



**Country: Liberia**  
**Initiation Plan**

**Project Title: Support to Liberia COVID-19 Preparedness Response Plan**

**Expected UNDAF/CP Outcome(s):** By 2024, people in Liberia, especially the vulnerable and disadvantaged, benefit from strengthened institutions that are more effective, accountable, transparent, inclusive, and gender responsive in the delivery of essential services at the national and subnational levels.

**Expected CPD Output(s) 1.2: Capacities of government at subnational levels strengthened to promote inclusive decentralized service delivery including to marginalized and vulnerable groups.**

**Initiation Plan Start/End Dates:** 1 April 2020-31 August 2021

**Implementing Partner:** National Public Health Institute (NPHIL) Ministry of Information (MOI), Ministry of Justice (MOJ), Ministry of Internal Affairs (MIA), Ministry of Youth & Sports (MYS), Ministry of Gender, Children & Social Protection (MOGSCP) and the Environmental Protection Agency (EPA).

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### Brief Description


Liberia recorded its first COVID-19 case on 16 March 2020. One week later, the Ministry of Health declared a public health emergency and requested the support of the United Nations in halting the transmission of the virus. As part of the national response effort, a Public Health Emergency Management System/Public Health Emergency Operation Centre has been activated as level one at both national and county levels. The National Public Health Institute of Liberia (NPHIL) is leading and coordinating this effort. Incident Management System meetings are held daily in order to take stock of the progress of the National Preparedness and Response Plan. Additionally, a COVID-19 National Response Coordination Committee has been set up. The Liberian government responses in managing COVID-19 include awareness, identification, surveillance (e.g. contact tracing), prevention (including social and physical distancing measures), and containment (including restricting internal movement and international travel). The pandemic is regressing human development gains, including aggravating poverty, and widening inequalities. Prior to COVID-19, Liberia was grappling with post-crises (civil war and Ebola Virus Disease) recovery characterized by: (i) nascent/ fragile institutions and systems—particularly in governance and the delivery of basic services, including in health; (ii) structural socio-economic challenges; (iii) weak human capacity; and (iv) a weak social contract. The global pandemic is likely to exacerbate these challenges and regress progress in human development at a time when preparations for the country’s referendum and senatorial elections are underway. The porous border between Liberia Guinea, Sierra Leone and Ivory Coast are a cause for concern for authorities, especially given the potential that unchecked migration and transport between countries could intensify the spread of the virus. **UNDP’s will support Liberia in (i) urgently and effectively responding to COVID-19; (ii) safeguarding its development gains; and (iii) building resilience of its citizens and communities, especially cross- border communities and livelihood support to vulnerable groups through cash transfer and other modalities.** All interventions will be underpinned by the principle of Leaving No-one Behind and will apply a Human Rights-Based Approach.

Consequently, controlling the pandemic requires a series of intrinsically complex interventions and multi-sectoral strategies that need to be synchronized and executed concurrently to detect and stop transmission and control the pandemic while ensuring respect for Human Rights and maintaining social cohesion through (a) Contact tracing; (b) contact monitoring for symptoms; (c) rapid results from suspected cases; (d) isolation and treatment of new cases; and (e) enhancing screening at the port of entries, cross-border cooperation (f) enhancing community-police relations; and (g) addressing SGBV. Working through the Pillars outlined in the National Preparedness and Response Plan and aligned with the UNDP corporate Offer on COVID-19, UNDP’s support, will entail short, medium, and long-term interventions. **The interventions will focus on three areas: (i) Strengthening Health systems; (ii) Prevention and responding to needs of Communities; and (iii) Supporting Recovery and sustainable development.**

To address these challenges, UNDP will work with communities, national and other UN agencies, notably IOM and UNCHR to respond to Liberia’s emerging needs as it works its way through the global pandemic.

