



Additional Financing Appraisal Environmental and  
Social Review Summary  
Appraisal Stage  
**(AF ESRS Appraisal Stage)**

Date Prepared/Updated: 12/10/2020 | Report No: ESRSAFA072



**BASIC INFORMATION**

**A. Basic Project Data**

Country	Region	Borrower(s)	Implementing Agency(ies)
Mali	AFRICA WEST	Ministry of Economy and Finance	Ministry of health and Social Affairs
Project ID	Project Name		
P174457	AF MALI COVID-19 Emergency Response Project		
Parent Project ID (if any)	Parent Project Name		
P173816	MALI COVID-19 EMERGENCY RESPONSE PROJECT		
Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date
Health, Nutrition & Population	Investment Project Financing	12/4/2020	12/30/2020

Proposed Development Objective

The objective of the Project is to strengthen the capacity of the Recipient to prepare, prevent for and respond to COVID-19 pandemic

Financing (in USD Million)	Amount
Current Financing	0.00
Proposed Additional Financing	0.00
<b>Total Proposed Financing</b>	<b>0.00</b>

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

Yes

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

An outbreak of coronavirus disease (COVID-19) caused by the 2019 novel coronavirus (SARS-CoV-2) has been spreading rapidly across the world since December 2019. On March 11, 2020, the World Health Organization (WHO)



declared a global pandemic as the coronavirus rapidly spreads across the world. As of November 24th, 2020, the outbreak has resulted in an estimated 59,315,201 cases and 1,399,073 deaths in 217 countries and territories. In Mali, the first Case of COVID-19 disease was reported on March 25, 2020. As of November 24th, 2020, 4326 cases and 146 deaths have been reported in the country.

The objective of this project is to strengthen the capacity of the Recipient to prepare, prevent for and respond to COVID-19 pandemic. It has 3 Components:

Component 1. Emergency COVID-19 Response (IDA:US\$ 17.8 million; PEF: US\$ 3.4 million): This component will support the country's ability to promote an integrated response to COVID-19 through improved prevention measures, case detection, treatment, laboratory capacity and surveillance. Furthermore, this component will support efforts that will enable the country to mobilize surge response capacity through trained, motivated and well-equipped frontline health workers. The component also will finance provisions for emergency response activities targeted at migrant and displaced populations in fragile, conflict or humanitarian emergency settings compounded by COVID-19.

Component 2. Increase access to health care services (IDA: US\$ 6 million): This component will promote timely access to health care by providing facilities with financing screening and treating for COVID-19 to ensure that other essential services are not crowded out. This component will also cover fee waivers for clients wishing to seek health care services for suspected COVID-19.

Component 3. Implementation Management and Monitoring and Evaluation (IDA: US\$: 2 million equivalent): This component will finance operational costs of the PIU and monitoring and evaluation activities.

#### D. Environmental and Social Overview

D.1. Detailed project location(s) and salient physical characteristics relevant to the E&S assessment [geographic, environmental, social]

The Additional Financing (AF) has the same objective as the parent project. The PDO is to strengthen the capacity of the Recipient to prepare, prevent for and respond to COVID-19 pandemic. The proposed Additional Financing will help to better support Mali COVID-19 Response Plan. The AF activities will be implemented in the same areas as the parent project: Bamako, Kayes, Sikasso and Timbuctou. No major civil works will be financed as all upgrading and rehabilitation will take place in existing health facilities and laboratories.

#### D. 2. Borrower's Institutional Capacity

The AF will be implemented by the same REDISEE and Mali COVID-19 Emergency Response Projects PIU. This PIU has experience in implementing World Bank project since it has also been managing the Regional Disease Surveillance Systems Enhancement (REDISSE) project for two years. The PIU finalized and disclosed dedicated ESF instruments at client level. The instruments are reviewed and disclosed on Bank side for the parent project and engaged social specialists to strengthen its capacity. The recruitment of Environmental specialist is ongoing. The environmental and social performance of the parent project in Moderately Satisfactory and the rating remain substantial. The performance is Moderately Satisfactory to reflect the fact that the project took action to fulfill some requirements of the ESCP. Indeed, dedicated ESF instruments such as ESMF, Environmental & Social Management Plan (ESMP), Infection Control and Waste Management Plan (ICWMP), Labor Management Procedures (LMP), Stakeholder Mobilization Plan (SEP), Training Plan for Staff Employed and Communication Plan for Risks & Community Participation are prepared and disclosed at client level. However, the recruitment of environmental specialist is not completed and the project doesn't prepare the monitoring report on the environmental, social, health and safety (ESHS) performance of the Project.

