

REPUBLIC OF GUINEA



Work – Justice - Solidarity

**POST-EBOLA SOCIO-ECONOMIC
RECOVERY STRATEGY
(2015-2017)**

June 2015

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Acronyms

BCRG	Central Bank of the Republic of Guinea
CLTS	Community Led Total Sanitation
DWS	Drinking Water Supply
ECOWAS	Economic Community of West African States
EVD	Ebola Virus Disease
FDS	Defence and Security Forces
FER	Road Maintenance Fund
FoCEB	Joint Fund for Basic Education
HIPC	Heavily Indebted Poor Countries Initiative
ICT	Information and Communications Technologies
LORF	Budget Framework Law
LPN-DDL	National Policy Letter for Decentralisation and Local Development
MFI	Microfinance Institution
OMVG	Gambia River Basin Development Organisation
OMVS	Senegal River Basin Development Organisation
PAP	Priority Action Programme
PAPP	Post-Ebola Priority Actions Plan
PCSPG	Guinean Private Sector Consultation Platform
PIP	Public Investment Programme
PNC	Prenatal Consultations
PREMA	Programme of State Reform and Modernization of the Administration
PSE	Sectoral Programme for Education
PRSP	Poverty Reduction Strategy Paper
RGA	Revenue-Generating Activities
RGGBC	General Regulation on Budget Management and Public Accounting
RSS	Security Sector Reform
SNAP	National Priority Actions Strategy
SOGEAC	Conakry Airport Management Company
SME	Small and Medium-Sized Enterprises
SOTELGUI	Guinean Telecommunications Company
TFP	Technical and Financial Partners
VAT	Value-Added Tax
WHO	World Health Organization
WASH	Water, Hygiene, and Sanitation

Executive Summary

I. SOCIO-ECONOMIC DEVELOPMENT OVER THE 2011-2013 PERIOD

Since the advent of the Third Republic in December 2010, the Government implemented a series of reforms with the aim of bringing Guinea into the group of emerging countries. In the area of political governance, these reforms have led to the set-up of a Parliament elected through free and transparent elections, and of various republican institutions (the Constitutional Court, the High Communications Authority, a republican political opposition body, etc.). In the area of economic governance, after Professor Alpha Condé was elected President, the Government renewed ties with the Bretton Woods institutions – the International Monetary Fund (IMF) and World Bank – and strengthened its relationship with the international community, notably by adopting a medium-term programme supported by the International Monetary Fund (IMF) under the Extended Credit Facility (ECF).

The effective implementation of this programme and financial discipline have allowed the country to reach the completion point of the heavily indebted poor countries (HIPC) debt relief initiative in September 2012, with, as a key element, the cancellation of two-thirds of the external debt stock, and to regain macro-economic stability. The State's base budget deficit was reduced by 11 points, from 13 percent of gross domestic product (GDP) in 2010 to 2 percent of GDP in 2011 and 2012, and 2.8 percent in 2013, due to improved resources mobilization, a sharp decline in tax evasion, and control over public spending. Inflation declined to 10.5 percent in December 2013 and 9.9 percent in May 2014, year on year, compared to 21.4 percent in December 2010. The exchange rate was stabilized against major currencies and trade reserves, which amounted to less than 15 days in 2010, and increased to over 3.6 months of imports at the end of 2013.

Real economic growth reached almost 4 percent in 2011 and 2012, compared to 1.9 percent in 2010. This rate had declined to 2.3 percent in 2013, due primarily to the electric power shortage and difficulties in the socio-political situation before the parliamentary elections of September 2013. In the agricultural sector, the Government has pursued a vigorous policy of recovery since 2011, injecting almost US\$30 million per year to support the rural communities towards strengthening food security. The initiative helped to increase real growth in the agricultural sector to approximately 5 percent per year between 2011 and 2013, lower and stabilize prices of basic goods, and improve the living conditions of rural populations, who are among the poorest of Guinea.

Bold reforms in the business environment were also undertaken. Recognizing the leading role of the private sector in achieving quality growth (sustainable, diverse and strong), the Government has made the development of this sector a priority. In this respect and in order to take full advantage of the growth potential of the country, major efforts have been made to provide investors with an investment incentive framework, providing both assets and personal protection. As a result of the introduction of these reforms, Guinea rose by 10 places in the "Doing Business" ranking of the World Bank between 2011 and 2015, which has earned our country a ranking of among the top 20 reformers.

Against this backdrop, the International Conference on Guinea's Investors and Partners was organized by the Government in Abu Dhabi in November 2013. It reflected a resurgence of hope in Guinea within the international community and among investors to see the country move towards economic and social change. Indeed, as a result of this Conference, over US\$7 billion of investment was committed to diverse and strategic sectors such as agriculture, energy, mining and infrastructure. In addition, in May 2014, the signing and ratification of the investment framework in an iron ore mining project of Simandou South, amounting to US\$20 billion, allowed to confirm that "Guinea is Back" for business and to rely on the return of investors and investments in the country.

To ensure the boost of the economy and progress towards achieving the Millennium Development Goals (MDGs), in 2013, the Government adopted the third Poverty Reduction Strategy Paper, 2013-2015. It forecast a strong and sustainable growth scenario of 7.1 percent per year on average, supported by ambitious policies on agricultural modernization, the development of the country's mining and energy potential, constant promotion of

the manufacturing industry, and shared social progress marked by a significant decline in unemployment, underemployment, poverty and inequality. This accelerated growth scenario would enable Guinea to achieve its aim of economic emergence. It is in this context of hope that the Ebola hemorrhagic fever broke out during the first quarter of 2014.

II. THE EBOLA VIRUS DISEASE AND ITS IMPACT

The occurrence of Ebola Virus Disease (EVD) constitutes an unprecedented shock to Guinea, striking its most dynamic assets and attacking the social and economic fabric. Between March 2014, the official reporting date of the epidemic, and 15 June 2015, there were 3,245 confirmed cases of contamination and 2,026 cases of death more than 600 widows and widowers and nearly 6,000 orphans. The prevalence of the disease revealed that there were more victims among women, around 53 percent of the total, and that nearly 20 percent of infections involved children. With the organized response at all levels, from the West African region to local communities and families, acting with the support of the international community, the number of new cases has been considerably reduced. But there is a need to remain vigilant and to persevere because the epidemic is still active in Conakry and the Prefectures of Lower Guinea, with pockets of reluctant communities. With the aid of the Government of Sierra Leone, the Government expanded its strengthened health emergency in Lower Guinea until reaching zero cases of Ebola.

The health impact is compounded by the fear around the EVD, which has led people to reject proper health practices: a 20 percent decline in use of health facilities for assisted births; a 25 percent decline in prenatal consultations by 25 percent; and, the closing of 94 health centres and district hospitals in December 2014. Vaccination coverage has also decreased by 30 percent. To secure children's lives and those of the general population, the Government had to delay the opening of 2014-2015 school year by four months. The country experienced a drop in school attendance (around 35 percent), especially in areas severely affected by the disease, where the number of daily meals had been reduced to 74 percent of households during the crisis.

The disease also had a violent impact in economic and financial terms. The real economic growth rate declined significantly to 1.1 percent in 2014, against a forecast of 4.5 percent, while for 2015, the projected growth is zero. The tax revenue shortfalls caused by these reductions are estimated at over 1,150 billion Guinean Franc (approximately US\$160 million) while expenses are increasing due to the demands for health care needs in the prevention and treatment of the disease. As a result, the public deficit has deepened and funding needs of the State increased, including in the form of budget support. Many jobs were lost: according to official statistics, six (6) redundancy plans were announced and 2,180 job losses were recorded in the formal sector at the end of February 2015. It is even estimated that the devastating impacts on employment are greater because the above-mentioned data actually mask the reality in the domestic labour market due to the preponderance of informal activities in the national economy.

Overall, the negative impacts of EVD have severely affected all strata and sectors of the Guinean economy. Livelihoods were undermined, food security threatened, incomes of Guinean farmers compromised, employment opportunities and means of urban and peri-urban livelihoods greatly reduced, and foreign investment seriously slowed down. All of these consequences thwart the legitimate aspirations of the people towards prosperity and the dividends of development.

In conclusion, the EVD revealed two major weaknesses in Guinea

- First, the fragility of the health systems in the country and the limitations imposed by their inability to integrate the recurrence of epidemics and the need to institutionalize the prevention and preparedness for response;
- Second, the fragility of the economy, taking into account the vulnerability of the populations and the weakness of the socioeconomic infrastructure and of the institutions.

The consequences of the impact of EVD lead Guinea to: (i) re-assess the appropriateness and effectiveness of public policies underway in the country, notably in social, economic and governance matters; (ii) propose adjustments and early recovery solutions to rectify the situation or compensate for the adverse impacts of the Ebola crisis; and (iii) strengthen the resilience of our socioeconomic systems to prevent the recurrence of situations crises.

III. POST-EBOLA RECOVERY AND SOCIO-ECONOMIC STRATEGY

The development of post-Ebola socio-economic recovery strategies was launched on the basis of technical studies performed, including, *inter alia*, through technical and financial partners on the socio-economic impact of EVD and pursued through a participatory approach that involved ministries, economic operators, workers' representatives, technical and financial partners, civil society and the National Assembly.

These assessments and expanded consultations have allowed to better identify, sector by sector, the nature of the impact linked to the epidemic (health costs, lost time from work, behavioural changes in Guinea and abroad), existing factors of resilience or vulnerability that have weakened or amplified the impact, national and international responses to date, and the impact resulting from the combination of these three impacts.

Based on the issues and challenges posed by the EVD and development goals of its Poverty Reduction Strategy Paper, 2013-2015, the Government has developed its strategy to allow Guinea to recover from the consequences of the crisis, rebuild its economic and social development, and resilience. This strategy has resulted in a Post-Ebola Priority Action Plan (PAPP) built around programmes and investment projects, and relevant support measures for recovery and resilience.

The following orientations and priorities have been set in the social domain: (i) upgrading and developing the health system (structures, human resources, drugs, etc.) to meet both immediate needs as well as challenges related to the Ebola-like pandemics; (ii) providing universal access to water, sanitation and hygiene (WASH) for schools and health facilities, improvement and strengthening of the general access to WASH in the country, particularly for vulnerable people; (iii) accelerating the spread of literacy for better resilience; (iv) strengthening the advancement of women and the gender approach; and (v) improving child protection.

Similarly, directions and priorities selected in the economic domain are: (i) improving the business environment; (ii) increasing production systems; (iii) recovering and accelerating the diversification of economic activities; (iv) renewing support for agricultural intensification; (v) recovery investment in economic infrastructure; (iv) revitalizing import and export trade circuits; (vii) supporting the processing and storage of agricultural products; and (viii) revitalizing and rationalizing advisory support, the organization of producers, and research.

Finally, at a cross-cutting level, state governance will be consolidated and reinforced through a reformed public service in terms of quality and towards an administration governed by the demands its professional agents and transparency of its decisions and actions.

This resulted in an overall scheme expressing the choices that were selected for the strategies for recovery and resilience, and which guided the definition of sector-specific intervention priorities. This scheme is not intended to replace current development documents (PRSP III Five-Year Plan) nor to succeed them; however, it will strengthen and complement them, and complete the 'Ebola zero strategy' of Guinea. It will serve as basis for the preparation of the successor planning document for the emergence and development of the country.

The total estimated cost of the PAPP over the 2015-2017 period will amount to US\$2.577 billion and is broken down as follows:

- 63 percent for health, nutrition and water, sanitation and hygiene for all;
- 4 percent for governance peace and social cohesion;
- 11 percent for education, social and child protection, and basic services;
- 22 percent for socio-economic recovery.

The new Government guidelines for the post-Ebola recovery and resilience result in a significant increase in the weight of social services in development priorities, increasing from 22 percent in the basic Public Investment Plan (PIP) to 74 percent in the PAPP.

Based on the project financing in place (USD 811.96 million) and the Government's contribution (USD 231.71 million), the remaining funding needed under the PAPP financing plan totals USD 1.534 billion for 2015-2017, including USD 385.08 million in 2016, USD 682.93 million in 2016, and USD 465.56 million in 2017. In addition, the macroeconomic framework shows a need for USD 120 million in budget support.

IV. Implementation Framework

The preferred approach in the implementation of the PAPP is based on the principle of mutual accountability. Furthermore, the Government is committed to rigorously implementing the projects listed in the PAPP and to achieve this by increasing national absorption capacity.

This more specifically involves: (i) rendering the consultation and coordination framework operational between the Government and development partners as well as its permanent secretariat, to which a technical unit will be attached, which will be responsible for monitoring and evaluation in support the work of the thematic groups and more specifically, monitor the implementation of the PAPP projects; (ii) improving the efficiency of procurement procedures, in particular, by upgrading the delegation, the simplification of procedures, reducing the associated delays and the establishment of a monitoring committee to meet deadlines; and (iii) the establishment of an education fund to finance the production of PAPP feasibility studies by private consultancies.

The partners shall undertake to promptly and effectively ensure their role in the financial implementation of programmes and projects, and provide technical and financial support to the operationalization of the framework for consultation and coordination.

COST AND FUNDING OF THE PAPP (POST-EBOLA PRIORITY ACTION PLAN) BY SECTOR

(in millions)

Costs						Funding obtained			
	2015	2016	2017	Total	Percentage of total	2015	2016	2017	Total
Health, Nutrition and Water, Sanitation, and Hygiene for All	469,19	663,55	495,09	1 627,83	63%	309,52	260,67	213,47	783,66
Health	466,64	408,97	363,50	1 239,11	48%	309,52	260,67	213,47	783,66
Hydraulics	2,54	254,58	131,58	388,71	15%	0,00	0,00	0,00	0,00
Governance, Peace Consolidation and Social Cohesion	56,35	36,91	20,29	113,56	4%	-	-	-	-
Civil service	2,72	2,72	1,69	7,14	0%	0,00	0,00	0,00	0,00
Land administration	22,27	22,15	18,56	62,98	2%	0,00	0,00	0,00	0,00
Civil protection	0,44	0,13	0,00	0,57	0%	0,00	0,00	0,00	0,00
Communications	0,41	0,04	0,04	0,49	0%	0,00	0,00	0,00	0,00
Public Finance	30,50	11,86	0,00	42,37	2%	0,00	0,00	0,00	0,00
Education, Social and Child Protection, and Basic Services	99,00	108,83	72,13	279,97	11%	8,35	8,36	7,58	24,30
Education	43,38	72,13	39,97	155,48	6%	0,00	0,00	0,00	0,00
Social action	55,62	36,71	32,16	124,49	5%	8,35	8,36	7,58	24,30
Socio-economic Revitalization	150,38	226,94	178,59	555,91	22%	4,00	-	-	4,00
Agriculture	43,23	50,06	58,28	151,56	6%	4,00	0,00	0,00	4,00
Livestock farming	3,86	2,10	6,91	12,87	0%	0,00	0,00	0,00	0,00
Fisheries	1,54	4,91	5,05	11,49	0%	0,00	0,00	0,00	0,00
Trade	15,28	11,29	6,49	33,07	1%	0,00	0,00	0,00	0,00
Industry	85,10	42,37	0,00	127,47	5%	0,00	0,00	0,00	0,00
Transportation	0,00	1,82	2,42	4,24	0%	0,00	0,00	0,00	0,00
The environment	1,37	0,85	0,48	2,70	0%	0,00	0,00	0,00	0,00
ICT	0,00	28,81	14,41	43,22	2%	0,00	0,00	0,00	0,00
Public works	0,00	84,74	84,55	169,29	7%	0,00	0,00	0,00	0,00
TOTAL COSTS	762.43	1,045.45	769.36	2,577.23	100.0	321.88	269.03	221.05	811.96
TOTAL FUNDING OBTAINED	321.88	269.03	221.05	811.96	100.0				
GOVERNMENT CONTRIBUTION FUND	55.47	93.49	82.75	231.71	100.0				
FUNDING TO BE SOUGHT	385.08	682.93	465.56	1,533.57	100.0				

1. Context of the Ebola crisis

Ebola broke out just as momentum towards an inclusive socio-economic transformation was developing in Guinea. Thanks to the 2010 political renewal, Guinea launched a new phase in its development in 2011, guided by a vision of emergence to be achieved by 2035. The strategy was to promote strong, sustainable, and inclusive growth and structural change in the economy by establishing mechanisms for good governance and redefining and strengthening the role of the State. With that perspective, a host of efforts begun in 2011 had helped to achieve significant progress. They included:

- the 2013 election of a new National Assembly, under free and transparent conditions, with the sustained support of the international community;
- stabilization of the macroeconomic framework, resumption of growth in 2012, and, having reached the HIPC completion point, the easing of the debt burden; and,
- efforts to combat food insecurity and improve basic social services, including support for agricultural campaigns, subsidies for certain foodstuffs, and the provision of free medical care during childbirth.

Other Government initiatives also focused on improving the business climate and promoting private investment and on efforts underway to strengthen State institutions by reforming the security, public administration, and justice sectors.

Building on that base, the Government organized an international conference for partners and investors held in Abu Dhabi in November 2013. It resulted in commitments to invest nearly USD 7 billion in Guinea, including USD 5 billion of private investment in the mining sector. Following on that process and after several years of negotiation, the Simandou North iron ore investment plan (blocks 3 and 4) was signed in May 2014, for an overall estimated cost of approximately USD 20 billion.

The Ebola epidemic thus occurred against a favourable backdrop and interrupted a hopeful process. The responses of the Government and its partners to combat the disease first addressed primarily health and humanitarian needs (including training medical staff, providing treatment and protection equipment, and external technical assistance). The international spread of the epidemic generated growing anxiety, leading the partners to mobilize further to strengthen the response in Guinea. Assistance from donors under the response programme thus reached approximately USD 300 million.

2. Goals and justification

The first case of Ebola was recorded in December 2013 and the epidemic was declared officially in Guinea in March 2014. It continued to spread in the sub-region, specifically in Liberia and Sierra Leone. On 8 April 2015, the total number of declared cases (suspected/probable/confirmed) in Guinea was 3,524, including 2,337 deaths. Despite the health emergency announcement issued in August 2014, accompanied by a range of measures intended to halt the epidemic's spread, sources of infection continued to multiply, reaching 27 prefectures out of the country's 33, as well as the capital city's five communes. Ebola proved to be an unprecedented shock for Guinea, striking its vital forces and attacking the country's social fabric.

In terms of the health sector, the following factors made it particularly difficult to manage the epidemic: (i) the inability of the health system to handle the disease, which was unknown in the sub-region up to that time; (ii) the populations' resistance to complying with prevention standards and to working with the teams responsible for combatting the epidemic; (iii) the persistence of certain socio-cultural practices, associated specifically with funeral rites; and, (iv) the high mobility of individuals across regions and countries.

In addition to the extensive loss of life and the emotional and social disaster for victims and their families, the epidemic affected the economy in the following ways: (i) a sharp decline in investments and economic growth (the annual growth forecast for 2014 was revised downward to 1.3%, compared to the initial 4.5% forecasted); (ii) considerable budget pressure following a decline in public revenues and a sharp increase in expenditures due to the epidemic; and, (iii) loss of jobs and declining income for various population sectors (83% of households in the most-affected areas experienced a drop in their agricultural production capacity). Other impacts included the

economic costs associated with major disruptions in the health system, a drastic decline in the use of health facilities, and the extended closure of schools throughout the country.

In that context, the most pressing priority was to stop the epidemic as quickly as possible. The Government thus set up a national response plan that included the following strategic objectives: (i) interrupt the chain of community transmission throughout the country; (ii) halt new cases of infection in Guinea, whether domestic or imported; and, (iii) strengthen the national health system (treatment, monitoring, and epidemic prevention).

Beyond efforts to combat the epidemic, the country must meet the challenge of economic recovery by implementing ambitious, but realistic, initiatives that can curb the epidemic's impacts. At stake is preserving the gains made in recent years, accelerating the recovery process, and strengthening the country's economic, social, and institutional resilience. Emphasis will be placed on strengthening the health system and providing rapid support to the communities most affected by the epidemic and its impacts.

With regard to these multiple challenges, the Government, with the support of its partners, decided to implement an overall recovery plan. The main objective is to enable the country to recover, economically and socially, from the impacts of the Ebola epidemic and strengthen its resilience in the face of possible similar crises. More generally, this means helping to preserve past gains and laying the foundation so that development can recover in the short-, medium- and long-term.