Programme Period: 2020-2024  
 Atlas Project Number: 00126829  
 Atlas Output ID: 00120766/00120767  
 Gender Marker: 2

Total resources required	<u>USD 3,116,000</u>
Total allocated resources:	<u>USD1,651,503.07</u>
• Regular	<u>USD 1,540.500</u>
• Other:	
o Canada	<u>USD 111,003.07</u>
o Government	<u>In-kind</u>
Unfunded budget:	<u>USD 1,464,496.93</u>
In-kind Contributions	<u>                                </u>

Agreed by UNDP:  06-oct-2020

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## I. PURPOSE AND EXPECTED OUTPUT

The Corona Virus (COVID-19) declared by the World Health Organization (WHO) as a global pandemic has infected over 1,000,000 people worldwide and over 1000 persons in Africa. The burden of the pandemic is affecting people the world over and government responses in managing COVID-19 have ranged from identification, surveillance (e.g. contact tracing), prevention (including social distancing measures), and containment (including restricting internal movement and international travel). Liberia recorded its first COVID-19 case on 16 March 2020. A Public Health Emergency Management System/Public Health Emergency Operation Center has been activated at level 1 at national and county level and is led by the National Public Health Institute of Liberia. Incident Management System meetings are held daily in order to take stock of the emergency preparedness plan. Additionally, a Special Presidential Advisory Committee on COVID-19 has been established. To control the rapid spread of COVID-19, the WHO has called for increased efforts for isolation, testing, tracing, and treatment. The global pandemic has resulted in disruptions in human activities, with dire socio-economic consequences for many people, particularly for the most vulnerable. The pandemic is regressing human development gains, including aggravating poverty, and widening inequalities. Prior to COVID-19, Liberia was grappling with post-crises (civil war and Ebola Virus Disease) recovery characterized by (i) nascent/ fragile institutions and systems—particularly in governance and the delivery of basic services, including in health; (ii) structural socio-economic challenges; (iii) weak human capacity; and (iv) a weak social contract. This situation is not improving any sooner as Liberia lacks the basic health infrastructure, technical capacity and the required human resources to fight the pandemic. This is going to take the collective support of the UN and bilateral partners as well in collaboration with the Government and community leaders to face the challenge.

The global pandemic, which will exacerbate these challenges, has affected Liberia at a time when preparations for the country's referendum and senatorial elections are underway. Liberia ranks 176 out of 189 countries and territories in the Human Development Index with (HDI and Gini co-efficient scores of 0.465 and 35.3 respectively. There is also significant gender inequality in socio-economic as well as political participation—Liberia's ranking in the Gender Inequality Index is 155 out of 162 countries. Liberia confirmed its index case of COVID-19 on 16 March 2020 and national health authorities are currently tracing more than 100 contacts. Consequently, a National Response Plan has been instituted to achieve the following: (1) limit human-to-human transmission; (2) early identification, isolation, and care for patients; (3) address critical clinical unknowns; (4) communication of critical risks and information to communities; (5) minimize socio-economic impact, including through multi-sectoral partnerships; and (6) facilitate post-recovery operations. In addition to the activities contained in the Plan, the detection of the Index case prompted the President of Liberia, George Manneh Weah to announce further stringent prevention measures including limiting internal travel, public gatherings, physical distancing, and hand hygiene protocols. This project is therefore aligned to the National Response Plan and intended to support the Government of Liberia addressing these challenges. Responding to the pandemic in Liberia requires a series of intrinsically complex interventions and multi-sectoral strategies that need to be synchronized and executed concurrently to stop transmission and control the pandemic, while protecting human rights, maintaining social cohesion, and mitigating the impact on livelihoods. This project will focus its interventions in three areas which support and are aligned with the National Preparedness and Response Plan (i.e. Preparedness, Response and Recovery) and will include community engagement; identification of contacts; contact monitoring for symptoms; rapid results from suspected cases; isolation and treatment of new cases; and safe and dignified burials. Real-time data in emergency situations is also indispensable for guiding the strategy in coordinating interventions and troubleshooting problems as they may arise.

