



Appraisal Environmental and Social Review Summary

Appraisal Stage

(ESRS Appraisal Stage)

Date Prepared/Updated: 04/07/2020 | Report No: ESRSA00678



BASIC INFORMATION

A. Basic Project Data

Country	Region	Project ID	Parent Project ID (if any)
Burundi	AFRICA	P173845	
Project Name	Burundi COVID19 Preparedness and Response Project		
Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date
Health, Nutrition & Population	Investment Project Financing	4/1/2020	4/3/2020
Borrower(s)	Implementing Agency(ies)		
Ministère des Finances, du Budget et de la Coopération au Développement Economique	Ministère de la Santé Publique et de la Lutte contre le Sida		

Proposed Development Objective(s)

To prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness in Burundi.

Financing (in USD Million)	Amount
Total Project Cost	5.00

B. Is the project being prepared in a Situation of Urgent Need of Assistance or Capacity Constraints, as per Bank IPF Policy, para. 12?

No

C. Summary Description of Proposed Project [including overview of Country, Sectoral & Institutional Contexts and Relationship to CPF]

The proposed project will support the implementation of Burundi COVID-19 Contingency plan validated in February 2020 and updated in March 2020 on aspects related to emergency response, support to national and sub-national prevention and preparedness, community and engagement and risk communication as well as monitoring and evaluation.



D. Environmental and Social Overview

D.1. Project location(s) and salient characteristics relevant to the ES assessment [geographic, environmental, social]

Burundi is a small, landlocked country in eastern Central Africa with a total land area of 27,834 km² and approximately 11.1 million inhabitants, making it the second-most densely populated country in continental Sub-Saharan Africa.

The Project has four components of which three have particular implications for environmental and social risks management as relevant to the World Bank's Environmental and Social Framework (ESF):

Component 1: Emergency COVID-19 Response supports the GoB's operational plan for COVID 19 related to case detection, confirmation, contact tracing, recording, and reporting, as well as health system strengthening.

(a) Case Detection, Confirmation, Contact Tracing, Recording, Reporting supports (i) strengthening disease surveillance systems, health laboratories, and epidemiological capacity for early detection and confirmation of cases; (ii) combine detection of new cases with active contact tracing; (iii) support epidemiological investigation; (iv) strengthen risk assessment, and (v) provide on-time data and information for guiding decision-making and response and mitigation activities. Additional support could be provided to strengthen health management information systems to facilitate recording and on-time virtual sharing of information.

(b) Health System Strengthening. For COVID-19 case management, the Project will support equipment of identified COVID-19 isolation and treatment centers, strengthen the capacity of health staff particularly in the 21 identified priority districts, provide drugs and equipment for treatment centers, provide materials and equipment to treat severe respiratory distress, support identification and equipment of units for severe cases treatment in referral hospitals and support review standard operating procedures (SOP). For infection prevention and control, the Project will finance the purchase of Infection prevention and control (IPC)/Water, Sanitation and Hygiene (WASH) kits at entry points and in health facilities, acquisition of personal protective equipment (PPE) for health facilities and entry points, capacity building of staff, provision of disinfection products in health facilities and entry points, provision of monitoring and data collection tools at entry points, management of quarantine.

The Project will also support the building of a (reinforced) De Montfort medical waste incinerator at Mudubugu temporary treatment center and extension of health staff room at the same site as well as complete the construction of Mudubugu permanent center and provide it with the necessary equipment. The Mudubugu treatment center was initially built to treat Ebola cases under the East Africa Public Health Laboratory Networking (EAPHLN) project (P156012) and has been identified to treat mild to moderate COVID-19 cases, with severe cases to be treated at referral hospitals to be identified by GoB in the 21 priority provinces. All civil works at the Mudubugu treatment center are within the existing footprint and no greenfield civil works are anticipated.

Component 2: Supporting National and Sub-national Prevention and Preparedness will finance all laboratory related costs identified in the GoB's operation plan as well as all costs related to national coordination, including supporting the national referral laboratory and the extension of laboratory diagnostic capacity for COVID-19 in regional and district hospitals to be identified by GoB, which is expected to include nine satellite laboratories based at district hospitals that were supported under the EAPHLN project for construction, equipment, and staff capacity building.

Component 3: Community Engagement and Risk Communication will support centralized and district level epidemiological surveillance of the GoB's operation plan and development of risk communication and community engagement plan.

