coordination cell on new strategies employed during the *micro-cerclage*, or defacto quarantine. DART staff also visited Conakry's primary fishing port, Matam's main taxi park, as well as
 Boussoura—one of the two neighborhoods in Matam that is currently under quarantine.
- With USAID/OFDA support, the International Organization for Migration (IOM) continues efforts to equip and improve the capacity of prefectural EOCs (PEOCs) throughout Guinea. On July 10, IOM began rehabilitation work—including infrastructure renovation and the procurement and installation of office supplies, internet, and a power supply—on three new PEOCs in Boké, Fria, and Télimélé prefectures. Since the start of the EVD outbreak, IOM has equipped and renovated 25 emergency operation centers (EOCs) countrywide, including five community-level EOCs in Conakry.



2014 & 2015 TOTAL FUNDING FOR THE EBOLA RESPONSE*

* Funding figures are as of August 4, 2015. All international figures are according to OCHA's 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 & 2015

IMPLEMENTING PARTNER	ΑCTIVITY	LOCATION	AMOUNT
	USAID/OFDA ²		
	REGIONAL		
African Union (AU)	Health	Guinea, Liberia, Sierra Leone	\$10,000,000
CDC	Health	Guinea, Liberia, Sierra Leone	\$3,000,000
iMMAP	Humanitarian Coordination and Information Management	Guinea, Guinea-Bissau, Liberia, Mali, Sierra Leone	\$385,990
UNICEF	Health, Protection	Guinea, Liberia, Sierra Leone	\$1,100,000
UN Humanitarian Air Service (UNHAS)	Logistics Support and Relief Commodities	Guinea, Liberia, Sierra Leone	\$250,000
ОСНА	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	Humanitarian Studies, Analysis, or Applications	Guinea, Liberia, Sierra Leone	\$30,011
Tufts University	Humanitarian Studies, Analysis, or Applications	Guinea, Liberia, Sierra Leone	\$558,504
	Program Support		\$7,220,642
	LIBERIA		
Action Contre la Faim (ACF)	Health, Protection, Water, Sanitation, and Hygiene (WASH)	Liberia	\$1,013,803
American Refugee Committee (ARC)	Health	Liberia	\$9,083,178
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	\$32,076,365
GOAL	Health	Liberia	\$7,281,500
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	\$34,619,248
IOM	Health, Protection, WASH	Liberia	\$39,021,886
International Rescue Committee (IRC)	Health, Protection	Liberia	\$22,619,332
Jhpiego	Health	Liberia	\$2,814,287
John Snow Inc. (JSI)	Health	Liberia	\$7,233,653
Medical Teams International (MTI)	Health	Liberia	\$4,702,901
MENTOR Initiative	Health	Liberia	\$3,926,216
Mercy Corps	Health, Humanitarian Coordination and Information Management	Liberia	\$24,000,000
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
USAID/OFDA-Supported Non- Medical ETU Management Contracts	Health	Liberia	\$86,249,157
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	\$57,277,108
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, WASH	Sierra Leone	\$12,936,976
IOM	Health	Sierra Leone	\$5,679,410

IRC	Health	Sierra Leone	\$17,792,347
Medair	Health	Sierra Leone	\$5,349,216
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	\$20,000,000
WHO	Health	Sierra Leone	\$12,000,000
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
HC3	Health	Guinea	\$1,000,000
Helen Keller International (HKI)	Health	Guinea	\$1,719,455
Internews	Risk Management Policy and Practice	Guinea	\$1,999,846
IOM	Logistics Support and Relief Commodities	Guinea	\$12,767,220
IFRC	Health	Guinea	\$5,999,552
IMC	Health	Guinea	\$14,854,760
Jhpiego	Health	Guinea	\$2,400,000
Plan International	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	\$10,555,447
WFP	Health, WASH	Guinea	\$8,500,000
WHO	Health	Guinea	\$19,626,849
	GUINEA-BISSAU		
IOM	Health	Guinea-Bissau	\$407,117
	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 ASS	ISTANCE TO EVD RESPONSE EFFORTS		\$768,838,046
	USAID/FFP		-
ACDI/VOCA	Cash Transfers, Agricultural Input Vouchers	Liberia	\$9,000,000
ACDI/VOCA	Cash Transfers, Agricultural Input Vouchers	Sierra Leone	\$9,000,000
CRS	Food Vouchers	Guinea	\$1,325,443
FEWS NET	Food Security, Market, and Livelihood Monitoring, Analysis and Reporting	Guinea, Liberia, Sierra Leone	\$2,495,348
Mercy Corps	Cash Transfers, Agricultural Input Vouchers	Liberia	\$8,970,000
PCI	Cash Transfers, Agricultural Input Vouchers, Cash-for-Work	Liberia	\$8,030,564
UNICEF	In-Kind Food Assistance	Guinea	\$3,583,698
UNICEF	In-Kind Food Assistance	Liberia	\$1,119,078
UNICEF	In-Kind Food Assistance	Sierra Leone	\$1,720,733
Save the Children (SC)	Cash Transfers	Sierra Leone	\$4,384,010
WFP	In-Kind Food Assistance to EVD-Affected Ivorian Refugees: Title II and Local and Regional Procurement	Liberia	\$8,921,600
WFP	Assistance for EVD-Affected Ivorian Returnees from Liberia: Cash Transfers, Local and Regional Procurement	Cote d'Ivoire	\$3,000,000
WFP	WFP School Feeding Operation	Guinea	\$7,182,907
WFP	WFP School Feeding Operation	Liberia	\$7,370,323
WFP	WFP Regional Emergency Operation	Guinea	\$8,772,002
WFP	WFP Regional Emergency Operation	Liberia	\$12,633,568
WFP	WFP Regional Emergency Operation	Sierra Leone	\$13,161,658

TOTAL USAID/FFP ASSISTANCE TO EVD RESPONSE EFFORTS

USAID/GH Johns Hopkins Center for Guinea, Liberia, Sierra Leone; \$7,288,500 Health Communication Programs (JHCCP) neighboring at-risk countries Guinea, Liberia, Sierra Leone; neighboring at-risk countries WHO \$12,787,500 Health 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** \$3,482,000 Jhpiego Health Guinea **TOTAL USAID/Guinea ASSISTANCE TO EVD RESPONSE EFFORTS** \$3,482,000

\$110,670,932

MENTING PARTNER	ΑCΤΙVITY	LOCATION	AM
	DoD		
DoD		Liberia	\$429,947,000
TOTAL DoD ASSISTANC	E TO EVD RESPONSE EFFORTS		\$429,947,000
	CDC		
CDC	Health	West Africa and USA	\$530,746,696
TOTAL CDC ASSISTANC	CE TO EVD RESPONSE EFFORTS		\$530,746,696
TOTAL USG ASSISTANC	E TO EVD RESPONSE EFFORTS IN FY 20) 4 & 20 5	\$1,879,860,674

¹Year 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:

IMF

- USAID 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.