Security Council
Sixty-ninth year

7268th meeting
Thursday, 18 September 2014, 2.45 p.m.
New York

President: Ms. Power/Mr. Dunn ....................... (United States of America)

Members: Argentina ........................................ Mrs. Perceval
Australia .................................................. Mr. Quinlan
Chad ......................................................... Mr. Mangaral
Chile ......................................................... Mr. Barros Melet
China ......................................................... Mr. Wang Min
France ....................................................... Mr. Delattre
Jordan ......................................................... Mrs. Kawar
Lithuania ..................................................... Ms. Murmokaité
Luxembourg ............................................... Ms. Lucas
Nigeria ...................................................... Mr. Sarki
Republic of Korea ................................. Mr. Oh Joon
Russian Federation ............................. Mr. Maksimychev
Rwanda ..................................................... Mr. Nduhungirehe
United Kingdom of Great Britain and Northern Ireland ........................ Sir Mark Lyall Grant

Agenda

Peace and security in Africa

Ebola
The meeting was called to order at 2.30 p.m.

Adoption of the agenda

The agenda was adopted.

Peace and security in Africa

Ebola

The President: In accordance with rule 37 of the Council's provisional rules of procedure, I invite the representatives of Afghanistan, Albania, Andorra, Angola, Armenia, Austria, Bangladesh, Belgium, Belize, Benin, Bhutan, Bosnia and Herzegovina, Botswana, Brazil, Bulgaria, Burkina Faso, Burundi, Cameroon, Canada, Colombia, the Congo, Côte d'Ivoire, Croatia, Cuba, Cyprus, the Czech Republic, the Democratic Republic of the Congo, Denmark, Djibouti, the Dominican Republic, Egypt, Equatorial Guinea, Eritrea, Estonia, Finland, Gabon, Georgia, Germany, Ghana, Greece, Grenada, Guinea, Guyana, Honduras, Hungary, Iceland, Iraq, Ireland, Israel, Italy, Japan, Kazakhstan, Kenya, Kyrgyzstan, Latvia, Lebanon, Liberia, Libya, Liechtenstein, Malawi, Malaysia, Maldives, Mali, the Marshall Islands, Mauritius, the Federated States of Micronesia, Monaco, Montenegro, Morocco, Mozambique, Namibia, Nauru, Nepal, New Zealand, Nicaragua, the Niger, Norway, Panama, Papua New Guinea, Poland, Portugal, Qatar, the Republic of Moldova, Romania, Saint Lucia, Samoa, San Marino, Sao Tome and Principe, Senegal, Serbia, Seychelles, Sierra Leone, Slovakia, Slovenia, Solomon Islands, Somalia, South Africa, South Sudan, Spain, Sri Lanka, Suriname, Sweden, Switzerland, Thailand, The former Yugoslav Republic of Macedonia, Timor-Leste, Togo, Trinidad and Tobago, Tunisia, Turkey, Uganda, Ukraine, the United Republic of Tanzania, Uruguay, Vanuatu, Viet Nam, Yemen and Zambia to participate in this meeting.

In accordance with rule 39 of the Council's provisional rules of procedure, I invite the following briefer to participate in this meeting: Dr. David Nabarro, Senior United Nations System Senior Coordinator for Ebola; Dr. Margaret Chan, Director-General of the World Health Organization; and Mr. Jackson Niamah, from Médecins Sans Frontières (MSF).

It is so decided.

On behalf of the Council, I welcome Mr. Niamah, who is joining us today via video-teleconference from Monrovia. Let me note that Mr. Niamah will be with us through part of this meeting only, so that he can return to his lifesaving work in MSF's Ebola treatment centre in Monrovia.

In accordance with rule 39 of the Council's provisional rules of procedure, I invite His Excellency Mr. Thomas Mayr-Harting, Head of the Delegation of the European Union to the United Nations, to participate in this meeting.

It is so decided.

In accordance with rule 39 of the Council's provisional rules of procedure, I invite His Excellency Mr. Têto António, Permanent Observer of the African Union to the United Nations, to participate in this meeting.

It is so decided.

The Security Council will now begin its consideration of the item on its agenda.

I wish to warmly welcome the Secretary-General, His Excellency Mr. Ban Ki-moon, and I now give him the floor.

The Secretary-General: I would like to thank Ambassador Power and the United States for having convened this meeting of the Security Council on Ebola virus disease. Only twice before has the Security Council met to discuss the security implications of a public-health issue, both times on the AIDS epidemic. Like those meetings, today's meeting on the outbreak of Ebola in West Africa is timely and clearly warranted.

The Ebola crisis has evolved into a complex emergency with significant political, social, economic, humanitarian and security dimensions. The suffering and spillover effects in the region and beyond demand the attention of the entire world. Ebola matters to us all.

The outbreak is the largest the world has ever seen. The number of cases is doubling every three weeks. There will soon be more cases in Liberia alone than in the four-decade history of the disease. In the three countries most affected — Guinea, Liberia and Sierra Leone — the disease is destroying health systems. More people are now dying in Liberia from treatable ailments and common medical conditions than from Ebola.

The virus is also taking an economic toll. Inflation and food prices are rising. Transport and social services are being disrupted. The situation is especially tragic given the remarkable strides that Liberia and Sierra Leone have made in putting conflict behind them.
National Governments are doing everything they can. I applaud the courageous actions of the Governments, communities and individuals on the front lines, including local health workers, Médecins Sans Frontières, the International Federation of Red Cross and Red Crescent Societies, and United Nations entities. The gravity and scale of the situation now require a level of international action unprecedented for a health emergency.

The leaders of the countries affected have asked the United Nations to coordinate the global response. We are committed to doing what is needed, with the speed and scale required. Under the leadership of Dr. Margaret Chan, the World Health Organization (WHO) is working to identify the best epidemiological ways to address the outbreak.

I have activated, for the first time, the system-wide organizational crisis response mechanism. Under the leadership of Anthony Banbury, an Ebola response centre is operational.

With the support of the Government of Ghana and the United Nations Mission in Liberia (UNMIL), the United Nations peacekeeping mission in Liberia, an air bridge has been established in Accra to facilitate the influx of key health responders and equipment. The United Nations Humanitarian Air Service is operating between the countries. UNMIL is adapting its tasks to the current context, and the Under-Secretary-General for Peacekeeping Operations, Hervé Ladsous, visited Monrovia last week to assure Liberia’s leaders of the Mission’s support.

In addition to the many local and international workers already on the ground, WHO, the United Nations Development Programme, UNICEF, the World Food Programme and others are actively delivering emergency assistance. The United Nations Volunteers programme has identified more than 200 health-care professionals and other experts willing to be trained and deployed.

Despite these wide-ranging efforts, the spread of the disease is outpacing the response. No single Government can manage the crisis on its own. The United Nations cannot do it alone.

This unprecedented situation requires unprecedented steps to save lives and safeguard peace and security. Therefore, I have decided to establish a United Nations emergency health mission combining the World Health Organization’s strategic perspective with a very strong logistics and operational capability. This international mission, to be known as the United Nations Mission for Ebola Emergency Response (UNMEER), will have five priorities: stopping the outbreak, treating the infected, ensuring essential services, preserving stability and preventing further outbreaks.

Under the leadership of a Special Representative of the Secretary-General, the Mission will bring together the full range of United Nations actors and expertise in support of national efforts. It will draw on the capacities of many international partners and work in close coordination with regional organizations such as the African Union (AU) and the Economic Community of West African States (ECOWAS). It will strive to ensure that these wide-ranging efforts avoid duplication, fill gaps and are aligned with the overall strategy. Our goal is to have the Mission’s advance team on the ground before the end of the month.

I have written to both the Security Council and the General Assembly with further details. I thank them in advance for their support.

Dr. David Nabarro will continue in his vital role as my Special Envoy for Ebola, providing strategic direction and galvanizing international support.

My colleagues and I will do everything we can to ensure the success of the new Mission. But its effectiveness will depend crucially on support from the international community. Our best estimate is that we need a 20-fold increase in assistance. Earlier this week, the United Nations outlined a set of critical needs totalling almost $1 billion over the next six months. One key enabler is medevac capacity, which is essential if we are to be able to give assurances to the heroic international health and aid workers who are placing themselves at personal risk while serving others.

I applaud the leadership of United States President Barack Obama, and warmly welcome his announcement that the United States will deploy 3,000 troops to provide expertise in logistics, training and engineering. I also thank the many Governments that have made contributions, including Canada, China, Cuba, the Democratic Republic of the Congo, Ethiopia, France, Germany, Ghana, Ireland, Italy, Japan, Kenya, Norway, Qatar, the Russian Federation, Rwanda, South Africa, Switzerland, Uganda and the United Kingdom. I hope that other countries with the means will follow suit. Airports in Senegal and Spain are serving as logistical hubs. The AU, ECOWAS, the European
Union, the World Bank, the African Development Bank, the Gates Foundation and the Global Fund are also engaged. We are looking to all those in a position to do so to help. The business community, for example, is well placed to contribute in the health, transport, communications and information sectors. I also appeal again to major airlines and shipping companies to resume services to the affected countries. Isolation only hampers international efforts to reach people in need.

I welcome the draft resolution to be adopted today by the Security Council. Tomorrow I will speak to the General Assembly. One week from today, we will gather at the highest level to mobilize political will to meet this extraordinary challenge. We cannot afford delays. The penalty for inaction is high. We must race ahead of the outbreak and then turn and face it with all our energy and strength. I count on the Security Council’s support and that of the General Assembly and all Member States in meeting this test.

The President: I now give the floor to Dr. Nabarro.

Dr. Nabarro: I thank the Security Council for the opportunity to be here this afternoon to talk about the outbreak of Ebola virus disease in West Africa. I had the honour to be appointed the Secretary-General’s Senior Coordinator for Ebola on 12 August, just over a month ago. Since then, I have visited the countries most affected twice, and I have also travelled to a number of capitals to describe my findings. I have had meetings with the Secretary-General and his senior team, and I have also had the opportunity to brief the President of the World Bank and other agency chiefs, particularly the President of the African Development Bank. My findings are as follows.

This is a disease outbreak that is advancing in an exponential fashion. To be precise, that means it is doubling at a particular time interval. When the incidence is plotted on a graph, it shows a curve of rapid upward acceleration. We heard from the Secretary-General that most believe that the doubling speed is about every three weeks. That means that the outbreak has doubled in extent since I was appointed.

The response is also increasing, and we heard from the Secretary-General that not only are Governments themselves doing a great deal, but many excellent intergovernmental and non-governmental organizations are also putting in additional resources. But the response is increasing at more like a linear speed; its graph would look like a straight line. What that means is that the outbreak is accelerating away from the control effort, and the longer it does that, the harder it is to get it under control and, most importantly, to enable the people of the countries affected to return to the prosperity and development they have been enjoying so much in the past 10 years.

So, given the acceleration of the outbreak and the difficulty in catching up with it, there is an increased likelihood of societal and economic challenges for the people affected. I estimate that to get ahead of the outbreak, the level of the response has to be about 20 times greater than what it is at the moment. That calculation is based on an assessment of the rate at which it is extending, but also on the recognition that any scale-up takes between one and two months to put in place.

Increasing the scale-up at that rate would be challenging enough if this were a straightforward medical problem for which the solution involved were, perhaps, a vaccine or the administration of a particular therapy. But this disease is a bit more complicated, and there are in fact about 12 different critical actions that have to be put in place for control to be properly effected. The Secretary-General outlined the five elements of the strategy, and I do not want to waste time by repeating them. But the medical part is one important element. There is also a lot of work to be done to restore basic services — health care for pregnant women, and food for people who at the moment are finding it hard to ensure that they and their families get nutrition, or even income support, because so many households, as a result of this outbreak, have experienced huge drops in their income.

So an effective, efficient and massively scaled-up response is vital for the affected countries. It is also vital for the rest of Africa and, as I think Dr. Margaret Chan will say in a minute, it is vital for the world. I am convinced that if it is properly organized, the massive scale-up can happen in the coming weeks and could in fact achieve a rapid end to the outbreak. And I am delighted that, since I returned from Conakry on Sunday afternoon, there has been incredible progress.

First, there was a strong announcement on Monday in Brussels by the European Union about its collective commitment. On Tuesday, we heard the powerful statement of support by the United States, along the lines that the Secretary-General identified. A further major set of commitments was outlined at an event in Geneva chaired by Emergency Relief Coordinator
Valerie Amos. On Wednesday, there was a strong statement from the British Government. Offers began coming in from Cuba, from China and from other Governments.

But the challenge is to make sure that all those different offers are coordinated effectively, with a very powerful platform that enables everybody to work safely in the region and not in turn become infected with the virus. There needs to be a strong backbone of support that enables all its different providers to work in synergy and in a very clear direction so that the assistance provided supports people, communities and Governments to respond effectively. As one President said to me on Saturday, “We want people to come work with our nation and its citizens, and not just to come to get rid of the virus”. Lastly, a very big tent is absolutely vital, because this requires the whole world to come in behind the countries and behind their people to achieve a rapid outcome.

**The President**: I thank Dr. Nabarro for his briefing.

I now give the floor to Ms. Chan.

Ms. Chan (World Health Organization): Many of the Governments represented here have been helping with treatment facilities, mobile laboratories, hundreds of medical staff and money. I thank them.

This virus, this deadly and dreaded Ebola virus, got ahead of us in a fast-moving outbreak, as described by Dr. Nabarro, that keeps delivering one surprise after another. Now we must catch up in the most urgent and pragmatic way possible. In the hardest hit countries, an exponentially rising caseload threatens to push Governments to the brink of State failure.

The World Health Organization (WHO) has successfully managed many big outbreaks in recent years, but this Ebola event is different — very different. This is likely the greatest peacetime challenge that the United Nations and its agencies have ever faced. None of us experienced in containing outbreaks has ever seen in our lifetimes an emergency on this scale, with such a degree of suffering and such a magnitude of cascading consequences. This is not just an outbreak; this is not just a public health crisis. This is a social crisis, a humanitarian crisis, an economic crisis and a threat to national security well beyond the outbreak zones. This week, the World Bank Group warned of a potentially catastrophic blow to the economies of the hardest-hit countries.

In some areas, hunger has become an even greater concern than the virus. For example, the fertile fields of Lofa county, once Liberia’s breadbasket, are now fallow. In that county alone, nearly 170 farmers and their family members have died from Ebola. For these reasons, the Secretary-General and I are calling for a United Nations-wide initiative that draws together all the assets of all relevant United Nations agencies. In my talks with the Presidents of the three affected countries and in my recent speeches in the United States and Europe, I have consistently called for an immediate and massive increase in international support, as described by Dr. David Nabarro.

We have spelled out our most urgent needs in the WHO Ebola response road map and in the 12 mission-critical actions appeal launched last week by Valerie Amos. I and my staff wholeheartedly welcome announcements like those from the United States and the United Kingdom Governments earlier this week. This is a massive ramp-up of support that entails a transformative change to our collective capacity to get a grip on this outbreak and bring it under control. These announcements are statement of concern at the highest level of Government, but also a clarion call for other countries to follow. Many are doing so, and we look forward to hearing from many more.

The fact that the United States, the United Kingdom, China, Cuba and other countries are using a variety of assets, including military, speaks to the complexity of the challenge. This surge of support could help turn things around for the roughly 22 million people in the hardest-hit countries, whose lives and societies have been shattered by one of the most horrific diseases on the planet. The support of the United Nations and its agencies is also undergoing a transformative ramp-up under the leadership of the Secretary-General. The scale of deployment to Africa of WHO and international staff under this outbreak umbrella is unprecedented in the history of the WHO.

Everything now is unprecedented. Everything now is happening faster than ever before. The needs are immense, and we know it. Reports show that more than 5,500 people have been infected. Well over 2,500 have died. And those shocking figures are vast underestimates. Health, medical, and clinical care issues must remain the heart, the soul and the spirit of this response. It will take some time, but the Ebola outbreak can be contained.
Let us consider the stable situation in Nigeria and Senegal. When the first imported cases occurred in those two countries, we knew very well what we were dealing with. Governments’ ownership and leadership, supported by the United States Centers for Disease Control, Doctors without Borders and WHO, responded immediately with the right emergency actions. And let us remember that people crisscross West Africa’s porous borders all the time. Other countries will have to deal in the same aggressive way with imported cases. As support for the United Nations-coordinated response continues to pour in, I am confident that we can do so.

**The President:** I thank Ms. Chan for her briefing.

I now give the floor to Mr. Niamah.

**Mr. Niamah** (Médecins Sans Frontières): I wish to thank Ambassador Power for inviting my organization, Médecins Sans Frontières (MSF), to address the nations who can help my people, my country and my region.

I am honoured to represent MSF. We welcome President Obama’s Ebola response plan and hope for its immediate implementation. We also call upon all States Members of the United Nations to similarly mobilize their capacities. With every day that passes, the epidemic spreads and destroys more lives.

I first heard about cases of Ebola in March; soon after, the disease came here to Monrovia. From then on, people began dying. My niece, Francila Kollie, and my cousin, Joupu Lowea, both nurses, became infected at work. While they were being treated, they died in late July. So many of my friends, university classmates and colleagues have died in recent months.

Since I have a medical background, I felt that I had the responsibility to help my country. I am a team leader in Médecins Sans Frontières’s Monrovia treatment centre. I have worked in the triage section, assessing patients prior to admission, in the suspected-cases tent and with patients confirmed to be carrying the Ebola virus. Because there is no cure, we can only provide supportive care to our patients in the form of food, hydration and the basic treatment of symptoms. If treated early enough, chances of survival are much better.

I cannot stand aside to watch my people die. But I, along with my colleagues, cannot fight Ebola alone. We need the international community; the international community must help us. I wish to illustrate the battle we face.

We have seen so many patients die. They die alone, terrified and without their loved ones at their side. As medics, we must have a different way of coping. When I go inside the Ebola treatment centre, I keep my focus on my patients’ needs. We try to attend and help first those who are much weaker, those who need the most help — food and water — and those who want to talk to our counsellors because they are so traumatized and frightened.

We are trying to treat as many as we can, but there are not nearly enough treatment centres and beds. We have to turn people away, and many are dying at our front gate. Right now, as I speak, there are patients sitting at our front gates, literally begging for life. They rightly feel isolated, neglected, alone and denied. They are left alone; they die a horrible death, an undignified death. We are failing the sick because there is not enough help on the ground. We are failing those who will inevitably become infected, because we cannot care properly for the sick in a safe, protected environment to prevent the spread of the virus.

One day this week, I sat outside the treatment centre eating my lunch. I met a boy who approached the gate. His father had died from Ebola a week ago. I saw him with blood at his mouth. We had no space, so we could not take him in. We could see that his mouth was bloody. When he turned away to walk into town, I thought to myself that that boy is going to take a taxi, and he is going to go home to see his family, be at home and infect his family. He will also infect other people. On my night shift, I saw a patient who was driven in an ambulance about 12 hours because there was no other treatment centre.

We urgently need to get the disease under control, and we need the Council’s help. We need what is referred to as “contact tracing” in order to follow up every person who has been in contact with someone who is sick with Ebola or has died from Ebola. We need to raise awareness about the disease, because there has been so much denial even now and despite international attention.

We need more care centres so that everyone can find a bed and not have to stay at home and infect other people. We need to get our medical staff trained in proper procedures, so that they can keep the centres running. We also need to get health services running and to ensure that workers and ambulances are safe for the health staff. We have seen too many health workers and ambulance drivers come into our centres...
as patients, facing the same fate. So we plead for helicopters, centres, beds and expert personnel, but we also need the basics. There are still homes in Monrovia that do not have soap, water and buckets. Even those simple things could help curb the spread of the virus. Ebola has affected all aspects of our lives. Schools and universities have shut down, along with public services. I feel that the fate of my country, the future of my country, is hanging in the balance.

My wife works at the John Fitzgerald Kennedy Hospital in Monrovia. We are educating our children; they serve as an example for their peers. We ask the United Nations to be an example for peers, as nations with the resources, assets and skills required to stop this catastrophe. We do not have the capacity to respond to the crisis on our own. If the international community does not stand up, we will be wiped out. We need Member States’ help. We need it now.

**The President:** I thank Mr. Niamah for his briefing.

Members of the Council have before them document S/2014/673, which contains the text of a draft resolution submitted by Afghanistan, Albania, Andorra, Angola, Argentina, Armenia, Australia, Austria, Bangladesh, Belgium, Belize, Benin, Bhutan, Bosnia and Herzegovina, Botswana, Brazil, Bulgaria, Burkina Faso, Burundi, Cameroon, Canada, Chad, Chile, China, Colombia, the Congo, Costa Rica, Côte d’Ivoire, Croatia, Cyprus, the Czech Republic, the Democratic Republic of the Congo, Denmark, Djibouti, the Dominican Republic, Egypt, Equatorial Guinea, Eritrea, Estonia, Finland, France, Gabon, Georgia, Germany, Ghana, Greece, Grenada, Guinea, Guyana, Honduras, Hungary, Iceland, Iraq, Ireland, Israel, Italy, Japan, Jordan, Kazakhstan, Kenya, Kyrgyzstan, Latvia, Lebanon, Liberia, Libya, Liechtenstein, Lithuania, Luxembourg, Malaysia, Malawi, Mali, Maldives, Mauritius, Marshall Islands, the Federated States of Micronesia, Monaco, Montenegro, Morocco, Mozambique, Namibia, Nauru, Nepal, the Netherlands, New Zealand, Nicaragua, the Niger, Nigeria, Norway, Panama, Papua New Guinea, Poland, Portugal, Qatar, the Republic of Korea, the Republic of Moldova Romania, the Russian Federation, Rwanda, Saint Lucia, Samoa, San Marino, Sao Tome and Principe, Senegal, Serbia, Seychelles, Sierra Leone, Slovakia, Slovenia, Solomon Islands, Somalia, South Africa, South Sudan, Spain, Sri Lanka, Suriname, Sweden, Switzerland, Thailand, The former Yugoslav Republic of Macedonia, Timor-Leste, Togo, Trinidad and Tobago, Tunisia, Turkey, Uganda, Ukraine, the United Kingdom of Great Britain and Northern Ireland, the United Republic of Tanzania, the United States of America, Uruguay, Vanuatu, Viet Nam, Yemen, and Zambia.

