



World Health  
Organization



## ENABLING QUICK ACTION TO SAVE LIVES

Contingency Fund for Emergencies

2018 Update



## INTRODUCTION

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*Instead of asking for funding every time there's an outbreak or other emergency, the CFE helps us to fix the roof before the rain. It allows WHO to respond rapidly to save lives.”*

*Dr Tedros Adhanom Ghebreyesus,  
WHO Director-General*

The Contingency Fund for Emergencies (CFE) has been a game-changer for WHO. It allows WHO to respond rapidly to disease outbreaks and health emergencies - often in 24 hours or less. This saves lives and helps prevent unnecessary suffering. Furthermore, a quick response dramatically reduces the costs of controlling outbreaks and emergencies, as well as the wider social and economic impacts.

The CFE is unearmarked, giving WHO the crucial flexibility it needs to act quickly in response to disease outbreaks, natural disasters, and humanitarian emergencies. For example, in 2018 the CFE has proved critical in allowing WHO to deploy teams to help contain two Ebola outbreaks in the Democratic Republic of the Congo; assist government efforts to stop the largest Lassa fever outbreak on record in Nigeria; and provide support for the earthquake in Papua New Guinea.

Donor partners increasingly see the value of the CFE as a global public good. They have contributed nearly US\$30 million to the fund so far in 2018<sup>1</sup>. This is more than double the level of contributions from all of last year. In addition, six new donors have joined the list of contributors to the CFE. More and more, donors see the CFE as excellent value for money and a sound investment.

With outbreaks and health emergencies continuing unabated, WHO is working with Member States to reach the CFE's target of \$100 million over the 2018-2019 biennium. Ensuring the fund's sustainability strengthens global health security.

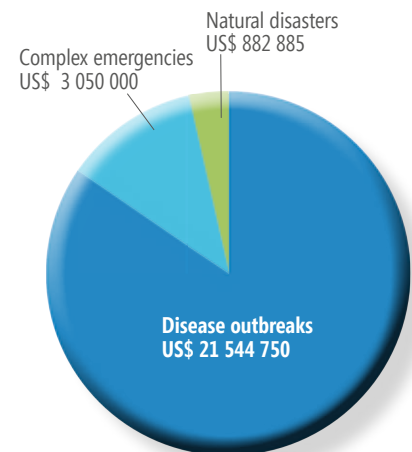
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<sup>1</sup> As at 15 October 2018.

