



[WARRING South Sudanese factions were meeting Monday in Tanzania in the latest bid to end a 10-month civil war in which thousands of people have been killed, a presidential aide said. Peace talks to find a lasting solution to the conflict that broke out on December 15 between factions loyal to President Salva Kiir and his former vice president Riek Machar have been repeatedly interrupted.]

BURUNDI :

Bozouls accueille la ministre de l'agriculture du Burundi
le 21/10/2014/ladepeche.fr

Le contexte et les problématiques posées par le développement agricole du Burundi n'ont rien de comparables avec ceux qui concernent l'agriculture française. Cependant, s'inscrivant dans une politique volontariste de développement de l'agriculture et de l'élevage dans son pays, le ministère burundais de l'agriculture a fait le choix de s'inspirer du modèle français dans ce qu'il a de meilleur tout en étant vigilant sur des pratiques qui, dans le passé, ont pu donner des résultats éventuellement discutables.

Sobac

Dans le cadre d'un voyage d'études techniques dans le Sud de la France, Odette Kayitesi, Ministre de l'Agriculture de la République du Burundi, accompagnée d'une dizaine de ses collaborateurs, a fait étape à Bozouls dans le but de découvrir et visiter l'entreprise SOBAC et les produits qu'elle développe pour favoriser la fertilisation des sols de manière naturelle. La gestion des ressources naturelles et des techniques de fertilisation sont, en effet, au cœur de la stratégie du gouvernement burundais. Madame la Ministre ayant, en outre, la charge du Ministère de l'Environnement, a

exprimé sa volonté de projeter le développement de l'agriculture sur un mode durable et sain.

Réception

Au cours des visites techniques prévues sur sa commune, Jean-Luc Calmelly, Maire, a invité la Ministre et sa délégation pour une réception en mairie dans le but d'échanger sur cette démarche remarquable d'un pays recherchant les voies d'un développement moderne.

Les échanges ont largement concerné le produit Bactériosol, invention de Marcel Mezy, et susceptible d'offrir les bases de ce développement productif et écologique souhaité, en valorisant au mieux les ressources naturelles.

Les bienfaits de cette démarche étaient alors soulignés par le Professeur Marcel Mazoyer, directeur de la chaîne d'agriculture comparée de l'Institut National Agronomique, scientifique reconnu et supporter acharné du procédé Mezy.

Avant de rejoindre les locaux de la SOBAC puis d'aller à la rencontre d'agriculteurs bozoulais qui ont été des précurseurs dans l'adoption du Bactériosol, la délégation s'est accordée le temps d'une découverte du canyon de Bozouls et de Sainte Fauste.

Burundi : le gouvernement invité à créer une fondation à la mémoire de Melchior Ndadaye

Par : Laura/French.china.org.cn/ le 21-10-2014

A la veille du 21ème anniversaire du décès du président burundais Melchior Ndadaye, le Forum pour la conscience et le développement (FOCODE), ONG burundaise, a demandé au gouvernement de créer et financer une fondation à la mémoire de cet ancien chef d'Etat assassiné le 21 octobre 1993 par ses services de sécurité.

"Le FOCODE recommande au gouvernement du Burundi d'organiser et de financer une Fondation chargée de promouvoir la mémoire du Président Melchior Ndadaye ainsi que l'idéal et les principes de la démocratie dans les nouvelles générations burundaises", a indiqué le président du FOCODE, Pacifique Nininahazwe lundi à Bujumbura lors d'une conférence de presse.

"En dépit de son statut de héros de la démocratie, le président Ndadaye reste méconnu de la majorité des burundais, spécialement de la nouvelle génération des citoyens nés depuis son assassinat. Certains gardent de lui un mauvais portrait dépeint par ses adversaires politiques, d'autres de fausses idées et des préjugés suite à l'absence d'une dissémination de l'idéal pour lequel il s'est battu. Ses compagnons et l'Etat du Burundi gardent une dette morale envers la société burundaise pour n'avoir pas su promouvoir les idées du président assassiné", a-t-il ajouté.

M. Nininahazwe a par ailleurs déploré que 21 ans après, aucun effort n'a été fourni pour déterminer les circonstances de la mort de ce premier président burundais démocratiquement élu.

Pour le président du FOCODE, l'essentiel est qu'il y ait une expression de volonté politique pour établir toute la lumière sur les assassins du président Ndadaye via une justice bien rendue et ce quel que soit le canal emprunté - juridiction burundaise ou une juridiction internationale.

"Tous les pouvoirs qui se succèdent à Bujumbura depuis son assassinat, qu'ils soient du Front pour la Démocratie au Burundi (FRODEBU, parti dont Melchior Ndadaye était membre fondateur, ndlr), de l'Union pour le Progrès National (UPRONA) ou du Conseil National pour la Défense de la Démocratie (CNDD FDD, parti au pouvoir aujourd'hui, ndlr) brillent par leur inaction sur ce dossier", a-t-il indiqué.

Melchior Ndadaye a été assassiné trois mois après accession au pouvoir, après les élections démocratiques que son parti FRODEBU a largement remportées.

RWANDA :

East Africa: Rwanda Deserves Equal Access to EAC Markets

The Independent (Kampala)/By Eric Kabeera/20 October 2014

Valentine Sendanyoye Rugwabiza, the new Rwandan minister for East African Community affairs, is a former Deputy Director-General of the World Trade Organisation (WTO) and has extensive work experience in senior government and private sector positions after serving for three years simultaneously as Rwanda's Permanent Representative to the UN in Geneva, Head of Delegation to the WTO, and Ambassador Extraordinary and Plenipotentiary to Switzerland. She was adviser at the Council of Economic and Social Affairs in the Office of the Rwandan President in Kigali. She is a founding member of the Rwandese Private Sector Federation, the Rwanda Women Entrepreneurs' Organisation, and the Rwandese Women Leaders' Caucus.

During her tenure as Rwanda's ambassador, she was Coordinator of the African Group in the WTO and was one of the two ambassadors representing the LDCs in the Integrated Framework Working Group. She initiated the Integrated Framework in Rwanda. When she returned to Kigali last year, she was appointed CEO of the Rwanda Development Board. She spoke to The Independent's Eric Kabeera.

As new minister, what are your areas of focus? What do you want to achieve?

I may be new as a minister but Rwanda's commitment to regional integration is not new and I'm guided here by Rwanda's priorities in EAC integration process. We are not starting from scratch, a number of things have been achieved. We are looking at what the maximum returns for Rwandan citizens, maximum return for business and for professional bodies and associations are. The Customs Union that started being implemented brought a number of benefits especially at the beginning of this year on the Northern Corridor and now on the Central Corridor. The trucks turnover is increasing and it has doubled. This is one of the areas we need to consolidate our efforts to ensure that we benefit more.

