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THIS ACTION IS FUNDED BY THE EUROPEAN UNION

ANNEX

to the Commission Implementing Decision on the financing of the multiannual individual measure in favour of the thematic programme on Global Challenges (People) for 2023-2025

Action Document for Acceleration Human Development (HDX) – polio component

This document constitutes the multiannual work programme within the meaning of Article 110(2) of the Financial Regulation, within the meaning of Article 23 of the NDICI-Global Europe Regulation.

1 SYNOPSIS

1.1 Action Summary Table

1. Title CRIS/OPSYS business reference Basic Act	Acceleration Human Development (HDX) – polio component OPSYS number: ACT-62423 Financed under the Neighbourhood, Development and International Cooperation Instrument (<u>NDICI-Global Europe</u>)
2. Team Europe Initiative	The polio component will contribute to the implementation of the EFSD+ Acceleration Human Development (HDX) Proposed Investment Plan (PIP) under the Human Development Window. It is thus aligned with the Global Gateway Strategy's health investments and the Team Europe Initiatives in health.
3. Zone benefiting from the action	The action shall be carried out in Sub-Saharan Africa, in Asia and the Pacific, and in the Americas and the Caribbean.
4. Programming document	Global Challenges Health
5. Link with relevant MIP(s) objectives / expected results	The action is fully aligned with the objectives of the Global Challenges MIP and supports the EFSD+ Human Development Investment Window, notably by tackling non-communicable and communicable diseases (in this case polio) and supporting preventive action with the objective of disease eradication.
PRIORITY AREAS AND SECTOR INFORMATION	
6. Priority Area(s), sectors	Human development/ health care
7. Sustainable Development Goals (SDGs)	Main SDG (1 only): <ul style="list-style-type: none">- SDG 3: Ensure healthy lives and ensure well-being for all at all ages Other significant SDGs: <ul style="list-style-type: none">- SDG 1: Ending poverty in all its forms;- SDG 4: Ensure inclusive and equitable quality education and promote lifelong

	learning opportunities for all; - SDG 5: Achieve gender equality and empower all women and girls ¹			
8 a) DAC code(s)	121 Health, General 160 Other social infrastructure & services;			
8 b) Main Delivery Channel	42000 / 42004 – European Investment Bank (EIB); 41000 – United Nations agency, fund or commission (WHO/ UNICEF);			
9. Targets	<input type="checkbox"/> Migration <input type="checkbox"/> Climate <input checked="" type="checkbox"/> Social inclusion and Human Development <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Biodiversity <input type="checkbox"/> Education <input type="checkbox"/> Human Rights, Democracy and Governance			
10. Markers (from DAC form)	General policy objective @	Not targeted	Significant objective	Principal objective
	Participation development/good governance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Aid to environment @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Gender equality and women's and girl's empowerment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Trade development	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Reproductive, maternal, new-born and child health	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Disaster Risk Reduction @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Inclusion of persons with Disabilities @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Nutrition @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	RIO Convention markers	Not targeted	Significant objective	Principal objective
	Biological diversity @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Combat desertification @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Climate change mitigation @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Climate change adaptation @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Internal markers	Policy objectives	Not targeted	Significant objective	Principal objective

¹ The [Gender Action Plan III](#) is a Joint communication by the Commission and the High Representative of the Union for Foreign Affairs and Security Policy which was welcomed through [EU Presidency Conclusions](#) of 16 December 2020. Drafting was led by European Commission in close consultation with EU Member States, EEAS, civil society organisations, partner governments, and international organisations (UN entities, International Finance Institutions among others). The different parties contributed to the drafting of the document through meetings and through responses to a survey conducted during the process.

and Tags:	Digitalisation @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	digital connectivity digital governance digital entrepreneurship digital skills/literacy digital services	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	NO <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	/
	Connectivity @	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	digital connectivity energy transport health education and research	YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	NO <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	/
	Migration @ (methodology for tagging under development)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Reduction of Inequalities @ (methodology for marker and tagging under development)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Covid-19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

