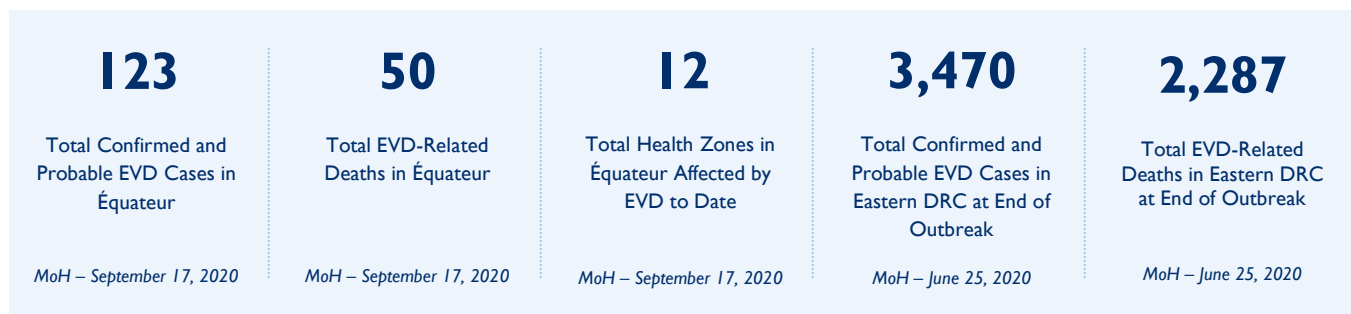


# Democratic Republic of the Congo – Ebola Outbreaks

SEPTEMBER 18, 2020

## SITUATION AT A GLANCE



- New EVD cases along DRC–RoC border heighten the risk of cross-border spread, while response actors continue to raise concerns regarding increased community deaths and low therapeutic treatment use.
- Ambassador Hammer leads a joint donor delegation, accompanied by DART members and USAID Mission staff, to Équateur to assess the response to the province’s ongoing EVD outbreak.
- USG announces more than \$15 million in additional humanitarian funding to support health activities in response to the EVD outbreak in Équateur.



<b>TOTAL USAID HUMANITARIAN FUNDING</b> For the DRC Ebola Outbreaks Response in FY 2020	USAID/BHA <sup>1,2</sup>	\$152,475,892
	USAID/GH in Neighboring Countries <sup>3</sup>	\$2,500,000
<b>Total</b>		<b>\$154,975,892<sup>4</sup></b>

*For complete funding breakdown with partners, see funding chart on page 6*

<sup>1</sup>USAID’s Bureau for Humanitarian Assistance (USAID/BHA)  
<sup>2</sup>Total USAID/BHA funding includes non-food humanitarian assistance from the former Office of U.S. Foreign Disaster Assistance.  
<sup>3</sup>USAID’s Bureau for Global Health (USAID/GH)  
<sup>4</sup>Some USAID funding intended for EVD-related programs in eastern DRC is supporting EVD response activities in Équateur.

## KEY DEVELOPMENTS

### **EVD Cases in Health Zones Bordering RoC Heighten Regional Spread Risk**

The Ebola virus disease (EVD) outbreak in Équateur Province, northwestern Democratic Republic of the Congo (DRC), continues to spread geographically, with newly reported cases in health zones bordering the Republic of the Congo (RoC) heightening the risk of possible cross-border spread of the disease. Since mid-August 2020, the Government of the DRC (GoDRC) Ministry of Health (MoH) has recorded confirmed EVD cases in four additional health zones—Bolenge, Bomongo, Lilanga-Bobangi, and Monieka; Bomongo and Lilanga-Bobangi share a border with the RoC. Additionally, response actors continue to underscore the risk of cross-border EVD spread, with cases recently confirmed in Bomongo's Buburu health area, a local hub for trade between the DRC and the RoC. In response to the identification of EVD cases in Buburu, the UN led an interagency mission to the health area in early September to identify and monitor key cross-border transit points and ensure that local health actors implement proper border health protocols. USAID/BHA is supporting the International Organization for Migration (IOM) to strengthen points of entry along the DRC–RoC border in Bomongo—in partnership with the GoDRC's National Program of Hygiene at Borders—to ensure effective EVD screening of people moving across the border. Additionally, USAID/GH is providing \$300,000 to the UN Children's Fund (UNICEF) to support EVD preparedness efforts in the RoC. Overall, the MoH has reported 123 total EVD cases, including 50 related deaths, across Équateur as of September 18; the overall case count includes 117 confirmed and six probable cases since MoH declared the outbreak on June 1.