It is my understanding that Council is ready to proceed to the vote on the draft resolution before it.

I shall put the draft resolution to the vote now.

*A vote was taken by a show of hands.*

**In favour:**

Argentina, Australia, Chad, Chile, China, France, Jordan, Lithuania, Luxembourg, Nigeria, Republic of Korea, Russian Federation, Rwanda, United Kingdom of Great Britain and Northern Ireland and United States of America

**The President:** There were 15 votes in favour. The draft resolution has been adopted unanimously as resolution 2177 (2014).

I shall now make a statement in my capacity as the representative of the United States.

I thank Secretary-General Ban for his briefing and Dr. Nabarro and Ms. Chan for their remarks and for the essential role that the United Nations is playing in confronting the Ebola epidemic. I would also like to recognize all the people on the front lines in this battle — people like Mr. Jackson Niamah who are risking their lives to curb this deadly virus. Their dedication and compassion humble us.

Today the Security Council is holding an emergency meeting on a health crisis for the first time in the history of the United Nations. The Security Council has just issued a call to action. We have called on all nations to take swift and decisive action to contain the further spread of Ebola, and we have declared the current outbreak a threat to international peace and security.

As we heard unequivocally from the experts today, the scale of this outbreak is unprecedented. By next week, more people will have died from Ebola in Liberia alone than in the 20 previous Ebola outbreaks combined. The director of the United States-based Centers for Disease Control and Prevention told United Nations representatives earlier this week: “I have never seen an infectious diseases of this lethality spreading so fast”. Without a dramatic shift in the scale of our response, the number of infected individuals is projected to double every three weeks. Looking away will not make this go away.
One of the main reasons this outbreak has spread so dramatically is because up to now we have not come together sufficiently to confront it. Over the past 10 months as the deadly virus spread across Guinea, Liberia and Sierra Leone we relied on tactics that worked to contain past outbreaks. But West Africa had never been hit by Ebola before, so the affected countries had no prior knowledge or experience dealing with Ebola. The virus jumped across borders and penetrated urban areas, and local burial customs aided its spread. Picking up speed, it has overwhelmed clinics and hospitals, shuttered schools and businesses and sowed fear in communities.

Precisely at the moment when a robust, united intervention was needed, some countries started to seal their borders. This reaction, driven by a mix of fear and the desire to protect one’s own citizens from the virus’s spread, was understandable. The problem is that while isolation is effective and indeed necessary of dealing with individuals who may have been exposed to Ebola, it is utterly counterproductive when applied to entire countries. It deprives them of the very resources they need to bring the virus under control. Thus, when Governments in the region tell over 70 disease investigators that if they travel to the affected areas to volunteer they will not be allowed back into their own countries, they put not only the currently affected countries at greater risk, but also their own countries.

Today, instead of isolating the affected countries, we call for flooding them with the resources that are desperately needed to turn the tide in this fight. On Tuesday, President Obama announced that the United States was going to establish a military command centre in Liberia to support civilian efforts across the region, involving an estimated 3,000 United States forces. Supporting United Nations, regional and national efforts, we are going to create an air bridge to get health workers and medical supplies into West Africa faster. We are going to build a new training site to prepare thousands of local health workers so they can effectively and safely care for more patients. We are going to stand up additional treatment units, including new isolation spaces and more than 1,000 beds. We are going to work with partners to distribute supplies and information kits to hundreds of thousands of families so they can better protect themselves.

Today several other Governments — many other Governments, we hope — will announce commitments, joining a growing cadre of countries that have already stepped up, such as the troop- and police-contributing countries that serve commendably in the United Nations Mission in Liberia. We welcome the Secretary-General’s announcement of the new United Nations Mission for Ebola Emergency Response, which will lead a historic effort to mobilize commitments and direct them where they are most needed.

This challenge far surpasses the abilities of any one nation or even any region to tackle alone. This must be an all-hands-on-deck operation. The private sector, foundations and non-governmental organizations also have a crucial role to play, and some, like Médecins Sans Frontières (MSF) and the Gates Foundation, are already leading the charge. One MSF staff member, Pierre Trbovic, was deployed last month to Monrovia, to the biggest Ebola treatment centre ever built. But by the time he arrived, it was completely full, just like the clinics Jackson Niamah described today. Pierre had the devastating job of telling patients and their relatives that MSF could not take them in. Pierre wrote:

“The first person I had to turn away was a father who had brought his sick daughter in the trunk of his car. He was an educated man and he pleaded with me to take his teenage daughter, saying that while he knew he could not save her life, at least we could save the rest of his family from her. Other families just pulled up in cars, let the sick person out, and then drove off abandoning them. One mother tried to leave her baby on a chair hoping that if she did, we would have no choice but to care for the child.”

That scene is playing itself out right now in clinics across the region. We do not want to live in a world where a father burying his sick daughter is turned away from treatment. It is against everything that we believe in and stand for. It is wrong, and it is dangerous because people we turn away are all but certain, as we heard, to infect others.

Today’s resolution is important. It is a call to action, not just from the Security Council, but from the entire United Nations family. Today’s resolution has a 130 sponsors — the most sponsors ever for any Security Council resolution in the history of the United Nations. That means that the 2,176 resolutions that came before this one had fewer sponsors. This is a degree of unanimity and unity that we rarely see.

But if today’s resolution is not followed by action on a scale and scope commensurate to the virus, it will be
cited years from now as evidence that we raised hopes that we did not deliver on. Knowing what we know now about the exponential spread of this deadly virus, we will have no excuse if we still fail to come together to do what is needed — if we do not dig deep. Nobody will be able to say, “We did not realize it could get so bad”.

The problem is solvable. We know how to give people who are infected with Ebola a fighting chance and how to care for them with dignity. We know how to prevent new outbreaks and how to prepare countries to find and stop them when cases occur. While our response will take time to ramp up, and the epidemic will get worse before it gets better, our actions can save countless lives. The math is simple; the sooner we act, the more lives we will save.

I would ask the representatives of every country represented here, especially those that are still figuring out how they will respond, to please take this message back to their capitals. The math is simple — the sooner we act, the more of us that contribute, the more lives we will save. We can bend the curve. We must bend the curve. I would ask those who are skeptical to just look at Nigeria. Two outbreaks were detected there during the epidemic; one was in Lagos, which has a population of over 21 million. In just a few weeks, over 1,000 professionals were mobilized and conducted more than 18,000 home visits. They tracked down 20 cases of infected people, as well as 890 people with whom the infected people had come into contact. As a result of that swift, methodical effort, so far Nigeria’s outbreaks seem to have been contained.

I would urge them to look also to Ghanaian President John Dramani Mahama, who visited Guinea, Liberia and Sierra Leone this week and warned that panicking and isolating affected countries will only make the outbreak worse. The United States also wants to express its gratitude to Senegal for allowing its main airport to serve as a regional hub for emergency personnel and supplies.

We have all been alarmed by the models of the Ebola trajectory that we have seen — models in which infections rise in steep, terrifying curves. We have seen those kinds of things in Hollywood movies, but not in real life in recent history. Those models show what could happen if we continue to let fear, in action or indifference drive our response. We have to find resources that, right now, many think they cannot afford to spare.

Every country represented in this Chamber today can contribute something that will save a life: doctors, nurses, hospital beds and, as we have heard, food, soap and buckets. Models are forecasts of the future. But it is what we do — by “we” I mean all of the countries that we here represent, and those beyond — that actually determines our future. Individuals make history, not models. The United Nations was built for global challenges like this one. That is why we are here. Let us rise, together, to confront this challenge head on.

I now resume my functions as President of the Council.

I shall now give the floor to the other members of the Security Council.

Mr. Sarkin (Nigeria): Nigeria commends you, Madam President, for your leadership here in New York and that of your President on the world stage in response to the threat posed by the Ebola virus disease to the entire globe. Today’s open debate underscores the seriousness with which the Ebola virus disease outbreak is viewed by the international community. We thank Secretary-General Ban Ki-moon for his leadership and for marshalling global action against the outbreak. We also thank Ms. Margaret Chan of the World Health Organization (WHO), Dr. Nabarro and Mr. Jackson Niamah for their briefings.

The unanimity showed by the Council today in the adoption of resolution 2177 (2014) sends a clear message that the world will, indeed, react in concert and with the determination to halt the spread of this apocalyptic virus and to find a lasting cure for it.

As we speak at this very moment, the Ebola virus is said to be spreading exponentially. Each passing day brings with its fresh infections and challenges in the fight against the disease. Indeed, the world has yet to see the spread of a killer disease at such a rapid rate. We could not agree more with what the Secretary-General concerning the various ramifications of the spread of this deadly disease in the affected countries. The gravity and scale of the emergency call for speed, coordination and innovative responses. It is no ordinary crisis. It is a global wake-up call about an invisible enemy that we hardly know and which is spreading faster than all of our responses.

Three countries — Guinea, Sierra Leone and Liberia — are in the eye of the storm, literally. They are now faced with a grave threat that, even at the best
of times, would prove too daunting for any nation to deal with single-handedly. Those countries desperately all assistance that the rest of the world can render. Their health systems cannot cope with the overwhelming emergency. Their people need food, water and other necessities. Their hospitals urgently require the supply of personnel, protective gear, drugs, beds, specialized laboratory equipment, technicians, doctors, nurses and other essential facilities, including generators, ambulances and fuel.

Time is of the essence. Already, some see the battle against Ebola as unwinnable because of the rate at which it is spreading. We, on the other hand, want to take a more optimistic view of the situation from our experience in controlling and, indeed, in reversing the outbreak in Nigeria. We therefore welcome with much appreciation the announced support given or to be given by several Governments around the world.

We also welcome the suggested initiative of the Secretary-General for the establishment for a special mission on Ebola. We support the idea and will assist in any way we can to assist its success. Nigeria has already provided bilateral assistance to the three affected countries. For instance, we gave $3.5 million towards meeting their urgent essential needs and supporting the Ebola Coordination Centre in Conakry. We are also training laboratory technicians and other specialists from Liberia at this moment.

We note that some countries have imposed travel bans and other measures against the countries affected by the outbreak. We believe that is not the right way to go about meeting the challenge. We believe it is important that the affected countries be given all the assistance they need to overcome the calamity, rather than being unjustly punished.

Nigeria will continue to support the protocols approved by WHO, which do not advocate border closures, travel restrictions or the stigmatization of any individual on the basis of his or her nationality or the passport he or she carries. We also have obligations in the context of the Economic Community of West African States to observe and to respect regarding the free movement of persons. We shall continue to remain vigilant and strengthen screening at our ports of entry and exit and to render all possible assistance to our sister countries in the region to rid themselves of the pestilence.

Mr. Delattre (France) (spoke in French): Resolution 2177 (2014), which we have just adopted, describes the Ebola epidemic as a threat to international peace and security. This is the first time in history that the Security Council has defined a health crisis in that manner.

On the one hand, the epidemic represents an international threat due to its unprecedented scale; several thousand people have already died, with the possibly of tens or even hundreds of thousands more deaths in future. West Africa has suffered dramatically, but we know that the epidemic could spread far beyond the region. Moreover, as a threat to peace and security the health crisis has become an economic and social crisis that could also generate a political crisis. Liberia, Sierra Leone and Guinea are all on the path towards peace after years of bloodshed. The Ebola virus is threatening to erase the peace dividends and to reignite chaos in those countries.

This is an emergency. It is our obligation to halt the outbreak before it spreads out of control. Our collective responsibility is focused on three priorities: to act, to coordinate and to prevent. With regard to our action, the President of the Republic has made combating Ebola a priority. France stands side by side with African countries in that fight. By unanimously adopting the unprecedented resolution 2177 (2014), the Security Council calls on all relevant stakeholders, in particular States, to provide resources to combat the epidemic.

Since the outbreak of the Ebola epidemic, France has taken the lead in supporting the actions of the World Health Organization (WHO) and non-governmental organizations in the affected countries. The French laboratory experts of the National Institute of Health and Medical Research and the Pasteur Institute identified the presence of the virus in April and were the first to be present on the ground in Guinea. Their experts are today helping to diagnose and monitor the disease and to train doctors. Today, the assistance of France in combating Ebola amounts to more than €60 million, that is, more than $90 million, through various relevant channels.

Bilaterally, France will provide a total of €35 million, that is, $45 million, to the affected countries and their neighbours. The greater part of that assistance, that is, more than €20 million or $26 million, will be provided to Guinea. It will take a number of forms. We have started to deploy 25 medical specialists on the ground
to help to strengthen health-care facilities, in particular the Donka hospital in Conakry.

In Conakry, we have funded the establishment of a centre of expertise by the Pasteur Institute. In Guinée forestière, we are financing the setting up of a treatment centre and strengthening the entire health-care system. In addition, the President of the Republic has just announced that, within the next few days, a military hospital will be set up in Guinée forestière, the epicentre of the epidemic. The hospital will be provided with military doctors and civilian protection, as well as air resources.

On cooperation, we will not be able to contain the epidemic without closely coordinating the resources provided by all actors. At the European level, on France’s initiative, the European Union will very soon have a mechanism for coordinating medical evacuations for European nationals and the international teams on the ground. The European Union will also allocate more than €150 million, that is, nearly $200 million, to the affected countries, in particular to support their health-care services, to establish mobile laboratories and to train health personnel. France will provide a significant part of that assistance. At the level of the United Nations, we are working in close cooperation with the WHO and Dr. David Nabarro, Senior United Nations System Coordinator for Ebola, by focusing our efforts on Guinea, as he has requested. We will provide our full support, including personnel, to the United Nations Operations and Crisis Centre, based in New York.

Regarding prevention, in the resolution that we have adopted the Security Council sends a strong and clear message that Ebola is not a divine scourge against which humankind is powerless. We can contain Ebola if the simple and strict health and protection guidelines are implemented. Beyond that, we will find a lasting solution only by helping the affected countries to strengthen their health systems. As we know, those countries that are already most vulnerable have been struck.

The courage of the health personnel of the affected countries and the international health workers who are fighting against the epidemic on the ground commands our admiration. I would like to commend, in particular, the dedication of the Médecins Sans Frontières teams, to which the Security Council pays tribute in the resolution. For months, those teams have been working at the epicentre of the outbreak. We need to live up to the courage of those men and women.

Mr. Albert Schweitzer, Nobel Peace laureate, who devoted his life to saving the lives of others, described our moral duty as follows:

“Everyone in his own environment must strive to practice true humanity towards others. The future of the world depends on it.”

Today, we call on the humanity of all. Men, women and children are suffering from and dying of Ebola. For them, let us act now.

Mr. Nduhungirehe (Rwanda): I thank you, Madam President, for having convened this open debate on Ebola and for having introduced resolution 2177 (2014), which was unanimously adopted and sponsored by more than 130 Member States, including all 15 Security Council members. I join those who have spoken before me in thanking our briefers today, namely, Secretary-General Ban Ki-moon; Dr. David Nabarro, Senior United Nations System Coordinator for Ebola; Ms. Margaret Chan, Director-General of the World Health Organization (WHO); and Mr. Jackson Niamah, the representative of Médecins Sans Frontières, for their insightful briefings and updates on the Ebola epidemic in West Africa.

First and foremost, allow me to pay our respects to the 500 victims of Ebola, including the medical staff. We wish a quick recovery to those patients who are still fighting that disease. I take this opportunity to all medical and non-medical personnel, such as Jackson Niamah, for their selfless dedication to the service of the affected people.

Rwanda commends the United Nations system for its prompt mobilization against the Ebola virus. The WHO, which declared the Ebola epidemic as a public health emergency of international concern, has launched an Ebola response road map to guide international support efforts. Earlier this week, the United Nations system, as a whole, published an overview of needs and requirements, which outlines the necessary resources to effectively address the crisis in the next six months.

In addition to those efforts, we welcome the decision of the Secretary-General to establish a United Nations mission for the Ebola emergency response, which will be critical to mobilizing resources in the fight against Ebola, as well as for the much needed prevention of that disease in the future.
The efforts of the Security Council in support of the peace processes and post-conflict peacebuilding in the three affected countries, as well as the obvious security implications of the Ebola outbreak, justify its due attention and the decision to hold this open debate. In that respect, Rwanda cannot but agree with the sober assessment of the Ebola threat contained in the letter from the Presidents of Liberia, Guinea and Sierra Leone to the Secretary-General (S/2014/669, annex), warning that the gains achieved since the end of the civil war, conflict and stability, impressive as they have been, are fragile and reversible. We all agree that the impact of Ebola in the affected countries goes beyond a health and humanitarian issue, as it has security, political and socioeconomic implications.

In addition to the efforts of the United Nations system, we welcome the mobilization by regional and subregional organizations, such as the Economic Community of West African States and the African Union, as well as bilateral and multilateral partners, such as the African Development Bank, in the fight against the scourge. We welcome the pledges from around the world to support the response road map, be it with financial, human or other resources. As mentioned by the Secretary-General, Rwanda has contributed to that global effort.

We in particular thank your country, Madam President, for the deployment of 3,000 troops to Liberia to support the containment of Ebola, the establishment of additional Ebola treatment units in the affected areas and the assistance of the United States Government in recruiting, training and organizing medical personnel in the affected countries.

In order to succeed in curbing the spread of the disease, there is a need to strengthen the awareness-raising of the public to avoid the continued stigmatization of the affected countries and peoples. In that context, we recall the decision of the Executive Council of the African Union to urge all countries that have suspended or cancelled flights to the affected countries to reconsider their decision, as the Secretary-General reiterated this afternoon. The decision has in fact contributed to the further deterioration of the economies of those countries and a decrease in humanitarian assistance.

Allow me to conclude by expressing Rwanda’s appreciation to the United Nations Mission in Liberia and the troop- and police-contributing countries for supporting Liberians in the implementation of its mandate at this challenging time.

Mr. Maksimychev (Russian Federation) (spoke in Russian): We, too, would of course like to convey our gratitude to the Secretary-General, the Senior United Nations Coordinator for Ebola and the Director-General of the World Health Organization (WHO), as well as the representative of Médecins Sans Frontières, for their very comprehensive statements.

The rapid spread of the Ebola virus on the African continent and its dire consequences are a cause for growing concern, which Russia fully shares. The huge challenge facing Guinea, Liberia, Sierra Leone and a number of other States in the region cannot continue without the coordinated response of the international community. In that respect, we believe that the Council’s discussion of this topic is justified and welcome the adoption of resolution 2177 (2014).

We highly value the selfless efforts of the three States most affected by Ebola, their partners, other Member States and non-governmental organizations aimed at eradicating the disease and providing medical and other assistance to the population. In that respect, we would like to underscore the contributions of Cuba and Médecins Sans Frontières, which were among the very first to join the ranks of those fighting Ebola directly in West Africa.

Guided by the principles of solidarity, friendship with African States and humaneness, from the very first manifestations of the disease, the Russian Federation has been actively involved in providing financial and technical assistance to suffering countries, both multilaterally and on a bilateral basis. To strengthen the public health-care system in Guinea and Sierra Leone during the Ebola outbreak, Russia financed the purchase and supply to those countries through the WHO of medical modules with a selection of drugs and medical equipment capable of treating 60,000 individuals. Similar modules will be provided over the next few days to Albania, which is one of the States at high risk.

In the Donka hospital in Guinea, where those infected with Ebola are hospitalized, a Russian specialized anti-epidemic brigade is deployed. It is composed of highly trained experts and specialists, who, in cooperation with the WHO and Médecins Sans Frontières, provides assistance to the Ministry of Health of Guinea in organizing activities to counter the
epidemic and diagnose Ebola in Russian biological and mobile laboratories. Its operating costs are fully covered by our country at an estimated cost of $3 million. We are also preparing to dispatch to Guinea personal protection equipment for health-care personnel and volunteers.

Mindful of the broader consequences of the epidemic, including the threat to food security, Russia, in cooperation with the World Food Programme, is preparing to provide food assistance to the three countries most affected to the tune of over $1 million. Our support has made a significant contribution to scientific study of the Ebola virus. Russian experts and specialists have successfully conducted pre-clinical vaccination trials against Ebola. WHO certification is expected, after which, if our assistance is required, we will be ready to provide it. Furthermore, Russia has developed high-sensitivity test systems for diagnosing Ebola that we are ready to supply to all laboratories operational in the area of the epidemic, under the auspices of the WHO.

Help for the sick is quite clearly of primary importance, but that is only part of the problem. At the same time, the main reason why this deadly disease continues to spread is the lack of effective prophylactic and health-awareness systems in the affected countries, due to a lack of epidemiologists and specialists in biosafety, as well as managers in the field of sanitary and epidemiological health. In that respect, the Russian Federation is prepared to earmark a $2.5 million contribution to the WHO budget for 2014-2015 to promote the implementation of international health protocols, which are the very basis of the global response to threats such as the Ebola epidemic. We will also provide direct technical assistance to countries in need for implementing international health protocols to the tune of $4 million. Furthermore, we plan to contribute $3.5 million to the WHO to step up the organization’s readiness to respond to emergency situations.

We deem it important to inform the Council that efforts to combat the epidemic have also come from Russia’s private sector. For example, the Russian corporation Rusal financed the acquisition of personal protection equipment for the Ministry of Health of Guinea.

