

# Combined Project Information Documents / Integrated Safeguards Datasheet (PID/ISDS)

Appraisal Stage | Date Prepared/Updated: 12-Jan-2021 | Report No: PIDISDSA31071



# **BASIC INFORMATION**

# A. Basic Project Data

Country Zambia	Project ID P175955	Project Name Second Additional Financing for Girls' Education and Women's Empowerment and Livelihood Project - COVID 19 Scale-up of Social Cash	Parent Project ID (if any) P151451
Parent Project Name Girls Education and Womens Empowerment and Livelihood Project	Region AFRICA EAST	Estimated Appraisal Date 21-Jan-2021	Estimated Board Date 15-Mar-2021
Practice Area (Lead) Social Protection & Jobs	Financing Instrument Investment Project Financing	Borrower(s) Government of Republic of Zambia	Implementing Agency Ministry of Community Development and Social Services (MCDSS), Ministry of Gender (MoG), Ministry of General Education (MoGE)

Proposed Development Objective(s) Parent

The project development objective is to support the Government of Zambia to increase access to livelihood support for women and access to secondary education for disadvantaged adolescent girls in extremely poor households in selected districts.

Proposed Development Objective(s) Additional Financing

The project development objective is to support the Government of Zambia to increase access to livelihood support for women and access to secondary education for disadvantaged adolescent girls in extremely poor households in selected districts, and provide cash transfers for poor and vulnerable households.

#### Components

Keeping Girls in School Supporting Women's Livelihoods Institutional Strengthening and Systems Building

**PROJECT FINANCING DATA (US\$, Millions)** 

# SUMMARY



Total Project Cost	105.00
Total Financing	105.00
of which IBRD/IDA	105.00
Financing Gap	0.00

#### DETAILS

#### World Bank Group Financing

International Development Association (IDA)	105.00
IDA Credit	105.00

#### **Environmental Assessment Category**

#### **B-Partial Assessment**

#### Decision

#### The review did authorize the team to appraise and negotiate

Other Decision (as needed)

#### **B. Introduction and Context**

1. Poverty has been deep-rooted, increasing over the last five years, and COVID has exacerbated and compounded the effect on poor rural households already distressed by recurrent weather shocks. Low GDP per capita growth coupled with a highly resource dependent economy has led to a stagnant national poverty rate<sup>1</sup> at 54 percent between 2010 and 2015. Since 2015, estimates indicate that the poverty rate increased to 56 percent in 2019. COVID has exacerbated this, and is estimated to have increased poverty to 57.6 percent in 2020. The poverty impact of COVID-19 is quite severe when considering that the percentage point increase in poverty in 2020 alone is slightly higher than that in 2015-19. While COVID's direct impact, as of now, seems to be more severely felt by better off urban households, rural areas continue to be the epicenter of poverty. These estimates are in line with the World Bank's high frequency phone survey<sup>2</sup> that shows that there has been a considerable fall in household income since the start of the pandemic - four in five households reported a drop-in income from nonfarm business, and one in three reported a reduction or disappearance of wages. Income from farming was also reduced for over half of households and had stopped entirely for eight percent of households. Domestic remittances have also fallen since the outbreak of the pandemic, with 58 percent of remittance-receiving households reporting a reduction in remittance income, and 14 percent reporting a cessation of this income source. In contrast, two thirds of households reporting wage employment as an income source saw no change to wages since the outbreak of the pandemic - highlighting the stark contrast between workers in the

<sup>&</sup>lt;sup>1</sup> The poverty rate is measured at ZMK 214 per adult equivalent per month or US\$1 per day

<sup>&</sup>lt;sup>2</sup> Zambia COVID Phone Survey Round 1 (July 2020)



formal and informal/self-employed sectors.

2. **Coupled with significant price inflation, this translates to a concerning impact on household food security.** IMF estimates<sup>3</sup> consumer price inflation to have increased from 9.8 percent in 2019 to 14.5 percent in 2020, and to be in double digit figures until 2022. The loss in income, coupled with price inflation has meant that households, particularly in rural areas are deploying negative coping mechanisms such as reduced food consumption (as their savings are likely depleted due to previous coping efforts to weather shocks). The high frequency phone survey found an increase in food insecurity, with 39 percent of households reporting having skipped a meal and 41 percent of households reporting being concerned about running out of food.

