

Ebola outbreak puts Democratic Republic of the Congo on an 'epidemiological knife-edge'

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Speaking in Geneva at the [World Health Assembly](#), Dr Peter Salama, WHO Deputy Director-General, who heads up emergency preparedness and response, said that there were several reasons why the current outbreak – which has claimed 27 lives since it was declared on 8 May – has yet to be contained.

“It’s hard to recall a situation of an outbreak where a Government has responded more quickly and more decisively than in this outbreak,” he said, adding that it was “a multi-partner effort and it’s not over yet. We’re really just at the beginning.

“I used the phrase yesterday that we’re on the epidemiological knife-edge of this response, the next few weeks will really tell if this outbreak will spread to urban areas or if we’re going to be able to keep it under control.”

Unlike previous Ebola events in DRC – this is the country’s ninth since 1976 – the 2018 outbreak has been complicated by the fact that it involves rural and urban areas.

This has raised the chances that it might spread both nationally and internationally, Dr. Salama said, particularly since the city of Mbandaka – where the disease was identified after first surfacing in the relatively remote Bikoro – is close to the Congo river, which acts as the main transport link to DRC’s capital, Kinshasa.

With 58 confirmed, probable or suspected cases of the disease in the country as of Wednesday, effective tracing of anyone who has come into contact with the disease will “make or break” the response to Ebola, Dr. Salama said.

He described the task ahead as “the detective work of epidemiology”, adding that medical personnel at a hospital in Wangata, Mbandaka, were tracing some 600 contacts from three separate chains of transmission.

One of these chains was associated with a funeral in a neighbouring town of Bikoro; another was linked to a health-care facility in the small village of

Iboko; and the third related to a church ceremony. “Each one has the potential to expand if not controlled,” Dr. Salama said.

The WHO official confirmed that a selective, or “ring vaccination” programme had just begun and that efforts are ongoing to ensure that the Ebola drug can be stored in “ultracold” conditions at between -60 and -80°C.

WHO has repeatedly stressed that vaccination is only one measure among many in any outbreak response.

That message was repeated in Geneva by Tedros Adhanom Ghebreyesus, WHO [Director-General](#), who praised the commitment and sacrifice of the communities and health workers on the front line, as “the most important element in fighting this outbreak”.

The WHO chief also underlined that the coordination among international health partners was essential, too, before highlighting that even he had problems in accessing rural Bikoro to see the problem first-hand, during his visit to the area shortly after the beginning of the outbreak.

[South Korea leads developed nations in household debt, UN expert warns](#)

Despite being the world’s 11th largest economy, a significant number of South Koreans are living in “substandard” housing, faced with rising rents they can no longer afford, a United Nations rights expert said on Wednesday, noting that the country now leads developed nations in levels of household debt.

“I met with residents who are living in completely [substandard housing](#) and yet paying exorbitant rents,” said Leilani Farha, the UN Special Rapporteur on the right to adequate housing, at the end of a 10-day visit to the Republic of Korea.

In a statement on Wednesday, she said that some were “forced to live in tiny spaces no more than 5 square metres, on short term leases and at the mercy of landlords’ arbitrary decisions to raise the rent”.

While acknowledging the Government’s “massive effort” to improve housing conditions for the bulk of its population, she said she is “deeply concerned” by the continuation of “massive reconstruction projects” resulting in the destruction of neighbourhoods and displacement of individuals and families.

She also expressed alarm at how urban areas have become unaffordable for young people and low-income households; although that is an observation which has been made frequently about expanding cities in other developed countries

such as London, Tokyo and New York.

Ms. Farha pointed out that the country's current legal framework for urban redevelopment and reconstruction does not comply with internationally recognised human rights standards and continues to result in forced evictions.

She said that South Korea, formally known as the Republic of Korea, now leads the Organisation for Economic Co-operation and Development (OECD) list, in terms of household debt and "security of tenure is a real issue," she added.

"The shift from housing being treated as a commodity to housing being understood as a human right, is not yet complete", she said, adding that "The Government should adopt a comprehensive human rights-based national action plan on housing".

UN pays tribute to the Organization's founding mothers

Women have played a pivotal role in the United Nations since its inception in 1945, including in the first international agreement proclaiming gender equality as a fundamental human right: the [UN Charter](#).

According to recent studies from scholarly research, women delegates from developing countries, or the Global South, played a significant role in ensuring that the Charter made specific mention of gender rights. And yet, out of the 850 delegates who signed the historic document, only four were women.

Speaking on Tuesday at an event headlined, *Women and the Origins of the United Nations – a Southern Legacy*, Maria Luiza Viotti, UN [Chef de Cabinet](#), said that even as the world body works for equality today, "we must also remember our history."

"That means paying tribute to the pioneers from the early years of the struggle," she added.

