PROJECT INFORMATION DOCUMENT (PID) IDENTIFICATION/CONCEPT STAGE

Project Name	Strengthening the Capacity of Local Councils to Respond to Ebola		
Region	AFRICA		
Country	Sierra Leone		
Sector(s)	Sub-national government administration (30%), Other social services (60%), General water, sanitation and flood protection sector (10%)		
Theme(s)	Decentralization (20%), Natural disaster management (20%), Other social protection and risk management (40%), Other communicable diseases (20%)		
Lending Instrument	Lending Instrument		
Project ID	P155339		
Borrower Name	Ministry of Finance		
Implementing Agency	Ministry of Finance and Economic Development		
Environment Category	C - Not Required		
Date PID Prepared	09-Apr-2015		
Estimated Date of Approval	10-Nov-2015		
Initiation Note Review Decision	The review did authorize the preparation to continue		

I. Introduction and Context Country Context

Sierra Leone experienced a protracted decade long civil war until 2002, with the killing of 20,000 people and the displacement of half of the country's population. Peace has come accompanied with the stabilization of the Sierra Leonean economy, societal reconciliation and the beneficial effects of periodic, free and fair elections. According to World Bank (WB) data, from 2003 to 2011 the poverty ratio declined in Sierra Leone from 66.4 percent to 52.9 percent and per capita Gross National Income (GNI) surged from US\$200 in 2002 to US\$660 in 2013. Sierra Leone made impressive economic gains in 2012 and 2013, with the country growing at a double-digit real Gross Domestic Product (GDP) rate of 15.2 and 20.1 percent respectively. This very positive tendency was reversed in 2014. The economy suffered shocks from the Ebola outbreak and from the simultaneous sharp decline of the iron ore prices (which resulted in financial difficulties for the two largest mining corporations in the country, the African Minerals Limited and the London Mining Companies). The GDP growth rate for 2014 was revised from 11.3 percent at the beginning of the year, to an estimated 6.4 percent. Other macroeconomic indicators have remained unstable: inflation has been heightened, exchange rates have become volatile, and there is an expectation for interest rates to rise in the near future. Sierra Leone ranked 183rd out of 187 countries as evaluated by United nations Development program (UNDP) in the 2013 Human Development Index (HDI), with a score of 0.374. The World Bank estimates the life expectancy at birth in Sierra Leone at 45 years of age, the lowest in the world (11 years less than the average for developing Sub-Saharan

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Africa countries), and the adult literacy rate at 44 percent (compared to an adult literacy rate of 62 percent in the Sub-Saharan Africa region).

The Ebola Virus Disease (EVD) in Sierra Leone has not only damaged the economy, but has also provoked important social capital losses and a decrease in service delivery effectiveness. The number of health service delivery beneficiaries decreased 23 percent since the beginning of the EVD outbreak. Education also coped with pervasive effects of the disease, with schools closed to avoid contagion and some educational facilities being used as Ebola holding and treatment centers. This poses a serious risk of pupils not returning to school after the disease and high chances of increased teenage pregnancy. Other services, such as water and sanitation projects, have been disrupted, expert personnel fled the country following the outbreak, and public works were generally put on hold in many parts of Sierra Leone. The strain of EVD in the provision of government services has particularly affected the poor, vulnerable and disadvantaged, making propoor development responses necessary. The Government of Sierra Leone (GoSL) will require strong international backing to respond to this crisis. The economic impact of EVD has reverberated in increased fiscal deficits due to the discrepancy between higher government spending to combat the disease and weakened revenue positions. These fiscal gaps will remain high unless the disease is contained to zero infection cases, economic activities resume, and substantial assistance from the international community is received.

The EVD outbreak has undermined some of the poverty reduction gains achieved since the end of the civil war. It is also likely that some landmark achievements, such as reaching the Millennium Development Goals (MDGs) on nutrition, health, access to water, and education will be reversed. This is in large part due to the increase in food prices (derived from a drop in food supply), a significant decrease in employment, a health system that has overreached its capacity limit, reduced government funding for water and sanitation services, and the closing of schools. There has been a 47 percent disruption in agricultural activities and a 30 percent decline in agricultural output. The private sector has been severely affected with a 50 percent job loss, 60 percent decline in manufacturing, and the suspension of five new investment ventures with an estimated value of approximately US\$1.2 billion. Cross-border trade has come to a standstill (with a greater impact on women) and transport (both by air and sea) remains handicapped.

The demographics of Sierra Leone show a country composed primarily of young people. United Nations Educational, Scientific and Cultural Organization (UNESCO) estimated in 2013 that 2.89 million people were under the age of 18, in a country with an overall population of 5.98 million. One third (33 percent) of the population is between 6 and 18 years of age. Population has been steadily increasing and is projected to continue growing at a rate of 1.7 percent per annum. The bourgeoning demographics of Sierra Leone provide an opportunity for economic growth, but also present a challenge for the adequate provision of social services. Youth also tends to be more severely impacted by exogenous shocks such as EVD, and the history of Sierra Leone shows they are a key group to fostering social stability.

