Opening Statement of the Honorable Ed Royce (R-CA), Chairman House Foreign Affairs Committee Subcommittee on Africa, Global Health, Global Human Rights, and International Organizations Hearing on "Combating the Ebola Threat" August 7, 2014

(Submitted for the Record)

I want to thank Chairman Smith for convening this hearing, which will address ongoing efforts to track, contain, and combat Ebola. The House is not in session this week, but given the extraordinary circumstances of the outbreak in West Africa, this hearing is absolutely warranted.

As our witnesses will attest, Ebola is a rare but deadly communicable disease. Prior outbreaks occurred mainly in Central Africa and, while tragic, were relatively brief and limited in scale.

That is what makes this outbreak in West Africa so alarming. Whereas 425 people reportedly were infected and 224 people died during the 2000-2001 outbreak in Uganda, over 1,600 cases and nearly 900 deaths have been reported in West Africa. It has been six months since the first case was detected, and the rate of new infections appears to be accelerating. Stigma and fear are making it difficult to trace transmission. Moreover, the communities being impacted are highly mobile. As a result, we are seeing cases of transmission in Lagos, Nigeria and, perhaps, as far as Saudi Arabia.

According to the director-general of the World Health Organization (WHO), Margaret Chan, "If the situation continues to deteriorate, the consequences can be catastrophic in terms of lost lives but also severe socioeconomic disruption and a high risk of spread to other countries." Clearly, Ebola presents a transnational threat that must be urgently addressed.

What is different about this outbreak? Why is it so virulent? Has there been a change in the epidemiology of the virus? If not, is it spreading because affected communities don't have the necessary information or capacity to deal with it? If it is a capacity issue,

what can the international community do to help? What measures have the governments of Guinea, Liberia, and Sierra Leone put in place to contain the outbreak? What more could they do? What is the role of the World Health Organization, donors, and the United States Government? Is there a role to be played by experts from Central Africa who have experience in dealing with Ebola? And how can we better communicate so that people can get the information they need to help detect, contain, and deter infections while avoiding mass panic?

On this last point, I also would like to get better clarity on how the Embassies are communicating with American citizens in Liberia, Guinea, and Sierra Leone. Have warden messages been sent out? Are the Embassies being responsive to inquiries and requests for assistance?

I have spoken directly to President Ellen Johnson Sirleaf, who is appealing to the United States to stand by our regional friend and ally in this time of crisis. I have assured her that we will. We also stand by the selfless health professionals and humanitarians who are responding to the outbreak. We will hear today from two organizations that have been on the front lines. Each has paid a hefty price. They deserve our recognition and appreciation.

I was pleased by the announcement on Tuesday that the US Agency for International Development (USAID) and the Centers for Disease Control and Prevention (CDC) will soon make additional resources available, including the deployment of a Disaster Assistance Response Team to coordinate the U.S. Government response. This comes on top of the deployment of 50 technical experts from CDC to the region. I expect that the Economic Community of West African States, the African Union, the United Nations, and others will also step up to the plate to combat the Ebola threat.

I thank the witnesses for appearing today. I look forward to working with the Administration, our partners in West Africa, and international community to ensure that we are able to detect, deter, and contain the Ebola outbreak in West Africa, while simultaneously improving systems to prevent future outbreaks.