



FACT SHEET: [REDACTED]

Global Response to Ebola Crisis

22 September 2014

The current Ebola outbreak is the largest the world has ever seen. It is no longer simply a public health crisis; it is a complex emergency, with significant, social, economic, humanitarian, political and security dimensions. The UN has been an integral part of West Africa's remarkable recovery and the Ebola crisis cannot be allowed to reverse a decade of progress for affected countries. The UN and the international community are coming together as never before to implement a robust and effective response to help the Governments and the people of Guinea, Liberia, Sierra Leone.

The strategy is built on five pillars:



A. One Team, One Vision: UN Mission for Ebola Emergency Response (UNMEER)

In response to the extraordinary situation, which demands unprecedented solutions to save lives and enhance peace and security, the overall systemic response to the outbreak will be overseen by a UN mission with a WHO component. Building on the comparative strengths of both organisations, it will be the first-ever UN emergency health mission, with a strong operations and logistical capability. The Mission will be temporary and will respond to immediate needs related to the fight against Ebola.

Rapid action: Under the leadership of the Special Representative of the Secretary-General, the mission will bring together the full range of international actors and expertise to ensure rapid action on the ground. An advance team to establish the Mission's presence will deploy before the end of the September 2014.

In partnership: The Mission will work closely with governments and national structures in the affected countries, regional and international actors, such as AU and ECOWAS, and with member states, private sector and civil society.

Uniting expertise: WHO will be responsible for overall health strategy and advice within the mission, while other UN agencies will act in their area of expertise under the overall leadership and direction of a single Head of Mission. The Mission will leverage the existing presence and expertise of UN country teams, international partners including NGOs on the ground to minimize gaps and ensure leadership.

B. Global Response to support the people of West Africa

The Governments of the intensely affected countries and people of West Africa have asked for our help. We must come together as one UN and one global community. Several member states, regional organisations, non-governmental organisations and civil society actors have responded to this call and we ask more to join.

The UN has established the Ebola Response Multi-Partner Trust Fund which will ensure a coherent UN System contribution to the overall Ebola outbreak response. The Fund is guided by the strategic priorities set out in the OCHA Overview of Needs and Requirements, totalling almost \$1 billion. The Trust Fund seeks contributions from Member States, regional legislative bodies, inter-governmental or nongovernmental organizations, businesses and individuals. If you would like to contribute please go to <http://mptf.undp.org>. Donors can also choose to channel their contributions directly to UN agencies participating in the response.

The UN applauds the courageous actions which have already been taken by governments, communities, partners on the frontlines of the response, who are exposed to great personal risk, especially Médecins Sans Frontières (MSF), the International Federation for the Red Cross and others, as well as UN entities on the ground.

C. What we need to stem a growing challenge

To rise to the challenge ahead and to prevent the further spread of Ebola, a number of urgent requirements are needed critically on the ground.

OCHA released the Overview of Needs and Requirements on 16 September 2014. It outlines the resources considered critical to effectively address the crisis across a range of objectives over the next six months by national governments, WHO, the United Nations Agencies, Funds and Programmes, and some NGOs.

The UN has compiled a list of priority in-kind requirements for the Ebola response which will augment and multiply the impact of the resources identified by OCHA. This is now being shared with all Member States. These include:

- **air lift, particularly helicopters, and maritime transport capabilities, fuel, vehicles**
- **mobile laboratory facilities** capable of movement throughout affected countries;
- **static non-Ebola medical clinics**;
- emergency **medical evacuation capability** for movement of international aid workers potentially exposed to Ebola to locations for appropriate medical care;
- 3.3 million items of high quality personal protective equipment; training
- provision of **Ebola Treatment Centres**.

The UN will do its part, but this requires collective support. The UN is not only looking to Member States, but to a wide cross-section of actors and non-traditional partners, including the international business community.

