



Emergency Preparedness

Ad-hoc Funding: The U.S. Response to Ebola in Africa

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As one of the few nations with the resources, capabilities, and political will to provide large-scale, international assistance, the United States frequently responds to global crises requiring humanitarian intervention. The Ebola outbreak is the most recent emergency to elicit a whole-of-government response, aimed at helping stricken African countries while preventing an Ebola outbreak in the United States. The scale of the crisis has exceeded the capacity of the U.S. Centers for Disease Control and Prevention (CDC), the U.S. Agency for International Development (USAID), and the Defense Department to fund their response operations; as a result, they have had to tap existing accounts, reprogram resources, and request supplemental funding from Congress. These ad hoc funding measures are common for international response efforts, which are not generally well-resourced in formal budgets. Although these “just-in-time” measures for resourcing are certainly feasible, they may adversely affect the quality and efficiency of U.S. Government support to international emergencies by increasing the time required and uncertainty of reimbursement for agency planning and execution of time-sensitive life-saving missions.

Shortly after the first reported case of Ebola in the current outbreak, the United States mounted a whole-of-government effort to contain and eliminate the epidemic.[i] Officials from the CDC, USAID, and other U.S. Government agencies deployed to West Africa to assist the response by conducting surveillance, contact tracing, data management, laboratory testing, and health education.[ii] Despite these efforts, new Ebola cases emerged in Guinea, Liberia, and Sierra Leone—more than 9,000 confirmed cases and more than 4,800 deaths.[iii] To support the civilian-led response in the affected countries, in October President Obama ordered the deployment of up to 4,000 members of the U.S. military to help build an infrastructure to facilitate the transportation of personnel, equipment, and supplies.[iv], [v] However, as more U.S. Government agencies assist in the fight against Ebola, funding requirements and complexities increase.

Only by simultaneously tapping separate agency funding streams and requesting additional funds from Congress has the Administration been able to finance such a large effort. For example, an ad-hoc method often used for funding emergency response that was leveraged for this effort is an emergency injection of funding from Congress. In September, Congress granted a Presidential request for an additional \$88 million to help combat Ebola: \$30 million for the CDC and \$58 million for the Biological Advanced Research and Development Authority to cover the cost of drugs, vaccine development, and personnel. Congress approved the money as part of a continuing resolution to keep the U.S. Government funded through December.[vi] In November, the Administration requested an additional \$6.18 billion in emergency funding from Congress to help meet immediate and long-term needs: \$4.64 billion for immediate response and \$1.54 billion for future Ebola-related contingencies.[vii]

The emergency request is pending the passage of an appropriations bill by Congress and the Senate

Appropriations committee will hold a hearing later this month to consider the request and ask questions to the administration.^[viii] It is unclear how long this process will take as the fight against Ebola continues, but the President has said that without these additional resources, agencies will be unable to control the epidemic, mitigate its impacts, or ensure adequate domestic preparedness.^[ix] Although these funding injections and emergency requests provide “just-in-time” resourcing, one drawback is the limited continuity they offer agencies with domestic and international operations that depend on predictable, timely, consistent cash flows. A lack of reliable financing could result in an under-resourcing of the emergency response phase and may hinder operational effectiveness and the ability to save lives.

Reprogramming funds between accounts is another common practice for financing emergency operations that is being applied during this Ebola response. The Defense Department requested \$1 billion from Congress to fund its Ebola response because there were inadequate reserves in its Overseas Humanitarian, Disaster Assistance and Civic Aid account, which typically resources its international disaster relief operations. As an ad-hoc workaround, the department requested the reprogramming of supplemental funds set aside to resource its Overseas Contingency Operations or war efforts.^[x] This reprogramming request required sign-off from four Congressional Defense committees, three of which restricted spending until Administration officials provided more detailed planning information on troop deployment.^[xi] While reprogramming funds between accounts is standard practice, it can add time and complexity to emergency responses, where delays can result in lives unnecessarily lost. Moreover, opposition from Congress can further delay the process. Requests could also be denied or modified, which might jeopardize the health and security of those relying on U.S. Government assistance.

Exploring how current methods of funding and reimbursement affect the efficiency and quality of U.S. Government response to international pandemics and large-scale natural disasters may prove useful for future emergency response planning. History provides a precedent for such a study: senior stakeholders involved in the U.S. Government response to previous large-scale foreign disasters cite similar funding challenges in the Indian Ocean Tsunami, the Haiti Earthquake, and the 2011 Japan disaster.

2004 Indian Ocean Tsunami

To cover the cost of the U.S. Government response to the Indian Ocean tsunami, President George W. Bush requested a \$950 million supplemental from Congress six weeks after the tsunami struck.^[xii] \$350 million of this supplemental was intended for the reimbursement of the Defense Department and USAID.^[xiii] Andrew Natsios, USAID Administrator at the time, told a Senate panel that he was concerned that USAID’s humanitarian budget and global operations could be negatively affected by a delay in the passage of the budget containing the supplemental funds, \$123 million of which was earmarked for USAID reimbursement.^[xiv] The Indian Ocean disaster highlights the funding uncertainties that are inherent in the current model used to reimburse U.S. agency response to large-scale disasters.

2010 Haiti Earthquake

Funding and reimbursement of the U.S. Government response to the Haiti earthquake was also executed through ad-hoc mechanisms. Six months after the earthquake, a supplemental bill to amend the budget for the fiscal year was approved to provide relief, reconstruction, and reimbursement funding to the Departments of Agriculture, Defense, Health and Human Services, Homeland Security, and the Treasury, along with USAID and the Broadcasting Board of Governors. Federal agencies and the military alleviated budgetary constraints by sharing the cost of the response.^[xv] An independent review highlighted how reimbursement facilitated cooperation among the military and other agencies,^[xvi] implying that prior to reimbursement, insufficient funding and/or cost-sharing challenges hindered coordination and response.

