

**Secretary General's Ebola Multi-Partner Trust Fund (Ebola MPTF)
8th Advisory Committee
Meeting Notes**

DRAFT

August 14th, 2015, 09:15am – 10:45am, EST, New York

Chair: Dr. David Nabarro, UN Secretary-General's Special Envoy on Ebola

Members:

HE Ms. Marjon V. Kamara, Permanent Representative of the Republic of Liberia to the UN
HE Mr. Vandi Chidi Minah, Permanent Representative of the Republic of Sierra Leone to the UN
Mr. Alassane Conte, Counsellor of the Mission of the Republic of Guinea to the UN
Ms. Kirsten Stewart, DFID, UK Government, London
Ms. Karin Nilsson Snellman, Mission of Sweden to the UN, New York
Ms. Sophia Wengelin, SIDA, Swedish Government, Stockholm
Ms. Nadine Skale, Mission of Germany to the UN, New York

Resource Persons:

Dr. Bruce Aylward, Special Representative of the Director-General, WHO
Mr. Antonio Vigilante, DSRSG and UN Resident Coordinator, Liberia
Ms. Ruby Sandhu-Rojon, Deputy Director of the Regional Bureau for Africa, UNDP
Ms. Barbara Bentein, Principal Advisor, Head of Ebola Cell, UNICEF
Mr. Abdullah Alkulaib, UNDP New York
Mr. Stephane Renaldin, Office of the Ebola Crisis Manager, Guinea
Mr. Sudipto Mukerjee, Country Director, UNDP Sierra Leone
Mr. Philip Dive, Strategic Planning Adviser to the RC/UNCT, Sierra Leone
Ms. Ellora Guhathakurta, Planning, Monitoring/Evaluation Officer, Ebola MPTF, Liberia
Mr. Kurtmolla Abdulganiyev, Planning, Monitoring/Evaluation Officer, Ebola MPTF, Sierra Leone
Mr. Derk Segaar, Chief of Office, Office of the Special Envoy on Ebola
Ms. Joanna Nickolls, Policy Adviser, Office of the Special Envoy on Ebola

Ex-Officio Members:

Ms. Jennifer Topping, MPTF Office Executive Coordinator
Ms. Olga Aleshina, Head of Ebola MPTF Secretariat, MPTF Office

Apologies for Absence:

HE Mr. Mamadi Toure, Ambassador and Perm rep of Guinea to UN
Mr. Peter Graaff, Regional Ebola Interagency Crisis Response Supervisor
Ms. Bintou Keita, Ebola Crisis Manager, Sierra Leone
Ms. Seraphine Wakana, UN Resident Coordinator, Guinea
Mr. David McLachlan-Karr, UN Resident Coordinator, Sierra Leone

Introduction

The Chair welcomed the participants to the 8th Advisory Committee Meeting and introduced the new Executive Coordinator of the Multi-Partner Trust Fund Office, Ms. Jennifer Topping. The proposed meeting agenda was approved.

Updates from the UN Special Envoy on Ebola

The Chair provided an update about his visits to the region, acknowledging the work done by Governments, UN System, and partners. He briefed the participants on the Dakar coordination meeting in late July; the Secretary-General's Ebola Conference on Recovery on 10th July;

resource mobilization efforts within donor countries, and; the Security Council on Ebola on 13th August.

The Chair noted that the UN Mission for Ebola Emergency Response (UNMEER) came to an end on 31 July when stewardship of the UN response was transferred to WHO. The UNMEER senior leadership (the SRSG and the Ebola Crisis Managers in Sierra Leone and Guinea) have been taken on by WHO to serve as interagency coordinators (with a small group of support staff) in order to ensure a seamless transition.

Deputy Director-General WHO, Dr. Bruce Aylward on the response

Dr Aylward highlighted the positive epidemiological trend, which is summarized below. He thought that with continued efforts, the remaining transmission chains could be stopped in 2015.