The event honouring the women of developing countries who defended their rights more than seven decades ago, provided not only long-overdue recognition today, but also served to correct an incomplete historical narrative, which failed to reflect the role of women from countries like Brazil, the Dominican Republic, India, Mexico, Pakistan, Uruguay and Venezuela.

Ms. Viotti recalled their push to defend women's rights, and inspire a global shift in recognition, when many of the countries at the 1945 [San Francisco](#)

[Conference](#), did not even allow women to vote.

“Since then, the UN has elaborated an extensive body of laws, standards and norms articulating women’s rights – from the opportunities to which they are entitled to the protections they must be assured,” she continued, noting that today, it presses for gender parity not just across the world but across the world body itself.

“The struggle continues. Laws and goals on paper are essential. But what is needed even more is tangible steps to bring these rules and rights to life,” concluded Ms. Viotti.

Poverty compounding health challenges for Palestine refugees – UN agency

Non-communicable diseases such as diabetes, hypertension, cancer and smoking-related ailments, account for the majority of the chronic health problems confronting Palestine refugees across the Middle East, a new report by the United Nations agency which supports them, has found.

According to the Director of Health at the UN Relief and Works Agency for Palestine Refugees (UNRWA), Akihiro Seita, these diseases account for as much as 80 per cent of fatalities.

The reason for the high number, he said, is “simply because they do not have access to healthy lives or in other words; poverty.”

UNRWA’s [2017 Annual Report](#) on health looks at the overall picture across the agency’s five areas of operation – Jordan; Lebanon; the West Bank, including East Jerusalem; Gaza; and Syria.

Last year, around three million registered refugees received health services, amounting to 9.2 million consultations – all free of charge – at 143 UNRWA primary health care centres.

“Protecting and promoting the health of registered Palestine refugees, is at the heart of our mandate, enabling them to achieve the highest attainable level of health until a just and lasting resolution of the Palestine refugee issue is achieved,” said Dr. Seita.

The report also coincides with the 70th anniversary of the 1948 War that resulted in the mass displacement and dispossession of hundreds of thousands of Palestinians from their homes.

This year, the report also comes amid escalating tensions in the region and violent clashes in Gaza over the past two months, between Palestinian

demonstrators and Israeli Security Forces along the border fence.

Quoting figures from the UN [World Health Organization](#) (WHO), Dr. Seita said that over 12,000 people have been injured in the weekly protests since late March.

“Out of 12,000, according to WHO, about 7,000 went to hospitals,” he said, of whom around 3,500 had gunshot wounds, he said.

The impact of the “extraordinary” number of injuries overwhelmed the limited health and medical services in the enclave, added the UNRWA official, noting that many people with gunshot wounds ended up at primary-care health centres, which are not equipped for major surgery or trauma services.

[New project safeguards Rohingya refugees; boosts local farming – UN migration agency](#)

A major canal dredging project underway in Southern Bangladesh to protect Rohingya refugees from monsoon floods, will have the added benefit of boosting local agriculture, the United Nations migration agency said Tuesday.

The [International Organization for Migration](#), or [IOM](#), is overseeing the dredging of more than nine kilometres of abandoned canals, which will then be renovated, in the Cox’s Bazar area, which is home to around 700,000 mainly-Muslim Rohingya who have fled violence in northern Myanmar.

IOM said that the project in Ukhiya sub-district would [prevent flooding](#) and allow water runoff during the annual heavy rains that come with the arrival of monsoon season.

Moreover, the UN agency has employed 50 Bangladeshi labourers locally, to carry out the work, as part of a wider IOM-supported disaster-preparedness programme.

The project will not only help safeguard lives and livelihoods when the monsoon hits by reducing the risk of flooding, it will also provide much-needed irrigation channels during the dry season.

“There was no water flow in the canal, as it hadn’t been maintained for years”, said the agency’s Damon Elsworth. “This resulted in flooding in the surrounding communities during the monsoon as the rainwater coming down from the adjacent hills couldn’t flow through.”

Cox’s Bazar was already prone to landslides and flooding, even before

hundreds of thousands of Rohingya refugees began arriving at the end of last August.

IOM, the [World Food Programme](#) (WFP) and the UN human rights office ([OHCHR](#)) are participating in the \$20,000 canal clearing project.

Local residents working on the project said they were happy to be employed protecting community.

“It feels good that we were consulted at every step of this dredging work. It feels like it is our property that we’re working for,” said Syed Kashem, 65, a local community leader overseeing the dredging work.

Cox’s Bazar has already experienced the first rains of the season. IOM and other agencies are working to help local authorities respond to a wide range of potential emergency situations. Roads, pathways, bridges and drains have been built and land has been stabilized and levelled to help keep access routes open.

Other IOM projects include bridge building, access roads, steps, drains, and slope protection work, to enable communities cope with the monsoon. The agency is also stockpiling emergency aid, such as tarpaulins, food, water and medical supplies to ensure that urgent needs of both the refugee and host communities are met.