Specifically, the plan will focus on:

- **Responding to the factors of fragility** that allowed the epidemic to spread quickly, particularly in terms of developing infrastructure and water and sanitation services, building trust between public institutions and the populations, and preventing and managing the risk of conflicts, including at the scale of the Mano River Union.
- **Rebuilding livelihoods and strengthening the resilience of affected communities.** This involves: (i) supporting the recovery of the agricultural sector and its industries in the areas most affected by the epidemic and/or affected by its impacts; (ii) promoting food security and combatting malnutrition; and, (iii) implementing targeted interventions supporting the economic sectors strongly affected by the epidemic;
- **Preserving macroeconomic stability to encourage investment** and efforts to combat poverty. This will involve continuing the reform efforts begun in 2011, specifically in terms of restoring and streamlining public management. The recovery strategy will thus also require budget support for the short- and medium-term balance of large payments;
- **Building institutional and human capacity** to achieve better governance of development, including restoring the health sector, consolidating peace and stability, and strengthening the resilience of the affected communities. This will require building trust in the mechanisms and functions of the State.

The development of the strategy was launched based on multiple evaluations of the economic and social impacts conducted in recent months by ministries, the Guinean Private Sector Consultation Platform (PCSPG) and the technical and financial partners. It has continued with large-scale consultations with economic operators, worker representatives, technical and financial partners, civil society, and the National Assembly. It also draws on the epidemic response plan, prepared with support from the WHO, which includes strengthening the health system, and, last, incorporates the needs for budget assistance to maintain the macroeconomic stability achieved starting in 2011, thanks to sustained Government efforts.

In the review of the evaluations and the consultations, each sector was analysed to identify the nature of the epidemic-related shock experienced (health cost, loss of work time, behavioural changes in Guinea and abroad) and to evaluate resilience, vulnerability, national and international responses to date, and the impacts of these three effects. The measures, projects, and programmes proposed during the consultations took into account the sectors' existing development goals and the new needs created by the Ebola epidemic.

This document is organized as follows:

- sections 3 and 4 address, respectively, the social and economic impacts of the epidemic;
- section 5 highlights the recovery measures by subject area (macroeconomic outlook, economic sectors, social sectors, sub-regional integration, and governance);

- sections 6, 7, and 8 include the financial programming, transitional provisions, and the plan's implementation monitoring framework; and,
- the final section analyses the main risks associated with plan implementation.

3. Social impacts of the Ebola crisis

3.1 Review of the social indicators

The EVD outbreak occurred just as Guinea had implemented policies, in June 2012, to accelerate achievement of the Millennium Development Goals (MDG) through its 2011-2015 five-year plan.

Table 1, which presents an evaluation of the MDG in Guinea, presents the degree of achievement of certain goals and the expenditures associated with the social policies. The last available figures date from 2012 and 2013. More precise information on the status of the development goals will probably not be available until 2017. The pre-Ebola trajectories for certain indicators show that they were moving toward their targets. The goals of reducing the incidence of extreme monetary poverty was achieved (41% in 2012 with a 2015 target of 47%) and increasing the population's access to drinking water (75% in 2012 with a 2015 target of 72%). However, challenges remained in reducing malnutrition (18% in 2012 with a target of 11.5%) and increasing access to sanitation (19% in 2012 with a target of 57%).

Table 1: Selected social indicators

	Year	Value	MDG target value
Poverty			
GDP per inhabitant (current dollars)	2013	523	
Poverty headcount ratio at less than USD 1.25/day (PPP) (% of the population)	2012	40.9	47
Poverty headcount ratio at national poverty line (% of the population)	2012	55.2	31.3
Percentage of underweight children < 5 years of age, weight for age	2012	18	11.5
Health			
Infant mortality rate, < 5 years (per 1,000)	2013	100.7	78
Neonatal mortality rate (per 1,000 live births)	2013	32.8	
Hospital beds (per 1,000 people)	2012	0.3	
Public health spending (% of total health spending)	2012	28.1	
Public health spending (% of Government spending)	2012	1.8	
Water, Hygiene, and Sanitation			
Improved drinking water sources (% of the population with access)	2013	74.8	72
Improved sanitation facilities (% of the population with access)	2013	18.9	57
Education			
Primary school enrolment (% net)	2013	74.4	100
Public spending on education (% of Government spending)	2012	9.5	
Public spending on education (% of GDP)	2012	2.5	
Gender, Women and Children			
Ratio of literate girls/boys (% of 15-24 year-olds)	2010	58.0	
Ratio of girls/boys enrolled in primary school (%)	2012	84.5	100
Share of income held by the wealthiest 20%	2012	41.6	
Jobs/population ratio for individuals 15 years and older, women (%) (modelled ILO estimate)	2013	64.7	
Jobs/population ratio for individuals 15 years and older, men (%) (modelled ILO estimate)	2013	76.7	
Children in employment, study and work (% of all children in employment, ages 7-14)	2010	54.6	

Sources: World Bank World Development Indicators (online version consulted on 30 March 2015), PRSP III.

The following sections describe EVD's impacts on health, sanitation, education, and certain social inequalities.

3.2 Health

The Ebola epidemic was, primarily, a health crisis that hit the national health system very hard. It caused genuine shocks both in the areas of human resources and the existing health infrastructure.

The panic created by Ebola produced fear and mistrust, both among health professionals and within society overall. Investors and visitors to Guinea became cautious. The situation slowed public health projects and programmes, disrupted the national health facilities' coordinating functions, and generated financing problems.

The impact of these shocks was magnified by the vulnerabilities of the national health care system:

- weak epidemiological warning system;
- weak epidemiological response among health care workers;
- inadequate health care infrastructure;
- health's small share of the national budget (1.7% in 2013 compared to an African average of 9.7%, which is itself relatively small compared to the Abuja objective, which calls for earmarking 15% of national budgets to health)¹; and,
- poor health indicators overall (0.82 doctors per 10,000 inhabitants, compared to an African average of 2.6; 0.65 and 0.25, respectively, nurses and midwives per 10,000 inhabitants).

Despite these vulnerabilities, the fight against EVD benefited from the opening of international health cooperation. In addition, Guinea had the advantage of trained doctors who were not yet practicing.

Given the public health threat of EVD, several measures, projects, and programmes were adopted to eradicate the disease quickly. They included: (i) the health emergency declared in August 2014 and the March 2015 strengthened health emergency in five prefectures; (ii) creation of the National Ebola Coordination Unit in September 2014; (iii) the hiring of new employees and the call-back of retired medical workers; (iv) training, awareness-raising, and communication on the disease; (v) construction of treatment centres and laboratories; (vi) treatment of patients with respect for human dignity and emphasizing persuasion; (vii) establishment of monitoring committees and mobilization of social partners; and, (viii) free treatment for patients and monitoring of suspected cases and contacts.

However, EVD had a serious impact on the health sector. Nearly all of the health regions and health districts – respectively, seven out of eight and 31 out of 38 – were affected by the disease. One hundred and two of the 167 infected health workers died.

EVD also contributed to the deterioration of the existing health infrastructure and a decline in socio-health indicators:

- closure of 94 health care facilities and one district hospital at the end of December 2014;
- increase in the percentage of infrastructure in poor condition, from 33% to 57% of public health care facilities;
- decline in the rate of geographic accessibility (less than 5 kilometres) for the population covered from 53% in 2013 to 46% in 2014;
- 50% decline in medical consultations and hospitalizations;
- 30% decline in vaccination coverage; and,
- reduction in health district financing from technical and financial partners from 22% to 11% between 2013 and 2014.

3.3 Water, Hygiene, and Sanitation (WASH)

Several vulnerability factors in the areas of water, hygiene, and sanitation promoted the spread of EVD. They include: (i) limited availability of WASH services in both urban and rural areas; (ii) inadequate WASH infrastructure in health care facilities and communities; (iii) inadequate drinking water services; (iv) poor use of latrines; and, (v) lack of epidemic response training and/or preparation in the sector.

In the face of the Ebola shocks, the national response consisted initially of providing facilities offering access to water, hygiene, and sanitation at Ebola treatment centres and other health care facilities, including secure waste management. Interventions also promoted the use of water, hygiene, and sanitation services at the community level to support the hand-washing system and ensure the continuity of water, hygiene, and sanitation services to prevent water-borne diseases, such as cholera.

However, travel restrictions and border closures affected experts' ability to travel and the supply of imported products, such as chemicals for water treatment. In addition, the Ebola response diverted most of the technical

¹ Report on Guinea's health system recovery plan, page 4.

and financial resources intended for water, hygiene, and sanitation to the epidemic response. This occurred specifically in the case of programme funds from the Dutch Directorate-General for International Cooperation (DGIS) that were redirected to the Ebola response.

Despite these many efforts to respond to EVD, the WASH sector was impacted by:

- the withdrawal of technical and financial partners, thus halting WSH sector projects and programmes;
- problems that the partners in the field experienced in carrying out WASH activities (including physical attacks and destruction of supplies) caused by communities' unwillingness to implement programmes and projects;
- the decline in the operating rate of various infrastructure, resulting from poor maintenance in rural areas in the Ebola-affected regions;
- slowing of community-based interventions in support of WASH; and,
- lack of participation by Guinean WASH managers at international gatherings (including meetings and seminars).

However, certain Ebola responses strengthened the promotion of good hygiene and sanitation practices, specifically, hand-washing with soap, domestic water treatment, and the hygienic use of latrines.

The 2012 demographic survey, combined with the multiple health indicators survey, showed that 75% of the Guinean population has access to improved water sources. Approximately 19% of the population has access to an improved sanitation system. However, the use of unimproved or shared latrines remains very high (64%), as do significant disparities between urban and rural areas. The report notes that one-quarter of the Guinean population lacks latrines.

3.4 Training and Education

Poor hygiene and health conditions in educational institutions at all levels and overcrowding in classrooms without water (77% of schools), latrines (30% of schools), and nurses at most of the institutions are factors that contribute to epidemic exposure among students and teachers. In addition, illiteracy, which affects a large part of the population (65%), is an aggravating factor that helps to explain the difficulties implementing the measures recommended to break the chain of infection. Customs and community habits, forged by an age-old traditional education, hampered the awareness-raising campaigns.

In addition to this situation, epidemiological research within the existing research and training entities is weak, if not lacking. The lack of applied epidemiological research adapted to the Guinean context led to a failure to anticipate appropriate measures and health security strategies. More generally, the actors in the education sector were not prepared to take on and manage health crises in schools and universities.

The Guinean Government and its partners mobilized aggressively in response to this epidemic, which particularly affected the education sector. It should be noted that nearly four million students – primary, secondary, and university – receive instruction on a daily basis at the various educational levels. A protocol was developed to allow the academic year to begin under safe conditions. To date, actions by the Government and its partners have focused on: (i) conducting awareness-raising campaigns by developing posters and guides; (ii) setting up health monitoring teams; (iii) training teachers and administrative and support staff in Ebola prevention and awareness-raising; and, (iv) providing hand-washing kits and thermoflash thermometers.

The academic year for both schools and universities, which usually begins in early October, was delayed until 19 January 2015. This significant three-and-a-half month delay was necessary to create the optimal conditions for a safe start to the year.

Deaths were recorded among school and university students and instructors infected by the Ebola virus, as well as contact cases and recoveries. Based on information gathered in October 2014, the following statistics were recorded:

- (i) 76 confirmed cases of Ebola among students, including 30 deaths, and 251 students orphaned; and,
- (ii) 44 cases of Ebola, including 15 deaths, among teachers and supervisors.

Although the prevention system is generally satisfactory, the following epidemiological events have occurred since the 19 January 2015 opening of the academic year:

- more than 900 contact cases among students and teachers and one confirmed case;
- 400 primary and secondary schools closed in certain areas because of parents' resistance. Most were opened following awareness-raising efforts; and,
- 20 schools placed under quarantine.

In addition, because of the delay in starting the academic year, educational authorities reorganized the schedule so that studies could be completed properly (extension of the academic year to August, restricted vacations, and make-up classes).

Other impacts could prove devastating, given that the lack of activity and fear of infection in educational institutions increase the probability of school-leaving, as older children must perform support activities and assume greater responsibility for supporting the family. Today, despite the official opening of classes and the preventive measures taken at preschools, elementary/secondary schools, and universities, many parents decided that their children would take this year off.

3.5 Gender, Women, Children, and Social Protection

Given the special role of women in providing care to patients, both at home and in health centres, the epidemic affects more women than men (53% compared to 47%). Geographic disparities also exist (for example, 62% in Guéckédou prefecture and 74% in Téliélé prefecture). In November 2014, more than 600 women had been widowed by Ebola. In addition, the deaths of women in the workforce exacerbated the vulnerability of girls and adolescents, who often assumed responsibility for household work, including caring for the ill (which further exposed them to the Ebola virus), precarity, and other forms of violence. The death of several family members at the same time resulted in family reconstitution, increasing the number of widowers, widows, and, particularly, orphans (6,000 children between the time the epidemic broke out and March 2015). Recent data gathered in the field showed reduced use of reproductive health services, particularly in Guinée Forestière. Although these services are free, prenatal visits fell by 10-25% and assisted deliveries by 7-20% in the health services.

The epidemic seriously disrupted the last four months of the 2013-2014 academic year, which are critical in managing the school framework (including the end of the school year and preparing for and organizing exams). Nearly all of the persons questioned (including children, key informants, and participants) acknowledged that the epidemic seriously disrupted the schools in the affected villages between March and June 2014. The data show that school attendance dropped by approximately 35% in nearly all schools at affected sites between March and June 2014. The Ebola epidemic heightened the risks of child labour exploitation as it worsened household living conditions and, in particular, the conditions of those living in the affected areas. The start of the 2014-2015 academic year was also delayed by three months and was disrupted by false rumours.

The labour market shrank significantly. According to the General Labour Inspectorate, 2,180 job losses were recorded in the formal sector and six redundancy plans were underway at the end of February 2015. In reality, these employment statistics underestimate actual job losses on the market because of the predominance of informal activities.

Guinea offers very limited access to formal social protections, which are reserved primarily for a limited number of employees in the modern sector through the National Social Security Fund (CNSS). A minimum wage has just been adopted and implementation is underway. While the resources raised by the Government and the partners for epidemic response enabled all patients to receive treatment, the disease and its impacts severely weakened the living conditions of families and communities in many areas. Particularly in the affected areas, in addition to the loss of income and jobs and the deterioration of basic social services (primarily health and education), the epidemic generated distrust, isolation, and the stigmatization of infected households, especially among the poorest. Community mutual aid practices in agricultural work broke down and social support systems declined. The distrust and stigmatization affected not only families whose members had become infected, but individuals who had recovered, as well. The latter were rejected by neighbours, colleagues, and, sometimes, even, members of their own family.

4. Economic impacts of the Ebola crisis

4.1 Impacts on economic sectors

4.1.1 Agriculture, Livestock Farming, and Fisheries

Agriculture

Guinea has significant agricultural potential. It is rich in cultivable land, with nearly 6.2 million hectares, of which only 25% is farmed annually. Potential irrigable land is estimated at 364,000 hectares, of which 30,000 are currently developed. Nearly three-quarters of the working population is involved in agriculture, which represents approximately 15% of GDP.

In addition to households' loss of productive forces and the destabilization of producer organizations and/or groups following the death and/or infection of their members, the initial impacts of EVD on the agricultural sector were characterized by several behavioural changes:

- abandonment of the fields by agricultural workers;
- departure from Guinea of expatriates working on agricultural projects and/or programmes;
- decline in mutual aid during labour-intensive periods (harvests and field maintenance) and the presence of traders, collectors, and consumers in the markets;
- halt of support/advice; and,
- closure of land borders by certain neighbouring countries.

This sector experienced several other EVD impacts:

- reduction in trade flows of agricultural products between prefectures;
- loss of large quantities of fruits and vegetables (potatoes and pineapples) and horticultural products intended for export because of spoilage; and,
- falling prices on the local market following supply and demand imbalances.

The revised projections available in December 2014 estimated 3.3% agricultural growth for 2015, compared to the 5.6%-7.1% forecast in the 2013 poverty reduction strategy document. The results of the rapid evaluation of Ebola's impact on agriculture and food security, conducted jointly by the Ministry of Agriculture, FAO and the WFP from 14 October to 3 November 2014 in 17 prefectures, illustrate the concerns regarding nutritional and food security (Table 2).

Table 2: Perception of risks in the agricultural sector

	Areas affected by Ebola	Areas not affected by Ebola
percentage of communities that expect a poor harvest (2014/2015) compared to last year	61	29
percentage of traders with problems obtaining supplies	89	59
percentage of traders whose source of supplies changed compared to 2013	51	24
percentage of traders whose reserve of foodstuffs is smaller than in previous years	83	41
percentage of traders who say that the markets are well-supplied	9	47
percentage of households that have reduced the number of meals eaten in one day	74	29
percentage of households that consume the next season's seeds	59	24
percentage of communities whose food consumption was affected by EVD	82	47

The same evaluation shows a 10% decline in rice production in 2014 (the country's main crop, which represents 80% of farms, 67% of planted areas, 65% of cereal needs, and 37% of the working population) and a 1% decline in fonio, corn, and manioc production.

The main measures taken specifically in response to Ebola's impacts on this sector include: (i) the purchase, by the State, of cotton intended for export; (ii) the allocation of USD 5 million to the FAO's Ebola Response Programme, with support from the Guinean Government and the World Bank, to implement activities to promote resilience, prevention, and the recovery of agricultural production in the areas affected by Ebola; and, (iii) impact evaluation studies.

Livestock farming

Livestock farming ranks second among the rural population's activities and represents approximately 5% of GDP. It is characterized by extensive farming methods, internal and cross-border transhumance in certain areas of the country, and inadequate use of veterinary care, despite support from national livestock agencies and private veterinarians across the country.

The main impacts affecting the sector include:

- disruption of treatment and vaccination campaigns in the prefectures;
- declining sales of livestock products (including eggs, meats, and droppings); ;
- breakdown in the supply chain of livestock inputs from Côte d'Ivoire and Senegal (vaccines, corn, smoked fish, and shellfish);
- reduction in road and air traffic for the transport of livestock products;
- declining turnover for poultry importers following the prohibition on large ceremonies and market disturbances;
- abandonment of certain animal production activities (beekeeping and cane rat production);
- problems supplying and watering livestock after restrictions placed on livestock movement;
- delays in the construction of the Kagbèlen slaughterhouse; and,
- decline in activities of the sector's socio-professional associations.

The primary response in this sector was implementation of the FAO's Technical Cooperation Programme (TCP) in connection with efforts to combat the disease at the human-wildlife-ecosystem interface.

According to a survey conducted by the Ministry of Agriculture and the Ministry of Livestock and Animal Production, in cooperation with the WFP and the FAO, 50% of the communities surveyed indicated that EVD had an impact on livestock farming, including: slowed movements; abandonment of animals; abandonment of herds by herders; wandering and theft of livestock; and, proliferation of infectious and parasitic diseases. In addition, 60% of the persons questioned reported interruptions in transhumant movements. Ninety percent noted that animal slaughter had fallen following a decline in consumer income, problems with marketing, consumers' distrust because of disinformation, and the massive departure of potential consumers (expatriates).

Fisheries

The value-added of the fisheries sector is currently estimated at around 1% of GDP. The Ebola virus affected the fisheries sector, just as it did all other economic sectors.

The main impacts affecting the sector include:

- displacement of fishing communities;
- decline in the price of fishery products because of inadequate sales;
- loss of income and jobs for women and young people;
- worsening of hygiene and health conditions at landing sites; and,
- fishing communities' resistance to the health departments' interventions.

Several fisheries development products were suspended because of the spread of Ebola. They include:

- development of the Artisanal Fishing Port in Kaporo, financed through a USD 10 million gift from the Government of Japan. Scheduled to begin in April 2014, it was postponed because of Ebola;
- protection of the Canary Current Large Marine Ecosystem (CCLME), with funding of USD 3,378,142 from various partners through the Sub-Regional Fisheries Commission (SRFC) of West Africa, for five years starting in 2013; and,
- the fish farming rural development project in Guinée Forestière.

The Government's response as part of efforts to combat the epidemic was to deliver the fishers a large load of prevention kits, including tarps to protect the hygiene of fish products, with help from the World Wildlife Fund.

4.1.2 Trade and Industry

The share of trade in GDP is around 15% and activities are characterized by a strong preponderance of informal operators. Domestic trade involves primarily the wholesale and retail distribution of imported products. Exports

are dominated by mining and agricultural products, with manufacturing accounting for approximately 6% of GDP. The sector adds minimal value to local raw materials and is dominated by foreign capital.