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



**A. Environmental and Social Risk Classification (ESRC)**

Substantial

**Environmental Risk Rating**

Substantial

Like parent project, environmental rating is substantial due to the fact that the AF activities will include to testing and treatment of infected persons, handling of medical waste by medical professionals and local community health and safety. While it is expected that the negative risks and impacts related to the implementation of project activities are likely to be limited, the PIU is updating the ESMF approved for REDISSE III to provide clear guidance regarding the treatment of medical waste, guidelines for community engagement and the preparation of subproject ESMPs (if needed). The updated ESMF will also incorporate international protocols for community health and safety during a pandemic.. The PIU will ensure that updated ESMF will cover activities of both parent and additional financing. The PIU will also updated an ESCP that will include concrete actions intended to ensure compliance with the ESF as well as a timeline and roles and responsibilities.

**Social Risk Rating**

Substantial

The social risk of the AF is substantial as its objectives and activities will not differ from those of the Parent Project. Although some of the AF supported activities are access to health services; stakeholder engagement and social inclusion remain a real challenge during project preparation and implementation. A behavior changing and the use of protective equipment regarding community level and medical staff will require a specific strategy of communication and awareness.

Project stakeholder engagement plan and consultations on the ground will help to identify all community affected people, civil society, local officials to be implicated and play a key role. International standards and good practices will also be used for a better communication, identification and involvement of vulnerable groups.

The approved ESMF under REDISSE III is under adapting process to include COVID-19 requirements. The ESMF will also outline project GBV/SEA/SH risks including those which can be exacerbated and will help to identify specific measures of mitigation.

**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).

This standard is relevant. The various risks identified include: (i) environmental and community health related risks related to the inadequate storage, transportation and disposal of infectious medical waste; (ii) occupational health and safety issues related to the availability and supply of personal protective equipment (PPE) for healthcare workers and the logistical challenges for transporting PPE across the country in a timely manner; (iii) community health and safety risks given close social contact and limited sanitary and hygiene services (clean water, soap, disinfectants) and isolation/quarantine capabilities at health facilities across the country; (iv) possible risks around social exclusion in terms of access to health facilities and services, especially for the poorest and most marginalized who have a limited



ability to pay, and for the elderly or those with underlying medical conditions who would be most at risk in the event of a pandemic; (v) risks for those receiving treatment for COVID-19 symptoms, including discrimination and GBV/SEA risks for patients in quarantine; (vi) socio-political risks specifically related to insecurity especially in the North and Center regions of the country; and (vii) low trust in the government which could lead to the rejection of public health interventions and information. As the AF is not expected to cause other impact or risk other than those associated with the original project, requirements of parent project's ESMF will be used to provide clear guidance specifically regarding the treatment of medical waste including the use of ICMWMPs guidance regarding how to assess SEA/H risks and mitigation measures during implementation. The PIU has prepared a draft ESCP that will provide further details regarding the implementation of the various measures to address the other environmental and social risks identified.

### **ESS10 Stakeholder Engagement and Information Disclosure**

This standard is relevant. Like parent project, the main stakeholders are the Ministry of Health, the Regional Health Agencies, the local authorities (mayors), traditional authorities, religious leaders, civil society actors, and local communities. A Stakeholder Engagement Plan (SEP) was prepared for the parent project and approved. The SEP outlines the basic characteristics and interests of the relevant stakeholder groups and some principles regarding how they will be engaged during project preparation and implementation. The SEP include more detailed information regarding the methodologies for information sharing in FCV, stakeholder mapping and identification of existing community-based platforms that can be used to facilitate effective community engagement and participation as well as the monitoring and evaluation plan. The SEP incorporated WHO's ethical principles for community engagement during pandemics and grievance mechanism adapted for Mali's specific cultural and social context.