3. The government recognizes the role of social safety nets in protecting the poorest and most vulnerable against COVID, doubling its budgetary allocations to SCT. Globally, social safety nets have served as the first line of defense against COVID. About 60 percent of all social protection COVID responses globally and 84 percent in Africa have been through social safety nets<sup>4</sup> - and around half of these are in the form of unconditional or conditional cash transfers. Recognizing the need to mount an effective defense to COVID, the government increased its budgetary allocations to SCT to 0.6 percent of GDP equivalent, double the allocations since 2017 (when allocations doubled from the average in the previous 3 years).

4. However, the COVID pandemic pushed the Zambian economy into contraction and weakened the Government's ability to meet the budgetary allocations for SCT. Real GDP contracted by 0.3 percent in the first quarter of 2020 and is projected to contract by 4.8 percent for the year.<sup>5</sup> Fiscal space has been tightly squeezed by high external debt service costs and the effects of the economic downturn induced by COVID 19. In fact, Zambia is the first country to default on sovereign debt since the COVID 19 pandemic.

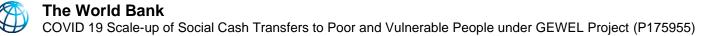
5. There is a strong policy environment and policy level commitment upon which Zambia's social protection sector is built. The National Social Protection Policy 2014 (NSPP) provides a broad framework within which social assistance programs operate. The NSPP highlights three key objectives (a) Reduce extreme poverty and destitution among vulnerable and poor households, (b) Enhance food and nutrition security for vulnerable populations, and (c) Build the human capital of extreme poor households to stop inter-generational transfer of poverty. NSPP, in fact, sets forth concrete targets to scale-up the SCT program to all districts nationally by 2016—a target that the government managed to achieve by 2017. The Seventh National Development Plan (7NDP) reinforces the NSPP with targets to increase social assistance coverage from 40% to 70% of the poor, and spending from 0.7% to 1.7% of GDP. Additionally, the Integrated Framework for Basic Social Protection introduces the concept of protection floors and promotion ladders to improve coherence in the overall social protection sector, specifically, the social assistance and, jobs and economic inclusion pillars. This reinforces social assistance programming as an essential ingredient of the maturing social protection sector in Zambia.

6. **This commitment has been manifested in increased budget allocations on social assistance programs since 2014.** Budget allocations to the largest program, the Social Cash Transfer (SCT), were scaled up, accompanied by a gradual transition from primarily donor-financing to government-financing. Since 2014, budget allocations increased for social assistance, especially the SCT. The share of the social assistance budget increased from 0.14 to 0.61 percent of GDP between 2014 and 2021. Other programs, such as Public Welfare Assistance Committee, Home-Grown School Feeding program, GEWEL Keeping Girls in School initiative, and other bursary programs, continue to be largely donor financed, nevertheless increasing in government budgetary commitments.

<sup>&</sup>lt;sup>3</sup> World Economic Outlook, October 2020

<sup>&</sup>lt;sup>4</sup> Gentilini et al (Living Paper) September 18, 2020 version

<sup>&</sup>lt;sup>5</sup> World Economic Outlook, October 2020



7. However, actual spending (as compared to budget allocations) is well below allocation due to fiscal constraints, leaving the poorest largely unprotected. For the period 2014-18, spending averaged only 0.11 percent of GDP. Defined as the share of actual spending in the total authorized budget provision, the execution rate is very low for social assistance. During 2014-18, actual spending averaged only about half of the authorized budget.<sup>6</sup> This reduced even further in 2019 and 2020, due to a worsening fiscal situation. Only about 15 percent of the SCT budgetary allocation was disbursed in 2019 and 46 percent in 2020. This led to the majority of SCT beneficiaries only receiving one out of six cash transfers due to them in 2019 and three out of six in 2020. Under GEWEL AF1, payment of these outstanding 2020 transfers is about to commence for the beneficiaries in 67 districts (just over half the caseload).

