

WEST AFRICA – EBOLA OUTBREAK

FACT SHEET #39, FISCAL YEAR (FY) 2015

JULY 14, 2015

NUMBERS AT A GLANCE

27,642

Number of Suspected, Probable, and Confirmed Ebola Virus Disease (EVD) Cases in Acutely Affected Countries*

UN World Health Organization (WHO) – July 14, 2015

11,261

Number of EVD-Related Deaths in Acutely Affected Countries*

WHO – July 14, 2015

13,209

Number of EVD Cases in Sierra Leone*

WHO – July 14, 2015

10,673

Number of EVD Cases in Liberia*

WHO – July 14, 2015

3,760

Number of EVD Cases in Guinea*

WHO – July 14, 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

- The Government of Liberia (GoL) reports three additional EVD cases linked to the Margibi County cluster, including one in Liberia's Montserrado County; new confirmed case total reaches six
- Recently extended Operation Northern Push strengthens contact tracing and EVD prevention activities in Sierra Leone
- The Government of Guinea (GoG) and EVD response actors investigate source of infection for EVD-positive nurse in Forécariah Prefecture, the area's first confirmed case among health care workers since March

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

USAID/OFDA ¹	\$749,482,159
USAID/FFP ²	\$110,670,932
USAID/GH ³	\$20,076,000
USAID/Liberia	\$16,100,000
USAID/Guinea	\$3,482,000
DoD ⁴	\$416,950,000
CDC ⁵	\$496,943,768 ^{6,7}
\$1,813,704,859	
USG ASSISTANCE TO THE WEST AFRICA EVD OUTBREAK RESPONSE ⁸	

KEY DEVELOPMENTS

- From July 7–12, the GoL confirmed three additional EVD cases, including two in Margibi and one in Montserrado, marking the spread of Liberia's recent outbreak to an additional county. The individual in Montserrado—a known contact under precautionary observation—died on July 12, shortly after being transferred to the GoL-managed ELWA 3 EVD treatment unit (ETU), where the four remaining patients are receiving treatment.
- While active EVD transmission continues in Guinea and Sierra Leone, WHO reports that only 17 percent and 11 percent of cases, respectively, resulted from unknown sources of transmission during the week ending July 5.
- Effective August 1, WHO plans to assume technical leadership of Guinea's EVD response, as the UN Mission for Ebola Emergency Response (UNMEER) scales down operations in the country. The UN Office for the Coordination of Humanitarian Affairs (OCHA) plans to increase staffing levels in Guinea during the post-UNMEER phase.

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 funded its West Africa EVD response with CDC's internal operational resources. Of the \$479,504,768 that CDC has thus far obligated in FY 2015, approximately \$79,090,405 supports activities outside the United States and \$347,797,021 supports activities inside the U.S. This amount includes some estimated salaries and benefits during the Continuing Resolution (CR) period. All other CDC obligations occurred during the CR and are not available to be categorized as domestic or international obligations.

⁷ CDC funding as of July 14, 2015; total includes estimated salaries, benefits, from the CR period and funding from all CDC sources. At this time, FY 2015 funding includes actual obligations; estimates of salaries and benefits have been excluded. The CDC funding total does not include \$3 million from USAID/OFDA, \$600,000 from DoD, or CDC Foundation donations.

⁸ Total 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

- Between June 29 and July 5, WHO reported 30 confirmed cases of EVD in West Africa, including 18 cases in Guinea, nine cases in Sierra Leone, and three cases in Liberia. During the same period, five cases—or approximately 17 percent of newly confirmed cases—resulted from unknown sources of infection, indicating improvements in case investigations and understanding of chains of transmission, according to WHO.
- In partnership with the African Development Bank, the African Union (AU), the E.U., and the World Bank, the UN hosted an International Ebola Recovery Conference in New York from July 9–10. Following technical consultations for recovery strategies, the international community pledged more than \$5 billion on July 10 to support longterm recovery efforts in Guinea, Liberia, and Sierra Leone.
- Through more than \$6.4 million in assistance, USAID/FFP is supporting UNICEF’s efforts to prevent and treat severe and moderate acute malnutrition among EVD-affected children in Guinea, Liberia, and Sierra Leone. UNICEF will conduct screenings, referral, and treatment of severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) among children in communities throughout the three EVD-affected countries. In addition, the UN agency plans to treat approximately 50,000 children younger than five years of age affected by SAM and MAM with ready-to-use therapeutic and supplementary food and nutritional supplements.

