## NGO STATEMENT ON EBOLA CRISIS IN WEST AFRICA

The Ebola epidemic in five West African countries has become an international humanitarian crisis. The death toll is rising and the geographic coverage is widening. This is not just a medical emergency but also a crisis that could destabilize the entire region for years to come. In spite of the horrific situation facing the region, the international response has been disappointingly inadequate. Liberians are relieved that a number of sizable pledges have finally been put forward by international donors, but are calling for action to be swift – we finally have money on the table, we now urgently need people on the ground.

The spread of the Ebola Virus Disease (EVD) in Liberia, Guinea, Sierra Leone, Nigeria and Senegal has been deadly. Over 2,288<sup>1</sup> people have died with the WHO estimating that about 20,000 people are likely to be afflicted by the virus even if the outbreak is contained in the next six months.

Following a recent trip to West Africa, the Director of the US Center for Disease Control noted that the world has "never seen anything on this scale with Ebola before<sup>2</sup>" and warned the situation could, "get worse before it gets better"; a grim assessment Liberia's President Ellen Johnson Sirleaf shares.<sup>3</sup>

Liberia has been hit particularly hard. The crisis has brought Liberia to the verge of collapse. The country's health system is hardly functioning with the majority of hospitals closed or barely functioning. More than three dozens doctors and nurses have died from the virus and others are reluctant to continue working without adequate protection.

Limited capacity and resources to tackle Ebola in Liberia are two major factors contributing to the spread of the virus. There are insufficient human resources and expertise to establish and manage testing and treatment facilities. Many of the isolation units around Monrovia, the nation's capital, are full. For example, an MSF operated 120-bed facility opened about a week ago is already full.<sup>4</sup> Many families are forced to care for their loved ones at home as they are either unable to get ambulances to lift them to existing facilities or they are turned away due to lack of space. The crematorium in Liberia's capital cannot cope with the in flow of dead bodies and has had to turn away infectious bodies, according to the Liberian National Red Cross Society<sup>5</sup>.

The Liberian Parliamentary Health Committee has conceded that the government's Ebola Taskforce cannot manage the prevention and treatment of suspected and confirmed cases of Ebola. The parliamentary committee emphasized the need for international agencies with the requisite expertise to take over coordination of the Ebola response. Several members of the Liberian Senate have also called for a coordinated international response because "the

<sup>&</sup>lt;sup>1</sup> World Health Organization Ebola Response Roadmap update, 8<sup>th</sup> September 2014.

<sup>&</sup>lt;sup>2</sup> Thomas Frieden, Director, Center for Disease Control, Ebola outbreak 'worse than we'd feared', CDC chief says on visit to West Africa, 26 August 2014.

<sup>3</sup> Wall Street Journal, <u>Ebola Virus Outbreak Tests Liberian President</u>, 26 August 2014.

<sup>&</sup>lt;sup>4</sup> Front Page Africa, MSF's New Ebola Management Center Already Overwhelmed, 28 August 2014.

<sup>&</sup>lt;sup>5</sup> Al Jazeera, <u>Liberia Overwhelmed by Number of Ebola Dead</u>, 21 August 2014.

<sup>&</sup>lt;sup>6</sup> FrontPageAfrica, <u>Liberian Legislature Approves Outsourcing of Ebola Fight</u>, 22 August 2014.

Government of Liberia has been overwhelmed and no longer has the capacity to contain the disease<sup>7</sup>".

The MSF has also concluded "the Liberian health system just cannot cope with the scale of the epidemic<sup>8</sup>".

Liberia is doing what it can and its doctors and nurses have been on the frontline handling the crisis and risking their lives. But the neglect of the country's healthcare system despite 10 years of stability has made Liberia unprepared to respond to the outbreak. The country should not be expected to deal with the worst outbreak of the world's deadliest virus on its own. It is imperative that the international community acts now to prevent the situation from spiraling out of control.

Beyond the health situation, the outbreak has prompted multiple crises. Liberia, already extremely food insecure, is virtually cut off from the outside world on which it relies for 60% of its food. Hunger and malnutrition are rising. Fear and panic have sparked a myriad of security issues. It is incalculable the amount of deaths which have and will occur as an entire nation has little or no access to healthcare or food. Last year's marking of ten years of peace is haunted by the sights Liberians now see on their streets including dead bodies awaiting ambulances and the army patrolling in combat ready gear.

The crisis also poses threats to regional security and peaceful co-existence. As borders are closed, fear, hardship and distrust could affect relationship across the region. This could have serious negative implications on relations among West African states.

