

Rwanda Health Emergency Preparedness, Response And Resilience Project Using The Multiphase Programmatic Approach (P504764)

# Appraisal Environmental and Social Review Summary Appraisal Stage (ESRS Appraisal Stage)

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#### I. BASIC INFORMATION

#### A. Basic Operation Data

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Operation ID	Product	Operation Acronym	Approval Fiscal Year
P504764	Investment Project Financing (IPF)	Rwanda HEPRR	2024
Operation Name	Rwanda Health Emergency Preparedness, Response and Resilience Project Using the Multiphase Programmatic Approach		
Country/Region Code	Beneficiary country/countries (borrower, recipient)	Region	Practice Area (Lead)
Rwanda	Rwanda	EASTERN AND SOUTHERN AFRICA	Health, Nutrition & Population
Borrower(s)	Implementing Agency(ies)	Estimated Appraisal Date	Estimated Board Date
The Republic of Rwanda, The Republic of Rwanda	Rwanda Biomedical Centre	21-Mar-2024	22-May-2024
Estimated Decision Review Date	Total Project Cost		
08-Mar-2024	120,000,000.00		

Proposed Development Objective

The Development Objective (DO) is to strengthen health system resilience and multisectoral preparedness and response to health emergencies in the Republic of Rwanda.

# B. Is the operation 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 Activities**

[Description imported from the PAD Data Sheet in the Portal providing information about the key aspects and components/sub-components of the project]

The project comprises four complementary components that focus on strengthening the preparedness and resilience of Rwanda's health system to respond to health emergencies under a multisectoral collaboration for interventions:

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Component 1: Strengthening the Preparedness and Resilience of the Health System to Manage Health Emergencies This component will support multisectoral collaboration and the strengthening of the health system's resilience to respond to Health Emergencies. The Component comprises four sub-components: Subcomponent 1.1: Multisectoral crossborder planning, financing, and governance for improved resilience to HEs. Subcomponent 1.2: Health Workforce skills development Subcomponent 1.3: Building capacity for the National Health Institute and improving access to quality health commodities Subcomponent 1.4: Information systems for HEs and the digitalization of the health sector Component 2: Improving Early Detection of and Response to HEs through a Multisectoral approach. This component will support operational readiness and capacities across critical subsystems to effectively detect and respond to national, regional, and global health emergencies. The component has three sub-components. Subcomponent 2.1: Collaborative multisectoral gender-responsive surveillance and laboratory diagnostics Subcomponent 2.2: Emergency management, coordination, and essential service continuity Subcomponent 2.3: Risk Communication and Community Engagement, empowerment, and Social Protection for all HEs Component 3: Project Management. This component will ensure efficient and effective management and implementation of the project by the Rwanda Biomedical Centre (RBC). Subcomponent 3.1 Strengthening project monitoring and evaluation (M & E). Subcomponent 3.2: Providing need-based technical assistance and facilitating learning agenda in collaboration with WHO, IGAD and ECSA-HC. Subcomponent 3.3: Supporting other aspects of project management. Component 4: Contingent Emergency Response Component (CERC). This Component will facilitate access to rapid financing by allowing for the reallocation of uncommitted project funds in the event of a natural disaster in a country, either by a formal declaration of a national emergency or upon a formal request from the government.

# D. Environmental and Social Overview

#### **D.1 Overview of Environmental and Social Project Settings**

[Description of key features relevant to the operation's environmental and social risks and opportunities (e.g., whether the project is nationwide or regional in scope, urban/rural, in an FCV context, presence of Indigenous Peoples or other minorities, involves associated facilities, high-biodiversity settings, etc.) – Max. character limit 10,000]