Liberia

- On July 12, the GoL Incident Management System (IMS) confirmed an additional EVD case, the sixth in the country since June 29. The latest confirmed EVD patient was on an existing contact list but resided in Montserrado, marking the spread of the current cluster from Margibi to a second county. The patient was admitted to the ELWA 3 ETU on July 12 and died there the same day. Of the six cases associated with Liberia’s current EVD cluster, two patients have died and four are receiving treatment at Montserrado’s ELWA 3 ETU. WHO reports that as of July 10, EVD response actors are monitoring 149 contacts, including the four patients receiving treatment at ELWA 3 ETU. Counties in Liberia remain on alert and are reporting suspected EVD cases to the GoL IMS.
- According to WHO, laboratory tests on virus samples from the first-detected Margibi case indicate that the strain appears to be genetically similar to those that affected the area more than six months ago, indicating that the current outbreak likely did not result from an animal source, nor from infections in neighboring Guinea or Sierra Leone. Genetic sequencing on samples from subsequent cases is underway.
- USAID/OFDA, CDC, and other EVD response actors in Margibi and Montserrado continue to support response efforts, including contact tracing, case investigation, safe burials, social mobilization campaigns, and surveillance and monitoring. CDC field epidemiologists remain actively engaged in case investigation and contact tracing, while also providing training for Montserrado County Health Team and WHO-supported groups of contact tracers and case investigators. In addition, USAID/OFDA partner Global Communities resupplied the two burial teams in Margibi with chlorine sprayers and transferred an additional team to the ELWA 3 ETU in Montserrado. The non-governmental organization also provided food assistance to health care workers under observation in Margibi and continues to support health-monitoring checkpoints along the border counties.
- USAID/OFDA partner IOM continues to provide EVD response assistance—including surveillance, coordination, and capacity building; psychosocial services and survivor reintegration; and social mobilization support—to multiple affected counties in Liberia. Between July 3 and 10, IOM supported official and unofficial county and national border crossing points and county checkpoints, delivered triage materials, and held refresher infection prevention and control trainings. In response to the recent cluster of new confirmed EVD cases in Margibi and Montserrado, IOM is working to scale up checkpoint support and social mobilization activities in and near the affected counties.

Sierra Leone

- Between July 6 and 12, the Government of Sierra Leone (GoSL) Ministry of Health and Sanitation (MoHS) confirmed 14 new EVD cases, including 10 in Western Area Urban District, three in Kambia District, and one in Port Loko District—

which had not reported a new EVD case since July 2. Ten of the EVD cases came from known contacts, while four cases resulted from an unknown contact.

- Operation Northern Push—which the GoSL recently extended beyond its initial 21-day campaign period ending July 7—has expanded social mobilization activities, harnessed community support, improved contact tracing, and effectively monitored the prevention of EVD transmission from Guinea, according to response actors. For example, the National Ebola Response Center reported that in Kambia, EVD response actors have strengthened case finding efforts, and in Port Loko, authorities reported on July 8 that increased contract tracing has helped identify a number of missing contacts. In addition, social mobilization messaging across Kambia and Port Loko continues to dispel rumors surrounding EVD response activities, encourage communities to report suspected cases, and promote good EVD prevention practices.
- With support from USAID/OFDA, Medair is strengthening peripheral health units (PHUs) in Sierra Leone’s Western Area. The organization completed baseline assessments at five PHUs regarding capacity, services offered, and physical structures. Medair also assisted in drafting work plans specific to the PHUs and placing orders for essential supplies. In addition, the organization liaised with the GoSL MoHS to coordinate official Integrated Management of Neonatal and Childhood Illnesses training for 14 PHU staff members.
- USAID/FFP continues to provide agricultural and nutritional assistance to EVD-affected populations throughout Sierra Leone. Together with PHUs and mother care groups, USAID/FFP partners ACIDI/VOCA and IMC are training mothers to screen their children using the mid-upper arm circumference method. The at-home screenings help to promote more timely detection, referral, and treatment of moderate and severe acute malnutrition in EVD-affected communities. In addition, ACIDI/VOCA has provided seeds to approximately 25,000 farmers to support agricultural cultivation and production during the 2015/2016 crop cycle, thus assisting households to recover from the negative impact of EVD on agricultural production and incomes.

