

Emergency Request Justification

Department of State,
Foreign Operations,
and Related Programs



FISCAL YEAR 2016

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**Emergency Request Justification
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Overview

Since late last year, the Administration has been working to combat the Zika virus, which is primarily spread through the bite of an infected *Aedes* species mosquito. While a direct link has not yet been confirmed, growing evidence suggests a link between the Zika virus infection and birth defects, specifically microcephaly, and other neurological diseases. There is no known vaccine to prevent or specific medicine to treat Zika infections but the Department of State and U.S. Agency for International Development (USAID) are working along with other Federal agencies to support efforts to identify, localize, and prevent continuing spread of the Zika virus throughout Central and South America and the Caribbean, and other affected areas, to limit the spread and effects of the virus, and to protect U.S. citizens. Zika is a real and present threat that requires an international response, one driven by lessons learned in dealing with other global infectious disease threats. We know that a strong comprehensive response in places where the infection is the most acute is critical to minimize transmission in the United States.

On February 22, 2016, the White House sent a request to Congress for approximately \$1.9 billion in emergency funding to enhance the ongoing efforts to prepare for and respond to the Zika virus, both domestically and internationally.

The request for Zika response includes the resources necessary to begin to more fully address the virus and mitigate its impacts. The FY 2016 request for emergency funding for the Department of State and USAID totals \$376.1 million, and will build on the Administration's ongoing preparedness efforts by supporting a range of activities: supplemental funds will provide effective communications and messaging to keep impacted publics informed; support efforts to mitigate the spread of the disease through Integrated Vector Management; leverage new technologies; and provide care and support for women, pregnant women, and children in the affected countries, while adjusting practices as new information becomes available. Funds will also be used to fight the spread of misinformation about the disease through assistance programs supporting effective journalism. Funds are also being requested to invest in critical support measures for U.S. government employees and their families through MEDEVAC operations and other actions to support employees under Chief of Mission authority, especially pregnant women, and their families at our overseas posts.

While there are still many unknowns about Zika and its impact on the health of affected communities, we must be proactive to fight outbreaks of this disease, keep our people safe, and continue to provide the necessary aid required to a world in need. This request will expand our ability to prevent, detect and respond to the Zika virus overseas and bolster our ability to fight future infectious disease outbreaks.

Summary Table

Emergency Request (\$ in thousands)	
TOTAL	376,094
Foreign Assistance Subtotal	356,500
Global Health Programs - USAID (GHP - USAID)	325,000
International Organizations & Programs (IO&P)	13,500
Nonproliferation Antiterrorism, Demining and Related Programs (NADR)	8,000
USAID Operating Expenses	10,000
Diplomatic Engagement Subtotal	19,594
Diplomatic & Consular Programs	14,594
<i>Of which, Office of Medical Services (MED)</i>	<i>8,419</i>
<i>Of which, Bureau of Western Hemisphere Affairs (WHA)</i>	<i>4,650</i>
<i>Of Which, Public Diplomacy (PD)</i>	<i>1,525</i>
Repatriation Loans	1,000
Emergencies in the Diplomatic and Consular Service (EDCS)	4,000

Foreign Assistance (\$356.5 million):

Global Health Programs – USAID: \$325.0 million

USAID requests a total of \$325.0 million for investments to support the ability of affected countries to implement vector management and control programs and reduce transmission of the virus; support related maternal and child health interventions including voluntary family planning; expand public communication and behavior change efforts; and create new incentives for the development of vaccines, diagnostics, vector control innovations, and other global health technologies. Activities would focus particularly on affected and at risk countries, which are currently in South America, Central America, and the Caribbean. While specific allocations will be refined as country needs are assessed, the following preliminary amounts are requested:

- **Roll out an effective social/behavior change communication (SBCC) campaign (\$25.0 million):** USAID will work with international, local and U.S. government partners to support a comprehensive SBCC effort in countries affected by and at-risk of Zika and other vector borne diseases. Recognizing that information about Zika and the risks of Zika are changing rapidly, USAID’s core tenet around SBCC activities is that it will address immediate needs, but over time, SBCC activities will need to adjust to reflect new scientific information as it becomes available. Additionally, SBCC activities will need to be responsive to community concerns and rumors. Empowering communities to take actions to protect themselves is key to preventing the spread of the Zika virus, as well as other mosquito-borne diseases, in those communities. As USAID’s recent experience in West Africa has shown, even in the absence of readily available medical countermeasures, communities acting to protect themselves from diseases like Ebola, Middle East Respiratory Syndrome (MERS), or vector and mosquito borne diseases such as malaria, dengue or Zika, can prove highly effective.

