

WEST AFRICA – EBOLA OUTBREAK

FACT SHEET #35, FISCAL YEAR (FY) 2015

JUNE 16, 2015

NUMBERS AT A GLANCE

27,309

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

UN World Health Organization (WHO) – June 16, 2015

11,169

Number of EVD-Related Deaths in Acutely Affected Countries*

WHO – June 16, 2015

12,965

Number of EVD Cases in Sierra Leone*

WHO – June 16, 2015

10,666

Number of EVD Cases in Liberia*

WHO – June 16, 2015

3,678

Number of EVD Cases in Guinea*

WHO – June 16, 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

- EVD transmission increases in Guinea and Sierra Leone, particularly in border areas
- The Government of Guinea (GoG) prepares to open transit center in the EVD-affected sub-prefecture of Kamsar, located in Boké Prefecture
- The Government of Sierra Leone (GoSL) announces 21-day Operation Northern Push to eradicate EVD in the country's northern districts through increased community engagement and curfew restrictions

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

USAID/OFDA ¹	\$723,647,822
USAID/FFP ²	\$104,247,423
USAID/GH ³	\$20,076,000
USAID/Liberia	\$16,100,000
USAID/Guinea	\$3,482,000
DoD ⁴	\$390,355,000
CDC ⁵	\$468,178,731 ^{6,7}
\$1,726,086,976	
USG ASSISTANCE TO THE WEST AFRICA EVD OUTBREAK RESPONSE ⁸	

KEY DEVELOPMENTS

- Active transmission continues in Guinea and Sierra Leone, with 31 new EVD cases confirmed during the week ending June 7, including 16 cases in Guinea and 15 in Sierra Leone, according to WHO. EVD transmission increased in late May and early June, affecting a wider geographic range and stalling previous incidence rate declines in April and early May.
- In addition, the UN reported that response actors confirmed five new EVD cases in Sierra Leone on June 8—the highest single-day figure in recent weeks.
- Following a recent cluster of cases in western Guinea's Boké, which is located along the border with Guinea-Bissau, EVD response actors are scaling up cross-border surveillance and contact-tracing activities. USAID/OFDA is working with CDC and partners to assess existing response capacities in Guinea-Bissau and identify effective measures to bolster in-country preparedness efforts, particularly in areas along the border with Guinea.

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 \$450,739,731 that CDC has thus far obligated in FY 2015, approximately \$62,930,223 supports activities outside the United States and \$335,033,973 supports activities inside the U.S. This amount includes 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 June 15, 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

- WHO reported 31 confirmed cases of EVD between June 1–7, including 16 cases in Guinea and 15 in Sierra Leone, with new cases found across five western Guinean prefectures and two Sierra Leonean districts. The source of infection for some cases remains unknown, highlighting continued undetected chains of transmission, according to the UN agency.
- The recent cluster of EVD cases in Boké—including nine confirmed cases since early May—has prompted EVD response organizations to focus increasingly on strengthening border surveillance and response preparations in neighboring Guinea-Bissau. During the week of June 8, USG Disaster Assistance Response Team (DART) staff traveled to the border town of Foulamôre to discuss EVD response preparations with staff from the Red Cross Society of Guinea-Bissau (RCGB) and the International Federation of Red Cross and Red Crescent Societies (IFRC), as well as representatives from a border community.
- IFRC is preparing for potential cases in Guinea-Bissau through case management, social mobilization, and surveillance preparations. IFRC and RCGB are implementing a cross-border contact tracing alert system and have established two safe burial teams in bordering regions—one each in Gabú and Tombali. RCGB social mobilization teams are engaging with local leaders, religious authorities, and youth groups to ensure community awareness and support for EVD preparations in Guinea-Bissau's border regions. As of June 9, RCGB had 100 volunteers engaging communities in Gabú and Tombali, with several hundred more expected to join in the coming weeks, according to IFRC.
- The Government of Portugal has placed a diagnostic laboratory in the capital city of Bissau and is training local staff to perform diagnostic testing. Médecins Sans Frontières (MSF) has established a six-bed EVD isolation and treatment site at the Simao Mendes National Hospital in Bissau. With multiple partners preparing for potential cases, the Government of Guinea-Bissau has started convening coordination meetings to manage response efforts and has proposed protocols for 11 essential response efforts, including safe burials, case management, and generating contact lists.