Period	Cases per week
4 th Q 2014 (Peak time-Nov.2014)	800
1 st Q 2015	130
2 nd Q 2015	25
3 rd Q 2015 (Last two weeks)	3

Dr. Aylward shared some reflections on the activities conducted in the three affected countries:

- Investments in improved surveillance have resulted in a reduced number of chains of transmission in the three affected countries over the past two months.
- An initial study in Sierra Leone showed that viral persistence in semen declines over time with half of the cases clear by six months post-onset, and up to three-quarters clear by nine months. These findings highlighted the risks of the virus re-emerging from the bodily fluids of survivors. The capacity to respond to flare-ups will need to be an element of the recovery agenda.
- Stage III of the Response will focus on the following objectives:
 1. Defining and stopping the last transmission chains
 2. Identifying and managing the residual risk

Dr. Aylward welcomed the role the Ebola MPTF played in financing critical activities of the response.

Funding Framework and Achievements of the Trust Fund

The MPTF Office's Executive Coordinator provided an update on the funding situation of the Ebola MPTF. The Trust Fund has received more than US\$150 million in commitments with US\$140.6 million already deposited into the MPTF account. UN Recipient Organizations have received US\$136.9 million in transfers, US\$1 million for M&E capacity and US\$1.2 million has been disbursed to UNDP for a proposal covering "UN Clinics in Guinea and Sierra Leone", (this was approved during the last meeting).

The current balance of the Ebola MPTF is US\$1.36 m with an amount available for programming of US\$760,114. This takes into consideration the US\$600,000 earmarked by Israel for maintenance of Israel's Clinics in the three affected countries. US\$1m is expected from the Russian Federation, earmarked to the Recovery Window and approved for a UNFPA project "Restoring Midwifery services in Liberia" (already approved by the Advisory Committee). Two other expected commitments are US\$1.5 m from Turkey and US\$4.4 m from Belgium.

Priorities and Governance Structure of the Recovery Window

The Chair reminded the participants that the primary objective of the Ebola Trust Fund is to support the response to the outbreak – to get to and maintain zero.

Background and Early Recovery

The Chair noted that communities recovering after the crisis need essential services and there are urgent needs in specific sectors. He proposed that the Trust Fund be available for early recovery initiatives, bearing in mind that other funding mechanisms (e.g. the World Bank Fund) might be available to fund long-term larger recovery activities.

The Chair stressed the importance of ensuring that those who have managed to recover from Ebola infection (the “survivors”) receive appropriate support. Those who do survive continue to experience illness and disability, they may have lost their jobs, and in some cases the virus can persist undetected. Supporting and protecting survivors (be it surviving individuals, communities or countries) was proposed as an important priority for the Ebola MPTF.

The Chair invited views of participants on the priorities of the Fund.

- **The Ambassador of Liberia** confirmed the importance of paying attention to the risks posed by survivors. She stressed the importance of national Governments leading on recovery issues, including those related to supporting the survivors through their economic programmes. The Ambassador inquired about the final figures on the pledges of the July Ebola conference. UNDP’s Deputy Director of the Regional Bureau for Africa confirmed that the new pledges amount to US\$3.4 billion, in addition to the old pledges of US\$ 1.7 billion.
- **The Ambassador of Sierra Leone** reflected on the risks faced by the survivors themselves, as well as to their communities, and to medical institutions. He inquired whether the current Mission Critical Actions (MCAs) are broad enough to support the survivors. He said that medical institutions should be able to support both non-Ebola patients as well as survivors. The Ambassador also highlighted the need to protect orphans.
- **The Representative of Sweden** welcomed the proposal to fund early recovery programmes since the majority of the allocated funding had so far been primarily for the immediate response.
- **The Representative of the United Kingdom** highlighted the importance of continued and timely response funding, noting the importance of coordination across partners.
- **The DSRSG & UN Resident Coordinator in Liberia** suggested that un-earmarked pledges should be channeled through the Ebola MPTF Recovery Window. He noted that country-specific pledges are currently going through existing mechanisms, such as regular multi-year donor programmes and bilateral channels (EU and US). He said the Recovery Window should focus on: (i) survivors and orphans, (ii) cash transfers to the most affected communities, (iii) re-activation of health facilities (beyond health response) and schools, and, (iv) disaster risk reduction, preparedness, and rapid response. An inventory of existing and pipeline UN and NGO projects in the Liberia Early Recovery cluster had identified a portfolio of US\$300 million out of the US\$700 million Liberia Economic and Recovery Plan.
- **The UNICEF representative** supported the views of the **DSRSG/UN RC in Liberia** in terms of priority areas for the MPTF Recovery Window.