The onset of EVD had a major impact on Guinea's trade and industrial sectors. The disease produced several shocks in these sectors through: (i) the closure of street markets and borders; (ii) the drop in port traffic in Conakry; (iii) the loss of external technical assistance; (iv) the underutilization of equipment and a halt of certain chains of production; (v) difficulties in obtaining raw materials, inputs, and finished products; (vi) the additional costs associated with transportation costs and non-tariff trade barriers (the health measures adopted); and, (vii) the many economic redundancies and lay-offs.

The pre-Ebola vulnerabilities in these sectors included:

- export dependence of certain industries (including potatoes and tomatoes);
- inadequate food security reserves;
- dependence on imports of certain basic products (including rice, sugar, and flour);
- lack of competitiveness of the factors of production (particularly energy) in terms of supply and cost; and,
- difficulties in accessing credit.

The main impacts that aggravated the crisis in these sectors included: (i) decrease in turnover, estimated at approximately 63% in the industrial sector for 2014² (specifically following the closure of street markets and borders); (ii) declining profits among commercial and industrial firms; (iii) loss of skills and competitiveness; (iv) decline in investments; (v) 35% reduction in external technical assistance; (vi) increased difficulty in obtaining financing and credit because of a worsened risk profile among local firms/entrepreneurs resulting from the precarious environment created by Ebola; and, (vii) downward revision of the projected level of growth in the industrial sector by 5% to -1% and in the commercial sector by 4% to -3%.

4.1.3 Mining

Mining's share of GDP is approximately 27%. Guinea's mining potential is recognized as among the most significant in West Africa, amenable to open-pit mining and relatively close to maritime access for certain substances. The country is believed to hold more than half of the world's bauxite reserves and major deposits of iron, gold, diamonds, nickel, copper, and titanium.

EVD impacted the mining sector through the repatriation of foreign employees and the postponement of mining missions and projects, infrastructure construction, prospecting, and site development. In addition, maritime freight costs rose because of transport restrictions.

These shocks to the Guinean mining sector were worsened by: (i) lack of skilled local managers; (ii) lack or inadequacy of infrastructure for processing mining products; (iii) heavy dependency on external mining activities; (iv) poor transport development; and, (v) dispersion of mining deposits throughout the entire country.

At the national level, mining companies contributed USD 400,000 to efforts to combat EVD. Several awareness-raising activities were conducted and a *cordon sanitaire* was set up at mining sites and communities bordering mining companies. An Ebola analysis and treatment laboratory was also built in Kindia (Pastoriah).

The combined efforts of the State and the mining companies at mining sites helped to protect them against Ebola.

Internationally, ship owner associations (P&I Clubs) advised ships not to travel to countries affected by Ebola. As a result of these recommendations, owners refused to enter the port of Conakry, resulting in an average increase of 25% to 35% in ocean freight rates for mining products. The total additional cost in 2014 is estimated at approximately USD 26.4 million.

The health emergency declaration led to massive departures of expatriate employees, particularly from RUSAL (half of its employees), Henan China, and the Société Aurifère de Guinée (SAG).³

²According to the Association des Entreprises Industrielles, Guinea's organization of manufacturers.

³ Report of the Economic Commission for Africa (ECA) on: "Socio-Economic Impacts of Ebola on Africa," page 57.

Consequently, several prospecting, development, and infrastructure construction projects were postponed. Following the departure of the attorneys of the Technical Committee for the Review of Licenses and Mining Agreements, revisions that had begun were delayed.

The results of the audits to be conducted by a US firm on the renovation of the FRIGUIA aluminium factory and construction of a new plant, planned for end December 2014, were postponed because of EVD.

As a result, the sector's contribution to job creation, Government revenues, and poverty reduction through assistance to grassroots communities fell.

4.1.4 Tourism and Air Transport

The tourism sector makes only a minimal contribution to national production. Guinea's tourism development potential is largely under-exploited. However, a massive luxury hotel construction project began in the capital in 2011.

The main Ebola-related shock was the decision by civil aviation authorities in certain countries to prohibit flights serving Guinea from landing.

The flow of travellers, tourists, experts, and businesspeople was reduced significantly by that suspension and the widespread fear. Turnover at hotels in Conakry fell by an average of 78%, compared to 2013. The number of hotel reservations and stays at the city's hotels fell, resulting in a brief decline in activity. However, these disruptions were generally associated with travellers on business trips.

Ebola's main impacts on the tourism sector were as follows:

- the number of international passengers at the Conakry airport in 2014 fell by 55,000, primarily because arrivals between September and December 2014 declined by half;
- hotel occupancy rates and restaurant patronage fell;
- the construction schedule for projects underway was disrupted;
- the construction of five 5-star hotels in the final stages was suspended (Radisson and Azalai hotels, for example);
- air traffic declined drastically starting in August 2014; and,
- supply channels were disrupted for local raw materials (plant fibre) and wood from the forested area, affecting the craft-trades sector.

These negative impacts led to a decline in the sector's revenues and worsened poverty indirectly for the population in general.

A Ministry of Tourism survey showed that more than half of the companies (66.7%) reported that the epidemic had an impact on their activities.

For example, ticket sales turnover at travel agencies fell by about 69% for the period 1 May – 29 September 2014.

The Government made several diplomatic efforts to reopen the borders and resume flights.

4.1.5 Infrastructure

Airports

Border closings severely disrupted operations at the Conakry Airport Management Company (SOGEAC). Before the Ebola outbreak, 53 flights left weekly (operated by Air France, DHL, Brussels Airlines and Royal Air Maroc). That number fell to 21 per week, for a 60% decline in air traffic. The monthly impact on SOGEAC's turnover was GNF 3.5 billion (approximately USD 500 thousand). As air traffic represents the common base of the airport's activities, entities such as the Air Navigation Agency and the National Directorate for Civil Aviation also reported market losses.

The epidemic's other direct consequences on SOGEAC included postponing some 2014 investments to 2015 and freezing operating expenditures, with the exception of maintenance, safety, and implementation of a health screening system.

Passenger and visitor control measures were strengthened at the Conakry airport and no Ebola case has been reported to date inside the airport.

Roadways

National roadways represent 16% of the 43,500 kilometres of the network inventoried. This network also includes prefectural roads (secondary, 35%) and community roads (tertiary, 48%). The general condition of the national roadways is very unsatisfactory (*paved*: good, 16%; average, 31%; and, poor, 50%; *dirt*: good, 6%; average, 51%; and, poor, 43%). The percentage of roads of the total length of the network that is asphalted is among the lowest in the sub-region: 25%, compared to 59% for Sierra Leone, 40.7% for Ghana, 38.7% for Mali, 34.7% for Benin, and 34% for Burkina Faso. This low rate and the inaccessibility of certain affected areas helped to contribute to the spread of the disease.

The main shocks experienced in the public works sector included the drop in the labour force and the massive departure of skilled foreign labour. The sector's expected decrease results from uncertainties regarding the period of eradication of the epidemic, fear that the direct costs of dealing with the disease could crowd out investment expenditures, the slowing of direct foreign investment, and the mobility of skilled labour. On the other hand, the Government's efforts to maintain public investments and contract commitments for certain infrastructure construction projects strengthens the optimism displayed in the public works sub-sector.

The measures the department has taken include awareness-raising, distribution of kits, and field visits to ensure compliance with hygiene and safety rules at worksites.

Ebola's main impacts on the sector have been the postponement of certain projects and studies that were underway, delays in asphaltting certain roads, and the cancellation of new projects.

The postponed projects include:

- renovation of the Kaka bridge in Coya, with the departure of the Japanese experts;
- asphaltting of the Beyla-N'zérékoré road, financed by Rio Tinto and carried out by SATOM, which suspended its 22 activities after the departure of foreign workers employed by both companies, although no Ebola cases were identified at the time in the areas involved in the project;
- asphaltting of the Kankan-Kissigougou road, as the funds allocated to its social component (basic infrastructure) were redirected to efforts to combat Ebola; and,
- asphaltting of the Labé-Madina-Gounass road; the project launch was halted and funds were redirected to efforts to combat Ebola.

The decrease in the Road Maintenance Fund (FER) allocation, which was redirected to Ebola control efforts, will have a negative impact on construction of the crossing structure and road maintenance in general.

Ports

The Ebola epidemic had two main impacts on the port: the postponement of studies underway and of the start and end of work.

Because of the epidemic, studies on modernizing the management of the Autonomous Port of Conakry were postponed. These studies address:

- institutional reforms (the consultant was to have submitted the final report in last August); and
- port competitiveness (the contract was signed, although and the project, which was to begin in May 2014, was postponed).

Ebola also led to in delays in launching:

- the expansion of the container terminal; and,
- maintenance dredging and deepening of the access channel and the harbour basin.

The immediate impact of these postponements is increased costs at the end of the epidemic. From 1 July to 24 September 2014, the epidemic's impacts on ship, goods, and container traffic were as follows, reflecting a 10% decrease in goods traffic and a one-third decrease in container traffic;

Table 3: Ebola's impact on traffic at the Autonomous Port of Conakry

Designation	1 July – 24 September 2013	1 July – 24 September 2014	Difference	
			Figures	%
1 - Ships				
Number	204	201	-3	-1.47
Volume in m3	7,004,000	6,342,906	-661,094	-9.43
2 – Goods traffic (tonnes)				
Import-export total	1,666,094	1,493,906	-172,398	-10.35
3 – Container traffic (July-August)				
TEU Total	39,441	26,675	-12,766	-32.36

Source: Ministry of Transport

ICT

The sector is characterized by low telephone coverage and Internet access, estimated, respectively, at 50% and 5% of the population.

The epidemic's impacts were felt in the telecommunications and new information technologies sector with the slowing of investment, specifically the deployment of infrastructure dedicated to national telephone coverage, continuation of work to modernize and expand broadcasting transmitters, deployment of the first phase of the project to provide Internet coverage to 200 schools, launch of the national "Backbone" project, and completion of the expansion of the Pan-African e-Network Project. Telecommunications companies were also affected by the drop in turnover from incoming and outgoing roaming calls resulting from the cancellation of tourist visits and business trips.

4.2 Impacts on macroeconomic aggregates

4.2.1 Budget deficit

Ebola's economic impact has been felt primarily through the tax base, particularly in terms of the consumption of goods and services affected by the disruption in trade, personal and business income, and external exchanges, specifically with neighbouring countries.

Given the persistence of the Ebola epidemic, budget resources (revenue and grants) at the end of December 2014 were relatively low, totalling GNF 9,702.33 billion, of which GNF 8,145.47 billion in tax revenue (17.6% of GDP). That figure was GNF 2,690.7 billion below projections, or a loss equivalent to 5.8% of GDP.

Continued budget execution on a cash basis made it possible to maintain expenditures at 11,680.06 billion GNF, compared to a projection of GNF 14,500.24 billion.

This resulted in a basic balance of GNF -1,977.73 billion, or -6.63% of GDP.

The 2014 supplementary budget act incorporated the impact of the Ebola epidemic. The revisions reflected the projected loss of revenues and the expenditures associated primarily with the epidemic. The increased expenditures also reflected the extension of the thermal unit rental agreement to maintain electricity supplies, which continues to be one of the Government's main priorities.

The 2015 budget approved by Parliament on 18 December 2014 takes into account the increased spending resulting from the Ebola epidemic and seeks to maintain an adequate level of public investment to support growth. Against a backdrop of relatively low growth, this led to a GNF 4.198 billion increase in the deficit, financed by loans (GNF 2.644 billion), exceptional revenue (GNF 2.100 billion), and bond issues (GNF 400 billion).

To address the increased cost of the Ebola response plan, the Government established a special earmarked budget of GNF 1.613 billion.

4.2.2 Inflationary pressures

The epidemic had a mixed impact on price changes. Obstacles to intra-regional trade led to reduced sales of certain agricultural products that were exported massively. This resulted in lower producer prices, which were not, however, fully reflected in consumer prices by market intermediaries in the areas covered by the price index. On the other hand, given the volume of inventories and the fact that most of these products come from countries outside the region, the price of basic foodstuffs did not rise sharply. Still, inflationary pressures appeared and slowed the trend toward lower inflation, which was around 9% at the end of December 2014 (on a year-to-year basis), compared to an initial forecast of 8.5%. In 2015, inflation is likely to remain close to the 2014 level because upward pressure on food prices against a backdrop of insufficient agricultural production may be offset by the moderating impact of lower domestic demand.

4.2.3 Exchange rate fluctuations

In 2014, market mechanisms continued to determine the exchange rate. The average rate of the US dollar was GNF 7,015 on the official market and GNF 7,189 on the parallel market compared, respectively, to GNF 6,908 and GNF 6,986 one year ago, for a 1.52% and 2.84% weakening of the Guinean franc. The euro reached an average rate of GNF 9,321 on the official market and GNF 9,595 on the parallel market, following 2013 rates of GNF 9,171 and GNF 9,234. This represented a weakening of 1.60% and 3.77%, respectively, in the Guinean franc attributable to the increase in excess demand for foreign currency as a precautionary measure and a drop in the currency supply, attributable primarily to movements of non-residents and cross-border trade.

In 2014, exchange premiums between the official and parallel markets increased, respectively, by 2.4% and 2.87% for the US dollar and the euro.

4.2.4 Stability of the public debt

After reaching the HIPC completion point in September 2012, the level of external debt rose sharply from 17.39% of GDP at year-end 2012 to 22.09% at year-end 2013, reaching 22.84% at year-end 2014, for a positive change of 3.41% over 2013. External debt forecasts in 2014 stood at GNF 513.423 billion, or USD 73.185 million.

At the end of the 4th quarter 2014, Guinea's domestic debt was estimated at GNF 34,130.979 billion, 31.7% of which is held by the BCRG, 61.98% by suppliers, and 6% in Treasury bonds. The 2014 domestic debt service was GNF 718.903 billion, composed primarily of exceptional overdraft interest (BCRG) in the amount of GNF 196.116 billion, interest on Treasury bonds (GNF 237.500 billion) and supplier credit repayments (GNF 285.287 billion).

The Government continued to implement the medium-term action plan to strengthen debt management, adopted in March 2014. An order for submission to the National Public Debt Committee (CNDP) was signed on 8 September 2014. Progress has been made on the domestic debt audit with the hiring of the consulting firm assigned to that task. The results will produce a schedule for clearing domestic arrears.

4.2.5 Stability of the financial sector

The Ebola epidemic did not have a direct impact on the financial sector because of the economy's low rate of banking penetration, particularly in the areas initially affected. Consequently, the financial system remained in good health and improved slightly. Between December 2013 and December 2014, domestic credit rose by 30.1% (44.5% for private sector credit) and GNF deposits grew by 26.7%, compared to 28% and 20.7%, respectively, one year ago. Over the course of the same period, non-performing loans rose by only 33.8% compared to 78% in 2013, while the average bank solvency ratio improved from 15.6% to 18.0%.

However, the Ebola epidemic had a noticeable impact on certain indicators of the banks' currency position. Currency deposits fell by 10.6% in 2014, compared to a 3.5% increase in 2013. Similarly, banks' net foreign assets fell by 90.5% at end December 2014, compared to -15.9% at end December 2013. The 2014 decline was marked by a significant change in the structure of the banks' external position: 40.3% decline in assets and 155.5% increase in commitments, compared, respectively, to -15.8% and -15.3% in rate of change at end December 2013. This situation is troubling because it compromises the documentary credit operations that, for now, constitute the primary financing mechanism for oil imports if the trend noted in the second half of 2014 (a 20% drop compared to an average of 7% during the first half) continues.

4.2.6 Balance of payments

With regard to the trade balance, exports rose 27.4% year-to-year at end November 2014, driven by mining products. Imports fell by 12.9% over the same period. This led to a sharp improvement in the trade balance, which was -12.7% of GDP at end November 2014, compared to -23.2% in 2013.

The external current account deficit (including grants) should improve from 21.1% in 2013 to 18.1% of GDP in 2014 because of increased official transfers and reduced import demand, despite greater imports of food products and lower exports of agricultural products related to the closing of borders with certain neighbouring countries. However, a fall in capital and financial flows in the medium term, resulting in large part from the slowing of direct foreign investment and reduced inflows of short-term private capital, would widen the overall balance of payments.

4.2.7 Impact on growth

In 2014, economic performance continued to be affected by the same problems experienced in 2013 and was worsened by the impact of the Ebola epidemic. In the first half of the year, delays in the resumption of mining investments, energy shortages, and the Ebola epidemic reduced the growth forecast to 3.2%, down sharply from the 4.5% initially forecast, with the hope that despite these problems, the economy would be stimulated by the strong performance of the agricultural and the construction and public works sectors, the signing of the investment framework with Rio Tinto to operate the Simandou project, and improved electricity service. A last revision in early 2015 revised the growth rate to 1.3%, driven mainly by a 7% increase in final consumption, compared to a 6.1% drop in investments.

Table 4: Change in growth forecasts for 2014 and 2015 before and after Ebola's shocks

	December 2014 projections (with Ebola)		June 2014 projections (before Ebola)		Economic impact of Ebola shock	
	2014	2015	2014	2015	2014	2015
Primary sector	3.3%	3.4%	4.7%	6.0%	-1.4%	-2.7%
Agriculture, hunting	3.3%	3.3%	5.2%	7.1%	-1.9%	-3.7%
Livestock farming	4.0%	4.0%	4.0%	4.0%	0.0%	0.0%
Fisheries	3.4%	3.3%	3.4%	4.0%	0.0%	-0.7%
Silviculture and forests	1.8%	2.0%	3.5%	4.2%	-1.7%	-2.2%
Secondary sector	3.1%	1.2%	3.5%	9.8%	-0.3%	-8.6%
Mining	3.9%	0.5%	-3.6%	4.2%	7.6%	-3.7%
Manufacturing sector	-1.0%	1.0%	5.0%	4.0%	-6.0%	-3.0%
Water, electricity	9.0%	25.0%	3.0%	8.0%	6.0%	17.0%
Construction and public works	4.0%	1.0%	9.5%	17.0%	-5.5%	-16.0%
Tertiary sector	-0.8%	-0.7%	2.7%	3.9%	-3.5%	-4.6%
Trade	-3.0%	-3.0%	3.0%	4.5%	-6.0%	-7.5%
Transport	-2.0%	-2.0%	3.0%	5.0%	-5.0%	-7.0%
Government	2.0%	2.0%	2.0%	2.5%	0.0%	-0.5%
Other	2.0%	2.0%	3.5%	3.5%	-1.5%	-1.5%
Import duties and taxes	-1.6%	14.0%	3.6%	5.2%	-5.3%	8.9%
GDP at market price	1.3%	1.9%	3.5%	6.4%	-2.1%	-4.4%

Source: Macroeconomic framework, June 2014 and December 2014

At the sectoral level, the impact of EVD on the growth rate was much more pronounced in the construction and public works sector, primarily because of the delays/postponements of road, hotel, and social housing construction projects.

5. Recovery and resilience strategies

5.1 Short- and medium-term macroeconomic outlook

The macroeconomic outlook is less positive than expected in the short-term because of the disruptions associated with the epidemic. Economic policy is designed to strengthen achievements in the area of macroeconomic stabilization and to support strong, inclusive growth driven by the private sector.

Public finances

In the first quarter of 2015, the Government established a special budget account of GNF 1,613 billion (USD 230 million) to manage the funds allocated to the Ebola epidemic response, pursuant to the provisions of the Budget Framework Law (LORF) and the General Regulation on Budget Management and Public Accounting (RGGBCP) on revenue allocation.

The supplemental public finance measures planned include the following:

- support for purchasing power and jobs, reflected in the State budget via increased salary expenditures to finance new institutions as set forth in the Constitution, introduction of special frameworks for certain civil service categories, and hiring in the health (0.1% of GDP), education (0.2% of GDP), and security (0.4% of GDP) sectors.
- major reforms through the following measures:
 - implementing the new Public Procurement Code by orders setting the thresholds for public procurement contracts and standardizing the model invitations to tender based on those used by international donors;
 - ensuring that the budget and accounting management of public entities that receive revenues allocated comply with the LORF and RGGBCP provisions;
 - approving a timetable for clearing the 2011-2014 domestic debt arrears;
 - implementing the new mechanism for the repayment of VAT credits by (i) organizing meetings with the mining companies to present the new mechanism; and, (ii) completing the multiannual programme for clearing arrears; and,
 - continuing to strengthen the Medium-Sized Enterprises Unit through training, organization of the units, statistical monitoring, and implementation of a support commission.

