

Testimony of Alan Knight
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Hearing on Moving beyond the Ebola Outbreak

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Mr. Chairman, Ranking Member Markey, Members of the Subcommittee, thank you for giving me the privilege to testify today on the Ebola outbreak recovery efforts in West Africa and the lessons that we can draw from the response.

It is an honor to represent my company, ArcelorMittal, one of Liberia's largest investors. I am also here in my capacity as a founding member of the Ebola Private Sector Mobilization Group (EPSMG).

My testimony today will focus on two issues:

- Examining the role of the private sector in coordinating an effective, rapid response during a crisis, and
- Looking beyond Ebola and lessons learned and considering the challenges of economic recovery.

As I sit here today, and as you consider my testimony, I would like to suggest that the private sector's largest contribution during the Ebola outbreak was simply to keep business running. This was achieved through rigorous risk-planning and through the development of health-and-safety systems which minimized the risk of employees contracting the virus.

Going forward, I would like to further suggest that the private sector's greatest contribution, post-Ebola, is to keep business going, not in the face of a health emergency, but in an environment of higher costs, higher risks, and low commodity prices.

It is my hope that this hearing will examine not only lessons learned but what steps can be taken to ensure that the region's recovery is driven by a private-sector recovery.

From risk register to company level mobilization

First, by way of background, ArcelorMittal operates an iron ore mine, a railway of 240 kilometers, and a port in Liberia. Our operations stretch from the border of Guinea to the shore of the Atlantic and through three of Liberia's fifteen provinces, Nimba, Bong, and Grand Bassa. We have been operating in the country for ten years. At the height of the Ebola outbreak we had nearly 3,000 direct and indirect employees. While many of our subcontractors declared *force majeure* because of the health emergency and departed, ArcelorMittal did not. We never left. We never stopped working. We stayed operational throughout the peak of the virus.

As you can imagine, given our footprint and our direct and indirect employees, their families, their extended families, and their communities, ArcelorMittal touches the lives of tens of thousands of people in the region. During Ebola, that meant that our health and safety protocols did as well, and this saved untold lives.

We monitored the Ebola outbreak carefully. We worked hard to understand the virus and make sure that our facilities were prepared to deal with it. We hired experts to advise the company, trained and counselled our staff, and mobilized protective and specialized medical equipment. We also reviewed and refined our emergency response and evacuation procedures, set up a management committee, and enacted the appropriate procedures and systems.

In July 2014, cases of Ebola were reported in Monrovia, Liberia and the risk management triggers were pulled for ArcelorMittal. The company led the way in private sector support to the government with the total value of support to the government and individual counties estimated at US\$1.3 million.

Although we hoped that the outbreak would not spread any further and endanger more lives, we were prepared for it. However, we were not the only company operating in the region and knew that we would have to learn from others in order to share what we already knew and to drive a stronger response to the escalating crisis. That is why a call was made to companies we knew, inviting them to join an informal conversation in London to share information about the outbreak, compare best practices, and collaborate to limit impacts across West Africa.

EPSMG is born

The ESPMG started in July 2014 as a one-off gathering of 11 London-based companies who came together to share what they could contribute to help combat the growing threat of Ebola. These companies all had an operational footprint in the affected region.

Awareness of the group spread by word of mouth and more companies asked to be involved. The number of companies dialing in for ESPMG calls quickly grew and we were soon joined by representatives of aid organizations, international institutions, and governments. At the peak there were over 100 companies and almost 50 public bodies and NGOs joining the calls. For one of our December 2014 calls, we believe we had over 400 individuals dialing in.

I call the ESPMG a hub because it was never actually a legal entity with a board, budget or articles of association. Our initial focus was to exchange notes on what we were doing at our operations. We also decided to write to the Director General of the World Health Organization to ask advice on how we could strengthen our response.

Through this all, we found a common voice. Despite the unprecedented nature of the outbreak, group members made a joint commitment to continue operating in those Ebola-affected economies and to carry out business as usual, as far as was possible. This was no easy feat in the face of emerging restrictions on national and international trade as well as travel restrictions. Falling commodity prices bought extra complexity to this operating environment.

Looking after our own people was important but that alone was not going to “bend the curve” of the outbreak. What started as an inter-company information exchange evolved to advocacy for a global response and a hub where the public and NGO sector had direct access to companies for bilateral collaboration.

Although aid organizations had the humanitarian and health response expertise, we had heavy lifting equipment, transport, accommodation, and other needed resources. Perhaps most critically, we already had all of this in the affected countries and were ready to help. The EPSMG provided a quick and simple hub to learn what needs were and helped facilitate bilateral arrangements between donors and recipients.