BUDGET INFORMATION

12. Amounts concerned	Budget line(s) (article, item): Budget heading 14.020240 – Global Challenges People		
	For 2023:		
	Budget Line	Name / Title	Commitment Appropriation
	14.020240 –	Global Challenges People	EUR 275,000,000.00
	For 2025:		
	14.020240 –	Global Challenges People	27,514,000.00
	Total estimated cost: EUR 302,514,000.00		
	Total amount of EU budget contribution EUR 302,514,000.00		
<p>The contribution is for an amount of EUR 275,000,000 from the general budget of the European Union for year 2023 and for an amount of EUR 27,514,000.00 from the general budget of the European Union for year 2025, subject to the availability of appropriations for the respective financial years following the adoption of the relevant annual budget, or as provided for in the system of provisional twelfths.</p>			

MANAGEMENT AND IMPLEMENTATION	
13. Type of financing	Indirect management with the European Investment Bank (EIB)

1.2 Summary of the Action

The EIB is to provide funding to be disbursed to the United Nations Children's Fund and the World Health Organization in order to develop and execute the Global Polio Eradication Initiative (GPEI).

The programme responds to Priority area 1 of the NDICI-Global Europe Global Challenges Multi-annual Indicative Programme (MIP), notably the Health and Gender equality and women's and girls' empowerment objectives set out in the MIP.

The Programme aligns with the key policy objectives as outlined in the NDICI-GE Regulation because it is aimed at, particularly:

- investing in health and economic development strategies and addressing global challenges in relation to health and primary healthcare services. It is also contributing to strengthening WHO's leading role in Global Health, as a priority in the [EU Global Health Strategy](#).
- aiming to achieve G1 as per the OECD-DAC (as defined below) gender equality marker and in compliance with gender equality as a relevant EU policy within the NDICI-GE Regulation and EU strategy on gender equality for external actions, this operation is targeting gender equality as a significant objective.

2 RATIONALE

2.1 Context

The Global Challenges Programme (GCP) of the Neighbourhood, Development and International Cooperation Instrument – Global Europe (NDICI-GE) sets out the global and multilateral dimension of implementation of the EU's political priorities. It aims to strengthen the EU as a global actor in the delivery of the 2030 Agenda and the Paris Agreement to help eradicate poverty, reduce inequalities and achieve sustainable development.

NDICI-Global Europe Instrument foresees a Global Challenges programme for 2021-2027 which will complement and strengthen the country and regional dimensions of EU action to pursue and project EU's interests and values in support of universal global agendas and initiatives, multilateralism and the rules-based global order, and position the EU as a global leader to spearhead collaborative and transformative changes that help building back better. In line with the United Nations 2030 Agenda for Sustainable Development, the European Consensus on Development and the geopolitical priorities of the European Commission, the programme Global Challenges will support actions of a global nature, contributing to the objective of 'A Stronger Europe in the World'.

It will therefore be a key instrument to ensure the external projection of EU's policies, by helping leverage more effectively externally EU's regulatory power, high environmental and social standards, unique single market, and social market economy model.

The GCP identifies global health as a key priority for the Commission and EU Member States, with the aim strengthen EU global health action and support the WHO as outlined in the EU Global Health Strategy. Health security is also a priority in the Global Strategy for the EU's Foreign and Security Policy. In contribution to achieving the global commitments on Health, the Commission is a strong supporter of the Global Fund to fight AIDS, Tuberculosis, and Malaria since it was established in 2002. Other flagship initiatives are GAVI - The Vaccine Alliance, which is critical for ensuring innovative vaccines at preferential prices to the poorest countries; the WHO's Universal Health Coverage Partnership, which helps countries to create sustainable resilient health system in a consistent manner (emphasising support to health service delivery, health workforce, health information systems, access to essential medicines, health systems financing, and leadership and governance), UNFPA Supplies

Partnership, which provides access to quality assured reproductive health and family planning products to women and girls and the Pandemic Fund.