The Special Envoy summarized the feedback of the participants. There was agreement that the Trust Fund should prioritize Phase Three of the response as well as early recovery. The Chair proposed to pay particular attention to survivors, the basic services that they need, non-Ebola medical services for the population, support to orphans and support to livelihoods of affected communities. The Trust Fund will focus on a small number of proposals given the amount of funding available.

Programmatic Framework and Governance Structure of the Recovery Window

The Chair reminded participants that since its establishment in January 2015, US\$1 million of earmarked funds have been pledged for the Recovery Window by the Russian Federation.

Thematic structure

The Chair proposed adopting the Ebola Recovery Assessment's pillars as the Recovery Window's programmatic framework:

- 1) Health, Nutrition, and Water, Sanitation and Hygiene (WASH)
- 2) Socio-economic revitalization
- 3) Basic Services and Infrastructure
- 4) Governance, Peacebuilding, Social Cohesion

The Advisory Committee agreed that the prioritization of funding requests in each country would be guided by the national priorities, in-line with the ERA pillars. In addition, the Advisory Committee agreed that survivors and survivor-based services would be prioritized, as they relate to both the Response and the Recovery.

Governance Structure

Based on the request received from the Sierra Leone to include the Ministers of Finance, the Chair proposed the following membership of the Recovery Window advisory committee:

- Special Envoy as Chair, given the Special Envoy's legal status in the Memorandum of Understanding establishing the SG's Ebola MPTF;
- Three Permanent Representatives of the affected countries or their designated representatives;
- Three representatives from the Ministries of Finance (one from each country);
- Three representatives from the development cooperation agencies of three donor countries;
- UNDP representative from NY as the Recovery Lead (as a resource person similar to the UNMEER's SRSG participation);
- Three UN Resident Coordinators in the affected countries (as resource people); and
- Additional contributors may be invited to participate in specific allocation rounds.

The Chair suggested that if the Recovery Window receives considerable funding, it might be useful to establish Steering Committees in each country. Such country level structures have been adopted by other global UN Trust Funds, including the Peacebuilding Fund. The composition of the country-level committees could vary depending on the context.

Allocation of funding

The Chair proposed allocating around 40 to 50 percent of the un-earmarked contributions to the Trust Fund, to the Recovery Window.

The Chair invited the participants to share comments on the governance structure and thematic priorities of the Recovery Window.

- **The Permanent Representative of Sierra Leone** acknowledged the importance of inclusiveness, yet expressed some concerns about efficiency if the size of the Recovery Window's Advisory Committee was significantly expanded. He stressed the importance of ensuring that a balance between technical and political expertise in the profile of the committee members.
- **The Permanent Representative of Liberia** agreed with finding the right balance between inclusiveness and efficiency. She expressed her full support for the proposal of including the national governments in the Recovery Window's Advisory Committee, identifying the Ministers of Finance as the most appropriate representatives given their responsibility for national planning and budgeting of the Recovery phase.
- **The Representative from the Mission of Guinea** stressed the importance of supporting the response until the last contact is traced and the last case of EVD is eradicated. He also highlighted the importance of having access to the vaccines that have received positive test results.
- **The Representative of United Kingdom** supported the idea of maintaining balance between inclusiveness and effectiveness in the governance structure.
- **The Representative of Germany** confirmed that the proposal on the Recovery Window's Advisory Committee composition would be discussed further with their capital and feedback provided. She echoed the suggestion for finding the right balance between inclusiveness and efficiency alongside coordination. She welcomed the participation of the UN Resident Coordinators, as it would ensure a link to the work being done on the ground.
- **The Representative of Sweden** inquired about the dimensions and the lifespan of the Trust Fund Recovery Window. She proposed considering the participation of the donor's development agencies (in addition to the current humanitarian side) and asked for clarification on WHO's role.
- **The Representative of UNDP** requested that specific attention be paid to the thematic area of socio-economic revitalization and social cohesion in prioritizing the activities of the Recovery Window. UNDP inquired about the mechanism of vetting the proposals of the Recovery Window, specifically what role the UN in the field could play.