To cushion the impacts of the Ebola epidemic on the private sector, the BCRG will help the Government mobilize financing, specifically through a call on savings. The BCRG will reduce the leading rate and the required reserve ratio to ensure sufficient liquidity in the banking system so that bank financing of the public deficit does not crowd out the private sector.

Banking and financial sector

Several measures are planned to strengthen the banking and financial sector. The BCRG will establish an open market window and encourage the interbank market for national currency by implementing the market convention that was developed and transmitted to the banks. Other measures are intended to establish a credit information system to improve the credit bureau. Measures are also planned to consolidate the microfinance sector and protect depositors, including: (i) drafting a new microfinance law; (ii) finalizing the directives; (iii) Government adoption of the National Inclusive Finance Strategy; (iv) strengthening microfinance institutions (MFI) through training and supervision; (v) establishing a credit information repository to more effectively manage the MFI portfolio; and, (vi) preparing a directive on mobile financial services. With regard to insurance, efforts will focus on completing the revised insurance code and consultations with actors concerning banking-insurance and micro-insurance.

Monetary policy

To contain the adverse effects of bank financing on inflation, the BCRG will sterilize this financing by increasing currency sales in the interbank foreign exchange market without compromising the international reserves objective of about three months' import coverage.

It will maintain its policy of exchange rate stability and launch the operations of the international reserves investment committee in order to fully implement the new investment policy and the planned control procedures.

5.2 Recovery strategies in the economic sectors

Recovery in the economic sectors is based on the following policy directions and areas:

- improve the business climate;
- restore production systems;
- resume and accelerate the diversification of economic activities;
- resume investments in economic infrastructure;
- revitalize import and export trade channels;
- resume support for agricultural intensification;
- provide support for processing and storage; and,
- boost and streamline support/advice, producer organization, and research.

5.2.1 Agriculture, Livestock Farming, and Fisheries

Agriculture

The Government's strategic objective in the agricultural sector was laid down in the National Investment Plan for Agriculture and Food Security (PNIASA) and in the 2013-2015 Poverty Reduction Strategy Document. It is intended to achieve a sustainable increase in agricultural production and contribute to food and nutritional security. The target was to ensure average agricultural growth rate of 5.6% under the base scenario and of more than 7.1% on average under the accelerated growth scenario. The rice development strategy focused primarily on improving average rice yields from 1.4 to 2.8 tonnes per hectare between 2008 and 2018 and on increasing the surface area under sustainable management by nearly 60%.

The presence of EVD and the precautions taken to prevent and/or limit its spread reduced the number of agricultural supervision operations, the number of producers supervised, and the distribution of agricultural inputs. EVD also highlighted the limits on the resilience of farming families in the face of food insecurity, the weakness of the system for storing, preserving, processing agricultural products, and many other insecurities.

The main activities recommended to aid recovery are:

- purchase and distribution of agricultural inputs (seed, fertilizer, and pesticides);
- build storage and preservation infrastructure in the major production areas;
- provide processing equipment to rice-growing areas (Lower and Upper Guinea);
- conduct support/advice activities; and,
- monitor and evaluate the interventions.

Livestock farming

The DSRP III development objectives for the livestock sector are to: (i) increase the tonnage of the controlled slaughter of beef cattle from 55,360 tonnes in 2008 to 132,815 tonnes in 2015; (ii) increase the production of sheep, goats, and pigs from 14,842 tonnes in 2008 to 18,412 tonnes in 2015 and the production of eggs from 5,597 tonnes in 2008 to 36,791 tonnes in 2015; (iii) increase milk production from 139 million litres in 2008 to 184 million litres in 2015 and bee production from 1,026,000 litres of honey in 2008 to 1,736,000 litres in 2015.

The onset of EVD increased the risk of failing to reach these objectives because of the impacts described above. Treatment and vaccination campaigns were disrupted; the supply chain from neighbouring countries was broken;

air and highway traffic in livestock products declined; certain livestock products were abandoned; problems supplying and watering livestock; and, scheduled public interventions (such as the construction of slaughterhouses) were delayed. The strategies below were thus developed to revive the activities affected by EVD.

In the very short term:

- develop short-cycle livestock production: supply producers in the affected areas with breeding nuclei (small ruminants, poultry, and pigs), improve conditions for raising livestock (habitat, food, watering, equipment and training),
- relaunch vaccination campaigns against the main animal diseases (sheep and goat plague, contagious bovine pleuropneumonia, anthrax, pasteurellosis, and Newcastle disease virus), deworming, monitoring and evaluation;
- provide support to revive existing organizations (groups, cooperatives, unions); and,
- provide support to reopen markets (information/awareness-raising, collection and dissemination of statistics).

In the medium and long term:

- develop short-cycle livestock production;
- provide support to establish new organizations;
- improve relationships between livestock producers and farmers;
- develop a national programme to create animal production industries;
- provide support to the livestock and animal products market information system (SIM Bétail);
- improve the marketing of livestock and animal products (support for improving marketing infrastructure);
- improve animal health (restore the epidemiological disease surveillance network and mapping of virus reservoirs, support for the Diagnostic Veterinary Laboratory);
- strengthen the entities that support the livestock sector;
- develop intensive meat and milk production; and,
- review the national livestock development policy.

Fisheries

In the area of fisheries and aquaculture, the population's consumption needs were estimated at 232,000 tonnes in 2015. With the onset of EVD, the vulnerability of and impacts on the sector resulting from the displacement of the fishing communities and the worsening hygiene and health conditions at the landing sites call for the following interventions to achieve short- and medium-term economic recovery:

- build health care facilities (clinic/health post/health inspection checkpoint by landing site);
- develop processing, preservation, and distribution methods for fishing products, supply of inputs, support/advice;
- clean up landing sites, build users' capacities;
- develop fish farms, install cold rooms to preserve seafood in urban areas, build ice plants in rural areas;
- create social and health infrastructure; and,
- maintain public health at fishing product landing sites.

5.2.2 Trade and Industry

The DSRP III goals for the development of the trade and industry sectors include:

Trade

- revise the national export promotion and development policy;
- develop a national competition policy;
- develop a code of commerce;
- build basic, storage, and preservation infrastructure; and,
- organize trade-related economic events, such as specialized fairs and trade shows.

Industry

- implement the Policy Letter on Private Sector Promotion to achieve value-added growth rate for the manufacturing sector above 5%;
- strengthen the institutions providing support to the private sector and SME capacity;
- develop the food processing industry;
- create an industrialization fund; and,
- develop viable, equipped industrial areas in the short term.

The EVD outbreak seriously compromised the achievement of these goals. The strategies below were thus developed to relaunch the activities affected by EVD.

The major recovery activities in the trade sector are to:

- add value to local products processed locally (potatoes, coffee, and bananas);
- renovate and equip the quality analysis buildings for food security (physico-chemical and microbiology equipment and field kits for the seven administrative regions in the country's interior);
- build 38 modern markets (one market for each urban commune) to limit infection from germs in food sold, particularly raw food that is often laid out on the ground.
- build commercial infrastructure in cross-border areas. Pilot projects will be carried out at the Guinea-Sierra Leone and Guinea-Senegal stations;
- open eight offices of the Guinean Export Promotion Agency (AGUIPEX) and of the Descriptive Import and Export Application service (DDI/DDE);
- revise trade regulation to take into account globalization and possible crisis situations, such as Ebola; and,
- create humanitarian transport corridors to facilitate the secure circulation of basic food products across borders.

The main additional measures to be taken in the industrial sector are to:

- build capacity of SMEs;
- provide financial support to repay loans and stabilize the cash flow of SMEs affected by the crisis;
- develop a policy to promote local products that were severely affected by the negative publicity associated with EVD;
- support and use local SMEs in the goods and services supply chain;
- bring the new investment code adopted by the Council of Ministers into force; and,
- create an emergency fund to support the private sector (see Box 1).

Box 1: Emergency private sector support fund

The goal of the emergency private sector support fund is to encourage and support private investment, including helping to address the impacts of the Ebola crisis, such as improving the resilience of firms in the sector by promoting processing and structural investments.

The targets include current and future entrepreneurial firms headed by women, young people, and adults, large companies, and SME/SMI developing in the sectors of direct activity and subcontracting in urban and rural areas.

In addition to loans, interventions will include:

- acquiring a temporary, minority interest and making equity loans;
- providing risk capital, particularly for areas affected by the epidemic and the agricultural sector;
- establishing overdraft facilities; and,
- creating a mandatory insurance system to protect private firms against catastrophes.

A governing board will be created based on a public-private partnership (PPP), composed of representatives of the entities signing on to the PPP platform.

A commitment committee will be established and a management company will be hired via an international invitation to tender, managed by a firm certified by the World Bank's Business Edge programme.

Based on the directions identified above, the Government will consult with the private sector and the development partners to define the fund's organizational and operating rules.

Last, the Government will substantially increase national financing for the sector, increasing its share to 5% starting in 2016 and continuing those increases, gradually and regularly, to reach 10% by 2020.

5.2.3 Mining

The main DSRP III goals for developing the Guinean mining sector are to:

- develop the industrial fabric in the mining areas and along the transport corridors for mining products;
- protect and restore the environment;
- undertake community development in mining areas; and,
- conduct regular controls of mining activities to improve and secure the State's revenues.

The main recovery measures will thus involve efforts to relaunch mining projects that were delayed, suspended, or postponed.

Emphasis should also be given to strengthening communications to encourage the resumption of mining activities.

Last, the reforms in this sector to help launch the recovery include completing the implementing legislation for the mining code, revising the mining conventions, and launching the operation of the state-owned mining company, SOGUIPAMI. The Government also plans to establish a single window for mining (GUM), which will be responsible for the reception and prompt processing of all authorization requests and other administrative actions required to carry out large integrated mining projects. It will have waiver authority to accept and quickly process all authorization requests in accordance with regulations.

5.2.4 Infrastructure

Roadways

The roadway infrastructure objective is to continue developing the local and national economy by opening up production areas to improve value chains and revive trade. Priority measures and actions will focus on: (i) using the Road Agency formula in tandem with a second-generation Road Maintenance Fund (FER), following the

example of most other countries in the sub-region; (ii) making a second-generation FER available (deduction of road maintenance tax from State taxes, confirmation of its character as an infrastructure usage tax paid by the user and revenues from the FER and audit to ensure the eligibility of operations); (iii) the need to outsource road building as well as maintenance (use of private sector contractors); and, (iv) completing a study of the reorganization of road administration to identify a central administration, responsible for development, normalization, and regulation and an operations administration entrusted to an entity that can manage flexibly.

ICT

Access to ICTs is a key factor to reduce the digital divide and increase firms' productivity. As part of the management the post-Ebola period, the socio-economic recovery strategy will seek to improve connectivity in Guinea, reduce the digital divide between Guinea and the rest of the world, and pursue the goal of universal access. The measures proposed take into account the resumption of support for investments delayed by Ebola.

They include:

- continue and complete the Presidential Initiative to connect 200 schools to the Internet and the SOTELGUI relaunch;
- continue implementation of the national telephone network coverage plan (GSM);
- continue efforts to secure, modernize, and expand the emission and broadcasting transmission centres;
- fully deploy the three components of the Pan-African e-Network project (e-Education, e-Health, and e-Diplomacy), with the return of the experts assigned by the Government of India to oversee the installation, operation, and maintenance of the equipment;
- continue the studies on the expansion of the Pan-African e-Network to training centres, universities, health centres, and hospitals in the capital city's communes and the interior of the country; and,
- launch the work on the national Backbone.

5.3 Recovery strategies in the social sectors

Strategies addressing the following policy directions and principles will be implemented to achieve recovery in the social sectors:

- restore and develop the health system (including facilities, human resources, and drugs) to address both the population's immediate needs and the challenges associated with Ebola-type pandemics;
- provide universal access to water and sanitation for schools and health facilities;
- broaden literacy;
- promote women and the gender approach; and,
- protect children.

5.3.1 Health

The main health sector-related objectives in the DSRP III are to:

- increase the percentage of births in public health centres from 36.6% in 2011 to 50% in 2015;
- maintain the HIV/AIDS seroprevalence rate below 1.5% in 2015;
- maintain the number of doctors per 10.000 inhabitants at 1.6;
- increase the measles vaccination rate of children under one year from 70% in 2011 to 85% in 2015; and,
- increase the rate of prenatal consultations from 90% in 2011 to 95% in 2015.

The impacts of EVD on the health sector seriously compromised the ability to achieve these objectives.

A set of measures, projects, and programmes is proposed to contain the disease and strengthen the national health system.

In the short term, these measures involve financing and implementation of capacity to respond to EVD.

In the medium- and long-term, the strategy will seek to strengthen and improve the national health care system. To improve the health care system, emphasis will be given to the quality of health care services and to supplying health care facilities with essential drugs, vaccinations and biomedical equipment. In addition, the rehabilitation

of infrastructure and equipment (specifically, at the 95 closed health care facilities) and the hiring of skilled staff to immediately address staffing shortages resulting from the deaths of health professionals are strongly recommended. Similarly, health information will be improved by strengthening the epidemiological surveillance sub-systems and the response capacity to improve responsiveness in the face of epidemics.

The recommendations also call for strengthening sector governance by improving communication and social mobilization, particularly in crisis periods, and building health management capacity.

Box 2: Zero Ebola objective and the strengthened health emergency

The goal of the “Zero Ebola” initiative for 15 April 2015 is organized around the **following specific objectives**:

- Achieve zero infection in health care facilities and treatment centres;
- Control infections in health care facilities and communities;
- Ensure 100% contact tracing;
- Ensure 100% early warnings;
- Ensure safe management of bodies (zero non-secure burials and 100% dignified, secure burials).

The “Zero Ebola” initiative was reinforced with the President’s declaration of the strengthened health emergency addressing several affected areas. At the end of June, it covered primarily Lower Guinea, with strict measures to increase vigilance in those communities. A series of measures was taken:

- Hospital units and private clinics where Ebola cases were declared were required to close temporarily and current patients were required to remain on site, with measures taken to ensure their care and feeding. Other health care facilities that were not implementing prevention measures also had to be closed;
- All deaths during this strengthened health emergency period had to be systematically tested;
- All funerals in the zone covered by the strengthened health emergency had to be secured in advance by the Red Cross or the civil protection agency, in accordance with human dignity;
- Interment, mourning, and condolence ceremonies had to be limited strictly to family members; greetings and ritual gatherings could be held after the strengthened health emergency expired;
- Anyone who hid patients or moved bodies from one location to another would be prosecuted for endangering the life of another; and,
- Supportive measures on behalf of families and health workers were strengthened by the National Coordination.

5.3.2 Water, Hygiene, and Sanitation (WASH)

To strengthen access to hygiene, sanitation, and drinking water services, the DSRP III included the following general objectives: (i) increase access to sanitation services in rural areas to 57.6%; (ii) reduce, by half, the percentage of the population still lacking access to drinking water in 2008 by increasing coverage from 42.25% to 71.12%; (iii) provide adequate access to drinking water to 7,671,300 people; (iv) ensure 92.8% access to drinking water, with a daily ration of 50 litres of drinking water per person in urban centres; (v) ensure 92.8% access to drinking water, with a daily ration of 63 litres of drinking water per person in the capital city, Conakry. Given the impact of EVD on the sector and the requirement to strengthen functional capacities, the following actions must be taken in the short-, medium- and long-term as part of the response to the disease and to improve the sector’s resilience.

The **short- and medium-term** actions planned, in consultation with the ministries concerned, are as follows:

Water sub-sector: (i) drill 2,500 boreholes and set up 60 simplified drinking water supply systems (AEPS) (specifically, in schools, health care centres, markets, bus stations, and in the most disadvantaged areas in terms of drinking water service); (ii) build 80 water fountains in Conakry in neighbourhoods that lack water; (iii) continue to set up public water supplies by transferring project management skills for the municipalities in 130 rural communes.

Sanitation: (i) build 5,000 latrines in health care facilities, schools, and other public places in rural areas; (ii) rehabilitate 1,000 latrines in health care facilities, schools, and other public places in rural areas; (iii) build and rehabilitate 1,000 latrines, wash houses, and wells in disadvantaged neighbourhoods in urban areas; (iv) install adequate sanitation infrastructure to treat waste water from washing bodies in health care facilities and places of worship; (v) publicize and implement the environmental code/public health code with regard to burials; and, (vi) continue to implement the Community-Led Total Sanitation (ATPC) programme to provide access to hygienic latrines to one million people living in rural areas.

To improve hygiene: continue to raise awareness among and inform communities, health care workers, patients, students, and their parents on good hygiene practices so that they can respond on their own; (ii) preserve proper health and hygiene behaviours learned through the community commitment.

Cross-disciplinary: build the crisis management capacity of all actors in the WASH sector (water, hygiene, and sanitation); (ii) build the capacity of beneficiaries in rural and periurban areas in the management of water points and latrines; (iii) inform and raise awareness among students and their parents nationally regarding the use, maintenance, and sustainability of WASH infrastructure.

In the long term, in consultation with the ministries concerned, the actions will focus primarily on strengthening and consolidating the actions listed above.

Water sub-sector: (i) drill 7,545 additional boreholes and 140 additional AEPS (specifically, in schools, health care centres, markets, bus stations, and in the most disadvantaged areas in terms of drinking water service); (ii) rehabilitate and build production, transport, storage, and distribution equipment for the Kakoulima water catchment system; (iii) build modern drinking water supply systems (AEP) for three towns that do not yet have them (Koubia, Beyla, and Fria); (iv) rehabilitate and strengthen the AEP in the seven regional capitals; and, (v) continue to establish public water service for the municipalities in 130 rural communes.

Sanitation sub-sector: build 15,000 additional latrines in health care facilities, schools, and other public places in rural areas; (ii) rehabilitate 2,000 additional latrines in health care facilities, schools, and other public places in rural areas; (iii) build and rehabilitate 3,000 latrines, wash houses, and wells in urban areas; (iv) build seven faecal sludge disposal sites in the regional capitals; (v) build 250 semi-collective stations for clustered dwellings; and (vi) continue building adequate sanitation infrastructure to treat waste water from washing bodies in health care facilities and places of worship.

5.3.3 Training and Education

The main objective of the recovery strategy is two-fold: build the resilience of the educational system in the face of possible epidemiological crises and accelerate the implementation of the 2015-2017 Sectoral Programme for Education (PSE), which seeks to achieve the Millennium Development Goals (MDG).

This primarily involves improving the interim PSE strategies by strengthening or incorporating the following dimensions:

- implement a capacity-building plan for the educational system to prevent and manage risks, catastrophes, and conflicts;
- provide latrines and water points in all institutions;
- extend primary school cafeteria coverage;
- accelerate capacity expansion;
- revive school and university health programmes;
- provide citizenship and peace education;
- strengthen and accelerate literacy and post-literacy activities;
- provide food, education, and health assistance to Ebola victims;
- provide institutional support to strengthen the epidemiological research centres; and,
- monitoring the implementation of prevention measures.

Certain activities will be carried out during the three years of the strengthened interim sectoral plan in order to implement the above strategies.

The populations' resistance to the strategy to combat EVD revealed the negative consequences of illiteracy within the society. This calls for intensifying efforts to overcome this scourge, not only to build the country's capacity to confront other epidemics, but also to accelerate the achievement of the Millennium Development Goals. With that perspective, the recovery strategy will continue and intensify efforts to combat illiteracy through greater mobilization of communities, NGOs, and State actors.

Noting the gap between the progress achieved and the country's high rate of illiteracy, the Government has set an objective to eliminate it among and train young people and adults, giving priority to women in the literacy and NAFA centres. Achieving this objective involves: (i) integrating revenue-generating activities into functional

literacy programmes; (ii) support and evaluation of local initiatives targeting children who have dropped out or have not enrolled in school, in suitable formal education facilities in areas with low school enrolment.

The availability of literacy and non-formal education programmes will continue to be based on the development of partnerships and the monitored delegation of the implementation of literacy campaigns to approved operators (“*faire-faire*,” or “making things happen,” strategy). Thus, pooling of resources (classrooms and instructors) will make it possible to teach literacy to a large number of adults through the *faire-faire* strategy adopted by the Ministry.