Working through the Pillars outlined in the National Preparedness and Response Plan and aligned with the UNDP corporate Offer on COVID-19, UNDP's support, will entail short, medium, and long-term interventions. The interventions will focus on three areas: (i) Strengthening Health systems; (ii) Prevention and responding to needs of Communities; and (iii) Supporting Recovery and sustainable development.

- (i) **Health Systems Strengthening** interventions will support the effective and efficient functioning of health systems in Liberia to achieve Objectives 1 to 3 outlined in the National Preparedness and Response Plan. In responding to the immediate priorities in the health system, UNDP interventions will support coordination of stakeholders involved in the response under the leadership of WHO and MOH. Contact-tracing as well as emergency deployment of crisis response surge capacity and logistical capacity of health

systems, including fast-track procurement and payment of health workers will also be supported through UNDP's interventions. In the medium to long term, UNDP will work with the Global Fund to continue to support Health Systems in key areas including Supply Chain Management, and Financial Management.

- (ii) UNDP will provide assistance in *prevention and responding to communities' needs* in support of achieving Objectives 4 and 5 of the National Preparedness and Response Plan. This will strengthen the social contract. The Project will also support the promotion of communication and advocacy to reduce stigma and promote social cohesion, strengthen community mobilization and surveillance as well as facilitate cross-border surveillance and cooperation. The promotion of livelihood for the most vulnerable and affected by the slowdown of the economy due to the pandemic will also be one of the Project's intervening areas.
- (iii) The COVID-19 Project's support in *post-pandemic recovery and transition to long-term development* will assist Liberia to achieve Objective 6 of the National Preparedness and Response Plan. Working through the Early Recovery Cluster and in collaboration with other UNDP programmes and projects, the Project will promote interventions to create and scale-up opportunities for livelihoods in communities; foster financial inclusion, particularly for women, youth, and the rural poor; strengthen cross-border cooperation; policy analyses and create the space for stronger private sector engagement in Liberia's recovery and development, including through improving accountability and the Ease of doing Business; strengthen the social contract, including through improving the Rule of Law, and access to Justice; reinforce the government's ability to deliver basic services in counties; and mobilize resources for Liberia's recovery and longer-term development.

**Theory of Change:** IF health systems are strengthened through national and bilateral support; IF communities are mobilized through awareness and outreach and provided livelihood support to mitigate loss of income and employment and enhance recovery; IF cross-border initiatives are further strengthened and enhanced, THEN communities will be resilient against the COVID-19 pandemic as a result of more testing, isolation and treatment occurring, better contact tracing systems; THEN people will begin to regenerate their livelihoods and stimulate local economies; THEN cross-border and community transmission will be avoided resulting in zero percent COVID-19 in the country and the Mano River region.

## **PROJECT FRAMEWORK: COMPONENTS, OUTPUTS AND ACTIVITIES**

### **Output 1: Health Systems strengthened for COVID-19 Response**

#### **Activities:**

- Procurement and deployment of Protective/ Prevention equipment at Points of Entry (POEs)/health facilities in Montserrado County.
- Support to the operations of the Public Health Emergency Operation Center for coordination and contact-tracing in Liberia, in coordination with MOH and WHO.
- Develop a comprehensive contingency plan for responding to COVID-19 in the detention facilities, to protect health and Human Rights of detainees, including measures to reduce overcrowding and prevent and respond to the spread of the virus. This activity is linked to the broader support the corrections services and the joint UNDP-OHCHR RoL programme in Liberia).
- Support community health volunteers for an active surveillance including health screening, referral and data collection at LIS 45 recognized PoE.
- Support to the development and dissemination of POE specific Standard Operating Procedure (SOPs) for detection, notification, isolation, management and referral including development of training manuals.
- Expand border surveillance and cooperation in the Mano River Union region to address cross-border epidemic surveillance and security, as well as cross-border trade.
- Mobilize youth in communities in identifying new household members from different localities & support contact tracing.
- Strengthen coordination among relevant authorities (Security, health, local and national leadership) in the Mano River Union region.
- Develop tools for COVID-19 Medical waste management in healthcare facilities, POCs and IUs

intervention entities to inform planning, decision making and service regulation.

