



# INTERNATIONAL EBOLA CRISIS

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Detecting and Responding to a  
Public Health Emergency



The **National Museum of American Diplomacy (NMAD)** offers educators immersive programs that explore the goals and practice of diplomacy, teach diplomatic skills, build global competence, and illustrate how the critical work of American diplomats impacts people's everyday lives. Lesson plans emphasize 21st century skills: creativity and innovation; critical thinking and problem solving; and communication and collaboration. These skills are keys to success for the next generation of global citizens.

The **Diplomacy Simulation Program** is the museum's premier educational tool. In a collaborative learning environment, students step into the shoes of real-life diplomats. The diplomacy simulations are designed for 15-30 participants, plus a teacher/moderator. Students receive a scenario related to a global issue, which could be real-world or hypothetical, current or historic. Within each simulation, there are five to six stakeholder groups (e.g., foreign ministries, NGOs, and international organizations), each with different perspectives and priorities. Students role-play these stakeholders in small teams of three to five. Under set time constraints, the groups are challenged to negotiate a peaceful solution to the crisis in the scenario. Students use the information provided in the simulation packet to develop their group's policy positions and defend or modify their choices in real time.

The simulations have no right or wrong actions or solutions because the process, rather than the end result, is the goal. The learning experience develops organically as the students engage in the simulation. Once the simulation has been completed, students are encouraged to express how their views on diplomacy have evolved as a result of the simulation, and to contemplate how they can apply diplomatic skills to their everyday lives.

To access the complete Diplomacy Simulation Program, including training and subject matter expert videos, please visit [diplomacy.state.gov](https://diplomacy.state.gov)

The cover photograph was created by Jerome Delay at Associated Press and was edited for use in this publication.



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Diplomacy Simulations are developed and presented by NMAD as an integral component of the museum's education offerings. This document and all associated materials are intended exclusively for educational use.

## Background and Scenario



## Student Materials

Since 1976, when it was first discovered, there have been almost 20 outbreaks of Ebola Virus Disease that have claimed the lives of many innocent victims. Once infected, which usually occurs after coming into contact with another person's infected bodily fluids, one may experience severe bleeding and organ failure. During one outbreak, over 80% of those infected with Ebola eventually died. An outbreak of Ebola in a country that is particularly ill-equipped to respond to infectious disease outbreaks could devastate a population.

Recent efforts to combat this infectious disease have included medical research to identify a possible vaccine to prevent Ebola transmission, and genome sequencing to better understand how Ebola can be detected, treated, and eventually prevented. Additionally, there is research around the use of biopharmaceutical drugs like ZMapp to treat the disease. However, none of these can help with the emotional burden of having had this illness. Even if one survives Ebola, many communities still stigmatize infected individuals, and various public misconceptions about the disease perpetuate the emotional and physical trauma of contracting Ebola.

One of the most prominent actors involved with preventing and responding to Ebola outbreaks is the World Health Organization (WHO), a specialized agency within the United Nations that deals with international health issues. WHO plays a multitude of roles during health emergencies. They distribute necessary supplies such as personal protective equipment (PPE) to medical responders. WHO also funds and coordinates contact tracing, which consists of identification, visitation, testing, and even treatment of known potentially infected individuals. The organization also uses epidemiology to ensure there is proper data reporting and collection to develop an accurate disease profile.

Similarly, the humanitarian international nongovernmental organization (NGO) Doctors Without Borders provides direct volunteer medical care to communities in need through case management which may include humanely isolating patients, providing safe beds, making vaccines and therapeutics available, and providing quality patient care within Ebola Treatment Centers. New fears surrounding disease epidemics have placed an emphasis on not just responding to outbreaks, but preventing them, resulting in an increased need to create a usable vaccine by NGOs like Doctors Without Borders.

For countries responding to Ebola, the Ministries of Health within each government are responsible for improving and protecting the health and well-being of their citizens. Governments may establish National Ebola Response Centers (NERCs) to better manage an outbreak. Diseases are transnational challenges. Neighboring countries would also be concerned with an outbreak crossing borders and infecting their own citizens, so they pay close attention to possible key points of entry. Establishing an effective Ebola coordination structure within these local governments is vital to achieve zero new case infections.

Unfortunately, the countries more prone to disease outbreaks are often challenged with poor health capacities and governments ill prepared to respond to outbreaks or epidemics. An Ebola outbreak can exacerbate these structural issues and make conducting diplomacy between various governments and NGOs even more difficult.