With regard to primary education, the interim PSE calls for allocating 80% of the budget for school infrastructure to build classrooms and the remaining 20% to build latrines and water points at schools that lack them. This corresponds to installing 883 water points, including 120 to be provided by the Guinean Government and 763 by FoCED, thus covering 18% of the needs, which totalled 4,939 water points in 2014.

The recovery strategy provides for installing an additional 2,279 water points. Water point coverage will thus increase from 18% to 64%, or a total of 3,162 water points to be installed over the 2015-2017 period.

Given the need to improve individual and collective hygiene to prevent the spread of disease in all educational establishments, the recovery strategy takes into account the other educational levels, which also face serious problems with drinking water supply. Thus, in the secondary cycle, 50 water points must be developed at the preschool level, 293 at the middle school level, and 53 at the high school level. The Government plans to connect the rest of the establishments in urban areas to the urban water distribution system.

Regarding latrines, the interim PSE calls for building 623 blocs of latrines at primary schools (425 by the FoCEB and 198 by the Government). This will cover 33% of the 1,881 schools that lacked latrines in 2014. Under the recovery plan, all public primary schools will be covered, with the construction of 1,258 additional blocs.

Thus, to improve hygiene conditions in all of the country’s educational establishments, the recovery strategy calls for building 50 blocs of latrines at the preschool level, 74 at the secondary level, 20 in technical and trade schools, and 34 in institutions of higher education.

To encourage demand for schooling, innovative strategies (including information, education and communication campaigns (IEC), school cafeterias, single-grade schools, satellite schools, replacement of hangar schools, and school kits) will be implemented in low school enrolment and low population density areas to attract and retain children from poor and disadvantaged families.

The interim sectoral plan called for building cafeterias at 1,500 schools, thus raising the coverage level, which had fallen to 750. However, to date, the WFP is covering nearly 850 schools and expects to expand that number to 1,000.

The recovery strategy proposes to establish additional school cafeterias in communities hard hit by Ebola and where the GER is below 50%. Thus, the new need totals 1,000 school cafeterias, 500 of which were part of the financing to be sought under the interim PSE.

- **At the primary level**, the quantitative objective for the 2015-2017 period is to build 3,701 classrooms with access ramps, separate latrines, and water points, including 3,467 in rural areas. This construction is intended to reduce disparities, limit class size, and replace hangar schools.

Available FoCEB resources will be used to build 545 classrooms and resources from UNICEF, Germany’s Kreditanstalt für Wiederaufbau, the Japan International Cooperation Agency, and the IDB will be used to build, respectively, 33, 423, 217, and 207 classrooms.

To achieve the objective, the recovery strategy proposes to redirect 1,443 classrooms from external financing and the remaining 833 from internal financing.

- **At the middle school level**, the PSE’s quantitative target is to build 869 classrooms, including 797 in rural areas, or more than 90%.

To date, financing intentions break down as follows: 469 rural classrooms with Government funding; (ii) 200 classrooms with funding from the Kuwait Fund for Arab Economic Development in 2016; and, (iii) 200 classrooms with FoCEB funding.

To fill the gap, the recovery strategy will seek external financing to build 449 classrooms.

- **At the high school level**, the objective is to build 190 classrooms equipped with access ramps, separate latrines, and water points. Financing will be sought by mobilizing resources associated with the recovery strategy.

To reduce class size and improve the quality of teaching conditions, infrastructure and equipment will be built in technical, vocational, and higher education centres.

The Ebola epidemic revealed the shortcomings of the national health care system in general and of the school and university health care system in particular. To correct the situation, the recovery strategy proposes to rehabilitate, equip and provide drugs and staff to existing school and university infirmaries, and create school-based medical centres in urban communes. One hundred facilities will thus come on line over the 2015-2017 period.

In addition, the development and implementation of a plan to improve school and university health care, which will rely on the national health care system, will be integrated into the overall plan.

The country's socio-political context was often characterized by communal violence between law enforcement and citizens on the one hand and the populations and healthcare workers on the other. The EVD epidemic weakened civic culture as a result of the resistance of certain population groups to the prevention measures and awareness-raising sessions to combat the disease.

5.3.4 Gender, Women, Children, and Social Protection

The main objective of the post-Ebola strategy is to empower the most vulnerable persons, with an emphasis on young people and women, to strengthen their resilience in the face of future shocks. The main interventions will focus on six areas addressing categories of vulnerability: (i) prevention; (ii) treatment of victims and affected persons; (iii) social protection and social work; (iv) combatting gender inequality and gender-based violence; (v) support for women's empowerment; and, (vi) institutional support to the Ministry of Social Action, Advancement of Women, and Children.

Table 5: Main actions planned in the area of Gender, Women, Children, and Social Protection

<p>Prevention</p> <ul style="list-style-type: none"> • Involvement of women in social mobilization to respond to the spread of the disease • Regular supplies of hand-washing kits in preschools, girls' learning centres, orphanages and other facilities • Organization of periodic awareness-raising campaigns with women's groups, at centres for children, the elderly, and the disabled, particularly in at-risk areas 	<p>Caring for the victims</p> <ul style="list-style-type: none"> • Support communities in opening preschool cafeterias • Provide support parents for school fees for children enrolled in primary and secondary schools • Conditional cash transfers for vulnerable children • Family kits (clothing, hygiene kits, bedding) • Adapt key messages to the local environment to reduce at-risk behaviour and encourage practices that prevent community transmission 	<p>Social protection</p> <ul style="list-style-type: none"> • Invest in the education of children orphaned by the Ebola epidemic • Ensure the targeting of and care for families that are victims of or affected by the disease • Conduct mapping of vulnerable persons weakened by the epidemic (orphans, widows, widowers, the deprived, weakened farmers, and members of other invisible categories whose work has stopped, such as part-time teachers) • Provide food and non-food assistance to victims and families
<p>Combatting inequalities</p> <ul style="list-style-type: none"> • Conduct a situation analysis of women and girls who have recovered from Ebola and of widows • Encourage the effective implementation of laws and legal decisions on the protection of women and children, including efforts to combat forced and early marriage and early pregnancy • Contribute to the social and economic reintegration of widows, women, and girls who have recovered from Ebola, Ebola widows, and victims of sexual violence • Develop a communication strategy that integrates the socio-cultural values of grassroots communities in crisis management to identify rites that can substitute for certain traditional practices dangerous to the health of the population and of women and girls in particular 	<p>Support for empowerment</p> <ul style="list-style-type: none"> • Strengthen women's leadership to promote gender equality and women's rights • Support revenue-generating activities for women and girls who play a crucial role in family life • Build or renovate job training centres for girls, including adolescents, to reduce their vulnerability • Develop a preparation plan for future emergencies that incorporates the specific needs of women and girls, including adolescents • Build/rehabilitate and equip centres for women's autonomy and promotion (CAPF) in areas affected by Ebola 	<p>Institutional support</p> <ul style="list-style-type: none"> • Support analyses on gender issues at the national level, including institutional support • Complete the development of the document and implement the national social protection policy • Build leadership within the National Children's Directorate and the intersectoral coordination (protection sub-cluster) • Establish/strengthen child welfare structures at the community and prefectural level • Establish a system to strengthen the functioning of the protection committees • Strengthen the information management and monitoring and evaluation systems

The Government will develop a national social protection policy and a national programme to expand social coverage. It will take an approach to social policy that will avoid category-based interventions, is sustainable over time, and can evolve based on the needs of the most vulnerable citizens and on future crises.

The priority redistribution intervention in this sector will focus on a social assistance programme (social transfers). It will be designed to assist households in the affected areas considered to be the most vulnerable to the impact of the virus. Funds will help to build resilience in communities where existing, chronic food

insecurity was exacerbated by disruptions in their activity sector. The next step will be to sustain access to means of agricultural and livestock production via microfinance mechanisms and in connection with other revenue-generating activities. The programme will include immediate actions (relatively small number of beneficiaries (Ebola widows, widowers, and orphans)) and actions targeting the populations' resilience (the preceding targets and the most vulnerable households in the affected areas) to avert or mitigate the long-term impacts of the epidemic on the development of the areas affected by the epidemic.

5.4 Sub-regional dimension

In connection with the Mano River Union, several projects and project ideas are planned as part of the regional integration among Guinea, Sierra Leone, Liberia and Côte d'Ivoire. Most of these projects were postponed as a result of the EVD outbreak. The sub-regional dimension of the recovery strategy for the public works, transport, and trade sectors will focus on resuming the development of these projects:

Public works sector:

- renovate the Coyah-Pamelap road, border with Sierra Leone (75 km);
- renovate the Guékédou-Nongoa road, border with Liberia, with a bridge over the Mahna River (65 km);
- renovate the Macenta-Daro road, border with Liberia, with a bridge over the Yella River (100 km);
- renovate the Kankan-Mandiana-Salacan road, border with Côte d'Ivoire;
- renovate the N'Zérékoré-Yomou-Liberia road (85 km);
- renovate the Lola-Danané road, border with Côte d'Ivoire (42 km); and,
- renovate the Bokaria-Madinaoula-Sierra Leone border/Kamakwei road (38 km).

Transport sector:

- create a regional company (Air Mano)

Trade sector:

- build a quality analysis reference laboratory;
- build commercial infrastructure in cross-border areas; and,
- disseminate and educate about the trade regulation of the three Mano River Union countries (Guinea, Liberia, and Sierra Leone).

In the education and agriculture sectors, the Government will promote new development projects to take advantage of the opportunities presented by integration within the Mano River Union. To that end:

Education sector: The strategy will seek to assure high-quality schooling, while strengthening education for a culture of peace and integration in the communities that live along the Mano River Union borders. The specific objectives are to:

- scale up and expand the good practices that are part of the Learning Along Borders initiative;
- improve access, quality, and equity in education to achieve the MDGs;
- train teachers in project-based learning and incorporate it in schools in the border areas communities, while emphasizing education on the cultures along the borders, peace, and modernity;
- expand accelerated primary education for over-age children to avoid the negative social and economic impacts of school-leaving and illiteracy;
- strengthen English language learning in the secondary cycle and introduce it in the elementary cycle;
- encourage teacher exchanges among the Mano River Union countries, particularly in the fields of French and English
- develop and implement innovative teaching programmes that take into account good governance, citizenship, and integration of the Mano River Union countries;
- systematize education for a culture of peace and citizenship in school curricula and assign an important place to the advantages of integration of the MRU countries in teaching;
- strengthen health and hygiene conditions in educational institutions, which are key factors in preventing endemic disease;
- ensure the participation of children, young people, and communities, particularly girls and women, in the life and development of the school; and,

- develop close ties and relationships of interdependence and solidarity among communities across borders, relying on education and building community capacity.

Agriculture sector: The strategy will seek to support regional projects underway, including the West Africa Agricultural Productivity Programme (WAAPP), which covers the countries of the sub-region and will contribute to the production of improved seeds for the various agricultural sectors, as well as the production and dissemination of processing technologies.

5.5 Governance

Guinea is emerging from a five-year period of political transition, which wrapped up with the legislative elections in September 2013. With the establishment of the National Assembly in December 2013, the country was able to return to constitutional order and initiate the consolidation of its democratic institutions, which had been severely tested by a crisis of governance that lasted for more than five decades.

EVD has had the following impacts on governance:

- loss of control of population flows in the country's cross-border areas;
- postponement of actions to strengthen democratic institutions, including the National Assembly;
- delay in implementing the National Priority Actions Strategy (SNAP), developed in May 2014 in connection with the security sector reform (RSS) and pertaining to the defence, police and civil protection, justice, customs, and environmental sectors;
- postponement of the interventions planned as part of the Programme of State Reform and Modernization of the Administration (PREMA), specifically, services in the regions, trips by expert consultants to Guinea, capacity building among Guinean experts abroad, and financial funds planned for reforms and allocated to efforts to combat Ebola;
- worsening of the crisis of trust between the populations and the Government, particularly local authorities;
- destruction of public and private infrastructure, provoked by denial, rumours, and resistance;
- non-payment of the offset from the National Development Budget to decentralization projects and programmes;
- delay in implementing the National Policy Letter for Decentralisation and Local Development (LPN-DDL), specifically via the low level of funding for local Governments (0.28% of the BND in 2014 compared to the 1% planned);
- increased intercommunity divisions because of the stigmatization and isolation of certain communities. The disease also seriously weakened social cohesion within individual communities and, even, families.

The deterioration of these factors of governance following the onset of Ebola is corroborated by the negative change shown in the results of opinion surveys with business leaders in the 2013-2014 and 2014-2015 World Economic Forum reports on competitiveness (Table 6 and Graph 1).

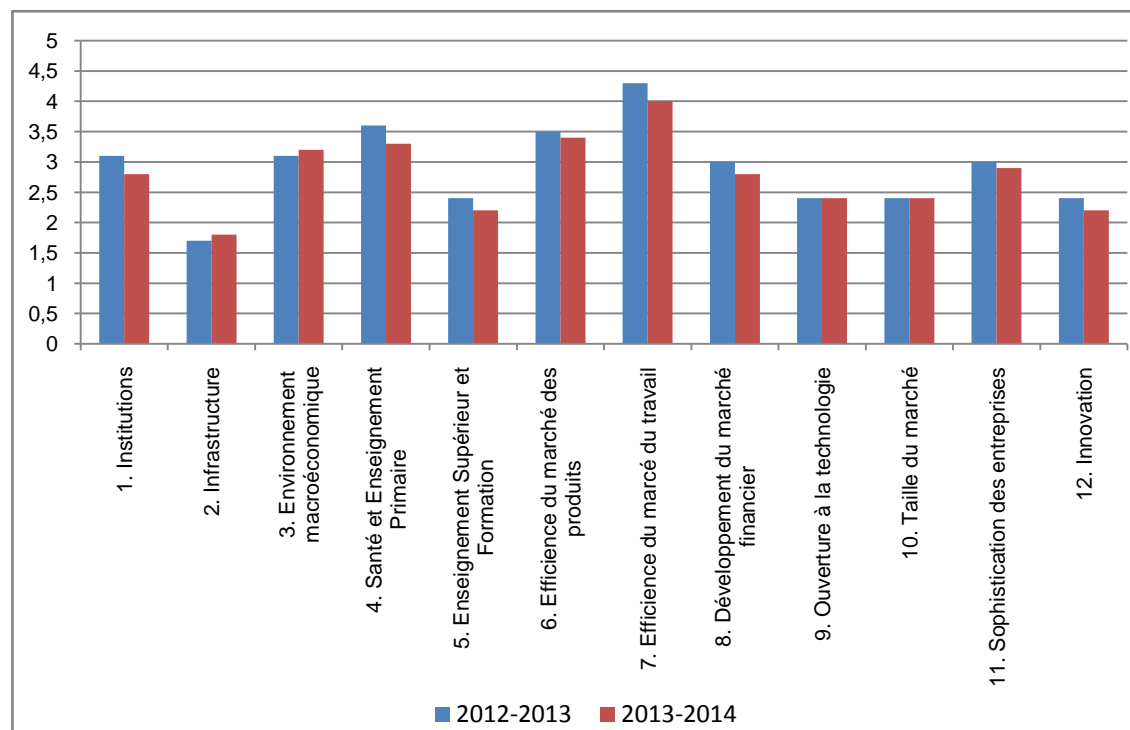
Table 6: Change in the perception of the quality of public institutions in Guinea after the onset of Ebola

	2012-2013 average		2013-2014 average	
	Score	Rank/148	Score	Rank/144
Property rights				
Ownership rights	3.0	134	2.6	137
Protection of intellectual property	2.2	143	2.2	140
2. Ethics and corruption				
Misuse of public funds	2.5	115	2.0	136
The population's trust in the political class	2.5	91	2.3	137
Illicit payments and bribes	2.2	147	2.1	143
3. Abuse of authority				
Independence of the judiciary	2.2	137	2.0	139
Nepotism in civil servants' decisions	2.7	105	2.0	138
4. Government inefficiency				
Waste of public funds	3.4	62	2.6	97
Burden of regulation	3.7	50	3.5	68
Effectiveness of the legal framework in resolving disputes	2.5	139	2.3	142
Effectiveness of the legal framework in challenging regulations	2.9	118	2.4	126
Information on public policies	3.5	129	3.0	134
Security				
Cost of terrorism to companies	5.3	84	5.5	61
Cost of crimes and violence to companies	3.4	123	3.6	109
Organized crime	4.1	118	4.1	107
Reliability of the police services	3.2	116	3.0	119

Source: World Economic Forum Competitiveness Report (2013-2014 and 2014-2015)

Note: The score is based on a scale of 1 to 7 (1=very low, 7=very high)

Figure 1: Change in the quality of the 12 pillars of Guinea's competitiveness after the onset of Ebola



Source: World Economic Forum Competitiveness Report (2013-2014 and 2014-2015)

Note: The score is based on a scale of 1 to 7 (1=very low, 7=very high)

The strategic objective in the area of governance is to establish a professional, organized administration that operates based on the values of the rule of law, principles of competence and merit of its employees, their

commitment to serving the interests of the users/clients of public services, and predictable decisions and actions by its bodies and authorities. Establishing such an administration will help to prevent crisis situations (health, environmental, economic, and socio-political) that could have a significant impact on national life.

The primary measures to be taken to achieve this will involve:

-Structures:

- accelerate and implement reforms regarding the:
 - National Priority Actions Strategy (SNAP) of the security sector reform (RSS);
 - Programme of State Reform and Modernization of the Administration (PREMA); and,
 - National Policy Letter for Decentralisation and Local Development (LPN-DDL).
- streamline and add skilled human resources to the ad hoc administrative organization responsible for studies and project management (strategy and development sectoral offices, general administration of major projects), (see Box 3)
- establish the Court of Auditors;
- strengthen the newly-created Public Procurement Regulatory Authority; and,
- build the capacity of the National Statistical Institute.

Box 3: Improving absorption capacity

The Government recognizes the persistence of the capacity absorption problems affecting the management of its project portfolio. These problems may represent a major obstacle to optimal implementation of the recovery strategy.

Many factors explain this situation, including: (i) inadequate preparation upstream of projects and programmes, resulting in a lack of reliable technical and financial studies; (ii) slow procurement process; (iii) inadequate and long payment processes ; (iv) inadequate project monitoring-evaluation.

The Government is aware of these issues and plans to accelerate the implementation of the reforms necessary for prompt and efficient project execution, specifically by:

- a. building and improving the ability to conduct studies within the major projects administration (ACGPMP); and,
- b. building the capacity of the strategy and development offices (BSD).

In addition, as part of building its absorption capacity, the Government will:

- a. make operational the consultation and coordination framework between the Government and the development partners (Box 4) as well as its permanent secretariat. The latter entity will be part of the technical monitoring/evaluation unit responsible for supporting the work of the theme-based groups and, more specifically, to monitoring the implementation of the PAPP projects;
- b. improve the efficiency of public procurement procedures, specifically by raising the level of delegation, streamlining the procedures, reducing the associated waiting times, and establishing a committee to monitor compliance with the timeframes;
- c. establish a study fund to finance the PAPP feasibility studies by private consultants;
- d. set up an independent delegated project management structure, based on arrangements to be defined in consultation with the technical and financial partners and the private sector.

Through these actions, the State hopes to eliminate bottlenecks so that the projects can have a rapid, tangible impact on the populations.

-Other mechanisms and arrangements:

- implement an effective early warning and rapid response system covering the entire country;
- address the primary threats to building democracy;
- restore trust between the populations and the institutions of the Republic and develop a democratic culture; and,
- strengthen the border monitoring system, with particular emphasis on the cross-border area between Guinea and the Mano River space.
-

Box 4: Responsibilities of the Consultation and Coordination Framework

The consultation and coordination framework between the Government and the development partners is responsible for:

- organizing periodic consultation meetings between the Government and the development partners on a quarterly basis;
- implementing and monitoring the recommendations that emerge from the periodic consultations;
- overseeing the strengthening of the consultation and coordination framework with the partners;
- monitoring the consistency of the entire institutional framework for planning, coordinating, and monitoring development activities;
- contributing to improving the effectiveness of public development aid by bringing the partners' development activities in line with the Government's and incorporating them into a single intervention and development management framework;
- providing greater visibility for all development activities by establishing mechanisms to centralize and monitor all of the development projects and programmes; and,
- reviewing the results of the work of the theme-based groups and address, together, the problems identified.

6. PAPP structure, costs, and financing

6.1 Structure

The Post-Ebola Priority Action Plan (PAPP) is organized around investment programmes and projects and relevant measures to support recovery and resilience.