Specifically, USAID will work with partners in the region and internationally to identify country and region-specific needs, map out ongoing and planned Zika-related messages and information dissemination and identify gaps and requirements. USAID will provide support to countries affected by and at-risk of the Zika virus, which currently includes countries in the Latin America and Caribbean region, including by strengthening national SBCC capacity when possible to enable countries to create and implement effective SBCC campaigns. USAID will provide support for the implementation and scale-up of SBCC as needed. Working with local community and faith-based organizations, international non-governmental organizations (NGOs), the private sector, and national governments, USAID will design, produce and implement high-quality, impactful social and behavior change programs for Zika prevention emphasizing community engagement and two-way communications strategies that have proven essential in other health emergencies. These activities may include rapid assessment techniques, mass media, radio call-in shows, SMS through cell phones, social media, and television, as well as continuous monitoring. This effort will also likely include partnerships with private sector companies to leverage private sector resources and expand the reach of community messaging.

- Community implementation of integrated vector management (\$100.0 million): This funding will support implementation of a package of integrated vector management activities in communities affected by and at-risk of the Zika virus to mitigate mosquito exposure. USAID will work closely with existing country vector control programs, building upon and expanding their reach and focusing their efforts. These activities will include support for robust continuous community mobilization campaigns tailored to each community to actively reduce/eliminate standing water sources where *Aedes* species mosquitos breed; carry out focal larviciding based on vector mapping and resistance data to eliminate major breeding sites at regular intervals; and promote window and door screening to reduce mosquito entry into homes and other important community settings such as schools, hospitals and workplaces. This effort would be coupled with an SBCC campaign and be integrated into community mobilization activities to reinforce personal protection measures, such as appropriate clothing to reduce skin exposure, repellents, etc. These integrated vector management efforts will also incorporate new vector control tools as they become available including insecticide based products and interventions and non-insecticide based vector management technologies and approaches deemed effective against *Aedes* species mosquitos. These efforts will build upon the foundation of experience and learning under the successful President’s Malaria Initiative vector control programs in Africa. These efforts will also benefit from the ongoing USAID investments in the Integrated Vector Control Consortium, the only global product development partnership focused on developing vector control products and tools for use in public health programs.

- Maternal health care (\$50.0 million): Building on USAID and the U.S. government’s existing platforms for PEPFAR, Maternal and Child Health, and Family Planning, USAID will ensure that women of childbearing age, especially pregnant women in affected countries, have access to quality healthcare and the best information available. This will be critical for preventing and addressing cases of the Zika virus in pregnant women, monitoring for adverse outcomes, including cases of microcephaly, and the fear and anxiety produced by this outbreak. This funding would support updating health care workers on the latest evidence-based practices related to the Zika virus; providing support for pregnant women, including helping pregnant women and their partners access repellent to protect against mosquitoes; ensuring access to voluntary family planning information, services, and methods; and providing information about adverse pregnancy outcomes, including microcephaly and best practices for supporting children with microcephaly.

- Leveraging new technologies and reforming for the future (\$150.0 million):
 - ***USAID Global Vaccine, Diagnostic, and Vector Control Development (\$100 Million)***. There are many infectious diseases for which vaccines, diagnostics, and vector control are needed and feasible; but for which products have not been developed because of various market challenges, including for diseases such as Zika, chikungunya, and Marburg, among others. USAID recommends a strategy of both push and pull incentives to address these market challenges to bring vaccines, diagnostics, and vector control from academic and government labs and

small biotechnology firms to development and licensure by industry. Working through multi-lateral funds such as Gavi, the Vaccine Alliance, USAID would launch targeted and right-sized market incentives, as needed and warranted, to incentivize pharmaceutical companies to finalize costly late-stage development and rapidly bring vaccines, diagnostics, and vector control innovations to market. Incentives such as advance market commitments or volume guarantees have been shown to provide sufficient assurance that a market exists to both incentivize private investment in late-stage clinical trials and manufacturing capacity to meet estimated demand. The costs of the guarantees could be funded by both donors and the private sector, including foundations. USAID will work with HHS to ensure that these tools are used in the most appropriate manner possible.