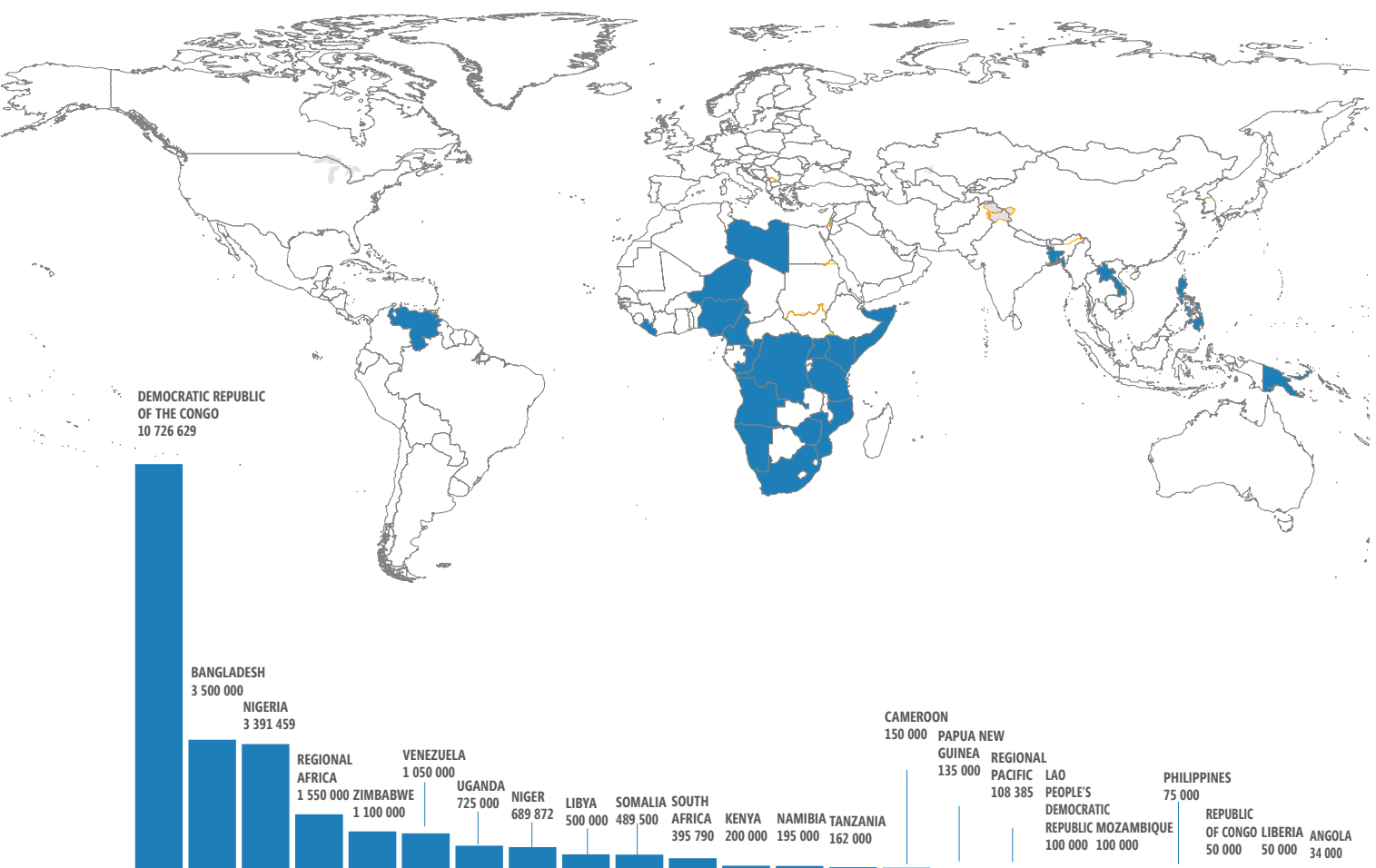


## ENABLING RAPID RESPONSE IN 28 COUNTRIES

As at 15 October 2018, the CFE has released more than US\$ 25 million for 27 events in 28 countries this year. This has enabled WHO to respond to 19 disease outbreaks, six natural disasters and two complex emergencies. More than 85% of all allocations of US\$ 500 000 or less have been released within 24 hours.



## ALLOCATIONS BY COUNTRY 2018 TOTAL US\$ 25 477 635



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## Papua New Guinea



Rapid funding from the CFE allowed WHO to respond to the earthquake in PNG in 24 hours.

**Emergency:**  
**Natural disaster (earthquake)**

**Date: February 2018**  
**Amount released: US\$ 135 000**

**Impact:**

- 10 000** people received essential medicines
- 16 000** children immunized
- 2000** suspected disease outbreaks addressed
- 1000** people received psycho-social support
- 300 000** direct and indirect beneficiaries

Following the 7.5 magnitude earthquake in Papua New Guinea on 26 February, WHO was on the ground in 24 hours, deploying 19 technical staff for assessment and response. The health cluster was activated in 48 hours allowing WHO to coordinate 25 NGO partners through three operations centers. In total 145 health workers were trained in WHO's Early Warning, Alert and Response System (EWARS), and 149 were trained in psycho-social support.

## Nigeria



The CFE allowed WHO and partners to help the Government of Nigeria stop the worst-ever Lassa fever outbreak in the country.

**Emergency:**  
**Disease outbreak (Lassa fever)**

**Date: January 2018**  
**Amount released: US\$ 950 000**

**Impact:**

- 7000** protective equipment kits distributed to health workers
- 3** national laboratories received reagents and equipment for testing
- 7500** direct beneficiaries (suspected cases and contacts)
- 4 million** people protected in affected areas

The response to Nigeria's largest Lassa fever epidemic on record was led by the Nigeria Centre for Disease Control. WHO provided technical support and coordinated international assistance through its Global Outbreak Alert and Response Network (GOARN) in the areas of enhanced surveillance and case investigation, contact tracing, diagnostic capacity strengthening, case management, infection prevention and control, and risk communication. Health workers in case management centers in the three most affected states received specialized training. The Government of Nigeria declared the emergency phase over on 10 May 2018.



## Democratic Republic of the Congo (Équateur Province)



CFE funding enabled WHO and partners to respond to the Ebola outbreak in the Democratic Republic of the Congo with minimal delays and to scale up response operations during the most critical period.

**Emergency:**  
**Disease outbreak (Ebola)**

**Date:** May 2018  
**Amount released:** US\$ 4.5 million\*

**Impact:**

**24 hours** first response teams arrive

**48 hours** mobile laboratory, vaccine storage, EWARS equipment shipped

**72-96 hours** contact tracing begins, treatment centers set up, air bridge established

**7 days** 15 vaccination officers, two epidemiologists deployed; 4300 vaccine doses shipped

**21 May** first ring vaccination campaign

**24 July** outbreak declared over

The CFE released US\$ 1 million within 4 hours of the Ebola outbreak declaration on 8 May 2018. This enabled the Ministry of Health, WHO and partners to kick-start a coordinated response which enabled deployment of technical experts within the first days of the outbreak. Subsequent releases from the CFE allowed WHO and partners to scale up operations and support preparedness work in neighbouring countries. By July, 360 technical experts had been deployed and 3300 people, including health workers and contacts, had been vaccinated. The Ministry of Health declared the outbreak over on 24 July 2018.