The Central Corridor is still in pilot phase and we are implementing the Single Customs Territory on products like fuel products, grains, and motorcycles. We are planning to go to a full rollout in November and thereafter we will be able to assess the impact.

What about the Common Market Protocol Implementation; how far have member countries gone with it?

The Common Market Protocol will bring huge benefits once we achieve free movement of workers, services, free movement of capital, and the right of establishment in any of the EAC countries. Once implemented Rwandans and their companies will be able to establish themselves in any of the EAC countries and be treated as nationals. We know that comes with huge gains in terms of growth in their businesses but also huge gains in terms of employment. We are still at very early implementation but we are going to focus on that. We have to advocate for full implementation of the Common Market Protocol. The third area is on the survey we conducted in the ministry but

there is low awareness. We want close active involvement of the business community in the integration process. It will turn opportunities into actual benefits so they need to be on board because they need to know the issues we are confronted with. We need active involvement of all; Non-government actors, civil society, and the media to become our partners.

How has single customs territory benefited Rwanda?

The Northern Corridor started being implemented in January 2014 and we have seen the cost of a container of goods from Mombasa to Kigali reduced by US\$1000. This is not little money. In terms of time, we have seen a dramatic drop in the time it used to take and it moved from 21 days to five days to transport a container from Mombasa to Kigali. We are going to conduct the same assessment on Central Corridor because it's now being implemented.

What about the Non-Tariff Barriers (NTBs)?

This is where we have the most visible progress and achievements. Here we speak louder to the business community. More than 17 NTBs have been removed and we do have more or less 20 that are still in place and less than 10 that are new on both corridors.

How possible is the full implementation of Common Market Protocol? Is free movement of labor, capital, and others, be possible in the EAC?

It's not easy but what show that it is feasible are the ingredients required to make it happen. It is the political will and it's there in all five states. It's absolutely a necessary condition but it's not sufficient to make that happen. We now have to look at what is in place. There are a number of legislations that need to be harmonised. We need to look at what is required for an engineer from Rwanda to be able to operate in Kenya. So we need to go for all these requirements. We need to establish the mutual recognition of qualifications. We also need to go for the checklist of all the policies in the respective countries that are discriminative of other EAC countries and amend them. It involves a lot but once the political will is there and there is involvement of all partners, especially the professional bodies themselves, then it gives us the steam we need.

When you look the Rwanda private sector, it is still not developed like Uganda or Kenya and you're now opening up the market. Are there some initiatives you're putting in place to ensure that Rwandans compete favourably on the market?

Integration is a multi-way process. On the side of Rwanda, our performance in terms of implementing our commitments is good; which is why for example today Kenyans can come to Rwanda and get work permits without paying for them. This means we have to get an equal access to other EAC member countries. Either as workers or any other Rwandan who wants services in these countries. If you ask me if that is happening today; it's not happening. It is a dynamic process and our priority is to continue accelerating for implementation of the Common Market Protocol for this happen.

You tell us that the Economic Partnership Agreement (EPA) negotiations are done. When should we expect the signing?

I don't think it is a good idea to start disclosing the intricacies of the EPAs negotiations. What is important is where we are in terms of negotiations. We are at very advanced level. The remaining differences are marginal and are all solvable. Now obviously the date has been an issue and the reason why it's an issue is because of the regulations of EU stating that after Oct.1 duties will apply to all developing economies and Kenya of the EAC members will be the General System of

Preferences. In actual fact that means that Kenyan exports will be submitted to higher duties. Definitely we are closer to a deal but if you ask me whether it will happen in a week or a month, am not able to answer. But once the deal is signed, the EU has the possibilities of saying that duties that applied can still be reimbursed retroactively.

What should we expect immediately after signing the deal?

People should not be mistaken that once the agreement is signed it will dramatically change the structure of our trade with the European Union. Market access is one condition and component of competitiveness, another component is the cost; how much will it cost to produce in the community or to assemble from the community, to add value in the community. And that's where integration comes into play. If we have a large market, clearly with the economies of scale, we can become much more competitive. But it also calls for a look at the impediments to the productivity at national level. So there are a number of components to competitiveness. That is why I don't think people should be mistaken that once the EPAs are signed, overnight it will change the structure of the trade with EU. That will be disregarding other components.

RDC CONGO :

UGANDA :

SOUTH AFRICA :

Oscar Pistorius trial: Judge begins sentencing

21 October 2014/bbc.com

South African athlete Oscar Pistorius is back in court to hear whether he faces a jail term for killing his girlfriend Reeva Steenkamp.

Judge Thokozile Masipa began reading the sentence by saying that, although she had been aided by assessors, the decision was hers and hers alone.

The prosecution has called for a minimum 10-year sentence; the defence for community service and house arrest.

Pistorius was convicted of culpable homicide but cleared of murder.

'Feeling of unease'

Judge Masipa said: "Sentencing is about achieving the right balance. Sentencing is not a perfect exercise."

She said there must be a balance between retribution, deterrence and rehabilitation.

The judge began summarising the evidence brought before the trial.

She described the evidence of defence witness and social worker Annette Vergeer as "slapdash and disappointing".

Ms Vergeer had argued Pistorius would be "a lot more vulnerable than the normal man" in jail.

But Judge Masipa said she was sure prisons were equipped to cater for the requirements of a special needs inmates.

She also said she had a "feeling of unease" at what she called an overemphasis on the athlete's vulnerability.

However, she said Pistorius had made an "enormous contribution to society", in his charity work and in changing the public perception of disability.

The judge then read out a quote from previous legal opinion, saying that if sentences were too lenient, the administration of justice may fall into disrepute.

The BBC's Andrew Harding, in court, says the judge appears to be leaving herself plenty of room for imposing a prison sentence.

Pistorius, 27, an amputee sprinter who became the first athlete to compete in the Olympic and Paralympic Games, killed Ms Steenkamp on Valentine's Day last year.

He says he shot her by mistake, fearing there was an intruder in his house in the capital, Pretoria.

Ms Steenkamp, a 29-year-old model, reality TV star and law graduate, was hit three times by bullets fired by Pistorius through a toilet door.

Last month, Judge Masipa cleared Pistorius of murder, but convicted him of culpable homicide, saying he had been negligent.

The high-profile, seven-month trial has captured public attention in South Africa and beyond.