D. 2. Borrower's Institutional Capacity

The Ministry of Finance, through the General Direction of Planning and Cooperation, will ensure coordination of the Project. The Ministry of Health (MoH), through its relevant technical departments, will be responsible for technical implementation. These ministerial departments do not have technical capacities for the management of environmental and social safeguards aspects as well as issues related to Sexual Exploitation and Abuse (SEA) and



Sexual Harassment (SH). The existing Project Technical Unit (PTU) in charge of other World Bank projects (including P165254 Investing in Early Years and Fertility in Burundi, and P156012 Health System Support Project) within MoH will be responsible for the day to day project management. It currently has one Environmental and one Social Specialist, whose capacity and performance could use strengthening. An additional Environmental and Social Specialist is under recruitment by the MoH PTU through the Investing in Early Years and Fertility Project.

To help launch the COVID-19 project and fill the gap until the new PTC environmental and social specialist is in place, the COVID-19 project will add an additional short-term Environment and Social Specialist to the team within 30 days of project effectiveness, drawn from the PIU of the Great Lakes Trade Facilitation Project (P155329). This short-term person will provide early-stage operational support to the project on monitoring the environmental and social risk management, including for SEA/SH risks until the new fulltime PTC E&S specialist is on board. The World Bank team will provide support to the MoH PTC to strengthen its capacity to manage SEA/SH risks.

II. SUMMARY OF ENVIRONMENTAL AND SOCIAL (ES) RISKS AND IMPACTS

A. Environmental and Social Risk Classification (ESRC)

Substantial

Environmental Risk Rating

Substantial

The Environmental Risk Rating is Substantial. The four major areas of risks for the Project are: (i) risks related to the establishing/rehabilitation of screening posts/rooms at airport and designated land crossing port of entry and emergency operation centers; (ii) risks related to hazardous and medical waste management and disposal; (iii) risks related to occupational health and safety including the risk of spread of the virus among health care workers and handling medical wastes; and (iv) risks related to community health and safety including the risk of the spread of COVID-19 among the population at large.

No greenfield civil works are expected. Small-scale civil works will occur within existing footprints with anticipated risks and impacts related to occupational, health and safety and construction waste.

Hazardous wastes that may be generated from the operations of the Mudubugu treatment center, hospital ICU isolation units and laboratories to be supported by the project interventions may include transmissible, infected, hazardous materials and wastes. Capacity for the safe handling, managing, transporting, and disposing of medical wastes in Burundi is low and will be enhanced by the Project through procurement and installation of a medical waste incinerator at the Mudubugu treatment center.

The substantial risk classification takes also into account the limited capacity of the designated PIU, as well as the challenge of managing health care waste.

Social Risk Rating

Substantial

The social risk classification for the project is Substantial. Key social risks and impacts are related to: (i) marginalized and vulnerable social groups (including Indigenous Peoples, the poor, and displaced persons and/or refugees) being unable to access facilities and services designed to combat the disease, in a way that undermines the central objectives of the project, (ii) social conflicts resulting from false rumors and misinformation, (iii) issues resulting from people being kept in quarantine, including stigma faced by those being admitted to treatment or isolation facilities (for example intimate partner violence during the quarantine and other social distancing measures as a result of household stress over economic and health shocks, forced coexistence in narrow living spaces, attacks on female healthcare workers, etc.) and (iv) risks of SEA/SH to Project workers and beneficiaries, and (v) labor management and OHS risks.

Public Disclosure



This classification takes into account that (i) possible impacts are considered mostly temporary, predictable and/or reversible (but could become widespread), and that (ii) the nature of the project does not preclude the possibility of avoiding or reversing them (although substantial investment and time may be required); and (iii) project activities and associated mitigation measures (e.g. related to quarantine facilities) may give rise to a limited degree of social conflict, harm or risks to human security.

B. Environment and Social Standards (ESSs) that Apply to the Activities Being Considered

B.1. General Assessment

ESS1 Assessment and Management of Environmental and Social Risks and Impacts

Overview of the relevance of the Standard for the Project:

This operation is being processed as an emergency response using condensed procedures under the Fast Track COVID-19 Facility (FTCF).

Key environmental risks for the project are: (i) risks related to the establishment/rehabilitation/upgrading of and the Mudubugu treatment center, isolation capacity in hospital ICUs and laboratories; (ii) risks related to hazardous and medical waste management and disposal; (iii) risks related to occupational health and safety, including the risk of spread of the virus among health care workers; and (iv) risks related to community health and safety including the risk of the spread of COVID-19, a dangerous pathogen, among the population at large.

