15 July 2019 - Thank you, Mark, and thank you for your leadership and partnership.
Please accept my respect and appreciation.

Your Excellency Oly Ilunga,

The Right Honourable Rory Stewart,

Excellencies, colleagues, friends,

Yesterday, WHO was notified of two very sad developments in the Ebola outbreak in DRC.

The first was a case of Ebola in the city of Goma, in a pastor who had traveled from Butembo.

Although this is a very concerning development, it's one that we and the government have expected and prepared for.

Around 3000 people have been vaccinated and the pastor is receiving care at an Ebola treatment centre run by the Ministry of Health and Médecins sans Frontières.

The second was that two Ebola responders were murdered in their home in Beni, as Mark said.

Both of these events encapsulate the challenges we continue to face on a daily basis in DRC.

Just when we start to get control of the virus in one area, it appears in another.

And violence and insecurity continue to undermine the response.

We are dealing with one of the world's most dangerous viruses in one of the world's most dangerous areas.

Since January, WHO has recorded 198 attacks on health facilities and health workers, killing 7 people including the two responders murdered yesterday and, in April, a WHO epidemiologist, Dr Richard Mouzoko, as you remember.

Every attack sets us back. Every attack makes it more difficult to trace contacts, vaccinate and perform safe burials. Every attack gives Ebola an opportunity to spread. Ebola gets a free ride in each and every attack.

On top of that, community mistrust, political instability and the spread of myths and misinformation have been significant barriers.

Almost 2,500 people have been infected, of whom 1,665 have died.

All of these challenges make this outbreak one of the most complex humanitarian emergencies any of us have ever faced, and Mark already outlined how this outbreak is different from West Africa, and even more complicated.

And yet despite the challenges, and despite the scale of the outbreak, we have so far succeeded in containing Ebola to DRC.

Although the risk of spread within DRC and in the region remains very high, we should not

underestimate the magnitude of what has been achieved so far.

The tireless efforts of hundreds of responders from the Ministry of Health, WHO and many partners have been nothing short of heroic.

More than 161,000 people have been vaccinated, 140,000 contacts have been traced and 71 million travelers have been screened.

Let's be clear: these efforts have saved lives and prevented a much larger emergency.

Much credit goes to my brother Minister Oly Ilunga, the Ministry of Health and the government, whose transparency and daily reporting have been exceptional.

Recently, we have also seen good progress on a bipartisan approach to the outbreak, which is paying dividends.

Both the government and senior opposition leaders have agreed to communicate the same message to the affected communities on the need for vaccination.

We're also engaging with schools, religious leaders and business leaders to maximize community engagement and ownership.

Together with OCHA, we continue to work intensively with DRC's neighbours to invest in preparedness.

More than 10,000 people have been vaccinated in Uganda, South Sudan and Rwanda.

One of the key lessons of this outbreak is that we must fix the roof before the rains come. As the experience in Uganda demonstrates, countries that invest in preparedness will save lives – and save money.

About $18 million has been spent on preparedness in Uganda, compared with more than $250 million – and counting – on the response in DRC.

And yet the fact remains that for all our successes, we have not yet managed to end the outbreak.

The risk of spread in DRC and the region remains very high.

But this is more than just a health emergency, and ending it takes more than just a health response.

It will take the combined efforts of the United Nations system and the international community, as Mark indicated.

Which is why we welcome the Secretary-General's decision in May to implement a strengthened coordination and support mechanism, led by David Gressly.

We appreciate that others are now stepping up to lend their experience and expertise to addressing the political, security and broader humanitarian aspects of the outbreak.

Now it's time for the international community to redouble its efforts, in solidarity with the people of DRC. Now is the time to demonstrate the political leadership needed to end this outbreak.

But even as we focus on ending the outbreak, we must look beyond it.

An outbreak of measles in DRC has killed almost 2000 children since January – more than Ebola in less time – and yet it gets little international attention. Malaria, the leading cause of death in DRC, kills more than 50,000 people every year.

I have traveled to North Kivu six times during this outbreak. Frankly, I am embarrassed to talk only about Ebola.

Together, we will end this outbreak. But unless we address its root causes – the weak health system, the insecurity and the political instability – there will be another outbreak.

We often talk about the need to bridge the humanitarian-development nexus. This is the moment to practice what we preach.

WHO is committed not just to ending this outbreak, but to strengthening DRC's health system so that it never comes back.

That's also what the community in North Kivu is asking. To build trust, we must demonstrate that we are not simply parachuting in to deal with Ebola and then leaving once it's finished.

Finally, the identification of the case in Goma could potentially be a game-changer in this epidemic.

Goma is a city of 2 million people, near the border with Rwanda, and is a gateway to the region and the world.

We are confident in the measures we are put in place and hope that we will see no further transmission of Ebola in Goma.

Nevertheless, we cannot be too careful. I have therefore decided to reconvene the Emergency Committee as soon as possible to assess the threat of this development and advise me accordingly.

Thank you all for your support and commitment. Together, we can and must free DRC of Ebola, not just this once, but once and for all, by connecting humanitarian support with development.

I thank you.