Against the background of the GCP and towards the same objectives, the EFSD+ Operational Board in April 2022 gave its positive opinion to a dedicated EFSD+ Human Development Investment Window.

The objectives of the Human Development Window (HDW) are two-fold:

1. Boost support to human development by using ODA funds to leverage additional financing. The window will generate investment cases for human development, particularly when and where the market would fail to equitably fully deliver on its own and governments are unable to correct those failures through regulation or public provision (for instance because the potential beneficiaries lack purchasing power or the market is too small or not commercially viable, despite offering high social returns).
2. Spark the essential collaboration with the private sector and active IFIs in this space in order to deliver innovative and sustainable solutions.

The Human Development Investment Window identifies a range of proposed areas for intervention, including tackling non-communicable and communicable diseases (COVID-19, malaria, HIV, TB, polio, NTDs, etc.) and supporting preventive action (through multisector interventions, e.g. on nutrition, water access and sanitation, environmental management, etc.). The current action contributes specifically to the eradication of polio as a communicable disease.

2.2 Problem Analysis

Problem analysis

The Covid-19 pandemic has brought to the fore the risk of communicable diseases for human wellbeing and economic development, particularly in countries with weak health systems. Despite impressive progress on global health in the past 20 years, only 50% of the world's population has access to basic health care, while inequalities persist within and between countries. Health systems in many partner countries remain fragile, underfunded and confronted with deadly diseases. The COVID-19 pandemic has confirmed the need for a ONE Health approach, exposed the lack of global health security preparedness and significantly hindered progress on global health. Essential health services are interrupted, years of progress are reversed for maternal and child health, access to family planning, immunisation, non-communicable diseases and communicable diseases. Progress towards universal health coverage, including equitable access to essential quality medicines, vaccines and medical technologies, is also compromised.

In addition, gender-related barriers operate at multiple levels, from the individual and the household to the community, hindering access to immunization services. Gender inequality and discrimination faced by women and girls puts their health and well-being at risk. According to the WHO, gender norms, socialization, roles, differentials in power relations and in access to and control over resources contribute to differences in vulnerabilities and susceptibilities to illness, how illness is experienced, health behaviours (including health-seeking), access to and uptake of health services, treatment responses and health outcomes.

New approaches are thus needed particularly in the developing world, where government resources remain limited. In those countries, the quality of care provided is often poor with a health system that is deficient in material and human resources due to limited resources being allocated and/or low levels or inefficiency of public spending or use. It is recognized that public health functions (particularly primary health care functions) and regional health coordination require more investment as well as a multisectoral action to improve the efficiency of the health sector. By addressing these health care needs and un-equitable access it will be possible to foster a healthier population who then will be able to participate in the country's sustainable economic development.

The most effective and lasting approach to controlling the spread of communicable diseases lies in eradication. In

the case of polio, eradication is within reach. For this reason, the Commission proposes to contribute to a final eradication push via the above-mentioned GPEI. Health interventions cannot effectively meet the needs of all unless informed by sex-disaggregated data and gender-sensitive analysis and action. An integral part of reaching every last child with vaccines is also the increased participation of women in immunization activities. To that end, targeted gender analysis will be conducted during the inception phase to ensure a gender-transformative implementation.

3 DESCRIPTION OF THE ACTION

3.1 Objectives and Expected Outputs

The objective of the action is to contribute to the eradication of the polio disease via contributing to GPEI.

3.2 Indicative Activities

The EIB in partnership with the Gates Foundation would provide immediate liquidity for UNICEF and WHO-led vaccination campaigns and surveillance under the GPEI. Under this structure, the EIB will provide an agreed financing amount to WHO and UNICEF to execute targeted parts of the broader GPEI.