- ***Global Health Security Grand Challenge (\$50.0 million)***: Working closely with the Centers for Disease Control and Prevention and the National Institutes of Health, USAID will issue a new Grand Challenge calling for groundbreaking innovations that can dramatically improve the ability to prevent, detect and respond to Zika and other future infectious disease outbreaks. Grand Challenges are rooted in the concept that science and technology when applied appropriately can have transformative effects, and that engaging the world – or applying open source bidding approaches – is extremely powerful for instigating technological breakthroughs. A Grand Challenge for Zika would build on the successes of the Grand Challenge undertaken during the Ebola epidemic through which USAID rapidly sourced new innovations to address key gaps in its response, including the development of new highly effective personal protection equipment and other health worker tools. Funding will support the further development/refinement, adaptation, testing, introduction, and scale-up of innovative solutions to address critical shortcomings in diagnostics, vector control, personal protection, community engagement and surveillance.

International Organizations and Programs (IO&P): \$13.5 million

The Department of State’s request of \$13.5 million for IO&P will allow the U.S. government to provide voluntary contributions to support our international partners including the World Health Organization (WHO) and its regional arm, the Pan American Health Organization (PAHO), the United Nations International Children’s Emergency Fund’s (UNICEF), and the Food and Agriculture Organization (FAO) to minimize the Zika threat in affected countries while reducing the risk of further spreading the virus. The specific activities include:

- **WHO Zika response (\$10.0 million)**: WHO and its regional arm, the Pan American Health Organization (PAHO), are at the center of the UN multilateral response to the microcephaly emergency in the Americas associated with the Zika virus. Resources will support the critical public health actions underway, strengthening WHO and PAHO joint capabilities as “one-WHO” and lead the coordinated UN system response to minimize the threat in affected countries while reducing the risk of further international spread. Voluntary contributions to WHO and PAHO will provide resources for these organizations to support comprehensive public health actions in support of at risk countries in the Americas, provide assistance in support of technical cooperation, disease

and vector control, preparedness, surveillance, data collection, and risk communication, and boost the research agenda in support of measures for populations affected by the Zika virus. The research agenda is ramping up rapidly with WHO coordination around development of vaccines, anti-virals, diagnostics, and vector control.

- UNICEF's Zika response (\$3.0 million): A voluntary contribution to UNICEF will respond to a nearly \$14 million appeal that it is launching for its programs to limit the spread of the virus and mitigate its impact on newborns and their families in affected countries, including the Latin America and Caribbean region. UNICEF is working with WHO/PAHO, the International Federation of the Red Cross and Red Crescent (IFRC), and the Centers for Disease Control and Prevention (CDC), and its own regional office to monitor the situation and to set up preparedness and response activities, using its network of 24 offices in 35 countries and territories in the region to provide support to national and local governments, to control the spread of the Zika virus, mitigate its impact on children and their families, in particular in the most disadvantaged communities, and incentivize the market to help drive the development of rapid diagnostics and vaccines. Building on its long-standing partnership with national and local authorities, civil society organizations and community networks, UNICEF will focus on social mobilization of the most disadvantaged communities in order to increase their protection against the virus as well as preventing its further spread. Information about vector control measures to reduce the burden in homes, community sites, and schools will be disseminated. UNICEF will also prioritize the provision of care and support to families affected by the Zika virus, including management of microcephaly through family care, social protection, early childhood development, and nutrition.

UNICEF has adopted a global response plan to monitor, assess and respond adequately to the likely continued spread of the virus across other regions of the world. UNICEF will work with the WHO and other partners to influence rapid development of critical health technologies, including via target product profiles, advocacy and engagement with the private sector. Preparedness and response systems for all potential countries at-risk will be provided through global and regional level coordination. Rapid Response Teams comprising health, Community for Development (C4D) and other technical experts will be deployed in affected countries according to needs. Monitoring systems to track progress in changing knowledge and behavior will be set-up to complement the epidemiological analysis done by PAHO and CDC. UNICEF will first establish Zika response operations in the most affected countries and will implement the strategies and activities based on assessments of needs, national capacity, available resources, and partners as well as UNICEF comparative advantage.

UNICEF Brazil has been active in supporting the Brazilian Government early in the epidemic through advocacy, communication and community mobilization, monitoring, and technical support, specific activities include: a) social media reaching 1.9 million people and engaging 83,000 users directly in raising awareness of protection and reduction of breeding grounds; and b) mobilizing directly 174 municipalities classified at high-risk for mosquito infection and potentially reaching 2.2 million people.

- Food and Agriculture Organization (FAO) (\$500,000): These resources will enable FAO to participate in efforts to apply irradiation vector-control techniques from their joint tsetse fly work in West Africa and Asia. FAO has significant reach into rural areas, which can be used for developing vector-control networks utilizing techniques and lessons learned under existing programs. FAO will deploy teams of experts to collect mosquitos for irradiation and release them back into the environment, and monitor and report the results. This strategy utilizes the Sterile Insect Technique (SIT) that has been developed at the FAO-IAEA Joint Programme on Nuclear Techniques in Food and Agriculture. This is a form of pest control that uses ionizing radiation to sterilize male insect pests that are mass-produced in special rearing facilities. SIT has been successfully used worldwide for over 50 years for various agricultural insect pests, such as fruit flies, tsetse flies, screw worms, and moths. The FAO Director General will facilitate engagement with affected countries in the region.