We welcome the energetic efforts of the Secretary-General in organizing a coordinated and effective response by the international community to the Ebola epidemic. We deem it important that all participants closely follow the main areas elaborated by the WHO in its publication “Ebola response road map”. The Russian Federation’s assistance is fully in keeping with the main provisions of that document, and we stand ready to continue to participate in implementing the international strategy for combating the disease in coordination with the Governments of affected States, United Nations system entities and, of course, other partners.

Mr. Oh Joon (Republic of Korea): The Republic of Korea appreciates the United States’ initiative in convening this open debate and in adopting the resolution on the Ebola crisis (resolution 2117 (2014)). We also thank the briefers, who provided us with a comprehensive picture of how grave the situation is. We would like to commend the leadership of the Secretary-General and welcome his timely proposal on the establishment of the United Nations mission for Ebola emergency response. We also pay tribute to the WHO and all those who are on the front lines of the fight against Ebola, especially the noble work of aid personnel operating in an extremely challenging environment.

The spread of a disease may not normally fall within the domain of our traditional understanding of peace and security. However, this Ebola crisis is unravelling the very fabric of the affected societies and threatening the gains made through our international peacebuilding activities in those countries. As such, peace and security are under serious threat nationally, regionally and globally. In that light, allow me to share with the Council some observations on this matter.

First, a substantial and coordinated international response is required to tackle the Ebola epidemic. We believe the disease, while a formidable threat, is both preventable and controllable. Before the situation gets out of control, with devastating results, we must heed the risks and respond at the international level. The United Nations, which is the best platform to coordinate international efforts, should help strengthen response systems and direct the many different streams of aid flowing in to curb this epidemic.

Secondly, the current Ebola epidemic, which is regional at this stage, requires proactive regional cooperation. We urge all countries, including those in the region, to refrain from closing their borders and thus isolating the affected countries, which only causes further harm and delays efforts to stop the spread of Ebola. In that regard, we welcome the fact that Ghana
was made an Ebola logistics hub for West Africa. It will serve as a vital corridor to get urgently needed supplies and health personnel into the affected countries.

Thirdly, we also need to take a serious look at how United Nations peacekeeping missions can further support country efforts in facing the Ebola threat. The United Nations Mission in Liberia (UNMIL) has shown great resilience and has proved to be instrumental in assisting the ongoing efforts to cope with the crisis. While we have ensured a technical rollover of the Mission’s mandate, we need to enhance UNMIL’s supporting role in its mandate. The continued and strengthened operation of the peacekeeping Mission in itself is a reassuring reminder of the United Nations commitment to standing by those affected.

Indeed, fighting the unprecedented epidemic disease is one of the most urgent challenges facing us all today. We should be united in rising to the challenge. The Republic of Korea reaffirms its commitment to this international coalition. We are providing humanitarian assistance to the affected countries and also considering additional contributions to support the work of the United Nations and the WHO at this critical stage.

The President: I now give the floor to the representative of Lithuania.

Ms. Murmokaitė (Lithuania): I thank the United States presidency of the Security Council for organizing this emergency debate on the unprecedented outbreak of Ebola. Lithuania aligns itself with the statement to be made on behalf of the European Union.

My delegation commends the leadership of the Secretary-General and the United Nations quick and focused response to the crisis, including the plans to set up an emergency health mission to coordinate the international community’s response to the Ebola outbreak.

We express our full support to the senior United Nations system coordinator for Ebola, Dr. David Nabarro, and the Deputy Ebola Coordinator and Operation Crisis Manager, Anthony Banbury. We also thank the Director General of the World Health Organization (WHO), Ms. Margaret Chan, for her briefing today and for all the efforts the WHO is taking to address the spread of Ebola.

Our thoughts are with the families of the victims and the patients, as well as with the courageous and dedicated doctors and health-care workers, such as those of Médecins Sans Frontières, who, at a risk to their own lives, have been doing all within their power to stop the further spread of the disease and help the patients.

The economic, social and security implications, as others have said, of the health crisis will fall heavily on the countries concerned. The exponential outbreak of Ebola has struck countries, which only a short decade or so ago emerged out of devastating conflicts, threatening now to cripple their economies, instilling fear and tearing apart the fragile social fabric, reversing the gains of a peaceful development.

Fear spreads like fire. We have already seen the closures of airports, which prevent the delivery of aid where it is most needed. We have seen suspected patients denied access and travelled bans imposed. The Ebola outbreak is a test of international solidarity and our readiness to respond to unconventional threats which, if unchecked, can be as devastating as any conflict, with far-reaching consequences. As the Secretary-General has noted elsewhere, “Every day we delay, the cost and the suffering will grow exponentially.”

We commend the efforts of the United Nations Mission in Liberia (UNMIL) on the ground, including communicating information to the Liberian public on the safety and health protocols and other measures for preventing the transmission of Ebola. Clear, accurate and effective public communication on prevention measures and well-coordinated preventive actions are of utmost priority. It warms my heart to know that there’s a modest Lithuanian footprint in UNMIL, as it carries the vital work of helping a country stricken by such an unprecedented outbreak.

My delegation welcomes the strong political commitment to combating the Ebola outbreak expressed by the Heads of State of the Mano River Union — Côte d’Ivoire, Guinea, Liberia and Sierra Leone — at their Extraordinary Summit held in Guinea on 1 August. We also commend the commitment of the African Union, whose Peace and Security Council recently authorized its first ever humanitarian mission to the region, and the Economic Community of West African States for their efforts in combatting the further spread of this deadly disease.

On its part, as our French colleague has mentioned, the European Union is working on a comprehensive response to the Ebola epidemic and has already
pledged some €150 million of funding for West African countries affected by Ebola virus.

Within a generation, the people of Liberia, Sierra Leone and Guinea have gone through conflict and tragedy, which have left multiple human scars that inevitably take time to fully recover and heal. We must all work together to ensure that the response of the international community and the United Nations system is prompt, focused and lasting enough to stop the spread of the disease and keep the hard-won gains of those nations.

We commend the efforts and contributions by various countries, including those announced today. My country’s decisions on our national contribution are being finalized.

Mr. Wang Min (China) (spoke in Chinese): China welcomes the convening of this open debate on the Ebola crisis. We would like to thank Secretary-General Ban Ki-Moon, Dr. Nabarro and Director General Margaret Chan for their respective briefings. China also listened carefully to the statement of the representative of Médecins Sans Frontières.

At present, the Ebola pandemic is rapidly spreading throughout countries in western Africa, including Sierra Leone, Liberia and Guinea, seriously threatening the health and life of their populations. The Ebola crisis has already transformed from a public health issue into a complicated and multifaceted problem, impacting the politics, security, economies and societies of the countries concerned and threatening the security of international public health. Therefore, fighting the Ebola pandemic is not only a task of African countries and their peoples, but also a common responsibility of all countries in the world.

China believes that efforts should be made in the following three areas. First, the international community should respond to the Ebola outbreak with a heightened sense of urgency by expeditiously providing assistance to the affected countries. Time is of the essence in the current Ebola crisis, as the disease has been spreading rapidly, widely and deeply. The longer it is allowed to continue, the more difficult and costly it will be for those countries to contain it. China appeals to the international community to address the crisis with utmost attention and offer immediate assistance to the countries in the affected areas. Diseases do not heed national borders, and adversity is the touchstone of genuine friendship. We hope that the international community’s assistance will bring hope to the populations in the affected areas; help alleviate the sense of helplessness, panic and isolation; and build confidence to tackle the Ebola pandemic.

Secondly, the international community should further coordinate various responses to the crisis. China supports the United Nations leading role in coordinating international responses to the pandemic, and welcomes the initiative of Secretary-General Ban Ki-moon to establish in West Africa the United Nations Mission for Ebola Emergency Response, which we believe will help mobilize various parties to integrate international assistance efforts and will form a synergy in the whole process. China supports the World Health Organization (WHO) in further using its expertise to monitor the pandemic, to facilitate the expeditious research and development of treatment plans and vaccines, and at the same time to step up prevention campaigns. Other United Nations organs and agencies should play their own parts, coordinate their efforts and establish a reasonable labour division among them, working together to contribute to the fight against the Ebola pandemic.

Thirdly, the international community should address both the root causes and symptoms of the problem by assisting African countries in accelerating their economic and social development. The current Ebola outbreak has overwhelmed the public health systems of the three countries, further hampering the already fragile economic and social development in those countries and their neighbours. When providing emergency medical relief and assistance to those countries to help them cope with the current pandemic, the international community should keep their long-term needs in mind, actively increase input in and support for the development of their medical and health-care systems and help them to establish as soon as possible comprehensive health systems and systems for pandemic prevention and control. In the meantime, the international community should vigorously help those countries advance their economic and social development and strengthen their capacity-building in infrastructure and public administration, so as to enhance their capacity for pandemic prevention and control.

China was hit by the severe acute respiratory syndrome epidemic in 2003, so we greatly sympathize with the people of the African countries concerned, who are suffering from the current pandemic. The Chinese
leadership and Government attach deep importance to the problem of the Ebola outbreak in West Africa and have, since the very beginning of the epidemic, provided assistance to the countries concerned and shared with them China’s experience in pandemic control. To support African countries in their response to the Ebola outbreak, China provided assistance in cash and kind as early as April and, in August, we assembled and immediately sent to the three countries materials for pandemic control and relief valued at ¥30 million. China also dispatched two groups of public health experts and clinicians to the affected areas to provide guidance and assistance.

Since the outbreak of the crisis, the Chinese medical team on the ground has stayed on to actively help the local people in preventing and controlling the epidemic. Recently, China dispatched to Sierra Leone a medical team of 59 members and a biological security laboratory for lab testing and the management of patients kept for observation. To date, China has sent 174 medical experts and workers serving in affected areas in Sierra Leone, Liberia and Guinea.

Earlier today, Chinese President Xi Jinping, who is on a visit to India, announced that the Chinese Government has decided that, in addition to the two previous contributions, another contribution valued at ¥200 million in cash, food and material will be sent to Sierra Leone, Liberia and Guinea. China will also provide $2 million dollars in cash respectively to the WHO and the African Union in support of their efforts aimed at fighting the pandemic.

China will continue to work with all the countries of the world and join hands with the West African countries concerned to help them weather the current crisis. We hope that with the all-out support of the international community, the West African countries and peoples will defeat the crisis at any early date, restore national stability and resume economic and social development as soon as possible.

Mr. Quinlan (Australia): As we now recognize, almost too late, the Ebola outbreak in West Africa is unprecedented in its scale, its geographic reach and its impact. We have heard that the already high numbers of infections and deaths are multiplying exponentially, doubling every three weeks. Health systems in affected countries have been stretched to the point of collapse. Sick, infected people — “begging for life”, as Jackson Niamah of Médecins Sans Frontières has just said — are being turned away from overflowing treatment centres to die. That is clearly appalling in itself, but it is also worsening the spread of the disease. Health systems cannot cope with other endemic disease or even simple treatments. We have heard again today the dire forecasts if Ebola is left to continue its alarming spread.

I welcome the United States leadership in convening today’s historic emergency session, and we are particularly indebted to President Obama for his announcement this week of unprecedented United States efforts to help stop the epidemic.

We know that the Ebola outbreak has been transformed into much more than a health crisis; it has grave humanitarian, economic and social consequences that could spread far beyond the affected countries. Women are disproportionately affected, as always, accounting for as much as 70 per cent of Ebola cases. Female nurses represent the majority of medical personnel killed. Ebola risks rolling back peacebuilding and development gains. Economic growth forecasts are already being slashed, and it is already having an impact on stability in a region emerging from conflict and grappling with chronic conflict risks, such as high youth unemployment. It is self-evident that the crisis is a threat to international peace and security.

We have much catching up to do if we are to succeed in bending down the epidemiological curve from its current explosive trajectory. The effects of the outbreak are still reversible, but only if the response — and particularly isolation and treatment capacity — is scaled up massively, quickly. There is no time to waste.

It is absolutely vital that there is an urgent, coordinated response. Australia strongly supports the Secretary-General’s efforts, through Dr. Nabarro, and working closely with Ms. Chan and the World Health Organisation (WHO), to ensure that the United Nations system makes an immediate, effective and coordinated contribution to the global effort to control the outbreak. We recognize that we are faced with an unprecedented challenge that requires an equally unprecedented response. Australia therefore welcomes and supports the Secretary-General’s initiative to immediately establish the first-ever United Nations international public health mission, the United Nations Mission for Ebola Emergency Response.

United Nations peacekeeping missions, in particular the United Nations Mission in Liberia (UNMIL), can also support efforts to combat the outbreak, as far as
their capacities and mandates allow. We know that peacekeepers cannot be transformed into front-line health care workers, but as UNMIL is demonstrating, they can play a crucial role to communicate Ebola preventive measures to the public, and importantly, to dispel fear and misinformation. United Nations missions support the maintenance of law and order, and they also have logistical and organizational capabilities, which are desperately needed.

The blanket border and travel restrictions being imposed across the region to contain the outbreak are, as we have heard, having a paradoxical effect, making it more difficult to fly in medical staff and supplies and restricting trade and transportation links. We thank Ghana for retaining the crucial UNMIL air bridge into Monrovia. We can and indeed must maintain open borders prudently, while at the same time heightening our vigilance to stop Ebola’s spread.

Australia is committed to supporting the international response. Our Foreign Minister announced this week that Australia would immediately provide a further $7 million, including for the WHO consolidated regional response and to support the provision of front-line medical services. We have heard today that the international response must increase by 20 times if we are to get ahead of the epidemic. Australia will continue to assess very quickly areas where we can best contribute.

Let me conclude by paying tribute to the health care workers, 90 per cent of whom are national staff, who were at the coalface of the response to this terrible, but still beatable, disease. They are working tirelessly at great personal risk to save lives and reduce suffering. Many have died. All urgently need our full and unwavering support.

Sir Mark Lyall Grant (United Kingdom): I thank the Secretary-General, Dr. Nabarro, Ms. Chan and Mr. Niamah for their powerful and moving briefings today. I extend my thanks to you, Madam President, for convening this meeting on a health crisis that has profound implications for us all.

The current Ebola epidemic has become a humanitarian, social and economic crisis for the three most affected West African countries and their 22 million people. It constitutes a threat to international peace and security. If we fail to act now, it threatens to become a catastrophe, which will destroy economies and neutralize the post-conflict gains of recent years.

It is crucial that the international community work together to fight and stop the epidemic, both by assisting the three most affected countries, but also by helping other countries in the region to be ready if the disease spreads to them. It is important to remember that Ebola is a preventable and containable disease, but only if we all work together to stop it and confront the fear and stigma associated with the disease. We must not let fear dictate the response; instead, we must act. We therefore welcome the initiative of holding this meeting and wholeheartedly support resolution 2177 (2014), which injects new urgency into the fight.

The United Nations has a vital role to play in bringing Ebola under control. We therefore welcome the efforts made so far to coordinate the United Nations system’s response, in particular the announcement made by the Secretary-General today on the establishment of a special United Nations emergency response mission.

The United Kingdom is also playing its part. Work has already started on a special $60 million health centre in Freetown. The centre will give confidence to health workers bravely joining the effort. British military experts and staff from Save the Children UK have already joined them on the ground to get the centre operational.

Yesterday, my Foreign Secretary announced a significantly increased package of support. At the heart of the package is a commitment to lead and underwrite the provision of a total of 700 treatment beds for Sierra Leone. More than 200 of those beds are already in the delivery pipeline. We will now deliver a further 500 beds, working with partners to provide and train the international staff needed to operate them.

There is simply no time to waste. Every day that goes by means more Ebola cases and more Ebola deaths. That is why we have joined the current effort, by committing support to partners, including the World Health Organization, the Red Cross, Médecins Sans Frontières, the International Rescue Committee, the Ebola Response Consortium, UNICEF and other parts of the United Nations system in their monumental effort to scale up the response. We are also helping to contain Ebola through our long-standing commitments to multilateral institutions, such as the African Development Bank, the World Bank and, in particular, the European Union (EU), where we are working closely with our EU partners to make the most of our collective expertise.
As my Australian colleague has just recalled, women are increasingly more at risk from Ebola than men. We therefore need initiatives that promote practical collective action at the community and national levels to protect women. Women must also be central to any discussions on the response to the outbreak.

We welcome announcements of support from others, such as the generous new United States assistance to Liberia, this week’s announcement that France will step up its support to Guinea, and pledges of help from such countries as China, Canada and Cuba. But we need a mammoth and sustainable global effort if we are to beat this scourge. Current predictions are that it could last for many months, even years, and could impact the lives of millions of people. We must not let that happen.

So today we call on all countries to join this global coalition against Ebola without hesitation, without doubt and with the determination that we will end this terrible outbreak. Without an immediate and concerted global push, Ebola will kill many thousands more, affecting communities for a generation.

Now is the time for united action. I call on all nations to join this clarion call without delay before this crisis becomes a catastrophe.

Ms. Lucas (Luxembourg) (spoke in French): I thank the United States for having taken the initiative to convene this special debate on an issue that is of concern to all of us. I thank the Secretary-General; Dr. David Nabarro, United Nations System Senior Coordinator for Ebola Virus Disease; and the Director-General of the World Health Organization (WHO), Dr. Margaret Chan, for their briefings, and Mr. Jackson Niamah of Médecins Sans Frontières (MSF) for his testimony on the ground.

Luxembourg pays tribute to the heroic commitment of MSF volunteers and of the thousands of health-care workers, national and international, in Liberia, Sierra Leone, Guinea and throughout West Africa. They must be given every possible guarantee for their own safety.

I associate myself with the statement to be made later by the observer of the European Union.

Luxembourg shares the deep concern about the exponential growth of the Ebola epidemic. It is no longer a simple humanitarian emergency, but, rather, a multidimensional crisis that threatens institutions, societies and the economies of the countries affected by the epidemic and of West Africa as a whole. As a response, we need a general mobilization of the international community. Resolution 2177 (2014), which we have just adopted at the initiative of the United States and which Luxembourg had the honour to co-sponsor, reflects the commitment of the Security Council to address this threat to peace and security.

To stop the Ebola epidemic, we must use all means — public and private, civil and military — at our disposal. The United Nations has a key role to play in coordinating this global effort. That is the reason for the United Nations Mission for Ebola Emergency Response, which has just been announced by the Secretary-General. We fully support the launching of the Mission as soon as possible.

The Mission must, on the one hand, support the efforts of the countries stricken by the epidemic to contain it, and must also, on the other, assist countries in the region that are not yet affected by the Ebola virus to prevent its outbreak. This health-promoting United Nations Mission will also coordinate and channel the contributions made by all.

For its part, in addition to the contributions it has already made through the European Union, Luxembourg has participated in the following undertakings: the WHO regional response programme to the Ebola virus, the MSF treatment protection programme, the World Food Programme special operation aimed at providing humanitarian air service in Guinea, Liberia and Sierra Leone, and an initiative to fight Ebola in cooperation with Lagos University Teaching Hospital.

In view of the High-level Meeting to be convened by the Secretary-General on 25 September, we are considering the possibility of making further contributions, in close consultation with the countries of West Africa and the United Nations.

Acting quickly to stop the Ebola virus must go hand in hand with long-term efforts aimed at preventing the recurrence of such a crisis in future. We must face up to the structural challenges that condemn the greater part of the citizens of West Africa to live in poverty and precarity and that increase their vulnerability to shocks such as the Ebola epidemic.

The Peacebuilding Commission will have a role to play in this context by supporting the strengthening of accountable and effective State institutions. The Guinea configuration of the Commission, over which I have the honour of presiding, is listening closely to
the authorities of the Republic of Guinea to review peacebuilding priorities in the light of the current crisis, and we are ready to work with our colleagues from the Liberia and Sierra Leone configurations to strengthen the regional approach in this context.

Mr. Mangaral (Chad) (spoke in French): I wish to thank the Secretary-General; Dr. David Nabarro, United Nations System Senior Coordinator for Ebola Virus Disease; Dr. Margaret Chan, Director-General of the World Health Organization (WHO); and Mr. Jackson Niamah of Médecins Sans Frontières (MSF) in Liberia for their briefings.

We also commend the United States’ leadership in its presidency of the Security Council in devoting this special meeting to the Ebola epidemic. On top of the civil wars, the dire effects of climate change, terrorism and other scourges that often affect the African continent, the Ebola epidemic represents a threat to peace and security in African countries and in the rest of the world.

Three countries on the continent are directly involved: Guinea, Sierra Leone and Liberia. The latest WHO figures report that 2,600 persons have died out, with at least 5,000 cases reported in all three countries. Those figures may, unfortunately, be lower than the actual ones, as many cases go unreported.

Liberia is by far the hardest hit country, judging from the magnitude of the ravages caused by Ebola in the country. As noted by the Secretary-General, Ebola is not simply a public-health crisis; it has lasting humanitarian, social and economic consequences and could even threaten the economic stability of the countries affected.

On the economic and social levels, the measures taken by some international transportation companies and some countries to limit air and sea traffic with those countries affected by Ebola have dire effects on the countries’ economies, because they lead to a decrease in the activity level in many sectors and affect the living conditions of the populations.

According to a forecast by the World Bank, a drop of around 2.5 per cent in gross domestic product is to be feared in the three countries affected. The deaths caused by Ebola, the precarity of the basic health and social services and the lack of organization of State institutions, which includes hospital closures in some countries, are just some of the many consequences of the Ebola epidemic. The case of Liberia is an illustrative one in that respect and broadly justifies the call made to the Secretary-General on 29 August last by the leaders of the three countries, calling for the lifting of the aforementioned measures.