- Mapping of medical waste facilities (autoclaves) and determining of their status in JFK, ELWA, JFD Phebe, Tapitta, Redemption, JJ Dossen.
- Rehabilitation/construction of medical waste facilities (autoclaves) targets: JFK, ELWA, JFD Phebe, Tapitta, Redemption, JJ Dossen.
- Fumigate, collect and dispose of various waste in POCs, IUs and Healthcare facilities targeted.

## **Output 2: Community awareness and sensitization supported to enhance prevention and response**

### **Activities:**

- Support to police and community mobilization to strengthen contact-tracing and ensuring community safety, environmental health and enforce the Rule of Law within a democratic state, leveraging on the community policing network currently existing across the country.
- Support the Ministry of Health, and Ministry of Information, Cultural Affairs & Tourism to develop and roll-out a communication strategy, including social media / radio (national, community etc.) campaigns to disseminate information and raise awareness on the coronavirus and promote the prevention of contagion, with a focus on vulnerable groups, including the elderly, slum-dwellers and people living in high-density population areas, people living with HIV/AIDS, and others and mobilize local Community-based Organizations (CBOs) to intensify awareness and sensitization.
- Engage youth umbrella organizations (Federation of Liberian Youth, Yoner, etc.), chiefs and elders, religious organizations in outreach activities, community engagement, social mobilization
- Strengthened cross-border coordination and enhanced national surveillance, information sharing and reporting with data management software.
- Assist in providing mobile migrant populations access to timely and correct information.
- Provision of technical guidance to ensure risk communication messages are culturally and linguistically tailored.
- Train immigration and border health staff on SOPs to manage ill travelers, including asylum seekers, and on infection prevention and control.
- Train boarding parties including port health staff on COVID-19 SOPs to manage ill travelers and on infection prevention and control.
- Assist in provision of needed PPE and supplies for screening including thermometers.
- Assist at border areas and border crossings to support efforts for health screening, provision of health information for travelers and improving hygiene infrastructure and equipment at POE sites.
- Train government counterparts and other key partners on community evidence-based surveillance by linking mobility information to surveillance data.
- Respond to SGBV and increased domestic violence through the provision of psychosocial support, referral services and legal aid.

## **Output 3: Providing support an enhanced socio-economic recovery and sustainable development**

- Provide capacity support for Policy development and reform on post- COVID-19.
- Provide targeted support for alternative Livelihoods for identified vulnerable, youth, and women.
- Implement measures to facilitate stronger private sector engagement.
- Support needs assessment, procurement, distribution of basic survival items to vulnerable citizens and groups, including disadvantaged youth, People Living with Disability, and the elderly.
- Support psycho-social and economic support to help vulnerable groups cope with post-pandemic recovery.
- Provide access to SMEs services and empowerment opportunities for women and girls.
- Provide support on gender analysis on the impact of COVID-19 on women.
- Provide emergency livelihood assistance to vulnerable groups including, PWDs, informal workers, mostly women and youth by enabling them to fulfil the basic needs of their families.
- Provide support to socio-economic recovery and plan.

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## II. MANAGEMENT ARRANGEMENTS

The project will be implemented through a Direct Implementation Modality (DIM) with the Ministry of Health (MOH) serving as Implementing Partner. The UNDP Liberia Country Office will provide Project Management and Quality Assurance for the designated Implementing and Responsible Parties, which will include National Public Health Institute (NPHIL), Ministry of Information (MOI), Ministry of Justice (MOJ), Ministry of Internal Affairs (MIA), Ministry of Youth & Sports (MYS), Ministry of Gender, Children & Social Protection (MOGSCP) and the Environmental Protection Agency (EPA). UNDP Liberia will provide overall oversight and coordination.

