

**Ebola - “From Emergency to Recovery”,
Brussels Conference, 3 March 2015.**

Statement of the Co-Chairs

1. High-level representatives of the countries affected by the Ebola epidemic in West Africa and their international partners in the fight against Ebola held a Conference in Brussels on 3 March 2015, to consider the additional actions required to end the epidemic and to agree a set of principles to guide the recovery of the region.

The Conference was opened by Her Majesty Queen Mathilde of Belgium, and co-chaired by the Presidents of Guinea, Sierra Leone and Liberia, the Prime Minister of Togo (representing the Economic Community of West Africa’s Ebola Coordinator) and senior representatives from the United Nations, the African Union and the European Union. They were joined by representatives of 150 delegations, including 69 countries contributing to the fight against Ebola, together with international and non-governmental organizations, the private sector and the scientific community.

The response so far.

2. The Co-chairs took note of the unprecedented scale of the epidemic and in particular the human suffering it has inflicted. They expressed admiration for the resilience and bravery of the people of Sierra Leone, Liberia and Guinea, as well as others touched by the epidemic in the region, and underlined the need to provide adequate care for survivors and orphans and to address the fact that women have been particularly affected by this crisis. The Co-chairs paid tribute to all the responders, both from the region and from many countries around the world, who are risking their lives every day in the front line of the Ebola response. They agreed specifically to ensure that no one should suffer from stigma or discrimination as a result of either being affected by Ebola, or involved in the response.
3. The Co-chairs recognised the valiant effort of the governments of the affected countries to lead the fight to contain the epidemic and recognised the considerable progress that had been achieved so far. They also commended the unprecedented international response effort and in particular that of the three lead donor nations, France, United Kingdom and the United States, as well as that of organisations such as the United Nations system, the Red Cross movement, Medecins Sans Frontieres and other international Non-Government Organisations (NGOs).
4. The Co-chairs welcomed the US\$ 5.1 billion in emergency and recovery funding pledged to date, of which US\$2.4 billion has been disbursed and underlined the importance of disbursing the remaining funds in a timely and coordinated fashion and in particular to cover an immediate US\$ 400 million funding gap for the actions of the United Nations agencies. The overarching coordination role of the United Nations was reaffirmed, with a particular emphasis on the need to provide rapid identification and transmission of information on emerging gaps and needs. Donor participants committed to report regularly on the results and impact of their interventions.

“Getting to Zero”

5. The Co-chairs underlined the considerable scale of the task still ahead and recognized that success was not yet assured. While welcoming the fact that the incidence of the disease had

decreased, they noted that cases were still occurring in all three countries. They reconfirmed that the principal objective is to stop all transmission of the virus. To this end, the comprehensive strategy for "Getting down to and staying at zero", developed and endorsed by the countries of the Mano River Union with the support of the World Health Organization (WHO) and other partners, has to be implemented in full. This will require continued political engagement, a sustained level of funding and the constant mobilization of technical staff and specialised assets. They stressed that "getting to zero and sustaining zero" requires coordinated implementation of a flexible, integrated and community-owned response that adjusts to changing needs within local communities. At the centre of the response is effective disease surveillance throughout the affected countries, with social mobilisation, identification of people with Ebola, tracing of their contacts and comprehensive support (including essential services) for affected families and communities.

6. The Co-chairs welcomed the recent reaffirmation by the Mano River Union of its commitment to cross-border cooperation given the crucial importance of this to a successful response to Ebola. They concurred that the epidemic cannot be considered to have ended in any one of the affected countries until it is over in all three countries. They also considered it vital, to pursue further co-operation through existing international mechanisms, including the ECOWAS, the African Union and the United Nations system, including the World Health Organization.

Preparedness, Prevention and The development of new tools

7. The Co-chairs underlined the importance of preparedness by countries in the wider West Africa region but also in Africa as a whole. They endorsed WHO's operational plan to support country readiness, and commended the African Union (AU) for the establishment of the African Centre for Disease Control and Prevention (African-CDC) that will focus on disease detection, surveillance and response, as well as capacity building for AU Member States so as to enable them to effectively implement the International Health Regulations and called on donors to support their implementation. They also agreed to sustain the current containment measures in the affected countries, including effective exit screening.
8. The Co-chairs commended the unprecedented effort to develop diagnostic tests, as well as vaccines and treatments against Ebola and in particular the exemplary level of cooperation between academic and research institutions, public and private entities and the considerable public and private funds already committed. They welcomed the promising work being carried out in the field, but at the same time underlined the need for continued investment in the research and development of medical interventions against Ebola. They acknowledged that a coordinated research effort both in the inter-epidemic periods and in emergency situations is a crucial element of preparedness, which will need to be strengthened.
9. The Conference acknowledged the weaknesses of the global health security system in recognising and responding sufficiently swiftly to the Ebola outbreak. The Co-chairs expressed support for on-going efforts by WHO to improve its alert systems and its ability to respond to future health-related emergencies, as set out in the resolution of the WHO Executive Board Special Session on Ebola of January 2015. They stressed the need for adequately trained and managed medical and public health personnel to be available at short notice, at national, regional and global levels, for deployment in future international public health emergencies. It was also noted the global arrangements to strengthen capacity in the future as advocated by the AU, WHO and WB. The Co-chairs welcomed the commitments of the WHO and others to carry out reviews of their response to Ebola and the need to draw on the lessons learned from this crisis.