The Peace and Security Council of the African Union, during its sixteenth special session held in Addis Ababa on 8 September, also called for similar measures to be taken so as to prevent isolation of the affected countries. In response, Senegal decided to open a humanitarian corridor to facilitate the delivery of assistance to the countries affected, and Ghana authorized the establishment of an air bridge with Liberia for humanitarian flights.

In Africa as a whole, we are seeing the continued spread of the Ebola epidemic, with recent cases in Nigeria, which, fortunately, have been contained. That trend shows clearly that the situation, is far from being contained, and that the continent and even the rest of the world are at risk.

We are pleased at the somewhat tardy response of the international community, led by the Security Council. Today’s meeting devoted to Ebola shows a collective growing awareness of the gravity of the situation, particularly through resolution 2177 (2014), which we have just adopted unanimously and which calls for the mobilization of the international community against this scourge.

According to the United Nations, the cost of the fight against the Ebola epidemic in West Africa will total at least $1 billion, half of it for Liberia alone. The gestures of solidarity from the African Union, whose Peace and Security Council has decided to send a military and civilian team to Liberia to fight Ebola, are commendable, as are similar efforts on the part of the Economic Community of West African States. We also welcome the European Union’s decision to provide €140 million in financial aid, and that of the World Bank, which has announced that it will divide around $105 million between the three countries.

At the bilateral level, we were pleased to note the decision of the United States Government to release the substantial amount of $250 million in financial assistance, including sending a specialist team of 3,000 soldiers to combat the Ebola outbreak. We thank bilateral partners such as China, France, Cuba, the United Kingdom, Chile, Pakistan and others for their contributions to the fight against Ebola. And the ministerial meeting on Ebola to be held next week on the
margins of the general debate of the General Assembly will undoubtedly enable us to improve our formulation of the priorities and our coordination of international aid in order to combat this epidemic more effectively.

In conclusion, as the Director General of the World Health Organization said, we believe that the crisis we are facing today is unprecedented in our era. That is why we think it is possible to continue to reduce the spread of the Ebola epidemic only if the international community can react more quickly and effectively. One of the priorities in this fight is focusing particular attention on children, women and other vulnerable sectors of society. My country is ready to make a financial contribution whose amount we will announce shortly.

**Mrs. Perceval** (Argentina) *(spoke in Spanish)*: I thank you, Madam President, for convening this emergency open debate and enabling all United Nations Member States to share their views on and concerns about the Ebola outbreak in West Africa. Its implications and its threat it involves all of us and demands a global response. I would also like to thank the Secretary-General, Dr. David Nabarro, Senior United Nations System Coordinator for Ebola; Ms. Margaret Chan, Director General of the World Health Organization; and Mr. Jackson Niameh of Médecins Sans Frontières for their thoughts, their knowledge and, above all, for their commitment. I would like to express how deeply we respect all the work they are doing to try to halt the spread of this serious epidemic. On behalf of the people and Government of the Republic of Argentina, I would like to convey to the thousands of victims and their Governments our deep sorrow and solidarity. There can be no question that Argentina will also cooperate with this new mission, whose cause belongs to the whole world.

Unfortunately, this is not the first time that the Security Council has met to deal with a situation that has arisen owing to a public health crisis. We should recall that the Council has dealt with the impact of HIV/AIDS and its implications for public security conditions in various societies. The gravity of the current Ebola epidemic unquestionably justifies our meeting today. If we do not respond with urgency and from the heart, with health policies on treatment, prevention and education, the living conditions of peoples around the world may be dramatically affected, as the lives of thousands of people in the countries of West Africa are being affected. And, fundamentally, if we do not act with urgency and commitment, we will have to answer to our consciences and our institutional commitment.

Like the Secretary-General, Argentina believes that Ebola is not merely a health problem. It is a multidimensional reality, and it must be dealt with accordingly. We recognize that this epidemic has the potential to kill the present and wound the future, eroding the possibilities of human social and economic development, which is at the root of most of the conflicts we deal with in the Council, and which may have consequences for security. Indeed, the epidemic’s epicentre is a region that has suffered from severe conflicts, and where, after expending great effort, courage and intelligence, the people have begun to have better prospects for the future. Tragically, this outbreak of Ebola is jeopardizing that progress, and if it is not contained very soon it could have worse humanitarian, economic and social consequences for the countries affected, as well as for their stability, democracy and security.

For that reason, we believe that in this time of despair, uncertainty and fear for so many, we cannot be selfish. We must pool all our efforts under the coordination of the United Nations, and not compete among ourselves. For that reason, Argentina supported and sponsored the adoption today of resolution 2177 (2014) by a Council that has been supporting the stabilization of some of the most deeply affected countries and that cannot stand on the sidelines as the international community responds. Because while hunger, poverty and sickness do not directly cause conflicts, it is also true that situations of insecurity may arise in the wake of so many injustices.

Argentina believes that we should establish appropriate cooperation between the various bodies under the terms laid down in the Charter of the United Nations. It is important to remember that the responsibility for dealing substantively with the causes and consequences of this epidemic is in the purview of other entities and agencies within the United Nations system, such as the General Assembly, the Economic and Social Council and specialized agencies such as the World Health Organization. For that reason, while we support cooperation on the part of the Security Council, we also believe that the General Assembly should have the responsibility of responding to the Secretary-General's proposal to establish a special mission in the region. I am certain that Argentina will work with all the urgency and responsibility needed to ensure that the
United Nations Mission for Ebola Emergency Response will become a reality in the coming days.

In conclusion, I cannot fail to stress that an outbreak of this nature could have been tackled more effectively if the countries of the region had had more solid, complete health-care systems with better infrastructure and better-trained human resource capacities. But what we are seeing is the reality of our developing countries. It is the reality of poverty, not the inevitability of destiny. A little less than three years ago, in this very Chamber, Ms. Chan expressed her concern about the differences between rich and poor countries, pointing out that the gap in health-care spending between them ranged from as little as $1 per person to nearly $7,000 (see S/PV.6668). The difference in life expectancy between some countries exceeded 40 years.

What we are looking at is inequality and injustice. The challenge facing us is about a fairer distribution of wealth and reform of the international financial system in order to create financing for development that is based on solidarity and cooperation, not just handouts to alleviate suffering. We must look at the weight of the burden of sovereign debt. The United Nations agencies should have adequate budgets that enable them to operate effectively.

Finally, we would like to convey our respect for all those who are working, with all their heart, at the very heart of the epidemic, to halt this scourge, and to highlight the support being provided by many countries and organizations for that task. We are also grateful to the Secretary-General for his leadership and thank him and the Organization’s agencies.

**Mrs. Kawar** (Jordan) (*spoke in Arabic*): I would first like to thank you, Madam President, for organizing this important meeting. I would also like to express my appreciation to the Secretary-General, Mr. Ban Ki-moon, and to the Senior United Nations System Coordinator for Ebola, Dr. Nabarro; and to the Director-General of the World Health Organization, Ms. Margaret Chan; and the representative of Médecins Sans Frontières, Mr. Jackson Niamah, for their important briefings.

The spread of Ebola, which is ravaging in Liberia, Sierra Leone and Guinea and is spreading in an unprecedented way, has drawn attention to the need to adopt general methods to deal with major epidemics. The international community has never seen this kind of epidemic spread so quickly in cities and rural areas with such an exponential, complicated impact. That means that there is a crisis in the countries affected and on the African continent as well. As that affects the international community, the challenge of Ebola, which is causing grave loss of human life, has appeared at a time when Guinea, Liberia and Sierra Leone have reached political stability after many years of suffering, owing to drought, civil war and conflict. The crisis has grown exponentially. Each contamination causes new cases, and health care workers are dealing with difficult challenges. Care for the sick and burial of those who have died have themselves become extremely dangerous.

The crisis, moreover, has had a serious economic and social impact. Despite the dangers, given our belief in regard to the principles of the United Nations, Jordan is playing its role in Liberia. Therefore, we have deployed over 200 trained police officers, as well as 12 observers. Three observers will depart next week and three others have been appointed to depart. That is part of our involvement in the international effort, because Jordan is trying to protect the Jordanian contingent to ensure that it is not contaminated, which is beyond the protections given by the United Nations with respect to health care personnel. To stop the epidemic, we need to take exceptional and coordinated measures and to coordinate our response with the United Nations. In that regard, we appreciate the initiative of the Secretary-General to send a health mission to begin work on 29 September.

Finally, we would like to highlight the fact that we need to give priority to preventive measures to stem the spread of the epidemic. Jordan encourages the international community to continue its immediate assistance to the Governments affected in West Africa in their efforts to resume the gains of development that have been undermined by the spread of the epidemic.

**Mr. Barros Melet** (Chile) (*spoke in Spanish*): We thank the presidency of the United States for convening this debate and for presenting resolution 2177 (2014), which we adopted today and which Chile co-sponsored. I also wish to thank the other speakers and presenters who have preceded me.

Chile regrets that this tragedy has cost thousands of human lives and has affected West Africa, mainly Guinea, Liberia and Sierra Leone. Our solidarity goes to the affected families and the Governments of those countries. A “public health emergency of international concern” was how the World Health Organization
identified Ebola a few days ago, and yesterday, a senior official of that agency declared that the crisis that we are facing is "unparalleled in modern times", pointing out that the numbers of those infected have doubled in 21 days.

The epidemic has been undermining the social and economic stability of those countries, which are emerging from conflict, at a time when they have been pushing ahead with determination in their respective peacebuilding processes. The threats to international peace and security have extended beyond the traditional borders of armed inter- and intra-State conflicts. Therefore, whenever there is a genuine threat of any type or origin to the stability, security and peace in an area or region that is in the process of building peace and supported by United Nations missions, the Council, within the purview of its competencies and representing the international community, must adopt the necessary decisions that will ensure the conditions needed in order for those affected countries to adopt and implement the technical measures and specific policies they need to tackle the emergency.

The international community must act with the resources and institutions at its disposal, such as the Peacebuilding Commission, since those three countries are part of its agenda. There also must be the necessary coordination among the affected States, the United Nations and regional and subregional organizations and between the States and donor agencies so as to avoid duplication of efforts and to optimize the use of resources.

Although Chile recognizes that a peace mission is not a public health operation, we should look into how, as in the case of Liberia, we can adjust the work of that mission on the ground so as to afford the necessary collaboration with the authorities of the affected countries without overlooking the need to ensure the protection and security of humanitarian workers for health and peacekeeping.

One of the critical points that we need to address in this crisis is to find effective mechanisms to break the chain of transmission of the virus, which has affected, to a large extent, women and vulnerable groups. In that regard, we should place emphasis on the education of the population and medical personnel so as to eliminate erroneous prejudices about the virus, avoid stigmatization and ensure that communities and families play their rightful roles.

Based on the study published yesterday by the World Bank Group, if the virus continues to expand in the most affected countries, the economic impact in those countries could increase eight times over, with potentially catastrophic consequences, and the study recommends the implementation as soon as possible of measures to contain and to provide multi-sectoral responses that will at the same time reduce the uncertainty. For that reason, it is necessary to issue a call that no restrictions be imposed on the flow of persons and trade, interrupting airline and maritime services, which would cause a blockade that would exacerbate the negative economic impact in those countries and increase fear in the society with unforeseen consequences. Such measures are not supported by studies, which indicate the danger of such operations.

Finally, Chile appreciates and underscores the international solidarity of various countries, such as Cuba, the United States and the United Kingdom, as well as the African Union, among others, whose rapid responses are contributing in this direction. Likewise, we are pleased by the correct decision of the Secretary-General to appoint Dr. David Nabarro as Coordinator of the organization to tackle the virus, and we will support his work and initiative to establish a global coalition against the epidemic.

The President: I now give the floor to the Minister for Foreign Affairs of Liberia.

Mr. Ngafuan (Liberia): I bring greetings from Her Excellency Mrs. Ellen Johnson-Sirleaf, President of the Republic of Liberia, as well as from Liberians both at home and abroad. Liberia commends you, Madam President, and other members of the Council, for elevating the ebola crisis onto the agenda of this body and bringing into focus the urgency of international action. We hope that today's deliberations will spur a response from the global community that is commensurate with the speed and intensity of the Ebola challenge.

Until 22 March 2014 — when the Ebola virus disease invaded our country and began to wreak havoc in Foya, a small city in a tri-State area where Liberia, Guinea and Sierra Leone meet — the Liberian people, with the unswerving support of the United Nations Mission in Liberia, had been enjoying the dividends of the peace achieved in 2003, following 14 years of bloody civil conflict. During those years of calm, we succeeded in institutionalizing the democratic culture and had begun to take some strong steps, with the support of the United
Nations and other international partners, to address the legacy of socioeconomic devastation bequeathed by the protracted Liberian civil war.

Since the Ebola outbreak, the Government of Liberia has taken a host of measures, including the heightening of awareness and prevention campaigns to address the crystallized denial and the deep-rooted traditional practices that create fertile ground for the spread of the disease. We declared a state of emergency, and we are continuing to dedicate significant amounts of our own paltry resources to the fight. We have also enlisted the constructive involvement of our people in the battle as we constantly review and revise strategies to accommodate to the evolving nature of the crisis.

In spite of our efforts, buttressed by those of our international partners — prominently the World Health Organization (WHO), Médecins Sans Frontières and the United States Center for Disease Control — the Ebola virus disease continues to sprint faster than our collective efforts to contain it. It has now extended its deadly embrace to nearly 2,800 persons in Liberia, leading to the loss of 1,500 precious lives. One hundred and seventy of our small community of health-care workers have already been infected, 80 of whom have lost their lives. Unfortunately, given that women constitute the bulk of our health-care workers and are traditionally the ones who care for sick members of the family, nearly 70 per cent of all those infected by the Ebola virus disease in Liberia are women.

The huge toll that Ebola has taken on health-care workers and on our general health system has seriously undermined our ability to adequately respond to routine illnesses such as malaria, typhoid fever, measles, and diarrhoea. Moreover, an increasing number of pregnant women are dying while trying to give life.

Even before the outbreak, we were grappling with herculean challenges. They include finding productive employment for a significant number of our people — especially the youth, some of whom are ex-combatants — strengthening the rule of law and implementing measures for security sector reform. We were fully involved in various peacebuilding and peace consolidation activities through Liberia’s engagement with the Peacebuilding Commission. We were also making valiant efforts to comply with regional protocols aimed at curbing the spread of small arms and light weapons and transnational crime. The Ebola outbreak has distracted our attention from those national priorities and has gravely undermined our ability to address them, with the attendant risk of adversely affecting peace and security in our country and our region.

The impact of Ebola has been multidimensional. It has negatively affected all sectors of our economy and has effectively arrested the progress of our nation. A preliminary assessment points to an estimated decline in real growth of the gross domestic product of 3.4 per cent, plummeting from an earlier projection of 5.9 per cent to a low of 2.5 per cent. The mining, agriculture and services sectors are expected to bear the greatest brunt of the crisis. As we mourn daily the loss of a family member, a friend or a fellow citizen as a result of Ebola, we are becoming increasingly concerned about the long-term socioeconomic difficulties that the Ebola virus disease will occasion.

Liberia expresses its profound appreciation to the Secretary-General for his many initiatives, including his announcement today of a new United Nations mission — the United Nations Mission for Ebola Emergency Response, or UNMEER — to scale up the response and mobilize the international community to deliver urgently needed support in a coordinated manner. We thank the wider international community, including the African Union, for all the effort and the resources — financial, human, and material — that have so far been dedicated to the fight against Ebola.

The Liberian Government and people offer deep gratitude to President Barack Obama and the people of the United States for the heart-warming announcement that the United States Government will take a host of bold and concrete initiatives, including the deployment of engineers, military and medical personnel and equipment to our region to establish new treatment units and to train national staff. As a major Power, the United States has made a major move, and it is our hope that new, additional and complementary contributions will be forthcoming to our region in a true expression of international solidarity.

While we commend some members of the international community for extending hands of solidarity and empathy to us as we grapple with this virus, we are shocked and remain concerned by the actions of others in imposing travel and other restrictions on Ebola-affected countries. Those actions, which run counter to advice from the WHO, the International Civil Aviation Authority and other experts, border on blanket stigmatization and have now started to seriously undermine humanitarian efforts in our countries. We
therefore call upon the concerned Member States to reconsider their policies in light of the expert advice provided by the specialized international agencies.

The experts have put out a very gloomy prognosis for what would happen in the next few weeks or months if the global community fails to take bigger, bolder and timely action to disrupt the further transmission of Ebola. Just three weeks ago, WHO estimated that 20,000 persons run the risk of being infected, half of whom may come from Liberia alone. Two days ago, President Obama, while appropriately declaring the Ebola epidemic a potential threat to global security, expressed fears that if the current trend continues, hundreds of thousands of people may be infected with the virus.

The global community cannot remain passive and allow those apocalyptic predictions to come to pass. We cannot sit idly and watch, as if we were watching a movie on our TV screens. The sobering reality is that we are not watching a pre-recorded movie with a predetermined climax. We, the affected countries, as well as countries, institutions and individuals of good conscience across the globe, are all actors in this evolving plot and can effect the ultimate outcome, based on what we do or fail to do. It would be tragically shameful if we failed to act quickly, robustly and concertedly in putting an end to the spread of this deadly disease.

We therefore thank the Security Council for the forward-looking resolution 2177 (2014), adopted here today, and encourage all Member States, to support the resolution through concrete actions. Let us all join in the Act Now campaign against Ebola.

The President: I now give the floor to Mr. François Lounché Fall, Minister for Foreign Affairs and Guineans Abroad of Guinea.

Mr. Fall (Guinea) (spoke in French): It is my pleasure at the outset to express to the United States presidency the profound gratitude of the Guinean people and Government, especially of His Excellency Mr. Alpha Condé, President of the Republic, for having granted the joint request of three States of our Organization — Guinea, Liberia and Sierra Leone — to include a crucial issue on the agenda of the Security Council. I am speaking of the terrible epidemic of haemorrhagic fever of the Ebola virus. I would also like to thank all of the other members of the Council and welcome the presence of the Secretary-General, Mr. Ban Ki-moon, the Director-General of the World Health Organization, Ms. Margaret Chan, and Dr. David Nabarro, Senior United Nations System Coordinator for Ebola.

My delegation welcomes the Council’s unanimous adoption of resolution 2177 (2014) and the very impressive number of States — 130 — that co-sponsored it. The Council has thereby demonstrated its correct understanding of the urgent need for a global, comprehensive solution to face an unprecedented scourge that truly threatens peace and security in the entire West African region — our collective security, I would say.

Beyond the health aspect and widespread panic that has gripped our peoples, the economic and social consequences of the disease have negatively affected the development of our countries and the well-being of our peoples. Ebola is hampering economic activity and affecting all sectors, particularly transportation, trade, tourism and agriculture. That could result in a decline in the gross domestic product by about 2.5 per cent, suddenly undermining all of the development efforts and strategies undertaken by our three countries.

Despite the courageous preventive measures taken by our States to contain and stop the spread of the disease, the scourge has continued its devastation and continues to defy human intelligence. At this stage, without appropriate measures, a humanitarian crisis is just over the horizon. We must stop it. We must stop it or risk jeopardizing the stability that was won at such great cost by our three countries, which are emerging from a long period of political and institutional crisis, or from a fratricidal war.

It is important to stress that the three countries are all on the agenda of the Peacebuilding Commission. That is why we applaud the mobilization of the international community, which understands the need to take ownership of the fight to eradicate the scourge, which is truly an obstacle to the sustainable development to which we aspire.

Also, the decision taken by the Executive Council of the African Union in Addis Ababa on 8 September is aimed at strengthening solidarity among our States, because border closures, flight restrictions, stigmatization of victims, isolation of affected countries and repatriation of their citizens constitute a weapon that is more dangerous than the scourge being combatted. As highlighted recently by President Condé, we should not isolate the countries affected by Ebola,
but all efforts should be implemented to isolate Ebola and eradicate the epidemic.

The Security Council must provide oversight and lend all its weight to ensure compliance with the recommendations of the World Health Organization and the International Air Transport Association to that end. Similarly, all bilateral and multilateral partners, in the same spirit of solidarity, will work to provide the appropriate and necessary support to ensure care for victims and prevention and eradication of the virus.

For its part, beginning with the declaration of 21 March 2014 on the outbreak of the Ebola virus, the Guinean Government and its partners have been deeply involved in the response to the disease. The outbreak seemed to be under control by mid-May. However, a resurgence in the number of confirmed cases and the appearance of new areas of outbreak were reported in early June. The epidemic also spread to Sierra Leone and Liberia, countries that border Guinea, thereby leading to a subregional crisis. Several thousand people have already been affected. More than 2,400 deaths have been recorded in the three affected countries, including almost 600 in Guinea, the majority of whom were women.

A national health-care emergency was immediately declared by the President of the Republic, as part of the response to the Ebola virus disease. Several days ago, the national committee to manage the epidemic adopted an accelerated plan to respond over two to six months. A set of preventive measures has been implemented, including the establishment of safety zones at all border crossings and restrictions on movements of individuals and screening them in bus stations and at all of the country’s border crossings, including the Conakry international airport. Those security and prevention measures at the departure area of the Conakry airport have proven reliable, and they justify maintaining the flight timetables of the airline companies Air France, Brussels Airlines and Royal Air Maroc.

Furthermore, there are many other actions on the ground, particularly awareness-raising among the population on preventive measures, strengthened monitoring, tracking contacts, establishing a regulatory committee, secure management of burials and disinfection, and distribution of personal protection and hygiene kits.

Today, the Government has focused on local communications in order to influence the perception that some communities have of the disease. Through awareness messages in the national languages, more people can be alerted, especially in the rural areas where people are still reticent in the presence of health-care workers involved in the fight against the Ebola virus.