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**Project Management Team:** The project will be managed by Project Manager at UNDP Country Office. The Project Manager will be supported by a team based at UNDP to ensure the effective implementation of the project. Operational support will be provided by the UNDP CO through a Direct Project Costing (DPC) modality. Operational support will include finance, procurement, logistics, communications and administration services. The overall management of the Project will be guided by Team Lead for Inclusive Governance, with strategic direction provided by CO Senior Management.

**Project Board:** The Project Board is established as a national body responsible for overall leadership and policy guidance. The board will review and approve implementation plan before the project commences. It will comprise of Ministry of Finance and Planning, Ministry of Commerce, Agriculture, Youth & Sports, Ministry of Health, National Public Health Institute of Liberia Representatives CSO and other technical ministries implementing other interventions.

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### Project Assurance (CO)

- Adherence to the business case.
- Monitor the compliance with user needs and expectations.
- Quality Assurance carried out by spot-check of deliverables and outputs.
- Review of Deliverables via Quality Reviews.

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### Project Management Unit (PMU) – UNDP

- Day-to-day management of the Project.
- Identify and obtain any support and advice required for the management, planning, and control of the Project.
- Reporting progress through regular updates (e.g. meeting, email briefing, etc.).
- Responsible for project monitoring and reporting.
- Delivery of the projects outputs as outlined in the project document.

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### Roles and Inputs of Partners

**Government of Liberia:** The Ministry of Finance and Planning will be the Executing Agency and will have the responsibility of chairing the Project Board, oversight over Annual Workplans and Progress Reports, and ensuring efficient utilization of resources. The Ministry of Commerce will be the lead implementing partner responsible for actual delivery of project outcomes and outputs. Other responsible parties will include Ministry of Gender, Children and Social Protection, the Commerce, Agriculture, Youth & Sports which maybe implementing specific components. take the lead in implementation of the proposed activities. The project office at UNDP CO will liaise with county offices to monitor and support implementation. UNDP will lead the coordination other UN agencies involved in the PIP.

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### III. MONITORING PLAN

Monitoring Activity	Purpose	Frequency	Expected Action	Partners (if joint)	Cost (if any)
<b>Track results progress</b>	Progress data against the results indicators in the RRF will be collected and analyzed to assess the progress of the project in achieving the agreed outputs.	Quarterly, or in the frequency required for each indicator.	Slower than expected progress will be addressed by project management.		
<b>Monitor and Manage Risk</b>	Identify specific risks that may threaten achievement of intended results. Identify and monitor risk management actions using a risk log. This includes monitoring measures and plans that may have been required as per UNDP's Social and Environmental Standards. Audits will be conducted in accordance with UNDP's audit policy to manage financial risk.	Quarterly	Risks are identified by project management and actions are taken to manage risk. The risk log is actively maintained to keep track of identified risks and actions taken.		
<b>Learn</b>	Knowledge, good practices and lessons will be captured regularly, as well as actively sourced from other projects and partners and integrated back into the project.	At least annually	Relevant lessons are captured by the project team and used to inform management decisions.		
<b>Annual Project Quality Assurance</b>	The quality of the project will be assessed against UNDP's quality standards to identify project strengths and weaknesses and to inform management decision making to improve the project.	Annually	Areas of strength and weakness will be reviewed by project management and used to inform decisions to improve project performance.		
<b>Review and Make Course Corrections</b>	Internal review of data and evidence from all monitoring actions to inform decision making.	At least annually	Performance data, risks, lessons and quality will be discussed by the project board and used to make course corrections.		
<b>Project Report</b>	A progress report will be presented to the Project Board and key	Annually, and at the end			

	stakeholders, consisting of progress data showing the results achieved against pre-defined annual targets at the output level, the annual project quality rating summary, an updated risk long with mitigation measures, and any evaluation or review reports prepared over the period.	of the project (final report)			
<b>Project Review (Project Board)</b>	The project's governance mechanism (i.e., Project Board) will hold regular project reviews to assess the performance of the project and review the Multi-Year Work Plan to ensure realistic budgeting over the life of the project. In the project's final year, the Project Board shall hold an end-of project review to capture lessons learned and discuss opportunities for scaling up and to socialize project results and lessons learned with relevant audiences.	Specify frequency (i.e., at least annually)	Any quality concerns or slower than expected progress should be discussed by the project board and management actions agreed to address the issues identified.		