Liberia

- The Government of Liberia (GoL) Incident Management System (IMS) remains focused on maintaining vigilant surveillance and infection prevention and control (IPC) capacity to prevent, identify, and respond to a potential reintroduction of EVD. On June 7, the GoL reported zero suspected cases and 18 specimens tested—including 14 oral swabs and four whole blood samples.
- On June 11, representatives from the DART—along with the GoL General Service Agency—visited the recently closed, USG-supported EVD treatment unit (ETU) site in Grand Kru County's Barclayville town to facilitate the inventory and reallocation of remaining supplies prior to handing the facility to the GoL Ministry of Health (MoH). The DART continues to work with USG partners and the relevant GoL officials to decommission all but five of the USG-supported ETUs in Liberia. The five remaining ETUs, along with one non-USG-supported ETU in Montserrado County, are scheduled to remain open in the coming weeks.
- On June 8, DART members participated in the weekly post-EVD outbreak transition meeting for Montserrado County—where Liberia's last confirmed EVD case was detected; the county's urban environment and high population density pose unique challenges to EVD prevention, containment, and response efforts. The GoL MoH and supporting response actors—including USAID/OFDA partners Action Contre la Faim (ACF), the International Rescue Committee (IRC), MENTOR Initiative, and WHO, as well as CDC and other organizations—continue to conduct disease surveillance countrywide, with an emphasis on Montserrado and the five Liberian counties that border Guinea and Sierra Leone.
- GoL IMS personnel and supporting EVD response organizations—including USAID/OFDA partner Global Communities—are working to complete a safe and sustainable burial transition plan that will enable the GoL, funeral home staff, health care workers, and community members to carry out safe management of deceased individuals. Global Communities is currently operating 54 safe burial teams in all of Liberia's 15 counties, and continues to collaborate with GoL officials and organizations to finalize a sustainable strategy for maintaining safe dead body management. To date, Global Communities has supported funeral home assessments in all 15 counties; Global Communities and WHO have trained staff on safe burial and sample collection methods at 18 Liberian funeral homes.
- During the week of June 1, USAID/OFDA partner John Snow, Inc. (JSI) continued to support transition activities in Liberia by conducting county-level supportive supervision at more than 30 health facilities across Bomi, Gbarpolu, Grand

Kru, Montserrado, and River Cess counties and reaching 86 health facilities in Bomi, Bong, Lofa, Margibi, River Cess, River Gee, and Sinoe counties with IPC supply distributions. Liberia's remaining eight counties that have not begun distributions are engaged in preparation activities. The key challenge to JSI's efforts continues to be Liberia's ongoing May-to-November rainy season, which has worsened transportation networks, affecting all field activities.

- As of May 31, USAID/OFDA partner Mercy Corps had reached 3,000 villages—comprising approximately 2.2 million people—through its Ebola Community Action Platform (ECAP) network in Liberia, which is designed to strengthen community EVD awareness and encourage behaviors that reduce EVD transmission through community-led social mobilization activities. The ECAP network consists of 76 NGOs, including 72 Liberian NGOs, that have collectively trained more than 800 mobilizers, who in turn trained more than 14,700 additional communicators.