### **Ambassador Hammer Leads Donor Delegation to Équateur**

U.S. Ambassador to the DRC Michael A. Hammer led a joint donor delegation—accompanied by the Canadian and UK ambassadors to the DRC, as well as Deputy UN Humanitarian Coordinator Diego Zorilla—to Équateur from September 7 to 10 to assess efforts to contain and end the EVD outbreak in the province. During the trip, the Ambassador visited USAID/BHA partner sites across Équateur, including two EVD treatment units (ETUs) operated by USAID partner International Medical Corps (IMC) in Bikoro and Wangata health zones. Ambassador Hammer also visited two integrated transit centers (ITCs)—where staff provide care to and isolation for EVD-symptomatic individuals while they await test results—operated by USAID partner the Alliance for International Medical Action (ALIMA) in Ingende and Mbandaka health zones. Additionally, while in Mbandaka, the Ambassador met with USAID/BHA-supported International Federation of Red Cross and Red Crescent Societies (IFRC) safe and dignified burial teams, which are working to ensure that individuals who have died of EVD are buried in a manner that prevents onward spread of the disease while respecting local burial customs. In Bolomba Health Zone, the Ambassador visited a base camp established by the UN World Food Program (WFP), with support from USAID/BHA, to provide accommodation and work space to response staff from various organizations in response to logistical challenges in Équateur. Following the visit, on September 15, the three ambassadors, as well as GoDRC Response Coordinator Dr. Jean-Jacques Muyembe, released a joint letter to DRC President Félix Tshisekedi highlighting the logistical challenges in the response, the need for financial transparency in response resources, the critical role of women in the response, and the importance of EVD vaccinations.

Accompanying the Ambassador on his visit were members of the U.S. Government (USG)'s Disaster Assistance Response Team (DART), who recently deployed to Équateur to support USG EVD response efforts, as well Paul Sabatine, the Mission Director for the USAID Mission in the DRC. The easing of coronavirus disease (COVID-19)-related travel restrictions has enabled the DART to deploy personnel to Équateur to meet with USAID/BHA partners, visit program sites, and hear directly from members of EVD-affected communities about the challenges they face and how the USG's response can best meet

their current needs. Ambassador Hammer was also joined on the visit by staff from the U.S. Centers for Disease Control and Prevention, who deployed to Équateur in late August to establish a mobile lab in Ingende Health Zone and provide other technical support to the response.

## **USG Announces More Than \$15 Million for EVD Response in Équateur**

During his visit to Équateur, Ambassador Hammer announced more than \$15 million in additional USAID/BHA funding for the Équateur EVD response following a September 7 meeting in Mbandaka city with provincial authorities. The newly announced funding will support USAID/BHA partners FHI 360, IFRC, IMC, and UNICEF for a range of health interventions, including risk communication and community engagement, infection prevention and control (IPC) training, surveillance to detect and report EVD cases, and safe and dignified burial activities. To date, USAID/BHA has provided more than \$18 million for EVD response activities in Équateur. Since August 2018, USAID has contributed more than \$365 million for EVD preparedness and response activities in the DRC and neighboring countries.

## **Health Actors Warn of Increased Community Deaths, Lack of Therapeutics**

Ongoing reports of community deaths—EVD-positive individuals who died of the disease outside of health care facilities—have raised concerns among response actors regarding possible undetected community spread of the disease, while also highlighting the need for increased community engagement and scaled-up access to therapeutic treatments. Notably, the UN World Health Organization (WHO) reports that from August 27 to September 17, 35 percent of confirmed EVD cases were community deaths; of the deceased individuals, 75 percent did not receive a safe and dignified burial, representing particularly high risks for onward EVD transmission, as EVD is most contagious post-mortem. Though this represents a decrease from the previous 21-day period, response actors have noted that community deaths remain a persistent concern, particularly given recent reports of a community death in Bomongo.