GPEI will deploy a vaccination programme and related activities with the ultimate aim of eradicating polio. The action will contribute to the initiative with the maximum amount of EUR 302,514,000.

The Global Polio Eradication Initiative (GPEI) is a public-private partnership launched in 1988. Its goal is to eradicate polio worldwide. GPEI is led by national governments, the World Health Organization (WHO), Rotary International, the US Centers for Disease Control and Prevention (CDC), and UNICEF. The initiative focuses on immunization campaigns, surveillance, and community engagement to eliminate the poliovirus. Although significant progress has been made, challenges persist, particularly in some regions where the virus remains endemic. The two elemental goals of the GPEI are:

- Permanently interrupt all poliovirus transmission in the final WPV-endemic countries of Afghanistan and Pakistan.
- Stop circulating vaccine-derived poliovirus (cVDPV) transmission and prevent outbreaks in non-endemic countries in Sub-Saharan Africa and potential future outbreaks in Asia, Pacific, Latin America and Caribbean.

Goal 1 : The path to eradication in the final endemic countries will take:

- increased political will at all levels of government and with all local actors through a commitment to the apolitical value of polio eradication;
- a deep and enduring partnership with marginalized communities, especially those living in the highest-risk districts for polio;
- a well-functioning programme with a motivated and appropriately staffed frontline gender balanced² workforce who consistently deliver vaccines to the doorstep of every household or at every opportunity in areas where household access is restricted;
- an integrated service delivery approach that prioritizes essential immunization and the provision of other health services, while addressing gender-related barriers and opportunities to polio vaccination and a continued investment in and improvement of surveillance quality and timeliness of detection .
- An increased participation of women and persons in vulnerable situation in immunization activities for reaching every last child with vaccines.

² Where possible.

Collectively, these approaches will improve the effectiveness of programme operations, change the way the programme listens and responds to communities, and increase local, provincial and national stakeholder commitments to eradication.

Goal 2 : Outlines strategies and tactics to put the GPEI and impacted countries on an emergency footing to stop circulating vaccine-derived poliovirus type 2 transmission. In addition to maintaining sensitive surveillance to quickly detect and rapidly respond to any poliovirus, new approaches to interrupt circulating vaccine-derived poliovirus type 2 transmission will include:

- targeted and coordinated political advocacy in outbreak countries to link polio outbreak preparedness and response to broader country health priorities,
- emergency command structures for response at the country, regional and global levels for rapid decision-making during outbreak detection and response;
- increased regional and country capacity to support surveillance and outbreak response;
- increase women's meaningful participation and agency at the diverse levels of the polio programme to work towards greater gender parity across the partnership, including at the management level; and
- deployment of novel oral polio vaccine type 2 to minimize outbreak seeding, and other new tools, approaches and partners to improve surveillance, outbreak response speed and quality, and community engagement;
- strong coordination with in-country Expanded Programme on Immunization (EPI) and essential immunization partners to identify zero-dose and under-immunized communities in polio-priority geographies

On 11 May 2019, the GPEI Polio Oversight Board officially endorsed the GPEI Gender Equality Strategy, 2019-2023 (extended to 2026) with the objective to promote the integration of a gender perspective into different aspects of the GPEI's programming, to support countries in addressing gender-related barriers to polio vaccination to increase coverage and increase women's meaningful participation in the polio programme.

GPEI's operations are complementary to GAVI, as they focus on the downstream deployment of immunisation programmes. The Commission will also monitor complementarity via its participation in the governance of both GAVI and HDX.

3.3 Mainstreaming

Environmental Protection & Climate Change

The action does not specifically address Environmental Protection & Climate Change.

Gender equality and empowerment of women and girls

Well-designed macroeconomic, structural, and financial policies can support efficient and inclusive outcomes and equitably benefit women, girls, and society in general.

Aiming to achieve G1 as per the OECD-DAC gender equality marker and in compliance with gender equality as a relevant EU policy within the NDICI-GE Regulation and EU strategy on gender equality for external actions, this operation is targeting gender equality as a significant objective.