The SEP includes the basic details for the establishment of a project level Grievance Mechanism (GM) to be implemented by the PIU. Given the local context, the implementation of the GM will require the participation of traditional authorities, religious leaders, local authorities (mayors) and local communities in the project area as well as a national level focal point in the PIU. The management of SEA/SH-related grievances will also be considered using the principles contained in the World Bank's Good Practice Note on SEA/SH.

### **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**

This standard is relevant. Many activities that would be financed by the project will be conducted by health care and laboratory workers that will be at risk for COVID 19 infection due to their front-line engagement with patients and handling of patient samples and medical waste. OHS measures as outlined in the WHO guidelines will be captured in the updated ESMF. These include procedures for monitoring and managing entry into health care facilities; procedures for protection of workers and infection control precautions; provision of immediate and ongoing training regarding the precautionary procedures for all categories of workers and clear and accessible signage in all public spaces mandating basic sanitation, hand hygiene and the mandatory use of personal protective equipment (PPE); ensuring adequate supplies of PPE (particularly face masks, gowns, gloves, handwashing soap and sanitizer); and



generally ensuring adequate OHS protections in accordance with the general and industry specific EHSs and consistent with the evolving international best practice in relation to COVID-19 protection. The PIU will ensure that the evolving COVID-19 guidance by WHO is being incorporated into these policies and procedures as it emerges. A Labor Management Procedure (LMP) will be prepared to provide guidance regarding the OHS policies and procedures that will be used to protect health care workers, project staff and other workers hired by the PIU. The LMP will also include a specific worker GRM that will allow health care workers in particular to raise concerns regarding the lack of enforcement of policies and procedures or other grievances that may arise in the context of their work.

### **ESS3 Resource Efficiency and Pollution Prevention and Management**

This standard is relevant for the additional financing. The Infection Control and Medical Waste Management Plan (ICMWMP) of the parent project will be used for additional financing activities.

### **ESS4 Community Health and Safety**

This standard is relevant. Community health and safety risks identified during preparation include: (i) environmental and community health related risks related to the inadequate storage, transportation and disposal of infectious medical waste; (ii) community health and safety risks given close social contact and limited sanitary and hygiene services (clean water, soap, disinfectants) and isolation/quarantine capabilities at health facilities across the country; (iv) possible risks around social exclusion related to access to health facilities and services, especially for the poorest and most marginalized who have a limited ability to pay, and for the elderly or those with underlying medical conditions who would be most at risk in the event of a pandemic; (v) risks for those receiving treatment for COVID-19 symptoms, including discrimination and GBV/SEA risks for patients in quarantine; (vi) socio-political risks specifically related to insecurity especially in the North and Center regions of the country; and (vii) low trust in the government which could lead to the rejection of public health interventions and information and violence against those providing services. To address these risks, the PIU will update the ESMF approved for REDISSE III to provide clear guidance specifically regarding the treatment of infectious disease and other medical waste as well as guidance regarding how to assess SEA/H risks and mitigation measures during implementation. In addition, the PIU prepared a draft ESCP and draft SEP that provides further details regarding the implementation of the various measures to address the other environmental and social risks identified. While the project will be implemented nationally including several areas that are facing very high insecurity, it is not anticipated that security personnel will be required to protect project sites or activities.

### **ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement**

This standard is not currently relevant. The project will not require any land acquisition or economic displacement.

### **ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources**

This standard is not currently relevant.



**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 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 Stakeholder Engagement Plan (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 will be provided for in the SEP. These organizations and representatives would be consulted during the revision of the SEP. The project will exclude any activities which would require Free, Prior and Informed Consent.

**ESS8 Cultural Heritage**

This standard is not currently relevant. There are no major construction activities anticipated and any physical works will be limited to rehabilitation or upgrading of existing facilities.

**ESS9 Financial Intermediaries**

No financial intermediary will intervene in the project.

**C. Legal Operational Policies that Apply**

**OP 7.50 Projects on International Waterways**

**OP 7.60 Projects in Disputed Areas**

**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:**

NA

**IV. CONTACT POINTS**

**World Bank**

Public Disclosure



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**Borrower/Client/Recipient**

Borrower: Ministry of Economy and Finance

**Implementing Agency(ies)**

Implementing Agency: Ministry of health and Social Affairs

**V. FOR MORE INFORMATION CONTACT**

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**VI. APPROVAL**

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