This Project will finance the strengthening cross-border response under Component 1, including the expansion of the cross-border functional surveillance systems at Rwanda's 19 border facilities. These comprise the Kigali International Airport and the Bugesera International Airport to be completed in 2026 and the Kamembe Local Airport. Land entry point include borders with the Democratic Republic of Rwanda (DRC) at Rusizi (I and II) in Rusizi district, Poids Lourds and Corniche in Rubavu District, with Burundi at entry points of Akanyaru Bas, Akanyaru Haut, Bweyeye, Nemba and Nshili and with Uganda at Gatuna, Kagitumba, Rwempasha, Buhita, Cyanika and Buziba and with Tanzania at Rusumo. Also linking Rwanda and the DRC by water transport on Lake Kivu comprise the Rubavu port that opened in Dec 2023 and the Rusizi port still under construction. Also still to be developed are landing sites at Nkora in Rutsiro, at Ruganda in Karongi and Kirambo in Nyamasheke.

Subcomponent 1.1. will finance the expansion of the cross-border functional surveillance systems at points of entries that will entail minor civil works to refurbish and equip surveillance facilities at border posts. The activity will leverage experiences from the Integrated Disease Surveillance and Response System (IDSR) established in 2018, for risks associated with the Ebola Virus Disease (EVD) focusing on urban communities of 15 priority districts. The 15 districts that were considered most at risk of the EVD outbreak in Rwanda comprised urban communities of bordering DRC; Uganda; Burundi as well as the City of Kigali. The City of Kigali was considered high risk because of the Kigali

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international airport and its high population density. This urban community prioritization was also used for COVID-19 Infection Control and Prevention under the Emergency Response Project (ERP).

Under Subcomponent 1.3, the Project will finance the expansion of the National Health Institute into the Diagnostics Development and Research Center using energy efficient and climate adaptive building design as well as local materials. Expansion activities will mainly entail small civil works for refurbishing and equipping existing structures of the Institute to adapt it to a modern research center. The works will not need a large workforce for the refurbishment works.

## D.2 Overview of Borrower's Institutional Capacity for Managing Environmental and Social Risks and Impacts

[Description of Borrower's capacity (i.e., prior performance under the Safeguard Policies or ESF, experience applying E&S policies of IFIs, Environmental and social unit/staff already in place) and willingness to manage risks and impacts and of provisions planned or required to have capabilities in place, along with the needs for enhanced support to the Borrower – Max. character limit 10,000]

The Rwanda Biomedical Centre (RBC) as the nation's central health implementation agency under the Ministry of Health, will have the overall responsibility for the oversight, coordination, management, and supervision of all components of the proposed Project by providing leadership and guidance. Three key institutions will join RBC to implement this Project: Rwanda Agriculture and Animal Resources Development Board (RAB) will facilitate activities related to animal health surveillance and response to zoonotic diseases; REMA, as per its mandate, is responsible for the supervision and monitoring of external environmental standards on a regular basis. Therefore, to ensure the sound implementation of environmental and social safeguards associated with all the subprojects of the proposed Project. In addition REMA will advise the Project on technical specifications for the procurement of energy and chemical efficient equipment. Rwanda Development Board (RDB) will facilitate those activities involving wildlife surveillance and response of environmental activities; Gender Monitoring office (GMO) will ensure gender aspects of HE are well addressed at all levels of Project implementation; and the National Child Development Agency (NCDA) will be responsible for implementation of integrated ECD service delivery. These institutions will be brought together within a multi-sectoral transdisciplinary One Health authority to enhance their capabilities in coordinating and executing essential public health functions within a One Health approach. Under the overall responsibility of RBC, RDB, RAB, GMO, and NCDA will be the main implementing entities for the Project and will be responsible for ensuring compliance to applicable ESF requirements.

The RBC-SPIU has among its staff, an Environmental Specialist and Social Specialist responsible for implementing E&S risk management requirements of the SPRP and COVID-19 ERP. Additionally, an Environmental Specialist (one), a Social Specialist (one) and a Gender Specialist (one) will be recruited to be responsible for E&S risk management requirements and risks associated with SEA, SH and GBV for the HEPRR-MPA.