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#### IV. WORK PLAN

Period<sup>1</sup>: 1<sup>st</sup> April 2020- 31<sup>st</sup> August 2021

EXPECTED OUTPUTS and indicators including annual targets	PLANNED ACTIVITIES	TIMEFRAME				RESPONSIBLE PARTY	PLANNED BUDGET		
		Q1	Q2	Q3	Q4		Source of Funds	Budget Description	Amount (US\$)
<p><b>Output 1:</b> Health system strengthened for COVID-19 response</p> <p><b>Indicators:</b></p> <ul style="list-style-type: none"> <li># of PPEs (gloves, face masks etc.) procured and deployed to facilities, disaggregated by type</li> <li># of coordination meetings and tracing contact supported</li> <li># of autoclaves repaired</li> </ul> <p><b>Baseline: 0</b></p> <p><b>Targets:</b></p> <ul style="list-style-type: none"> <li>3000 pieces of PPEs</li> <li>500 contacts traced</li> <li>30 coordination meetings</li> <li>4 POCs with medical waste management procedure in place</li> </ul>	<p><b>Activity 1.1.1:</b> Procurement and deployment of PPEs and other equipment related at Points of Entry (POEs);/medical facilities (including Infra-red thermometers-800pcs, Rubber gloves- 1000 boxes, Veronica Buckets-500 units, Bleach-1000 bottles</p>		x	x	x	MOH	<b>RRF RBA CORE</b>	Contractual services company 72300	350,000
	<p><b>Activity 1.1.2:</b> -Develop a comprehensive contingency plan for responding to COVID-19 in the detention facilities, to protect health and Human Rights of detainees, including measures to reduce overcrowding and prevent and respond to the spread of the virus.</p>		x	x	x	MOJ UNDP OHCHR	<b>UNDP CO</b>	Contractual services Individual 71400	20,000
	<p><b>Activity 1.1.3:</b> Support for coordination and contact-tracing</p>		x	x	x	MOH WHO NPHIL IOM	<b>RRF</b>	Contractual services Individual 71400	100,000

<sup>1</sup> Maximum 18 months

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<ul style="list-style-type: none"> <li>7 Autoclaves repaired and function</li> <li>3 trainings conducted on the use of autoclaves.</li> </ul>	<b>Activity: 1.1.4:</b> Enhance cross- border surveillance and cooperation		x	x	x	MOH WHO IOM UNHCR	<b>RRF</b>	Contractual services Individual  71300	60,000
<b>SUBTOTAL:</b>									<b>\$530,000</b>
<b>Output 2:</b> Community awareness and sensitization supported to enhance prevention and response  <b>Baseline: 0</b>  <b>Indicators:</b> <ul style="list-style-type: none"> <li># of Police and communities mobilized to strengthen contact tracing.</li> <li># of safety mechanisms in place to prevent the spread of COVID- 19.</li> </ul> <b>Targets:</b> <ul style="list-style-type: none"> <li>300 Police (at least 30% are female)</li> <li>25 Communities (25,000 residents with at least 30% females) reached</li> <li>5 safety measures in place</li> </ul> <b>Indicator:</b>	<b>Activity: 2.2.1:</b> Mobilize police and communities to strengthen contact-tracing and ensuring community safety, environmental health and the Rule of Law		x	x	x	MOJ/EPA/MOH/MOGCSP MIA	<b>TRAC 2</b>	Contractual services Individual  71400	25,000
	<b>Activity: 2.2.2:</b> Support Social media /Community radios/national radios campaigns to disseminate information on the coronavirus		x	x	x	MOH	<b>TRAC 2</b>	Contractual services Individual  71400	10,000
	<b>Activity: 2.2.2:</b> Provide support to 8 community-based youth groups in outreach activities, community engagement, social mobilization, through communication messages, on risk and prevention.		x	x	x	MOH/MYS	<b>RRF</b>	Contractual services Individual  71400	8,000

