



Concept Environmental and Social Review Summary

Concept Stage

(ESRS Concept Stage)

Date Prepared/Updated: 12/19/2022 | Report No: ESRSC03165



BASIC INFORMATION

A. Basic Project Data

Country	Region	Project ID	Parent Project ID (if any)
Mauritania		P179558	
Project Name	Mauritania Health System Support Project		
Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date
Health, Nutrition & Population	Investment Project Financing	9/18/2023	11/15/2023
Borrower(s)	Implementing Agency(ies)		
Islamic Republic of Mauritania	Ministry of Health		

Proposed Development Objective

Project Development Objective (PDO) is to increase the quality and use of health services with a particular focus on maternal, child and adolescent health and nutrition.

Financing (in USD Million)	Amount
Total Project Cost	70.00

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]

By implementing the MPA program, the government seeks to facilitate the attainment of its objective to provide universal access to essential health services. In addition, it seeks to protect individuals against the financial risks associated with illness. The first phase of the proposed program aims to increase the quality and use of health services with a particular focus on maternal, child and adolescent health and nutrition. To increase outputs, quality and coverage of health services, the project will help Mauritania expand and scale-up performance-based financing (PBF) using financial incentives to improve health system performance and motivate health care providers.



The proposed operation comprises four components that aim to improve the utilization of quality RMNCAH-N services in selected regions that have the highest poverty levels and highest non-facility birth rates in Mauritania. Within these regions, the project will focus on rural health and health systems. The interventions target Community Health Workers, human resources for health, public health facilities (health posts, health centers, and regional hospitals), poor households, local NGOs, and relevant institutions—mainly the MoH but also the National Health Solidarity Fund (Caisse Nationale de Solidarité Santé: CNASS), the Ministry of Social Affairs and the Taazour Agency—to enhance both the supply and demand sides of the health system. The Taazour Agency, which manages the Tekavoul Program, is the national agency in charge of fighting against the consequences of slavery, promoting inclusion, and alleviating poverty.

Component 1: Improving delivery and utilization of RMNCAH-N services (US\$53.00 million). This component will be articulated around two sub-components: Sub-component 1.1: Improving the delivery of quality health services using performance-based financing (US\$43.00 million equivalent) and Sub-component 1.2: Improving the utilization RMNCAH-N services (US\$10.00 million equivalent).

Component 2: Health system strengthening (US\$12.00 million equivalent) will support the government to prepare for and implement the UHC policy. Along with continuous quality improvement oversight through technical assistance (TA), the Project will support the following activities: the health financing assessment framework, feasibility and actuarial studies, costed benefits package, workshops, the UHC strategy, roadmap and action plans, and preparation of laws and their related decrees.

Component 3: Project management (US\$5.00 million equivalent) will finance operating costs and some equipment of the RBF Technical Unit and salaries of international and national consultants who will be hired by this unit. The Project will also support the operating costs of the regional verification committee as well as project coordination. The Financial Affairs Directorate (Direction des Affaires Administratives et Financières, DAF) will receive financial and technical support, including appropriate staffing to ensure compliance with World Bank Group fiduciary requirements. Financing will also cover comprehensive TA, including international experts.

Component 4: Contingent Emergency Response Component (CERC) (US\$0.00). This component is included in accordance with paragraphs 12 and 13 of the World Bank's policy on investment project financing (IPF). Following an eligible crisis or emergency, the borrower may request the Bank to re-allocate project funds to support emergency response and reconstruction. This component would draw from the uncommitted credit and/or grant resources under the project from other project components to cover emergency response.