Recent community deaths underscore a need for scaled-up community engagement efforts to promote the timely transfer of EVD-symptomatic individuals to health facilities. MoH investigations into recent community deaths in Équateur found that multiple EVD-positive individuals had refused transfer to a health facility, often seeking treatment from a traditional healer instead. USAID/BHA is supporting the non-governmental organization (NGO) Internews and UNICEF to conduct risk communication and community engagement activities in Équateur to ensure affected populations have access to medically accurate information regarding EVD. Continued community deaths from EVD also underscore the need for health actors to scale up the administration of therapeutic treatment, which only 31 people in Équateur had received as of September 17; the low level of therapeutic administration is due to a lack of human resources to support the efforts across the expansive and logistically challenging EVD-affected area, health actors report. If EVD-positive individuals are unable to access timely therapeutic treatment, they are less likely to regard being transferred to or remaining at a health facility as beneficial. USAID/BHA continues to advocate increased access to therapeutics across Équateur.

### **KEY FIGURES**



**\$112.6  
Million**

In USG support for EVD health response activities in eastern DRC and Équateur

### **U.S. GOVERNMENT RESPONSE**

#### **HEALTH**

In response to the EVD outbreak in Équateur, USAID/BHA is currently supporting ALIMA, FHI 360, IFRC, IMC, Internews, IOM, and UNICEF to provide a range of health services in the province, including case management, risk communication and community engagement, IPC, safe and dignified burials, and surveillance activities. USAID/BHA partners are

operating ETUs and ITCs, where EVD-positive patients can receive care and treatment and individuals exhibiting EVD symptoms can isolate while awaiting test results. USAID/BHA partners are also conducting risk communication and community engagement activities, working with local populations to ensure they remain informed of medically accurate information regarding EVD prevention and treatment. Additionally, USAID/BHA partners are engaging in surveillance efforts, which involve monitoring and investigating alerts of EVD-symptomatic individuals, as well as supporting safe and dignified burials to ensure that individuals who have died of EVD are buried in a manner that prevents onward transmission of the disease and respects local customs.

Following the declared end of eastern DRC's EVD outbreak on June 25, USAID/BHA partners—including multiple NGOs, IOM, UNICEF, and WFP—have shifted activities to support post-outbreak transition efforts in the region. With many EVD survivors facing stigmatization from community members, USAID/BHA is supporting partners to conduct community engagement activities, such as awareness-raising sessions, to ensure these survivors can better reintegrate and access basic services in their communities. In addition, USAID/BHA partners continue to provide safe and dignified burial support to ensure that the remaining burials of individuals who previously died from EVD do not create a risk of onward transmission.



## **\$7.7 Million**

In USG funding for logistics support to the EVD responses in eastern DRC and Équateur

### **LOGISTICS**

As logistical limitations continue to hinder response activities in Équateur, USAID/BHA has provided more than \$2 million to the UN Humanitarian Air Service (UNHAS) for logistics support to the response. UNHAS is operating a helicopter that is transporting relief actors to remote regions of the province to conduct surveillance activities and provide treatment to EVD-positive individuals, and transporting test samples from these remote regions to labs in central parts of the health zones. With existing funding, USAID/BHA also supported WFP to establish base camps to host response staff in areas of Équateur with limited lodging and work facilities. In addition, USAID/BHA's support to UNHAS is facilitating flights from North Kivu Province's Goma city to Mbandaka city for partners shifting operations from eastern DRC to Équateur.



## **\$15.1 Million**

In USG funding for EVD-related WASH activities in eastern DRC and Équateur

### **WASH**

In Équateur, USAID/BHA is supporting UNICEF to provide water, sanitation, and hygiene services to enhance IPC standards at EVD-related health facilities across the province. This includes distributing WASH kits, establishing handwashing stations, providing safe water, and rehabilitating sanitation infrastructure.

USAID/BHA also continues to provide WASH support in eastern DRC in partnership with six NGOs and UNICEF. USAID/BHA partners continue to rehabilitate WASH infrastructure at health facilities across the region to

ensure the facilities are well-equipped for potential future disease outbreaks. USAID/BHA is also supporting partners to conduct hygiene awareness-raising campaigns on topics such as proper handwashing techniques and safe drinking water storage.

## CONTEXT IN BRIEF

- EVD is a rare and deadly disease caused by infection with Ebola virus. Scientific evidence suggests that bats are the most likely reservoir hosts for Ebola virus and that people are initially infected through contact with an infected bat or a non-human primate. Subsequently, the virus can spread from person to person, resulting in an outbreak. In humans, the virus is transmitted through close physical contact with infected body fluids, such as blood or vomit, and infection can result in symptoms such as fever, body aches, diarrhea, and severe bleeding. Scientists discovered the Ebola virus in 1976, near the Ebola River in what is now the DRC; to date, the country has experienced 11 EVD outbreaks.

