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Subcommittee on Africa and Global Health Policy United States Senate Committee on Foreign Relations

Hearing on "Confronting Ebola – Addressing a 21<sup>st</sup> Century Global Health Crisis" July 24, 2019 Mr. Chairman, ranking Member and distinguished Members, thank you for the opportunity to testify today on the State Department Bureau of African Affairs' efforts to combat the ongoing Ebola outbreak and humanitarian crisis in eastern Democratic Republic of the Congo (DRC). I am pleased to be here with my colleagues. This panel serves as a reminder that the Ebola response is a whole-of-U.S.-government effort, and I am grateful that my colleagues and I are in this fight.

The Ebola outbreak in eastern DRC, now declared by the World Health Organization (WHO) to be a Public Health Emergency of International Concern (PHEIC), continues to devastate the region, with tragic loss of life and disruption of social and economic livelihoods. The DRC successfully handled nine previous Ebola outbreaks, with capacity and expertise built up over decades of close cooperation with the United States, especially CDC. However, this 10<sup>th</sup> outbreak in eastern DRC – now the second largest in history – is different, as it is in a conflict zone. Health responders have been attacked and we mourn the loss of heroic Congolese and WHO health workers who have been killed. This insecure environment has challenged the international community's standard operational response, strengthened after the 2014-2016 West Africa outbreak, and hampered the U.S government's ability to stop the outbreak at its source. As a result, the Africa Bureau and Embassy Kinshasa have worked closely with technical and policy experts across USAID, the Department of Health and Human Services, and

the U.S. interagency to demand a fresh start and "reset" of the response to better address the unique context in which this outbreak is occurring.

## **Eastern DRC Context**

Eastern DRC is not new to instability. Longstanding regional and local tensions with deep-rooted grievances have fueled wars that killed millions in the 1990s-2000s and clashes persist to this day in Ituri and North Kivu provinces, where the Ebola outbreak continues to spread. Numerous armed groups operate in the region, conducting attacks that have harmed and killed thousands of Congolese civilians over decades. Despite the DRC being home to tremendous natural resource wealth, the Congolese people have seen little economic benefit, particularly in the mineral-rich and agriculturally fertile current outbreak zone. Food insecurity plagues local populations, and outbreaks of cholera, polio, and malaria continue to take the lives of innocent Congolese throughout the country. Although not specific to the East, the current measles outbreak in the DRC has sickened over 110,000 people and killed over 1,800 in 2019 alone. This overall humanitarian crisis and intercommunal violence has led to significant internal displacement as well as to Congolese fleeing to neighboring countries.

With poor infrastructure, rampant corruption, economic stagnation, and years of governance failures in the East left unaddressed by the previous DRC administration, local populations are disillusioned and fed up. An "Ebola economy" is developing, where despite our best intentions, the international response is exacerbating economic divides in a historically impoverished area. The surge of international attention on the Ebola response stands in stark contrast to a record of neglect on other health, political, and social problems the East faces. This glaring dichotomy has led local militia and frustrated community members to lash out and target healthcare facilities and workers. It underscores more than ever the necessity of engaging communities and local leaders to garner buy-in for the response.

## **U.S. Embassy Engagement**

The DRC government, alongside the UN and WHO, is leading this response, building on their decades of experience. The historic transfer of power to President Felix Tshisekedi in January 2019 has opened a new chapter in the U.S.-DRC bilateral relationship, defined by our statement announcing a Privileged Partnership for Peace and Prosperity that elevates our bilateral relationship and strengthens cooperation on issues ranging from anti-corruption to human rights to institutional strengthening, among others, and including the Ebola response. With President Tshisekedi, we are optimistic that we have a willing partner and new administration receptive to U.S. and international support to contain the outbreak. I heard this commitment firsthand during President Tshisekedi's visit to Washington in April and have seen it since demonstrated by his recent travels to eastern DRC. There, he has personally advocated for Ebola response efforts and encouraged popular local figures to lend a voice in support of community acceptance and participation in response and preparedness measures.

The U.S. government will continue to work closely with new UN Emergency Ebola Response Coordinator David Gressly, the WHO, the DRC Presidential Steering Committee on Ebola led by Director Dr. Jean-Jacques Muyembe, and the DRC Ministry of Health, to improve communication and coordination across the public health and humanitarian response. We are thankful to be working alongside Congolese medical professionals who have for years navigated logistical and bureaucratic obstacles, limited resources, community sensitization, and other challenges to protect not only the Congolese people, but the world as a whole, from the spread of Ebola.

Embassy Kinshasa is fully engaged in supporting the entire U.S. government response in the DRC. Amidst challenging circumstances, the team in Kinshasa has not only kept up with increasing policy and logistical demands from the Ebola outbreak, but also accelerated its diplomatic outreach, oversight, and reporting on the issue. The Embassy hosted permanent USAID and CDC missions prior to this outbreak. As part of the response, it has expanded its operations to support a surge of USAID, CDC, NIH, and other temporary duty personnel to Kinshasa and Goma, where we did not previously have an established presence or robust mission

support. Ambassador Hammer has proactively supported a constant stream of high-level U.S. and UN visitors to the East, to increase attention on the outbreak and demonstrate U.S. commitment to the response. Our team has leveraged its close ties with the Tshisekedi administration to encourage the closest coordination possible for information sharing, facilitate access to permissive outbreak zones, and ensure smooth logistical processes from visas to equipment turnover. From our Embassy in Kinshasa, we engage in diplomacy across the entire country, which in distance stretches almost from my driveway in Texas to here in Washington, D.C.

While Embassy Kinshasa has carried much of this weight, our Embassy teams in Bujumbura, Juba, Kampala, and Kigali have consistently urged the most senior members of their host governments to strengthen efforts to prevent the outbreak's spread. Burundi, South Sudan, Uganda, and Rwanda are vulnerable to the spread of Ebola and must remain vigilant. Our embassies are working at national, state, and local levels to provide technical and strategic assistance, support preparedness efforts, build trust in communities, improve information exchanges, strengthen border screenings and entry points, and coordinate leadership across ministries of health, elected officials, NGOs, the UN, and others. These neighbors are suffering from preparation fatigue, despite the WHO's July 17 PHEIC declaration and the recent cases in both Uganda and in Goma city, which

shares the busiest pedestrian border crossing in the world with Rwanda. Clearly, the Ebola outbreak requires we redouble our efforts. Few countries are prepared to handle a challenge like Ebola alone, so we call on all our partners to join these efforts.

## **Looking Forward**

The existing humanitarian crisis and Ebola outbreak has already caused tremendous harm to Congolese lives and livelihoods and taken a significant toll on economic, social, and healthcare services across eastern DRC. Our response to this public health emergency must also address the complex underlying factors exacerbating the outbreak and impeding its control. The State Department's Bureau of African Affairs is here to offer the diplomatic tools in our U.S. government toolbox, and work alongside host government, UN, and U.S. interagency colleagues for a unified and comprehensive Ebola outbreak response.

Thank you for your time and consideration. I welcome the opportunity to answer any questions you may have.