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 project has a national coverage that aims to improve utilization of quality reproductive, maternal, newborn, child, and adolescent health (RMNCH) services in the regions with some of the highest poverty levels and highest non-facility birth rates in Mauritania. Regions to be covered under the project are the same as for the Health System Support Project (INAYA-P156165): Guidimakha, Hodh Ech Chargui, Hodh El Gharbi, Inchiri, with the possibility of having two additional regions during project preparation or implementation (Assaba and Tagant). Most of the mothers and newborns in Mauritania die from preventable and treatable complications due to poor quality of health



care during the antenatal, perinatal, and postpartum periods. The leading causes of maternal deaths are hemorrhage (24 percent), eclampsia (16 percent), sepsis (10 percent), and complications from abortion (9 percent). Most of the primary health facilities and hospitals are in poor physical conditions and are staffed with insufficient numbers of productive, responsive, and qualified health workers in critical areas.

D. 2. Borrower’s Institutional Capacity

The project will be implemented by the Ministry of Health, which is already implementing the INAYA project (P156165) to be closed soon. The Ministry of environmental has experience implementing health projects using the World Bank Operational Policy on environmental and social safeguards, (INAYA), as well as projects using the World Bank Environmental and Social Framework (ESF), through the COVID-19 project. The environmental and social performance to support the management of environmental and social risk and impacts has been assessed as moderately satisfactory.

The team is composed of one environmental specialist and one social specialist. Improvement is needed in regular monitoring of activities on the field, the environmental and social screening process, as well as regarding E&S reporting.

The World Bank team will continue to provide close support as well as training sessions as needed to help strengthen project team capacity and knowledge of the ESF.

II. SCREENING OF POTENTIAL ENVIRONMENTAL AND SOCIAL (ES) RISKS AND IMPACTS

A. Environmental and Social Risk Classification (ESRC)

Moderate

Environmental Risk Rating

Moderate

The environmental risk classification for the project is moderate under the World Bank ESF. The Project Development Objective is to increase the quality and use of health services with a particular focus on maternal, child and adolescent health, nutrition. No civil works are planned at this stage. Main environment related risks will be linked to the management of the increase in biomedical waste as a result of the increase in the use of health services; and occupational health and safety (OHS) related to working conditions in health centers and hospitals. All these risks and impacts will be assessed and managed through the environmental and social instruments.

Social Risk Rating

Moderate

The social risk classification for the project is moderate based on the performance of implementation of the safeguard measures (including GM) of the INAYA project and based on social risks that could arise as a result of project activities under sub-component 2. These risks include: i) a potential social risk related to marginalized, vulnerable or remote social groups being unable to access health screening services ; ii) the exclusion and discrimination of certain categories of people, such as vulnerable refugees, from access to basic social services as health; iii) risks of an increase in Female Genital Mutilation practices consideration the already high rate in the project area and the potential use of community volunteers; iv) labor conditions; v) risks of Sexual Exploitation and Abuse/Sexual harassment (SEA/SH), including gender-based violence, related to the distribution of cash within households (risk of disputes, risk of tensions, risk of misuse of objectives, etc.). While these issues could occur, they are not expected to happen on a large scale, nor are they expected to be significant because of the design of the project. The risk rating will be re-assessed at Appraisal stage based on additional information obtained and changes will be made if required.

Public Disclosure



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:

Assessment and management of environmental and social risks and impacts will be required for activities under components 1,2 and 3. These activities will entail risks related to the increase of biomedical waste and OHS related to working conditions.. However, the challenge of protecting and empowering refugees and improving the resilience of host populations could include social risks during the implementation.

To manage these risks, the project will update the Environmental and Social Management Framework (ESMF) prepared for the INAYA (P156165) project using the Bank Operational Policy on safeguards, and which was updated under COVID-19 project (P173837) (and its additional Financing) using the Bank Environmental and social Framework (ESF), during project preparation. The project will rely on the INAYA Biomedical waste management plan, which was updated for the purpose of COVID-19, and will be updated as needed and adopted for the project... The project being based on the Performance Based Financing (PBF) as mechanism to increase outputs, quality and coverage of health services using financial incentives to improve health system performance and motivate health care providers, the ESMF will provide a screening process of all activities, including if civil works are needed at some points of the project implementation.