Sierra Leone

- From June 1–14, the GoSL Ministry of Health and Sanitation (MoHS) reported 29 new confirmed EVD cases in Sierra Leone. 18 of the cases occurred in Port Loko District, and 11 cases occurred in Kambia District. Western Urban District reported no new EVD cases for the second week in a row. According to the National Ebola Response Center (NERC), the source is unknown for one of the EVD cases in Kambia; response actors identified the remaining EVD cases from death swabs, quarantined homes, contacts lists, and two were previously overlooked contacts.
- According to EVD response actors in Kambia, people continue hiding sick family members, conducting unsafe burials, holding weekly market days and trading after the 6:00 p.m. curfew, and traveling to Guinea's Forécariah Prefecture. In response, USAID/OFDA-supported NGO Christian Aid held a community dialogue forum in Kambia's Magbema Chiefdom in early June through a local partner. The DART, local leaders, and other response stakeholders attended the forum, which sought to facilitate community awareness of response efforts and reinforce knowledge of EVD-related by-laws. Additional USAID/OFDA-supported fora are planned in Kambia.
- On the evening of June 11, the President of Sierra Leone, Ernest Bai Koroma, publically announced Operation Northern Push, a major GoSL effort to eradicate EVD in the country's northern districts. The 21-day operation, which launched on June 16, focuses on 'getting to zero' through a combined EVD event- and chiefdom-level "surge" in Kambia and Port Loko. President Koroma related that the operation will involve leadership from local communities and requested that paramount chiefs, traditional healers, religious leaders, women, and youth take ownership of combatting EVD with support from the District Ebola Response Centers (DERCs) and the NERC.
- According to the NERC, a curfew in the affected chiefdoms began on June 15, with no night transport allowed between 6:00 p.m. and 6:00 a.m. GoSL military personnel, alongside district police, will patrol targeted areas of Kambia and Port Loko. The number of checkpoints, with strengthened health screening posts, will increase on all main roads. The NERC also announced efforts to incentivize people to remain in quarantine by providing free medical care, improving sanitation conditions, and engaging the local community in common activities to support quarantined households. Other details include enhancing the number of surveillance activities, encouraging community observers to report suspected EVD cases, ensuring zero tolerance on secret burials and non-adherence to other EVD by-laws, and embedding traditional healers and religious leaders in the response.
- DART and CDC representatives visited Port Loko on June 13 and met with USAID/OFDA partner the International Medical Corps (IMC) to observe psychosocial activities. Each day, IMC psychosocial teams visit quarantined households in Port Loko's Kaffu Bullom Chiefdom to monitor the physical and mental wellbeing of those quarantined and provide survivor follow-up. IMC supplies provides emergency relief commodities to the quarantined households—including buckets, soap, food through the UN World Food Program (WFP), and schoolbooks through the UN Children's Fund (UNICEF)—and, following discharge from IMC's USAID/OFDA-supported Lunsar ETU, relief items for EVD survivors such as mattresses, food, cooking oil, clothing, mosquito nets, and condoms.
- Following recent concerns that the onset of rainy season throughout West Africa could impede EVD response efforts, WFP reports that it has undertaken sufficient preparations to reinforce storage facilities and ensure the continuation of services—including pre-positioning and distributing food and relief commodities, maintaining a logistics network, and transporting humanitarian personnel and equipment—during the rainy season in Sierra Leone. To date, USAID/OFDA has provided approximately \$20 million to WFP in support of humanitarian coordination and information management

and logistics support and relief commodities efforts, including preparations for and activities during the rainy season in EVD-affected countries of West Africa.