Boosting the recovery and accelerating development

10. The governments of Guinea, Liberia and Sierra Leone presented their emerging national recovery plans. The Co-chairs noted the priority areas for recovery arising from these plans including the safe resumption of basic services such as health, education, water, sanitation, social and child protection with the necessity to address in the medium term related systemic and structural weaknesses in both health and non-health areas, including agriculture, food and nutrition security; in particular that of children, education and peace and state building. They recognized the contribution of development partners to the formulation of these plans, and in particular the contribution of the Ebola Recovery Assessment (ERA) initiated by the Secretary General of the United Nations and actively supported by the World Bank, the African Development Bank and the European Union. The Co-chairs recognised the affected governments' leadership role in driving development through national recovery plans, supported by international partners and in concert with non-state actors.
11. The Co-chairs committed themselves to contribute to improved governance, transparency and accountability of national and local systems, to provide for more inclusive and effective results in service delivery for its citizen. Lessons learned from the crisis will be incorporated in the recovery and development plans. They reaffirmed their commitment to the principles of the New Deal and the importance of Peace and State building goals, all of which are vital for sustainable recovery and building resilience to future shocks of this nature.

The Co-chairs, international and regional partners in concert with non-state actors, will dedicate their efforts and resources to the immediate priorities of:

- a. bringing the Ebola epidemic to an end, and sustain such containment, an integral part of it will be strengthening the countries' health systems and ensuring that in the future this encompasses fully disease surveillance and other disaster early warning systems, the implementation of the International Health Regulation (IHR) at country level and the strengthening of national all hazard disaster risk management policies, to ensure stronger capacities for early detection, investigation, confirmation, contact tracing and surveillance;
- b. ensuring that early recovery is guided by the core principles of rapidly ensuring safe, sustainable, and resilient recovery outcomes; national ownership and leadership of recovery interventions; and mutual accountability of recovery investments as well as equitable service delivery with a focus on vulnerable population such as women, children and people with disabilities;
- c. rebuilding enhanced, resilient and inclusive health and social services at national and local level, providing equitable access to safe essential social services with appropriately trained health workforce, teachers and social workers, through decentralised/deconcentrated governance and basic service delivery systems; including vaccination;
- d. maintaining positive social behaviours that emerged during the Ebola outbreak, such as hand-washing, retaining and strengthening local resources and mechanisms of social communication and community engagement;
- e. investing in infrastructure linked to rehabilitation of social services, so as to quickly reopen all schools and health centres with the necessary levels of access, safety, hygiene, sanitation and infection, prevention and control;
- f. improving public administration and finance management in the social and health sectors, in particular financial compliance and efficient and accountable execution of expenditure in response to actual needs on the ground.

12. The Co-chairs will seek to maintain in a short to medium term a stable macro-economic framework and strive for further fiscal reform with a view to enhanced mobilization of domestic resources for priority policies. Equally, the Co-chairs and their international and regional partners will work together to find innovative ways to create the fiscal space necessary for the affected countries to lead the recovery efforts.
13. The Co-chairs agreed to work towards an early and safe reopening of local markets and the rebuilding of a regional market through cross-border and traditional trade movements; support the upcoming planting season and wider economic activity; encourage SME development and local initiatives aiming at the employment of youth and women; and enhance youth employability through further education and vocational training. They will also identify viable commercial opportunities to attract Foreign Direct Investment and work together to catalyse regional trade, underpinned by measures to improve and enhance private sector development.
14. The Co-chairs agreed to ensure coherence of the above commitments with national recovery plans, national development strategies and national budgets.

Designing a roadmap

15. The Co-chairs agreed that while early recovery activities proceed immediately, the ERA partners will make themselves available to continue support to the development of the national and regional strategies as may be requested by the countries and the regional bodies. The Co-chairs emphasised the importance of maintaining international engagement with the recovery and development processes in the Ebola-affected countries. To this end, they welcomed the upcoming high-level meetings that will take place during the World Bank Group-IMF Spring Meetings (16th-18th April) as well as the offer by the Secretary-General of the United Nations and other international and regional organisations to convene high-level meetings in the near future to take forward the principles, priorities and actions agreed at today's Conference 'Ebola: from emergency to recovery'.