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More Money, Same Amount of Problems

As of February 2014, many African countries have been hit devastatingly hard by the Ebola outbreak. More specifically, the countries in West Africa such as Liberia, Sierra Leone, and Guinne desperately need help. In these areas, Ebola has devastated whole villages, and has relentlessly taken over 8,600 lives. This specific Ebola epidemic has been labeled by the Centers for Disease Control and Prevention as the largest and most deadly Ebola outbreak of all time, competing with other large epidemics in societies past. As rampant as this disease has been, the countries of Western Africa are not alone, with organizations such as the European Union alone donating upwards of €1.2 billion in funds towards research and monitoring, and many companies in the United States have also pledged millions towards financial aid, according to the U.S. Chamber of Commerce Foundation.

While the United States has already sent upwards of $17.5 million in financial aid, money is not what these desperate countries need. The Ebola crisis is not one that can be solved with cash, but with real humanitarian aid and medical supplies. Unfortunately, these Western African countries not only lack biohazard suits, but also the medical workers to fill them. That’s because the West has generally been slow to provide such aid, especially when compared to nations such as Cuba, which has provided the most immediate medical help so far. Out of the 50 Ebola Units needed to manage Ebola throughout West Africa, there are only enough foreign workers to man 30 of those Units. To make matters worse, the expected total for those infected with Ebola is supposed to triple in numbers, and only a quarter of the isolation beds needed throughout Western Africa are in place. The situation has grown so dire that one of the major medical charities leading the fight against Ebola has begun to turn down donations in an effort to make a statement that money won’t fix this crisis—only real medical help will. The problem is that many in the West worry that sending doctors and nurses will spread the pandemic into the US, causing a full-blown, worldwide epidemic. However these fears are unfounded, especially considering the extreme precautions taken thanks to a strictly enforced three-week quarantine period before visitors to West Africa are allowed to return home. Therefore, it is time to set our irrational paranoia aside and start sending West Africa the help it really needs.

The majority of the aid sent from the United States to Western Africa is not the type of aid that Western Africa is looking for. Although according to the U.S. Chamber of Commerce Foundation, some groups have been sending supplies in which can be used right from the start. Some companies such as 3M, and ACME United Corporation have sent millions of respirators used to help prevent the spread of infection, and companies like Airtel have donated headsets and cell phones to help with response groups. Groups like the Red Cross has also raised money to send biohazard suits needed in the relief zones. But other than these select groups, most corporations have been sending relief in the form of financial aid. Corporations such as Google have pledge up to $17.5 million, while UPS raised $500,000, and General Electric donated “$2 million to strengthen the fight against the Ebola disease.” After a certain point, however, relief organizations have enough money, but still lack actual supplies to fight Ebola. With this said, how would financial aid over supplies “strengthen the fight” when workers and supplies like isolation beds and biohazard suits are what’s really needed? Some predictions of the amount of infected with Ebola in the future show triple the number that are currently infected, and with the Western African countries only having a quarter of the isolation beds predicted to fight the Ebola outbreak, matters can spiral out of control very fast.

The largest issue facing the Ebola crisis is the lack of medical personnel on the ground in West Africa. With fear of the virus spreading and contaminating more and more people, the need for more nurses and doctors is growing by the day. Smaller countries have taken the main stage by sending doctors and nurses to Western Africa, while most large nations haven't stepped up. According to *The Guardian*, Cuba, with a population of 11 million people, has sent well over 500 medical workers to the front lines of the Ebola outbreak, making it the largest benefactor of medical aid thus far. Even more amazing yet is that, according to the UN, many countries in Africa have rallied together and have sent a combined total of over 850 doctors to the countries of Western Africa. Although the U.S. has sent doctors and nurses over as well, only small groups of American health care workers have been travelling over, eclipsed by the sheer number that Cuba has sent over alone. According to *The Huffington Post,* the U.S. has sent a few thousand troops to Africa to train local citizens to man Ebola camps, but these troops do not partake in the actual treatment of the patients. Great Britain is doing the same. While they plan to set up 50 treatment camps, Western Africa only has the medical personnel to run 30 of them. The shortage in personnel is, without a doubt, the greatest obstacle facing West Africa in its fight against Ebola.

# The reason so many countries are hesitant to send over medical personnel is not only a fear of contracting this highly contagious disease, but also many don’t see a need to help out with an issue that is far from home. An article in *The Guardian*, “Cuba leads fight against Ebola in Africa as west frets about border security,” points out that, “It’s natural that people care more about what’s happening closer to their lives and realities,” but “the fact that thousands of deaths in Africa are treated as a statistic, and that one or two patients inside our borders are reported in all their individual pain, should be cause for reflection.” With that being said, the chance of infection spreading to the U.S. from these personnel is extremely small, if there is any chance at all. The reason for this is the precautionary protocol of the “buffer zone.” After a staff member treats patients for an allotted amount of time, they then are quarantined for 21 days, during which they are monitored for any symptoms before returning home. If no symptoms are reported, then they are safe to leave. In fact, the U.S. has sent personnel in the past and with great success. *The* *New York Daily* *News* reports that of a group of medical workers who returned home after serving time in Africa, and after the 21-day quarantine, “none were deemed symptomatic, according to the White House.” The fear of bringing Ebola back home is only present because we are too paranoid for our own good. As Andrew Gleadle, program director for the International Medical Corps has said, although there could be a “few isolated cases [in the west], we’re not going to get an epidemic. We need more focus on West Africa where the real problem is.”

Where the fight is, is where we need to be. Although America has sent millions in financial aid towards the fight against Ebola in Western Africa, it is time to put our money where our mouths are by sending doctors and supplies. In this, the United States must take a leadership position. If other countries are willing to follow our lead of sending financial aid, surely they will do the same if the U.S. begins to send doctors and other medical personnel to Western Africa. We must lead by an example. We must show that we care about our countries pride, but also the lives of millions that are being affected by this virus, who might not live if we don’t help.