

WEST AFRICA – EBOLA OUTBREAK

FACT SHEET #40, FISCAL YEAR (FY) 2015

JULY 21, 2015

NUMBERS AT A GLANCE

27,706

Number of Suspected, Probable, and Confirmed Ebola Virus Disease (EVD) Cases in Acutely Affected Countries*
UN World Health Organization (WHO) – July 21, 2015

11,269

Number of EVD-Related Deaths in Acutely Affected Countries*
WHO – July 21, 2015

13,250

Number of EVD Cases in Sierra Leone*
WHO – July 21, 2015

10,673

Number of EVD Cases in Liberia*
WHO – July 21, 2015

3,783

Number of EVD Cases in Guinea*
WHO – July 21, 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 no new EVD cases since July 12, discharges two of the four remaining EVD patients from Montserrado County EVD treatment unit (ETU)
- During the week ending July 19, the Government of Sierra Leone (GoSL) confirms three new EVD cases, a 79 percent decrease from the previous week
- From July 13–19, the Government of Guinea (GoG) reports 22 new EVD cases, a 70 percent increase from the previous week

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

USAID/OFDA ¹	\$762,033,158
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	\$520,507,229 ^{6,7}
\$1,849,819,319	
USG ASSISTANCE TO THE WEST AFRICA EVD OUTBREAK RESPONSE ⁸	

KEY DEVELOPMENTS

- From July 13–20, the GoL reported no new EVD cases, maintaining the case total from Liberia's recent cluster at six. Of these six cases, two patients have died, two are convalescing at Montserrado's ELWA 3 ETU, and two were discharged as EVD survivors from ELWA 3 on July 20. The GoL was following 74 contacts of confirmed EVD cases, including 57 in Margibi County and 17 in Montserrado, as of July 19.
- In recent weeks, EVD response actors in Guinea have expressed growing concern regarding the number of missing contacts in hotspot areas, particularly due to reports of contacts evading surveillance by traveling to other prefectures. According to WHO, the mobility of high-risk contacts remains a significant barrier to ending EVD transmission in the country.
- Between July 13 and 19, the GoSL reported three new EVD-positive cases, including two in Western Area Urban District and one in Port Loko District. All three cases—including a health care worker in Western Area Urban—resulted from unknown sources of transmission.

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 \$503,068,229 that CDC has thus far obligated in FY 2015, approximately \$101,366,991 supports activities outside the United States and \$349,091,229 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 20, 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

- In its most recent situation report covering the period from July 6–12, WHO reported 30 confirmed cases of EVD in West Africa, including 14 cases in Sierra Leone, 13 cases in Guinea, and three cases in Liberia. While the total remains unchanged from the previous week, transmission patterns have shifted, with Sierra Leone and Guinea reporting the majority of cases from their capital cities for the first time in several months. During this period, only one case—representing approximately 3 percent of newly confirmed cases—resulted from unknown sources of infection, indicating improvements in case investigations and response actors’ understanding of transmission chains, according to WHO. However, seven cases—approximately 23 percent—were identified as EVD-positive only after routine post-mortem testing, indicating that contact tracing remains a challenge across the region.
- Border surveillance between affected countries remains a key component of the EVD response, the UN reports. In June, local authorities and humanitarian organizations distributed approximately 20,000 informational posters at border crossing points between Guinea, Liberia, and Sierra Leone to reinforce community sensitization efforts.