In addition, FAO, working with the WHO, developed a set of recommendations on the sound management of insecticides. FAO will assist affected nations with targeted interventions while ensuring that people and the environment are not exposed to health and other risks stemming from the inappropriate use of potentially dangerous chemicals. FAO's proven record in animal disease control – such as with rinderpest, avian influenza or tsetse-borne trypanosomosis – will support countries in Latin America and the Caribbean to address this problem together.

Nonproliferation, Antiterrorism, Demining and Related Programs (NADR): \$8.0 million

The Department of State's request of \$8 million in NADR funding will support a voluntary contribution to the International Atomic Energy Agency (IAEA) to leverage its expertise and technology to better diagnose the virus and prevent its spread.

- IAEA Zika response (\$8.0 million): IAEA is working to bring to bear its capacity for developing and deploying nuclear techniques to help accelerate diagnosis and – in conjunction with a multi-vector approach – help prevent the spread of insect-borne diseases. These techniques can make an important contribution to a coordinated international effort to combat the Zika virus. On an immediate-term basis, U.S. extra-budgetary support through a voluntary contribution to the IAEA would help the IAEA to bolster diagnostic capabilities in Latin America by providing IAEA-developed diagnostic equipment and specialized training. In the medium-term (6-8 months), U.S. support would enable IAEA to work with Member States to implement Sterile Insect Technique (SIT) projects to suppress mosquito populations in affected areas as part of an integrated vector management approach using other conventional means of long-term pest control. Funds would also help build IAEA's capacity, including by supporting additional training, lab space, and manpower to support these efforts. The specific lines of effort include:
 - Technical Cooperation (TC) Project: The IAEA, through its TC program, can contribute to strengthening national capacities for the population control of *Aedes* mosquito species that transmit dengue, chikungunya and particularly the Zika virus in the Latin America and the Caribbean region using integrated vector

management (IVM) approaches with a sterile insect technique (SIT) component. The request will support a proposed off-cycle regional project for capacity building for the development and application of IVM approaches with a SIT component; including the provision of necessary equipment, and the strengthening of national and regional mechanisms for mosquito population control (networking, coordination, and information exchange).

- Nuclear Sciences and Applications Project to provide temporary lab expansion for Zika-related SIT activities and experts: This project aims to expand work space for Zika-related activities by purchasing containerized laboratory modules that will be used for mosquito rearing, viability testing, and local strain integration. The IAEA mosquito SIT team currently has only two full-time team members; this project would allow the hiring of four full-time staff members.
- U.S. sponsored cost-free experts and junior professional officers: The request will support additional U.S. sponsored personnel to bolster IAEA's capacity to respond to Zika and other emergent pest-borne diseases.
- Permanent Expanded SIT Lab: The request will support an expanded SIT mosquito laboratory in the new IAEA Insect Pest Control Lab (IPCL) to be completed in late 2017. The current design of the IPCL and the space allotted to mosquito SIT is sub-optimal, especially considering the increased transmission rates of *Aedes* mosquito-borne diseases such as Zika, dengue, and chikungunya and the need for a more robust SIT capability to control the mosquito populations that are vectors for these diseases. An expanded SIT mosquito lab would ensure the IAEA will not only be able to respond to new emerging vectors but also have the work space and training facilities to help Member States maintain mosquito suppression using SIT techniques.

USAID Operating Expenses (OE): \$10.0 million

USAID is requesting OE resources to ensure that the Agency has the appropriate personnel and technical expertise to adequately support emerging programmatic needs associated with the Zika response. This funding will allow USAID to deploy new temporary staff for the initial response (~24 months) to regional platforms in all three sub-regions and bilateral Missions primarily in Central America and the Caribbean, where USAID anticipates the greatest need. The amount requested is premised on the fact that USAID currently has limited health personnel in many of these countries. In addition, the Agency requests funding to support a small contingent of temporary support staff in Washington to monitor, administer, report, and provide oversight of these new lines of effort. The request also covers travel, support for temporary duty travel for existing employees to and within the region, associated ICASS cost increases, and the support costs for USAID staff who have been evacuated due to the risk of contracting the virus.