RBC has a good track record in successfully executing World Bank supported Project, having secured additional financing for the SPRP till 2025 and having performed well in executing the COVID-19 ERP and its AFs with the remaining funds allocated to disaster relief following the evocation of its CERC component. NCDA is a key institution in the implementation institution of the SPRP and therefore is well versed with E&S risk management risk management requirements required of them. RDB is an implementing institution in the WB supported Volcanoes Community

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Resilience Project (VCRP) responsible for the implementation of subcomponents for integrated climate resilient settlement and for livelihood diversification and income generation. RDB employs a fulltime Environmental Specialist, fulltime Social Specialist and a fulltime community mobilization specialist for requirements of the VCRP E&S risk management requirements. RAB also has a good track record in the successful implementation of WB supported Project that include the on-going Sustainable Agricultural Intensification and Food Security Project (SAIP) and Commercialization and the De-Risking for Agricultural Transformation Project (CDAT). The GMO does not have experience in executing WB supported projects. In this regard, GMO will recruit a Gender Specialist to follow up and ensure the successful implementation of the gender aspects of HEPRR-MPA.

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

# A. Environmental and Social Risk Classification (ESRC)

Substantial

## A.1 Environmental Risk Rating

Substantial

[Summary of key factors contributing to risk rating, in accordance with the ES Directive and the Technical Note on Screening and Risk Classification under the ESF – Max. character limit 4,000]

The Project will finance the strengthening cross-border preparedness and response to HEs by expanding cross-border functional surveillance systems at Rwanda's border facilities comprising the Kigali International Airport, the Bugesera International Airport to be completed in 2026 and the Kamembe Local Airport as well as the land and water (Lake Kivu ports) entry points including borders with the Democratic Republic of Rwanda (DRC), Burundi, Tanzania, and Uganda. This Project will also finance the expansion of the National Health Institute into a Diagnostics Development and Research Center. Both the expansion of cross-border surveillance systems at points of entry and the expansion of the National Health Institute into the Diagnostics Development and Research Center will mainly entail climate adaptive small civil works for refurbishing and/or modifications of existing structures, retrofitting with energy and chemical efficient equipment adapt them to green and climate-smart facilities. However, Environment Health and Safety (EHS) risks and impacts during the small civil works refurbishment and operation surveillance systems of the cross-border entry points can potentially cause soil erosion, contamination, air and/or water pollution, disease spread, and traffic safety and therefore need appropriate measures for avoidance or mitigation. Although environmental risk and impacts from refurbishment small civil works and equipping/retrofitting activities are expected to be minor, the expansion of surveillance systems of over 30 cross-border entry-points subproject will be a national scale intervention with potential cumulative potential. Information systems for HEs and the digitalization of the health sector presents several environmental risks and impacts. The digitalization of health information and the utilization of advanced analytics raise significant concerns regarding data security and privacy, potentially leading to unauthorized access, data breaches, and misuse of sensitive health data without robust cybersecurity measures.

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Additionally, the implementation of digital systems may result in the generation of electronic waste (e-waste) from obsolete equipment, necessitating proper e-waste management practices to avert environmental pollution and health hazards linked to improper disposal of electronic devices. Furthermore, the rise in digital health services may contribute to increased healthcare waste, including electronic devices and medical equipment, requiring developing guideline for e-waste management consisting of recovery, re-use, recycling as well as its collection and disposal mechanisms to be used by all Project beneficiaries; and implementing effective e- waste management to mitigate environmental pollution and associated health risks. The Diagnostics Development and Research Center will house a Biosafety Level-3 laboratory in alignment with the One-Health network with capabilities for diagnostic, teaching/training and research facilities handling indigenous or exotic agents which may cause serious or potentially lethal disease as a result of exposure by the inhalation and other route. Appropriate instruments will be prepared and implemented, stipulating material measures for the avoidance of exposure and management of other EHS risks. The RBC, in collaboration with participating institutions, will develop an Environmental and Social Management Framework (ESMF) aimed at identifying and mitigating environmental and social risks associated with activities within the Project components. This framework encompasses procedures for the systematic identification, screening, preparation of instruments, management, and monitoring of environmental and social risks and impacts, including an annex of Infection Control and Waste Management Plan (ICWMP). Based on the type and extent of the potential negative risks and impacts discussed above, environmental risk of the Project is rated Substantial.

