

Testimony by:
Healey International Relief Foundation
Robert T. Healey, Jr.

Good afternoon Chairman Harkin, Ranking members Alexander and Moran, and members of the Health, Education, Labor and Pensions, Appropriation Committee. Thank you for the opportunity to testify before you today and for your continued support to combat the epidemic of Ebola in West Africa.

I am Robert T. Healey, Jr., President of the Healey International Relief Foundation, a charitable organization founded by my father Robert T. Healey, Sr. to improve the lives of the most vulnerable people of Sierra Leone shortly after the end of their brutal civil war 12 years ago.

The Foundation's Mission is to invest and support families and individuals affected by war, disaster and adverse socio-economic conditions through the delivery of healthcare, clean water, food, training and other programs. Its mandate is to empower communities and build their capacity to become self-sustaining. We collaborate with the United States, as well as international and local charities in building orphanages, healthcare facilities and vocational structures.

I appreciate the opportunity to be here today to share the experiences on Ebola expressed by our team in Sierra Leone, one of whom is Ishmeal Alfred Charles, who testified before your committee on September 16, 2014. He was unable to be here due to the risk of quarantine restrictions imposed on travelers from Sierra Leone.

Collaborating with international NGOs our Foundation led the refurbishing of a 200 bed hospital that was destroyed during Sierra Leone's civil war, and early next year will open the first of over 30 primary care health clinics formerly operated by faith organizations, which were also destroyed during the civil war. We have also initiated a project to produce medical products in Sierra Leone in the near future.

Our Foundation and collaborators work closely on the Ebola Response with the Ministry of Health and Sanitation, Ministry of Social Welfare and the Emergency Operation Center of Sierra Leone, as well as international organizations.

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We are in touch with our team and collaborators on the ground in Sierra Leone on a daily basis, and they share their experiences and frustrations. Their remarks illustrate in a very tragic way, the need to strengthen Sierra Leone's health system in order to safeguard global health and food security, avoid the spread of the Ebola, and elude possible social unrest and a humanitarian disaster.

In conversations with our field people, they all expressed that it is a "race against time" to stop the disease from spreading. Even with the emergency efforts to introduce vaccines or drugs that can treat Ebola, it would take several months to a year to have the product readily available for use. In their opinion, there is an urgent need for healthcare volunteers and specialized supplies, equipment and treatment facilities. However, there is also an urgent need to provide funds to fill the gaps identified by local NGOs. They are needed to contain the spread and devastation of this deadly disease and its psycho/social/economic impact:

1. Need to build trust and acceptance in the healthcare system.

Currently, people seem reluctant to visit clinics or hospitals for fear of being infected with Ebola. Doctors hesitate to treat patients with symptoms that may seem similar to Ebola, such as malaria or yellow fever. At times the patient is not admitted for treatment. At times they are taken care of at their home where the family may be stigmatized with suspicion of having contracted Ebola. There is a critical need to nurture the acceptance of healthcare and medical personnel possibly by separating quarantine, isolation and treatment facilities from primary care facilities.

There is an urgent need to screen, diagnose quickly and separate individuals affected with Ebola and those with other illnesses.

2. Provide safe and dignified burials of the deceased.

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Local burial practices and rituals have members of the family wash the body of the deceased, and then hug and kiss them before burial. There is a need to work closely with local faith-based establishments to develop safe and dignified burials of the deceased to avoid contamination. It would also stop rumors of organ trafficking by foreigners or “witchcraft” rituals.

3. Avoid the stigma and reintegrate Ebola survivors into their families and communities.

Families, children orphaned by Ebola, ambulance drivers, grave diggers and other support staff need to be de-stigmatized and reintegrated into their communities. **Villages affected by Ebola need to have access to case management, psycho-social help and food assistance.**

4. Strengthen and build stronger healthcare systems.

Strengthening of the current healthcare system and infrastructure, as well as the production of medical products is critical for the future health of the region.

While the people of Sierra Leone are appreciative of the support they are receiving from charitable organizations throughout the United States and the US government, they are also aware that the efforts to contain Ebola in Liberia seem to be succeeding with the slower outbreak of the epidemic in that country. **We firmly believe that to fully control this disease in Liberia, certain attention must also be paid to Sierra Leone.** We have growing concerns about the porous border between Liberia and Sierra Leone. The border security between the two countries is almost non-existent. The current situation with every asset of the United States government working in Liberia may eventually do well to intervene and control and reduce this virus, but the potential for that work to be lost through the border is very great. The United States must work in both countries to fully realize the fruits of their efforts. Our team on the ground have concerns about how the possible travel bans into the US will negatively impact the healthcare workers and volunteers from this country who are desperately needed in Sierra Leone.

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According to Mr. Charles, our Program Manager in Sierra Leone, “The state is overwhelmed and unable to effectively coordinate the Ebola response and people have lost their confidence”. In a statement the Disaster Emergency Committee, an umbrella organization for aid agencies in Sierra Leone, said, “The quarantine is having a devastating effect on trade –travel is restricted so trucks carrying food cannot freely drive around. **Food is becoming scarce, which has led to prices increasing beyond the reach of ordinary people**”.

Justin Forsyth, CEO of Save the Children warns: **"We're in a race against time to make sure we can prevent it from spreading, but also need to treat people who have got Ebola, and to build on for the future"**. At Healey International Relief Foundation we believe that “improving the capabilities for each nation improves the security of all nations”.

Paul Farmer, co-founder of Partners in Health stated: “Ebola isn’t a natural disaster. It is the terrorism of poverty”. Quoting from Joel Achenbach at the Washington Post: “Africa’s Ebola problem is now America’s Ebola problem. The best way for the United States to free itself of the terror of this virus is to ensure that it is wiped out at the source, where the epidemic is currently out of control. That will happen only through a coordinated effort to provide the kind of basic, front-line health care that we take for granted in the developed world but which is tragically scarce in impoverished countries”.

With the support of the United States, the International Community and the survival spirit of the people of Sierra Leone, we are confident this deadly epidemic will be defeated. However, over a decade of progress will be lost.

I thank you for the opportunity to appear before you today. On behalf of our Foundation and our partner charities in Sierra Leone, we appreciate your attention to this terrible epidemic and look forward to your questions.