***'We need to race ahead of the outbreak – and then turn and face it with all our energy and strength.'**
UN Secretary-General Ban Ki-moon, speaking at the adoption of Security Council Resolution 2177, with over 130 co-sponsors the most in its history, 18 September 2014.*

Number of Ebola Cases in countries with widespread and intense transmission

(source WHO, 22 Sept. 2014)

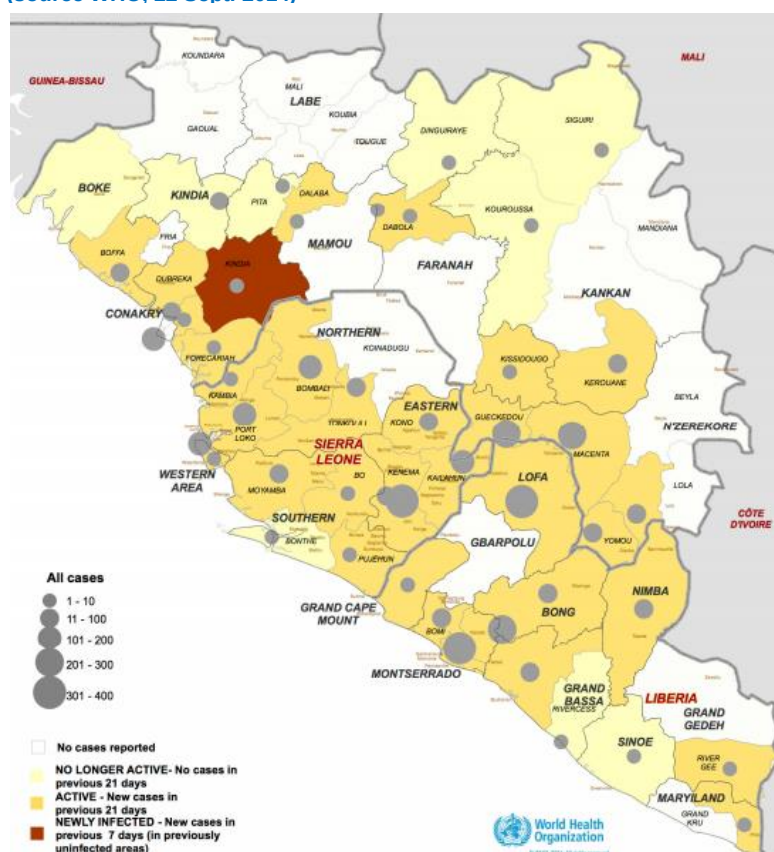
Country	Case definition	Cases	Deaths
Guinea	Confirmed	818	465
	Probable	162	162
	Suspected	28	5
	All	1008	632
Liberia	Confirmed	863	670
	Probable	1342	544
	Suspected	817	364
	All	3022	1578
Sierra Leone	Confirmed	1640	545
	Probable	37	37
	Suspected	136	11
	All	1813	593
Total		5843	2803

There are 5843 (probable, confirmed and suspected) cases and 2803 deaths have been reported in the current outbreak of EVD as at 20 September 2014 by the Ministry of Health of Guinea, as at 17 September 2014 by the Ministry of Health of Liberia, and as at 19 September 2014 by the Ministry of Health of Sierra Leone.

Data are based on official information reported by Ministries of Health up to the end of 20 September 2014 for Guinea, 17 September for Liberia, and 19 September for Sierra Leone. These numbers are subject to change due to on-going reclassification, retrospective investigation and availability of laboratory results.

Distribution of Ebola virus disease cases in countries with intense transmissions

(source WHO, 22 Sept. 2014)



The location of cases throughout the countries with widespread and intense transmission. The cumulative numbers of cases of EVD in each area are shown (grey circles). In Guinea, one confirmed case of EVD was reported in Kindia district; the first time an EVD case has been reported from the area.

Data are based on official information reported by Ministries of Health up to the end of 20 September 2014 for Guinea, 17 September for Liberia, and 19 September for Sierra Leone. In Guinea, the district of Kindia has reported its first confirmed case. The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Report on Political and Economic Developments (source World Bank Group, 17 Sept 2014)

	Short Term Impact 2014	Medium-term impact (2015 - Low Ebola)	Medium-term impact (2015 - High Ebola)
Guinea	\$130 million (2.1 pp)	-\$43 million (1.0 pp)	\$142 million (2.3 pp)
Liberia	\$66 million (3.4 pp)	\$82 million (4.2 pp)	\$228 million (11.7 pp)
Sierra Leone	\$163 million (3.3 pp)	\$59 million (1.2 pp)	\$439 million (8.9 pp)
Core Three Countries	\$359 million	\$97 million	\$809 million

Entries are in current US dollars (with percentage points of GDP in brackets where appropriate).