A.2 Social Risk Rating Moderate

[Summary of key factors contributing to risk rating, in accordance with the ES Directive and the Technical Note on Screening and Risk Classification under the ESF – Max. character limit 4,000]

The Project will have positive impacts by enhancing Rwanda's health system and response capabilities to HEs. However, certain social risks have been identified that need to be assessed and mitigated during implementation. Social risks and impacts associated with the expansion and operation of cross-border functional surveillance systems at points of entry potentially and with the establishment and operation of a Diagnostics Development and Research Center include: Labor and working conditions including OHS, SEA/SH from workers or vice versa during refurbishing civil works and installation works. Community health and safety issues may emanate from the improper handling, transportation and disposal of hazardous and infectious systems waste, incidents of SEA/SH. Leakage/escape of indigenous or exotic agents during the operation of the Level-3 Biosafety Laboratory as a result of non-compliance to design, equipping/installations is potential community health and safety risk. However, RBC will ensure that the laboratory seeks and obtains the relevant ISO accreditation as indicated in Rwanda's One Health Strategic Plan (2014-2018), as already attained for the National Reference Laboratory for ISO115189. The Project will leverage the GRM and its structures operational in the Rwanda COVID-19 ERP and continue to ensure appropriate stakeholder engagement activities outlined in the Stakeholder Engagement Plan (SEP) to ensure broad dissemination of Project benefits to address any Project implementation-related grievances. Based on the above, the social risk is rated moderate.

[Summary of key factors contributing to risk rating. This attribute is only for the internal version of the download document and not a part of the disclosable version – Max. character limit 8,000]

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

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#### **B.1** Relevance of Environmental and Social Standards

ESS1 - Assessment and Management of Environmental and Social Risks and Impacts

Relevant

[Explanation - Max. character limit 10,000]

The Project's Environmental and Social risk (E&S) is rated Substantial. Strengthening cross-border preparedness and response to HEs by expanding cross-border functional surveillance systems at Rwanda's border facilities and the establishment of a Diagnostics Development and Research Center housing a Biosafety Level-3 laboratory with capabilities for diagnostics, teaching/training and research will largely have a positive impact in the country and region. However, environment, health, and safety risks exist from the planned Project activities Under component 1, that include OHS, pollution risks, chance finds and others associated to the small civil works for the expansion of cross-border entry points and from small civil works for the refurbishment, equipping/installations to convert the National Health Institute Facility into a Diagnostics Development and Research Center that will host a Biosafety Level-3 laboratory. Other potential environmental risks relate to the operational phases that include improper medical waste management associated with exposure risks to infectious/bio-hazardous during waste handling, transfer and disposal in the context of OHS, and can also impact on the public at cross-border entry point surveillance facilities. These impacts are expected to be site-specific/point source, reversible, and of low magnitude that can be mitigated following appropriate measures. Potential also exist regarding social exclusion of vulnerable individuals or groups from Project benefits (e.g. persons with disabilities). To mitigate the Project risks, RBC will develop an E&S screening tool according to Rwanda's laws and the World Bank's ESF, for the identification of relevant ESSs and determine an appropriate E&S risk rating subprojects/activities and specify the type of E&S assessment required, including specific instruments/plans. RBC will update the MWMP that was used in the COVID-19 ERP to be applied activities of this Project. The updated MWMP will be prepared, reviewed, and cleared by the Bank and disclosed prior to implementation of Project activities. Social exclusion and SEA/SH risks will be addressed, as appropriate, in the design of Project activities and through relevant mitigation measures included in the E&S risk management instruments prepared during implementation including, Code of Conduct (CoC) for workers, and through the already available stakeholder engagement and grievance mechanisms. RBC will prepare a Labor Management Procedure (LMP) instrument, to address issues of labor and working conditions, including health and safety measures, and site-specific emergency preparedness. The LMP wil be reviewed and cleared by the Bank. RBC is expected to designate E&S staff comprising an Environmental Specialist and a Social Specialist. The World Bank E&S team will provide support in the review process of the Project implementation and verification of Project results and adherence to all E&S risk management requirements as stipulated in the Project ESCP. The ESCP will be part of the legal agreement between the Bank and the Government of Rwanda and will guide the arrangements for ESF implementation. The RBC, in collaboration with participating institutions, will develop an Environmental and Social Management Framework (ESMF) aimed at identifying and mitigating environmental and social risks associated with activities within the Project components. This framework encompasses procedures for the systematic identification, screening, preparation of instruments, management, and monitoring of environmental and social risks and impacts. It also outlines the key environmental and social impacts of Project activities, provides indicative plans for environmental and social management and monitoring, includes the updated parent COVID-19 ERP Infection Control and Waste Management Plan (ICWMP) as an annex. The ESMF should be designed to align with the World Bank Group's Environmental, Health, and Safety (EHS) Guidelines for Health Care Facilities, EHS Guidelines for Pharmaceuticals and Biotechnology Manufacturing, and General EHS Guidelines, ensuring compliance with international standards for environmental and