The PAPP was developed using the following approach:

1. identification of the sectors most affected by EVD, based on the evaluation of the shock, vulnerability factors, and the impact observed;
2. evaluation of existing programmes and projects in the programming of public investments, based on their relevance to recovery and resilience;
3. identification and evaluation of new investment programmes and projects relevant to recovery and resilience;
4. ranking and selection of investment programmes and projects based on relevancy criteria; and,
5. identification of measures that support recovery and resilience and implementation of investment programmes and projects.

The PAPP addresses a specific need for recovery and resilience following on the shock resulting from the impacts of the EVD epidemic. Consequently, the PAPP does not include all of the programmes and projects considered as priorities in other aspects of economic and social development.

The detailed presentation of the PAPP (projects, programmes, and measures) by sector may be found in the appendices.

6.2 Cost estimates and assumptions

The costs of the various project inputs that comprise the PAPP are based on current estimates of Guinea's price structure. They are estimated for the immediate future (July 2015-December 2015) and for the medium-term future (2016 and 2017). The table below summarizes the costs for these periods.

Table 7: Estimate of plan implementation costs (USD millions)

	2015	2016	2017	Total	% of total 2015-2017
	USD	USD	USD	USD	
Social sectors	565,64	517,80	435,64	1 519,08	59%
Health	466,64	408,97	363,50	1 239,11	48%
Education	43,38	72,13	39,97	155,48	6%
Social action	55,62	36,71	32,16	124,49	5%
Economic sectors	150,38	113,39	79,63	343,40	13%
Agriculture	43,23	50,06	58,28	151,56	6%
Livestock farming	3,86	2,10	6,91	12,87	0%
Fisheries	1,54	4,91	5,05	11,49	0%
Trade	15,28	11,29	6,49	33,07	1%
Industry	85,10	42,37	0,00	127,47	5%
Transport	0,00	1,82	2,42	4,24	0%
Environment	1,37	0,85	0,48	2,70	0%
Infrastructure	2,54	368,13	230,54	601,21	23%
ICT	0,00	28,81	14,41	43,22	2%
Public works	0,00	84,74	84,55	169,29	7%
Hydraulics	2,54	254,58	131,58	388,71	15%
Governance	56,35	36,91	20,29	113,56	4%
Civil service	2,72	2,72	1,69	7,14	0%
Territorial administration	22,27	22,15	18,56	62,98	2%
Civil protection	0,44	0,13	0,00	0,57	0%
Communications	0,41	0,04	0,04	0,49	0%
Public finances	30,50	11,86	0,00	42,37	2%
OVERALL TOTAL	762,50	774,92	1 036,24	766,10	2 577,26

The total cost of the plan over the 2015-2017 period is USD 2.895 billion, including 58.9% for recovery and resilience of the social sectors, 13.3% for acceleration and diversification of economic growth, 23.3% for infrastructure, and 4.4% for governance. These costs, which are evaluated for information purposes only, provide the best current estimates of the resources required to implement the plan. They represent the Government of Guinea's needs for implementation of the plan's activities. As additional relevant information becomes available, the costs will be adjusted.

The following assumptions and directions were prepared by estimating the costs of the interventions (a detailed list of the costs and assumptions may be found in the appendix):

- when a donor-partner is also an implementing agency, the administrative costs borne by the agency are not included in this estimate;
- ministries are the implementing agencies for their respective competencies, subject to the use of sharing and outsourcing formulas;
- The cost of the 2015-2017 Public Investment Programme (PIP), prepared in December 2014, reflects the cost of the existing development needs but does not incorporate the response in order to address the vulnerabilities or impacts highlighted by EVD;
- the costs represent the resources required to meet three categories of needs, enabling Guinea to recover from the impacts of the crisis, relaunch its economic and social development, and build its resilience;
 - i. existing priority projects included in the 2015-2017 Public Investment Programme (PIP), whose costs are not affected by EVD. They correspond to eight 2015-2017 PIP projects, for a total cost of USD 66 million over the 2015-2017 period (Type 1 projects).
 - ii. existing priority projects included in the 2015-2017 Public Investment Programme (PIP), whose costs have risen to take into account the vulnerabilities or impacts highlighted by EVD. They correspond to 44 2015-2017 PIP projects, whose total cost has risen from USD 241 million to USD 1.054 billion over the 2015-2017 period (Type 2 projects).
 - iii. new priority projects not included in the 2015-2017 PIP and that are necessary based on the vulnerabilities and impacts highlighted by EVD. They correspond to 124 projects, for a total cost of USD 1.775 billion over the 2015-2017 period (Type 3 projects).

6.3 Financing

The projections of available project financing are noted in Table 8.

Table 8: Project financing available (in USD millions)

	Financing obtained			
	2015	2016	2017	Total
	USD	USD	USD	USD
Social sectors				
Health	309,52	260,67	213,47	783,66
Education	0,00	0,00	0,00	0,00
Social action	8,35	8,36	7,58	24,30
Economic sectors				
Agriculture	4,00	0,00	0,00	4,00
Livestock farming	0,00	0,00	0,00	0,00
Fisheries	0,00	0,00	0,00	0,00
Trade	0,00	0,00	0,00	0,00
Industry	0,00	0,00	0,00	0,00
Transport	0,00	0,00	0,00	0,00
Environment	0,00	0,00	0,00	0,00
Infrastructure				
ICT	0,00	0,00	0,00	0,00
Public works	0,00	0,00	0,00	0,00
Hydraulics	0,00	0,00	0,00	0,00
Governance				
Civil service	0,00	0,00	0,00	0,00
Territorial administration	0,00	0,00	0,00	0,00
Civil protection	0,00	0,00	0,00	0,00
Communications	0,00	0,00	0,00	0,00
Public finances	0,00	0,00	0,00	0,00
OVERALL TOTAL	321,88	269,03	221,05	811,96

Based on the project financing in place (USD 811.96 million) and the Government's contribution (USD 231.71 million), the remaining funding needed under the PAPP financing plan totals USD 1.534 billion for 2015-2017, including USD 385.08 million in 2016, USD 682.93 million in 2016, and USD 465.56 million in 2017. In addition, the macroeconomic framework shows a need for USD 120 million in budget support.

7. Transitional provisions

The preparation and implementation of the post-Ebola recovery strategy coincides with the last year of the DSRP III (2013-2015). Its four strategic areas pertain to:

- i. governance and building institutional and human capacity;
- ii. accelerating, diversifying, and sustaining growth;
- iii. developing growth-supporting infrastructure; and,
- iv. strengthening access to basic social services and household resilience.

The post-Ebola recovery strategy supplements and strengthens the Poverty Reduction Strategy Document III (DSRP III, 2013-2015) and the 2011-2015 Five-Year Plan. It will thus contribute to the next national planning documents.

8. Implementation, Monitoring and Evaluation

8.1 Guiding principles

The post-Ebola recovery strategy is based on the following guiding principles:

- **Transparency:** the Government will keep the actors and partners informed, ex ante and ex post, of the process of preparing, implementing and monitoring/evaluating the PAPP through prior and regular consultations and by publishing all acts, decisions, and measures regarding the process.
- **National ownership:** this principle reflects the commitment of the Government and the other national actors to develop and implement the recovery strategy in accordance with the populations' priorities and needs. In addition, the recovery strategy development process is participatory to ensure that all of the actors' concerns are taken into account.
- **Faire-faire and participation:** The Government will involve local authorities and civil society and private sector actors in implementing this strategy by emphasizing the empowerment of all actors.
- **Integrated and coordinated approach:** The Government will improve the coordination of its actions and encourage integration, particularly when achieving results in one sector (health, for example) depends on other sectors (education, water and sanitation).
- **Coordination and effective use of public development aid:** The coordination and use of external resources will be managed by creating mechanisms such as the consultation framework discussed in October 2014 during the forum in which the Government and the partners participated. The coordinating mechanism must also take into account the comparative advantages of each technical and financial partner.
- **Equity:** The Government will guarantee equality of rights and responsibilities with regard to the involvement of the different parties to take gender, social inequalities, and regional and local specifics into account in implementation of the poverty reduction strategy.
- **Decentralization:** The Ebola epidemic served as a reminder that basic social services, based as close as possible to the populations, are necessary to effectively combat its spread. The recovery strategy must be based on the decentralization process carried out through other programmes.
- **Sub-regional dimension:** Other important aspects of the recovery strategy include a strong sub-regional dimension. This involves, for example, cross-border epidemiological surveillance and issues regarding shared border health care facilities and infrastructure projects (roads and energy). The recovery strategy will also strengthen integration among the Mano River Union countries to take advantage of the

potential offered by larger economic markets, achieve economies of scale and streamline natural resources management.

- **Innovation:** implementation of the programmes and projects that will follow from the recovery strategy must promote innovation in order to have greater and more sustainable impacts.

8.2 Methods

The Priority Actions Program reflects the priorities of the short- and medium-term economic recovery strategy and establishes a link with the relevant sectoral and multi-sectoral projects to operationalize the PAPP. A consistent, operational communications strategy will supplement the recovery strategy implementation mechanism.

The Government and its technical and financial partners will be responsible for implementing the necessary monitoring and evaluation mechanisms, developing the tools, and conducting regular reviews to ensure the efficient use of resources, accountability, transparency, and integrity. The PAPP support measures (see the list summarized in appendix II) will help to improve absorption capacity and transparency in managing funds.

Monitoring-evaluation will be based on the DSRP III and the PAP implementation system.

9. Risk management

Successful implementation of the post-Ebola economic recovery strategy may encounter obstacles that could reduce its effectiveness. The project could face at least five major risks related to political instability, lack of national leadership and weak commitment by the actors, financial issues, sub-regional and international conditions, and, climate hazards and other humanitarian emergencies.

9.1 Political instability

If the strategy is to succeed, it must be implemented in a calm and peaceful environment. Continuing socio-political tensions at the national level could compromise the country's social peace and stability. This risk would be reduced if all the actors commit to change, in a national and local climate of social calm, through an overall synergy, to achieve inclusive dialogue, civic education, a culture of peace, and a secure electoral process.

9.2 Lack of leadership and weak commitment by the actors

The success of the implementation of this strategy depends simultaneously on the national leadership and the capacity and willingness of all actors to work together with greater synergy at all levels. The country must also recognize the importance of communications in mobilizing the society around the strategy. The degree of ownership by each actor, compliance with the different schedules, and the resources provided are key if the post-Ebola economic recovery mechanism is to operate properly. The State's highest bodies will thus have a role to play, both in setting directions and coordinating the participatory process.

9.3 Financial issues

The strategy's financing scheme calls for domestic and external contributions. The EVD outbreak interrupted the growth process and poses a serious threat to the macroeconomic stability achieved after a difficult transition period. Multidimensional poverty increased, increasing the social deficit and inflation and destroying jobs at the national level.

The risk of failing to raise sufficient funds to implement the strategy can be limited and controlled only by: redeploing external economic cooperation to diversity the development partnerships and public development aid sources; (ii) increasing the effort to mobilize internal resources (tax and non-tax); (iii) establishing an effective mechanism for improving the mobilization of resources from the Guinean diaspora and directing those transfers toward productive growth- and job-generating investments.

9.4 Sub-regional and international economic conditions

Guinea shares borders with Sierra Leone and Liberia that are poorly controlled overall. One family may have members on both sides of the borders and population movements are difficult to control. If the response strategies developed are to succeed, the disease must be completely eradicated in each country. This risk can be reduced through consultation and formulation of joint policies by the Ebola control coordination units of the three countries. In more practical terms, setting up identical infrastructure and services in border areas under the auspices of the Mano River Union will help protect progress.

Internationally, dependence on raw materials markets and public development aid constitute additional risks in implementing the plan.

9.5 Climate hazards and other humanitarian emergencies

No country can expect to be safe from natural disasters that may have humanitarian consequences. For example, global warming is a tangible reality, while resilience and population adaptability are very limited. Agro-pastoral activities, which occupy the vast majority of the working population, are highly subject to climate hazards. At the same time, adaptation programmes receive very little funding and producers' commitment to new intensive farming methods (use of chemicals and improved seeds and mechanization) remains very limited. Control of water use is still a concern. Brush fires, floods, droughts, and illegal wood-cutting all heighten the risk and threat that climate conditions represent.

The prevention and reduction of these risks will require taking these issues into account in development programmes, expanding the projects underway, and implementing resilience-related actions and actions on the part of the population in the face of the hazards.

The country must also develop directives and specialized human resource capacity in managing catastrophes and humanitarian emergencies in order to address such events.

Agriculture, forestry, energy, and water resources have been identified as the sectors most vulnerable to climate change and adaptation/mitigation measures must be a priority.

9.6 Outbreak of any new major epidemic

Another outbreak of the disease in the short- and medium-term, or of any major health crisis, could wipe out all efforts in terms of both the response and the economic recovery plans. Establishing an effective monitoring mechanism could reduce the risks.

10. Appendix 1: Detailed cost report

The unit of measurement used to present the estimate costs is the million. Costs are presented in millions of Guinean francs and converted into millions of dollars using an exchange rate of USD 1: GNF 7,000 for the entire period. The exchange rate assumption corresponds to the one used in the December 2014 macroeconomic framework for the 2015-2017 period.

For each ministry considered to be an implementing agency for purposes of the plan, the cost table may be read as follows:

- Column 1 provides the number of each project input;
- Column 2 provides the description of each project input;
- Column 3 provides the status category of each project input;
 - 1: the project input was already identified and included in the 2015-2017 PIP (prepared in December 2014). Its total cost was not affected by EVD;
 - 2: the project input was identified and included in the 2015-2017 PIP and its total cost must be revised because of the vulnerabilities or impacts highlighted by EVD; and,
 - 3: the project input was not identified or included in the 2015-2017 PIP and was found to be critical in responding to the vulnerabilities or impacts highlighted by EVD;
- Column 4 (Strategic area) indicates the project's strategic area concerned, based on the DSRP classification: governance, basic social services, high-growth sectors, and infrastructure;
- the other columns note the distribution of the costs of each project input between the periods of July 2015-December 2015 (referred to as 2015), January 2016-December 2016 (referred to as 2016), and January 2017-December 2017 (referred to as 2017). A final column summarizes the total cost of each project input for the three years.

10.1 Social sectors

10.1.1 Health (overall budget)

HEALTH		Needs				Financing obtained				
N°	Projects/activities	Current status	2015	2016	2017	Total	2015	2016	2017	Total
			USD	USD	USD	USD	USD	USD	USD	USD
I.	PRIORITY ACTION 1: ELIMINATE EBOLA VIRUS DISEASE		198,52	0,00	0,00	198,52	102,00	0,00	0,00	102,00
1.1	Community commitment and communications	3	27,40	0,00	0,00	27,40				
1.2	Surveillance		47,19	0,00	0,00	47,19				
1.2.1	Contact tracing, case investigation, hospital surveillance, data management for surveillance	3	34,00	0,00	0,00	34,00				
1.2.2	Cross-border surveillance	3	2,16	0,00	0,00	2,16				
1.2.3	Transport of cases	3	4,32	0,00	0,00	4,32				
1.2.4	Laboratory	3	6,71	0,00	0,00	6,71				
1.3	Treatment		60,42	0,00	0,00	60,42				
1.3.1	Centre for infectious diseases	3	19,97	0,00	0,00	19,97				
1.3.2	Risk premiums	3	5,69	0,00	0,00	5,69				
1.3.3	EPI drugs	3	34,76	0,00	0,00	34,76				
1.4	Sanitation and management of bodies	3	5,39	0,00	0,00	5,39				
1.5	Nutritional and social support	3	7,98	0,00	0,00	7,98				
1.6	Data management	3	3,30	0,00	0,00	3,30				
1.7	Security	3	4,32	0,00	0,00	4,32				
1.8	Logistics and Finances	3	27,80	0,00	0,00	27,80				
1.9	Research	3	3,56	0,00	0,00	3,56				
1.10	Coordination	3	11,18	0,00	0,00	11,18				
II.	PRIORITY ACTION 2: IMPROVE THE FUNCTIONING OF THE HEALTH DISTRICTS		258,69	408,29	362,79	1 029,76	190,56	243,75	196,87	631,17
2.1	Combatting the disease		168,82	238,79	187,29	594,91	147,82	197,79	147,79	493,41
2.1.1	Epidemiological surveillance	2	33,53	33,53	33,53	100,60	33,53	33,53	33,53	100,60
2.1.2	Infection prevention and control	2	0,05	0,02	0,02	0,09	0,05	0,02	0,02	0,09
2.1.3	Malaria programme (including ACT, IPT, and ITNs)	2	30,00	80,00	30,00	140,00	30,00	80,00	30,00	140,00
2.1.4	HIV programme (ARV, screening, and PMTCT)	2	35,35	35,35	35,35	106,06	35,35	35,35	35,35	106,06

2.1.5	Tuberculosis programme (screening and DOTS)	2	5,00	5,00	5,00	15,00	5,00	5,00	5,00	15,00
2.1.6	EPI programme (vaccines and vaccination, support for vaccination services, logistics/cold chain, communications, and data management)	2	28,00	28,00	28,00	84,00	28,00	28,00	28,00	84,00
2.1.7	Maternal-child health (SR/child survival: IMCI, PNC, labour/delivery, caesarean section, family planning)	2	9,32	9,32	9,32	27,96	9,32	9,32	9,32	27,96
2.1.8	Nutrition (nutritional surveillance, nutritional recovery, promotion of breastfeeding)	3	4,75	4,75	4,75	14,25	4,75	4,75	4,75	14,25
2.1.9	Non-communicable diseases and neglected tropical diseases	3	1,77	1,77	1,77	5,30	1,77	1,77	1,77	5,30
2.1.10	Mental health (psychosocial treatment for patients recovered from Ebola, stress)	3	0,05	0,05	0,05	0,15	0,05	0,05	0,05	0,15
2.1.11	Water, hygiene, and sanitation in health facilities (boreholes, water towers, solar pumps and incinerators and shelters)	3	2,97	5,08	3,81	11,86	0,00	0,00	0,00	0,00
2.1.12	Water, hygiene, and sanitation at the community level (community latrines and community boreholes)	3	14,83	29,66	29,66	74,14	0,00	0,00	0,00	0,00
2.2	Construction and rehabilitation of health infrastructure		15,42	65,73	50,08	131,23	0,00	0,00	0,00	0,00
2.2.1	Renovation/expansion/meeting standards, including laboratories and communicable disease treatment units		4,19	48,11	29,02	81,33	0,00	0,00	0,00	0,00
2.2.1.1	Health centres (CS)	2	3,18	12,71	4,02	19,91				
2.2.1.2	Improved health centres (CSA)	2	1,02	2,03	2,03	5,08				
2.2.1.3	Communal medical centres (CMC)	2	0,00	3,81	2,54	6,36				
2.2.1.4	Prefectural hospitals	2	0,00	12,10	20,17	32,27				
2.2.1.5	Regional hospitals	2	0,00	0,00	0,00	0,00				
2.2.1.6	National hospital	2	0,00	16,95	0,00	16,95				
2.2.1.7	Storage warehouses (PCG regional repositories)	2	0,00	0,51	0,25	0,76				
2.2.2	Construction of health infrastructure		11,23	17,62	21,05	49,90				
2.2.2.1	Health centres	2	5,72	7,63	9,53	22,88				
2.2.2.2	Improved health centres	2	0,00	7,36	2,45	9,82				
2.2.2.3	Prefectural hospitals	2	4,66	2,33	0,00	6,99				
2.2.2.4	Regional hospitals	2	0,00	0,00	0,00	0,00				
2.2.2.5	National hospitals	3	0,00	0,00	0,00	0,00				
2.2.2.5	PCG regional repository at N'Zérékoré	2	0,85	0,00	0,00	0,85				
2.2.2.6	National Institute of Public Health (P4 reference laboratory)	3	0,00	0,00	8,47	8,47				
2.2.2.7	Prefectural health directorates (DPS)	3	0,00	0,30	0,59	0,89				
2.3	Fitting out of health infrastructure		17,99	38,58	59,83	116,40				
2.3.1	Furniture and medical equipment		15,11	37,39	59,50	111,99				
2.3.1.1	Health centres	3	8,14	12,22	12,22	32,58				

