The High Level Independent Panel (HLIP) was reconvened to identify bold, practical, and operational recommendations to bolster financing for national, regional, and global pandemic preparedness and response. In 2025, we produced a set of actionable recommendations aimed at bolstering pandemic preparedness financing and medical countermeasures (MCM) surge financing within 6-12 months.

The work of the HLIP has been made more acute with the recent emergence and spread of Ebola Bundibugyo (BDBV). While some progress has been made in surging research and development (R&D) financing to spur development and testing for vaccine candidates and therapeutics, there is still no standing capability for financing the procurement, stockpiling, and deployment of a range of critical countermeasures for different species of Ebola virus or for the related Marburg virus.

Against this backdrop, on June 22, 2026, the HLIP MCM Financing Working Group met to discuss financing options for short and longer term needs in support of the ongoing outbreak of Ebola BDBV, future Ebola outbreaks, and outbreaks of related viruses like Marburg.

The group discussed financing gaps and options to accelerate regional manufacturing, advance market commitments, stockpiling, and distribution for Ebola BDBV vaccines, rapid diagnostic tests (RDTs), therapeutics, and personal protective equipment (PPE) – with a focus on cross-species products to prepare for future Ebola outbreaks.

The HLIP co-chairs endorse the following findings and priorities for urgent action.

Key Findings

- A critical gap that led to delayed reporting of the ongoing Ebola outbreak was the lack of access to a near point-of-care RT-PCR test that could pick up the BDBV species. Since then, Africa CDC, in collaboration with the World Health Organization (WHO) and partners, has accelerated the deployment of cross-species diagnostics, coordinated the evaluation and field validation of candidate tests, expanded procurement, and advanced plans for regional manufacturing and stockpiling. **While these efforts have significantly strengthened diagnostic readiness, much more progress is needed – including with designated regional and global mechanisms – to procure, stockpile, and sustain access to cross-species Ebola diagnostics, as well as a defined set of steps to evaluate markets and expand regional manufacturing for these products and surge-related reagents and supplies**.
- While clinical trials for Ebola BDBV therapeutics have begun, **there is not yet a designated international entity with the mission to coordinate, procure, and/or stockpile authorized Ebola therapeutics globally.** For the African Continent, Africa CDC has taken on this role, as mandated by the African Union Member States, and is facilitating market preparation with manufacturers to improve affordability, supply security, technology transfer and regional manufacturing capacity.

- However, while Africa CDC has included $15 million in its funding proposals for advance purchase agreements and stockpiles for Ebola MCMs, a **key financing gap is the lack of advanced purchase agreements and an at-risk financing facility that can support manufacturing at risk.**
- Many African nations maintain stores of Ebola PPE, and donations have supported the current outbreak response. Africa CDC in collaboration with the WHO and other Incident Management Support Team (IMST) partners, has taken on the role of coordinated procurement and deployment of PPE supplies during outbreaks on the continent. **However, there are numerous suppliers, spread across the world, which can make piecing donations for different pieces of Ebola PPE difficult – leading to mismatched protection for healthcare workers and burial teams, as well as disparate training for donning and doffing**. Furthermore, R&D to update Ebola suits to decrease heat and water loss and to streamline donning and doffing has not been fully implemented.
- **Ebola MCMs are generally zero-market products, which means that it is challenging for development financing (traditionally focused on private sector solutions) to invest unless a market is created through an advance market commitment, stockpile, or other regularized funding approach, in addition to risk alleviation push funding through support for clinical trials.**
- While much progress has been made by CEPI, Gavi, Africa CDC, and the WHO in advancing three candidate vaccines for Ebola BDBV, **much less progress has been made in identifying specific next steps to advance longer-term availability for cross-species RDTs, monoclonal antibodies and other Ebola therapeutics, and PPE.**
- **Most development finance institutions can invest in private sector manufacturers, which can advance regional capacity, but they do not regularize the demand or market for Ebola products and stockpiling in between outbreaks. One or more regional hubs for pooling procurement likely are needed in order to provide a vehicle for banks to provide financing (loans to be paid back by countries) for stockpiles and rapid scaling during emerging outbreaks.**

Priority Actions

1. **Sustaining Financing for Ebola and Marburg Products.** To accelerate access to Ebola- and Marburg-related medical countermeasures for regularly occurring outbreaks, there should be consensus around one or more specific, designated entities for receiving development financing and public development bank (PDB) financing for the purpose of procuring, surging, and stockpiling Ebola and Marburg therapeutics, rapid diagnostic tests, and personal protective equipment – including supporting at-risk activities to avoid delays to post-trial access. **Achieving this goal should be a major deliverable for the G7 MCM Surge Financing Initiative in advance of and announced during the September 2026 UN High Level Meeting on Pandemic Prevention, Preparedness, and Response.**

a. Given the African Union Member States' mandate to Africa CDC, the international community should recognize Africa CDC as the designated entity for Africa, consistent with Africa's Health Security and Sovereignty Agenda and working in close concert with the Africa Medicines Agency, as well as the WHO, to streamline access and supplies. Similar designated entities should be identified for MCM surge financing for Asia and Latin America and the Caribbean.

b. The designated entity or entities should prioritize cross-species products and pool procurement across suppliers for multiple countries regularly affected by Ebola and Marburg outbreaks.

2. **High priorities for development financing and/or PDB financing would be**:

   a. Providing liquidity for the designated procurement and stockpiling entities;

   b. Pooling procurement across multiple countries affected by Ebola and Marburg outbreaks;

   c. Securing and attracting advanced market commitments to create a reliable market, stockpile, and/or supply; and

   d. Conducting market shaping and investing in a diverse and regionalized manufacturing base in order to update R&D, expand supplies, and expand regional access.

3. **Coordinated Actions to Achieve Sustainable Supply and Demand for Ebola and Marburg MCMs.**

   a. Key financing institutions (such as the European Investment Bank, U.S. Development Finance Corporation, MedAccess, and the International Finance Corporation), should collaborate and work together with the Africa CDC to identify the right mechanisms to achieve these goals for rapid diagnostic tests, therapeutics, and personal protective equipment.

   b. IFC should determine whether its existing MCM manufacturing mechanism (Avicenna) could be utilized to further crowd in blended financing to support this effort.

4. **The HLIP will track progress toward achieving these goals through its working group on MCM Surge Financing.**

The Co-Chairs of the High Level Independent Panel are:

- **Victor Dzau**, Chancellor Emeritus, James B. Duke Distinguished Professorship and Director of Mandel Center at Duke University, past President, U.S. National Academy of Medicine
- **Jane Halton**, Chair of the Board, Coalition for Epidemic Preparedness Innovations
- **Jean Kaseya**, Director General, Africa Centres for Disease Control and Prevention
- **Benedict Oramah**, Former President and Chair of the Board, Afreximbank and Chair of the African Medical Centers of Excellence
- **John-Arne Røttingen**, Chief Executive Officer, Wellcome Trust