Liberia

- The GoL reported no new EVD cases from July 13–20, holding the recent outbreak’s total number of confirmed cases at six, including five cases from Margibi and one case from Montserrado. Of these six cases, two patients have died, two are convalescing at the ELWA 3 ETU in Montserrado, and two were discharged as EVD survivors from ELWA 3 during a July 20 ceremony. Seven individuals—including the two confirmed EVD cases and five suspected cases—remained in ETUs as of July 20.
- As of July 19, the GoL was following 74 contacts of confirmed EVD cases, including 57 in Margibi and 17 in Montserrado. More than 70 contacts from Margibi graduated from the contact monitoring list in recent days without developing symptoms. CDC and USAID/OFDA partners continue to assist case investigation and contact tracing in both Margibi and Montserrado, including re-training of contact tracers and supervision of monitoring activities. On July 13 and 14, the Montserrado county health team (CHT), CDC, and WHO supported a surveillance and contact tracing training for approximately 60 district health and surveillance officers and data managers.
- Response priorities for the GoL Incident Management System (IMS) and Montserrado CHT include ensuring adequate human resources and operations support, as well as continuing active case finding, community engagement, and psychosocial support to EVD-affected populations. The IMS is working with partners to strengthen EVD response activities, including resuming the GoL policy of universal swabbing and safe burials. A USAID/OFDA-supported non-governmental organization (NGO) consortium led by the International Rescue Committee (IRC) continues to assist response efforts in Montserrado. USAID/OFDA recently supported IRC with nearly \$4.1 million in additional assistance for consortium activities—including enhancing surveillance and infection prevention and control (IPC) protocols—in the county.
- With assistance from CDC and WHO, a GoL men’s health and EVD screening program began enrolling EVD survivors on July 7 at the Redemption Hospital clinic site in Liberia’s capital city of Monrovia. The program provides male EVD survivors with semen testing and related counseling to increase awareness of potential sexual transmission of EVD and knowledge of how to protect sexual partners. On July 13, the program activated its first mobile team to collect samples; program participants are tested every four weeks until they produce two consecutive EVD-negative samples.

Sierra Leone

- Between July 13 and 19, the GoSL Ministry of Health and Sanitation (MoHS) confirmed three new EVD cases, including two in Western Area Urban and one in Port Loko. All three cases resulted from an unknown contact with the sources of transmission under investigation as of July 20. Kambia District has not reported a new EVD case since July 10.
- One of Western Area Urban’s cases, confirmed on July 14, was a health care worker. The patient had undergone a 21-day quarantine at the voluntary quarantine facility before being released and contracting EVD from an unknown transmission source.
- On July 20, USG Disaster Assistance Response Team (DART) and CDC staff traveled to Port Loko with high-level representatives from the National Ebola Response Center (NERC), as well as staff from NGOs and UN agencies.

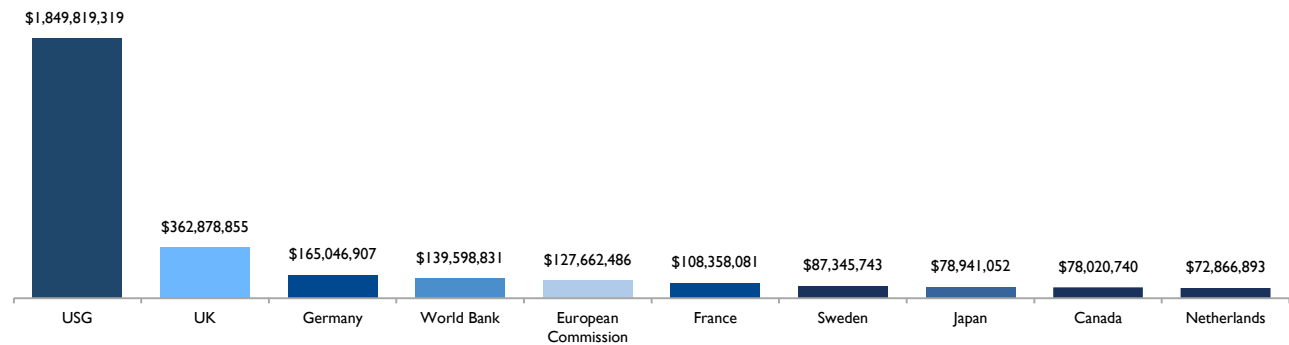
During the visit, the Port Loko District Emergency Response Center (DERC) reported successful efforts under the ongoing Operation Northern Push surge response, including improved IPC in Port Loko health facilities as EVD response partners coordinate IPC and water, sanitation, and hygiene (WASH) interventions. The DERC also affirmed support for the Paramount Chief-led and community-owned local response, including the establishment of a sub-office that, alongside multi-disciplinary teams, helps facilitate EVD-related rapid responses. In addition, the DERC continues to strengthen surveillance efforts and community engagement.