To mitigate these risks, the project will develop an Environmental and Social Management Framework (ESMF), within two months of effectiveness. The ESMF will guide the preparation of site-specific Environmental and Social Management Plans (ESMPs) in advance to the start of any works related to the Mudubugu treatment center, hospitals or laboratories. The ESMF will also include an Infection Control and Medical Waste Management Plan (ICWMP), as an annex, to manage risks related to exposure to COVID-19 virus from diagnosis, testing, treatment, of patients generating biological, chemical, hazardous medical wastes, incorporating WHO guidelines establishing good international industry practice for COVID-19 response, including Guidelines for Quarantine, Biosafety, and Code of Ethics and Professional Conduct. The ICWMP will leverage and adapt the Biomedical Waste Management Plan that has been developed and implemented under the Burundi Health System Support Project (P156012) to propose measures and procedures for the safe handling, storage, and processing of COVID-19 materials including the techniques for preventing, minimizing, and controlling environmental and social impacts. The ESMF will also outline the implementation arrangement to be put in place for environmental and social risk management; training programs focused on COVID-19 laboratory biosafety, as well as compliance monitoring and reporting requirements. Land acquisition is not expected as the project will focus on existing facilities, and risks related to civil works are not envisaged to be serious or irreversible. They are expected to be site-specific, limited to existing facilities.

Key social risks and impacts are related to (i) marginalized and vulnerable social groups (including Indigenous Peoples, the poor, and displaced persons and/or refugees) being unable to access facilities and services designed to combat the disease, in a way that undermines the central objectives of the project, (ii) social conflicts resulting from false rumors and misinformation, (iii) issues resulting from people being kept in quarantine, including stigma faced by those being admitted to treatment or isolation facilities (for example, intimate partner violence during the quarantine and other social distancing measures as a result of household stress over economic and health shocks, forced coexistence in narrow living spaces, etc.), (iv) risks of SEA/SH to project workers and beneficiaries, including attacks on female healthcare workers or patients, and (v) labor management and OHS risks.



To mitigate these risks, relevant capacity-building measures will be included in the ESMF and ESCP. As noted above the MOH PTC will expand its two-person safeguard team with the addition of one short-term environmental and special specialist drawn temporarily from another World Bank-financed project. This specialist will fill the gap until a new environmental and social specialist currently under recruitment by the MOH PTC is in place.

The project will also include measures aimed at ensuring that the medical isolation of individuals does not increase their vulnerability (for example, to intimate partner violence), especially in remote rural areas of Burundi. Project components also entail risk communication, social mobilization and community engagement to raise public awareness and knowledge about prevention and control of COVID-19 among the general population and vulnerable groups. Beyond conflicts resulting from false rumors, vulnerable groups are at risk of being excluded from vital services, and quarantine interventions could increase the risk of intimate partner violence or SEA/SH, as well as culturally inappropriate accommodation and services.

In Burundi, there exists a high prevalence of intimate partner violence and sexual violence for women and girls, as well as social attitudes that indicate a high acceptance of intimate partner violence. While Burundi has a progressive legal and policy framework for gender equity, including the National Gender Policy 2012-2025 and laws addressing gender-based violence, a 2017 gender analysis (USAID) identified important gaps regarding access for women to services, resources, and opportunities in relation to holistic survivor care, economic and educational opportunities, and participation in decision-making processes in both domestic and professional spheres. Additional risk factors include project activities that are planned in areas with higher levels of poverty, in humanitarian settings, and also in remote or rural areas, which may hinder accessibility and supervision of female workers and beneficiaries. Specific feedback from women and girls about SEA/SH risks related to this project have not yet been solicited through community consultations in safe and enabling environments, and the health care system in Burundi is not known to have a national code of conduct in place to address SEA/SH risks in the health sector.

The project has been given a preliminary rating of substantial risk for SEA/SH, based upon the country context and project-specific indicators. The SEA/SH risks will be further assessed and addressed during the implementation phase, which will include a review of the preliminary screening exercise and establishment of the corresponding measures to prevent and mitigate identified risks. The World Bank team will provide support to the MoH PTC to strengthen its capacity to manage SEA/SH risks. The project will undertake SEA/SH prevention, mitigation and response measures, which will be selected based upon the risk rating ultimately attributed to the project during implementation. These measures will be included in the ESMF.