8. Nevertheless, SCT has a national presence with significant coverage amongst the poor and is generally well targeted to the poorest households. The SCT program currently covers 632,000 (616,000 excluding deceased beneficiaries) households nationally—about 18 percent of total population—and is expected to scale up to a total of 700,000 households by early 2021. The program has a presence and a functional program infrastructure in 116 districts, able to immediately disburse cash transfers to these already registered households if financing is available. Estimates show that the SCT caseload is higher in districts with a greater number of poor people, and is as a result, a program targeted well at the poor nationally—89 percent of beneficiaries belong to the first six deciles (53 percent in the poorest two deciles).

9. The Government of Republic of Zambia has made a strong call for the World Bank to support its public response to the pandemic. As per the Government's official request for a Second Additional Financing (AF2), Government recognizes that the existing safety net is usually the first line of response during an emergency, but that liquidity constraints have meant that GRZ fiscal commitments to social protection remain largely unmet, with safety net beneficiaries not receiving timely and predictable transfers. Yet, the predictability of cash transfers, particularly during emergencies, is critical to avoid further negative coping strategies and an irreversible impact on food security and human capital. It is therefore urgent to provide cash transfer support to SCT households across all of Zambia's 116 districts as well as scale up to additional beneficiaries where possible. Further delays in beneficiaries getting cash transfers will result in deepening negative coping strategies with potentially irreversible effects on food security and human capital.

# C. Proposed Development Objective(s)

#### **Original PDO**

The project development objective is to support the Government of Zambia to increase access to livelihood support for women and access to secondary education for disadvantaged adolescent girls in extremely poor households in selected districts.

#### Current PDO

The project development objective is to support the Government of Zambia to increase access to livelihood support for women and access to secondary education for disadvantaged adolescent girls in extremely poor households in selected districts, and provide cash transfers for poor and vulnerable households.

<sup>&</sup>lt;sup>6</sup> Zambia Social Protection and Jobs Public Expenditure Review 2021 (forthcoming)



# **D. Project Description**

10. The GEWEL Parent Project met its Project Development Objective (PDO) within the timeframe of the original credit and all components have been scaled up in AF1. By September 2020, which was the end date of the original credit (before the project closing date was extended to 2024), all PDO indicators were met or exceeded their targets, showing that GEWEL has contributed towards increasing the school enrollment of adolescent girls from poor households and improving the livelihoods of poor women. 75,000 women have received the Supporting Women Livelihood (SWL) package; over 28,000 girls ever paid have benefited from the bursary support through the Keeping Girls in School (KGS) component and 4,645 have completed secondary schooling. In addition, various system strengthening investments have been put in place, including an innovative multi-provider digital payment system that is based on beneficiary choice, a Gender Based Violence (GBV) sensitive Grievance Redress Mechanism (GRM), and support to strengthen financial management and procurement functions within implementing ministries. AF1 is scaling up SWL to a further 54,000 women and KGS to a further 25,000 girls, in addition to introducing a Subcomponent 2(b) on SCT.

11. **AF2 will add scale up the financing of Subcomponent 2 (b).** AF2 will focus on adding financing to subcomponent 2 (b) of GEWEL to the SCT program, and related, delivery systems investments. **With the addition of US\$ 105 million IDA, and US\$ 5 million equivalent funding gap, Subcomponent 2b financing for 2020-2024 will hereafter be US\$ 225.3 equivalent in total (of which US\$ 191.8 million IDA, US\$7 million SIDA, US\$21.5 million FCDO, and US\$ 5 million funding gap to allow for a potential further grant contribution to be received in the MDTF). As under AF1, the subcomponent will continue to finance (a) cash transfers, (b) annual education lump-sum grant, (c) SCT communications and messaging, (d) operating costs, and (e) roll out of the Zambia Integrated Social Protection Information System (ZISPIS).** 

12. This additional financing will enable immediate disbursements for timely and predictable transfers to a total of 616,000 households in 116 districts that are already registered but been receiving irregular transfers over the past 2 years. Under AF1, subcomponent 2 (b) currently contains resources to cover 245,000 beneficiary households over the period of four years (2020-2024), and due to exchange rate savings from currency depreciation, is currently covering over 370,000 households in 67 districts in 2020. As per the Government's request, the proposed AF2 will scale up the Bank's financing to SCT to cover the full caseload in all districts for 18 months of transfers (January 2021 to June 2022). This will allow the coverage of the additional 246,000 households currently registered in the additional 49 districts, including both rural and urban areas, so they can receive timely and predictable transfers. This immediate scale up / disbursement is enabled by the program infrastructure already in place for the SCT, whereby 616,000 households are already registered on the program in all 116 districts countrywide but had been receiving irregular transfers for lack of financing.