There is no legal limit on the length of a jail term, but experts say the typical maximum sentence for culpable homicide is around 15 years.

However, even after the sentence is announced in Pretoria, the case may not be over.

Both the prosecution and the defence have the right to appeal against the verdict.
'No closure'

On the eve of sentencing, Pistorius's siblings criticised the "twisted" and "sensationalised" media coverage.

Sister Aimee told South African broadcaster eNCA there was "obviously a lot of anxiety" ahead of the sentencing, and that the past 20 months had been "very taxing".

She said she felt "heartache for both my brother, our family and of course [Reeva] Steenkamp's family and her friends".

Both families would struggle to move on, she said.

"It's something that you never really get closure on... It's something that my brother will carry with him for the rest of his life.

"It is important for us that [Ms Steenkamp's family] know that she was very much cared for and loved, and accepted as part of our family in the short time that she was with us... [Reeva] had a wonderful charisma and zest for life that she just exuded and it was easy to just fall in love with her."

She added: "The truths had been twisted and manipulated, and things have been sensationalised. It causes hurt when things are also reported as fact when they are not."

Brother Carl Pistorius said the hardest part of the situation was "all the negative media, polarised publicity, twisted truths and untruths, and how that infiltrates your life regardless of whether you try to or try not to follow the media".

"It permeates the very atmosphere of everywhere you go, including those that are close to you," he said.

TANZANIA :

Warring South Sudan rivals meet in Tanzania

Date: Oct 20, 2014/newvision

WARRING South Sudanese factions were meeting Monday in Tanzania in the latest bid to end a 10-month civil war in which thousands of people have been killed, a presidential aide said.

Peace talks to find a lasting solution to the conflict that broke out on December 15 between factions loyal to President Salva Kiir and his former vice president Riek Machar have been repeatedly interrupted.

But delegations have "had successful meetings so far", Awan Riak, Minister in the Office of the President told reporters before Kiir flew to Arusha to take part in the talks.

Kiir hopes to meet face-to-face with Machar, Riak said, without giving further details or a timeframe.

It would be the first time the rivals meet since signing a ceasefire in August in Ethiopia, which like three previous agreements swiftly collapsed.

The talks in the northern Tanzanian tourist town of Arusha follow an invitation from President Jakaya Kikwete, who has also met with both leaders.

"We are hopeful that something will come out from Arusha," South Sudanese foreign ministry spokesman Mawien Makol said.

No major deal is expected, but the two leaders have not even met for almost two months.

Rebel spokesman Mabior Garang told AFP in Arusha his side was expecting to sign an agreement on the "principal of unity" of the now divided political party, the Sudan People's Liberation Movement (SPLM).

Political and military leaders have repeatedly broken promises made under intense international pressure, including visits to South Sudan by UN chief Ban Ki-moon and US Secretary of State John Kerry.

Thousands of people have been killed and almost two million have fled fighting between government troops, mutinous soldiers and ragtag militia forces divided along tribal lines.

Almost 100,000 people are sheltering in squalid UN peacekeeping bases fearing they will be killed if they leave.

Earlier this month, a group of 19 major aid agencies warned that while massive food drops had helped avert famine for now, the threat remained, and the risk grew greater the longer the war continues and the weaker the people suffering become.

AFP

KENYA :

Kenya Police Said to Use Shoot-to-Kill Policy to Fight Islamists

By Sarah McGregor/bloomberg.com/ Oct 21, 2014

As Kenyan police seek to counter attacks by Islamist militants from neighboring Somalia and crack down on spiraling crime, they're increasingly pursuing a policy of shoot first and ask questions later, according to human rights monitors.

Law enforcement officers have committed at least 176 summary executions so far this year compared with 143 in the same period last year, according to the Nairobi-based rights group, the Independent Medico-Legal Unit. It didn't provide a breakdown of how many were suspected militants and criminals.

Such methods risk stoking public anxiety about insecurity among the general public and fueling sympathy for the al-Qaeda-linked al-Shabaab militants among young Muslims, said Jonathan Horowitz, legal officer at the George Soros-funded Open Society Justice Initiative.

"Extra-judicial killings are part of a tapestry of human-rights abuses that may feel like an appropriate short-term solution, but it's deeply misguided because it creates more instability," Horowitz said by phone from Zanzibar. The violations are taking place "in the context of Kenyans combating terrorism," he said.

A constitution enacted four years ago was supposed to curb police abuses by creating agencies to investigate complaints and establish the new office of inspector-general with greater powers to act independently from the state. Police spokesman Masoud Mwinyi denied there was a "shoot to kill" policy and said credible allegations of misconduct by officers are investigated and prosecuted.

"The police frown on any behavior that endangers lives without justification," he said in an Oct. 6

interview in Nairobi, the capital, declining to comment on specific cases. Police are only permitted by law to use lethal force “in protection of life and property,” Mwinyi said.

Somalia Intervention

Attacks in Kenya soared after the government in 2011 sent troops into neighboring Somalia to fight al-Shabaab following a wave of kidnappings and the murder of a British tourist in Kenya that the government blamed on the group.

Last year the militia claimed responsibility for an attack on the Westgate mall in Nairobi that left 67 people dead and the country has faced bombings of bars, churches, and markets.

Worsening insecurity, compounded by an increase in crimes such as carjackings and break-ins, has damaged Kenya’s \$1 billion a year tourist industry, the second-biggest source of foreign-currency earnings after tea exports. Visitor arrivals fell 28 percent in the second quarter of this year, according to the Kenya National Bureau of Statistics.

Daylight Shooting

“Westgate has provided the police with the perfect excuse to say we have to contain insecurity and show we are keeping the public safe,” said Samson Omondi, Kenya National Commission on Human Rights program officer in the reforms and accountability program, in an interview at his office in Nairobi on Sept. 26. “Police are trying to use short cuts.”

Police shot dead three people at a gas station in broad daylight close to the U.S. Embassy and United Nations compound in the affluent Gigiri suburb of Nairobi in August. The police’s local commanding officer, Vitalis Otieno, said Oct. 10 he couldn’t comment on the case because an inquest into the deaths is under way.

Kenya’s Independent Policing Oversight Authority has taken action in two cases it investigated since it began operating about a year ago, the agency’s chairman, Macharia Njeru, said by phone from Nairobi on Oct. 3. They include prosecution of a policeman who refused to cooperate in the investigation of how a police bullet killed a mother breastfeeding her infant, he said.

The authority is close to concluding another 10 cases, all of them related to extra-judicial killings, he said.