2.3.1.2	Improved health centres	3	0,54	2,71	1,63	4,88				
2.3.1.3	Prefectural hospitals	3	2,18	7,64	10,91	20,73				
2.3.1.4	Regional hospitals	3	4,24	14,83	21,18	40,25				
2.3.1.4	National hospitals	3	0,00	0,00	13,56	13,56				
2.3.2	Laboratories (bio-medical supplies)		2,54	0,85	0,00	3,39				
2.3.2.1	Health centres	3	0,00	0,00	0,00	0,00				
2.3.2.2	Improved health centres	3	0,00	0,00	0,00	0,00				
2.3.2.3	Prefectural hospitals	3	0,00	0,00	0,00	0,00				
2.3.2.4	Regional hospitals	3	0,00	0,00	0,00	0,00				
2.3.2.5	Specialized laboratories	3	0,85	0,85	0,00	1,69				
2.3.2.6	National reference laboratory	3	1,69	0,00	0,00	1,69				
2.3.3	IT and office technology equipment		0,34	0,34	0,34	1,02				
2.3.3.1	Desktop computers	2	0,17	0,17	0,17	0,51				
2.3.3.2	Laptop computers	2	0,04	0,04	0,04	0,13				
2.3.3.3	Photocopy machines	2	0,06	0,06	0,06	0,19				
2.3.3.4	Video projectors	2	0,04	0,04	0,04	0,13				
2.3.3.5	Antivirus protection	2	0,02	0,02	0,02	0,06				
2.4	Studies and supervision of infrastructure and equipment work		2,67	8,34	8,79	19,81				
2.5	Rolling stock		0,25	0,15	0,72	1,12				
2.5.1	Health centres (advanced strategy vehicles)	2	0,00	0,15	0,15	0,30				
2.5.2	Prefectural health directorates (vehicle supervision)	2	0,00	0,00	0,57	0,57				
2.5.3	Regional health directorates (vehicle supervision)	2	0,00	0,00	0,00	0,00				
2.5.4	EPI/primary health care coordination (refrigerated truck)	2	0,13	0,00	0,00	0,13				
2.5.5	EPI coordination (truck transport)	2	0,13	0,00	0,00	0,13				
2.6	Drugs and supplies (including Ebola kits)		31,85	31,85	31,85	95,55	31,85	31,85	31,85	95,55
2.6.1	Community level	3	5,00	5,00	5,00	15,00	5,00	5,00	5,00	15,00
2.6.2	Health posts	3	10,00	10,00	10,00	30,00	10,00	10,00	10,00	30,00
2.6.3	Health centres	3	9,60	9,60	9,60	28,80	9,60	9,60	9,60	28,80
2.6.4	Prefectural and regional hospitals	3	6,00	6,00	6,00	18,00	6,00	6,00	6,00	18,00
2.6.5	Reference laboratory (reagents)	3	0,50	0,50	0,50	1,50	0,50	0,50	0,50	1,50
2.6.6	National hospitals	3	0,75	0,75	0,75	2,25	0,75	0,75	0,75	2,25
2.7	Human resources		20,73	23,89	23,27	67,89	9,94	13,15	16,27	39,36

2.7.1	Salaries of employees at post Y, including new hires	2	8,99	12,20	15,32	36,51	8,99	12,20	15,32	36,51
2.7.2	Community health workers	2	5,08	5,08	5,08	15,25	0,00	0,00	0,00	0,00
2.7.3	Employee epidemiological surveillance training	3	4,06	4,02	0,85	8,92	0,00	0,00	0,00	0,00
2.7.3.1	Community level	3	2,12	2,12	0,00	4,24				
2.7.3.2	Health centres	3	0,42	0,42	0,00	0,85				
2.7.3.3	Hospitals	3	0,17	0,17	0,00	0,34				
2.7.3.4	Prefectural health directorates	3	0,17	0,17	0,00	0,34				
2.7.3.5	Regional health directorates	3	0,03	0,03	0,00	0,07				
2.7.3.6	Reference laboratories (training abroad)	3	0,21	0,21	0,00	0,42				
2.7.3.7	National reference laboratory	3	0,08	0,04	0,00	0,13				
2.7.3.8	Customized trainings	3	0,85	0,85	0,85	2,54				
2.8	Health district management	3	0,95	0,95	0,95	2,85	0,95	0,95	0,95	2,85
III.	PRIORITY ACTION 3: SECTOR GOVERNANCE		17,91	17,88	17,56	53,34	17,91	17,88	17,56	53,34
3.1	Decentralized planning (national, regional, and district levels): National health development plan (PNDS), regional health development plan (PRDS), and provincial health development plan (PPDS)	3	0,05	0,00	0,00	0,05	0,05	0,00	0,00	0,05
3.2	Integrated supervision (national, regional, and district levels)	3	0,20	0,20	0,10	0,50	0,20	0,20	0,10	0,50
3.3	Monitoring-evaluation: Quarterly reviews (technical coordinating committee, CTC), half-yearly reviews (prefectural technical health committee, CTPS, regional technical health committee, CTRS), annual sector review	3	0,40	0,40	0,20	1,00	0,40	0,40	0,20	1,00
3.4	Health sector coordination meetings (national, regional, and district levels)	3	0,04	0,04	0,02	0,10	0,04	0,04	0,02	0,10
3.5	Account audits	3	0,00	0,02	0,02	0,03	0,00	0,02	0,02	0,03
3.6	Strengthening governance capacities, including political dialogue on health	3	0,30	0,30	0,30	0,90	0,30	0,30	0,30	0,90
3.7	Development of the national health information system	3	0,40	0,40	0,40	1,20	0,40	0,40	0,40	1,20
3.8	Implementation of the health financing policy towards universal health coverage(feasibility studies and operation of health care funds)	3	0,30	0,30	0,30	0,90	0,30	0,30	0,30	0,90
3.9	Short- and long-term technical assistance	3	0,20	0,20	0,20	0,60	0,20	0,20	0,20	0,60
3.10	Meetings and support missions of the ST/health sector coordinating committee responsible for drafting the 2015-2024 PNDS	3	0,02	0,02	0,02	0,06	0,02	0,02	0,02	0,06
3.11	Recurring cost of operations, logistics, buildings, office IT, and services	3	16,00	16,00	16,00	48,00	16,00	16,00	16,00	48,00
Total for projects included in the PIP (code 1)			0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs for projects included in the PIP (code 2)			171,34	274,43	203,70	649,48	150,24	203,43	156,55	510,22
Total for new projects not included in the PIP (code 3)			295,30	134,54	159,80	589,64	159,28	57,24	56,92	273,44
OVERALL TOTAL			466,64	408,97	363,50	1 239,11	309,52	260,67	213,47	783,66

10.1.2 Education

EDUCATION					Needs				Financing obtained			
N°	Projects/Activities	Current status*	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Demand incentives for primary education for girls and children in disadvantaged areas via school cafeterias	3	Reduce regional and gender disparities	Reduction in unequal access to school resulting from Ebola	2,81	4,21	2,34	9,36	0,00	0,00	0,00	0,00
2	Rehabilitation/renovation of research institutes (CIRIT, CEDUST, and CERPA)	2	Develop institutions' research capacity on viral diseases	Strengthened infrastructure and deficit absorption in training/research in microbiology, virology, epidemiology	0,00	2,34	2,28	4,62	0,00	0,00	0,00	0,00
3	Strengthen research and specialized advanced training on Ebola and emerging diseases	3			10,34	20,68	10,34	41,35	0,00	0,00	0,00	0,00
4	Build latrines at primary, middle, and high schools that lack them	3	Strengthen school health to prevent infection in schools	Improved hygiene and health conditions in schools to prevent risks associated with EVD and other diseases	3,06	4,58	2,55	10,19	0,00	0,00	0,00	0,00
5	Build water points at primary, middle, and high schools that lack them	3			5,73	8,60	4,78	19,11	0,00	0,00	0,00	0,00
6	Rehabilitate water points at technical education centres	3			0,15	0,16	0,10	0,41	0,00	0,00	0,00	0,00
7	Revitalize school infirmaries at technical education centres	3			0,34	0,12	0,12	0,59	0,00	0,00	0,00	0,00
8	Develop and fit out school infirmaries at pre-university educational establishments	3			0,07	0,11	0,06	0,24	0,00	0,00	0,00	0,00
9	Build and fit out primary classrooms with access ramps and latrines and to reduce disparities	2			6,97	10,45	5,81	23,23	0,00	0,00	0,00	0,00
10	Build and fit out infrastructure for middle schools (classrooms, latrines) to reduce disparities in rural areas	2			2,62	3,93	2,19	8,74	0,00	0,00	0,00	0,00
11	Build infrastructure at high schools to reduce class size (classrooms, laboratories, libraries, and latrines)	2	0,72	1,09	0,60	2,41	0,00	0,00	0,00	0,00		
12	Citizenship and culture of peace education	3	Improve the understanding and acceptance of disease-related messages and directives to be followed	Increase in the population's ability to understand EVD messages and directives	0,76	1,14	0,64	2,54	0,00	0,00	0,00	0,00
13	Adult literacy	3			9,81	14,71	8,17	32,68	0,00	0,00	0,00	0,00
Total for projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs for projects included in the PIP (code 2)					10	18	11	39	0	0	0	0
Total for new projects not included in the PIP (code 3)					33	54	29	116	0	0	0	0
OVERALL TOTAL					43	72	40	155	0	0	0	0

10.1.3 Social Policy: Combatting social inequalities (Gender, Women, Child welfare)

SOCIAL ACTION					Needs				Financing obtained			
N°	Projects/Activities	Current status*	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Welcome centre for children (orphanage)	2	Reduce social inequalities caused by Ebola	Compensation for the loss of independence caused by Ebola through treatment and socioprofessional integration of children orphaned by Ebola and children who may be orphaned by future crises	0,82	0,25	0,04	1,11	0,00	0,00	0,00	0,00
2	Programme to rehabilitate/build women's self-help support centres (CAAF)	2	Reduce social inequalities caused by Ebola	Compensation for the loss of independence caused by Ebola through treatment and socioprofessional integration of children orphaned by Ebola and children who may be orphaned by future crises	3,44	2,57	2,18	8,19	0,00	0,00	0,00	0,00
3	Support and capacity building for national women's institutions (*)	2*	Reduce social inequalities caused by Ebola	Compensation for the loss of independence caused by the postponement of interventions (because of Ebola) to actively involve women in decision making	0,13	0,26	0,05	0,44	0,13	0,26	0,05	0,44
4	Child welfare system project (*)	2*	Reduce social inequalities caused by Ebola	Compensation for the loss of independence caused by the postponement (associated with Ebola) of interventions for the intersectoral treatment of vulnerable children	8,23	8,11	7,53	23,86	8,23	8,11	7,53	23,86
5	Socioeconomic reintegration programme (Social Development and Solidarity Fund, FDSS)	3	Reduce social inequalities caused by Ebola		0,23	0,23	0,23	0,70	0,00	0,00	0,00	0,00
6	Project to support social mobilization and resilience among affected households and the post-Ebola recovery	3	Reduce social inequalities caused by Ebola		5,91	5,08	6,54	17,53	0,00	0,00	0,00	0,00
7	Programme to support populations and families impacted by Ebola	3	Reduce social inequalities caused by Ebola		2,03	2,39	2,46	6,88	0,00	0,00	0,00	0,00
8	Project to support inclusive education	3	Reduce social inequalities caused by Ebola		0,56	0,28	0,00	0,83	0,00	0,00	0,00	0,00
9	National programme to expand social coverage	3	Reduce social inequalities caused by Ebola		0,24	0,39	0,30	0,93	0,00	0,00	0,00	0,00

10	Support to develop the national social protection policy	3	Build institutional capacity	Develop an approach to social policy that does not use category-based interventions and that can respond to future crises and evolve based on the needs of the most vulnerable citizens	0,15	0,19	0,11	0,46	0,00	0,00	0,00	0,00
11	Social transfers	3			33,89	16,95	12,71	63,55	0,00	0,00	0,00	0,00
Total for projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs for projects included in the PIP (code 2)					12,61	11,19	9,80	33,61	8,35	8,36	7,58	24,30
Total for new projects not included in the PIP (code 3)					43,01	25,52	22,36	90,89	0,00	0,00	0,00	0,00
OVERALL TOTAL					55,62	36,71	32,16	124,49	8,35	8,36	7,58	24,30

The “social transfers” programme will include immediate actions (relatively small number of beneficiaries (Ebola widows, widowers, and orphans)) and actions targeting the populations’ resilience (the preceding targets and most vulnerable households in the affected areas) to avert or mitigate the epidemic’s long-term impacts on the development in the areas affected by the epidemic. The programme’s target populations include:

- The most vulnerable households in the affected areas and whose lives and livelihoods are threatened by the Ebola epidemic or could be threatened by future calamities.
- Populations directly affected by the epidemic: financial aid to bereaved families (widows, widowers, and orphans);
- Out-of-school children: financial aid to families whose children left school because of Ebola;
- Individuals stigmatized by or recovered from Ebola:
- Aid to households at risk of facing food insecurity in 2015 (according to WFP evaluations);
- Those involved in the bush meat sector (hunters, sellers)
- Women’s organizations: financial aid to resume revenue-generating activities for women.

This emergency social programme will include social cash transfers and in-kind contributions (in particular, basic foodstuffs). The mechanism for selecting the households and individuals concerned and the distribution mechanism will require an in-depth study with the technical partners involved in the social component (including the World Bank, UNICEF, WFP, and Save the Children). The target population for this programme is 100,000 households with an annual allocation per household of USD212, or approximately 50% of the average national income.

10.2 Economic sectors

10.2.1 Agriculture

AGRICULTURE					Needs				Financing Obtained			
N°	Projects / Activities	Current status*	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Acquisition and distribution of agricultural inputs (seeds, fertilizers, phytosanitary products)	2	Renew support to agricultural intensification	Compensating for losses due to the crisis and the strengthening of food security	30,26	30,26	30,26	90,79	0,00	0,00	0,00	0,00
2	Building of storage and conservation infrastructure in the large production areas	3	Support conservation and storage	Reducing the vulnerability of the sector in a crisis situation by preventing losses due to rotting and the lack of processing	4,18	3,63	3,03	10,83	0,00	0,00	0,00	0,00
3	Supplying the rice-cropping areas (Lower and Upper Guinea) with processing equipment	3	Support the improvement of agricultural products processing		0,30	0,30	0,30	0,91	0,00	0,00	0,00	0,00
4	Strengthening advisory services	3	Improve agricultural productivity	Building intervention capacities in terms of advisory services to support the recovery and resilience of the agricultural sector	0,25	0,25	0,25	0,76	0,00	0,00	0,00	0,00
5	Rehabilitation of rural roads	1	Facilitate access to rural areas	Facilitating access to isolated areas that constitute a factor of vulnerability for the health care system and the agricultural system value chain	1,21	6,87	13,75	21,83	0,00	0,00	0,00	0,00
6	Development of the lowlands	1	Improve agricultural production and strengthening food security	Reducing losses in the field, facilitating the supply of markets and increasing access to production areas	3,03	0,00	0,00	3,03	0,00	0,00	0,00	0,00
7	Development of 10,000 ha of plain lands	1		Boosting rice-cropping production to reduce dependence on imports	0,00	6,05	7,94	13,99	0,00	0,00	0,00	0,00
8	Project for Strengthening Food Security (*)				4,00	0,00	0,00	4,00	4,00	0,00	0,00	4,00

9	<i>Recensement National de l'Agriculture et de l'Elevage (RNAE, National Census on Crop and Livestock Farming)</i>	Update data and statistics on the rural sector aimed to better guide the strategic axes of development	The agricultural data and statistics are over 15 years old and are not reliable. There is a need to better determine the current situation of the sector	0,00	2,69	2,74	5,43	0,00	0,00	0,00	0,00
Total projects included in the PIP				8,24	15,60	24,43	48,27	4,00	0,00	0,00	4,00
Total additional needs of projects included in the PIP (code 2)				30,26	30,26	30,26	90,79	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)				4,73	4,19	3,58	12,50	0,00	0,00	0,00	0,00
OVERALL TOTAL				43,23	50,06	58,28	151,56	4,00	0,00	0,00	4,00

(*) Funding acquired

10.2.2 Livestock farming

LIVESTOCK FARMING					Needs				Financing obtained			
N°	Projects / Activities	Current status *	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Study and construction of a slaughterhouse and butcher units in Conakry	2	Improve the slaughterhouse conditions of the animals	Ensuring health standards of sale points	2,54	0,79	5,71	9,04	0,00	0,00	0,00	0,00
2	Development of short-cycle livestock farming	3	Raise the animal production standard in the affected areas	Reducing the consumption of bushmeat, which is considered the main vector of contamination	0,83	0,35	0,25	1,43	0,00	0,00	0,00	0,00
3	Revitalization of social and professional organizations of the sector	3		Supporting the relaunching of activities of existing organizations	0,01	0,01	0,00	0,02	0,00	0,00	0,00	0,00
4	Improvement of care for the national livestock	3	Improve animal health	Vaccination campaign to reduce the reservoir of the virus with epidemic potential	0,47	0,47	0,47	1,42	0,00	0,00	0,00	0,00
5	Improvement of the marketing of livestock and animal products	3	Set up appropriate infrastructure for the marketing of livestock and animal	Increasing access to livestock farming products to the populations	0,01	0,47	0,47	0,96	0,00	0,00	0,00	0,00
Total projects included in the PIP(code1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code2)					2,54	0,79	5,71	9,04	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)					1,33	1,31	1,19	3,83	0,00	0,00	0,00	0,00
OVERALL TOTAL					3,86	2,10	6,91	12,87	0,00	0,00	0,00	0,00

10.2.3 Fisheries

FISHERIES					Needs				Financing obtained			
No.	Projects / Activities	Current status *	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Set-up of two fishing inputs supply centres	3	Increase production, conservation, distribution and consumption of fish products	Reducing the consumption of bushmeat, which is considered the main vector of contamination	0,09	0,09	0,18	0,35	0,00	0,00	0,00	0,00
2	Expansion of fish farms	3		Reducing the consumption of bushmeat, which is considered the main vector of contamination	0,31	0,31	0,16	0,79	0,00	0,00	0,00	0,00
3	Strengthening of conservation and distribution infrastructure	3		The insufficient amounts of fishing products during periods of strong demand in the urban and rural areas	0,16	0,08	0,16	0,39	0,00	0,00	0,00	0,00
4	Strengthening of organizational and institutional capacities of fishing and aquaculture actors	3	Improve the quality of services and products of the fish delivered to the local and foreign markets	The lack of competitiveness of the 'Guinea'-labelled products and the weak presence of fishing actors in the regional, subregional and international organizations	0,06	0,06	0,03	0,15	0,00	0,00	0,00	0,00
5	Construction of 10 primary health care units	3	Preserve the health of actors against the diarrheal diseases, including Ebola, in the landing points of the fish products	Immigrants have direct access to the landing points, which face overpopulation	0,27	0,27	0,13	0,67	0,00	0,00	0,00	0,00
6	Construction of 10 health control stations at the access to landing points	3	Control the entry and exit of the artisanal fishing wharfs	The wharfs have become important economic hubs where control stations must be set up	0,30	0,18	0,12	0,61	0,00	0,00	0,00	0,00
7	Construction of water points (wells)	3	Ensure the sanitation of the landing points for fish products	All the wharfs are at risk of water shortages despite the dispersal of the community in these areas	0,20	0,07	0,07	0,34	0,00	0,00	0,00	0,00

8	Construction of public latrines	3	Ensure hygiene and public health in the wharfs and other gathering places of the fishing communities	In addition to the water needs for the production of ice, landing points of the fish products are in a poor and unsanitary state	0,15	0,05	0,05	0,24	0,00	0,00	0,00	0,00
9	Development of 40 fish farms	1	Replicate the experiences of the PPGF project in other potential areas	There are opportunities and the possibilities for expansion in the specific area of Guinée Forestière	0,00	0,61	0,41	1,02	0,00	0,00	0,00	0,00
10	Construction and equipping of removable cold storage units with 60 tonnes per unit storage capacity	1	Regularly supply the rural areas with fish products	There is a severe lack of fish products in the interior of the country	0,00	1,38	1,33	2,71	0,00	0,00	0,00	0,00
11	Rehabilitation and expansion of Infrastructure and equipment of the National Centre for Fisheries protection	1	Ensure the protection of marine and coastal ecosystems, and fight against illegal, unreported and unregulated (IUU) fishing	Guinea is on the list of Non-Co-operating Countries with the European Union in fighting IUU fishing	0,00	1,82	2,42	4,24	0,00	0,00	0,00	0,00
Total projects included in the PIP (code1)					0,00	3,80	4,16	7,96	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)					0	0	0	0,00	0	0	0	0,00
Total new projects not included in the PIP (code 3)					1,54	1,10	0,89	3,53	0,00	0,00	0,00	0,00
OVERALL TOTAL					1,54	4,91	5,05	11,49	0,00	0,00	0,00	0,00

10.2.4 Trade

TRADE					Needs				Financing obtained			
No.	Projects / Activities	Current status*	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Matoto Food Control Laboratory	3	Improve the health security of food and products at the national level	Prevention of phytosanitary risks, which are potential sources for health crises	0,42	0,00	0,00	0,42	0,00	0,00	0,00	0,00
2	Development of the national chain of local products (potato, coffee, banana)	3	Improve the national value chain of local products	Facilitating the sale of local products should borders be closed due to EVD and other disasters	3,39	5,08	3,39	11,86	0,00	0,00	0,00	0,00
3	Building of modern markets	3	Implement public health and hygiene prevention measures to avoid the spread of EVD and other diseases	Creating a marketing framework to prevent phytosanitary risks, sources of Ebola and other diseases	11,38	6,21	3,10	20,70	0,00	0,00	0,00	0,00
4	Regulation of hunting products	3	Implement public health prevention measures to avoid the spread of EVD and other diseases	Set-up of a regulatory framework on the behaviour of actors involved in the hunting sector	0,08	0,00	0,00	0,08	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)					15,28	11,29	6,49	33,07	0,00	0,00	0,00	0,00
OVERALL TOTAL					15,28	11,29	6,49	33,07	0,00	0,00	0,00	0,00

10.2.5 Industry and Small and Medium-Sized Enterprises (SMEs)

INDUSTRY					Needs				Financing obtained			
No.	Projects/Activities	Current status*	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Strengthen the strategic development framework of the sector (industry and SMEs)	3	Establish a reference framework for developing industry and SME sector taking into account its vulnerability to EVD and other disasters	Lack of intervention mechanisms in the sector to cope with disasters	0,37	0,00	0,00	0,37	0,00	0,00	0,00	0,00
2	Economic Emergency Fund to support the private sector	3	Support the revival of the private sector	Providing financial resources to enterprises affected by EVD and other disasters	84,74	42,37	0,00	127,10	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)					85,10	42,37	0,00	127,47	0,00	0,00	0,00	0,00
OVERALL TOTAL					85,10	42,37	0,00	127,47	0,00	0,00	0,00	0,00

The total amount of the Economic Emergency Fund for the private sector (150 million) was estimated on the basis of forecasts of losses in added value in 2014 in the manufacturing (30 million), construction (47 million), trade (86 million), transport and hotel industry (18 million) and other sectors. The fund shall be established over a two-year period (see table above). The estimates and the added value of achievements for 2014 had not yet been available at the time of writing this report. The amount of the fund represents a share of forecasted losses.