Today's simulation involves a hypothetical scenario but deals with the real world problem of a spreading epidemic. You will role play a member of a delegation at an international meeting trying to negotiate a solution. The delegations are:



National Ebola Response Center of Farfelu



National Ebola Response Center of Anyep



U.S. Department of State



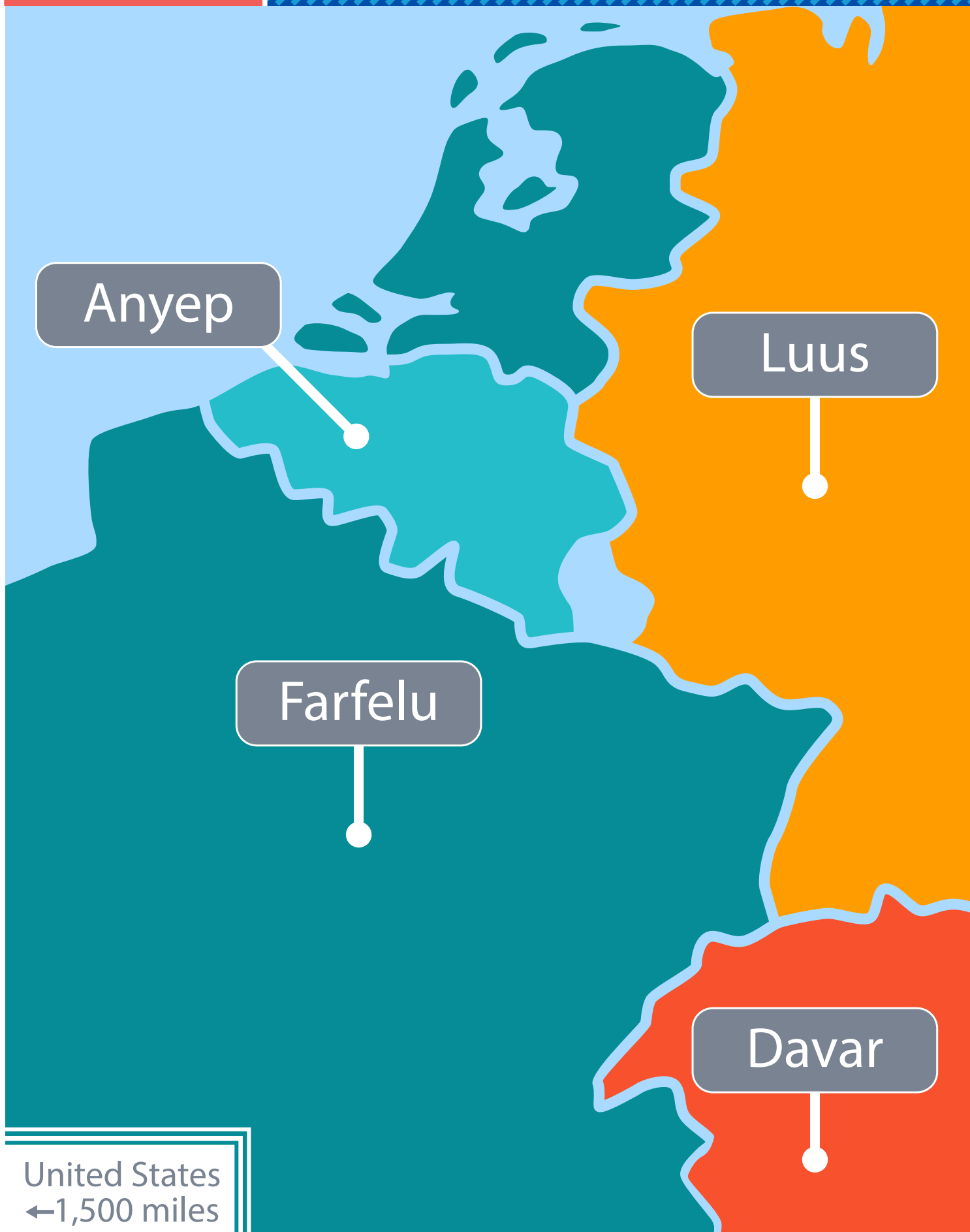
World Health Organization



Doctors Without Borders

As representatives of one of the stakeholders engaged in the process, you will need to:

- Prioritize your diplomatic goals according to your group's policy position.
- Identify with who you will need to negotiate and who might be your ally/competitor.
- Determine what other participants want out of the negotiations and whether your group is willing to compromise and how.
- Identify areas of agreement and organize an implementation strategy for your negotiations.