13. **AF2 will also enable a gradual scale up to a further 378,000 beneficiary households, reaching 994,000 households in total or 28 percent of the total population within the period of AF2.** This will be done in a technically robust manner to preserve the integrity of the program. GRZ has a target to scale up to 994,000 households by end-2021 and it was agreed with Government that this would be achieved in two stages. Stage 1 will begin immediately with AF1 funding to enumerate additional households in all districts within the current same eligibility criteria for SCT up to a total of around 750,000 households (as survey data indicates that the

program will have exhausted the beneficiaries that meet the current criteria at that caseload)<sup>7</sup>. Stage 2 will begin with meaningful consultation and stakeholder buy-in before adding new categories of eligible beneficiaries or relaxation of existing criteria, to be able to attain the additional caseload of 994,000. Therefore, while the program proceeds to enumerate and pay the 750,000 households for a total of 12 months transfers in 2021 (with backdated payments as needed), work can commence in tandem on consultation and agreement of the new categories to be added. The caseload of 994,000 will therefore be registered by end of 2021 to receive 6 months of transfers in 2022. It was also agreed that (i) a robust field-tested enrollment software application is needed for the enumeration exercises; (ii) there will be strict adherence to COVID 19 prevention measures in all field activities; (iii) delivery of payments to current beneficiaries and roll out of delivery systems (ZISPIS & GRM) will be prioritized, so as not to be derailed by activities to enumerate new beneficiaries; and (iv) communications will be strengthened to eliminate, to the extent possible, the risks of politicization around election campaigning.

14. The size of the transfer will also be increased to adjust for its eroding value due to inflation in recent years, and to provide a meaningful transfer amount that can reduce negative coping mechanisms due to COVID 19. The nominal value of benefit amount has been increased only once over the last five years from 70 to 90 ZMW per household per month.<sup>8</sup> However, the increase is not sufficient to compensate for the increased living costs due to the massive increase in inflation over the years. The value of the transfer as a share of national per capita poverty line<sup>9</sup> goes from 7.1 percent (when the program was initiated in 2014) to 5.2 percent in 2019, and with double-digit inflation, is expected in quickly dip to 3.6 percent by 2022. Therefore, to maintain the real value of the transfer, it is important to adjust the transfer amounts annually with the annual inflation. This was indeed the case up until 2014. The purchasing power of the transfer has therefore substantially eroded due to inflation. As agreed with Government, the transfer value will therefore increase to at least account for this inflation and retain the 2014 adequacy level (namely 150 ZMW per average household / 300 ZMW per household with disabled member per month or US\$ 7.5 and \$15 respectively<sup>10</sup>).

15. **Delivery systems will also be strengthened.** It was agreed with Government that while the basic delivery systems are in place, they will need to be strengthened and scaled up. The SCT transfers currently being made under AF1 rely on MCDSS's existing in person cash payment system, with cash delivered to beneficiaries at specified payment events by civil servant Pay Point Managers (PPMs). MCDSS also has a basic SCT MIS in place and has piloted a digital payment system (ZISPIS) in 17 districts, with the support of Smart Zambia Institute. Discussions are ongoing within Government and with cooperating partners to agree an Action Plan for short-term measures to roll out strengthened enrollment, MIS, and payment systems across the 116 districts, while other longer-term investments are brought on board. See Annex 3 for findings and recommendations of the delivery systems assessment undertaken as part of the preparation.