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social management in healthcare and related sectors. Specific subproject E&S risk management instruments and plans (e.g. ESIAs, ESMPs) will be prepared during Project implementation (prior to commencement of sub-Project activities) following the requirements of the overall ESF and guidance to be provided in the ESMF. The ESMFs will have approach and process to assess EHS risks associated with TA activities. Site-specific Environmental and Social Impact Assessments (ESIA) with embedded Environmental and Social Management Plans (ESMPs), especially for the laboratory and research center will be prepared, to manage E&S risk and impacts of subprojects, in compliance with the relevant Rwanda laws and the World Bank Environmental and Social Standards (ESS) under the Environmental and Social Framework (ESF). Accordingly, five six of the ten ESSs are relevant to the Project comprising ESS1, ESS2, ESS3, ESS4, ESS8 and ESS10.

ESS10 - Stakeholder Engagement and Information Disclosure

Relevant

[Explanation - Max. character limit 10,000]

The Project has established a structured approach similar to one used in the on-going and successful WB supported projects implemented by RBC to engage with stakeholders. People affected by Project will be provided with accessible and inclusive means to raise concerns and grievances. The Project will leverage RBC's "Risk communication and Community Engagement" (RCCE), that has been employed in Stakeholder Engagement Plan (SEP) for effective communication. RBC will conduct stakeholder Engagement consultations after one month of effectiveness and update the SEP. The overall purpose of the stakeholder engagement and consultation process is to build trust in the prevention and response of misinformation that may interfere with the Project planned activities. The approaches taken will thereby ensure that information is meaningful, timely, and accessible to all affected stakeholders, including usage of different languages, addressing cultural sensitivities, as well as challenges deriving from illiteracy or disabilities, as well as challenges of public meetings. The Project will operationalize the Project GRM, which includes a hotline/toll free phone contact, which will be detailed in the final SEP for the Project. The GRM will respond to complaints throughout the Project lifecycle and will be devised to promptly respond to any Project grievances. The existing RBC SPIU will undertake day-to-day management of GRM; it will define ways in which users can submit their grievances, which may include submissions in person, by phone, text message, mail, email or via a website; and includes a log where grievances are registered in writing and maintained as a database, publicly advertised procedures, setting out the length of time users can expect to wait for acknowledgement, response and resolution of their grievances, transparency about the grievance procedure, governing structure and decision makers; and an appeals process (including the national judiciary) to which unsatisfied grievances may be referred when resolution of grievance has not been achieved.