Now that the international community has come together and pledged assistance, there is now an urgent need to mobilize the expertise, logistics and financial resources that are needed to bring the situation under control.

This is an international crisis and it needs an international response. As concerned Liberian civil society organizations, international development partners and NGOs, private foundations supporting Liberia's recovery, we strongly urge the international community to take immediate action on the following recommendations:

- 1. The United Nations, African Union and all donor countries, must provide immediate support to Liberia, Sierra Leone, Guinea, Nigeria and Senegal while working in a coordinated manner to support medical charities on the ground. This support must come in the form of both human and technical medical resources, including infectious disease experts and disaster relief specialists, particularly to Liberia, which is suffering the most severe impacts.
- 2. Donors should provide substantial resources to ensure that infected people are identified, isolated from the rest of the population to curtail the spread of the virus, and given the best quality treatment to help them recover from the virus. Resources should be directed towards expanding testing; establishing treatment facilities closed to affected communities; providing ambulances to transport suspected cases; acquiring Personal Protective Equipment, and supplies to ensure safe and dignified burials of the dead.

<sup>&</sup>lt;sup>7</sup> Daily Observer, Outsource the Ebola Fight, 20 August 2014.

<sup>&</sup>lt;sup>8</sup> Medicins Sans Frontieres, <u>Ebola: international response to Ebola epidemic dangerously inadequate</u>, 15 August 2014.

- 3. The United Nations Mission in Liberia should increase police presence alongside the Liberian police to ensure that national security forces implement measures in a responsible manner, which acknowledges and respects Human Rights and humanitarian concerns. This is crucial to avoid a repeat of the unfortunate death of a teenager who sustained gunshots wounds<sup>9</sup> in recent riots in Monrovia's West Point community.
- 4. Members of the Economic Community of West African States (ECOWAS) and the African Union should allow flights into and out of Ebola affected countries to ensure that people are able to travel and supplies are delivered to these affected countries without hindrance or delays. The international community should however support countries in the region to introduce border control measures aimed at identifying, isolating and testing passengers suspected of being infected with the Ebola virus.
- 5. Finally, support should be provided to Liberian civil society initiatives to scale up community education, sensitization and support efforts. This will enhance the capacity of Liberian civil society organizations to contribute meaningfully to slowing down and reversing the spread of the virus.

This statement is jointly issued by civil society organizations in Liberia. It is supported by an international coalition of civil society organizations in Africa, Asia, Europe, South America, and the United States.

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<sup>&</sup>lt;sup>9</sup> FrontPageAfrica,, 'Lethal Weapon' Killed Shaki, Defence Minister Shifts, 26 August 2014.

## This statement is jointly issued by the following civil society oganizations in Liberia

No.	Organization	<b>Contact Person</b>	Cell Number	E-mail Address
1.	Action Aid Liberia	Korto Williams	+231777748078	korto.williams@actionaid.org
2.	AGENDA	Carolyn Myers	+231886814181	zoduahcaro@gmail.com
3.	Association of Community Radio Stations	William Quire	+231886593090	moneequire@yahoo.com
4.	Bassa Youth Caucus	Abraham Sandoe	+231777014917	abraham.sandoe@yahoo.com
5.	Bassa Women Development Association	Martha Karnga		bawoda_women@yahoo.com
6.	Center for Justice and Peace Studies	Joseph Howard	+231886526151	cjpstudies@yahoo.com
7.	Center for Media Studies and Peace Building	Malcolm Joseph	+231886514357	malcolmjoseph2000@yahoo.com
8.	COPTA	Frederick B. Krah	+231886558003	fbkrah@yahoo.com
9.	Center for Transparency and Accountability	Thomas Nah	+231886511142	ncreative69@hotmail.com
10.	Community Development and Research Agency	Lansana Dukuly	+231886489687	codraliberia@yahoo.com
11.	Development Education Network Liberia	Dorothy Tonann	+231886900591	dktoomann@yahoo.com
12.	EARS for the Masses	Lawrence Tokpah	+231886987744	ears2004@gmail.com
13.	Elections Coordinating Committee	James Lablah	+231880514309	jandrewslablah@yahoo.com
14.	Foundation for Community Initiatives	Julie T. B. Weah		fcommunityinitiatives@yahoo.com
15.	Gender Peace Network	Isaiah Kannah	+231886276330	kannahisaiah@yahoo.com
16.	IBIS	Morris W. Gbessagee	+231886519711	gmorris@ibiswestafrica.com
17.	Initiative for Positive Change	D. Maxime Kumeh	+231886 556634	dmkumeh@yahoo.com
18.	Institute for Research and Democratic Development	Harold M. Aidoo	+231886520021	afriwareh@gmail.com
19.	Liberia Feminist Forum	Facia B. Harris	+231886587574	fharris63@gmail.com
20.	Liberia Media and Democratic Initiative	John Kollie	+231886513080	john@lmdi.org
21.	Liberia Media Center	Lamii Kpargoi	+231777523144	lamii.kpargoi@lmcliberia.org
22.	Liberia Women Media Action Committee	T. Estella Nelson	+231880810536	tovianj@yahoo.com
23.	Mano River Women Peace Network	Ruth Ceasar	+231886552574	Ruth1847@yahoo.com
24.	Medica Mundiale	Caroline B. Brown	+231886532820	
25.	National Civil Society Association of Liberia	Benjamin Tarnue	+231886 411624	ben.naccsol@gmail.com
26.	National Civil Society Council of Liberia	Frances R. Greaves	+231886 516996	fraquel62@yahoo.com
27.	Natural Resource Management Consortium	Jackson Speare	+231886569568	jacksonspeare@yahoo.com
28.	National Youth Movement for Transparent Elections	Eddie Jarwolo	+231886510479	eddie@naymote.com