Diplomatic Engagement (\$19.6 million):

Diplomatic and Consular Programs \$14.6 million:

The request for Diplomatic and Consular programs of \$14.6 million will provide support to ensure the safety of our staff overseas, facilitate the safety of U.S. citizens, and bolster our capacity to support and staff new levels of effort within the Western Hemisphere and other affected countries related to Zika response efforts. In addition, it provides the Department with the ability to keep U.S. citizens living or travelling abroad informed about Zika and other infectious diseases and to convene experts from the impacted regions to better leverage their knowledge and work across borders to share experiences.

- **Bureau of Western Hemisphere Affairs (WHA): \$4.7 million**
 - The request supports WHA's Zika coordination efforts and the posts most impacted by the crisis. WHA's response will require 10 to 20 short-term contractors to supplement permanent staff at the most severely affected posts, three temporary duty (TDY) Foreign Service nurse practitioners to provide care to the post community in-country, and domestic contractors to support regional coordination of response efforts, including economic policy coordination for private sector relief actions. WHA will also require funds for domestically based employees to travel to posts and to international donor conferences, as well as allowances for unaccompanied postings and related expenses.

- **The Office of Medical Services (MED): \$8.4 million**
 - The request for MED includes funding for emergency medical evacuations (medevacs) during the Zika emergency to protect the health of pregnant U.S. government personnel under Chief of Mission authority and their eligible family members assigned to the affected areas. The Department is offering immediate obstetrical (OB) medical evacuation to the United States, a potentially significant augmentation to the standard OB medevacs routinely offered at approximately 45 days pre-partum. Under current practice, evacuated Department employees or eligible family members are entitled to 90 days of per diem payments during their stay in the United States. Early evacuations will result in as many as 200 days of per diem payments for each evacuee and accompanying minor children, at an estimated cost of \$6.0 million. This request includes providing OB medevac services (excluding airfare) for non-Department federal employees under Chief of Mission authority, not to exceed \$2.4 million and until enactment of FY2017 appropriations. Additionally, the request includes funding for a contractor to process additional medevac orders and requisite vouchering.

- **Public Diplomacy and Public Communication \$1.5 million**
 - As global concern heightens over the emergence and rapid spread of Zika in the Americas and its suspected associated neurological disorders in Brazil, communicating well, accurately and consistently is a challenge not only for the United States but for local health officials in all affected countries. The Bureau of Oceans and International Environmental and Scientific Affairs (OES) would use

\$75,000 of the requested funding to support an International Visitors program administered by the Bureau of Educational Cultural Affairs that would bring 10 to 12 mid-level public health professionals from affected countries to the United States for education on mosquito eradication from the CDC and a municipal or regional mosquito control authority. Requested funds would also be used to sponsor a reporting tour that would provide approximately 10 journalists from affected countries with briefings on medical research and Zika control efforts from the CDC and other U.S. experts (\$50,000). A total of \$500,000 is requested to support OES's Department-wide public communication on overseas Zika response efforts, including travel alerts, and educational materials for U.S. embassies to distribute to the public. The United States could play an important role by organizing, planning and sponsoring a conference for health communicators from impacted countries to share best practices, coordinate strategic messaging and create a network across the region of health communicators. This would become an important mechanism to combat misinformation, create locally appropriate public health messaging and look to create partnerships to ensure people take appropriate actions to minimize the possibility of contracting Zika infections.

- In WHA, the requested \$600,000 will support expansion of public outreach efforts regarding the U.S. response. Posts will build on early successes engaging local governments and media outlets to provide accurate and locally targeted information about the U.S. response to Zika. WHA will also coordinate with the Centers for Disease Control and Prevention and the Department of Health and Human Services to develop messaging on U.S. efforts regarding mosquito eradication and Zika prevention. The request includes \$100,000 to partner with the Voice of America/Broadcasting Board of Governors to produce and disseminate reports to VOA's worldwide television, radio, and web audience of more than 164 million people a week.

Repatriation Loans Program: \$1.0 million

This request would allow the Department to finance loans to destitute U.S. citizens who are looking to return to the United States from Zika-affected areas, including U.S. citizens who have contracted or been exposed to Zika and require treatment in the United States, or citizens who may need to be evacuated to the United States for non-Zika causes because the local medical system is overtaxed by Zika demands. At the FY 2016 subsidy level, this funding would allow up \$1,880,406 of additional loan capacity.

Emergencies in the Diplomatic and Consular Service (EDCS): \$4.0 million

The request will fund emergency evacuations of U.S. government personnel and U.S. citizens from Zika impacted countries, and other extraordinary needs that might arise at posts. Such evacuations may be required in the event of Zika-related interruptions of commercial transportation services.