**ESS2 - Labor and Working Conditions** 

Relevant

[Explanation - Max. character limit 10,000]

The Project will be implemented in accordance with the applicable requirements of ESS2, in a manner acceptable to the Association, including through, inter alia, implementing adequate OHS measures (including emergency preparedness and response measures), setting out grievance arrangements for different categories of workers A Labor Management Procedures (LMP) instrument will be prepared for the Project. Although Project activities are unlikely to be in contact with children under 18 years, measures to prohibit children from being employed will be elaborated in the LMP and implemented. The MoH will ensure compliance to the national labor law that prohibit the

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use of forced labor or conscripted labor in the Project activities. A responsive grievance mechanism that will allow workers to quickly inform management of labor issues, such as a lack of PPE and unreasonable overtime will be proposed under this Project. The Project will finance the purchase of adequate supplies of PPE (facemask, gowns, gloves, handwashing soap and sanitizer) required for workers. All workers will adhere to the signed Code of Conduct and will be trained on the codes of conduct for all worker categories covering all relevant issues particularly SEA/SH/GBV.

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

Relevant

[Explanation - Max. character limit 10,000]

ESS3 is relevant as pollution prevention and management measures are necessary to manage hazardous and nonhazardous wastes which could be generated because of the Project activities. These include increased chemical pollution from the use of disinfectants and medical supplies, leading to water and soil contamination. The generation and improper disposal of medical waste, e wastes, including hazardous materials like biohazard waste and contaminated personal protective equipment (PPE), pose significant risks to public health and the environment. Additionally, the energy-intensive operations and infrastructure development during emergency response activities can contribute to higher energy consumption, and greenhouse gas emissions. There is also risk of exposure of the environment with hazardous materials containing biological agents during transportation of infectious substances/ samples. To address these environmental risks and impacts effectively, robust management measures must be in place. These include implementing strict guidelines for chemical management, including safe use, storage, and disposal practices to minimize pollution risks. Proper waste management systems should be established for medical and hazardous waste, ensuring segregation, treatment, and safe disposal. For the management of the E waste, develop guideline for consisting of recovery, re-use, recycling as well as its collection and disposal mechanisms to be used by all Project beneficiaries. The RBC and its partnering institutes executing the project shall adopt the World Health Organization's Guidance on regulations for Transporting Infectious Substances, for mitigating the risks associated with transporting infectious agents, which, if not managed effectively, could pose significant environmental, health, and safety hazards. Based upon some of the Project activities, there are some potential negative impacts and risks during both small refurbishment civil works, equipping/installations and operational phases which require consideration of the ESS3. The small works and operation mitigation measures such as dust suppression, fuel/chemical leakages and vehicle and truck maintenance shall be applied to minimize the impact of air emissions and air pollution. Noise might likely be generated from the use of light construction machinery and truck movements as well as diesel generators. Furthermore, to manage the refurbishment waste (mainly construction debris) produced during extensions of cross-border surveillance points of entry and during the establishment of the Diagnostics Development and Research Center, RBC will implement appropriate waste measures that will be elaborated in the updated IMWMP. The IMWMP will also guide waste management in operational phases of the Project at cross-border surveillance points of entry and within the Diagnostics Development and Research Center. It should be noted that the Biosafety Level-3 laboratory to be hosted in the latter will have dedicated protocols for waste management and safety measures. For risks related to the sourcing of local materials for the construction of Biosafety Level-3 laboratory, and Diagnostic Development Research Center, through the ESMF processes and subsequent site-specific environmental and social instruments, resources efficiency, primarily energy and water use, will be addressed. Requirements and recommendations in the WBG General EHS guidelines (in particular the energy and water conservation sections) will be adopted. Promoting energy-efficient technologies and practices, such as

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renewable energy adoption and energy conservation measures, can help reduce energy consumption and greenhouse gas emissions.

