

### Barack Obama

### Ebola Response Update

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#### AUTHENTICITY CERTIFIED: Text version below transcribed directly from audio

Good afternoon, everybody. I just want to offer a quick update on Ebola and a number of the issues that have been raised.

We know that the best way to protect Americans ultimately is going to stop this outbreak at the source. And I just had the privilege of speaking with some of the men and women who are working to do just that -- our Disaster Assistance Response Team on the ground in West Africa.

First and foremost, I thanked them for their incredible dedication and compassion. These are the folks that, from the minute that we saw this Ebola outbreak growing larger than we had seen traditionally, were deployed, were on the ground, and were helping to coordinate the countries where the outbreak is happening to make sure that the response was effective.

And it's typical of what America does best -- when others are in trouble, when disease or disaster strikes, Americans help. And no other nation is doing as much to make sure that we contain and ultimately eliminate this outbreak than America.



We deployed this DART team to West Africa back in early August. They're now the strategic and operational backbone of America's response. They've increased the number of Ebola treatment units and burial teams. They've expanded the pipeline of medical personnel and equipment and supplies. They've launched an aggressive education campaign in-country. The bottom line is, is that they're doing what it takes to make sure that medical personnel and health care workers from all countries have what they need to get the job done.

And the good news is that it's starting to have an impact. Based on the conversations that I had today with them, they're starting to see some progress in Liberia, and the infrastructure is beginning to get built out. That's thanks to the incredible work and dedication of folks from the United States who are leading the way in helping Liberia, Guinea and Sierra Leone.

And it's critical that we maintain that leadership. The truth is that we're going to have to stay vigilant here at home until we stop the epidemic at its source. And for that, we're going to need to make sure that our doctors and our health care professionals here in the United States are properly trained and informed and that they are coordinated if and when an Ebola case crops up here in the United States. But what's also critically important is making sure that all the talent, skill, compassion, professionalism, dedication and experience of our folks here can be deployed to help those countries deal with this outbreak at the source.

And that's why, yesterday, the CDC announced that we're going to have new monitoring and movement guidance that is sensible, based in science, and tailored to the unique circumstances of each health worker that may be returning from one of these countries after they have provided the kind of help that they need. In fact, tomorrow I'm going to have a chance to meet with doctors and public health workers who've already returned from fighting this disease in West Africa or who are about to go -- not only to say thank you to them and give them encouragement, but to make sure that we're getting input from them based on the science, based on the facts, based on experience, about how the battle to deal with Ebola is going and how our policies can support the incredible heroism that they are showing.

So we don't want to discourage our health care workers from going to the frontlines and dealing with this in an effective way. Our medical teams here are getting better and better prepared and trained for the possibility of an isolated Ebola case here in the United States. But in the meantime, we've got to make sure that we continue to provide the support of health workers who are going overseas to deal with the disease where it really has been raging.



It's also important for the American people to remind themselves that only two people so far have contracted Ebola on American soil -- the two Dallas nurses who treated a patient who contracted it in West Africa. Today both of them are disease-free. I met with one of them, Nina Pham, last week, and she is doing wonderfully. And I just had a chance to get off the phone with Amber Vinson, who is on her way back home and also, as many of you saw in her press statement today, is doing well also.

Of the seven Americans treated for Ebola so far, all have survived. Right now, the only American still undergoing treatment is Dr. Craig Spencer, who contracted the disease abroad while working to protect others. And we should be saluting his service. And we are focused on getting him the best care possible, as well. And our thoughts and prayers are with him.

Meanwhile, the West African nations of Senegal and Nigeria have now been declared Ebolafree. That's in part because of outstanding work led in many cases by Americans working in coordination with those countries to make sure that we did not see an outbreak there.

So the point is, is that this disease can be contained. It will be defeated. Progress is possible. But we're going to have to stay vigilant and we've got to make sure that we're working together. We have to keep leading the global response. America cannot look like it is shying away because other people are watching what we do, and if we don't have a robust international response in West Africa, then we are actually endangering ourselves here back home. In order to do that, we've got to make sure that those workers who are willing and able and dedicated to go over there in a really tough job, that they're applauded, thanked and supported. That should be our priority.

And we can make sure that when they come back they are being monitored in a prudent fashion. But we want to make sure that we understand that they are doing God's work over there. And they're doing that to keep us safe. And I want to make sure that every policy we put in place is supportive of their efforts, because if they are successful then we're not going to have to worry about Ebola here at home.

America in the end is not defined by fear. That's not who we are. America is defined by possibility. And when we see a problem and we see a challenge, then we fix it. We don't just react based on our fears. We react based on facts and judgment and making smart decisions. That's how we have built this country and sustained this country and protected this country. That's why America has defined progress -- because we're not afraid when challenges come up.



Thanks to our military, our dedicated medical and health care professionals, the men and women who I spoke to today in West Africa, that leadership and progress continues. And we're going to keep on making progress and we are going to solve this particular problem just like we've solved every other problem.

But it starts with us having the confidence and understanding that, as challenging as this may be, this is something that will get fixed -- in large part because we've got extraordinary Americans with experience, talent, dedication, who are willing to put themselves on the frontlines to get things done.

I'll have more to say about this tomorrow when I have those workers here. But I just wanted to emphasize how proud I am of the people who are already involved in this effort, and how confident I am after speaking to them that, in fact, we're going to get this problem under control.

All right? Thank you.

**Question:** Are you concerned, sir, that there might be some confusion between the quarantine rules used by the military and used by health care workers and by some states?

**President Obama:** Well, the military is a different situation, obviously, because they are, first of all, not treating patients. Second of all, they are not there voluntarily, it's part of their mission that's been assigned to them by their commanders and ultimately by me, the Commander-in-Chief. So we don't expect to have similar rules for our military as we do for civilians. They are already, by definition, if they're in the military, under more circumscribed conditions.

When we have volunteers who are taking time out from their families, from their loved ones and so forth, to go over there because they have a very particular expertise to tackle a very difficult job, we want to make sure that when they come back that we are prudent, that we are making sure that they are not at risk themselves or at risk of spreading the disease, but we don't want to do things that aren't based on science and best practices. Because if we do, then we're just putting another barrier on somebody who's already doing really important work on our behalf. And that's not something that I think any of us should want to see happen.

All right? Thank you, guys.