‘Extralegal Means’

“We can understand the frustration of members of the public because of the lack of security, and police are under pressure to use extra-legal means to crack down on crime,” Njeru said. “You can’t rein in criminal elements by operating outside the law.”

Attempts to reform the police service have met resistance. A box containing a severed human head and the message “You are next” was sent to the office of Kenya’s National Police Service Commission Chairman Johnston Kavuludi last year, according to the British Broadcasting Corp.

Nairobi County Police Commander Benson Kibui declined to comment by phone on Oct. 10, saying that only Inspector-General of Police David Kimaiyo is authorized to speak to the media.

Other countries have faced outcries over similar policies. The South African government says it’s made strides in improving policing since former police chief Bheki Cele in 2009 urged officers to “shoot to kill.”

Poor Pay

Hampered by limited resources and poor pay, Kenya's police force is seen by the public as the most corruption-prone institution in East Africa after its counterpart in Burundi, according to the latest East African Bribery Index released last year by Transparency International.

That's encouraged public support for the police tactics.

"I think a shoot-to-kill policy in Kenya works the best because otherwise criminals can pay a bribe and be out of jail a day later," said Nyathira Wambugu, a 34-year-old woman who was held hostage at gunpoint by four men when she was eight months pregnant. The robbers eventually let her go unharmed after forcing her cab driver to withdraw money from his bank account. "Why should they get a second chance to hurt or kill someone else? Kill the criminal."

Street Justice

The widespread fear of crime sometimes prompts citizens to take justice into their own hands. In Nairobi's central business district, a random shout of "mwizi," or thief in Swahili, can cause a crowd to form, including men in business suits, throwing rocks and punches. Suspects are left with cuts and bruises and are sometimes lynched.

In 2009, Philip Alston, then the United Nations special rapporteur on extra-judicial, summary or arbitrary executions, said Kenyan police death squads under the command of senior police officials were eliminating criminals. He called for the resignation of the top Kenyan security officials.

Kenya's Anti-Terror Police Unit, or ATPU, has carried out at least 10 documented cases each of killings and disappearances, and assaulted 11 "terrorism" suspects since 2011, New York-based Human Rights Watch said in August.

Muslims for Human Rights and the Muslim Human Rights Forum have accused the ATPU of assassinating prominent religious figures. About 11 percent of Kenya's 44 million people follow Islam.

Clerics Assassinated

The murders of three well-known Muslim clerics in Kenya since 2012 were never appropriately investigated, Human Rights Watch said. They include Sheikh Aboud Rogo, who faced U.S. and United Nations sanctions for fundraising and recruiting for al-Shabaab when he died in a drive-by shooting near the coastal city of Mombasa.

Training police in evidence collection and prosecutors to build strong enough cases to secure convictions are key to winning the battle against the militants, Horowitz said.

"There is a long game that has to be committed to, but right now they are playing an inefficient short game, hoping somehow that people will be scared into ceasing their participation in violent extremism," Horowitz said. "That's no solution."

ANGOLA :

AU/AFRICA :

Ebola : pourquoi l'épidémie est terminée au Nigéria

Edité par YT avec AFP/le 20 octobre 2014

L'OMS a annoncé ce lundi la fin officielle de l'épidémie au Nigeria. "Le Nigeria est désormais débarrassé d'Ebola", a déclaré Rui Gama Vaz, de l'OMS, lors d'une conférence de presse à Abuja.

Le Nigeria est officiellement débarrassé de la fièvre Ebola, a annoncé ce lundi l'Organisation mondiale de la Santé (OMS). Quarante-deux jours, soit deux fois la période maximale d'incubation du virus (21 jours), se sont écoulés sans nouveau cas au Nigeria. "Le Nigeria est désormais débarrassé d'Ebola", a déclaré Rui Gama Vaz, de l'OMS, lors d'une conférence de presse à Abuja. L'épidémie de fièvre Ebola a fait plus de 4500 morts en Afrique de l'Ouest, essentiellement au Liberia, en Sierra Leone et en Guinée.

L'apparition d'un premier cas d'Ebola, importé à Lagos le 20 juillet via un fonctionnaire libérien, Patrick Sawyer, avait laissé craindre les pires scénarios-catastrophes dans une mégalopole de plus de 20 millions d'habitants, aux infrastructures médicales en piteux état.

20 victimes dont 8 décès au Nigeria

Pourtant, grâce à une réaction rapide et efficace des autorités, l'épidémie a été contenue rapidement et n'a fait que 20 victimes, dont huit sont mortes, dans ce pays de 170 millions d'habitants, le plus peuplé d'Afrique. Près de 900 personnes potentiellement à risque ont été suivies à Lagos et à Port-Harcourt, dans le sud pétrolier, où un collègue de Sawyer, infecté, s'était enfui, y contaminant à son tour un médecin.

Avant le Nigeria, la fin de l'épidémie a été décrétée vendredi par l'OMS au Sénégal, où un seul cas avait été importé de Guinée, mais avait pu être soigné sans faire d'autres victimes. Le cas des deux pays est étudié de près par les spécialistes cherchant à contenir l'épidémie, dont le bilan des victimes continue à s'alourdir, principalement en Afrique de l'Ouest, avec près de 10.000 cas répertoriés dont plus de 4500 sont morts depuis le début de l'année.

En plus du repérage et du suivi des personnes potentiellement à risque, le Nigeria a installé des postes de contrôle de température dans tous ses aéroports et ports. Aucune frontière n'a été fermée cependant et aucune restriction n'a été imposée aux compagnies aériennes, même si Arik, la plus grosse compagnie aérienne privée nigériane, a décidé d'elle-même de cesser ses liaisons avec le Liberia et la Sierra-Leone, les deux pays les plus durement touchés par l'épidémie.

Ebola's Economic Fallout Can't Be Quarantined in Africa

By Matthew Campbell, Chris Kay and Pauline Bax/bloomberg.com/ Oct 21, 2014

Ebola's economic effects in Africa are proving hard to quarantine even in the 49 of 54 countries that are untouched by the virus.

Corporate events are being canceled, international investors are declining to visit and multinationals are on high alert. The International Monetary Fund yesterday cut its forecast for economic growth in sub-Saharan Africa this year to 5 percent from 5.5 percent, due in part to "economic spillovers starting to materialize" from the outbreak.

The ripple effects present a fresh challenge to Africa's economic progress, which is heavily dependent on foreign investment and vulnerable to even slight shocks. Business and political

leaders say the virus is making overseas partners nervous and in some cases hurting bottom lines.

“The investors generally have all been concerned,” said Peter Sullivan, chief executive officer of Australia’s Resolute Mining Ltd., which mines for gold in Mali, bordering Ebola-stricken Guinea. “For some of them, what you find is a degree of speculation on you being impacted significantly as a result of any outbreak.”