**ESS4 - Community Health and Safety** 

Relevant

[Explanation - Max. character limit 10,000]

Improper management of refurbishment, re-equipping and reinstallation and associates small civil works can cause dust and noise pollution and water pollution from fuel/chemical leakages as well as litter/construction debris. Improper management of medical waste from the Project operational activities can cause exposure of infectious diseases to surrounding communities. Also, improper containment measures in biosafety labs can which may cause serious or potentially lethal disease as a result of escape and exposure by the inhalation and other route in the surrounding community. Subproject/activity ESIAs will include the updated IMWMP and other activity-specific measures to minimize the potential for community and workers exposure to hazardous materials and activities that present risk of injuries; and minimize the potential for community exposure to communicable diseases. Additional community health and safety risks related to GBV, SEA/SH will he handled through the Project GRM which has clear pathways of complainants or survivors to access Rwanda's Isange One Stop Center (IOSC) services that are available at community level healthcare services. The IOSC is built on the Multi-disciplinary Investigative and Intervention Team (MDIIT) model that comprises a reception operated by a Social Worker with access to legal support; Medical Services; Psychosocial Services and a Police Desk. Rwandan law calls for mandatory reporting of GBV cases to IOSC or police. Additionally, MoH and RBC have extensive experience in GBV/SEA/SH response and prevention and will draw upon/use their existing instruments to prepare a SEA/SH Action Plan for the Project.

ESS5 - Land Acquisition, Restrictions on Land Use and Involuntary Resettlement

Not Currently Relevant

[Explanation - Max. character limit 10,000]

Not currently relevant. No land acquisition or resettlement will be required under the project.

ESS6 - Biodiversity Conservation and Sustainable Management of Living Natural Resources

Not Currently Relevant

[Explanation - Max. character limit 10,000]

Though the Project involves mainly renovations and equipment installations at existing cross-border surveillance facilities at entry points, with minimal environmental impact. Nevertheless, improper disposal of medical and chemical waste could affect living natural resources. To mitigate this, site-specific waste management plans will be developed in line with the ESMF, which includes a generic plan adaptable to each surveillance facility's context. Project. The Project will adhere to ESMF guidelines to prevent damage to critical habitats as per ESS6 and will not finance any activities listed in the ESMF's exclusion list that pose any risks to biodiversity from improper management of waste. Overall, the Project is not anticipated to negatively affect biodiversity.

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

Not Currently Relevant

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[Explanation - Max. character limit 10,000]

Rwanda does not categorize its people in ethnic groups for service delivery or other reasons due to the associated ethnic divisionism that led to the genocide against the Tutsi. The Country's constitution protects all citizens against ethic and any other form of discrimination. Specifically, Article 10 of the Constitution on Fundamental principles provides for "eradication of discrimination and divisionism based on ethnicity, religion or on any other ground as well as promotion of national unity" and "building a State committed to promoting social welfare and establishing appropriate mechanisms for equal opportunity to social justice".

ESS8 - Cultural Heritage Relevant

[Explanation - Max. character limit 10,000]

ESS8 is relevant. Though proposed Project civil works will be conducted within existing infrastructures, the extension of the Diagnostic Development Research Center or the Biosafet laboratory, or the sourcing of local materials for construction, such as sand, make this standard relevant. In the ESMF, a protocol for "chance find" procedures is described to be included in the ESIA/ESMP when physical cultural resources are encountered during the sourcing of local materials such as sand and stone for refurbishments/renovations. During ESIA/ESMP preparation the Project will further assess the presence of physical cultural resources and describe clear clauses and chance findings procedures for tender documents. Consultation will be performed with local communities and national experts. Selected contractors will be requested to include the chance find procedures agreed in the ESIA/ESMP in the Contractor ESMPs.