Guinea

- During the week ending June 7, WHO reported 16 confirmed EVD cases in Guinea; eight of those cases occurred in Forécariah, with Kindia, Conakry, Dubréka and Boké prefectures reporting three, two, two, and one new case, respectively. Five of the 16 new confirmed cases—including all three from Kindia—are from unknown sources of transmission. Until these recent cases, authorities had not reported a new case in Conakry or Kindia for more than 40 days, WHO reports. As of June 10, contact tracers were monitoring nearly 1,700 contacts in eight Guinean prefectures.
- With these new cases, the GoG reported that six prefectures—Boké, Conakry, Dubréka, Fria, Forécariah, and Kindia—had active EVD transmission as of June 12. By comparison, during the first week of May, only two prefectures, Dubréka and Forécariah, recorded confirmed EVD cases.
- On June 7, members of the DART traveled to Tanéné sub-prefecture—the area of Dubréka with active EVD transmission—for the official launch of the prefectural case finding and EVD messaging campaign. Modelled on the recent campaign in Forécariah, the campaign targets nearly 2,200 households—or approximately 11,000 individuals—in five areas of Tanéné with door-to-door EVD messaging and active case finding, as well as WFP food distributions and radio broadcasts on campaign activities conducted by USAID/OFDA partner Internews. Following the first three days of the campaign, case finders identified five suspected cases, while regular surveillance activities in Dubréka identified two suspected cases. Of these seven suspected cases, one has tested positive for EVD—the case was connected to a known line of transmission.
- Local NGO AGIL is supporting WFP food distributions which were scheduled to commence on June 12—as in Forécariah, families are receiving food rations to dissuade additional movements. WFP and AGIL staff will accompany the 27 campaign teams to create an accurate list of beneficiaries for food assistance—in Forécariah, WFP staff were not part of the door-to-door campaign, and the number of households claiming a food ration was higher than planned. WFP hopes to preempt these discrepancies by joining door-to-door efforts.
- IFRC recently reported that areas near Dubréka and Kindia are not adequately serviced by an EVD diagnostic laboratory, despite Dubréka and Kindia hosting active chains of transmission. Without a laboratory, IFRC noted that teams transporting specimens requiring diagnostic testing often travel long distances to reach laboratories in the capital city of Conakry, taking several hours round trip. To alleviate testing inefficiency for suspected cases or body swabs taken from Dubréka and Kindia, the GoG adopted a proposal by the safe and dignified burial group to install a mobile laboratory—provided by the Government of Japan—in Tanéné. The laboratory was scheduled to begin testing on June 8.
- The GoG is also preparing to open a UNICEF-constructed transit center at the Kassopo centre de santé in Port Kamsar town of Boké in the coming days. UNICEF upgraded the site, providing space for six beds to hold suspected cases. In Kassopo, IMC will manage the operations at a recently constructed triage unit equipped to refer patients exhibiting symptoms consistent with EVD to the transit site to receive basic care and have blood drawn for a diagnostic test, performed at an onsite laboratory managed by staff from the Government of Canada.
- On June 8, USAID/OFDA partner Jhpiego began a five-day IPC training for 25 members of staff from health facilities in Boké, including from the Kassopo center de santé. The training aimed to improve staff understanding of IPC protocols in health care settings to reduce the risk of infection; course materials focused on EVD but also emphasized best practices for reducing the risk of contracting other communicable diseases while providing care. Prior to June, health staff in Boké had not received IPC training.

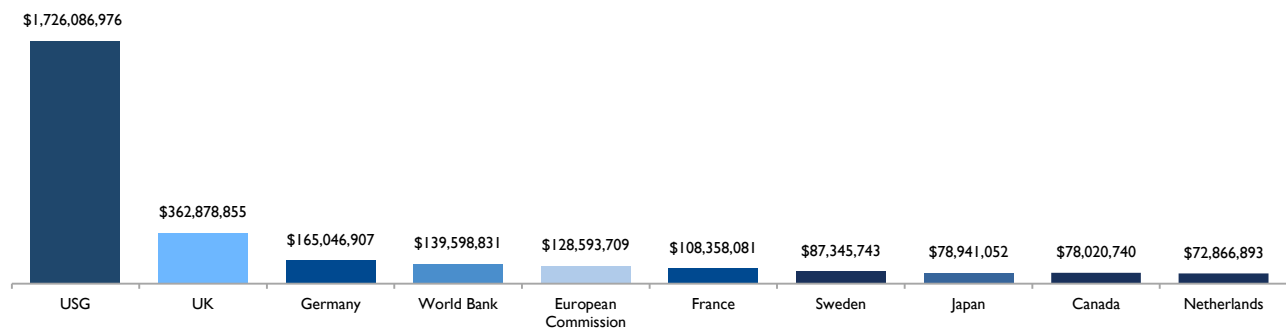
FOOD SECURITY AND LIVELIHOODS

- USAID/FFP has supported WFP to provide food assistance to more than 3 million people in Guinea, Liberia, and Sierra Leone to date. In Guinea, WFP distributed food assistance to approximately 35,000 people during the GoG's recent Forécariah campaign. With USAID/FFP support, WFP is also supporting the food needs of quarantined households in Boké and Dubréka prefectures. Through the GoG's ongoing Dubréka campaign, for example, WFP is targeting more

than 2,000 households in Tanéné sub-prefecture with approximately 180 metric tons (MT) of food assistance. To promote household access to nutritious food during the lean season, USAID/FFP also supported Catholic Relief Services (CRS) to provide food vouchers to approximately 2,000 Ebola-affected households in Guinea’s Macenta and Nzérékoré prefectures.