Sectoral and Institutional Context

Sierra Leone has been immersed in a decentralization program since the approval of the Local Government Act (LGA) in 2004, highlighting the GoSL commitment to the transfer of power, authority and resources to local level institutions. The devolution process has improving service delivery as a central objective, bringing political, administrative and fiscal control and

responsibility over services closer to the people, in line with the principle of subsidiarity. To this end, citizens take ownership of their local development agenda, and become empowered to hold local public office holders accountable, and transparency and openness in the conduct of all public local affairs can be guaranteed to a higher extent. 19 Local Councils (LCs) were created within the framework of the LGA in 2004, exercising functions devolved from 17 Ministries, Departments and Agencies (MDAs). Devolved functions are in the areas of basic services in education (delivery of primary and junior secondary education), health and sanitation (delivery of primary and secondary health care), solid waste management, rural water, and social assistance services. The Decentralization Secretariat (DecSec) was especially created as the agency responsible to oversee and design measures for the effective implementation of the devolution process in Sierra Leone. The GoSL has been able to maintain support to local level institutions through direct transfers for devolved sectors and capacity building activities for LCs and Ward Committees (WCs). As per the LGA, LCs are the highest developmental authority in a locality and exert executive powers for promoting the development and the welfare of its inhabitants, with autonomous resources (see article 20 of the LGA). Democratically elected, LCs initiate and maintain social service programs, are responsible for human settlements in the locality, execute development plans, levy local taxes, and oversee the activities of Chiefdom Councils (which largely operate executing functions delegated by LCs). Government Ministries exercise a role of responsible agencies for policy matters, provide technical guidance to LCs and monitor their performance. WCs are established by LCs and conduct public meetings to mobilize residents, provide a focal point of discussion (which feeds into LC development planning activities), and organize communal and voluntary work. Resident Technical Facilitators (RTFs) are assigned by DecSec to every LC in order to provide technical and administrative support, and to facilitate communication flows with relevant MDAs.

Relationship to CAS/CPS/CPF

The World Banks objectives align with the priorities shown by the Government of Sierra Leone and the Africa Regions Social Protection strategies. Dr. Jim Yong Kim, President of the World Bank Group, recently stated that the central objective of the World Bank is to "raise the income of the lowest 40 percent of earners in developing countries, and improve their access to life's essentials, including food, shelter, health care, education and jobs". During the last year the institution has highlighted the importance of supporting EVD affected countries in this context of a global struggle against inequality of access to adequate health treatments and other essential social services. The project is closely aligned with the twin goals of poverty reduction and shared prosperity with a focus on fostering equity and access to the delivery of social services for the poor and vulnerable population groups in the country. The project is aligned with the Africa Regions Social Protection Policy, which supports the strengthening of social protection response by managing risks and responding to natural disasters, and closing the gap in access to basic services, thus building resilience and protecting families and communities.

All efforts will be aligned with the Agenda for Prosperity (A4P). The A4P remains the defining program for the overall development of Sierra Leone despite the shock of the epidemic, and is the main national anchor for dealing with the medium to long term challenges posed by the disease. The program is broad in scope and seeks to address the main challenges the country is facing by diminishing youth unemployment, ensuring that free health care and adequate nutrition are provided, and by conducting multiple interventions in education, agriculture, infrastructure, energy, water and sanitation, and toward building a social safety net for the vulnerable population. The project also seeks to guarantee good governance by fighting corruption and ensuring equality of

opportunity regardless of gender.

The project will support the priorities outlined in the Government of Sierra Leone's Post Ebola Recovery Strategy (PERS). The PERS focuses on getting to and maintaining zero cases of new Ebola infected individuals, implementing immediate recovery priorities, and transitioning back into the A4P calendar and agenda.

The immediate priorities are to: (i) restore health services and plan towards building a robust health care system that is resilient to ward-off emergencies and recurring tropical diseases; (ii) reopen educational facilities and attendant services; (iii) enhancing food security initiatives; (iv) expand provision of water, sanitation and hygiene services; (v) propel increased private sector participation in the economy; (vi) expand the coverage of social protection services to extremely poor, disabled and vulnerable members of the Sierra Leonean society; and (vii) close the fiscal deficit. The PERS supports fundamental elements for an adequate response to EVD, such as the need for community engagement through social mobilization and psychosocial interventions.

II. Project Development Objective(s)

Proposed Development Objective(s)

The Project Development Objective (PDO) is to bolster social trust, community participation in the delivery of social assistance services and resilience to disasters through strengthened capacity of Local Councils to effectively respond to the Post Ebola Recovery Strategy.