ESS10 Stakeholder Engagement and Information Disclosure

COVID-19 presents unique and considerable challenges for stakeholder engagement and information disclosure, as stakeholder engagement and consultation processes cannot be conducted following established methods and procedures due to the timelines of an emergency operation and in the light of limitations on social gatherings and other forms of personal contact put in place to address the pandemic. Nevertheless, the approach to stakeholder engagement should be based on the principles of meaningful consultation and disclosure of appropriate information – with consultation and communication methods adapted in the light of the pandemic. Given that stakeholder engagement is a critical tool for social and environmental risk management, project sustainability and success, the World Bank team provided advice to the client on managing stakeholder engagement in these constrained circumstances.



A draft Stakeholder Engagement Plan (SEP) has been prepared for implementation and disclosed prior to Appraisal, it will be updated, as per the ESCP, within two months after project effectiveness, and periodically throughout implementation. The updated SEP will include the Risk Communication and Community Engagement (RCCE) strategy, to be prepared under the project in line with WHO provisions on “Risk communication and community engagement (RCCE) readiness and response to the 2019 novel coronavirus (2019-nCoV)” (January 26, 2020).

The proposed project itself will support a communication, mobilization, and community engagement campaign to raise public awareness and knowledge on prevention and control of COVID-19 among the general population and contribute to strengthening the capacities of community structures in promoting coronavirus prevention messages. The client will engage in meaningful consultations on policies, procedures, processes, and practices (including grievances) with all stakeholders throughout the project life cycle, and provide them with timely, relevant, understandable and accessible information. The consultations will provide information on project-related risks, including SEA/SH and especially intimate partner violence related to the COVID-19 emergency, and the proposed reporting and response measures, with a particular focus on women, children and other vulnerable groups.

Community consultations with women and girls that are related to SEA/SH risk mitigation will be conducted in safe and enabling environments, such as in sex-segregated groups and with female facilitators (virtually, and if and when it becomes possible, in-person), and will be focused on understanding women’s and girls’ risks and vulnerabilities, as well as their well-being, health and safety concerns, as they relate to COVID-19 project activities.

A project-wide grievance redress mechanism (GRM), which includes measures for handling SEA/SH complaints, will be established, as outlined in the SEP.

B.2. Specific Risks and Impacts

A brief description of the potential environmental and social risks and impacts relevant to the Project.

ESS2 Labor and Working Conditions

ESS2 is considered relevant to this Project. The project is expected to encompass the following categories of workers: direct workers and contracted workers. Most activities supported by the project will be conducted by direct workers of the Project such as health and laboratory workers, i.e. civil servants employed by the Ministry of Health and other institutions. The project will outsource civil works to contractors in interventions such as the finalization of the construction of an infectious treatment center and upgrading of the provisional Center of Mubudugu/Bubanza, as well as other minor civil works within the targeted health centers of other provinces. While the number of workers may not be estimated at the current stage, no large-scale labor influx is expected.

The key risk is in relation to the contamination with COVID-19 (or other contagious illnesses) as patients taken seriously ill with COVID-19 are likely to suffer from illnesses that compromise their immune system, which can lead to illness and death of workers. As mitigation measures for project workers, the PIU will implement adequate occupational health and safety (OHS) measures (including emergency preparedness and response measures) in line with the ESMF and WHO guidelines on COVID19 in all facilities, including laboratories, quarantine and isolation centers, and screening posts. Measures relating to occupational health and safety will be documented in labor management procedures (LMP) that will be included in the ESMF, to protect workers from injury, illness, or impacts associated with exposure to hazards encountered in the workplace or while working such as the provision of infection control precautions and adequate supplies of PPE. The mitigation measures will incorporate the World Bank Group's General Environment, Health, and Safety Guidelines (EHSGs), the EHSGs for Health Care Facilities and other Good International Industry Practices (GIIP). The ESMF will also include sections on Environment Health and Safety (EHS),



with specific instruments, such as EHS checklists, Codes of Conduct, including measures to prevent SEA/SH, safety training materials, etc., that will need to be prepared either by the Recipient and/or the contractor prior to commencement of civil works.

The PIU will also ensure a non-discriminatory, decent work environment, including by ensuring that all health workers adhere to the WHO Code of Ethics and Professional conduct. In line with ESS2, the use of forced labor or the use of child labor for any person under the age of 18 in a hazardous work situation (e.g. in health care facilities) is prohibited.