- In Liberia, USAID/FFP partner Mercy Corps is providing targeted cash transfers to approximately 150,000 Ebola-affected people across three of Liberia’s most affected counties. With USAID/FFP support, Mercy Corps, ACDI/VOCA and Project Concern International (PCI) have provided agricultural input vouchers to assist farmers during the planting season. Through these activities, USAID/FFP is increasing household purchasing power and access to food while stimulating local markets affected by the EVD outbreak.
- As part of the President’s address regarding Operation Northern Push on June 11, the GoSL also announced the relaxation of curfews in non-EVD affected districts to support economic recovery and allow for increased business activities. President Koroma reminded businesses to remain committed to EVD prevention protocols, including temperature screening of employees and customers, hand washing before entering premises, and prevention of overcrowding during business hours. All other restrictions will remain in force until the country reaches zero-plus-42 days.

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



* Funding figures are as of June 16, 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			
African Union (AU)	Health	Guinea, Liberia, Sierra Leone	\$10,000,000
CDC	Health	Guinea, Liberia, Sierra Leone	\$3,000,000
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		\$6,784,685
LIBERIA			
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
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	\$26,794,897
International Organization for Migration (IOM)	Health	Liberia	\$34,192,791
IRC	Health, Protection	Liberia	\$18,443,770
Jhpiego	Health	Liberia	\$2,814,287
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	\$12,000,000
Partners in Health (PIH)	Health, Protection	Liberia	\$24,393,170

Plan USA	Health	Liberia	\$1,508,821
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	\$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
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	\$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
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			\$723,647,822
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
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			\$104,247,423
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	\$390,355,000
TOTAL DoD ASSISTANCE TO EVD RESPONSE EFFORTS			\$390,355,000
CDC			
CDC	Health	West Africa and USA	\$468,178,731
TOTAL CDC ASSISTANCE TO EVD RESPONSE EFFORTS			\$468,178,731
TOTAL USG ASSISTANCE TO EVD RESPONSE EFFORTS IN FY 2014 & 2015			\$1,726,086,976

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>

CRISIS IMPACT

27,309
CUMULATIVE
CASE COUNT



11,169
CUMULATIVE
CASE DEATHS

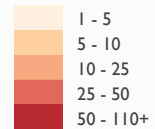


Source: WHO Situation Summary 06/16/15

USAID/OFDA USAID/IGH USAID/FFP

- Agriculture and Food Security
- Cash-For-Work
- Cash Transfers
- Food Assistance
- Food Vouchers
- Health
- Humanitarian Coordination & Information Management
- Humanitarian Studies, Analysis, or Applications
- Local and Regionally Procured Food Assistance
- Logistics Support & Relief Commodities
- Protection
- Risk Management Policy & Practice
- WASH