This project contributes to GAP III³ commitment for promoting universal health coverage through sustainable and resilient health systems and equitable access to essential services and information, including sexual and

³ The [Gender Action Plan III](#) is a Joint communication by the Commission and the High Representative of the Union for Foreign Affairs and Security Policy which was welcomed through [EU Presidency Conclusions](#) of 16 December 2020. Drafting was led by European Commission in close consultation with EU Member States, EEAS, civil society organisations, partner governments, and international organisations (UN

reproductive health, maternal care and capacity to address communicable and non-communicable diseases, with a particular attention to women and girls with disabilities; taking into account the disruptions to access to care that were caused by the COVID-19 pandemic.

Human Rights

This programme will contribute the protection of fundamental freedom, such as health by allowing access to health services, especially for persons in vulnerable situations in remote areas.

Disability

As per OECD Disability DAC codes identified in section 1.1, this action is labelled as D0.

The action does not address disability as an objective.

Democracy

The action does not directly address democracy as an objective.

Conflict sensitivity, peace and resilience

The Action will indirectly contribute to resilience objective by contributing to human wellbeing and higher productivity due to a healthier population.

Disaster Risk Reduction

The action reduces the risk of health-related disasters.

3.4 Risks and Lessons Learnt

Category	Risks	Likelihood	Impact	Mitigating measures
1. External environment	Action has to be terminated due to EIB or WHO/ UNICEF ceasing eradication efforts	Low (L)	Medium (M)	Close monitoring of the action based on performance indicators and EIB reporting.
1. External environment	Delays in implementation.	M	M	Comprehensive monitoring through EIB annual progress reports, ad hoc meetings, etc.
1. External environment	Weak performance of GPEI	M	M	Payments are performance-based
2. Planning, processes and systems	Delayed contracting with EIB due to missed deadlines in Commission internal procedures	L	High	Time line and procedural steps have been agreed with internal services and are imminent (1 December).

entities, International Finance Institutions among others). The different parties contributed to the drafting of the document through meetings and through responses to a survey conducted during the process.

3.5 The Intervention Logic

The persistence of polio infections and the recent geographic spread indicates a market failure with adverse economic effects resulting from the cost to health care systems globally (vaccination and treatment), reduced labour productivity of affected individuals and human well-being. As polio cases are concentrated in least developed countries and Asia (Afghanistan and Pakistan) and in Sub-Saharan Africa and the economic benefits of eradication do not generate financial returns that could be captured by an investor, neither affected governments nor private investors are likely to make the necessary investments into polio eradication. Eradication is substantially a global public good. There is thus a case for public intervention including in relation to non discrimination and gender inequalities.

3.6 Logical Framework Matrix

This indicative logframe constitutes the basis for the monitoring, reporting and evaluation of the intervention.

- o At inception, the first progress report should include the complete logframe (e.g. including baselines/targets).
- o Progress reports should provide an updated logframe with current values for each indicator.
- o The final report should enclose the logframe with baseline and final values for each indicator.

The indicative logical framework matrix may evolve during the lifetime of the action depending on the different implementation modalities of this action.

The activities, the expected Outputs and related indicators, targets and baselines included in the logframe matrix may be updated during the implementation of the action, no amendment being required to the Financing Decision.