Country groups, the real success

From the EPSMG came the EPSMG country groups which were on the ground, mobilizing skills and resources in Guinea, Liberia, Sierra Leone, as well as in the adjacent countries of Mali and Senegal, to increase preparedness and prevent the spread. Most of the EPSMG's success can be linked to these country groups; the umbrella organization created a sense of community and an environment which enabled an efficient exchange of information.

We had a clear responsibility to foster stronger relationships with government and responders, ensuring that we had the information needed to fight the disease, which we could then share within our communities. However, this could only happen at country level and a great success of EPSMG was its ability to help get things done on the ground.

So what did companies do? In some instances assistance meant giving cash, while in others it meant donating vehicles for use as ambulances, providing medical supplies, and providing access to logistics, infrastructure, and communications technology.

People like numbers, but numbers with meaning can be hard to obtain. We believe that, at a minimum, the EPSMG companies gave away least 50,000 liters of chlorine, 4 million latex gloves, and 55 vehicles. More importantly, we trained over 50,000 employees who we estimate reached 350,000 dependents. Another positive outcome was the low infection rates within member companies. Thanks to the rigorous planning and precautions taken by our Liberian colleagues, not one of our employees contracted the virus, a fact that most other companies could also report.

The EPSMG never sought to replace or compete with the governments, donors, other coordination groups, or task forces. It was created to provide a simple access point into the private sector for joint mobilization. The EPSMG was about practical in-field action – not intellectual consensus building.

By January 2015, the Ebola outbreak curve had been bent. While the numbers of new cases reported were still unacceptably high, there were fewer with each passing week. Discussions began on “the road to zero.” With the crisis over, we observed that many private sector companies began disengaging from the EPSMG, instead channeling their efforts into the daily operations of running a business in post-Ebola West Africa. By April 2015, EPSMG was no longer as active as was required at the height of the crisis.

Travel restrictions – our biggest distraction

With people dying from a highly contagious disease, it was a shock to many of us that governments around the world had no formal policies or thoughts on what was the right approach to the movement of nationals to and from countries at risk.

For example, if I, as a British national, flew to Liberia to help fight the Ebola outbreak and contracted the disease it was unclear whether I could come back to UK for treatment, or whether I would have to stay

in Liberia. If so, what would happen to me? What if I broke my leg or suffered an illness or injury completely unrelated to Ebola while in an Ebola-affected area – would I be able to return to the UK? It was all unclear. Expatriate employees were concerned about the uncertainties surrounding routine return transport to their home countries and fears grew about the availability of medical evacuation for suspected or confirmed cases of Ebola.

We also realized that blanket travel bans were of significant concern to humanitarian responders struggling to get personnel and supplies to the affected areas. We lobbied hard on this, as there was too much fear driving decisions.

As we look at outcomes from this hearing I would ask that this committee considering asking for an international convention on the movement of nationals to and from countries suffering a pandemic. It is imperative that a protocol be negotiated and agreed before the next pandemic. This is an unnecessary distraction the private and public sectors can ill afford to see repeated.

What did we learn?

➤ 1) The EPSMG's greatest contribution was preventative action

The epidemic was rightly seen as a humanitarian disaster, but we observed that it is important not to put Ebola in the same box as event-based disasters like floods and earthquakes, where the worst outcomes occur suddenly, before businesses can intervene, placing the focus on rescue and recovery. While a death toll of 12,000 is a disaster, we should remember that the forecast number of cases exceeded 250,000 in September 2014. Perhaps the forecasts were wrong, or even more likely, the joint effort with NGOs, the public sector, and the private sector were successful. Either way, this success story is about what was prevented.

➤ 2) Business has been here before – parallels with HIV

Parallels can be drawn with the long track record many businesses have in managing HIV in their workforces. Whilst the pace of the HIV outbreak was over months and years rather than hours and days, many companies in Africa proved to be highly effective in mobilizing their staff and resources to prevent HIV from spreading. The parallels are noteworthy: the need to change behaviors, the need to have the right medicines, the value of peer-to-peer education, and the issues of stigma are all similar. Perhaps most noteworthy was the need for an employer to engage in conversations with employees about topics that they normally would avoid. For HIV, this was about sexual behavior; for Ebola, it was about attitudes toward funeral rites and traditional care behaviors. Anyone studying the EPSMG contribution should, therefore, also draw lessons from HIV.