2011 Japan Earthquake, Tsunami, Nuclear Accident

The U.S. Government’s coordinated response to Japan’s triple disaster was funded and reimbursed using ad-hoc workarounds because existing mechanisms were unable to account for domestic agencies that were neither funded nor authorized to operate outside the United States. Also, the nuclear element of the disaster revealed gaps in applying humanitarian assistance and disaster relief funding toward foreign consequence management of events involving contamination from a chemical, biological, radiological, or nuclear source. Some stakeholders argued that there should be a more organized and equitable system for funding domestic agencies and managing foreign consequence management money.^[xvii] The scope and complexity of Japan’s triple disaster overwhelmed the ability of USAID and the Defense Department to fund their response and forced the Defense Department to reprogram funds from an emergency supplemental appropriated for Haiti one year earlier.^[xviii] The residual Haiti funding enabled the department to operate in Japan without having to request more money from Congress, permitting timely, efficient operations to continue.^[xix] Without this leftover funding, agencies may have needed to take funding out of their operations budgets, affecting their normal missions and/or limiting their effectiveness in assisting a critical U.S. ally.

Options for Funding Effective Foreign Disaster Assistance

Funding is a contentious issue, and there is significant debate over how best to budget for a future disaster or pandemic. Alternative funding and reimbursement mechanisms that improve the effectiveness of a whole-of-government response may exist. For example, appropriating a larger amount of money annually to responding agencies such as USAID, the Defense Department, and CDC could decrease the need for future emergency supplemental requests. However, an austere budget environment may challenge attempts to increase baseline budgets. Congress may prefer to use supplemental appropriations as a means of exerting direct oversight of expenditures case by case.^[xx] Overall, the Ebola crisis is a reminder that sufficient and timely resourcing will be needed for the next emergency and that there may be merit in taking a deeper look into how operating budgets affect the efficiency and quality of whole-of-government response to

international pandemics and large-scale disasters.

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Image courtesy of the Department of Defense via wikimedia. Image Resized.

[i] "The U.S. Response to the Ebola Epidemic in West Africa," White House fact sheet, October 6, 2014, <http://www.whitehouse.gov/the-press-office/2014/10/06/fact-sheet-us-response-ebola-epidemic-west-africa>.

[ii] "The Administration's Response to Ebola," White House website, <http://www.whitehouse.gov/ebola-response>.

[iii] "West Africa—Ebola Outbreak," USAID Fact Sheet #4 (FY15), October 22, 2014, <http://www.usaid.gov/ebola/fy15/fs04>.

[iv] "Department of Defense Press Briefing by General Rodriguez in the Pentagon Briefing Room," October 7, 2014, <http://www.defense.gov/Transcripts/Transcript.aspx?TranscriptID=5515>.

[v] "Remarks by the President at the Pentagon" after meeting with Defense Department leaders, October 8, 2014, <http://www.whitehouse.gov/the-press-office/2014/10/08/remarks-president-pentagon>.

[vi] "President Obama Pledges Additional Funding & Military Assistance to Combat Ebola," Global Health Council, September 8, 2014, <http://www.globalhealth.org/president-obama-pledges-additional-funding-military-assistance-combat-ebola/>.

[vii] "Emergency Funding Request to Enhance the U.S. Government's Response to Ebola at Home and Abroad," White House fact sheet, November 5, 2014, <http://www.whitehouse.gov/the-press-office/2014/11/05/fact-sheet-emergency-funding-request-enhance-us-government-s-response-eb>.

[viii] It is not yet clear how Congress might pass the supplemental; they could pass it as a stand-alone bill, or as part of either the FY15 appropriations bill or CR (James Weiss, Technical Analyst, Analytic Services and former Congressional Staffer).

[ix] Ibid.

[x] Michael D. Lumpkin, Assistant Secretary of Defense for Special Operations and Low-Intensity Conflict, statement before the House Committee on Oversight and Government Reform, hearing on "The Ebola Crisis: Coordination of a Multi-Agency Response," October 24, 2014, <http://oversight.house.gov/hearing/ebola-crisis-coordination-multi-agency-response/>.

[xi] Austin Wright, "Ebola Funding Still Held Up on the Hill ...," Politico Morning Defense, October 10, 2014, <http://www.politico.com/morningdefense/1014/morningdefense15626.html>.

[xii] Statement by President George W. Bush on Additional \$950 Million for Tsunami Relief, February 9, 2005, <http://georgewbush-whitehouse.archives.gov/news/releases/2005/02/20050209-18.html>.

[xiii] "Tsunami Response: Lessons Learned" (from the December 26, 2004, Indian Ocean earthquake and tsunami), Senate Foreign Relations Committee hearing, February 10, 2005, p. 142.

[xiv] Ibid., p. 63.

[xv] USAID, *Independent Review of the U.S. Government Response to the Haiti Earthquake*, Final Report, March 28, 2011, p. 83.

[xvi] Ibid.

[xvii] *The 2011 Earthquake, Tsunami, and Nuclear Accident in Japan: Coordinating the U.S. Government Response*, Banyan Analytics case study, January 2014, p. 33.

[xviii] Ibid, p. 28.

[xix] Ibid.

[xx] Bruce R. Lindsay and Justin Murray, "Disaster Relief and Supplemental Appropriations for Disaster Relief" (Summary), Congressional Research Service report, August 5, 2013.