The countries of Farfelu and Anyep are two nations on a continent that share a long and joined history based on a common tribal ancestry that dates back thousands of years. 250 years ago, the tribe split in two when traders migrated north and created a smaller tribal sect, which became the country of Anyep. While the two nations have cultural and spiritual similarities, they differ in their overall development. Anyep has welcomed modern approaches to trade, infrastructure, and globalizing their economy, but Farfelu has been hesitant to adopt changes.

A year ago, an indigenous healer from Anyep travelled to a holy site in Farfelu and died of Ebola two days after arriving. It is widely believed this individual was patient zero and contracted the disease from a fruit bat. Since this initial incident, more than 10,000 people have been infected within the region. An estimated 3,000 of these cases were fatal, and 1,000 of these fatal cases were in Anyep. Daily case incidence rates are the highest they have ever been and the epidemic continues to grow. It is projected by the end of the year the two countries will see an additional 11,000 cases. Widespread public misconceptions about Ebola are partially to blame for this growing epidemic.

The indigenous people of both Farfelu and Anyep engage in burials by washing their dead without wearing protective covering. This is an important practice within their shared culture, as they believe it shows high respect for their deceased loved ones. However, this is an unsafe practice during an epidemic. In Farfelu, many individuals seek treatment from local healers who practice traditional medicine based on cultural beliefs in the country. The healers cannot effectively handle the Ebola outbreak. Lack of faith in the healthcare system and distrust of the government among Farfeluans remains the two largest challenges in stopping the deadly spread of Ebola.

The Ministry of Health (MoH) of Farfelu is continuing their case investigations of the disease through a National Ebola Response Center (NERC), which is proving to be ineffective. Many health officials take bribes to under report their actual infection numbers for political favors. This corruption has led to paralyzed government at the national and district levels, theft of funds for health workers' salaries, poor infection and control practices, and a misinformed government as a whole.

The Farfeluan NERC allowed the non-governmental organization (NGO) Doctors Without Borders into the country to begin oversight and treatment efforts. Overwhelmed at the devastating impact the outbreak had on local populations, Doctors Without Borders made a plea to the World Health Organization (WHO) to declare a Public Health Emergency of International Concern (PHEIC), which would allocate more resources and supplies to affected communities and other regions in danger of infection. A spokesperson for WHO said they could not declare a PHEIC due to conflicting data reports.

Neighboring countries are panicked and actively establishing their own coordinated Ebola response centers, such as the NERC in Anyep, to appropriately counter the outbreak. The Anyepian NERC has called this meeting to begin effective collaboration between countries in the region to monitor possible points of entry. Like Farfelu, there are issues of internal corruption within the Anyepian NERC. Resolving internal obstacles will be necessary before these structures achieve the coordination required to defeat Ebola. The international community needs to put pressure on these structures to promote change, but also must be wary of accusations of overreach or intervention.

The scope of this unprecedented outbreak can be attributed to the spread of Ebola into crowded urban areas, increased mobilization across borders, conflicts between key infection control practices, and prevailing indigenous traditions in this region. Engaging local governments and the international community in prevention programs and messaging, along with careful policy implementation at the national and global level, would contribute to eventually containing the spread of the virus and putting an end to this outbreak before more lives are unnecessarily lost.

## National Ebola Response Center of Farfelu

The National Ebola Response Center of Farfelu is a command-and-control unit designed to provide national operational coherence, resourcing, and direction to relevant actors engaged in combating Ebola. It receives technical support from Doctors Without Borders, but it is hesitant to accept any advisory support from outside actors. Tribal citizens have been hostile towards medical responders, especially those who are American. The inconsistent data reported by NERC further hinders the responses allowed from organizations like the WHO and countries like the United States.

## National Ebola Response Center of Anyep

The National Ebola Response Center of Anyep is also designed to provide national operational coherence, resourcing, and direction in the fight against the Ebola outbreak. It has welcomed assistance from outside actors, but similarly struggles with corruption. Citizens of Anyep are critical of Farfelu and some even place blame on the more traditional country for the scale of the Ebola epidemic.

## U.S. Department of State

The U.S. Department of State is the lead U.S. government agency responsible for conducting international relations according to the policies set by the President. The State Department is responsible for implementing infectious disease policy overseas in the furtherance of global health security and uses its relevant expertise to advise other governments. Through various funding initiatives, the State Department gives or solicits money for or humanitarian aid organizations like WHO as well as Doctors Without Borders.

## World Health Organization

The World Health Organization is a specialized agency within the United Nations that is concerned with international public health. The international organization brings together governments, private businesses, and non-governmental organizations to promote health goals, which include the eradication of infectious diseases. WHO was criticized for disputing claims that the current Ebola crisis was unprecedented. Because of its delayed response in declaring a Public Health Emergency of International Concern, it has been difficult to mobilize the international community to commit resources.