No country has felt the psychological impact of the disease more than Nigeria, Africa’s most populous nation. With a gross domestic product of more than \$500 billion, it registered 20 cases and eight deaths. Although Nigeria was yesterday declared Ebola-free by the World Health Organization, with no new cases since Sept. 8, the stigma lingers.

Event Canceled

The Bobby Taylor Company, a Lagos-based communications firm, had to cancel an event for about 150 music aficionados from the U.S., Nigeria and South Africa late last month over Ebola fears.

“Lagos being Ebola-free is definitely something we can boast about but there’s still that twang of concern for people, the stigma that comes with us getting it in the first place,” said CEO Bukky Karibi-Whyte. “How do you really convince someone that the disease won’t touch them?”

Ebola’s effects have reached the pinnacle of Nigeria’s corporate world, which is seeking international investment to refurbish ports, build power plants and erect waterfront skyscrapers for Lagos’s burgeoning upper classes.

Dangote Group, the Lagos-based business empire controlled by billionaire Aliko Dangote, last month scrapped a planned visit by international investors to cement and sugar factories in and around the city. Some had said they were worried about Ebola. The trip hasn’t been rescheduled. Dangote declined further comment.

Lengthy Recovery

Many overseas organizations “fail to distinguish between high and low risk areas and the whole of West Africa has suffered as a result,” said Charles Laurie, the head of Africa at Bath, England-based risk consulting firm Maplecroft. For that reason, he said, “economic recovery for the region will, in all likelihood, be a lengthy process.”

The three countries still battling the virus -- Guinea, Sierra Leone and Liberia -- together have a gross domestic product smaller than Afghanistan’s and are crowded together in the far western edge of the 4,500-mile-wide continent.

That may not stop investors unfamiliar with the diversity of Africa’s 54 distinct countries from responding disproportionately to negative news.

“Psychology plays a huge role and this has taken on a life of its own,” said Michael Marshall, whose Atago Pacific Partners advises on investments in sub-Saharan Africa. “Our long-term investment is not interrupted. The numbers, demographics and all the things that have made Africa compelling are still the case.”

Worst-Hit Region

In the short term, the damage is being felt both next door to the worst-hit region and further afield, the World Bank said in a report this month trying to quantify the overall economic impact of the epidemic. Senegal, which the WHO last week said was Ebola-free, and Ivory Coast, which has had

no cases, are losing trade by closing their borders with affected countries, for instance.

In Gambia, a tourist-dependent nation of picturesque beaches and palm trees surrounded by Senegal, hotel bookings are down by 65 percent due to fear of the virus, the report said. Gambia's geographic misfortune: being located within a few hundred kilometers of Senegal's border with Guinea.

In Lagos, a metropolis of more than 20 million, early reports from malls and shops "indicate significant recent declines in demand, sometimes in the range of 20 to 40 percent," the Washington-based lender said. All told, the bank estimates, a worst-case Ebola scenario could knock about \$33 billion off of the region's GDP, an estimated \$750 billion for 2014, by the end of next year.

Tapping Brakes

Ebola fears are "tapping the brakes" for some businesspeople considering African projects, said Bobby Pittman, who advised U.S. president George W. Bush on African issues and now works as an investor based in Washington.

Some outsiders have a less-than-informed approach to the risks; Pittman said he recently received an e-mail urging him to watch out for the virus on a planned trip to Johannesburg -- which is about as far from Liberia as New York is from Paris and has never recorded a case. "I said to them, 'In Washington you may be closer to Ebola than I am,'" Pittman said.

Africa's economic boom is unlikely to take a significant hit even after the largest-ever outbreak of a fearsome disease. Thanks to resource projects, gradually improving infrastructure and the demographic dividend of a growing population, sub-Saharan Africa has vied with Asia to lead the world in growth over the last decade.

Positive News

The combined economy of the region will grow by 5.8 percent next year, with Nigeria, Zambia, and Tanzania expanding by 7 percent or more, the IMF said yesterday, and there is no shortage of positive investment news.

Intercontinental Hotels Group is developing six new African hotels, to add to 27 already in operation, while rival Marriott International Inc. works to integrate Protea Hotels, a South African-based chain with 116 hotels across the continent it bought for \$196 million last year. Both companies -- neither has hotels in the three affected countries -- said via spokesmen that they were monitoring the Ebola situation carefully.

An 1,800-mile rail link between Rwanda and the Kenyan port city of Mombasa, now under construction, will also connect landlocked Uganda to global markets. Dams for hydroelectric power are being built in Ethiopia and proposed for Congo and Mozambique.

Don't Understand

At African Alliance, an investment bank focused on the region, "we continue to take clients all over the continent and we're still very busy with that," said New York-based executive Ashley Bendell. "People who don't know Africa don't really understand the implications of the outbreak and think it's a major threat to the whole continent."

Companies with factories in West Africa are trying to prevent that. Nestle SA, the world's largest food producer, has sharply limited employee travel to the affected region and said its operations are "on high alert" for the disease. Spirits manufacturer Diageo Plc and brewer SABMiller Plc are telling employees at facilities in Nigeria and Ghana to watch out for and report any Ebola

symptoms.

The best course of action for companies is “to continue with what you do there, which is to create stability,” Nestle CEO Paul Bulcke, whose company operates in Ivory Coast, Ghana and Nigeria, said in an interview. “If all of a sudden you close all factories in Africa, that would cause more panic.”

Greater Effect

The virus is having a greater effect on home-grown African businesses that have sought to develop West Africa as an important market. At Kenya Airways, which depends in part on West African travelers to feed its Nairobi hub, annual sales may slide as much as 4 percent this year after it pulled out of Liberia and Sierra Leone, CEO Mbuvi Ngunze said Oct. 15.

MTN Group Ltd., Africa’s largest mobile provider, can’t just pick up and leave. To keep its network running in affected parts of West Africa, the company is equipping maintenance staff with protective suits for their visits to some cellular base stations.

At headquarters in Johannesburg, life continues as normal, with some exceptions. When this month MTN held one of its regular corporate affairs forums for senior staff from around the group, the crowd was slightly smaller than normal. Two executives from Guinea and Liberia were missing. The reason: because the company, wary of the risk of infection and following government guidelines, had asked them not to come.