The update of the ESMF will take into consideration the current environmental and social contexts, integrating lessons learnt and outcomes of any environmental and social audits and/or completion reports.

Implementation of the Contingent Emergency Response Component (CERC) can cause impacts and risks too. If the CERC is activated, an CERC-ESMF will be prepared to guide the management of potential risks and impacts related to the implementation of CERC activities, including guidance on the E&S screening process.

A stakeholder engagement plan (SEP), including the project Grievance Mechanism (GM), will be developed during project preparation to outline a structured approach for community outreach and two-way engagement with stakeholders, in appropriate languages, and adopting measures to include vulnerable and disadvantaged groups (poor, disabled, elderly, isolated communities, refugees), and will be based upon meaningful consultation and disclosure of appropriate information.

An Environmental and Social Engagement Plan (ESCP) will be prepared prior to project Appraisal. It will provide clear measures, timeline and define responsibilities, including the screening process of site-specific activities.

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

The project will not use the Borrower environmental and social framework in assessments or development and implementation of investments. However, it will comply with all relevant national environmental and social legal requirements.

ESS10 Stakeholder Engagement and Information Disclosure



This ESS is relevant. Main stakeholders include: The Ministry of Economic Affairs and Promotion of Productive Sectors, the Ministry of Health (MoH), the community health committees, community agents, community-based organizations (CBOs), social and behavioral change communication (SBCC); United Nations Children’s Fund (UNICEF); the Ministry of Social Affairs and the Taazour Agency; Health Association, and key civil-society organizations.

The Borrower will prepare an SEP in a manner that is accessible and appropriate, considering any specific needs of groups that may be differentially or disproportionately affected by the project. The SEP will outline a) the key stakeholders; b) stakeholder engagement methods, tools, techniques, and channels such as key message dissemination through community-based organizations, radio and social media; c) how often the engagement will occur throughout the project; d) how feedback will be solicited, recorded and monitored over the project; e) who will be charged/responsible with this engagement; f) timeline for this engagement; g) resources for engagement. Particular attention will be given to identifying and providing tailored sensitive stakeholder engagement opportunities to vulnerable groups, disadvantaged and remote communities. The SEP will be disclosed prior to appraisal and updated as relevant throughout implementation.

The Grievance Mechanism (GM) to be set up in the SEP will be an update of the existing GM for the INAYA project, to address grievances and receive feedback from all stakeholders and beneficiaries in a timely manner and following due process. The GM will be cognizant of and follow required levels of discretion, and appropriateness, especially when dealing with cases of sexual harassment and GBV. The GM will be accessible to all stakeholders, especially poor and vulnerable people.

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

The existing Project implementing agency is staffed with direct and indirect workers and civil servants. The current INAYA project was prepared under the Operational policies and does not have labour management procedures. Prior to appraisal, the Borrower will prepare Labour Management Procedures (LMP) which will include measures to ensure that labor is provided on a voluntary basis and will further ensure that the health and safety of workers, especially women are given adequate attention. As direct workers performing critical project functions, requirements under ESS2 will be applicable to both the PIU and relevant results-based finance institutions. Key issues to be addressed in the Labor Management Procedures include terms and conditions of employment, nondiscrimination and equal opportunity, worker’s organizations. Due diligence is also needed to ensure Borrower meets requirements on child labor, forced labor and occupational health and safety. Civil servants will be bound by their public sector contracts unless their contract has been transferred to the project. Provisions regarding forced and child labor and occupational health and safety will also apply to civil servants.

As the Project intends to provide support to the Community Health System through different categories of workers including community health workers (CHWs), community agents, and volunteers, the LMP will be prepared accordingly and not be limited to civil servants.

The LMP will also have the details of the grievance redress mechanism for workers and the roles and responsibilities for monitoring such workers.