16. **AF2 will complement the UN-led<sup>11</sup> Emergency Cash Transfer (ECT) response** that is currently selecting existing SCT beneficiaries as well as informal sector workers in urban and semi-urban areas and providing them

<sup>&</sup>lt;sup>7</sup> SCT categories include households with members (a) 65 years and above, (b) with a severe disability, and (c) chronically ill on palliative care; (d) households that are child headed; and (e) female-headed households with three or more dependent children. In addition, a proxy means test (PMT) is also applied to select households based on poverty.

<sup>&</sup>lt;sup>8</sup> On paper, households that meet the vulnerability criteria receive a flat monthly grant of ZMW90 (approximately US\$4.5) per household, while households with persons with disabilities receive bi-monthly grants of ZMW180 (approximately US\$9).

<sup>&</sup>lt;sup>9</sup> ZMW 214 per adult equivalent per month

<sup>&</sup>lt;sup>10</sup> 1 US\$ = 20 ZMW

 $<sup>^{\</sup>rm 11}$  Includes UNICEF, World Food Program, Plan International, Red Cross and Child Fund



with temporary cash transfers to meet immediate consumption needs for the coming six months. 22 districts have been targeted based on a combination of COVID infection rates, main focus on urban areas or areas most susceptible to economic shocks of COVID (e.g., tourist towns and busy border towns). The ECT is complementary in that the Bank's support will cover the base SCT transfer in both urban and rural areas for 18 months and beyond, whereas the UN support will provide a temporary vertical and horizontal expansion mainly in urban areas for 6 months. The ECT continues to use SCT program infrastructure wherever relevant (e.g., district staff in undertaking communication), and is well coordinated with the SCT program implementation at HQ and districts.

#### **E. Implementation**

17. The implementation arrangements will remain unchanged, with MoG playing a coordinating role, and implementation of SCT being managed by the MCDSS Department of Social Welfare (DSW). The MCDSS DSW team at headquarters will, however, be strengthened with additional staff and skills to ensure robust support to the scaled up SCT. In particular, MCDSS has proposed strengthening the payments, financial management, M&E, GRM and GBV support functions at HQ.

# F. Project location and Salient physical characteristics relevant to the safeguard analysis (if known)

The SCT program uses a combination of categorical and means-testing (proxy means test or PMT) based targeting to identify its beneficiary households, verified through community meetings. In terms of categories, the program targets five categories of households (households with heads older than 65 years, heads younger than 18 years, disabled, chronically ill in palliative care and female-headed with 3+ children). The PMT excludes households that are not identified as extreme poor. District level beneficiary caseload is determined by district level poverty.

# G. Environmental and Social Safeguards Specialists on the Team

Njavwa Namposya Chilufya, Social Specialist Christopher Mark Ingoe, Environmental Specialist

# SAFEGUARD POLICIES THAT MIGHT APPLY

Safeguard Policies	Triggered?	Explanation (Optional)
Environmental Assessment OP/BP 4.01	Yes	
Performance Standards for Private Sector Activities OP/BP 4.03	No	



COVID 19 Scale-up of Social Cash Transfers to Poor and Vulnerable People under GEWEL Project (P175955)

Natural Habitats OP/BP 4.04	No
Forests OP/BP 4.36	No
Pest Management OP 4.09	No
Physical Cultural Resources OP/BP 4.11	No
Indigenous Peoples OP/BP 4.10	No
Involuntary Resettlement OP/BP 4.12	No
Safety of Dams OP/BP 4.37	No
Projects on International Waterways OP/BP 7.50	No
Projects in Disputed Areas OP/BP 7.60	No

# KEY SAFEGUARD POLICY ISSUES AND THEIR MANAGEMENT

#### A. Summary of Key Safeguard Issues

1. Describe any safeguard issues and impacts associated with the proposed project. Identify and describe any potential large scale, significant and/or irreversible impacts:

Second Additional Financing (AF2) for the Girls' Education and Women's Empowerment and Livelihood Project (GEWEL) is aimed at scaling up the Social Cash Transfer subcomponent. This is in response to the negative economic shocks from COVID-19 on the poorest and most vulnerable Zambian households. The proposed AF2 will enable the scale up support of 330,000 households in 49 districts. This is in addition to 370,000 households being supported in 67 districts under AF1. The scale up is enabled by existing mechanisms for disbursement of SCT. From a social perspective, the project is expected to have a positive impact on the poorest and most vulnerable households, including increased production and asset ownership, improved health of children in households, increased capacity to meet basic needs such as education and medical costs as well as increased self-esteem. However, given the overall provision of cash which has the potential to increase power differentials in communities combined with there being high levels of contextual GBV and SEA/SH in Zambia, there may be social risks associated with the project. However, the risks associated with the proposed scale up are not divergent from those identified under AF1. Therefore mitigation measures which include; implementation of a GBV-responsive GRM to address risks of GBV/SEA in the program, adoption of transparent selection criteria to avoid risks of exclusion will apply under AF2. Roll out of the GRM to the additional 49 districts will be prioritized, with additional staff allocated and trained to sensitize communities on the GRM.

There are no large scale, significant or irreversible environmental impacts associated with this project. However, Occupational Health and Safety (OHS) and solid (infectious and non infectious) waste related risks could emerge within project activities and at project venues. Additionally, there are OHS risks to Pay Point Managers (PPMs), who are responsible for delivering cash-based payments to beneficiaries given the absence of a large-scale digital payment system. These include theft, robbery, loss of cash and other potential safety hazards. Mitigation measures include, in the immediate term, the Ministry will formally communicate enhanced safety procedures to project implementers at the local level, including all PPMs and is planning to undertake refresher training for PPMs under AF1 and periodically thereafter. In the short term, a security assessment on the cash-based PPM payment modality will be undertaken and



a security management plan will be developed, including any improvements to existing protocols and guidelines to be included in the revised Project Implementation Manual (PIM). In the medium term, the ongoing focus by the project to roll out digital payments will be accelerated so that a minimum of 20% of beneficiaries receive their payments digitally by end of 2021 and 50% by end of 2022, thereby, reducing safety risks from the cash-based payment modality.

2. Describe any potential indirect and/or long term impacts due to anticipated future activities in the project area: There are no construction and renovation activities associated with this project. Potential risks can be controlled with the implementation of reasonable, but effective mitigation measures. Therefore, there are no long-term environmental impacts as a consequence of the Project.

3. Describe any project alternatives (if relevant) considered to help avoid or minimize adverse impacts. No alternatives to the current set of household-based activities are envisaged or relevant.

4. Describe measures taken by the borrower to address safeguard policy issues. Provide an assessment of borrower capacity to plan and implement the measures described.

The project has developed a GRM and a GBV Action Plan which are both under implementation. An overall GBVresponsive GEWEL GRM has been rolled out to all the existing 55 districts under GEWEL and an additional 18 districts covered in AF1 by the end of January 2021. The GRM will scale up to the remaining 43 districts in the country, to cover all SCT districts by the end of June 2021. The GRM roll-out and implementation monitoring is considered a high priority on the project. The project will continue to build on the already existing GEWEL GRM that is already taking on SCT complaints. Staff within the PIU including district and community focal points have been trained on how to receive, register and process grievances whilst upholding sensitivity in handling grievances on GBV/SEA. The project has outsourced Childline an NGO providing counselling services for survivors of GBV/SEA incidences to supplement the project GRM. The Client has identified focal persons in the PIU, at district and community level. Training of more officials is planned for under AF2 to ensure efficient grievance management. The AF2 will also benefit from the GEWEL GBV Action Plan addressing capacity gaps in prevention of and response to GBV/SEA including related to: (i) delivery of printed GBV service directories for the GBV referral pathways in initial districts and ongoing pathways mapping in additional districts; (ii) high-level leadership dialogue with the aim to raise awareness and enhance prioritization among senior managers at national, provincial and district level; and (iii) an analysis of the current system of accountability including any discrepancy between the protocol and practice is underway. In addition, a complementary GBV Action Plan has been developed for SCT which will complement the existing overall GEWEL GBV Action Plan. The Ministry of Gender will continue to play a leading and coordination role, together with the Department of Social Welfare in MCDSS to manage the implementation the Action Plan. GBV and Grievance Redress Mechanism (GRM) Focal Points within each Ministry play an integral role in managing social risks and impacts.