Ebola Outbreak Update: Cuba Sends Over 450 Health Workers To West Africa, Leading Charge
ibtimes.com/October 20 2014

At a meeting with regional leaders on Monday, Cuba announced it will send nearly 300 more medical workers to Ebola-stricken countries, adding to the 165 workers that recently arrived in Sierra Leone. The response dwarfs the response of many other larger and wealthier nations and comes days after United Nations Secretary-General Ban Ki-moon called on the international community to step up their lackluster commitments to fight the virus.

President Raul Castro echoed his brother Fidel’s sentiments from over the weekend that Cuba was ready to put politics aside to respond to the Ebola epidemics in Sierra Leone, Liberia and Guinea. “We believe that we must avoid any politicization of this grave problem that would distract us from the fundamental objective, which is helping confront this epidemic,” Castro said. “Cuba is willing to work shoulder to shoulder with all other countries, including the United States.”

Former president Fidel Castro praised Cuban “medical internationalism” and reached out to the U.S. in a 400-word editorial titled “Duty Calls” for the Communist Party’s official paper, Granma, on Sunday. He said Cuba would extend an arm to the U.S. “not in search of peace between these two states,” but for “world peace,” which he said should be attempted. Castro said it was important for Cuba to respond to the Ebola epidemic because of its history and to protect Caribbean and Latin Americans.

If past disaster responses are any indication, American and Cuban workers are likely to work side by side in West Africa, but the two government won’t make a big fuss out of it. Secretary of State John Kerry praised Cuba’s efforts in West Africa. Jorge Perez, who runs the hospital where Cuba is training its doctors and those from abroad how to combat Ebola said he received a “boost” from Kerry’s comments, which he said encouraged other countries to step up to the plate.

Cuba's history of medical expertise and internationalism stems from the free health care system that Fidel Castro established when he came to power in 1961. Cuba assisted budding communist nations across the world, both medically and militarily, throughout the Cold War. Since then, Cuba has shifted to exporting M.D.s instead of AKs.

There are around 50,000 Cuban doctors working abroad for three reasons, said Juan Tamayo, former Andean Bureau Chief at the Miami Herald: it makes them money, it helps their international standing and Cuba has a huge surplus of doctors. There's a Cuban medical presence in 10 to 12 African countries. Those doctors bring in a huge amount of money to Cuba; experts expect exported medical expertise to generate \$8.2 billion for the country of 11 million in 2014. There's concern over how much of that money actually makes it back to the doctors themselves and how much is kept for the Cuban government.

There's no verified information about who is paying Cuba for the doctors or how much Cuba is charging, but Tamayo told IBTimes Cuba could be getting up to \$8,000 per month for each professional it's sending to Ebola-stricken countries. He said Brazil was recently paying \$3,000 per month for doctors there.

For Cuba, the Ebola response is business as usual. Cuban doctors flew into action to fight cholera and assist with the aftermath of the 2010 earthquake in Haiti. It did the same in Sri Lanka following the tsunami in 2004 and an earthquake in Pakistan the following year. The New York Times estimates that Cuba has sent more than 185,000 health workers abroad in the last 50 years.

Home care kits highlight gaps in West Africa's Ebola response

By Reuters/ 21 October 2014

By David Lewis and James Harding Giahvue

DAKAR/MONROVIA, Oct 20 (Reuters) - With the number of Ebola cases spiralling in West Africa and weeks remaining until treatment units promised by Western governments are built, health workers fighting one of the world's deadliest diseases are being forced to improvise.

In the "hot zones" of Liberia, where Ebola patients are being turned away from overflowing clinics, aid agencies are distributing tens of thousands of protection kits, made up of buckets, chlorine, soap, gloves, a gown and instructions on how to look after the infected in their own homes.

In neighbouring Sierra Leone, authorities advise those waiting for an ambulance to isolate the patient in a room, designate someone to treat them and ensure this person uses gloves or a towel soaked in chlorine when they are in contact.

As experts ponder how nurses treating Ebola even in Western hospitals contracted the disease, such efforts in West Africa highlight the steps being taken to bridge the gap between the care available and what is needed in the epicentre of the crisis.

Aid organisations acknowledge that getting people with Ebola into a professionally-manned treatment units is the only way to halt the worst outbreak on record, which has already killed over 4,500 people and risks claiming thousands more lives.

But with ambulances overloaded and an insufficient number of beds in treatment centres, getting the sick quickly out of their homes to avoid infecting others is a major challenge.

"Sometimes that's just not possible. When someone gets sick overnight, we have to ensure that they don't infect others," Sheldon Yett, the head of U.N. child agency UNICEF in Liberia, told Reuters.

"People really want to give help to people who are sick, but we need to ensure that when they give help to people who are sick, they don't get sick too. These kits are designed to do just that - to break the circle of transmission."

There is no known cure for Ebola and the limited stocks of experimental drugs have been exhausted. In treatment centres in West Africa, care involves preventing dehydration and helping treat other infections, with those who are diagnosed soonest faring the best.

UNICEF is supporting efforts to roll out 65 community care centres across Liberia. Units of 6-20 beds will be set up and manned by trained members of the community to look after people until they can be taken to an Ebola treatment unit.

Other organisations, like Medecins sans Frontieres (MSF) and Samaritan's Purse, are handing protection kits directly to families living in communities most at risk.

Yet the high toll the outbreak has taken on health staff - 236 dead from a total of 427 infected in West Africa - highlights how dangerous the disease is even for professionals with training and equipment.

"It's a very fine balance to try to provide adequate and efficient protection without providing full safety," said Jens Pedersen, a South African who led MSF teams in Monrovia.

"If you aren't sufficiently trained, regardless of what protective gear you use, if you don't know how to use it or know how to look after yourself and an infected patient, there's very little that protective gear can do for you."

MSF says 16 of its staff have contracted Ebola, of whom 9 have died.

Some, but not all Ebola patients evacuated to Europe and the United States for better care in western medical facilities have survived. Those evacuated were mainly aid workers.

Drug firms are fast-tracking vaccine research and GlaxoSmithKline says if current trials are successful frontline health workers in West Africa would be vaccinated early next year.

"ADAPTING"

First confirmed in Guinea's remote southeast in March, Ebola spread across the country and into neighbouring Liberia and Sierra Leone, where it has torn through ill-equipped health systems in nations recovering from years of conflict.

Medics in Liberia, home to the world's largest natural rubber operation, lacked rubber gloves to treat patients.

The global response has accelerated as cases reached the West. Hundreds of millions of dollars in aid has been pledged, the U.S. and British militaries are deploying and volunteers from across the globe are signing up to help.

Yet the effects on the ground have been slow to materialise. So far, Liberia has 620 of 2,930 planned beds for Ebola cases. In Sierra Leone, there are 346 of 1,198 planned beds.