ESS3 Resource Efficiency and Pollution Prevention and Management

Medical wastes and general wastes from the health care facilities have a high potential of carrying microorganisms that can infect the community at large if they are not properly disposed of. There is a possibility for the infectious microorganism to be introduced into the environment if not well contained within the health care facilities. Waste is mainly expected from the increase of people having access to health care facilities (biomedical). The current Medical Waste Management Plan, which was updated under COVID-19 project will be used for this project and updated and adjusted to the potential risks associated with this project, taking into consideration the purchase of equipment, commodities, and medications planned, that may be totally different from the previous projects. It must help beneficiary centers, hospital to implement good practices in terms of the management of Biomedical Waste, also in line with the world Bank group ESSH guidance for medical facilities. The Borrower will ensure that Biomedical Waste Management (BWM) system are improved and are environmentally friendly.

ESS4 Community Health and Safety

This ESS is relevant, poorly managed biomedical waste could pose harm to surrounding communities or patients coming to the hospital. The updated Biomedical Waste Management Plan will take account measure to insure security of people at the center. It will also take into consideration the climate vulnerability of the sites to prevent contamination of natural resources, especially surface and groundwater, in case of extreme events such as flooding.

ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement

This ESS is not considered relevant at this point as the project will not support activities that involve land acquisition or lead to physical and/or economic displacement. In case there is a need for land acquisition leading to economic or physical displacement during project implementation, site-specific Resettlement Action Plans (RAPs) would be developed to the satisfaction of the Bank and implemented prior to commencement of any civil works/construction.

ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources

This ESS is not currently relevant. The confirmation will be provided at Appraisal stage. No planned activity is expected to impact Biodiversity conservation and sustainable Management of Living Natural Resources.

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

This standard is not considered relevant as there are no Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities currently identified in the project area. Should the presence of indigenous communities be confirmed through further screening during implementation, the necessary assessments, consultations, and instruments will be undertaken per the requirements of this standard.

ESS8 Cultural Heritage



Since there is no planned construction or major rehabilitation, this standard is not relevant at this time. However, the project will ensure that no harm is caused to cultural heritage, particularly intangible heritage, in project areas.

ESS9 Financial Intermediaries

This standard is not relevant for the suggested project interventions as no financial intermediaries will be used.

C. Legal Operational Policies that Apply

OP 7.50 Projects on International Waterways No

OP 7.60 Projects in Disputed Areas No

III. WORLD BANK ENVIRONMENTAL AND SOCIAL DUE DILIGENCE

A. Is a common approach being considered? No

Financing Partners

N/A

B. Proposed Measures, Actions and Timing (Borrower’s commitments)

Actions to be completed prior to Bank Board Approval:

- Update the updated INAYA ESMF in use for the COVID-19 project, and disclose in the country prior to project Appraisal
- Develop the LMP consulted upon and disclose in the country prior to project Appraisal
- Prepare, consult upon and disclose the SEP in-country prior to project Appraisal
- Prepare the project ESCP and disclose in-country prior to project Appraisal
- Update the INAYA BMWP prior to project Appraisal

Possible issues to be addressed in the Borrower Environmental and Social Commitment Plan (ESCP):

N/A

C. Timing

Tentative target date for preparing the Appraisal Stage ESRS 12-Apr-2023

IV. CONTACT POINTS

World Bank

Public Disclosure



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Borrower/Client/Recipient

Borrower: Islamic Republic of Mauritania

Implementing Agency(ies)

Implementing Agency: Ministry of Health

V. FOR MORE INFORMATION CONTACT

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VI. APPROVAL

Task Team Leader(s):	Mohamed Vadel Taleb El Hassen, Samuel Lantei Mills, Kazumi Inden
Practice Manager (ENR/Social)	Pia Peeters Recommended on 08-Dec-2022 at 04:17:33 GMT-05:00
Safeguards Advisor ESSA	Nathalie S. Munzberg (SAESSA) Cleared on 19-Dec-2022 at 21:40:59 GMT-05:00