Your Excellency, Mr. Kutesa, President of the General Assembly,
Mr. Secretary-General,
Excellencies,
Ladies and Gentlemen,

I am pleased to be here in my new capacity as Acting SRSG and head of UNMEER to update you on the progress achieved in the Ebola response.

Since this body last convened to examine the matter, we have observed considerable progress in containing the Ebola outbreak. This positive development has been achieved through strong community ownership, the leadership of national governments and the collective mobilization of the international community.

As Mr. Secretary-General as indicated, on 9 May, 42 days after the last laboratory-confirmed case was buried in Liberia, the World Health Organization declared Liberia – once the most affected country – to be Ebola free. I congratulate Liberia on reaching this tremendous milestone.

While Liberia has been declared Ebola free, it is critical that active surveillance efforts continue in order to prevent future cross-border transmission. As President Johnson Sirleaf justly reminded us following the 9 May, we must all remain vigilant and work with neighbouring countries until the entire region has been declared Ebola free.

Excellencies,

For the past two months, Sierra Leone has reported 12 cases or fewer per week confined to areas of the districts of Kambia, Port Loko and Western
Area Urban. Whilst the majority of new cases emanate from contact lists or are explained by known epidemiological links, unexplained cases are still being reported. However, we expect that, if authorities and communities remain focused, the outbreak in Sierra Leone will follow a similar downwards trajectory to that of Liberia.

En Guinée, certains des développements récents sont plus inquiétants. De nouveaux cas ont été identifiés dans quatre préfectures, et plusieurs de ces cas ne sont pas associés aux listes de contacts connus. Ceci fait en sorte qu’il est difficile de confirmer les origines de ces chaînes de transmissions. De plus, certaines des communautés affectées résistent, parfois violemment, aux mesures sanitaires proposées de même qu’aux travailleurs humanitaires. Le gouvernement, l’ONU et leurs partenaires doivent donc intensifier leurs efforts et trouver de nouvelles façons de gagner la confiance de ces communautés.

Case incidence trends over the past fortnight illustrate that progress in fighting this outbreak will not be linear and that setbacks can quickly follow apparent gains, pointing to the need for constant vigilance to sustain the progress made.

Excellencies,

Liberia’s experience in containing its Ebola outbreak demonstrates that the last mile of the response is the hardest and most labour intensive. It requires a targeted, almost surgical, approach to identify and then tailor interventions to the specific triggers of Ebola transmission in the remaining affected localities. In this phase, early case detection, reinforcement of alert and surveillance systems and especially community engagement efforts become even more critical.

By organising “stay at home” campaigns and other forms of community engagement and reinforcing emergency health measures, the Governments of Guinea and Sierra Leone have now taken important steps to improve early case detection. The Ebola response has become increasingly granular,
moving from capitals to districts and prefectures and now to the village level.

The number of Ebola deaths and the continuing prevalence of unsafe burials, however, demonstrate that some individuals and communities remain reluctant to follow prescribed precautionary measures, or access diagnosis and treatment. Efforts are underway to better integrate community engagement with case investigation and contact tracing in order to address these triggers of transmission.

A clear lesson from past months is that where local populations are engaged, we see dramatic improvements. A more localized approach increases trust, gains access and helps overcome resistance. Furthermore, this approach helps ensure that all new cases derive from known contact lists.

Excellencies,

In preparation for the rainy season, the UN system has reinforced its operational capacities in Guinea and Sierra Leone by steeply increasing its deep-field operations. WFP has prepositioned supplies as heavy rains will impede access and increase the prevalence of other diseases that can be mistaken for Ebola, such as malaria. Under WHO’s technical lead, the UN continues to strengthen national capabilities for active surveillance, including in currently unaffected areas, in order to address any new flare-ups.

As the Ebola outbreak has shifted geographically, UNMEER has reconfigured its field presence, adapting its operational posture to the evolution of the outbreak by redeploying staff, assets and capacities to the remaining districts and prefectures with active Ebola transmission.

Excellencies,

In February, my predecessor told this body that planning had commenced for a phased transition of UNMEER’s functions and operations. I am pleased
to report that the coordinated transition to national and UN country team partners is on schedule. As planned, the UNMEER Mali office closed on the 31st March. The UNMEER Liberia office has now handed over its operations to the UN country team and the majority of its assets to national partners.

UNMEER Accra has been further downsized to a minimum presence focussed on back office support. UNMEER teams in both Guinea and Sierra Leone have developed transition plans in cooperation with their respective UN country team counterparts. The Sierra Leone Office is expected to end its operations by the end of June. A transition planning meeting was held jointly with the United Nations Development Group in Dakar in early May to validate these plans.

As UNMEER scales down, relevant UN Agencies, Funds and Programmes are scaling up to assume UNMEER’s essential functions, such as logistics, field crisis management and information management. Additional resources however are needed to enable our UN partners to bring the outbreak to a definitive end. Subsequently, the UN will assist national governments in their development of a decentralised health system.

If we heed the Secretary-General’s call to action, and intensify our efforts to remain focused on the last mile of the response, UNMEER could complete its transition by 31 July and be closed by the end of August. If, however, the epidemiological situation deteriorates, this timeline may need to be recalibrated in order to ensure that the UN’s political leverage and convening power is maintained.

Excellencies,

Nous ne pouvons pas nous permettre d’être complaisant ou de laisser la fatigue dérailler les progrès accomplis à ce jour. Seul le travail et un engagement acharné nous permettra de remporter une victoire sur Ebola.
I therefore ask this body to continue to lend the political and financial support required to bring this crisis to a definitive end. UNMEER was never envisaged to remain until the outbreak was officially declared over, but let us ensure collectively that the necessary resources are in place so that it can leave responsibly.

Thank you, merci.

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