A worker Grievance Redress Mechanism will be established and operated through a grievance hotline and assignment of properly trained focal points to address these grievances within the Ministry of Health and Population. This will be described in the LMP. A code of conduct (CoC) specifically addressing SEA/SH and related sanctions will be developed and signed by all workers, both health care system personnel as well as workers contracted to the project. The PIU will also include any environmental and social management plans or other instruments, ESS2 requirements, and any other required ESHS measures, into the ESHS specifications of the procurement documents and contracts with contractors and supervising firms. The Recipient will ensure that all civil works contracts comply with the environment, social, health, and safety (ESHS) mitigation measures based on the WBG EHS Guidelines, ESMF, SEP, and other relevant instruments.

ESS3 Resource Efficiency and Pollution Prevention and Management

ESS3 is considered relevant to the Project. Hazardous chemical wastes are expected to be generated from medical facilities, laboratories, and related facilities. The improper handling, transporting, and disposal of these hazardous and medical waste streams may result in adverse impacts to human health and the environment. An Infection Control and Medical Waste Management Plan (ICWMP) for health facilities will be developed as Annex to the ESMF and will be implemented. ICWMP will follow WHO guidance documents on COVID-19 and other GIIP (Good Industry International Practices).

In addition, site-specific ESMPs will be prepared for small scale infrastructure works including the rehabilitation and/or construction of laboratories, ICU isolation units, and the Mudubugu treatment center. The specifications and operation of the De Montfort medical waste incinerator to be procured and installed at the Mudubugu treatment center will be consistent with the World Bank Group Environment, Health and Safety (EHS) Guidelines.

ESS4 Community Health and Safety

ESS4 is considered relevant to the Project. Inappropriate handling of COVID-19 can expose communities and could lead to further spread of the disease. Lack of provision of medical services to disadvantaged or vulnerable people is also a potential risk under the project interventions. Laboratory accidents and/or emergencies such as fire incident or natural phenomena event is also an associated risk. Some project activities may also give rise to risks related to SEA/SH as described above.

In order to mitigate these risks, the PIU will put measures in place to prevent or minimize the spread of the infectious disease/COVID-19 to the community. Emergency preparedness measures will also be developed and implemented to manage unlikely cases of laboratory accidents/ emergencies e.g. a fire response or natural phenomena event. Measures will be taken place to ensure that individuals or groups who, because of their particular circumstances, may be disadvantaged or vulnerable have access to the development benefits resulting from the Project. These measures will be documented in the ESMF.



The PIU operation of the Mudubugu treatment center, hospital ICU isolation units, and laboratories in line with relevant WHO guidelines which will be included in the ESMF. In case the facilities are used for quarantine and/or isolation purposes, the Project will be expected to follow WHO guidelines on “Key considerations for repatriation and quarantine of travelers in relation to the outbreak of novel coronavirus 2019-nCoV” as well as the Africa CDC guideline on “Africa CDC Guidance for Assessment, Monitoring, and Movement Restrictions of People at Risk for COVID-19 in Africa”

The ESMF will also include guidance related to transportation and management of samples and medical goods or expired chemical products. In addition, the Mudubugu treatment center, hospital ICU isolation units, and laboratories will be operated in a conflict-sensitive manner, avoiding any aggravation of local communal conflicts, including between host communities and refugees/IDPs.

The PIU will seek to mitigate the risk of any form of SEA/SH by relying on the WHO Code of Ethics and Professional Conduct for all workers in the quarantine facilities as well as the provision of gender-sensitive infrastructures such as secure and sufficiently private sex-segregated toilets and adequate light in quarantine and isolation centers.

In case the Mudubugu treatment center, hospital ICU isolation units and laboratories are to be protected or operated by security personnel, the project will ensure that the security personnel follow a strict code of conduct which is in line with ESS4 and specifically addresses SEA/SH risks and which avoids any escalation of situation, taking into consideration the above noted needs of quarantined persons as well as the potential stress related to it.

The project is not likely to employ military personnel for civil works, but if the situation changes, the project will undertake a Security Risk Assessment (SRA) to review the military’s rules of engagement with civilian authorities and identify the specific risks related to providing increased security at the various project sites. The project would then propose adequate mitigation measures, and strengthen existing measures, where necessary, to ensure that the use of the military in project activities will not result in adverse consequences to community health and safety, including in matters relating to SEA/SH. The project will promote the avoidance of SEA/SH by relying on the WHO Code of Ethics and Professional Conduct for all workers in the quarantine facilities as well as the provision of gender-sensitive infrastructure, such as segregated toilets and enough light in quarantine and isolation centers.

ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement

ESS5 is not currently relevant to the Project. All construction will be undertaken within existing facilities and public lands. No land acquisition, restrictions on land use or involuntary resettlement are anticipated as a result of proposed project activities. In an unlikely event of an intervention where the land acquisition would be necessary, plans would be developed to the satisfaction of the World Bank prior to the commencement of any land acquisition.

ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources

ESS6 is not currently relevant. No adverse impacts on natural resources or biodiversity are anticipated as a result of project activities. No adverse impacts on natural resources or biodiversity are anticipated as a result of project activities.

ESS7 Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities



ESS7 is not currently relevant to the project as it is not being implemented in areas where Indigenous Peoples/Sub-Saharan Historically Underserved Traditional Local Communities (IP/SSAHUTLCs) are present or in areas to which they have a collective attachment. Should the presence of indigenous communities be confirmed through further screening, the project will address any risks posed to them and measures put in place to ensure that they receive culturally appropriate benefits. This will be done by ensuring that their views are sought as specified in the SEP and that a Social Assessment (SA) is carried out prior to carrying any activities that would impact indigenous communities. Following the SA, and as appropriate: (i) a stand-alone plan or framework may be developed; (ii) or key elements of risk mitigation and culturally appropriate benefits will be included in the ESMF. Public consultations with representatives of indigenous communities and their organizations are provided for in the SEP, considering their circumstances. These organizations and representatives will be consulted during the revision of the SEP. The project will exclude any activities which would require Free, Prior and Informed Consent (FPIC).

ESS8 Cultural Heritage

ESS8 is not currently relevant to the Project as the limited civil works are unlikely to affect cultural assets. In the unlikely event of construction or the movement of earth in connection with any project activities that have not yet been identified, the ESMF will include measures for “Chance Finds” of archaeological or other cultural heritage.

ESS9 Financial Intermediaries

ESS9 is not relevant to the Project for the suggested project interventions.

B.3 Other Relevant Project Risks

None

C. Legal Operational Policies that Apply

OP 7.50 Projects on International Waterways No

OP 7.60 Projects in Disputed Areas No

III. BORROWER’S ENVIRONMENTAL AND SOCIAL COMMITMENT PLAN (ESCP)

DELIVERABLES against MEASURES AND ACTIONs IDENTIFIED	TIMELINE
ESS 1 Assessment and Management of Environmental and Social Risks and Impacts	
Designated PIU under the MoH, will appoint and maintain environmental and social specialists.	05/2020
Prepare, disclose, adopt, and implement the Environmental and Social Management Framework (ESMF).	07/2020

Public Disclosure



Public Disclosure

ESS 10 Stakeholder Engagement and Information Disclosure	
Update, disclose and implement the Stakeholder Engagement Plan (SEP)	07/2020
ESS 2 Labor and Working Conditions	
Develop, as part of the ESMF, a Labor Management Procedures (LMP) including environment, social, health, and safety (ESHS) measures.	07/2020
ESS 3 Resource Efficiency and Pollution Prevention and Management	
Develop, as an Annex to the ESMF, Infection Control and Waste Management Plan (ICWMP) for health facilities.	07/2020
ESS 4 Community Health and Safety	
Develop, as part of the ESMF, measures to minimize community exposure to disease, to ensure vulnerable parties' access to benefits, to manage risks of security personnel and labor influx, and to prevent/mitigate/respond to risks related to SEA/SH.	07/2020
ESS 5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement	
ESS 6 Biodiversity Conservation and Sustainable Management of Living Natural Resources	
ESS 7 Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities	
ESS 8 Cultural Heritage	
ESS 9 Financial Intermediaries	

B.3. Reliance on Borrower’s policy, legal and institutional framework, relevant to the Project risks and impacts

Is this project being prepared for use of Borrower Framework? No

Areas where “Use of Borrower Framework” is being considered:

None

IV. CONTACT POINTS

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Borrower/Client/Recipient

Borrower: Ministère des Finances, du Budget et de la Coopération au Développement Economique

Implementing Agency(ies)

Implementing Agency: Ministère de la Santé Publique et de la Lutte contre le Sida

V. FOR MORE INFORMATION CONTACT

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VI. APPROVAL

Task Team Leader(s): Laurence Elisabeth Marie-Paule Lannes, Moulay Driss Zine Eddine El Idrissi
Practice Manager (ENR/Social) Kevin A Tomlinson Cleared on 07-Apr-2020 at 07:16:11 EDT
Safeguards Advisor ESSA Nina Chee (SAESSA) Concurred on 02-Apr-2020 at 10:30:15 EDT

Public Disclosure