Results	Results chain (@):	Indicator	Baseline (value & year)	Target (value & year)	Sources of data	Assumptions
Impact (Overall objective) <i>Contribution to SDG 3</i>	Ensure healthy lives and promote well-being for all at all ages	SDG 3.8.1 Universal Health Coverage (UHC) index [GERF 1.27]	2023 global report launched by WHO 20.09.2023)		WHO	N/A
	Eradication of polio - Interruption of cVDPV2 AFP cases globally	Number of cases of cVDPV2 worldwide Disaggregated by sex	420 (2023)	0 (2029) 2 years of no cases by 2029	GPEI	
		Status of global eradication	14 (2023)	Certified (2030)	GPEI	
Outcome(s) (Specific objectives)	<i>Outcome 1</i>	Number of cases Disaggregated by sex	13 (2023)	0 (2029)	GPEI	
	Polio interrupted in Afghanistan and Pakistan					
	<i>Outcome 2</i>	Number of doses of nOPV2 produced	X (20XX)	X (20XX)	GPEI	
	<i>Outcome 3</i>	% Environment Samples Positive for Enterovirus in AFRO	X (20XX)	X (20XX)	GPEI	
	Contained outbreak	Number of countries outside the endemics infected with WPV	1 (2023)	X (20XX)	GPEI	

Outputs	Output 1 (EFSD+ cross-sector mandatory) Leverage effect	Ratio between the amount of reimbursable finance (by IFIs or other financiers) against EU contribution	N/A	2	EIB	
	Output 2 (EFSD+ cross-sector mandatory) Multiplier effect	Ratio between the total investment (from IFI, public and private investors) against the EU contribution	X (20XX)	X (20XX)	EIB	
	Output 3 Private investment mobilisation	Additional capital unlocked through the set-up of de-risking mechanisms and other confidence tools to attract investors (specify if relates to sustainability-related instruments or products)	N/A	N/A	EIB	
	Output 4 Enhanced polio vaccination and surveillance program in Afghanistan	Number of Districts reporting ≥ 1 wild poliovirus case	1 (2023)	X (20XX)	Polio IHR Emergency Committee Meeting Statement	
		Positive environment samples for wild poliovirus	32 (2023)	X (20XX)	Polio IHR Emergency Committee Meeting Statement	
		% achieving Lot Quality Assurance Sampling (LQAS) pass rate	X (20XX)	X (20XX)	GPEI	
	Output 5 Enhanced polio vaccination and surveillance program in Pakistan	Number of Districts reporting ≥ 1 wild poliovirus case	1 (2023)	X (20XX)	Polio IHR Emergency Committee Meeting Statement	
		Female vaccinators deployed as a percentage of the total vaccinators deployed	X (20XX)	X (20XX)	GPEI	

		Positive environment samples for wild poliovirus	15 (2023)	X (20XX)	Polio IHR Emergency Committee Meeting Statement	
		% achieving Lot Quality Assurance Sampling (LQAS) pass rate	X (20XX)	X (20XX)	GPEI	

4 IMPLEMENTATION ARRANGEMENTS

4.1 Financing Agreement

In order to implement this action, it is not envisaged to conclude a financing agreement with the partner country /territory.

4.2 Indicative Implementation Period

The indicative operational implementation period of this action, during which the activities described in section 3 will be carried out is eight (8) years from the date of the adoption by the Commission of this Financing Decision.

Extensions of the implementation period may be agreed by the Commission's responsible authorising officer by amending this Financing Decision and the relevant contracts and agreements.

4.3 Implementation Modalities

The Commission will ensure that the EU appropriate rules and procedures for providing financing to third parties are respected, including review procedures, where appropriate, and compliance of the action with EU restrictive measures.

4.3.1 Indirect Management with a pillar assessed entity

This action will be implemented in indirect management with the European Investment Bank. The envisaged entity has been selected because they are the key interlocutor between the different stakeholders involved in the implementation of the GPEI namely WHO and UNICEF as implementing partners and EU with private donor Bill and Melinda Gates Foundation

4.4 Indicative Budget

Indicative Budget components	EU contribution Year 2023 (amount in EUR)	EU contribution Year 2025 (amount in EUR)
Implementation modalities – cf. section 4.3		
Indirect Management with pillar assessed entities - cf. section 4.3.1	275,000,000.00	27,514,000.00
Evaluation – cf. section 5.2 Audit – cf. section 5.3	may be covered by another Decision	may be covered by another Decision
Contingencies	0	0
Totals	275,000,000.00	27,514,000.00

4.5 Organisational Set-up and Responsibilities

The contribution agreement signed with the EIB will be monitored through the usual contract management procedures prescribed in the contribution agreement. DG INTPA Unit E5 “External Action Guarantees” and DG INTPA Unit G4 “Social Inclusion and Protection, Health and Demography” will be in charge of contracting, negotiating and monitoring the contract implementation.