Despite all efforts by the Government and its partners, many challenges remain and urgent needs to address in order to check the spread of the epidemic. We have ever-growing needs in terms of human, financial and material resources. We need essential equipment: protection and hygiene kits, medicines, mobile hospitals, thermoflashes, stretchers, hospital beds, etc. We particularly need ambulances and transport vehicles for the medical personnel. The complete list of our requests is available.

It is appropriate here to again thank France, the United States, the Russian Federation, China, Japan, the United Kingdom, the European Union and several other bilateral and multilateral partners that — together with the World Health Organization, Médecins Sans Frontières, the Centers for Disease Control and Prevention in Atlanta and countries such as Morocco and Mali — from the very outset have demonstrated the principle of solidarity, fraternity and friendship.

Naturally, our dedicated Secretary-General, Mr. Ban Ki-moon, has again given, and continues to give, the best of himself in this important period to ensure the very future of some of our States. His initiative in establishing the United Nations Mission for Ebola Emergency Response is evidence of that. We are grateful to him for that and dare to hope that the Security Council, as the guarantor of international peace and security, will take a strong part in that momentum and that the global scientific community will be able to overcome the Ebola virus soon, as it has succeeded in doing in the case of other, more deadly viruses.

The President: I now give the floor to His Excellency Mr. Samura M.W. Kamara, Minister for Foreign Affairs and International Cooperation of Sierra Leone.

Mr. Kamara (Sierra Leone): Let me at the outset express, on behalf of President Ernest Bai Koroma and the Government and the people of Sierra Leone, our profound appreciation to you, Madam President, and the members of the Security Council, for convening this all-important meeting.
Our gathering at this crucial time, particularly as the consequences of the unprecedented outbreak of the Ebola virus unfold in our subregion, underscores the heightened concern of the international community. Clearly, the impact of the epidemic has not only been frightening but also taken a toll on the entire fabric of the three countries concerned. The need to understand and to robustly respond to the worst-ever Ebola outbreak in history therefore cannot be overemphasized.

Let me also convey the sincere appreciation of President Koroma to all those who have, in turn, expressed their sympathy to the people of Sierra Leone either through telephone calls, in particular the Secretary-General and President Obama, or by high-level visits of United Nations agencies, including Ms. Chan, who is sitting on my left. Mr. Jackson Nabarro also visited. We appreciate all such visits, most particularly the very recent visit of the President of the Economic Community of West African States Commission, President Mahama. They all came with expressions of sympathy, good hope and good wishes.

We are in unfamiliar territory. To date, the origins, symptoms, threat and contagion of Ebola are not only baffling but also very confusing. Ebola is challenging us as the human race. It is challenging our level of preparedness at both the national and the international levels. It is challenging our behavioural patterns and our resolve to address such an epidemic. It is the very first time that we have had such an epidemic. It is also testing our resilience. We have heard today that it is testing our level of coordination and our patience in understanding one another.

Our people in Sierra Leone live in fear and cannot understand the nature of a disease that claims a life and then prevents family members from burying their loved ones. Despite the deployment of all such measures, the crisis has deepened and the virus remains one step, or even many steps, ahead of our efforts. Ebola, as an extraordinary disease, has precipitated extraordinary actions by Sierra Leone, including a state of public health emergency. There are various high-level committees, jointly managed by development partners and the national authorities.

From tomorrow, we will observe a three-day curfew period. That is not to our liking, but since Ebola is an extraordinary disease, it requires extraordinary steps because there is no cure for the virus. We hope that, after tomorrow, there will be a better sense of understanding and appreciation given that, as of today, the sense of fear and, we believe, ignorance, denial and misinformation are aspects that are diminishing. However, we still have much more to do given the fact that Ebola is spreading exponentially. As of today, the cumulative figure of confirmed cases stands at 1,571 and of confirmed deaths at 483, 60 per cent of whom are women. Children are greatly affected. Importantly, even health facilities and personnel are impacted. We have lost four doctors. Several nurses and health-care workers have also died.

As the international community, and the United Nations in particular, can testify, since they have been fully involved in our post-conflict peace consolidation and peacebuilding activities, in Sierra Leone we have made tremendous progress in rebuilding the economy and the lives of those who suffered during the war. Last year, I was here to join the Security Council in celebrating with Sierra Leone the successes that we have made in that direction (see S/PV.7034). We graduated from the United Nations Integrated Peacebuilding Office in Sierra Leone and proudly from the Peacebuilding Commission reconfiguration.

Today, we are here in a different capacity. It is a sad story that is reversing all our gains and, more particularly, if we are not careful, that has strong global systemic challenges. If we do not act fast, it will challenge our human capacities. That is why I fully appreciate the unanimous adoption of resolution 2177 (2014). However, I agree with you, Madam President, that adopting a resolution is not the end but a means to an end. We therefore need to finance and implement the resolution. In doing that, I must emphasize that speed is of the essence. Accuracy, appropriateness and the lack of conditionality in the flow of funds and support are all very important elements in rendering effective assistance.

Aid for Ebola is dedicated assistance. We must therefore rally and be completely serious in the kind of aid provided and the type of responses and interventions that we bring to bear in the three countries. At this juncture, let me perhaps make one or two suggestions.

Today, in the three countries, we have laid the foundations for the restructuring of our public health sectors. Treatment and holding centres have been constructed and laboratories installed. Yet there is no centre for disease control of a significant nature. President Ernest Bai Koroma is approaching the People’s Republic of China for the use of an ultramodern hospital that has been constructed at Jui
to be transformed into a centre for disease control to serve the country, the subregion and, in particular, even the continent of Africa. All other developed countries have centres for disease control. I would therefore like to urge the Security Council to join President Koroma in appealing to the People’s Republic of China.

With a centre, we will have modern research facilities to be able to understand the origins of such infectious diseases. It is not only Ebola that plagues Africa. We still have problems understanding malaria. There is tuberculosis, HIV/AIDS, smallpox and chickenpox. All those diseases exist in Africa. We need a centralized institution where we take our knowledge forward. So I would like to plead that the Security Council join us in pleading with the People’s Republic of China.

The fabric has already been set up because the intervention of China in constructing a treatment centre and a modern laboratory has just been done within the vicinity of the hospital. It will use the hospital as a holding centre, not just a treatment centre. Certainly, the treatment centre that has been constructed by the United Kingdom will also be brought to bear in the use of the building. South Africa is helping us with laboratory assistance.

I believe that, as we construct prefabricated treatment and holding centres, that our challenge going forward will be to have a centre for disease control. To that end, I would like to appeal to all those institutions that may have been affected by the derogatory remarks and unfair comments of the sovereign people of Sierra Leone. There is a saying that when a man is drowning, he will not hesitate to take hold of even the sharpest blade. I would like to particularly express our sympathy with and our appeal to all of those institutions. I am sure many of them have been taken aback, including the World Health Organization (WHO), and we understand that there have been complaints from the media and from the citizens of Sierra Leone. That happened simply because there was a time when we had a patient — the most recent casualty, a woman doctor — and I think there was an appeal to WHO for evacuation. But again, there was a lack of understanding. The WHO does not have global hospitals. WHO has planes. But that is the reality when one is suffering, when one is there on the ground.

I also want to state that I would not be surprised if the discussions at the sixty-ninth session were overshadowed by discussions on Ebola. I think it would be very appropriate, by the end of the discussions at the General Assembly’s sixty-ninth session, for us to be very clear and come up with definitive conclusions on how to not only contain the spread of Ebola, but treat Ebola, or more particularly how to move forward in the treatment of other infectious diseases. To those countries that, through panicked reactions, have closed their borders and cancelled flights and shipping arrangements, I want to join my colleagues from Liberia and Guinea to plead for a return to normalcy. Ebola was not the making of any one of those three countries. It just came. I hope that, in the not-too-distant future, it will go back as fast as it came.

The President: I now give the floor to the representative of Cuba.

Mr. Moreno (Cuba) (spoke in Spanish): At the outset, allow me to thank the Secretary-General, Dr. Nabarro, Ms. Chan and Mr. Niamah for the information that they have provided to us. We assure them that it is highly useful and necessary.

The gravity of the situation created by the Ebola epidemic that is plaguing several countries in Central and West Africa highlights the need to deal with it energetically and with the cooperation of all countries. In this spirit, at the request of Secretary-General Ban Ki-moon and the Director General of the World Health Organization (WHO), Ms. Margaret Chan, Cuba has already engaged in an assistance initiative under the leadership of the WHO, as announced last Friday, 12 September 2014, by the Minister of Health of the Republic of Cuba, Mr. Roberto Morales Ojeda. That cooperation will enable a medical brigade to be sent to Sierra Leone. Its members have expressed their willingness to join the fight against this epidemic, have over 15 years of professional experience and have worked in other countries facing natural and epidemiological disasters and in medical cooperation missions. We are ready to work alongside other countries, including those with which we do not maintain diplomatic relations.

Cuba’s response is in line with our country’s ongoing solidarity and cooperation with Africa, Asia and Latin America and the Caribbean. Over the past 55 years, we have cooperated with 158 countries, with the participation of 325,710 health workers. A total of 76,744 health workers have been working in 39 countries in Africa. Currently, 4,048 Cubans, 2,269 of whom are doctors, are providing services in 32 African nations.
In addition, Cuba, which is a small and poor country, has trained, to date and entirely free of charge, 38,940 doctors from 121 countries. Currently, 10,000 young foreigners are studying medicine on our island, 6,000 of whom are doing so totally free of charge. That is being done in accordance with the principle of providing ongoing assistance to the poorest among us paid for by those with resources, with a view to ensuring the sustainability of the Cuban health system and international cooperation.

In this struggle against Ebola, which should be everyone’s battle, the Government of Cuba has decided to maintain its cooperation and expand it to the most affected countries, which have already been informed. In the rest of the region, the areas not affected by Ebola and where we have, as I mentioned, in excess of 4,000 health personnel, we are ready to contribute to the prevention of this disease. The medical brigades that will be sent to Africa for the fight against Ebola belong to the Henry Reeve International Contingent, which was created in 2005 and which includes doctors specialized in facing disasters and large epidemics. This response on the part of the Government of Cuba confirms the values of solidarity that have guided the Cuban revolution: not offering our leftovers, but sharing what we have.

Africa is awaiting an immediate response by all Member States, especially those with resources. It is urgent that we join this global effort against Ebola. Humanity owes a debt to the peoples of Africa. We cannot disappoint them.

The President: I now give the floor to the representative of Brazil.

Mr. Patriota (Brazil): I thank you, Madam President, for convening this meeting in an open debate format. I also thank the Secretary-General, the Director-General of the World Health Organization (WHO), the Senior United Nations System Coordinator for Ebola and the representative of Médecins Sans Frontières. Let me also acknowledge the presence of the ministers of Liberia, Guinea and Sierra Leone and the Deputy Minister for Foreign Affairs of the Republic of Cuba. We welcome the Secretary-General’s announcement of the establishment of the United Nations Mission for Ebola Emergency Response, to be headed by a Special Representative of the Secretary-General, and look forward to further examining this issue in the General Assembly.

Brazil welcomes this opportunity to reiterate its commitment to assisting our sister nations of West Africa to combat the effects of the Ebola virus. We recognize the disease’s potential to destabilize fragile situations in Liberia, Guinea and Sierra Leone and spread far beyond the affected countries. However, we underline the need to treat the outbreak first and foremost as a health emergency and a social and development challenge rather than a threat to peace and security.

Brazil welcomes the contributions made thus far by the international community. In keeping with your suggestion, Madam President, that this meeting allow for the announcement of specific contributions, I wish to announce that Brazil has shipped emergency supply kits to support local efforts in Liberia, Guinea and Sierra Leone, in coordination with local representatives of WHO. Each of those kits contains personal protective equipment for infection prevention and control and medical supplies to care for hundreds of patients. Together, they account for a three-month supply for a total of approximately 7,000 people. Additionally, the Government of Brazil has announced an initial donation to assist efforts by WHO to curb the virus. Moreover, President Dilma Rousseff has just authorized a donation, on an exceptional basis, of thousands of tons of rice and beans, through the World Food Programme, targeted to the countries affected most by the Ebola disease.

Not only must we strive to contain the spread of the virus, but we must make concerted efforts to contain the potential of the outbreak to reverse or undermine the significant strides the region has made through peacebuilding and economic development in recent years, after decades of war. Bearing that in mind, I convened, in my capacity as Chair of the Peacebuilding Commission (PBC), an informal meeting of the PBC on 8 September to hear a briefing by Dr. David Nabarro. I also commend the Chairs of the Guinea, Liberia and Sierra Leone configurations of the Commission for having convened, in August, the first informal meeting of the configurations to discuss the impacts of the Ebola crisis on peacebuilding efforts in the three countries.

The statement adopted by the PBC after its 8 September meeting reiterated the Commission’s intention to serve as a common platform for discussion, information-sharing and awareness-raising in New York, engaging a wider audience of actors from Member States, international financial institutions and United Nations agencies. Noting with deep concern
the potential for the Ebola virus disease to reverse peacebuilding gains, the statement appealed to the international community to not isolate the affected countries, by maintaining transportation connections with adequate prevention measures. Containment measures must be designed in such a way that they do not aggravate acute problems associated with fragile social, political and economic conditions.

Let me recall that, on 21 August, when the United Kingdom organized an open debate (see S/PV.7247) on prevention, the early warning issued by the representative of Brazil, as PBC Chair, was the only reference to the Ebola crisis and its destabilizing implications for the region, which highlights the PBC’s role as an early-warning agent.

The outbreak underscores the importance of building local capacity to respond to public health crises. As Mr. Paul Farmer, co-founder of the international non-governmental organization Partners in Health, who is in Liberia this week, has noted, if the Ebola epidemic had instead struck regions in the developed world, there is no doubt that the health systems in place could contain and then eliminate the disease. The crisis in West Africa today is thus a reflection of long-standing and growing inequalities in development and in access to basic health care.

In line with the WHO Ebola response road map, the coordinated international response being rallied here today should place emphasis in supporting affected and at-risk countries by strengthening national capacities. Particular attention should be given to the security of local health workers, who are essential for containing the outbreak, but, unfortunately, if not adequately equipped, face higher risks of contagion.

The unprecedented outbreak of the Ebola virus disease is a test of our capacity to mobilize international efforts to support affected States while preventing further transmission. We express our conviction that the General Assembly, the World Health Organization and the Peacebuilding Commission are well equipped to deal with the disease and its consequences. That conviction is based on our confidence in the resilience of the peoples and Governments of Liberia, Guinea and Sierra Leone, who will not allow the epidemic to undermine all the hard-won progress they have made in stabilizing their countries and putting years of instability and conflict behind them.

Let us hope that the solidarity and commitment shown in the face of a cause that may affect the entire international community, inspire the Security Council to further promote cooperation and dialogue in its daily business.

**The President**: I now give the floor to the delegation of Morocco.

**Mr. Hilale** (Morocco) *(spoken in French)*: My delegation would like to thank you, Madam President, for convening this urgent debate of the Security Council on the issue of Ebola.

Today, more than ever before, West Africa is facing an exceptionally critical and dangerous situation, in particular in the countries most affected by Ebola: Liberia, Sierra Leone and Guinea. The epidemic is of unprecedented magnitude due to its geographical reach, the number of cases and the number of victims, which is increasing daily. The World Health Organization figures, the reports of Médecins Sans Frontières and various international forums and the scenes that the media describe daily are indeed horrible. Nearly 5,000 people are infected. More than 2,400 men, women and children have already died due to the virus. And there are fears that the actual death toll could be higher than that.

With a public health system that is already very weak and on the verge of collapse, the few hospitals that still exist in those countries and the few treatment centres are completely overwhelmed. Patients are turned away, and people are dying, literally, in the streets. Others are, right now, just sitting, waiting to die alone and abandoned.

The situation is deteriorating by the day, since there is no vaccine or specific treatment. The virus is spreading rapidly. It is highly contagious and deadly in 25 to 90 per cent of the cases. It is an unprecedented epidemic, absolutely lacking any controls. The number of people infected could rapidly double, or even triple, if not more, with profound implications not only for the region, but for the entire planet as well.

The Ebola crisis requires an exceptional international response to address the health crisis and the wider political and economic and, as President Obama said, security threats in the affected countries. We must urgently control the epidemic and we must act quickly. All parts of the international community are therefore called on today to coordinate a greater global response; control the outbreak and prevent its spread;
continue scientific research in the hope of finding new treatments and, hopefully, vaccines; allocate the financial and human resources necessary to support strategies to combat the deadly virus; build additional treatment units, including new insolation areas on the ground; distribute information packets to local families so they can better protect themselves; support national efforts in the affected areas; help affected countries to cope with the impact on the economies of local communities to prevent a humanitarian disaster and economic collapse; help those countries to build a sustainable public health system; and finally create an air bridge to obtain humanitarian assistance, medical supplies and to ensure the movement of medical personnel.

Concerned by the negative effects of the isolation of the countries affected by Ebola and the restrictions imposed on them, Morocco has decided, on the instructions of His Majesty the King, in a gesture of solidarity, to break the isolation and quarantine of the African countries affected by the Ebola virus by maintaining the Royal Air Maroc flights. To be sure, Royal Air Maroc has maintained its regular flights to the countries affected by Ebola. It continues to serve those countries on a regular basis by providing three flights per week to Liberia, four to Sierra Leone and seven to Guinea, Conakry. The airports in Conakry, Monrovia and Freetown will continue to receive Royal Air Maroc aeroplanes. In another gesture of solidarity, Morocco is providing appropriate assistance to those three countries.

The decision to maintain the regular Royal Air Maroc flight schedule reflects the fraternal feeling that ties Morocco to its African brother countries, and the feeling of belonging to a single future community and of solidarity and commitment through good and bad times.

In conclusion, allow me to simply say that this Chamber customarily resonates with speeches on human rights in Africa, on conflicts, on collapse and on genocide. This time Africa needs the Chamber to resonate not only with speeches of solidarity, but also speeches about commitments and decisions and measures to come to the assistance of the continent and in particular West Africa, especially those three African countries. As the Minister of Sierra Leone said, Ebola cannot be isolated. However, it will gravely harm the countries who drown in their misfortune. We are therefore called upon to ensure that this does not ever happen again.

The President: I now give the floor to the representative of Switzerland.

Mr. Zehnder (Switzerland) (spoke in French): Switzerland welcomes the holding of this emergency meeting of the Security Council. My delegation would like to thank the speakers for their analyses of the situation and their briefings.

The Ebola epidemic is not just a health crisis, but a potential threat to global security. It requires a global response that addresses both the health crisis and the broader societal, economic, political and security threats to the countries affected. The international community must therefore act quickly to contain and fight the crisis. Our efforts should focus on the needs of the affected populations and should not isolate the countries struggling with it. It is crucial to redouble our efforts to find an effective and safe cure to treat those who have already fallen ill and to prevent the spread of the disease.

Switzerland welcomes the Ebola response road map launched at the end of August by the World Health Organization (WHO). While we need to act swiftly, we also need to ensure that our efforts in the field are calibrated and coordinated under the auspices of the United Nations, thereby allowing international and local non-governmental organizations (NGOs) to multiply the impact of their operations. We also need to be prepared to address the crisis over the longer term.

Switzerland acknowledges the emergency appeal made in Geneva by the Office for the Coordination of Humanitarian Affairs (OCHA), the WHO and the Senior United Nations System Coordinator for Ebola, with a view to obtaining the means to cover the most urgent needs in Guinea, Liberia and Sierra Leone. For its part, Switzerland has so far provided humanitarian assistance through the provision of 14 tons of protective medical equipment to the Government of Liberia and has scaled up the capacities of its office in Monrovia to provide humanitarian aid.

From the onset of the crisis, Switzerland has provided support to local NGOs in their efforts to raise public awareness. Furthermore, Switzerland is financially supporting Médecins Sans Frontières, the World Food Programme and the United Nations Humanitarian Air Service. In total, Switzerland has so far allocated some $3.9 million to the fight against
Ebola. Following the recent conclusion of an assessment mission to Liberia, Switzerland is currently considering options to further increase its contributions to assist the international efforts.

Switzerland welcomes the decision of the Peace and Security Council of the African Union to authorize the immediate deployment of an humanitarian, military and civilian mission led by the African Union. We also welcome the efforts undertaken by the Peacebuilding Commission and invite it to further reflect on ways to contribute to a solution to the crisis, including by acting as platform to mobilize international support.

Finally, we welcome the Security Council’s willingness to carefully consider the implications of the Ebola crisis on the current and future configuration of United Nations Mission in Liberia (UNMIL). As a fully integrated peacekeeping operation, UNMIL should help coordinate and support the international community’s effort to tackle Ebola, in close coordination with OCHA and the crisis response mechanism.

Switzerland fully supports resolution 2177 (2014), just adopted. My delegation would like to express its gratitude for the leadership of the Council’s presidency on this urgent and important subject.

The President: I give the floor to the observer of the European Union.

Mr. Mayr-Harting: I have the honour to speak on behalf of the European Union (EU) and its member States. The candidate countries Turkey, the former Yugoslav Republic of Macedonia, Montenegro, Iceland, Serbia and Albania; the countries of the Stabilization and Association Process and potential candidate Bosnia and Herzegovina; as well as Ukraine, the Republic of Moldova, Armenia and Georgia, align themselves with this statement.

I would like to begin by expressing my appreciation to the United States for convening today’s debate. It is important that the Ebola outbreak remain high on the international agenda since it is not only an isolated regional problem but a problem that affects us all.