A summary of this Action Plan follows: (a) Roll-out of GBV-responsive GRM to all SCT (and SWL) districts in harmonization with GEWEL GRM; (b) Conducting awareness raising for SCT and SWL beneficiaries and their households upon registration on potential risks for household violence due to increased income, existence of GRM and how to report any such incidences; (c) Strengthening capacity of implementers to manage social risks associated with the project and in particular GBV, SEA/SH risks through enhanced training of staff; (d) Appointing GRM focal persons at community level; (e) Effective monitoring of child-headed households to ensure SCT benefits are received and used appropriately; and (f) Training on the prevention of SEA/SH for all project areas, including targeted training of PSPs, accompanied by IEC materials. Regarding Codes of Conduct, the Government will be encouraged to adhere to the Codes of Conduct established for the Public Service. In addition, the Project will explore how to incorporate and



strengthen any Codes of Conduct and other relevant commitment forms for PSPs, PPMs, etc.

The client is currently implementing Occupational Safety and Health measures at project sites and in project activities that includes (i) social distancing and enhanced hygiene; and (ii) increased Personal Protective Equipment (PPE) for district staff such as facemasks, washbasins and soap, etc. Enhanced OHS control measures will include include (iii) encouraging frequent handwashing or disinfection with an alcohol based hand sanitizer (iv) physical distance of at least 2 meter (v) wearing of face masks (vi) regular environmental cleaning and disinfections of schools and district offices (where the project is associated) (vii) limiting travel and (viii) ensuring that policies, training, messaging and education in all project related areas are increased to improve awareness of COVID-19 and (viiii) that management of people with COVID-19 or their contacts is treated critically e.g. requiring project related staff, workers and participants who are unwell or who develop symptoms to stay at home, self-isolate and contact a medical professional or the local COVID-19 information line for advice on testing and referral (x) all face to face meetings are restricted to essential personnel only (xi) and are conducted in well ventilated venues.

Currently, there are no mitigation measures for Covid PPE related waste. To avoid the inappropriate disposal of PPE into the environment (i) all non-infectious PPE should be disposed of as solid waste through the normal solid waste collection systems and (ii) at all project related events PPE should be segregated and placed in strong plastic waste bags, secured and disposed of in the municipal solid waste stream and (iii) project related participants infected with Covid 19 should have already visited a medical facility for assessment (if possible) and (iv) all those who are infected with COVID-19 their PPE should be disposed of in the medical waste stream at that medical facility and (v) further advice about Covid related PPE waste should be obtained from local health care providers.

Guidance for Covid-19 waste and OHS related measures are detailed in an additional project Covid-19 annex and the measures can be easily achieved at all project locations and for all activities. The Client focal points in the PIU and at district and community level will be responsible to ensure OHS and waste controls are implemented.

Currently measures taken by MCDSS towards PPM safety include onboarding training and refresher training at periodic intervals on security awareness; and working with community leaders and law enforcement at the local level to secure payment events. Protocols will be further enhances based on the findings and recommendations of the Security Assessment and a Security Management Plan will be developed and incorporated into the PIM by effectiveness.

5. Identify the key stakeholders and describe the mechanisms for consultation and disclosure on safeguard policies, with an emphasis on potentially affected people. Not applicable.

# B. Disclosure Requirements (N.B. The sections below appear only if corresponding safeguard policy is triggered)

Environmental Assessment/Audit/Management Plan/Other

Date of receipt by the Bank	Date of submission for disclosure	For category A projects, date of distributing the Executive Summary of the EA to the Executive Directors	



"In country" Disclosure

C. Compliance Monitoring Indicators at the Corporate Level (to be filled in when the ISDS is finalized by the project decision meeting) (N.B. The sections below appear only if corresponding safeguard policy is triggered)

# **CONTACT POINT**

#### World Bank

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# **Borrower/Client/Recipient**

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### **Implementing Agencies**

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# FOR MORE INFORMATION CONTACT

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# APPROVAL

Task Team Leader(s):	Emma Sameh Wadie Hobson	
	Boban Varghese Paul	

# **Approved By**

Safeguards Advisor:	Peter Leonard	27-Jan-2021
Practice Manager/Manager:	Robert S. Chase	27-Jan-2021
Country Director:	Sahr John Kpundeh	01-Feb-2021