U.N. officials say the turning point for rolling back Ebola will be when 70 percent of cases are hospitalised and 70 percent of those Ebola kills are buried properly.

Nigeria was declared Ebola-free on Monday after it successfully traced and isolated 300 people who had come into contact with an Ebola patient who brought the disease to Lagos in July.

Manuel Fontaine, UNICEF's director for West and Central Africa, said providing care in community centres was an example of the ways in which an overstretched aid community was being forced to innovate to tackle an unprecedented epidemic.

"We've worked in wars or against malnutrition where we have pretty clear protocols. But here it is about adapting," he said, adding that training and supervision, especially on how to dispose of used kits, was essential to ensuring they did not spread infection.

In Ebola units, medics follow a laborious 15-step procedure to undress without infecting themselves. Underscoring the risks even in highly-controlled environments, authorities in Spain said a nurse looking after an infected patient appeared to have contracted the disease after making a mistake.

MSF, which has led much of the medical response, says the epidemic's scale demanded "unprecedented and imperfect measures". It plans to distribute over 50,000 kits to patients turned away from hospitals and to those living in communities vulnerable to further infection.

MSF says the equipment should be for short-term use until an ambulance arrives and the kits are not intended for longer-term care. "It is just too dangerous. It is about just giving food and water," said Thomas Curbillon, head of MSF's mission in Liberia.

Samaritan's Purse, a U.S.-based charity handing out 3,000 kits and training to community members, said home care was not ideal but the lack of beds and extent of unreported cases meant it was already happening on the ground.

"Good, bad or ugly, it has been happening," Ken Isaacs, vice president of programmes, told Reuters. "We believe we can give care givers knowledge and basic equipment to take care of their loved ones and take care of themselves."

Latest estimates from the WHO warn that there could be 5,000-10,000 new cases of Ebola per week by December.

"I will acknowledge this is the least desirable option but there is no other option. We are dealing with is the reality of the situation," he said. (Additional reporting by Ed Cropley in Johannesburg; Editing by Daniel Flynn and Anna Willard)

Study: Without exit screening, 3 Ebola cases per month might fly out of West Africa
Associated Press/ Oct. 20, 2014

By MARIA CHENG, AP Medical Writer

LONDON (AP) — A new study underscores the potential danger of airplane passengers infected with Ebola leaving West Africa: If there were no exit screening in place, researchers estimate that three people with the disease might fly out of the region each month.

The hardest-hit West African nations have been checking passengers since summer, but the new work is a reminder of how much easier it could be for the virus to travel outside the outbreak region if those measures weren't in place — and that screening can't catch every case.

Since the Ebola outbreak was first identified in March, there have been only two known exported cases involving flights, one before and one after screening began in Liberia.

A Liberian-American flew to Nigeria in July and sparked a small outbreak there, which has since been contained. The second man, Liberian Thomas Eric Duncan, passed a screening when he left for the U.S. last month; he didn't have a fever or symptoms until days after arriving in Dallas.

For the study, researchers used international flight data and Ebola case tallies to calculate that — without screening — three infected people a month could fly out of the region. They noted that screening isn't foolproof: It can take up to three weeks for people exposed to Ebola to develop symptoms, so it is likely some cases will slip through.

The out-of-control epidemic has killed an estimated 4,500 people.

"As the outbreak grows, we will be seeing more international exportations of Ebola," said Dr. Kamran Kahn of St. Michael's Hospital in Toronto, the study's senior author.

He added that disaster could strike if people with Ebola fly to less developed countries. "What might happen if cases were to wind up in a slum in Nairobi or Mumbai?"

Kahn noted that there were few flights from the West Africa nations of Guinea, Sierra Leone and Liberia even before the outbreak. He and his colleagues calculated that countries most at risk of getting imported Ebola cases are the nearby Ghana and Senegal, followed by Britain and France.

The U.S. was significantly further down the list, followed by India, Kenya and Germany. The study was published online Monday in the journal *Lancet*.

"There are more and more cases of Ebola every week so the risk of exportation is also increasing every week," said Benjamin Cowling of the School of Public Health at the University of Hong Kong, who co-authored a commentary.

"Maybe the one case exported to Texas was just bad luck. Or maybe there are more cases traveling as we speak," he said.

U.S. health officials earlier this month said airport screening in West Africa had stopped 77 people from boarding planes, none with Ebola but some had malaria.

Some American lawmakers have called for a ban on travelers from West Africa. At a European Union meeting on Monday, foreign ministers scrapped the idea of a ban, reasoning people from West Africa would simply go elsewhere en route to Europe. In the meantime, the U.S. and other countries are now checking travelers from West Africa.

Health officials have repeatedly said the only way to stop exported cases is to stop the epidemic in West Africa.

"As long as Ebola continues to spread in Africa, we can't make the risk zero here," said Dr. Tom Frieden, director of the U.S. Centers for Disease Control and Prevention.

UN/AFRICA :

US/AFRICA :

More US troops arriving in West Africa for Ebola fight

By Chris Carroll/Stars and Stripes/October 20, 2014

WASHINGTON — More U.S. troops are arriving in West Africa to help fight an Ebola outbreak that has claimed more than 4,500 lives, but the rainy season is causing a delay, the Pentagon announced Monday.

Slightly more than 500 servicemembers are now in Liberia to build treatment centers and provide logistical support. Another 115 are in Dakar, Senegal, at an “air bridge” transportation hub to support the mission, Pentagon spokesman Col. Steve Warren told reporters.

About 80 more troops will arrive by Wednesday, he said, and thousands of soldiers are scheduled to deploy to the country in the coming weeks. Officials say military personnel will not be assigned to patient treatment, and have repeatedly said there is little risk of infection.

But because of heavy rains, completion of a 25-bed field hospital that officials earlier said would be ready to open in mid-October has been delayed until Nov. 5, Warren said.

The first of 17 planned military-built Ebola treatment units is expected to open in Liberia later this month. Two more should open in early November, Warren said.

Health officials say separating sick people from those not yet infected is key to controlling the disease. To help determine who needs to be isolated, Defense Department mobile testing labs operating in Liberia have diagnosed blood samples from more than 1,300 patients, he said.

The Pentagon is also preparing for the possibility of domestic Ebola emergencies, announcing the formation of a 30-person team that could operate inside the United States to provide military support to civilian authorities.

“We do the same thing when there are forest fires, and obviously there are firemen who are capable of fighting forest fires,” Warren said. “Same situation here – this is planning, this is creating a team who if requested ... can support a specific location.”

