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September 4, 2014

Dear colleagues,

**Re: Ebola in West Africa: 'The epidemic is out of control' – We Can Make a Difference**

We live in a beautiful and rich country, but as nurses we know we can still be at risk for many communicable diseases. As nurses unions, we negotiate and sometimes fight for safe staffing and for available personal protective equipment when we need it. Imagine working in countries where the bare necessities of health care, and health care workers' health and safety, are at risk every day! West African countries health care workers are at an even greater risk today with the growing Ebola epidemic and we, as nurses, can make a difference.

CFNU is donating \$5,000 to Médecins Sans Frontières (MSF)/Doctors Without Borders and \$5,000 to Registered Nurse Response Network (RNRN) to fight the Ebola epidemic and to protect health care workers in affected countries. CFNU has a proud relationship with National Nurses United (NNU) who sponsor the RNRN program and MSF has a long history of working in countries facing health crises with a great reputation of working with nurses.

I encourage you to consider donating, and if you are a union leader in one of our health care facilities, please make a donation from your local. The cost of a full set of personal protective equipment (PPE) is estimated at approximately \$350; the International Medical Corps estimates that at least 25,000 PPE suits are needed per month to meet demand and provide the needed protection. Anything you can give will make a difference.

Remember the Japan nuclear disaster in 2011. We, as Canadian nurses unions, collected over \$54,000 to help the Japanese Nurses Association and in 2010, we collectively sent \$77,000 to the Haiti earthquake relief fund. We can do it again, my friends.

I thank you in advance for considering this good cause.

In solidarity always,

Linda Silas  
President



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For more information, please read the following:

### What are Ebola's distinctive features?

This is a rare disease. Epidemics are limited, but they create panic every time because Ebola is fatal in 25 to 90 per cent of cases. After an incubation period of two to 21 days, the virus causes a raging fever, headaches, muscle pain, conjunctivitis and general weakness. The next phase involves vomiting, diarrhea and, sometimes, a rash. The virus spreads in the blood and paralyzes the immune system. It is particularly formidable because the body does not detect these viruses right away. When the organism does respond, it is often too late. By then, the viruses have created blood clots, which block vital organs and cause major hemorrhages.

The disease is transmitted by contact with the fluids of infected people or animals, such as urine, sweat, blood or mother's milk. Family members and health care workers treating patients are at great risk of infection. The high mortality rate and bleeding are so frightening that health care workers often flee, abandoning patients.

**“This is not just a problem for West Africa, it's not just a problem for Africa. It's a problem for the world, and the world needs to respond. Like it or not, we live in an interconnected world.” --Dr. Tom Frieden, Director, US Centers for Disease Control and Prevention**

RNRN continues to work to save lives by getting protective gear to nurses who are treating patients exposed to or diagnosed with Ebola. The crisis does not show any signs of abating, and there are now almost daily reports of new infections and threats to the safety of health care workers at the front lines.

Ebola continues to spread in West Africa, with the total number of cases exceeding 3,500, and a death toll of more than 1,900 in Guinea, Liberia, Nigeria and Sierra Leone; Senegal reported their first case on August 28.

Donate now.

Médecins sans frontières (MSF)

<https://msf.donorportal.ca/MSFEN/Donation/DonationDetails.aspx?L=en-CA&G=21&F=545&T=GENER>

Registered Nurse Response Network (RNRN)

<http://www.nationalnursesunited.org/pages/rnrn-disaster-relief-fund>

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