The Advisory Committee agreed that the MPTF Recovery Window Advisory Committee should blend inclusiveness and efficiency. Based on this feedback, the proposed configuration of the Advisory Committee will be circulated to Advisory Committee members for endorsement at the next meeting.

Proposals for Consideration

#41 "Ebola Response Interagency Stewardship" is a WHO proposal for post-UNMEER collaboration which has already been submitted to the US, UK, France and EU. If it cannot be fully funded bilaterally a proportion of the programme may be presented to the MPTF.

Feedback

- **The Permanent Representative of Liberia** underlined the importance of proper consultation with the national Government on the mechanisms for coordination.
- **The Permanent Representative of Sierra Leone** recognized the importance of a smooth transition, and requested (1) additional details about the job functions and (2) better articulation of the regional role of WHO.
- **The representative of Germany** underlined the importance of keeping the leadership on the ground to ensure smooth transition. She proposed to reach out to other donors bilaterally first in order not to use the Trust Fund's resources.

- **The representative of the United Kingdom** recognized the importance of maintaining coordination functions and asked for more details on the functions of staff.
- **The representative of Sweden** requested clarification on the high costs for transportation and maintenance.
- **The DSRSG/RC for Liberia** stated that UNMEER closed in Liberia on May 31st, 2015 and suggested it would be useful to clarify the regional function played by the Regional Collaboration Interagency Ebola Lead (RCIEL) based out of Liberia.
- **WHO Ebola Lead Dr Aylward** indicated that the national Governments (including the OPMS, Ebola leads and Ministries) had welcomed the extension of the coordination function played by UNMEER. WHO confirmed that the programme budget would cover the same functions (senior leadership and operating costs including travel) as previously existed under UNMEER, but at a smaller scale.

Proposal **#41** would be submitted to the Advisory Committee in early September, **only if** bilateral funding could not be secured: the amount of funding requested would be a portion of the total proposal (\$1,680,019). The proposal was supported in principle, although further clarifications were requested. If needed, the approval of the proposal will be requested via electronic circulation.

#42 “Prevent EVD spread during the electoral process in Guinea” is a UNDP proposal to equip 7,500 polling places to prevent Ebola spread during the elections.

Feedback

- **The Permanent Representative of Liberia** stressed the importance of taking all precautions to ensure the safe elections process.
- **The Permanent Representative of Sierra Leone** highlighted the need to consult with the Government of Guinea on the specific, context-specific needs. The PR requested clarification whether the costs of sanitary control equipment (in the budget of the proposal) would include the cost of delivery, installation, and training.
- **The Representative from the Mission of Guinea** expressed his support for this proposal, which would contribute to smooth Ebola-free elections in Guinea. He highlighted the importance of adopting suitable prevention and sanitary measures to ensure that the population is protected and reassured during the election process.
- **The representative of Germany** expressed support for this proposal and asked for additional details on the “supplies” budget line in order to ensure that the relevant costs are specified and included.
- **The representative of the United Kingdom** expressed support for this proposal.
- **The representative of Sweden** expressed no objection but asked for more details on the budget (“supplies”) to ensure that the delivery of sanitation control equipment & implementation is included in the costs.

The Advisory committee approved this proposal for \$991,467 in principle, subject to further clarifications. The approval will be requested after electronic circulation of the revised proposal.

The Chair thanked the Members and Resource Persons for their participation and adjourned the meeting.