The team of five infectious disease doctors, 20 critical care nurses and five infectious disease protocol trainers will soon begin a seven-day training course at Fort Sam Houston, Texas, for specific Ebola control measures taught by the U.S. Army Medical Research Institute of Infectious Diseases. After that, they’ll remain on standby for deployment within the United States for 30 days.

The team would deploy at the direction of Secretary of Defense Chuck Hagel, but Warren said the criteria for dispatching the team and command and control could vary based on circumstances.

"This is defense support to civil authorities, so depending on the situation, [the chain of command] would be worked out," he said.

CANADA/AFRICA :

Canada won't send medical staff to West Africa without evacuation plan: Ambrose
Hamilton Spectator/By Steve Rennie/The Canadian Press/21102014

OTTAWA—Canada will not send any doctors or nurses to West Africa to help contain the deadly Ebola virus without a solid evacuation plan, Health Minister Rona Ambrose said Monday.

"We are looking at options to send personnel, but at this time we are not going to be sending any more medical personnel until we feel strongly that we have a guaranteed medical evacuation," she said.

"There are very limited services available when it comes to medical evacuation. We do have an arrangement with the United States, but even their medical evacuation is limited."

Canada has an arrangement with the United States, which uses private charter airline Phoenix Air to handle Ebola patients, she added.

The U.S. Centers for Disease Control and Prevention use Phoenix Air's two Gulfstream jets to transfer patients with highly contagious diseases like Ebola.

The company, based near Atlanta, is now outfitting a third jet with special medical equipment and a zippered plastic room that uses HEPA filters to keep diseases from spreading throughout the aircraft.

Very few aircraft are equipped to evacuate Ebola patients. A Phoenix Air spokesman said he was too busy to grant an interview.

Other countries have similar arrangements with the United States. That puts a strain on the number of flights available to countries like Canada.

"We are one of many other countries that also have the same arrangement," Ambrose said. "The U.S. is obviously working with us to look at other options, but we are not the only country facing this challenge."

Australian Prime Minister Tony Abbott has also said his government will not send doctors or nurses to West Africa until it is satisfied all risks are properly managed.

Other flight options in West Africa are limited and Ambrose said commercial airlines aren't an option if someone catches Ebola.

Canadians have been in the Ebola zone for months. Some are there with the World Health Organization and others have gone with Doctors Without Borders.

The Public Health Agency of Canada has two mobile laboratories in West Africa. One mobile lab team is helping local health-care workers quickly diagnose Ebola. The other is working with

Doctors Without Borders to monitor how well prevention measures such as handwashing stations, face masks and disposal sites are working to stop Ebola from spreading.

Ambrose held a news conference Monday with the country's new chief public health officer, Dr. Gregory Taylor.

A joint exercise held over the weekend with Nova Scotia public health officials to ensure Canada is ready in the event of its first case of the disease was successful, the minister said.

The Sunday drill followed a smaller one that took place on Friday in Ottawa to test an Ebola rapid response team's ability to quickly assemble the proper gear and equip one of the four dedicated Transport Canada aircraft currently on standby in the capital and Winnipeg.

Other provinces have asked for similar drills.

The federal Liberals have tabled a motion in the Commons that would compel Ambrose, Taylor and Public Safety Minister Steven Blaney to appear at a parliamentary committee twice a month with an update on Canada's efforts to deal with the Ebola threat.

The Canadian Press

AUSTRALIA/AFRICA :

EU/AFRICA :

CHINA/AFRICA :

Ebola masks China-U.S. tussle in Africa

October 21, 2014/thehindu.com

Drawing lessons from its earlier battle with SARS, China has worked out an agile response to the Ebola virus, including dispatch of health workers to West Africa — a move that could also yield substantial diplomatic dividends in a geopolitically contested continent.

Beijing is exercising its soft power heft by trying to combat the deadly disease, which has already claimed 4,500 lives.

Ebola is turning out to be far deadlier than the Severe Acute Respiratory Syndrome (SARS) that had hit China, and spread rapidly to 30 countries in 2003. SARS had claimed an estimated 1,000 lives after infecting 10,000 patients. In contrast, Ebola has killed half of the 9,000 people that have been infected so far, mostly in the West African cluster of Guinea, Sierra Leone and Liberia.

China is attacking the disease by sending health workers, and support material to the frontlines.

Beijing has already dispatched 200 medical personnel to the affected zone, and complemented that with a \$35million pledge in medical aid to Sierra Leone, Liberia, and Guinea, as well as the World Health Organisation (WHO).

On Monday, China announced a donation \$6 million to fend food shortages in the three worst affected African countries, covering monthly emergency food supplies for 300,000 people, under the watch of the World Food Programme (WFP).

China's energetic assertion has included supplies to Africa, of an anti-Ebola experimental drug, which has been developed by its military. A Chinese private company Sihuan Pharmaceutical, whose founders are mostly military doctors, is commercialising the drug, which has been developed by a branch of the People's Liberation Army (PLA). Stocks of the medicine that are sufficient to treat 10,000 people, have already been shipped to West Africa.

China's health diplomacy is paying rich political dividends. Sierra Leone's Foreign Minister Samura Kamara has applauded China's early response, as an expression of "true friendship," tested during a time of adversity. "The generous support from China highlights that China is a genuine strategic partner of Sierra Leone and African countries.

The image of China has become even more upright and taller," he observed.

China's growing outreach in Africa, amplified during the Ebola crisis, appears to be masking a larger contest for influence with the United States. The alarm caused by the global medical emergency has also been leveraged by Washington to deepen its military foundations in Africa.

In tune with the spread of the epidemic, the U.S. decided to push 3000 troops, to fight the menace, under the umbrella of its Africa Command or Africom. These forces will establish a Joint Force Command headquarters in Monrovia, Liberia, with the stated purpose of providing "regional command and control support ... and facilitate coordination with U.S. government and international relief efforts".

This is significant as the U.S., facing stiff resistance from several local governments, had so far failed to establish a regional military hub.

Their embroilment in a strategic competition notwithstanding, Beijing and Washington, avoiding a public display of their rivalry, have publicly stated their readiness to jointly combat the virus in Africa.

Aware of the danger posed by the outbreak to its 10,000 citizens, who reside in West Africa's infection prone territory, the Chinese government is working overtime to establish facilities at home that can tackle the disease. Unlike the SARS pandemic when its response was tardy, China's National Health and Family Planning Commission (NHFPC) has already instructed local governments to test their preparedness, and identified hospitals which can treat Ebola cases.

INDIA/AFRICA :

BRAZIL/AFRICA :

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