New Confirmed Cases



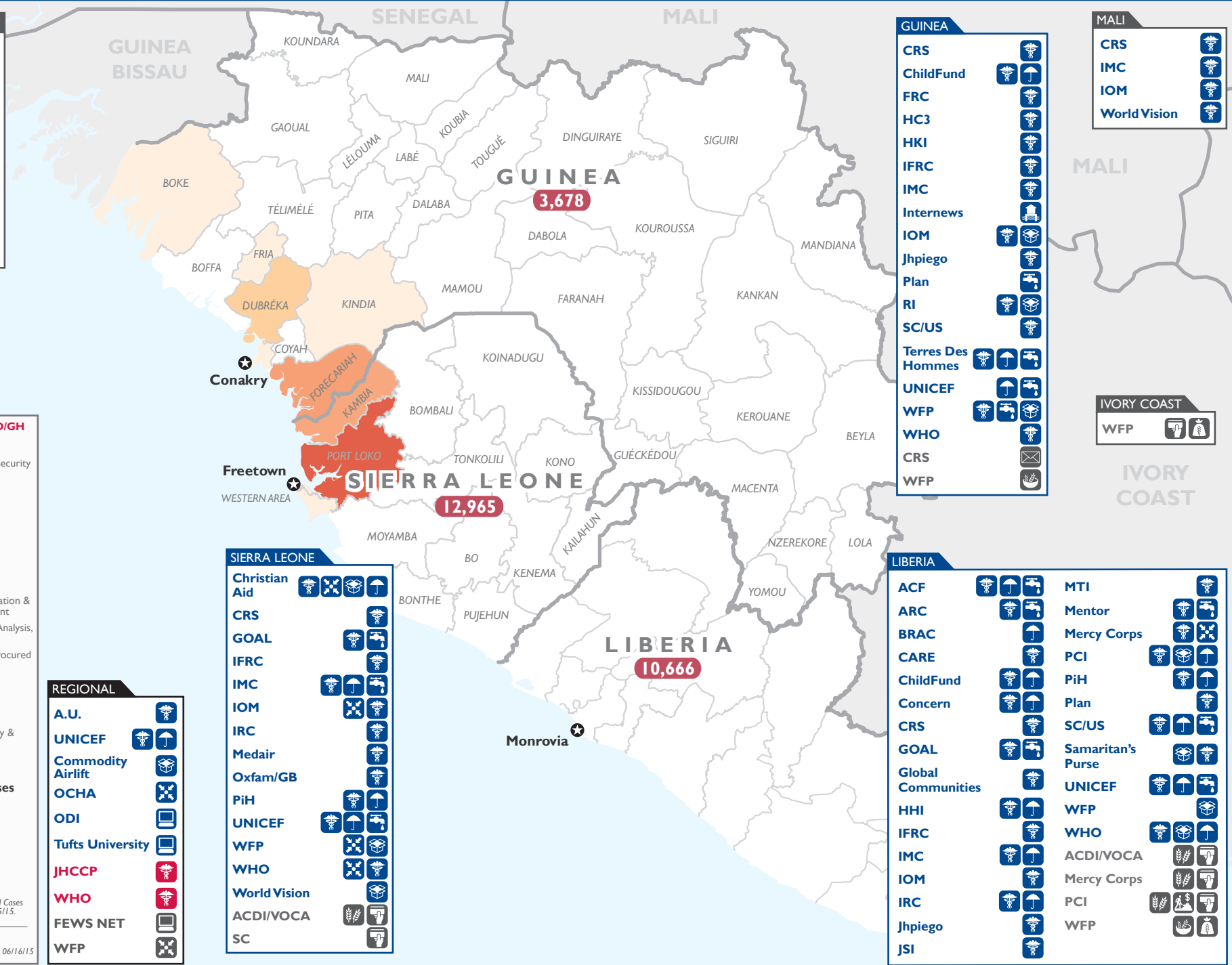
Source: CDC, Number of Confirmed Cases in the previous 21 days as of 06/15/15.

Cumulative Cases

Source: WHO Roadmap Sitrep, 06/16/15

REGIONAL

- A.U.**
- UNICEF**
- Commodity Airlift**
- OCHA**
- ODI**
- Tufts University**
- JHCCP**
- WHO**
- FEWS NET**
- WFP**



SIERRA LEONE

Christian Aid

CRS

GOAL

IFRC

IMC

IOM

IRC

Medair

Oxfam/GB

PIH

UNICEF

WFP

WHO

World Vision

ACDI/VOCA

SC

GUINEA

CRS

ChildFund

FRC

HC3

HKI

IFRC

IMC

Internews

IOM

Jhpiego

Plan

RI

SC/US

Terres Des Hommes

UNICEF

WFP

WHO

CRS

WFP

MALI

CRS

IMC

IOM

World Vision

IVORY COAST

WFP

LIBERIA

ACF

ARC

BRAC

CARE

ChildFund

Concern

CRS

GOAL

Global Communities

HHI

IFRC

IMC

IOM

IRC

Jhpiego

JSI

MTI

Mentor

Mercy Corps

PCI

PiH

Plan

SC/US

Samaritan's Purse

UNICEF

WFP

WHO

ACDI/VOCA

Mercy Corps

PCI

WFP

The boundaries, names, and data used on this map do not imply official endorsement or acceptance by the U.S. Government and are not drawn to scale.