We are deeply concerned about the crisis caused by the Ebola virus. We deplore the loss of lives, both among citizens of the affected countries and among international responders. The best way to do them justice is to act and prevent further victims. We pay tribute to all humanitarian and health workers in the front line who are working tirelessly to bring the crisis to an end. We will continue to assist, in particular in the most affected areas, and to work with the World Health Organization (WHO), the Office for the Coordination of Humanitarian Affairs (OCHA) and other United Nations, regional and non-governmental organization partners to help tackle the disease as swiftly and efficiently as possible.

We welcome the leadership shown by the WHO in developing, in coordination with others, the Ebola response road map. We also welcome the United Nations coordination system created by the Secretary-General to ensure that all relevant parts of the United Nations system are activated and working coherently. We encourage continued close cooperation with the Emergency Relief Coordinator and humanitarian partners.

As it stands, the European Union has pledged €150 million, that is, nearly $200 million, for the treatment of patients, training, measures to contain the epidemic, medical laboratories, the maintenance of basic health services and budget support. As part of the package, the European Union has also provided €5 million to the African Union to support its very important efforts to provide assistance to the affected countries. To that, one needs to add the very substantive bilateral contributions made by member States of the European Union, both in funding and in kind, as well as through the secondment of specialists. Some of those bilateral contributions are coordinated through the European Union’s civil protection mechanism.

Finally, the European Emergency Response Coordination Centre has supported the EU efforts, including the participation of some key partners, such as WHO, Médecins Sans Frontières, UNICEF, OCHA and the International Federation of Red Cross and Red Crescent Societies. The European Union and its member States are working actively to find possible options for reducing the growing isolation of the affected areas in the region. The European Union will address the urgent need to retain and re-establish links for transport and necessary medical evacuation. For the steps ahead, the we are preparing a comprehensive framework for our response. That document, aligned with the WHO road map, highlights the main challenges and in what ways we have and will further assist with the response. The other related impacts, notably the food crisis, the health system crisis and the negative macroeconomic impact are also being considered.
We all recognize the magnitude of the challenge before us. On Monday, a high-level EU meeting on Ebola took place in Brussels and Health Ministers are meeting next week in Milan, where the Ebola crisis will be addressed. The European Union and its member States are committed to deploying all efforts to step up support and assist in putting an end to the outbreak.

The President: I now give the floor to the representative of Turkey.

Mr. Çevik (Turkey): I would like to thank the United States presidency for holding today’s meeting. We also welcome the adoption of resolution 2177 (2014), which Turkey is pleased to have co-sponsored.

The Ebola outbreak has become an international emergency with wider implications for the economic, social and political lives of the affected States and with serious security and stability risks for the region. We welcome the commitment and ever-increasing response to the emergency of national Governments, regional organizations and the international community. We commend the strategic leadership demonstrated by the Secretary-General and the World Health Organization. We also commend the efforts of the African Union (AU) and the Economic Community of West African States (ECOWAS) to develop a collective response to the outbreak and contain the disease. The initiatives taken by the AU and the ECOWAS once again show that regional organizations can play a significant role in responding to humanitarian and health emergencies that often do not recognize borders.

We pay tribute to the humanitarian and health workers in the front lines who put their lives at risk and work with devotion. Turkey extends its heartfelt condolences to the relatives of the victims of the outbreak and to the people of the affected States.

The international emergency before us is one that no country can deal with alone. The international community should continue to provide and even increase technical, logistical and financial support to the affected countries as should the international organizations responding the crisis. The challenge is one that we can overcome by international cooperation and solidarity, instead of staying on the defensive side. We believe that isolating and restricting the travel to and from the affected countries is causing the situation to deteriorate and is undermining the will and ability of the people concerned to fight the menace.

Turkey immediately mobilized financial resources and provided medical assistance to the affected countries. Plans to scale up Turkey’s support to the affected States through bilateral and multilateral channels are under consideration. More importantly, Turkish Airlines is continuing its flights to the region. Our support in the fight against the epidemic will continue with a long-term perspective focusing on capacity- and resilience-building in infrastructure and the health sector.

The Ebola outbreak requires a comprehensive, coordinated and long-term response. We must keep the focus and continue our support even when the outbreak is in decline. A long-term and sustainable solution to emergencies of this kind is needed to support the societies and economies of the affected countries, to help them build resilience and capacity and ensure that the peace and stability of the region will not be set back.

The President: I now give the floor to the representative of Canada.

Mr. Rischhynski (Canada) (spoken in French): I wish to thank you, Madam President, for this opportunity to take the floor with the presence in the Chamber of the Ministers for Foreign Affairs of Liberia, Sierra Leone and the Republic of Guinea, as well as Dr. Margaret Chan and Mr. David Nabarro.

(spoken in English)

On behalf of the Government of Canada and all Canadians, I wish to begin by extending our profound condolences to, and solidarity with, the peoples of Guinea, Liberia and Sierra Leone, as well as Nigeria and Senegal, for the extreme challenges confronting them at the forefront of the struggle against Ebola.

Canada remains deeply concerned by the outbreak of this virus in West Africa. It risks undermining the foundations for economic prosperity, security and social stability that have been painstakingly supported by the Council and the Peacebuilding Commission in the region.

(spoken in French)

We recognize that the crisis is occurring in a context of chronic fragility, in places of great poverty that are only now beginning to recover from decades of conflict and civil strife.

The affected Governments, in partnership with the United Nations system, the International Federation of
Red Cross and Red Crescent Societies, Médecins Sans Frontières and other actors have made it clear that a collective response to this evolving crisis is urgently required if we are to succeed in staving off the worst-case scenarios.

*(spoke in English)*

We are looking to the United Nations to present a coherent approach to enable timely and effective responses by the global community. In that regard, we welcome the high-level event scheduled for next week. As an active and engaged international partner, the Government of Canada is fully committed to supporting the international effort to combat this disease.

*(spoke in French)*

Canada recognized early the risks that this Ebola outbreak represented and from the outset has been a leader in making significant contributions in support of humanitarian and security interventions to help contain the spread of Ebola in West Africa. We have provided expert deployments, vaccines and material, and financial support. Our contributions to the World Health Organization (WHO), Médecins Sans Frontières and local Red Cross and Red Crescent organizations have helped establish the base for their respective response activities.

*(spoke in English)*

In addition, Canada has deployed a mobile laboratory to Sierra Leone, with rotating teams of Canadian laboratory technicians and supplies. This laboratory has been deployed in Kailahun, one of the areas of the country most severely affected by the Ebola virus, and will continue to provide critical diagnostic services to Sierra Leoneans requiring assistance.

We have also enabled the deployment of additional Canadian Red Cross delegates to Guinea and Sierra Leone, as well as experts to Sierra Leone working for UNICEF, and we have committed over $2.5 million in personal protective equipment to WHO for distribution.

*(spoke in French)*

Recognizing the extraordinary circumstances, and for the benefit of the global community, Canada donated to WHO 800 to 1,000 doses of the experimental vaccine VSV-EBOV. We have also actively contributed to WHO's expert panels on Ebola.

*(spoke in English)*

Canada is now exploring the United Nations appeal issued the day before yesterday, on 16 September, and we will work in a coordinated manner with all partners to enable an effective global response to bring this outbreak under control. We shall support these ongoing efforts and hope thus to put an end to the terrible suffering and loss of life being caused by the Ebola virus in West Africa.

**The President:** I now give the floor to the representative of Japan.

**Mr. Yoshikawa** (Japan): I would like to begin by expressing my sincere appreciation for the initiative of the United States in convening today’s open debate on one of the most important crises of today: the outbreak of Ebola in West Africa. Given the significance of Council resolution 2177 (2014), adopted today, Japan was one of its co-sponsors.

In the current difficult circumstances, I would like to express Japan’s deepest sympathy to the families of the ever-growing number of victims of Ebola and to the people and the Governments of the countries affected, especially Guinea, Liberia and Sierra Leone. These three countries are all in a post-conflict stage and are now at the crucial juncture of consolidating peace and ensuring long-lasting stability. In this regard, we are aware of the importance of preventing a public-health crisis such as this outbreak from turning into a peacebuilding crisis.

It is therefore important to coordinate our actions at the international level to rapidly address this global health crisis. To that end, Japan is very grateful to Secretary-General Ban Ki-moon for his leadership in mobilizing and scaling up the support and commitments from the international community to overcome this crisis. I would also like to pay tribute to the efforts of the many health-care workers who are laboring under very difficult conditions on the ground.

I would like to share with the Council Japan’s response to this emergency.

First, regarding our financial and in-kind contributions, we have so far provided $5 million for West Africa, including Guinea, Liberia and Sierra Leone, in cooperation with the World Health Organization (WHO), and here I thank Dr. Chan; UNICEF; the World Food Programme; and the International Federation of Red Cross and Red Crescent Societies. My Government
dispatched Japanese medical doctors specialized in infectious diseases to Liberia and Sierra Leone four times through the WHO Global Outbreak Alert and Response Network.

Most recently, Japan decided to provide 20,000 infection protection suits for health-care workers in Liberia and Sierra Leone. According to WHO, this equipment is very much needed on the ground. We hope that these contributions will help reduce the number of infections among health-care workers. We remain ready to provide more.

Secondly, Japan is ready to provide a new medication to cope with Ebola. The use of the medication known as T-705, or Favipiravir, is expected to be effective as a post-exposure prophylaxis against Ebola. This medicine is an experimental drug developed by two Japanese companies: Toyama Chemical and Fujifilm Corporation. We are working with WHO, pharmaceutical companies and other countries so that this medication can be put to use as soon as possible.

Thirdly, over the long term, we will continue to support African countries' own efforts to improve their resilience against public-health crises. Strengthening Africa’s social and economic resilience is one of the priorities of Japanese policy towards Africa through the Tokyo International Conference on African Development, otherwise known as the TICAD process.

Providing comprehensive strategic assistance aimed at strengthening the disease-prevention and detection capacities of Africa is one of the primary objectives of TICAD. An excellent example is the Noguchi Memorial Institute for Medical Research, in Ghana. It is one of the most important medical research institutions in West Africa, capable of conducting laboratory tests for the Ebola virus.

In closing, I join other speakers in expressing our hope that this Ebola outbreak will be quickly brought under control. I would like to reiterate Japan’s determination to take an active role in combating this global threat.

The President: I thank all speakers for limiting their remarks to the four minutes allotted in today’s debate.

I now give the floor to the representative of the Netherlands.

Mr. Van Oosterom (Netherlands): I thank you very much, Mr. President, for convening this important meeting. In view of the time constraints you just mentioned, my full statement will be available through Twitter.

I align my statement with that delivered just now by the observer of the European Union.

My Government is deeply concerned about the impact of the Ebola outbreak, especially in Guinea, Liberia, Sierra Leone, Nigeria and the Democratic Republic of the Congo. Our hearts and minds are with all those who suffer. It is tragic that women are particularly affected, owing to their role as caregivers. We pay tribute to the courageous health workers in the field in the very difficult circumstances under which they do their difficult jobs. We deeply appreciate the work of Director-General Chan and Dr. Nabarro for the important roles they are playing. The Kingdom of the Netherlands also welcomes the establishment of the new United Nations Mission for Ebola Emergency Response to fight the outbreak. Now more than ever, a single United Nations approach is needed to counter the epidemic. That is literally a matter of life and death. The relevant United Nations agencies should work together to be more effective. The Netherlands, of course, is a key partner of all those agencies, including the World Health Organization, UNICEF and the World Food Programme.

Additional humanitarian aid in the form of funds, medical supplies and health workers is needed. So far, the Kingdom of the Netherlands has contributed to the fight against Ebola with financial means, both through the European Union and our contributions to the United Nations system. Tomorrow my Government will announce major new contributions to combating the Ebola crisis. We are a sponsor of resolution 2177 (2014) and welcome its adoption today. We encourage the joint effort to support the affected States and welcome the call on the private sector to maintain trade and transport links.

The international community must remain committed as long as necessary to supporting the affected countries in the region. We also need a long-term commitment on the part of the private sector to doing its part in combating the disease and sustaining businesses and people. To quote Director-General Chan, Ebola is not just a public health crisis; it is also a social, humanitarian and political crisis, and if we do not act now, people not dying of Ebola may die of starvation. It has the potential to destabilize entire countries and regions, compromising national, regional
and international security. This is a global crisis that requires every one of our nations to act, and to act now. My Government is committed to taking further action.

**The President:** I now give the floor to the representative of Sweden.

**Mr. Grunditz** (Sweden): Thank you for calling this very important meeting, Mr. President. It is a strong acknowledgement of the seriousness of the situation, and Sweden welcomed the opportunity to sponsor today’s resolution (2177 (2014)).

Sweden aligns itself with the statement delivered earlier by the observer of the European Union.

We join the global emergency appeals for scaling up all efforts, and we commend the leadership shown by the Secretary-General and the United States in that regard. We welcome the Secretary-General’s initiative in convening a high-level meeting on this topic during the upcoming General Assembly ministerial week, and his important efforts to improve the international coalition’s coordination, including through his appointment of a Senior United Nations System Coordinator for Ebola and his proposal for the establishment of the United Nations Mission for Ebola Emergency Response.

Sweden is one of the world’s top donors of humanitarian assistance and development aid. We clearly hear the call for an immediate scaling-up of the efforts to combat Ebola. We have longstanding relationships with all the countries concerned, and a strong partnership with Liberia, both bilaterally and as Chair of the Peacebuilding Commission’s Liberia country team, along with partnering the United States in implementing Liberia’s new deal on peacebuilding and State-building.

Bilaterally, since April Sweden has contributed $4.4 million to the three countries most affected, mainly though partners such as the International Rescue Committee, Médecins Sans Frontières, Action contre la faim and the Swedish Red Cross. The Swedish international development cooperation agency is now in the final stages of preparing an additional package of $13 million in response to the appeal from the Office for the Coordination of Humanitarian Affairs, directed primarily to UNICEF, the World Health Organization (WHO) and the United Nations Humanitarian Air Service. We are also supporting a WHO coordinator in Sierra Leone, and we are investigating ways of supporting the accommodation of international medical staff in Monrovia and possibly also in Freetown.

Due to the current parliamentary situation in Sweden, where since Monday of this week we have had a caretaker Government, it is not certain that additional contributions will be able to be decided on or announced in the next few days. Our clear ambition, however, is to come forward with significant additional contributions very soon.

Sweden would like to underline the importance of ensuring that the national health systems of the countries involved are generally strengthened in parallel with the short-term emergency efforts. The crisis has also highlighted other fragilities in the countries concerned that should be closely monitored and addressed. We must remain mindful of the potential implications of the crisis for peace and security, considering that all three countries most affected are under the supervision of the Peacebuilding Commission. And, finally, we should identify benchmarks and key measures to be taken during their post-emergency transition. A new void must not materialize.

In closing, Sweden will continue to stand by the affected countries and will announce further significant support at the earliest opportunity.

**The President:** I now give the floor to the representative of Israel.

**Mr. Prosor** (Israel): I thank you for convening this important meeting, Mr. President. The presence here earlier today of the Secretary-General, Dr. David Nabarro, and Ms. Margaret Chan reflects the high level of political concern and commitment to addressing the global outbreak of Ebola. Israel is proud to join with other nations in sponsoring today’s resolution 2177 (2014).

The Jewish philosopher and physician Maimonides said that the physician should treat not only the disease but also the patient who is suffering. The suffering in West Africa is immense. The Ebola epidemic has killed thousands of people and new cases are being reported daily. We must never lose sight of the fact that behind the startling figures and statistics there are people who are suffering, with families that are suffering too. We are witnessing a crisis for the countries affected, the African continent and the international community.

Diseases do not respect nations or nationalities. A health crisis in one country can easily spread to others in
the region and often well beyond. Unless we coordinate our response and invest more resources in fighting this disease, the Ebola outbreak will spread even further. The epidemic already threatens to destabilize an already fragile region. Schools and workplaces are closed, and it is almost impossible to get any kind of medical care because Ebola has crippled the system. As soon as a new treatment facility opens, it immediately fills to overflowing. Patients and families are lining up outside begging for help. Health workers on the front lines are becoming infected and dying. In many places fear and misunderstanding have turned to anger, hostility and even violence.

A global crisis requires a global response. We know that this virus can be controlled. Ebola outbreaks have occurred in Africa on more than two dozen occasions over the past 40 years, and every time they have been brought under control. The global community has the tools and the know-how to save thousands of lives, but the response from all of us so far has been inadequate. The people of Guinea, Liberia and Sierra Leone are looking to us for help. They are counting on us for more health-care workers, equipment and medical supplies.

Israel is proud to be playing its part. The Jewish faith teaches tikkun olam, the obligation of every person to make the world a better place. Israel has taken this message to heart and over the years has been one of the first countries to respond when disaster strikes. From Haiti to Ghana and, more recently, the Philippines, Israel has lent a helping hand to dozens of countries.

Israel stands ready to join an international task force to combat the Ebola outbreak. In the meantime, we have sent emergency funding to Sierra Leone and medical supplies to Ethiopia. We have also coordinated with the World Health Organization and sent experts in public health and infectious diseases to Cameroon. We have trained dozens of doctors, nurses and other medical staff from six different hospitals on how to prevent and contain the disease. Israeli non-governmental agencies are now preparing to send another team to Sierra Leone.

The time for global action is now. Tens of thousands of lives and the future of West Africa hang in the balance. Every country, no matter how small, has a role to play in combating the Ebola epidemic. We are standing at a crossroads. In our generation, global health and development goals that once seemed unattainable are now within our reach. At the same time, we are confronting global health challenges that threaten to set us back decades. This must be the moment when we replace apathy with ambition. This must be the moment when we enable nations to become the architects of their health-care systems rather than their victims. This must be the moment when we unite to defeat this disease and strengthen health-care systems around the world so that this tragedy is never repeated.

The President: I now give the floor to the representative of Uruguay.

Mr. Koncke (Uruguay) (spoke in Spanish): Uruguay commends the presidency of the Security Council for convening this meeting on this very important and urgent problem.

My delegation will make a very brief statement, given the time restrictions.

First, on behalf of my Government, I offer our condolences to the families and the Governments of the victims. We also wish to underscore the value of resolution 2177 (2014), which was unanimously adopted today by the Security Council with an historic level of sponsorship.

Uruguay recognizes the importance and gravity represented by the swift development of this terrible disease in the western region of the African continent and its global significance and impact, which could grow very quickly. The magnitude of this tragedy in the affected region not only destroys the life and health of its people, but also threatens its social fabric and economy and the very existence of those States that do not have the infrastructure or adequate means to confront the epidemic.

We are especially concerned about the devastating impact that this disease has on women, as a consequence of their activities within the heart of their families and communities. That is why the fight against this disease requires a joint effort of the international community. In that regard, Uruguay recognizes and appreciates the effort being made by the United Nations, particularly the World Health Organization, and other organizations already on the ground, and by those Member States that have pledged resources and personnel to address the threat.

Although we are aware of the varying scale of the situation, Uruguay notes with particular concern the appearance of another Ebola outbreak in the Democratic Republic of the Congo, where our country has deployed a contingent of nearly 1,200 forces. This makes my country even more alert to the depth of the problem,
in virtue of having to generate an adequate system for evacuation and the treatment of a disease without precedent for Uruguay. In this context, Uruguay for its part reaffirms its international commitment to maintain its staff deployed in the area of the Mission, despite the increased level of risk posed by the appearance of Ebola, and pledges to seek ways to cooperate to cope with the disease and its consequences within the actual capacities of the country. It is in that spirit that my country has sponsored today’s adopted resolution.

**The President:** I now give the floor to Mr. António.

**Mr. António** (African Union): Let me take this opportunity, on behalf of the African Union (AU) Commission, to congratulate you, Mr. President, on the United States’ assumption of the presidency of the Security Council for this month and on its initiative to convene this meeting on the ongoing Ebola scourge that continues to reign in Guinea, Liberia and Sierra Leone, creating a crisis of alarming proportions.

I would also like to thank all members of the Council for unanimously voting in favour of resolution 2177 (2014) and all Member States that sponsored it.

I would like to salute the presence among us of the Ministers who have also made very rich and insightful statements. I would like to recognize the presence of the Director-General of the World Health Organization and the presence of Dr. Nabarro, Senior United Nations System Coordinator for Ebola.

Since the outbreak of the deadly Ebola virus in West Africa in December 2013, the citizens of the affected countries have been in great trepidation. Traders, farmers and health officials can no longer go about their daily business without fear of the unknown. It is even more difficult for post-conflict countries on a serious course of reintegration, rehabilitation and rebuilding of their social fabric. The retardation of economic development is all the more worrisome.

Beyond the affected countries, all the countries of the West African region remain on constant alert as updates are being released. Because the Ebola virus is so deadly, apparent tendencies of mistrust and sieges among families, communities and countries have been arising. I wish to quote the Chairperson of the African Union Commission, Ms. Nkosazana Dlamini-Zuma, who indicated in her statement at the emergency meeting of the African Union Executive Council heads on 8 September that

“the drive to protect unaffected areas is the proper response, but it must be done in a manner that does not fuel isolation or lead to the stigmatization of victims, communities and countries”.

Also critical is the impact on cross-border trade and food security as people are unable to trade and work their fields, leading to a rise in food prices. The need to take preventive measures to halt the spread of the Ebola virus and avert an economic disaster cannot be overemphasized. Measures should therefore be put in place to enable agriculture to continue and support traders, the majority of whom are women.

The Ebola crisis has highlighted the weakness of the public health systems in Africa in general, thereby vindicating the various AU frameworks that call for universal access and people-centric and effective public health institutions. The African health strategy 2007-2015 has identified weak and under-resourced health systems as a major impediment to progress. This is particularly true for countries emerging from conflict.

