Project Information Document (PID)

Appraisal Stage | Date Prepared/Updated: 25-Mar-2020 | Report No: PIDA29005

Mar 19, 2020 Page 1 of 7

BASIC INFORMATION

A. Basic Project Data

Country Senegal	Project ID P173838	Project Name Senegal COVID-19 Response Project	Parent Project ID (if any)
Region AFRICA	Estimated Appraisal Date 25-Mar-2020	Estimated Board Date 31-Mar-2020	Practice Area (Lead) Health, Nutrition & Population
Financing Instrument Investment Project Financing	Borrower(s) Ministry of Finances and Budget	Implementing Agency Ministry of Health and Social Action	

Proposed Development Objective(s)

To prevent, detect and respond to the COVID-19 disease outbreak in Senegal.

Components

Component 1. Emergency COVID-19 Response

Component 2. Community Engagement and Risk Communication

Component 3. Project Management and Monitoring

PROJECT FINANCING DATA (US\$, Millions)

SUMMARY

Total Project Cost	20.00
Total Financing	20.00
of which IBRD/IDA	20.00
Financing Gap	0.00

DETAILS

World Bank Group Financing

International Development Association (IDA)	20.00
IDA Credit	20.00

Mar 19, 2020 Page 2 of 7

Environmental and Social Risk Classification

Substantial

Decision

The review did authorize the team to appraise and negotiate

Other Decision (as needed)

B. Introduction and Context

Country Context

- 1. Senegal is considered one of Africa's most stable countries and a democratic success. With a population estimated at 15.9 million in 2018, approximately half of the population lives in urban areas. Senegal is a stable democracy and has strengthened its democratic structures in recent years (three peaceful political transitions and four presidents since its independence in 1960). The country's political system was further strengthened by the 2016 constitutional referendum that reduced presidential mandates from seven to five years and by the recent peaceful presidential elections (Macky Sall was reelected in February 2019).
- 2. Although still in its early stages, the COVID-19 pandemic is expected to have substantial negative impact on the economy. The effects of a pandemic-driven global economic downturn are impossible to predict. However, China and other highly affected countries are experiencing dramatic reductions in economic activity, with a high risk of damage to financial markets. The anticipated slowdown in the global economy will likely reduce trade, money transfer from emigrants, local productivity and tourism. Senegal will be impacted by the disruption of the global supply of goods. Price deflation on agricultural commodity exports may also occur due to low demand in the Eurozone. Tourism and air travel will be disrupted due to restrictions on population's movements further impacting growth of the services sector and potentially leading to higher poverty rates. Senegal received 1.13 million tourists on average between 2013 and 2017, ¹ which may be significantly reduce as airlines are beginning to suspend flights to Dakar. Moreover, Senegal remains vulnerable to external shocks as a net importer and its heavy dependence on remittance flows and international aid.

Sectoral and Institutional Context

3. **Local transmission of COVID-19 has commenced in Senegal.** Senegal is the second country in sub-Saharan Africa to report its first imported case of COVID-19 and the Government has reported 67 confirmed cases as of March 22, 2020 (27 cases in Dakar, 25 in Diourbel, 13 in Thies, 1 Saint-Louis and 1 case in Ziguinchor). Although Senegal is not on the WHO AFRO comprehensive COVID-19 risk mapping

Mar 19, 2020 Page 3 of 7

¹ UN World Tourism Organization. 2018. Compendium of Tourism Statistics dataset. UNWTO, Madrid.

and prioritization² due to the low volume of travelers from China compared to other African countries, the country is a popular tourist destination and all imported cases came from France, United Kingdom, and Italy, which are all hotspots of the virus.

- 4. Senegal has successfully contained disease outbreaks in recent years due to timely identification and response. Outbreaks such as the West Africa Ebola Virus Disease (EVD) epidemic in 2014 reiterated the importance of strengthening national disease surveillance systems and inter-country collaboration for more effective response. Senegal, compared to other countries in the sub-region, has a better functioning and more effective surveillance system. However, at the global level, Senegal has some deficiencies.
- 5. Cross-sectoral collaboration and surveillance, particularly as it relates to zoonotic diseases, needs to be strengthened. The risk of zoonotic diseases impacting the human population remains high due to the heavy reliance on animals and animal product. However, the Government has put in place surveillance systems for zoonotic diseases, which include rift valley fever, rabies, avian influenza, lassa fever, and EVD.³ There are some gaps and weaknesses that impact the surveillance of these diseases.
- 6. Low access to handwashing facilities may increase the number of COVID-19 cases in Senegal. Handwashing often with soap and water is one of the key ways to reduce the spread of COVID-19 and many other diseases. However, the lack of reliable access to water for handwashing, particularly in rural communities in Senegal, may propogate the virus. In 2017, 54 percent of the Senegalese population had no handwashing facility at home. The disparities are even more striking between the poorest (7 percent) and wealthiest (61 percent) in access to basic and limited handwashing facilities.
- 7. The Government of the Republic of Senegal has developed a comprehensive National COVID-19 Response Plan, which is aligned with WHO's Strategic Preparedness and Response Plan. The Plan focuses on scaling-up and strengthening the Government's capacity to respond to the COVID-19 outbreak. The National Epidemics Management Committee will oversee the overall coordination and implementation of the Plan.