29.	New African Research Development Agency	Lancedell Mathews	+231777020338	lancedellnardanet.org
30.	Platform for Dialogue and Peace	Horace Nagbe	+231886184489	christinme2009@gmail.com
31.	Press Union of Liberia	Abdullai Kamara	+231886522334	pressunionofliberia@yahoo.com
32.	Public Health Initiative	Joyce L. Jarwolo	+231886499203	Joyce_kilikpo@yahoo.com
33.	Rights & Rice Foundation	James Yarsiah	+231886 549280	rightandrice@gmail.com
34.	Save My Future Foundation	James Makor		
35.	Search for Common Ground	Oscar Bloh	+231886554109	obloh@sfcg.org
36.	Security Sector Working Group	Cecil Griffiths	+231886552280	cbgriffiths@yahoo.com
37.	Special Emergency to Restore Children Hope	Sondah Geepea	+231886586411	sondah_geepea@yahoo.com
38.	Social Entrepreneurs for Sustainable Development	Daniel Krakue	+	
39.	Sustainable Development Institute	Jonathan W. Yiah	+231886426271	jyiah@sdiliberia.org
40.	West African Network for Peace Building	Victoria Wollie	+231886516699	mayea2003@yahoo.com
41.	Women NGO Secretariat of Liberia	Marpue M. Speare	+231886538043	mspeare2@yahoo.com
42.	Young Men Christian Association of Liberia	T. Martin Allen	+231886 592214	tmartin.ymcalre@gmail.com
43.	Young Women Christian Association	Roseline k. Toweh	+231886515928	roseline_toweh@yahoo.com
44.	Youth in Technology and Arts Network	Donnish M. Pewee	+231880948419	yotanliberia@gmail.com
45.	Zorzor Women Development Association	Agnes Kortimai	+231776890884	zodwocaliberia@gmail.com

## Supporting regional African and international organizations, and foundations

- 1. Adjoint de l'ONG CIEDD, Central Africa Republic
- 2. Africa Community Rights Network, Regional
- 3. Africa Europe Faith & Justice Network, Belgium
- 4. African Centre for Biosafety, South Africa
- 5. Brainforest, Gabon
- 6. Centre pour l'Environment et le Developpment, Cameroon
- 7. Cercle des droits de l'Homme et de Developpement, Republic of Congo
- 8. Civic Response, Ghana
- 9. Comhlamh, Ireland
- 10. Eastern and Southern African Small Scale Farmers' Forum, Uganda
- 11. Environnement Sans Frontières, Gabon
- 12. Environmental Justice Foundation, United Kingdom
- 13. FERN, Belgium
- 14. Forest People's Programme, United Kingdom
- 15. Friends of the Earth International (74 member groups worldwide)
- 16. Global Witness, United Kingdom
- 17. Green Development Advocates, Cameroon
- 18. ISODEC, Ghana
- 19. Organisation Congolaise des Écologistes et Amis de la Nature, D. Republic of Congo
- 20. Plateforme Tenforest, Burkina Faso
- 21. Liberia Solidarity Group, Ireland
- 22. REDD Monitor, Global
- 23. Rural Business Development Center, Pakistan
- 24. SONIA for a Just New World, Italy
- 25. The Corner House, UK
- 26. The Development Institute, Ghana
- 27. The Fellowship of Christian Councils and Churches in West Africa
- 28. Well Grounded, United Kingdom
- 29. World Neighbors (Africa Region), Kenya
- 30. World Rainforest Movement, Uruguay