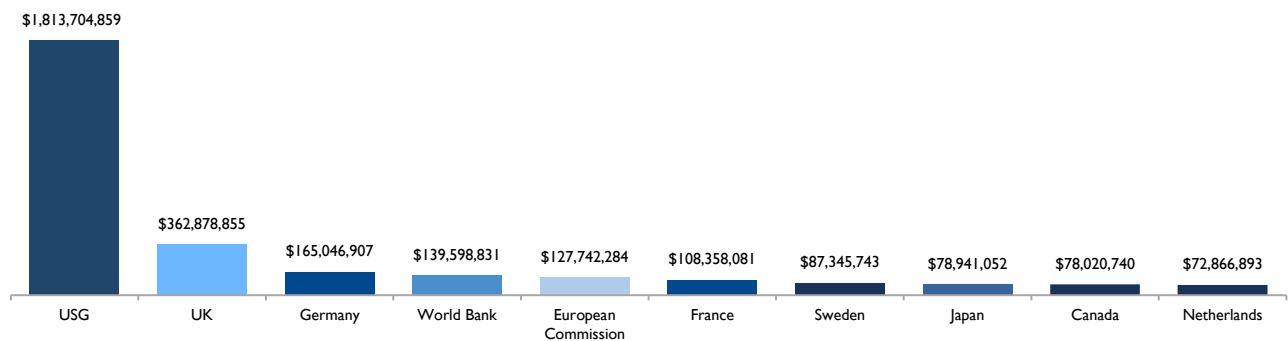
Guinea

- The GoG reported 13 new confirmed EVD cases during the week ending July 12, a nearly 28 percent decrease from the previous week. The recently confirmed cases include nine cases from Guinea’s capital city of Conakry, three cases from Forécariah Prefecture, and one case from Fria Prefecture. According to prefectural authorities, the new case reported in Fria—a known contact from Kamsar sub-prefecture located in Boké Prefecture—evaded contact tracing teams in Kamsar and fled to Fria, where the individual was later discovered. On July 11, EVD response actors transferred the case to Boké’s newly opened ETU for treatment.
- On July 10, the GoG reported that all remaining contacts of the last confirmed case in Dubréka Prefecture had surpassed the 21-day active monitoring period. Four prefectures—Boké, Conakry, Forécariah, and Fria—continue to have active chains of transmission.
- Prefectural authorities in Forécariah reported on July 10 that a French Red Cross (FRC) nurse had tested positive for EVD. According to FRC, the nurse—who was not a known contact—is receiving care at the Forécariah ETU, and an investigation to determine the source of infection remains ongoing. Since the outbreak began, prefectural authorities have reported 12 confirmed EVD cases, including two community deaths, among health care workers in Forécariah; the last confirmed health care worker infection in the prefecture occurred in March. As of July 13, the National Ebola Coordination Cell reported that 207 health care workers across Guinea had contracted EVD since the start of the EVD outbreak in the country.
- WHO plans to assume technical leadership of the EVD response in Guinea by August 1, as UNMEER scales down its national operations. A small contingent of UNMEER staff, including the Ebola Crisis Manager for Guinea, will remain in-country to support regional coordination and ongoing EVD response efforts under WHO authority. OCHA plans to increase staffing levels in Guinea to ensure a strong presence in the field and sufficient staff levels to support its expanded coordination function during the post-UNMEER phase.
- USG Disaster Assistance Response Team (DART) staff traveled to Guinea’s Kankan Region from July 2–3 to monitor ongoing social mobilization and communication activities implemented by USAID/OFDA partners Helen Keller International (HKI) and Save the Children. During the visit, the DART met with prefectural and regional authorities, attended a HKI training on EVD preparedness measures and conducted site visits to three public health centers and

Kankan’s regional hospital. As of July 3, HKI, in support of local authorities, had begun training 30 supervisors from three of the region’s five prefectures to coordinate the local EVD response efforts and oversee community agents operating in the area.

- From July 3–5, DART and CDC staff traveled to Boké to engage with representatives of the Center for International Studies and Cooperation (CECI) and UN Children’s Fund (UNICEF) on strengthening social mobilization activities in the prefecture. During the visit, the joint USAID/OFDA–CDC team also conducted an informal assessment on community-level EVD awareness and social mobilization activities in Boké’s Port Kamsar city and Binari Island. Following the visit, the DART presented key findings regarding gaps in community knowledge of EVD transmission from the informal assessment during a meeting of the National Ebola Coordination Cell’s communication unit and urged response actors to ensure that EVD messaging is context-specific and achieves measurable results.

2014 & 2015 TOTAL FUNDING FOR THE EBOLA RESPONSE* PER DONOR



* Funding figures are as of July 14, 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 & 2015¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
REGIONAL			
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
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	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		\$7,172,469
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	\$32,076,365
GOAL	Health	Liberia	\$4,702,667
Heart to Heart International (HHI)	Health, Protection	Liberia	\$7,001,161
IFRC	Health	Liberia	\$1,000,000
IMC	Health, Protection	Liberia	\$34,619,248
IOM	Health, Protection, WASH	Liberia	\$39,021,886
International Rescue Committee (IRC)	Health, Protection	Liberia	\$18,443,770
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
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
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	\$9,688,573
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
FRC	Health	Guinea	\$4,505,445

HC3	Health	Guinea	\$1,000,000
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	\$2,999,552
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 ASSISTANCE TO EVD RESPONSE EFFORTS			\$749,482,159
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/FPF ASSISTANCE TO EVD RESPONSE EFFORTS			\$110,670,932
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 Ministry of Health	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	\$416,950,000
TOTAL DoD ASSISTANCE TO EVD RESPONSE EFFORTS			\$416,950,000
CDC			
CDC	Health	West Africa and USA	\$496,943,768
TOTAL CDC ASSISTANCE TO EVD RESPONSE EFFORTS			\$496,943,768
TOTAL USG ASSISTANCE TO EVD RESPONSE EFFORTS IN FY 2014 & 2015			\$1,813,704,859

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>