*\*Includes US\$ 1.5 million for preparedness in neighbouring countries.*

Less than two weeks after the end of the Équateur Province outbreak was declared over, a second Ebola outbreak in North Kivu in August prompted WHO to release US\$ 6 million from the CFE. The rapid release of flexible funding was critical in supporting the Ministry of Health and partners to get a head start on containing the outbreak which, at time of writing, is still ongoing. More information can be found on the WHO website, <http://www.who.int/ebola/en/>.

## BROADENING AND DEEPENING SUPPORT FROM DONORS

The CFE is replenished through donor contributions outside of the WHO Health Emergencies Programme (WHE) core budget either directly to the CFE or through reimbursement from donations against specific WHO response plans.

Member States have responded generously, contributing nearly US\$ 75 million to the CFE since 2015, including US\$ 29.5 million in 2018 alone. Six new donors have joined the list of contributors, bringing the number of Member State contributors to 17. This includes recent major contributions from Australia (US\$ 3 million), Denmark (US\$ 3.1 million) and Germany (US\$ 9 million) in recognition of the CFE's role in the Ebola response in Democratic Republic of the Congo this year.

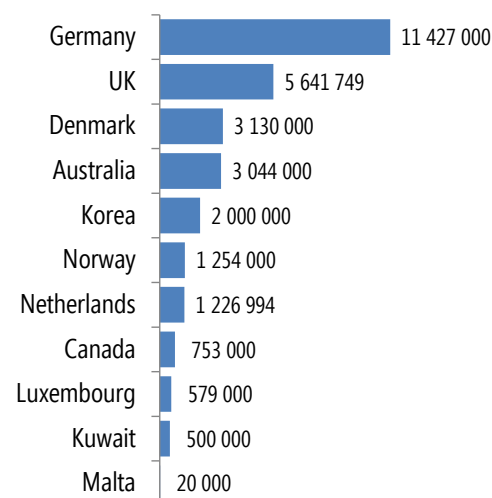
## PROGRESS ON THE CFE REPLENISHMENT STRATEGY

WHO is implementing a replenishment strategy for the CFE to reach the target of \$100 million for the 2018-2019 biennium.

Central to the CFE replenishment strategy is the reimbursement of CFE allocations by donor contributions to WHO country response plans. In 2017, about a third of allocations was reimbursed and returned to the CFE<sup>1</sup>. WHO continues to build its capacity to mobilize resources at country level to further enable recipient country offices to repay CFE grants. Dedicated resource mobilization officers are in place in seven of ten WHE priority countries (Democratic Republic of Congo, Ethiopia, Nigeria, Somalia, South Sudan, Syrian Arab Republic and Yemen), with temporary arrangements in the remaining three countries (Afghanistan, Iraq and Mali). Recruitment is ongoing, and it is expected that all ten WHE priority countries will have dedicated resource mobilization officers in place by early 2019.

The CFE is an integral part of WHO's first-ever Investment Case and will feature prominently in the ongoing global Financing Campaign to raise the resources the Organization needs to carry out its thirteenth Global Programme of Work (GPW13) over the next five years. As part of the campaign, WHO is working with

## CFE CONTRIBUTIONS IN 2018 TOTAL US\$ 29 575 743



<sup>2</sup> US\$ 17.7 million in allocations (excluding US\$ 1.5 million loan to Iraq).  
US\$ 5.9 million reimbursed.



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*The consequences for the world's response to health emergencies could not be more severe and the responsibility to ensure this does not happen, lies with all of us.*

*The United Kingdom of Great Britain and Northern Ireland has studied the CFE and we are convinced it has a vital and unique role to play in the global effort to prevent and mitigate health emergencies.* ”

*The Rt Hon Alistair Burt MP,  
Minister of State for International  
Development, UK*

the Wellcome Trust, for example, to look at ways to build support for the CFE and for WHO's work in stopping pandemics. The CFE will be featured in milestone events throughout the campaign.

WHO continues to work with complementary financing mechanisms such as the Central Emergency Response Fund (CERF) and World Bank Pandemic Emergency Financing Facility (PEF) to ensure alignment of these funding streams. The first-ever allocation from the PEF cash window was issued for the recent Ebola response in the Democratic Republic of the Congo in May, which also benefited from major allocations from the CFE and CERF. This will allow for learning to inform future responses.

预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_25570](https://www.yunbaogao.cn/report/index/report?reportId=5_25570)