As part of its prerogative of budget implementation and to safeguard the financial interests of the Union, the Commission may participate in the above governance structures set up for governing the implementation of the action and may sign or enter into joint declarations or statements, for the purpose of enhancing the visibility of the EU and its contribution to this action and ensuring effective coordination.

4.6 Pre-conditions

N/A

5 PERFORMANCE MEASUREMENT

5.1 Monitoring and Reporting

The day-to-day technical and financial monitoring of the implementation of this action will be a continuous process, and part of the implementing entity's responsibilities. To this aim, the implementing entity shall establish a permanent internal, technical and financial monitoring system for the action and elaborate regular progress reports (not less than annual) and final reports. Every report shall provide an accurate account of implementation of the action, difficulties encountered, changes introduced, as well as the degree of achievement of its results (Outputs and direct Outcomes) as measured by corresponding indicators, using as reference the logframe matrix.

The Commission may undertake additional project monitoring visits both through its own staff and through independent consultants recruited directly by the Commission for independent monitoring reviews (or recruited by the responsible agent contracted by the Commission for implementing such reviews).

Roles and responsibilities for data collection, analysis and monitoring:

The implementing entity will monitor and report on the relevant indicators included in the logical framework matrix of Section 3.6.

5.2 Evaluation

Having regard to the nature of the action, a final evaluation may be carried out for this action or its components via independent consultants contracted by the Commission and eventually through a joint mission.

It may be carried out for accountability and learning purposes at various levels (including for policy revision), taking into account the novelty of the performance parameters applied and their potential applicability to other human development challenges.

The Commission shall inform the implementing partner at least three months in advance of the dates envisaged for the evaluation missions. The implementing partner shall collaborate efficiently and effectively with the evaluation experts, and inter alia provide them with all necessary information and documentation, as well as access to the project premises and activities.

The evaluation reports may be shared with the partner and other key stakeholders following the best practice of evaluation dissemination. The implementing partner and the Commission shall analyse the conclusions and recommendations of the evaluations and, where appropriate, apply the necessary adjustments.

The financing of the evaluation may be covered by another measure constituting a Financing Decision.

5.3 Audit and Verifications

Without prejudice to the obligations applicable to the implementation of this action, the Commission may, on the basis of a risk assessment, contract independent audit or verification assignments relating to the action. The financing of the audit and verification assignments may be covered by another measure constituting a Financing Decision.

6 STRATEGIC COMMUNICATION AND PUBLIC DIPLOMACY

The 2021-2027 programming cycle will adopt a new approach to pooling, programming and deploying strategic communication and public diplomacy resources.

In line with the 2022 “Communicating and Raising EU Visibility: Guidance for External Actions”, it will remain a contractual obligation for all entities implementing EU-funded external actions to inform the relevant audiences of the Union’s support for their work by displaying the EU emblem and a short funding statement as appropriate on all communication materials related to the actions concerned. This obligation will continue to apply equally, regardless of whether the actions concerned are implemented by the Commission, partner countries, service providers, grant beneficiaries or entrusted or delegated entities such as UN agencies, international financial institutions, and agencies of EU member states.

However, action documents for specific sector programmes are in principle no longer required to include a provision for communication and visibility actions promoting the programmes concerned. These resources will instead be consolidated in Cooperation Facilities established by support measure action documents, allowing Delegations to plan and execute multiannual strategic communication and public diplomacy actions with sufficient critical mass to be effective on a national scale.