- USAID/OFDA partner IOM continues to support the ring IPC approach in peripheral health units (PHUs) around Freetown's Magazine Wharf community. The ring IPC approach—undertaken in collaboration with NGOs Concern, GOAL, and Save the Children, alongside assistance from CDC and the UK Department for International Development (DFID)—provides intensive IPC support to targeted PHUs to help break ongoing chains of transmission. The strategy targets health facilities based on known health care worker exposure to EVD, including health care facilities near the site that treated the patient and those in close proximity to the patient's home. IOM reports that, in recent weeks, ongoing and intensive transmission of new EVD cases in Magazine Wharf resulted in a total of 15 confirmed EVD cases and 22 people receiving treatment or under observation in the area's holding center. As of July 20, surveillance and contact tracing teams were monitoring nearly 370 contacts in Western Area Urban.

Guinea

- During the week ending July 19, the GoG reported 22 new EVD cases, including 13 from Guinea's capital city of Conakry, seven from Forécariah Prefecture, and two from Coyah Prefecture. The total represents an approximately 70 percent increase from the previous week.
- From July 16–18, prefectural authorities reported 10 new cases—including two health care workers—in Conakry's Ratoma sub-prefecture. As of July 19, authorities in Conakry had identified 23 confirmed EVD cases in Ratoma and Matam sub-prefectures during the previous 21 days.
- As of July 19, the GoG and WHO reported that ETUs across Guinea were treating 36 suspected and confirmed EVD patients, including 21 EVD-positive patients at Conakry's Nongo ETU. The Nongo ETU—which opened on July 5—currently has the capacity for 48 suspected and confirmed EVD patients, according to the GoG and WHO.
- In recent weeks, EVD response actors have expressed growing concern regarding the number of missing contacts in hotspot areas, particularly due to reports of contacts evading surveillance by traveling to other prefectures. As of July 14, the National Ebola Coordination Cell reported that 33 contacts—of whom 16 were considered high-risk due to their recent exposure to a confirmed EVD case—remained missing. The high-risk contacts include 10 registered in Boké, four in Forécariah, and two in Conakry. According to WHO, the mobility of high-risk contacts remains a significant barrier to ending EVD transmission in Guinea.
- On July 20, the GoG launched a *micro-cerclage*—or de-facto quarantine—targeting approximately 90 households containing high-risk contacts in hotspot areas of Conakry's Matam and Ratoma. The *micro-cerclage* seeks to identify new suspected cases and reduce the risk of further EVD transmission through activities including enhanced monitoring and surveillance, door-to-door hygiene promotion activities, the distribution of soap and other sanitation supplies, the deployment of four mobile health care teams, the provision of free health care and psychosocial services, and social mobilization activities. Targeted households must remain at home until their respective 21-day monitoring periods elapse, but will receive distributions of food and cash to offset the economic impact on families. According to the UN World Food Program (WFP), the organization distributed 100 kilograms (kg) of rice, 50 kg of high-nutrient corn soy blend, and five liters of cooking oil to each of the targeted households during the July 20 launch.
- DART staff in Guinea, in collaboration with OCHA, recently launched a pilot online repository to collect and share data on ongoing and planned EVD response activities related to IPC. The online tool will enable the GoG and EVD response actors to visualize real-time information related to IPC interventions, including various performance indicators, to ensure accountability and effective response coordination.

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



* Funding figures are as of July 21, 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			
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
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		\$7,173,168
LIBERIA			
Action Contre la Faim (ACF)	Health, Protection, 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
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	\$15,063,311
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 ASSISTANCE TO EVD RESPONSE EFFORTS			\$762,033,158
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			\$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 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	\$416,950,000
TOTAL DoD ASSISTANCE TO EVD RESPONSE EFFORTS			\$416,950,000
CDC			
CDC	Health	West Africa and USA	\$520,507,229
TOTAL CDC ASSISTANCE TO EVD RESPONSE EFFORTS			\$520,507,229
TOTAL USG ASSISTANCE TO EVD RESPONSE EFFORTS IN FY 2014 & 2015			\$1,849,819,319

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>