### *Équateur EVD Outbreak*

- While the outbreak in eastern DRC persisted, the MoH declared a new EVD outbreak in Mbandaka on June 1, 2020, with subsequent cases identified in other parts of Équateur. Prior to the current EVD outbreak, Équateur faced poor development conditions, including widespread poverty and lack of basic infrastructure in much of the province. It was also the site of two previous EVD outbreaks, including DRC's ninth EVD outbreak in 2018; as of July 2020, the current outbreak had surpassed the number of cases reported during either of the province's previous outbreaks.
- Ambassador Hammer declared a disaster due to the potential humanitarian impact of the EVD outbreak in Équateur on June 8, 2020. In response, the DART is coordinating USG efforts to support EVD-related interventions in the province.

### *Eastern DRC EVD Outbreak*

- The MoH declared an EVD outbreak in areas of eastern DRC on August 1, 2018, representing the country's tenth EVD outbreak. On July 17, 2019, WHO Director-General Dr. Tedros Adhanom Ghebreyesus declared the outbreak a Public Health Emergency of International Concern (PHEIC). The outbreak—the second largest recorded globally—was the first to occur in Ituri and North Kivu, conflict-affected provinces with high-density population areas, highly transient populations, significant insecurity-related access constraints, and porous borders to adjacent countries. The MoH declared the end of the EVD outbreak in eastern DRC on June 25, 2020, and Director-General Tedros declared that the outbreak no longer represented a PHEIC on June 26, 2020.
- The USG deployed a field-based DART on September 21, 2018, to coordinate USG response efforts and established a Washington, D.C.-based Response Management Team to support the DART. On October 22, 2019, Ambassador Hammer redeclared a disaster in eastern DRC for FY 2020 due to the continued humanitarian needs resulting from the outbreak.

## USAID HUMANITARIAN FUNDING FOR EVD OUTBREAK PREPAREDNESS & RESPONSE IN FY 2020<sup>1</sup>

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
<b>FUNDING IN THE DRC FOR EVD OUTBREAK PREPAREDNESS &amp; RESPONSE</b>			
<b>USAID/BHA</b>			
Non-Food Assistance			
NGOs	Economic Recovery and Market Systems, Health, Nutrition, Protection, WASH	Équateur, Ituri, North Kivu	\$125,812,149
IFRC	Health	Équateur	\$3,000,000
IOM	Health	Équateur, Ituri, North Kivu	\$6,981,858
UN Department of Safety and Security (UNDSS)	Humanitarian Coordination and Information Management (HCIM)	Équateur, Ituri, North Kivu	\$760,378
UNHAS	Logistics Support	Équateur, Ituri, North Kivu	\$5,022,222
UNICEF	Health, HCIM, Nutrition, Protection, WASH	Équateur, Ituri, North Kivu	\$7,338,200
WFP	Logistics Support	Équateur, Ituri, North Kivu	\$2,691,582
	Program Support		\$869,503
<b>TOTAL NON-FOOD ASSISTANCE FUNDING</b>			<b>\$152,475,892</b>
<b>TOTAL USAID/BHA FUNDING IN FY 2020</b>			<b>\$152,475,892</b>
<b>FUNDING IN NEIGHBORING COUNTRIES FOR EVD OUTBREAK PREPAREDNESS</b>			
<b>USAID/GH</b>			
IOM	Health	South Sudan	\$1,200,000
UNICEF	Health	Burundi, RoC	\$1,300,000
<b>TOTAL USAID/GH FUNDING IN NEIGHBORING COUNTRIES</b>			<b>\$2,500,000</b>
<b>TOTAL USAID FUNDING FOR EVD OUTBREAK RESPONSE &amp; PREPAREDNESS IN FY 2020</b>			<b>\$154,975,892</b>

<sup>1</sup> Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of September 18, 2020.

### 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 [interaction.org](https://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, dietarily, and environmentally appropriate assistance.
- More information can be found at:
  - USAID Center for International Disaster Information: [cidi.org](https://cidi.org)
  - Information on relief activities of the humanitarian community can be found at [reliefweb.int](https://reliefweb.int).

USAID/BHA bulletins appear on the USAID website at [usaid.gov/humanitarian-assistance/where-we-work](https://www.usaid.gov/humanitarian-assistance/where-we-work)