Forecasts of 2014 sectoral added values (current US million dollars)

	Forecasts made to December 2014 (with the Ebola outbreak)	Forecasts made to June 2014 (prior to the Ebola outbreak)	Economic impact of the Ebola outbreak
Primary sector	1 048.99	1 337.25	-288.26
Agriculture, hunting	629.02	856.04	-227.02
Livestock farming	88.53	90.01	-1.48
Fisheries	49.70	49.70	0.00
Forestry and forests	281.74	341.50	-59.76
Secondary sector	2 407.65	2 497.20	-89.56
Mines	982.31	996.16	-13.85
Manufacturing sector	498.84	529.08	-30.23
Water, electricity	32.68	30.88	1.80
Building and Public Works	893.82	941.09	-47.27
Tertiary sector	2 364.92	2 472.62	-107.70
Trade	1 385.28	1 470.97	-85.69
Transport	361.88	380.34	-18.46
Administration	376.37	376.37	0.00
Other	241.39	244.94	-3.55
Import duties and taxes	770.47	811.66	-41.19
GDP at market price	6 592.02	7 118.73	-526.71

Source: Macro-economic Framework of June and December 2014.

10.2.6 Transport\

TRANSPORT					Needs				Financing obtained			
No.	Projects / Activities	Current status *	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Establish a health control mechanism in the maritime and river wharfs	3	Improve health conditions	Facilitating transportation and health control in the wharfs	0,00	1,82	2,42	4,24	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)					0	0	0	0	0	0	0	0
Total new projects not included in the PIP (code 3)					0,00	1,82	2,42	4,24	0,00	0,00	0,00	0,00
OVERALL TOTAL					0,00	1,82	2,42	4,24	0,00	0,00	0,00	0,00

10.2.7 Environment

ENVIRONMENT					Needs				Financing obtained			
No.	Projects / Activities	Current status	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Conserve nature and prevent the haemorrhagic fever caused by EVD	3	Prevent against risk of EVD and other diseases	Better management of the fauna in order to prevent the recurrence of EVD	0,74	0,48	0,48	1,71	0,00	0,00	0,00	0,00
2	Environmental programme on public/school latrines	2	Prevent against the risk of EVD and other diseases	Ensure better health care for children to reduce the disease transmission vectors	0,49	0,36	0,00	0,86	0,00	0,00	0,00	0,00

3	Awareness raising on hygiene in Conakry	3	Prevent against the risk of EVD and other diseases	Ensure better waste management to reduce the disease transmission vectors	0,14	0,00	0,00	0,14	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)					0,49	0,36	0,00	0,86	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)					0,88	0,48	0,48	1,85	0,00	0,00	0,00	0,00
OVERALL TOTAL					1,37	0,85	0,48	2,70	0,00	0,00	0,00	0,00

10.3 Infrastructure

10.3.1 Telecom and New Information and Communication Technologies (NICT)

TELECOMMUNICATIONS					Needs				Financing obtained			
No.	Projects / Activities	Current status	Strategic axes	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Nation-wide radio broadcasting coverage	2	Strengthening of nation-wide radio broadcasting coverage to facilitate the prevention of and awareness raising on EVD and other diseases	Facilitation of the dissemination of messages (awareness raising and prevention) on the development of the EVD and other diseases	0,00	28,81	14,41	43,22	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0	0	0	0	0	0	0	0
Total additional needs of projects included in the PIP (code 2)					0,00	28,81	14,41	43,22	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
OVERALL TOTAL					0,00	28,81	14,41	43,22	0,00	0,00	0,00	0,00

10.3.2 Public Works

PUBLIC WORKS					Needs				Fin
No.	Projects / Activities	Current status *	Strategic objectives	Justification	2015	2016	2017	Total	2015
					USD	USD	USD	USD	USD
1	Rehabilitate the Mamou-Dabola-Kouroussa stretch of the National Road N1 (RN 1)	2	Strengthen road infrastructure	Facilitating access to isolated areas that constitute a factor of vulnerability for the health system and the value chain of the agricultural and trade systems	0,00	48,42	60,53	108,95	0,00
2	Rehabilitation work PK 53 from Kissidougou-PK 35 from Guékédou (67 km)	3			0,00	36,32	24,03	60,34	0,00

Total projects included in the PIP (code 1)							0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)							0,00	48,42	60,53	108,95	0,00
Total new projects not included in the PIP (code 3)							0,00	36,32	24,03	60,34	0,00
OVERALL TOTAL							0,00	84,74	84,55	169,29	0,00

10.3.3 Hydraulics

HYDRAULICS					Needs				Financing obtained			
No.	Projects / Activities	Current status *	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Drinking water supply project to small isolated village communities from compact surface water purification stations (Hydropur).	3	Strengthen the population's resilient capacity against Ebola and water diseases through the improvement of the drinking water supply	Reducing the shortages of the drinking water supply	0,00	3,90	1,95	5,85	0,00	0,00	0,00	0,00
2	Drinking Water Supply (AEP) project in three secondary towns (Beyla, Fria and Koubia)	3			0,00	9,60	4,80	14,41	0,00	0,00	0,00	0,00
3	Drinking Water Supply (AEP) project in the rural region of Lower Guinea (Coyah, Dybréka and Fria)	3			0,00	4,34	2,17	6,51	0,00	0,00	0,00	0,00
4	Project to set up 100 AEPs in the four natural regions	3			0,00	14,78	7,39	22,18	0,00	0,00	0,00	0,00
5	Drinking Water Supply project for the rural region of Upper Guinea	3			0,00	4,30	2,15	6,45	0,00	0,00	0,00	0,00
6	Construction, supply and connection of new industrial drills in the wellfields of Kakoulima (3 units) and Kaporo (4 units)	3		Strengthening the capacity of the water distribution network	0,00	2,80	1,40	4,20	0,00	0,00	0,00	0,00
7	Strengthening production and the distribution of drinking water in the village of Siguiri	3		Reducing the shortages of drinking water supply	0,00	5,08	2,54	7,63	0,00	0,00	0,00	0,00
8	Strengthening of the production capacities and storage of drinking water of the town of Boffa	3			2,54	5,09	2,54	10,18	0,00	0,00	0,00	0,00
9	Strengthening of drinking water production of the town of Kissidougou, Kouroussa, Dinguiraye	3			0,00	0,47	0,23	0,70	0,00	0,00	0,00	0,00
10	Increasing the storage capacity of Sonfonia lake and construction of a second water treatment station	3			0,00	8,58	8,58	17,17	0,00	0,00	0,00	0,00
11	Regional Rebalancing Project of the	3			0,00	37,74	18,87	56,61	0,00	0,00	0,00	0,00

	<i>Alimentation en eau potable et Assainissement</i> (Drinking Water Supply and Sanitation)												
12	Rehabilitation Project of the National Water Level Observation Network, strengthening of capacities.	3	Rehabilitate, strengthen and upgrade the water infrastructure standards to increase the drinking water supply rate so that the population will be less vulnerable to diseases	Improving the facilities and the equipment of the distribution network	0,00	1,42	0,71	2,13	0,00	0,00	0,00	0,00	
13	Rehabilitation of grey cast iron pipes and asbestos-cement for primary distribution systems in the areas of Matam, Madina, Madina and Sig Almamy	3			0,00	3,39	1,69	5,08	0,00	0,00	0,00	0,00	
14	Rehabilitation of public water catchment facilities of Kakoulima dating from 1903	3			0,00	17,88	8,94	26,82	0,00	0,00	0,00	0,00	
15	Rehabilitation of existing facilities and works in Conakry	3			0,00	49,34	24,67	74,01	0,00	0,00	0,00	0,00	
16	Rehabilitation and strengthening of existing AEP systems of 7 regional capitals of the country	3			0,00	54,23	27,12	81,35	0,00	0,00	0,00	0,00	
17	Rehabilitation and strengthening of existing AEP systems of the 17 equipped secondary towns	3			0,00	31,63	15,82	47,45	0,00	0,00	0,00	0,00	
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00	
Total additional needs of projects included in the PIP (code 2)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00	
Total new projects not included in the PIP (code 3)					2,54	254,58	131,58	388,71	0,00	0,00	0,00	0,00	
OVERALL TOTAL					2,54	254,58	131,58	388,71	0,00	0,00	0,00	0,00	

10.4 Governance

10.4.1 Civil Service and Administrative Reform

CIVIL SERVICE					Needs				Financing obtained			
No.	Project	Current status *	Strategic axes	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Restructuring and re-design of the central, decentralized and deconcentrated state structures	3	Strengthening of the institutional and organic organization of the public administration in order to effectively manage the crisis situations	Mitigating the inadequacies of the Government highlighted by the EVD	0,91	0,91	0,00	1,82	0,00	0,00	0,00	0,00
2	Recurring to the diaspora to strengthen the human resources capacity of the Administration and the private sector (TOKTEN)	3	Strengthening of the capacities of public and private human resources in the sectors covered by the PAPP	Contribution of qualified management for the implementation of PAPP projects and programmes	1,82	1,82	1,69	5,33	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
					2,72	2,72	1,69	7,14	0,00	0,00	0,00	0,00
					2,72	2,72	1,69	7,14	0,00	0,00	0,00	0,00

10.4.2 Territorial Administration and Decentralization

MINISTRY OF TERRITORIAL ADMINISTRATION AND	Needs	Financing obtained
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DECENTRALIZATION (MATD)												
No.	Projects / Activities	Current status *	Strategic axes	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Funding for the National Contingency Plan	3	Disaster management and prevention	Coordination of assistance to Ebola-affected families, victims of disasters and displaced persons	4,12	3,99	0,40	8,51	0,00	0,00	0,00	0,00
2	Establishment of the <i>Fonds National de l'Assainissement et de la salubrité publique</i> (National Sanitation and Public Health Fund)	3	Strengthen public health to prevent infection in public places	Improving hygiene and health conditions in the public places to prevent the risks linked to EVD and other diseases	18,16	18,16	18,16	54,47	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)					22	22	19	62,98	0	0	0	0,00
OVERALL TOTAL					22,27	22,15	18,56	62,98	0,00	0,00	0,00	0,00

10.4.3 Civil Protection

CIVIL PROTECTION					Needs				Financing obtained			
					2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Completion of the legal and institutional framework of the defence sector to align with the rules and principals of the state of law	3	Strengthen intervention capacities of the defence and security forces	Having a natural disaster rapid response mechanism	0,44	0,13	0,00	0,57	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0	0,00	0,00	0,00	0	0,00	0,00	0,00

Total additional needs of projects included in the PIP (code 2)	0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)	0	0,13	0,00	0,57	0	0,00	0,00	0,00
OVERALL TOTAL	0,44	0,13	0,00	0,57	0,00	0,00	0,00	0,00

10.4.4 Communications

COMMUNICATIONS					Needs				Financing obtained			
No.	Projects / Activities	Current status *	Strategic objectives	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD
1	Improvement of radio coverage in the country	3	Strengthen national radio coverage to facilitate prevention of and awareness raising on EVD and other disasters	Facilitating the dissemination of messages (awareness raising and prevention) on the development of EVD and other disasters	0,41	0,04	0,04	0,49	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
					0,41	0,04	0,04	0,49	-	-	-	-
					0,41	0,04	0,04	0,49	0,00	0,00	0,00	0,00

10.4.5 Public finances

PUBLIC FINANCES					Needs				Financing obtained			
No.	Projects / Activities	Current status *	Strategic axes	Justification	2015	2016	2017	Total	2015	2016	2017	Total
					USD	USD	USD	USD	USD	USD	USD	USD

1	Clearance of domestic debt	3	Support to the revival of the private sector	Reimbursement of debt owed to the private sector and provision of financial support	30,50	11,86	0,00	42,37	0,00	0,00	0,00	0,00
Total projects included in the PIP (code 1)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total additional needs of projects included in the PIP (code 2)					0,00	0,00	0,00	0,00	0,00	0,00	0,00	0,00
Total new projects not included in the PIP (code 3)					30,50	11,86	-	42,37	-	-	0,00	-
OVERALL TOTAL					30,50	11,86	0,00	42,37	0,00	0,00	0,00	0,00

10.5 Summary of various costs based on status in relation of PIP (millions of dollars)

Types of projects	2015	2016	2017	Total
	USD	USD	USD	USD
I- Total projects included in the PIP (code 1)	8,01	20,47	30,27	58,75
II - Total additional needs of projects included in the PIP (code 2)	213,64	398,79	325,80	938,23
III - Total new projects not included in the PIP (code 3)	541,22	625,79	413,04	1580,04
OVERALL TOTAL	762,87	1045,05	769,10	2577,03

10.6 Summary of costs and financing obtained based on the nature of the project (millions of dollars)

Costs (USD millions)						Financing obtained			
	2015	2016	2017	Total	% of total	2015	2016	2017	Total
	USD	USD	USD	USD		USD	USD	USD	USD
Health, Nutrition, and Water, Sanitation and Hygiene for all	469,19	663,55	495,09	1 627,83	63%	309,52	260,67	213,47	783,66
Health	466,64	408,97	363,50	1 239,11	48%	309,52	260,67	213,47	783,66
Hydraulics	2,54	254,58	131,58	388,71	15%	0,00	0,00	0,00	0,00
Governance, Peace Consolidation, and Social Cohesion	56,35	36,91	20,29	113,56	4%	-	-	-	-
Civil service	2,72	2,72	1,69	7,14	0%	0,00	0,00	0,00	0,00
Territorial administration	22,27	22,15	18,56	62,98	2%	0,00	0,00	0,00	0,00
Civil protection	0,44	0,13	0,00	0,57	0%	0,00	0,00	0,00	0,00
Communications	0,41	0,04	0,04	0,49	0%	0,00	0,00	0,00	0,00
Public finances	30,50	11,86	0,00	42,37	2%	0,00	0,00	0,00	0,00
Education, social protection, child welfare, and basic services	99,00	108,83	72,13	279,97	11%	8,35	8,36	7,58	24,30
Education	43,38	72,13	39,97	155,48	6%	0,00	0,00	0,00	0,00
Social action	55,62	36,71	32,16	124,49	5%	8,35	8,36	7,58	24,30
Socioeconomic revitalization	150,38	226,94	178,59	555,91	22%	4,00	-	-	4,00
Agriculture	43,23	50,06	58,28	151,56	6%	4,00	0,00	0,00	4,00
Livestock farming	3,86	2,10	6,91	12,87	0%	0,00	0,00	0,00	0,00
Fisheries	1,54	4,91	5,05	11,49	0%	0,00	0,00	0,00	0,00
Trade	15,28	11,29	6,49	33,07	1%	0,00	0,00	0,00	0,00
Industry	85,10	42,37	0,00	127,47	5%	0,00	0,00	0,00	0,00
Transport	0,00	1,82	2,42	4,24	0%	0,00	0,00	0,00	0,00
Environment	1,37	0,85	0,48	2,70	0%	0,00	0,00	0,00	0,00
ICT	0,00	28,81	14,41	43,22	2%	0,00	0,00	0,00	0,00

Public works	0,00	84,74	84,55	169,29	7%	0,00	0,00	0,00	0,00
OVERALL TOTAL	774,92	1 036,24	766,10	2 577,26	100%	321,88	269,03	221,05	811,96

11. Annex 2: Some of the main measures in the Post-Ebola Priority Action Plan (PAPP)

Poverty Reduction Strategy Paper (PRSP) Axes

Main measures

Governance

- Strengthening of Strategy and Development Sectoral Offices
- Strengthening of the General Administration of Large Projects
- Establishment of the Court of Auditors
- Strengthening of the public procurement regulatory authority
- Capacity building of the National Institute of Statistics
- Operationalization of an effective early warning and rapid response covering the whole country
- Implementation of the *Programme de Réforme de l'Etat. et de Modernisation de l'Administration* (PREMA, Programme for Reforming the State and Modernizing the Administration)
- Operationalizing of the consultation and coordination framework between the Government and development partners
- Establishment of a new investment code
- Compliance of the budgetary and accounting management of public bodies benefitting from allocated revenues with the provisions of the Budget Framework Law (LORF) and the Fiscal Management and Public Accounting (RGGBCP)
- Implementation of the new public procurement code

Growth

- Strengthening of the Agence Guinéenne de Promotion des Exportations (AGUIPEX) and Descriptive Import Application/Descriptive Export Application (DIA/DEA) services
- Revision of trade regulations to reflect the globalization context and possible crisis situations such as Ebola
- Creation of an emergency fund to support the private sector during disasters such as the crisis caused by EVD
- Financial support to facilitate loan repayments and stabilize the cash flow of small and medium-sized enterprises (SMEs) affected by the crisis
- Implementation of a policy to promote local products that have been heavily affected by the negative media caused by EVD
- Approval of the schedule to verify arrears on the domestic debt 2011-2014
- Effective implementation of the new VAT credit refund mechanism
- Further strengthening of the SME Services
- Drafting of a new microfinance legislation
- Strengthening of communications activities to promote the resumption of mining activities
- Establishment of a one-stop shop for mining
- Finalization of the implementing legislation for the mining code

Social services

- Gradual and steady increase in the health budget to reach 10 percent of total state spending by 2020
- Set-up of surveillance committees and mobilization of social partners
- Adoption by the Government of the National Inclusive Finance Strategy
- Strengthening of microfinance institutions (MFIs) through training and supervision
- Establishment of a risk centre in order to make the portfolio management of MFIs more efficient
- Set-up of health surveillance teams in the educational domain
- Development of a national social protection policy

Infrastructure

- Creation of humanitarian transport corridors to facilitate the secure movement of basic foodstuffs across borders
 - Use of the road agency formula in tandem with the second generation Road Maintenance Fund (RMF) to follow the example of most countries of the subregion
 - Effective start of the construction of the National Backbone
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