C. Proposed Development Objective(s)

Development Objective(s) (From PAD)

To prevent, detect and respond to the COVID-19 disease outbreak in Senegal.

Mar 19, 2020 Page 4 of 7

² The WHO AFRO comprehensive COVID-19 risk mapping and prioritization, which includes 13 top priority countries for preparedness measures due to their direct links or high volume of travel to China. The countries are: Algeria, Angola Cote d'Ivoire and the Democratic Republic of the Congo, Ethiopia, Ghana, Kenya, Mauritius, Nigeria, South Africa, Tanzania, Uganda and Zambia.

³ JEE

⁴ UNICEF and WHO. 2019. Progress on household drinking water, sanitation and hygiene – 2000-2017: Special focus on inequalities.

⁵ Basic handwashing facilities is a facility with soap and water; limited handwashing facility is a facility that is lacking either water or soap.

Key Results

- Suspected cases of COVID-19 cases reported and investigated per approved protocol (number);
- Diagnosed cases treated per approved protocol (number);
- Health staff trained in infection prevention per MOHSA-approved protocols (number); and
- District health centers/district hospitals with personal protective equipment (PPE) and infection control products and supplies (percentage);

D. Project Description

8. The proposed project intends to fill critical gaps in implementing the REDISSE project, strengthen the prevention activities, rapid detection, preparedness and response to COVID-19 outbreak. The budget will be utilized within 12 months to enhance preparedness activities for COVID-19 and strengthen the health system both at national and subnational levels. The proposed project is in line with Senegal's COVID-19 Response Plan and the COVID-19 SPRP prepared by WHO. The Ministry of Economy and Finance requested on March 17, 2020 US\$20 million from the COVID-19 Fast Track Facility. The activities financed through the project will remain aligned to the National COVID-19 Response Plan (Plan de riposte contre le coronavirus) and COVID-19 SPRP and will support critical activities up to the allocated amount for the project.

Component 1: Emergency COVID-19 Response [US\$16.5 million].

9. This component will provide immediate support to Senegal to prevent COVID-19 and to limit local transmission through containment strategies. It will support enhancement of disease detection capacities through provision of technical expertise, laboratory equipment and systems to ensure prompt case finding and contact tracing, consistent with WHO's Strategic Preparedness and Response Plan for COVID-19. It will enable countries to mobilize surge response capacity through trained and well-equipped frontline health workers. It will also provide some social and financial support to patients that are quarantined. There are three sub-components: Sub-component 1: Case Detection, Confirmation, Contact Tracing, Recording, Reporting [US\$5 million]; Sub-component 2: Health System Strengthening [US\$8 million]; Sub-component 3: Social and Financial Support to Households [US\$3.5 million].

Component 2: Community Engagement and Risk Communication [US\$2 million]

10. This component will support activities that will ensure effective risk communication and community engagement to raise public awareness and knowledge on prevention and control of COVID-19 among the general population. There are two sub-components: Sub-component 1: Community Engagement for Prevention [US\$.75 million] and Sub-component 2: Comprehensive Behavioral Change and Risk Communication [US\$1.25 million].

Component 3: Implementation Management and Monitoring and Evaluation [US\$1.5 million].

11. This component has two sub-components: *Sub-component 1: Project Management [US\$1 million]* and *Sub-component 2: Monitoring and Evaluation (M&E) [US\$.5 million]*.

Mar 19, 2020 Page 5 of 7

Legal Operational Policies				
	Triggered?			
Projects on International Waterways OP 7.50	No			
Projects in Disputed Areas OP 7.60	No			
Summary of Assessment of Environmental and Social Risks and Impacts				

E. Implementation

Institutional and Implementation Arrangements

CONTACT POINT

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Mar 19, 2020 Page 6 of 7

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APPROVAL

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Mar 19, 2020 Page 7 of 7