Desperate times call for desperate measures. We can no longer procrastinate about combating this disease. The time to act is now. It is for this reason that the African Union Commission has mapped out two priority approaches. The first is the emergency approach; the second is the long-term approach. The emergency approach focuses on the establishment of an African public health emergency fund managed by the World Health Organization (WHO), since the emergence of the Ebola outbreak in West Africa. In addition, a monetary pledge has been made by the AU from the Humanitarian Assistance Fund and the Department of Political Affairs. The long-term approach in dealing with the Ebola crisis has resulted in the creation of an African Centre for Disease Control and Prevention for early detection. We also focus on the speeding up of the operationalization of the African Centre for Disease Control so that information can be shared about the development of the disease and implement an effective coordinated response.

Subsequently, on 21 August, the Peace and Security Council of the African Union authorized the immediate deployment of a joint AU-led military and civilian humanitarian mission comprised of medical doctors, nurses and other paramedical personnel to tackle the emergency situation caused by the Ebola outbreak. Utilizing the infrastructure of the peace support operations, the African Union support for the Ebola outbreak in West Africa is deploying civilian and
military volunteers from across the continent to ensure that Ebola is contained. This operation is expected to run for six months with the monthly rotation of volunteers. The operation aims at bridging the existing gap in international effort, and will work with WHO, the United Nations Office for the Coordination of Humanitarian Affairs, the United States Centers for Disease Control and Prevention, the European Union Centre for Disease Control and Prevention, and other agencies already on the ground.

The Commission has also sought the assistance of and is working with WHO and the United Nations Department for Peacekeeping Operations and Department of Field Support towards the lifting of border closures by putting in place sanitary measures and screening passengers at airports in Monrovia, Freetown and Conakry. The objective is to open up these airports to humanitarian and commercial flights. Furthermore, the medical services have put in place a contingency plan to strengthen the AU medical service emergency response for AU-infected staff or staff of AU member States in Addis Ababa.

I also wish to draw the Council’s attention to the changes in the mandate and replacement of the AU Special Emergency Assistance Fund for Drought and Famine in Africa, as it relates to the Ebola epidemic. Recently, the Permanent Representatives’ Committee’s Sub-committee on the Special Emergency Assistance Fund for Drought and Famine in Africa and its Sub-committee on Refugees, Returnees and Internally Displaced Persons in Africa established a dialogue to identify ways to harmonize the roles of the two sub-committees and make necessary changes to their mandates in view of recent developments on the continent. It is notable that the Sub-committee on the Special Emergency Assistance Fund for Drought and Famine in Africa has made funds available to the three most affected countries by broadly interpreting the mandate of the fund.

Before concluding, it is worth stressing that while assessments and analyses serve very useful purposes, I cannot emphasize enough how important it is for us to listen and to be guided by the realities on the ground. Today we heard a very personal and powerful testimony by Jackson Niamah of Médecins Sans Frontières in Monrovia. There is another story that I have heard personally. It is the story of a doctor working assiduously in an Ebola unit, with some steady and good results. The sad part of this story is that the researchers he is working with do not share his strong determination and good will to save lives. As we move together in our common fight against the Ebola disease, their stories should drive and focus our efforts.

Finally, I wish to reaffirm the AU’s continuous support and efforts to ensure the adequate coordination and harmonization of all strategic efforts in the implementation process to achieve our desired goal on the continent of Africa. Cognizant of the fact that no country can act alone while we are engaged in fighting Ebola, we would like to thank all our partners from Member States, inter-governmental organizations, civil society and non-governmental organizations for their contributions and efforts on the ground. We would like to especially recognize the announcement today by the Secretary-General of the deployment of an emergency mission to the region, but we should bear in mind that while we are committed to fighting Ebola, together we stand and divided we fall. Worse still is that divided we can fail.

The President: I now give the floor to the representative of Spain.

Mr. González de Linares Palou (Spain) (spoke in Spanish): The Ebola crisis has clearly become more than just a serious epidemic. Given its exponential growth and its impact on public order, the economy and the political situation in affected countries, it has now become a threat to the stability and security in West Africa, with a potential global impact. That fact underlines the timeliness of this debate and of resolution 2177 (2014), which Spain has co-sponsored.

Our response must be immediate and coordinated under the leadership of the United Nations and regional organizations, and geared towards supporting the initiatives of the affected States. We welcome the initiative of the Secretary-General to establish an emergency response mechanism.

There are three major challenges. The first is to provide care for those affected; the second is to provide care for those who care for the sick; and the third is to ensure that the medical, social, economic and security institutions of the affected countries do not collapse. To those I would add a fourth challenge; it may be obvious, but I must mention it. We must avoid and prevent the isolation of the affected countries. Marginalization and stigmatization are counterproductive. Not only are they totally useless, but they also delay the response to the epidemic.
Spain is particularly alive to this crisis because of its geographic proximity and close links to West Africa. We have a great deal to contribute. We are doing so, and we are prepared to do much more. Let me offer just a few examples of our action in the three areas that I mentioned.

With respect to providing medical care for those affected by Ebola, it is essential that we increase the number of treatment units, provide medical supplies and deploy specially trained staff. We must also break the contagion chain and develop a communication strategy. That is what we are doing. We have sent tons of emergency medical and health supplies, material for protection, disinfection and isolation, an emergency response unit and experts in water, sanitation and logistics to various medical centres in Liberia, Sierra Leone and Guinea.

Among those who are struggling to alleviate the suffering of the victims, at this point there are some 30 Spanish nationals offering care to persons infected with Ebola. That is a small demonstration of our efforts in working together with many other humanitarian workers of many other nationalities.

We are aware of the logistics and training needs and are working to meet them. We also are particularly sensitive to the need for protection. We have been involved in one of the first medical evacuations, of two humanitarian workers, and we now have a detailed protocol that we are willing to make available to the United Nations and interested countries.

We also have to share the sad news of the death of the first victim, Father Miguel Pajares, whom I recall with emotion and gratitude for the humanitarian work that he continued through to the last days of his life.

With respect to ensuring that the affected States can continue to provide basic protection and health care to their citizens, it is true that the collapse of their health-care systems is causing increases in the numbers of victims of common diseases. Unfortunately, maternal and infant mortality rates in those countries are trending upward again, because the related needs are being neglected now that all efforts are focusing on fighting Ebola. We shall continue to provide support towards food and nutritional security in the region and to strengthen health capacities in water and sanitation in the countries that I have mentioned.

It is also essential to prevent the spread of the epidemic to neighbouring countries. We intend to scale up our support for national response mechanisms in neighbouring countries, namely, Senegal, Mali, Mauritania, the Niger, Côte d’Ivoire and Nigeria. Furthermore, we will work within the European Union to ensure that it strengthens its action in that area. That will, of course, require additional resources, which we are prepared to provide. Our action will be coordinated internationally and our capacities will be integrated within the response plan of the World Health Organization.

In conclusion, I wish to pay a heartfelt tribute to all of the victims and those working on the front line against this disease. To Guinea, Liberia and Sierra Leone, I offer our solidarity in the face of the tragedy they are experiencing and our promise and commitment that together, we will overcome the crisis and those countries will find their way back to the path towards the peace and prosperity for which they have been fighting in recent years.

The President: I now give the floor to the representative of Italy.

Mr. Lambertini (Italy): I thank the Secretary-General for his remarks and Ms. Chan and Dr. Nabarro for their briefings. I also welcome the initiative of the United States presidency that led to the Council’s adoption today of resolution 2177 (2014), which Italy was happy to co-sponsor.

Italy fully aligns itself with the statement delivered by the observer of the European Union (EU) and would like to add a few remarks in a national capacity.

Ebola is more than a health crisis. It has already become a broader humanitarian emergency with dramatic social, economic, security and political implications. We are deeply concerned by the gravity of the situation and are closely following its evolution. We are also mobilizing both public and private institutions to support countries struck by the virus and to prevent further transmission of the disease.

At this juncture, it is of the utmost importance to undertake determined, collective action to stop the Ebola epidemic, which is indeed a global threat to security. We will take every opportunity during our ongoing European presidency, within the European Union Council’s working groups on humanitarian and development affairs, to deepen the discussion, raise awareness among EU member States and mobilize additional resources to tackle the Ebola virus in an effective, concerted way. The EU ministers of health
will meet in Milan on 22 and 23 September to coordinate the response to the Ebola outbreak.

The Italian Government has supported the World Health Organization (WHO) since the outbreak of the crisis, making a preliminary contribution of €200,000 in April for WHO activities in Guinea. An additional €240,000 was recently disbursed. Moreover, we have just approved a bilateral action, to be implemented in partnership with Italian non-governmental organizations in the field and the Spallanzani National Institute for Infectious Diseases in Rome, for the prevention and treatment of the virus, through capacity-building and technical assistance to the national health systems of the affected countries and public information about the transmission of the disease. In the very near future, the Italian Development Cooperation will carry out new humanitarian initiatives valued at up to €4 million, depending on the situation on the ground.

We have heard what the Secretary-General said today and what he asked of us. We believe that Italy’s expertise in bio-security could be an asset for tackling the Ebola emergency. We are open to discussing further, on a case-by-case basis, the technical and financial details of possible joint operations for medical evacuation of international personnel.

In conclusion, allow me to pay tribute to the extraordinary efforts of the humanitarian and health workers on the front line who continue to work in the affected countries, placing their own lives at risk. I would also like to praise the massive efforts of the Governments of the affected countries, who are bearing the heaviest burden of the tragedy.

The President: I give the floor to the representative of Burundi.

Mr. Shingiro (Burundi) (spoke in French): As this is the first time that that I take the floor under the United States presidency, allow me at the outset to thank the presidency for convening this important meeting on the Ebola crisis. It comes at an opportune moment. Let me also congratulate the President on assuming the presidency of the Council for the month of September. Rest assured that you will have the full support of the Burundian delegation throughout your mandate. Moreover, the signs of a remarkable success have already appeared as witness to your unparalleled leadership in the work to combat the Ebola crisis.

Likewise, my delegation welcomes the holding of the upcoming high-level consultations on the Ebola crisis on 25 September and the recent appointment of Dr. David Nabarro and of his assistant for the Ebola crisis.

Clearly, I cannot but welcome today’s adoption of resolution 2177 (2014) on the Ebola crisis. Burundi is very proud to have co-sponsored the resolution.

Like other African countries, we are very concerned about the rapid spread of the Ebola virus, which was brilliantly described by Dr. Nabarro at the informal meeting of the Organizational Committee of the Peacebuilding Commission on 8 September, in which my delegation actively participated. Indeed we believe that at the current pace, the international community’s degree of mobilization around the crisis that is affecting Africa has not yet achieved the level expected, especially as the disease appears to be spreading faster than the efforts against it.

The situation is serious — in fact, extremely serious. The international community must not hesitate to take action through improved coordination and organizational efforts aimed at saving those human lives in danger. Tomorrow will be too late because the disease may spread even beyond the continent. That probability is already very high.

We can never say it enough: the magnitude of the outbreak of the Ebola virus requires from the international community an even more robust response that will involve not only more resources and medical expertise in the countries but also more preparation at the regional and subregional levels. Beyond the regional dimension, the main development partners that support interventions in the affected countries must be prepared to redouble efforts to significantly increase their assistance.

Meanwhile, we believe that a much greater involvement of local communities is really essential for an effective response. In fact, if grassroots communities take matters into their own hands, take ownership of the fight, in particular in rural and semi-rural areas, and implement their own solutions and protection measures in the context of public health services, transmission of the Ebola virus could considerably slow down.

For their part, the countries already affected and the neighbouring countries should strive to mobilize communities and to improve communication among people so that they know how to prevent infection and what they should do, especially if they fear that they have come in contact with the virus.
In terms of peacebuilding, the risks of a backslide in the gains already made in countries affected under the Peacebuilding Commission are increasing daily. The international community must redouble its efforts to assist countries whose capacities to deal with the scourge are extremely limited. With regard to the measures to be taken against the Ebola crisis, the international community must prevent any isolation of the affected countries because that could do more harm than good. We must avoid treating the two situations in the same way. The isolation of affected individuals and the isolation of affected countries are two diametrically opposed things that far from complement each other.

In our humble opinion, isolating those countries would be tantamount to denying them access to basic humanitarian assistance. Quarantine could have a very negative impact on the already fragile economies of the affected countries, which depend in part on the provision of certain basic commodities from outside. In order to support the global action against the current Ebola outbreak in West Africa, we launch a strong appeal to the countries neighbouring the affected countries to kindly agree to open humanitarian corridors to facilitate the transport and arrival of international staff and supplies to the affected countries.

The widespread panic created by the Ebola crisis in affected countries does not allow people to go about their normal daily productive activities. That could ultimately give rise to a food crisis that would compound that of the Ebola virus currently facing them.

In conclusion, my delegation would like to join its voice to that of other delegations in sincerely thanking those countries that have already provided assistance to the three worst affected countries.

The President: I now give the floor to the representative of Estonia.

Mr. Kolga (Estonia): I would like to start by thanking the Security Council and the presidency for having convened an open debate on this urgent matter today. I also welcome today’s adoption of resolution 2177 (2014), and I am proud that Estonia was able to sponsor it.

Estonia fully aligns itself with the statement made earlier by the observer of the European Union.

The Ebola outbreak has already claimed more than 2,400 lives and affected millions of people. The peak has not even been reached. Half of the cases occurred in the past three weeks. It is not only a public health emergency but also a humanitarian crisis and a global security issue. International action is needed now. I am happy to note that that is taking clear form here today.

Allow me to sincerely thank the health-care workers in the front line for their tireless and courageous efforts to bring the crisis to an end. Their work is carried out under extremely difficult conditions. More than 120 health-care workers have lost their lives and over 240 have now been infected. The high number of infected health-care workers is also affecting the health systems in the ravaged areas. The need to strengthen the health sector is growing every day, as the number of people affected is progressing faster than the ability to manage them. The severe shortages of trained medical staff, health-care facilities, medical supplies and community education on Ebola must be our main priorities. The World Health Organization has called for more human resources in the affected areas.

We welcome the establishment of a system-wide coordination initiative, established by the Secretary-General to assist the affected countries in their efforts to halt the spread of the virus. We highly appreciate the work that has already been done and encourage the continued focus on effective strategies and humanitarian partnerships. We also welcome the plans to set up an Ebola crisis centre to coordinate the response to the deadly virus and to strive to halt the spread in West African countries.

It has already been said here today that any country, however small, has a role to play. Estonia has already contributed €60,000 to the World Health Organization and has decided to contribute an additional €40,000, which is a total of €100,000. We are also sending a doctor to one of the ravaged areas to assist in the important work in the health sector. I can assure the affected countries that we will actively work within the European Union and its member States to find possible options to reduce the growing isolation of the areas in the region.

If the situation continues, the consequences could be disastrous not only in terms of lost lives but also in terms of severe poverty, food insecurity, displacements and a high risk of the virus spreading to other countries. The situation is now on the verge of becoming a humanitarian catastrophe. We can stop the spread of Ebola, but it will take a coordinated international response to do that. The international community must
act now if we want to avoid a humanitarian catastrophe. We cannot afford not to act.

The President: I now give the floor to the representative of Norway.

Ms. Stener (Norway): The Ebola epidemic is having a catastrophic impact on the affected countries and the wider region. What began as a health crisis now has serious political, social, economic, humanitarian and security dimensions. Norway therefore welcomes the initiative by the United States to hold this very important meeting.

Despite the persistent efforts, the virus continues to spread fast. We all underestimated the severity of the Ebola outbreak. Now we all need to step up our response. We need to do more, and we need to do it faster. Local communities, national health personnel and humanitarian workers carry out the majority of the work. They are under immense pressure, and they need our support. That includes ensuring their safety. The same applies to the international field personnel and health personnel.

Médecins Sans Frontières deserves praise for their quick and flexible response. Clear leadership and coordinated efforts are important. We support the priorities set out in the World Health Organization road map. Norway welcomes the initiative of the Secretary-General to establish a new United Nations mission for the Ebola response. We also welcome the active engagement of the African Union. We reiterate the calls from the Governments of Liberia, Guinea and Sierra Leone on the importance of ensuring open trade and air transportation with the affected areas.

Furthermore, we must recognize that women are especially at risk in their role as caregivers in homes and in hospitals. Up to two-thirds of the victims are women. As we combat Ebola, we must prioritize protecting women and children.

The Governments of the region and the United Nations have called for immediate action. Norway has responded to that call by tripling our contribution. Our total contribution is now more than $13 million. Those funds will support the efforts of the United Nations, the African Union and several non-governmental organizations.

In conclusion, as we are discussing Ebola here today, people are dying on the ground. We have the means to stop this epidemic from spreading even further. We must live up to that responsibility. The time to act is now.

The President: I now give the floor to the representative of Botswana.

Mr. Nkolo (Botswana): I thank you, Mr. President, for allowing us to take part in this discussion. We would like to congratulate the United States on taking the lead in drawing the world’s attention to this epidemic. We also applaud the Secretary-General for his commitment to fighting the epidemic. In that vein, we are proud to have sponsored resolution 2177 (2014), adopted this morning.

The people of Botswana have been truly concerned by the outbreak of this pandemic. Ebola has been visiting the West African part of our continent with frightening regularity. Even though Ebola cases have been reported on African soil, we are aware that it has the potential to engulf the entire continent and beyond. Ebola is not just an epidemic, it is a humanitarian disaster and a catastrophe waiting to happen. The extent of the catastrophe can be measured not only in human terms, but also in the fear it instils in those it affects.

As our dear brothers and sisters in West Africa continue to fight the scourge, we are acutely aware that containing it is a monumental task. It is therefore in that context that we need to pull together as children of the same soil, together with the assistance of the international community, to address this pandemic with whatever resources we have at our disposal. We share the pain and suffering of those who have fallen victim to the disease. As a regional neighbour to West Africa, we know that epidemics such as Ebola know neither boundaries nor frontier regulations.

Over the past weeks we have seen with horror the images of people who have fallen victim to this scourge, including mothers and children, and we know that the virus is swift, sudden and severe. We remain concerned that, at any point in time, it can strike with precision and ravage entire populations if left unchecked. As we speak, over 3,500 people are reported to have been infected, with over 1,900 deaths. Those include the most vulnerable: women and children.

In that respect, the Government of Botswana took a decision in August 2014 to render financial assistance to Guinea, Liberia and Sierra Leone in order to assist those countries in fighting the disease. We hope that that modest humanitarian gesture of good will and compassion will go a long way in supporting the
deployment of resources and expertise required to fight and eventually eradicate the dreadful virus.

We are encouraged by the outpour of support from the international community, including humanitarian organizations, civil society, medical experts and people of goodwill, but we know a lot more still must be done. As the disease persists, we wish to call on other stakeholders to play a part. We welcome the African Union’s Support to Ebola Outbreak in West Africa initiative, through which they sent a team of medical experts to the affected countries.

We welcome the Secretary-General’s plan to have established Ebola crisis centres within six to nine months so as to harness and suppress the spread of the virus. We believe that is both practical and timely. We wish to further congratulate the Secretary-General for appointing the Senior United Nations System Coordinator for Ebola, Dr. David Nabarro, and his deputy, Mr. Anthony Banbury.

The President: I now give the floor to the representative of New Zealand.

Mr. McLay (New Zealand): Member States often thank the Council presidency for convening an important meeting, but that comment is uniquely appropriate and uniquely meaningful for today’s open debate. New Zealand compliments the United States on its initiative in convening this critical discussion about a crisis that is unprecedented in scale, impact and potential to threaten international peace and security. We note with approval the first resolution adopted in respect of a health emergency (resolution 2177 (2014)), which New Zealand was pleased to sponsor.

It is not necessary to repeat the obvious, save one alarming key fact. The Ebola virus continues to have a devastating impact on West Africa — most notably in Guinea, Liberia and Sierra Leone — and it requires a massively scaled and coordinated international response, 20 times greater than we have at the moment, as we were told a little earlier. That is required to support affected and at-risk countries.

Back on 8 July, in this Chamber, we heard the then-head of the United Nations Office for West Africa, Special Representative of the Secretary-General Said Djinnit, warn of Ebola’s alarming spread, despite some initial successes in containment (see S/PV.7213). New Zealand welcomes the continuation of such briefings from regional offices, which allow for emerging threats like this to be brought to the Council’s attention. We also welcome the United Nations action on Ebola over recent weeks, including the Secretary-General’s announced emergency mission and the establishment of an Operations Crisis Centre. We thank Ms. Chan for her detailed outline of the World Health Organization’s (WHO) international response plan.

The international response to stop further Ebola transmission and to prevent a wider spread of the virus must be swift, it must be action-orientated, and it must enjoy the highest level of political support. That level of political support is, I suggest, demonstrated by the widespread attendance at today’s meeting. New Zealand is grateful to those countries that have already made significant contributions and to those who have made further pledges today, including support for the WHO, UNICEF, Médecins Sans Frontières and others.

The African Union (AU) Peace and Security Council has also, of course, authorized the AU’s first humanitarian mission to the affected countries, which is a commendable act of African solidarity. That and any other regional responses must be strongly supported.

New Zealand has heard loud and clear the message that what is needed is an international mobilization of significant financial contributions, resources and expertise. New Zealand is in the midst of a general election, to take place tomorrow, New Zealand time. However, one of the first tasks of our new Government will be the urgent consideration of a range of options of what we can do to further contribute to the international response. I should mention that, despite the constraints of our present constitutional position, while we have been here, I have received advice that my minister has approved a further significant financial contribution to the WHO.

Last month, trained New Zealand nurses deployed to the affected subregion to contribute to response efforts, working with the team led by the International Federation of Red Cross and Red Crescent Societies (IFRC). In addition to that deployment of practical expertise, New Zealand has provided funding to the IFRC, UNICEF and WHO, including the additional contribution I have just mentioned.