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<ul style="list-style-type: none"> <li># of Social media/community radios and national radios airing prevention messages on COVID-19.</li> </ul> <p><b>Baseline: 0</b></p> <p><b>Targets:</b></p> <ul style="list-style-type: none"> <li>10 Local radios airing messages on COVID-19</li> <li>2 national radios airing messages on COVID-19</li> </ul> <p><b>Indicator:</b></p> <ul style="list-style-type: none"> <li># of Youth engaged youth in outreach activities, community engagement, social mobilization, through communication messages, on risk and prevention.</li> </ul> <p><b>Target:</b></p> <ul style="list-style-type: none"> <li>500 youth</li> </ul>	<p><b>Activity 2.2.3</b> Engage youth in outreach activities, community engagement, social mobilization, through communication messages, on risk and prevention</p>		x	x	x	MYS	RRF RBA CORE	Contractual services companies  71300	8,000
<b>Subtotal:</b>									<b>\$51,000</b>
<p><b>Output 3:</b> Supporting Recovery and sustainable development</p> <p><b>Indicator:</b></p> <ul style="list-style-type: none"> <li># of recovery policy briefs and prepared for sustainable development</li> </ul>	<p><b>Activity 3.3.1:</b> Provide advisory support on Policy formulation on post COVID-19</p>		x	x	x	MFDP	RRF RBA	Contractual services Individual  71400	3,000
	<p><b>Activity: 3.3.2:</b> Provide support for alternative Livelihoods for the vulnerable, youth, and women</p>		x	x	x	MGSCP	RRF RBA CORE	Contractual services Individual	449,951.50

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<ul style="list-style-type: none"> <li>• # of Post COVID Policy document prepared</li> <li>• # of vulnerable persons receiving livelihood support</li> </ul> <p><b>Baseline:</b> Post- EVD recovery plan 2015</p> <p><b>Targets:</b></p> <ul style="list-style-type: none"> <li>▪ 1 Concept paper prepared.</li> <li>▪ Post COVID-19 Policy document prepared.</li> <li>▪ 1,600 informal workers with 50% female benefiting from cash transfer.</li> </ul>								71300	
	<p><b>Activity 3.3.3:</b> Provide Implement measures to facilitate stronger private sector engagement</p>		x	x	x	MOCI	RRF RBA	Contractual services Individual	25,000
	<p><b>Activity: 3.3.4</b> Support needs assessment, procurement, distribution of basic survival items to vulnerable citizens and groups, including disadvantaged youth, People Living with Disability, and the elderly.</p>		x	x	x	MGCSP	RRF RBA CORE	71400	250,000
	<p><b>Activity 3.3.5</b> Support Government to prepare and implement its Stabilization and Recovery Plan</p>		x	x	x	MFDP	RRF RBA	Contractual services Individual	80,000
	<p><b>Activity 3.3.6:</b> Support psycho-social and economic support to help vulnerable groups cope with post-pandemic recovery</p>		x	x	x	MFDP/MGCSP	RRF RBA	Contractual services companies	100,000
	<p><b>Activity: 3.3.7:</b> Provide access to SMEs services and empowerment opportunities for women and girls</p>		x	x	x	MOCI/MOA	RRF RBA	Contractual services companies	100,000

	<b>Activity 3.3.8:</b> provision of support to informal workers, with sex disaggregated data, receiving cash transfer		x	x	x	MGCSF/MOCI	<b>The Government of Canada</b>	Contractual Services Individual 71400	125,000
<b>Subtotal:</b>									<b>\$1,132,951.50</b>
<b>Grand total: Available Resources and funding Gap:</b>									<b>\$3,116,000.00</b>

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