## Doctors Without Borders

Doctors Without Borders is an international humanitarian non-governmental medical organization known for its projects in conflict zones and in countries affected by infectious diseases. Their presence in the region before the outbreak materialized was crucial as an early warning system for governments and other essential stakeholders. It has been difficult for the public to trust their volunteer medical work due to misconceptions about the disease and how it is spread.



# WORKSHEET 1: QUESTIONS TO THINK THROUGH

**Whom do you represent?**

**What is your overall goal?**

**What goals, in order of priority, would you also like to achieve?**

**Who can help you to achieve your goals?**

**Who might oppose your approaches?**

**What incentives and disincentives can you offer to persuade others to join in your efforts?**

**What should be your strategy in dealing with the other stakeholders, i.e., with whom should you speak first? What will be the key points for each of the conversations?**

**Remember:** There is no “right” or “wrong” outcome. This is not a debate in which you need to win the argument; your goal is to work together to find a workable solution. Build upon common ground and look for areas where you and other parties can agree. Where you disagree, try to create options that address the other parties’ concerns.

## WORKSHEET 2: POSSIBLE ACTIONS

The following points are possible actions to take. As a team, prioritize your top two choices according to your delegation's policy position. Feel free to add actions. You will share your priorities with the other delegations in your opening statement.

- Encourage the NERCs to replace the health ministers in each country.
- Implement a widespread operation to educate the public in Farfelu and Anyep.
- Persuade WHO to increase engagement with NERCs and Doctors Without Borders.
- Encourage all actors to increase social mobilization efforts.
- Implement a daily phone call between all stakeholders for information sharing.
- Suggest that Doctors Without Borders establish more treatment centers.

**Other:**

## **Clearly determine your position and agree on your strategy:**

- Clarify or restate your position if it is misrepresented by one of the other stakeholder groups.
- If during informal discussions, you decide your group should change its position, discuss it with the other group members as soon as possible.

## **Realistically evaluate possible actions before you propose them:**

- Are the proposals possible?
- Will they achieve the results you want?
- Watch for unintended consequences.

## **Analyze other groups' positions:**

- Why do they hold that position?
- Why do they oppose or support your proposals?
- Can you apply pressure to make stakeholders re-evaluate their positions?
- Can you offer any incentives to make stakeholders re-evaluate their positions?

## **Build alliances:**

- Identify which stakeholders share your position and which do not.
- Do not spend all your time trying to persuade others. Listen carefully to other delegates and absorb what they are saying.
- Try to identify common interests and concerns you share with other stakeholders.
- Even if your end goal is different, what can you agree on with others?

## **Incentives and disincentives (“carrots and sticks”):**

- Consider what incentives you can safely offer to other groups.
- Explain to other stakeholders the negative consequences (either direct or indirect) that may follow if they oppose your position.

## **General tips\*:**

- Separate the people from the problem.
- Interests: Focus on interests, not positions.
- Options: Generate a variety of possibilities before deciding what to do.
- Criteria: Insist that the result be based on some objective standard.

\*Excerpted from “Getting To Yes”, Roger Fisher and William Ury, Random House Business Books, 1981

**Genome Sequencing:** Process of determining the sequences in DNA that can help diagnose different diseases and ultimately provide faster treatment options.

**Stigmatize:** To regard with disgrace or strong disapproval.

**Public Misconceptions:** Societal conclusion that is wrong, often based on false beliefs.

**Personal Protective Equipment (PPE):** Main source of protection for emergency health care workers which may include respirators, eye protection, hearing protection, and protective clothing.

**Contact Tracing:** Identifying and following-up with persons who might have come in contact with the Ebola virus and monitoring them for 21 days following their last known exposure to the disease.

**Epidemiology:** Branch of medicine that deals with the incidence, distribution, and possible control of diseases.

**Case Management:** Collaborative process of assessment, planning, facilitation, care, coordination, evaluation, and advocacy for options and services to meet an individual's needs.

**Point of Entry:** A geographical point of entrance to a country or region.

**Safe and Dignified Burials:** Traditional burial process that encourages the inclusion of family and local clergy in the planning and preparation of the burial and respects the traditions of washing the body and providing appropriate safety precautions.

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Located at the U.S. Department of State in Washington, D.C., the National Museum of American Diplomacy is a public-private partnership between the State Department and the Diplomacy Center Foundation. NMAD's education program connects high school and college students with the world of American diplomacy, increasing their understanding of the skills, practices, and language of diplomats. Through simulations, online resources, and the museum's annual Educator's Workshop, NMAD inspires involvement in foreign affairs and citizen diplomacy.







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