**ESS9 - Financial Intermediaries** 

Not Currently Relevant

[Explanation - Max. character limit 10,000]

This standard is not relevant for the suggested project interventions.

#### **B.2 Legal Operational Policies that Apply**

**OP 7.50 Operations on International Waterways** 

No

**OP 7.60 Operations in Disputed Areas** 

No

#### **B.3 Other Salient Features**

**Use of Borrower Framework** 

No

[Explanation including areas where "Use of Borrower Framework" is being considered - Max. character limit 10,000]
None

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# **Use of Common Approach**

No

[Explanation including list of possible financing partners – Max. character limit 4,000] None

# **B.4 Summary of Assessment of Environmental and Social Risks and Impacts**

[Description provided will not be disclosed but will flow as a one time flow to the Appraisal Stage PID and PAD – Max. character limit 10,000]

The environmental risks related medical supplies, and waste management associated healthcare, and hazardous waste handling, disposal and transfer, e waste, correlated to occupational health and safety on Project workers, and healthcare workers at hospital/ health care facilities, and laboratory (addressed under ESS2), community health and safety risks (addressed under ESS4), and limited pollution risk (addressed under ESS3). Risk and impacts related to the civil works including health and safety risk on workers and communities, construction waste management or within facility air pollution are expected to be site-specific, reversible, and of low magnitude that can be mitigated following appropriate measures. The social risks under ESS1 pertain to (i) social exclusion of vulnerable groups (e.g., persons with disabilities, the elderly, women headed households and widows, children without parents etc.) to Project benefits. The laboratory if not designed with proper consideration to the facilities specific features and adhere to strict operational protocols, poses risk of accidental exposure or release of hazardous biological materials. In addition, it still pose environmental risks, which primarily stem from the handling, storage, and disposal of biological agents and associated waste. To mitigate the Project risks, the Implementing Agencies (IA), RBC as lead, will develop an E&S screening template, as part of the Project Environmental and Social Management Framework, which each implementing will use to assess the E&S risks of their respective Project activities, and identify proportionate mitigation measures in the form of activity specific E&S management measures (i.e. Operational protocols, ESMP checklist, or environmental, social health and safety mitigation measures/clauses to be included in the bidding documents, templates for mitigation measures and other E&S mitigation tools). The Project's E&S risks and mitigation measures will be included in the Project ESMF that will be prepared by integrating all E&S requirements of the Project. The Project ESMF will include, among other aspects, Medical Waste Management Plan (MWMP) to address relevant identified risks under the Project. The MWMP will be prepared by RBC in accordance with Rwanda's regulations and consistent with ESS3, relevant World Bank Group's Environmental, Health and Safety Guidelines (WBG EHS Guidelines). The MWMP will be prepared as part of the Project ESMF which will be reviewed and cleared by the Bank and disclosed prior to implementation of relevant activities. Social exclusion and SEA/SH risks will be addressed, as appropriate, in the design of Project activities and through relevant mitigation measures included in the E&S documentation prepared during implementation including the Project Environmental and Social Management Framework, Code of Conduct (CoC) for workers, and through availability of effective stakeholder engagement and grievance mechanisms.

# C. Overview of Required Environmental and Social Risk Management Activities

# C.1 What Borrower environmental and social analyses, instruments, plans and/or frameworks are planned or required by implementation?

[Description of expectations in terms of documents to be prepared to assess and manage the project's environmental and social risks and by when (i.e., prior to Effectiveness, or during implementation), highlighted features of ESA documents, other project documents where environmental and social measures are to be included, and the related due diligence

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process planned to be carried out by the World Bank, including sources of information for the due diligence - Max. character limit 10,000]

SEP by Appraisal

**ESCP** by Appraisal

ESMF by effectiveness

ESMP before commencement of activities

ESIA before commencement of the bidding process of laboratory and research center construction

LMP by effectiveness

#### **III. CONTACT POINT**

#### **World Bank**

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