➤ 3) Risk management works

Business risk processes provide a good framework to plan for pandemic risks. Since SARS, contagious disease has become a theoretical business risk, but late-2013 and early-2014 Ebola cases in West Africa captured the attention of risk managers and their health and safety colleagues. During the worst moments of the outbreak, ArcelorMittal's top management reviewed the status of the outbreak and our actions. This model was replicated across the business network. It works.

➤ 4) Businesses will look after their employees, which means they look after citizens

The most significant private-sector contribution was undoubtedly the training and care these companies offered their own employees and those individuals' families and neighbors. Employees are citizens, so a mass outreach by all the employers will reach a significant proportion of the population. I am confident the companies operating in Ebola-affected regions would have done this regardless, but the EPSMG provided value as a hub for sharing best practices on how to approach this most effectively.

➤ **5) Business interests are also human interests**

To protect a business from such a disease you need to protect your employees. Employees are citizens, so business interventions protect the human, as well as the economic need. The logic extends from the employee to their family and community. What is more, the public sector asked the private sector to stay in-country and remain economically active. The other choice would be to leave the country, which would have made matters worse. By staying in the affected countries the private sector helped keep economies active.

➤ **6) Rewiring public-private partnerships**

Chairing the EPSMG gave me the rare privilege of getting closer to the workings of the public sector. While I deeply respected the individuals with whom I engaged, I saw that their desire to deliver results quickly and pragmatically was constrained by bureaucracy, process, and politics. Governance of the public sector is key but it can pay a price in moments of need.

I was proud to see my business colleagues acting nimbly and quickly, but conscious that many public sector players saw business as merely a source of money. The EPSMG was special because it helped to unlock the real contribution from the private sector which was not cash, but skills, assets and awareness. The EPSMG helped the collaboration and coordination of goodwill, skills, and physical assets. It is now clear that the private sector has more to offer than donations and I hope the EPSMG (and the business response to HIV) are proof points. The challenge for the public and NGO sectors is figuring out how to best utilize this in the future.

➤ **7) The value of simplicity**

It could be argued that the Ebola related events in West Africa were unique. The region simply did not have the means to contain the disease. An Ebola crisis would not happen in the UK, for example. Even airborne Ebola would be contained by measures implemented by the UK government since the SARS epidemic. But while this case was unprecedented, valuable lessons can be taken and applied in future global challenges. Today, for example, there is general recognition that the private sector has a valuable role to play in crisis and humanitarian response.

But perhaps the most important lesson is the value of simplicity. With the EPSMG, a group of businesses saw value in collaborating to protect their people, companies, and entire communities from a terrible disease. Learning and resources were shared when they were needed. Practical action happened when it was needed. When these things were no longer needed the EPSMG was no longer needed and naturally, it fizzled out.

What now?

We get to zero and stay at zero; we build resilient healthcare systems and delivery mechanisms. Beyond on-going collaborations, our group is making two unique contributions in this area. First, some EPSMG members, under Chevron's leadership, have set up the Center of Excellence for Infectious Disease Control at JFK Hospital in Liberia as an on-going platform for training and public-private collaboration. This project is now eligible for a USAID Global Development Alliance grant for Ebola recovery. Secondly, the No More Epidemics Campaign has offered to house lessons learned from Ebola and keep the EPSMG experience relevant.

Recovery in West Africa is vital. At ArcelorMittal, we remain deeply committed to Liberia. While the combination of market conditions and Ebola posed a challenge to our operations, our company is proud that we were able to maintain production and contribute to the Liberian economy at a crucial time in the country's history. We continue supporting the country further, even though low iron ore prices required changes to our operating model. But sustaining a private sector recovery cannot be done by a single company, and in this environment, not just by the host-governments. All of Liberia's stakeholders need to take a look at helping to create conditions for a recovery where jobs are created by a vibrant private sector.

Going forward, the United Nations and other response groups need to look at the private sector as equal partners and not just as donors. The UN Office for the Coordination of Humanitarian Affairs (OCHA) has a role to play here in leveraging new relationships and partnerships.

Again, we need an international convention on the movement of people across borders during a pandemic. We need to address this now, before the next pandemic.

The battle against Ebola is far from over and many obstacles lie ahead, particularly the fight to sustain the economies of the affected countries. The private sector has shown that it can rise to the challenge, working in partnership with other stakeholders to deliver the most effective response to the benefit of employees, their families, and their communities. It is my hope that the hard lessons from this outbreak can be applied to prevent the next.