Key Results

Progress toward the achievement of the PDO will be measured through the outcome indicators noted below. Indicators will be the Integrated National Public Services Survey (INPSS) and Comprehensive Local Government Performance Assessment System (CLoGPAS) reports as data sources

• 100,000 beneficiaries reached by Local Councils trauma and sensitization interventions.

• Active Local Council Social Accountability Teams (one per district) and Community Monitoring Groups (one per community) in the two districts in which the Community Monitoring (CM) intervention is implemented.

• All Local Councils development plans integrating standard disaster risk reduction and mitigation strategies.

Increase by 8 percent the nationwide level of trust at the community level.

III. Preliminary Description

Concept Description

Summary: The proposed project consists of three components:

Component 1: seeks to promote long-term psychosocial health and resilience through the implementation of selected sensitization and community building activities, via capacity building support for Local Councils (LCs) to adequately adapt the delivery of social assistance services to the Ebola and post-Ebola context with new activities. The component also seeks to strengthen the devolution process, since its effective operationalization will contribute significantly in enhancing the capacity of LCs in the post-Ebola context and hence in ameliorating the quality of service delivery.

Component 2: focuses on disaster risk management to build LC resilience and to promote a predetermined action strategy in face of future external shocks, strengthening ongoing technical assistance to LCs and Ward Committees (WCs). Community engagement interventions will be promoted through the creation of social accountability teams, and open training activities for citizens on communication, advocacy and other relevant skills to ensure effective citizen interaction with local public institutions. Similarly, funding will be apportioned to scale up a Community Monitoring (CM) intervention piloted under the Decentralized Service Delivery Program (DSDP) II project. The component will also strengthen data collection and data management of LCs through training and capacity building to enhance their responsiveness to community needs.

Component 3: consists of the operational support geared towards project management, monitoring and evaluation.

The project will complement existing strategies, such as the Agenda for Prosperity (A4P), Vision 2035, the Ebola Emergency Response Plan (EERP) and the Ebola Recovery Strategy (PERS). The program, therefore, seeks to strengthen existing frameworks to ensure sustained and robust delivery of social services and focus on the general development direction defined by the GoSL. The leading priority of the EERP and PERS is restoring national healthcare delivery services, adapting service provision, and putting in place a solid framework for a mechanism that is robust to respond to future outbreak of health emergencies. Yet, achieving desired health outcomes is hinged on achieving desired outcomes in other sectors. Accompanying priorities include: (i) restoring other social services such as education, water, environmental sanitation and hygiene; (ii) increasing support for social protection and safety nets; and (iii) restoring and stimulating economic activities to increase employment and government revenue. The current epidemic has tested the efficacy of service delivery at the community level, and suggests reviewing decentralization programs and redoubling efforts in this direction.

This project has been designed in close partnership with staff from the Government of Sierra Leone's Decentralization Secretariat (DecSec), the Local Government Finance Department (LGFD) and the Integrated Project Administration Unit (IPAU), at the Ministry of Finance and Economic Development (MoFED). Consultations have also been held with communities and members of WCs. The alternative of working with Non-Governmental Organizations (NGOs) to implement this project were explored, however, given the ongoing EVD crisis, the capacity and availability of strong NGOs/CSOs has been overextended and largely fragmented. Given the importance and urgency of ensuring that the services are delivered to the communities as rapidly and efficiently as possible, the project team strongly recommends recruiting IPAU to undertake the implementation of the project. IPAU has a strong track record of effectively coordinating a number of donor-funded projects, including the two phases of DSDP. IPAU is well acquainted with the decentralization process and has been actively working with communities, LCs and WCs, having exerted monitoring and evaluation functions at the local level. The agency is therefore well positioned to play a leading role in guiding and managing the project. IPAU will also work in cooperation with DecSec, ensuring that capacity building and training activities for LCs, communities and WCs are effectively provided. The project team will also promote partnerships and close coordination with other Ministries, Departments and Agencies (MDAs).

IV. Safeguard Policies that Might Apply

Safeguard Policies Triggered by the Project	Yes	No	TBD

Environmental Assessment OP/BP 4.01	x
Natural Habitats OP/BP 4.04	x
Forests OP/BP 4.36	x
Pest Management OP 4.09	x
Physical Cultural Resources OP/BP 4.11	x
Indigenous Peoples OP/BP 4.10	x
Involuntary Resettlement OP/BP 4.12	x
Safety of Dams OP/BP 4.37	x
Projects on International Waterways OP/BP 7.50	x
Projects in Disputed Areas OP/BP 7.60	x

V. Financing (in USD Million)

Total Project Cost:	3	Total Bank Financing:	0
Financing Gap:	0		
Financing Source			Amount
Japan Social Development Fund		3	

VI. Contact point

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