New Zealand may be geographically far from West Africa, but we are determined to play our part to ensure that the Governments and people of the subregion, in particular Guineans, Liberians and Sierra Leoneans, have the international support they require — indeed,
the international support they deserve — to control the outbreak and to prevent the further spread of this latter day plague. We will do our bit.

The President: I now give the floor to the representative of Malaysia.

Mrs. Admin (Malaysia): I wish to take this opportunity to thank you, Mr. President, and the United States for the convening of this debate. I also wish to thank Secretary-General Ban Ki-moon; Dr. David Nabarro, Senior United Nations System Coordinator for Ebola; Ms. Margaret Chan, Director-General of the World Health Organization (WHO); and Mr. Jackson Niamah of Médecins Sans Frontières for their briefings.

Let me begin by extending my delegation’s deepest condolences to the families and friends of all those who have perished in the Ebola outbreak. Malaysia pays tribute to the many brave doctors and health-care workers engaged in the tireless effort to counter this deadly disease.

The scale of the Ebola outbreak is unprecedented. The situation is worsening as the deadly disease transcends national borders, with profound impacts on socioeconomic activity and the security situation of the affected countries. The challenges posed by the outbreak would be overwhelming for any single country to cope with alone. The health crisis constitutes a global threat that would require a global response.

Malaysia commends the contributions and pledges by various countries to fight the pandemic. However, action taken so far is insufficient. More is needed to be done by the international community to reverse the situation. The open debate today is timely as we take further action to address the crisis.

Malaysia is also concerned that the outbreak could potentially reverse the peacebuilding gains achieved in the three countries that are on the peacebuilding agenda, namely, Liberia, Sierra Leone and Guinea. In their hour of need, we must not abandon or isolate the affected countries. My delegation concurs with the briefers that we must work together to coordinate and mobilize resources to ensure adequate humanitarian response on the ground and to combat the outbreak effectively.

At this juncture, it is crucial to ensure that support to the affected countries is coordinated and sustained at the international level. It is also important for all United Nations agencies to stay proactive, coordinated and flexible in responding to the unparalleled challenges posed by this deadly epidemic.

Earlier this week, Malaysia responded to the call for international contributions, particularly in response to the testimonies by medical authorities that identified the shortage of medical rubber gloves as a problem in combating the outbreak. On 15 September, the Malaysian Prime Minister, Dato’ Sri Mohd Najib bin Tun Haji Abdul Razak, handed over the consignment of 20.9 million medical rubber gloves, in 11 containers to be distributed to the affected countries. Liberia, Sierra Leone and Guinea will each receive three containers of medical gloves, each container carrying 1.9 million gloves. Meanwhile, the Democratic Republic of the Congo and Nigeria will receive one container each. The gloves will be transported from Malaysia to the main ports of each country as soon as possible.

Malaysia sincerely hopes that this modest contribution will help prevent the spread of Ebola and save lives. We will continue to monitor the situation closely to see how we can further support the affected countries, whether in the immediate or longer term.

My delegation welcomes the outcome of this debate in the form of resolution 2177 (2014), which Malaysia co-sponsored. I wish to assure the Council of Malaysia’s fullest support and cooperation in working closely with all partners in combating the Ebola outbreak.

The President: I now give the floor to the representative of Germany.

Mr. Thoms (Germany): The unprecedented spread of the Ebola virus in parts of West Africa is a massive humanitarian disaster for the region. It also threatens the overall political and economic stability in Africa, in particular in Sierra Leone, Guinea and Liberia. Germany is and remains committed to the United Nations Mission in Liberia (UNMIL) as a police contributor. Let me use this opportunity to also express my appreciation of the work done by UNMIL in these challenging days.

Germany fully subscribes to the Council’s declaration that the extent of the Ebola outbreak in Africa constitutes a threat to international peace and security. We are faced with a crisis that demands a comprehensive, rapid and determined response from the United Nations and all its Members. The Ebola threat will therefore be a core issue for the Group of Seven (G7) Foreign Ministers meeting in New York next week and throughout the German G7 presidency.
Germany welcomes the initiative of the Secretary-General to establish a United Nations Mission for Ebola Emergency Response. A rapid response is crucial. The German Air Force will airlift medical and humanitarian goods and personnel into the region. The German armed forces will provide material for an Ebola treatment unit in Liberia with a capacity of up to 50 beds. We are now looking for partner organizations that have the expertise needed to upgrade the centre.

To date, Germany has pledged over $23 million to combat the Ebola outbreak. Those funds have been made available to the World Health Organization and to humanitarian non-governmental organizations, including Médecins Sans Frontières. In addition, Germany is providing funds to the Bernhard Nocht Institute for Tropical Medicine and the Robert Koch Institute for Disease Control and Prevention, which are operating diagnostic facilities in West Africa and have deployed 17 epidemiologists to the region. Today, Foreign Minister Steinmeier has decided to allocate an additional €5 million for humanitarian assistance. With a view to a medium-term response, Germany is funding the development of vaccines and new therapies against Ebola and is providing up to €6 million for further medical and other goods.

Finally, Germany, together with partner countries, is examining the availability of appropriate medical evacuation capabilities. That would certainly increase the willingness of international health-care workers to be deployed to the region affected by the Ebola virus.

Germany stands ready to be part of the international response coalition against the Ebola virus.

The President: I now give the floor to the representative of Colombia.

Mr. Ruiz (Colombia) (spoke in Spanish): I thank you, Mr. President, for convening this open debate to address the serious tragedy caused by the Ebola outbreak, which the World Health Organization has characterized as an international public health emergency.

I also want to take the opportunity to offer the most sincere condolences of the Colombian people and Government to all the victims of this serious tragedy, their family members and their respective Governments.

Colombia is aware that the national authorities of the affected States have made enormous efforts. However, while they had the best intentions, they have been overwhelmed by the magnitude and virulence of a disease that has not been given sufficient attention and research. The human dimension of the crisis, the impact on affected countries and the potential for the disease to spread beyond West Africa mean that we must give all our support and commit to international initiatives aimed at addressing it.

As the Secretary-General mentioned, we will not solve the crisis by erecting barriers to the movement of people, cancelling flights or isolating those countries. The solution lies in education and cooperation, in a strategic orientation that makes possible a comprehensive response to the disease, in the re-establishment of health services and in taking structural measures conducive to long-term economic and social development.

Colombia, in consideration of its solidarity with the States and peoples of the region, will provide support in the amount of $100,000 to the international efforts to respond to the crisis and will provide medical teams.

Colombia welcomes the Secretary-General’s appointment of Dr. David Nabarro as United Nations System Senior Coordinator for Ebola Virus Disease. We assure him of our strong support and encourage him to work closely with the States of the region, the World Health Organization and other United Nations system agencies.

If we are to succeed in containing the Ebola outbreak, treating infected people, ensuring the provision of health services, preserving stability and preventing new outbreaks, we must make a coordinated effort that respects the national ownership and leadership of the affected States in the response to the crisis and in defining their needs, and we must establish a clear division of labour and avoid a duplication of efforts. To address this situation, we must focus on building and strengthening the capacities of national health institutions as part of a plan aimed at long-term economic and social development.

Let me say that while the Ebola outbreak in West Africa has the potential to erode stability and social cohesion in some of the countries concerned, the situation cannot be characterized as a threat to international peace and security in general. As noted by the Secretary-General, in the light of the fact that public health issues require the cooperation and decisive political commitment of the entire international community, Colombia believes that the
General Assembly should also move forward in the study of the issue.

The President: I now give the floor to the representative of Nicaragua.

Mrs. Rubiales de Chamorro (Nicaragua) (spoke in Spanish): At the outset, we would like to thank the Secretary-General, Dr. David Nabarro and Ms. Margaret Chan for their exhaustive briefings and for the commitment they have shown on a topic that is of importance to the entire international community.

I thank the presidency of the Security Council for convening this important meeting at a time when our African brothers and sisters are struggling against a fierce epidemic, the Ebola virus disease, which threatens to decimate communities and whole villages, and on which the international community must act immediately with the aim of saving as many human lives as possible and prevent the current situation from becoming a humanitarian catastrophe, as the World Health Organization has warned. Besides the loss of human lives and beyond the humanitarian tragedy such loss signifies lies the impacts and the economic and infrastructural damage that this horrible epidemic will bring to affected countries in the medium and long term. Food security, health systems, water and sanitation can collapse if we do not give an immediate and supportive response to our affected brother countries.

Our country is a poor country but we have the most valuable resource — the human resource — that we are disposed to contribute help and assistance, together with other teams, to address a humanitarian emergency with unpredictable consequences. We acknowledge the work of the World Health Organization, the Office for the Coordination of Humanitarian and the Secretary-General’s initiative to launch the United Nations Mission for Ebola Emergency Response. We also recognize all brother countries that are providing assistance in health workers, equipment, donations, funds, logistics and guidance and which to date have committed to contributing to this great effort, which should demonstrate that the community of nations can in fact work together, in good faith and with urgency, to save lives in the face of a humanitarian catastrophe.

Those are the reasons that have led us to co-sponsor resolution 2177 (2014) adopted by the Council today.

The President: I now give the floor to the representative of Mali.

Mr. Kassé (Mali) (spoke in French): The United States of America has the reputation for being at the cutting edge. Mr. President, you have just proved that fact once again by organizing this important meeting on Ebola following the meeting on AIDS in Africa that your country organized in this same Chamber in January 2000 (see S/PV.4087). I congratulate the United States presidency on the excellent manner in which it is directing the work of the Security Council in this month of September and the place it has given to Africa in its agenda.

Taking the floor at this late hour, I will limit myself to emphasizing that the Ebola virus disease is not new in Africa, but the epidemic currently affecting the western part of our continent is unprecedented in terms of propagation and the number of affected persons and victims.

Mali, together with affected brother countries, is making an effort at the bilateral, subregional and regional levels to implement the measures recommended by the African regional bodies. Today, Mali joins the international community in contributing to the appropriate international response to this formidable epidemic. Mali welcomes the initiative of the highest American authorities and welcomes the strong mobilization around that promising initiative. We ask that we move forward urgently and in a coordinated manner, taking appropriate action, for the Ebola virus will not wait and does not observe formalities as it moves from one country to another, from one region to another all around the world.

Mali supports the creation of the United Nations Mission for Ebola Emergency Response proposed by the Secretary-General. That United Nations Mission should not be just one more mission. Finally, Mali was a sponsor of resolution 2177 (2014), which was just adopted unanimously and which now must be urgently implemented.

The President: I now give the floor to the representative of Senegal.

Mr. Sylla (Senegal) (spoke in French): Let me express at the start of my statement my great pleasure at seeing the United States of America assume the presidency of the Security Council and to affirm on this occasion all the support of my delegation.

Through me, my delegation wishes to reiterate its sincere thanks to the members of the Security
Council for their initiative in drafting resolution 2177 (2014), whose adoption will certainly allow for better mobilization of the international community’s efforts and means towards countries affected by the epidemic.

At the most recent United States-Africa Summit, Mr. Macky Sall, President of the Republic of Senegal, alerted the international community that the Ebola epidemic was not just an African matter but a global one, as the virus knows nothing of borders. Fortunately, that call received a positive response, which we welcome. I also warmly welcome the health protection efforts and mechanisms already implemented by States of the West African subregion affected by this terrible epidemic. I would also like to include in that appreciation the international partners, in particular other States and civil society organizations, that have brought their valuable assistance to countries affected by the epidemic. In that regard, I reaffirm Senegal’s full support for brotherly and friendly countries affected by the Ebola epidemic and reiterate our readiness to work to strengthen the global partnership in the area of health emergencies and the establishment of humanitarian corridors.

It must be said that, right from the start, on 21 March, as this epidemic was taking hold in the West African subregion, Senegal immediately implemented a strategy of prevention and epidemiological monitoring, as well as a communication and outreach plan. That strategy has been particularly effective because, to date, there has not been a single case of Ebola virus infection in the country. The only case in Senegal, brought in from outside, was quickly taken up by Senegalese doctors and our health system, and that patient is now completely cured of the virus, his life saved. All persons who were in contact with the foreign patient were placed under observation for 21 days and their tests thankfully came back negative.

We reaffirm the need, given the strong links uniting all the countries of our subregion, to strengthen our unity of action, naturally with the support international community, and work together to defeat the epidemic. I can assure you, Mr. President, of the full readiness of Government of Senegal to cooperate with the international community in order to curb this extraordinary crisis, which requires a response commensurate with its gravity.

**Mr. Talbot** (Guyana): I thank you, Mr. President, for having convened this important debate today and commend the leadership that your country has demonstrated in the global response to the Ebola crisis. We thank the Secretary-General, Dr. Nabarro, Dr. Chan and Mr. Niamah for their presentations. We recognize and appreciate the enormous deployment of effort on their part by the entire United Nations system, in particular the World Health Organization, and on the part of the countries that have rallied to this challenge.

Guyana joins this debate to register its concern over the deadly Ebola epidemic that has struck West Africa, to express its solidarity with the countries affected, particularly Guinea, Liberia and Sierra Leone, and to convey its support for a robust response by the international community.

In this context, we were pleased to co-sponsor resolution 2177 (2014) and welcome its adoption. We also look forward to the action that the General Assembly will take tomorrow on this issue.

The present Ebola outbreak, on such a rapid and unprecedented scale, is the largest outbreak of its kind in history. The crisis brings with it a plethora of challenges that require a multidimensional and multisectoral response at the national, regional and international levels. In addition to its obvious public-health implications, the Secretary-General has drawn attention to the significant political, social, economic, humanitarian, logistical and security dimensions of the crisis. Its potential for reversing peacebuilding and development gains is acknowledged with concern.

The Governments of the countries affected are making valiant efforts to respond to the crisis and to contain the spread of the disease. At this stage, however, given the exponential increase in the number of cases and deaths, it has become necessary, indeed, imperative, for the international community to mobilize a coordinated response that is commensurate in scale and pace with the enormity of the challenge. Guyana supports all efforts towards that end, and we join in the call for a massive scale-up of resources to assist the countries affected and to prevent the spread of the disease to others.

In that regard, our delegation also supports the Secretary-General’s initiative to establish the United Nations Mission for Ebola Emergency Response. For its part, the Government of Guyana is giving consideration...
to an appropriate contribution in the context of the global response.

The President: I now give the floor to the representative of the United Republic of Tanzania.

Mr. Khamis (United Republic of Tanzania): Tanzania thanks you, Mr. President, for having convened this important event to discuss the Ebola outbreak in Africa.

We also welcome the resolution adopted today — resolution 2177 (2014) — which sends a strong political message from the Council in the collective effort to bring the outbreak under control. Tanzania was a sponsor of the resolution as a show of support and solidarity, as well as sympathy with those who have succumbed to its deadly effects. We pledge to stand with them in addressing this massive health crisis.

We would like to pay tribute to Member States, regional organizations, the United Nations system, the private sector, civil society and individuals for their various interventions in addressing the Ebola crisis. We believe that where there is a will, there is a way.

The adoption of resolution 2177 (2014) is a positive contribution to the ongoing efforts. The Ebola outbreak has demonstrated the vicious, destructive force of the disease. The projections for its spread and consequences are alarming and should provoke an immediate, collective response on our part.

The pronouncements made in this Chamber today and elsewhere are truly encouraging. All that remains is to put those commitments into action and wipe the Ebola virus from the face of the Earth once and for all. The triumphs of mankind, especially those demonstrated by the permanent members of the Council, give us much hope that the deadly Ebola virus can be contained and eliminated.

The victims of the Ebola outbreak deserve our sincere sympathy and support. The isolation and stigmatization of victims, including through transport restrictions, is truly unfortunate. All of us should do whatever it takes to refrain from engaging in such acts, which would be tantamount to adding insult to injury.

The Ebola outbreak has highlighted the fragility that persists on the African continent and which is also present in other parts of the world. While directing our efforts towards eradicating the Ebola outbreak in the short and medium term, in the long term we should seek to build the capacities of the health and humanitarian sectors to cope with major outbreaks such as that of the Ebola virus.

This past June, at the twenty-third ordinary session of the African Union summit in Malabo, His Excellency President Kikwete expressed the readiness of the United Republic of Tanzania to render support to the regional interventions spearheaded by the African Union as well as international interventions, including those undertaken by the United Nations system. Our commitment and resolve remain: we will continue to work with partners to strengthen the level of preparedness to address the Ebola epidemic.

The President: I give the floor to the representative of Equatorial Guinea.

Mr. Ndong Mba (Equatorial Guinea) (spoke in Spanish): When one takes the floor following so many other speakers, one cannot but be brief and join in the positive statements that have been made. We have a saying in Spanish to the effect that it is never too late to say something good, although this comes after the loss of so many lives.

These words follow on to the show of solidarity that we have seen here since this morning, with the massive support announced by the United States of America, the initiative of the Secretary-General, and the adoption of resolution 2177 (2014), which we all sponsored, with the unanimous support of the members of the Council.

It is now time to walk the talk. I would like to recommend here that it should not be left only to the World Health Organization and UNICEF. Other United Nations agencies such as the World Food Programme and the Food and Agriculture Organization of the United Nations must also be involved, because it is not only a question of health; there is also the issue of nutrition and of feeding the people, given the economic situation that these countries are now facing.

The Republic of Equatorial Guinea, believes firmly, as expressed by its President, Obiang Nguema Mbasogo, in African solidarity and, indeed, solidarity with the entire world. It is for that reason that last Monday, when UNESCO awards were handed out to scientists from Peru, Burkina Faso and the Islamic Republic of Iran, His Excellency said that we cannot isolate those countries suffering from Ebola. We cannot isolate human suffering. Initially, the Republic of Equatorial Guinea closed its borders and suspended its flight in order to deal with internal preparations at our borders and airports, but we reopened them once we
had taken the necessary measures for control. Through our national airline, CEIBA, we will soon reopen our flights to all the countries we serve in West and Central Africa.

I am honoured to take this opportunity to announce that the President of the Republic of Equatorial Guinea has decided to contribute $2 million to the World Health Organization in order to combat Ebola. As Equatorial Guinea is a small country with few resources, our Head of State and the Government believe in solidarity. We believe that we must do our utmost to join in solidarity and support the effort to help the countries affected, because Ebola is not just a problem for Liberia, Guinea and Sierra Leone, it is rather an epidemic, a pandemic that can spread like wildfire through any number of countries at any time. It is a concern not just for Africa but for the entire world. All of us, therefore, large and small, are called on to give as much support as possible to our brother countries and to take all the preventive measures necessary.

The President: I now give the floor to Ms. Chan for further remarks.

Ms. Chan: I would first like to thank the United States presidency of the Security Council for organizing this timely debate on Ebola. I would also like to thank the Council members and representatives of other countries who spoke today for their outpouring of support, political and otherwise, including in the areas of human resources, expertise, material and military assets. They are all very valuable to the efforts to support the three countries affected — Guinea, Sierra Leone and Liberia — in solidarity with them and under their national leaderships. The unanimous support for resolution (2177 (2014), with 130 sponsors, is an unprecedented feat, and I would like to thank the Council for its show of solidarity.

It also warmed my heart to hear the support of so many here for the Secretary-General’s initiative in creating a United Nations mission. The entire United Nations family, working with various agencies in the system, particularly the World Food Programme, UNICEF, the Office for the Coordination of Humanitarian Affairs and others, along with partners in the private sector, civil society and important organizations such as the International Federation of Red Cross and Red Crescent Societies and Médecins Sans Frontières, will do its utmost to conduct this massive surge with speed, scale and efficiency, and without duplication. We look forward to the Council’s continued guidance and advice on the way forward. Let us work together to end the Ebola outbreak and kick it out of the African continent. Once again, I thank all here. I am really touched by the solidarity shown with these countries.

The President: I thank Ms. Chan for her inspiring comments, and I think she will be pleased to learn that four additional countries have been added to the sponsorship of today’s resolution (2177 (2104)), which will be reflected in the record.

I now give the floor to Dr. Nabarro to make some concluding remarks.

Dr. Nabarro: As for Ms. Chan, it is a privilege for me to be here on this historic occasion. I will give my quick feedback on the messages in the many remarks I have heard today that I am taking home, as we go on with our important tasks.

First, all those who spoke, in their different ways, really appreciate the seriousness of this challenge as a major public-health crisis that has multiple other impacts with the potential for wider effects regionally and internationally. Secondly, this was a demonstration of powerful solidarity with the countries that are currently affected, with an appreciation for what they are doing through their civil society groups, Governments and their partnerships with others. We see increased signs of willingness to open or maintain air links and other trading links, and strong indications of solidarity among African nations and between Africa and the rest of the world. Thirdly, I am personally gratified to see how the work of the various parts of the United Nations system is recognized, with a valuation not only of the role of the World Health Organization (WHO) as the world’s health leader but also of other United Nations agencies, as Ms. Chan identified just now.

Several Governments used today’s meeting as an opportunity to offer generous commitments. Some of those are from within Africa, offering significant contributions to the international response. Others are more traditional donors. But what I saw today was an extraordinary outpouring of support, big and small, from all over the world — a real global coalition. I also heard Governments saying that they were willing to be coordinated and expressing trust in the capacity of the United Nations to act as the coordinating body. As the Senior United Nations System Coordinator for Ebola, that is really refreshing for me to hear. I noted widespread support from virtually all speakers for the historic plan of the Secretary-General and the
Director-General of WHO to establish an exceptional public-health mission, the United Nations Mission for Emergency Ebola Response. Finally, I simply feel that everyone here wants us all to get going and do more, so with that I will shut up and get on.

The President: There are no more speakers on the list. The Security Council has thus concluded the present stage of its consideration of the item on its agenda.

*The meeting rose at 7.50 p.m.*