

# **Ministry of Finance and Ministry of Women and Social Affairs**

**Response – Recovery – Resilience for Conflict-  
Affected Communities in Ethiopia (3R-4-CACE,  
P177233) – Additional Financing  
(P181168)**

**Updated  
Stakeholder Engagement Plan (SEP)**

**March 2024**

## Acronyms

3R-4-CACE	Response Recovery Resilience for Conflict-Affected Communities in Ethiopia
AF	Additional Finance
CSO	Civil Society Organization
DA	Development Agent
ESA	Environmental and Social Assessment
ESF	Environmental and Social Framework
ESMF	Environmental and Social Management Framework
ESMP	Environmental and Social Management Plan
ESS	Environmental and Social Standards
GBV	Gender-Based Violence
HROC	High-risk Ongoing Conflict
IDA	International Development Association
IDP	Internally Displaced Persons
MHPSS	Mental Health and Psychosocial Support
MoF	Ministry of Finance
MoH	Ministry of Health
MoJ	Ministry of Justice
MoP	Ministry of Peace
MoUDI	Ministry of Urban Development and Infrastructure
MoWIE	Ministry of Water, Irrigation, and Energy
MoWSA	Ministry of Women and Social Affairs
OSCs	One-Stop-Centers
PAD	Project Appraisal Document
PCU	Project Coordination Unit
POM	Project Operation Manual
SEA	Sexual Exploitation and Abuse
SEP	Stakeholder Engagement Plan
SH	Sexual Harassment
ToR	Term of Reference
TPM	Third-party Monitoring
UNFPA	United Nations Fund for Population Activities
UNOPS	United Nations Office for Project Services

## Table of Contents

1. Introduction.....	1
2. Project Description .....	3
3. Summary of Parent Stakeholder Engagement Activities .....	6
4. Stakeholder identification and analysis .....	6
<b>4.1.</b> Affected parties.....	6
<b>4.2.</b> Other interested parties.....	7
<b>4.3.</b> Disadvantaged /Vulnerable individuals or groups.....	7
5. Stakeholder Engagement Program.....	8
6. Resources and Responsibilities for Implementing Stakeholder Engagement Activities .....	16
<b>6.1.</b> Resources .....	16
<b>6.2.</b> Management functions and responsibilities .....	16
7. Grievance Mechanism .....	17
<b>7.1.</b> Basic Grievance Management Process.....	17
<b>7.2.</b> World Bank Grievance Redress System.....	18
8. Monitoring and Reporting.....	20

## 1. Introduction

In recent years, existing conflict drivers have re-surfaced and new conflicts have emerged in Ethiopia. Incidences of violent conflict have increased sharply in the last five years in both rural and urban areas across the country. Some of these conflicts have had long histories, for example, between different ethnic groups over control of climate-sensitive local resources such as water or pasture. Historically, these resource conflicts had been closely connected to competition, especially in Ethiopia's lowland regions, but were exacerbated during the political transition due to intensification of political competition and rivalry between elites at the local, national, and regional levels. Analyses show a complex conflict system interweaving old and new grievances, local and national politics, neglect, frustration of the younger generation, climate change and land degradation, rural-urban migration, and other factors, with a history of conflicts being framed in ethnic terms.

Livelihoods have been significantly impacted both for IDPs and hosts in areas of settlement/resettlement. IDPs who remain displaced or have been resettled, have either struggled to eke out livelihoods from farming or agro-pastoralism, but this has placed increased pressure on land affecting hosts and IDPs alike. In some urban and peri-urban areas, livelihood support programs were implemented by local authorities (including granting them access to land, credit, and facilitation of local employment, especially for youth) or by humanitarian/development organizations, but with limited effect.

Public infrastructure has been destroyed or degraded – either due to the direct effects of conflict or from having been used for humanitarian purposes and to house IDPs. In areas affected by conflict, essential economic infrastructure including farmer training centers, coffee pulping plants, livestock breeding centers, agriculture nurseries, and model farmers display centers have been destroyed. The impacts of conflict and displacement have been deeply gendered, and conflict has been characterized by marked increases in sexual and gender-based violence (GBV/SEA/SH). IDPs also reported relatively widespread incidences of sexual violence during conflict, mostly against women and girls, but also against men and boys.

The broad areas of intervention by international actors in response to the IDP crisis include food distribution and cash assistance in specific areas (with organizations and the federal government relying on local government for their operations and infrastructure), capacity building at the local government level to support durable solutions (including to ensure that IDPs choices are adequately reflected), addressing drivers of displacement, women's empowerment Projects, as well as Projects focused on youth employment.

The Government of Ethiopia (GoE) request the World Bank to seek support to assist in the implementation of the Integrated Development, Recovery, and Resilience Strategy to manage the IDP crisis, including actions to build capacity for crisis preparedness and response and longer-term recovery from fragility and conflict. Considering the above, GoE has commenced the implementation of the Response Recovery-Resilience for Conflict Affected Communities in Ethiopia (3R-4-CACE) Project. The Project is coordinated by the Ministry of Finance (MoF) which has also signed the Financial Agreement on behalf the government of Ethiopia.

The parent 3R-4-CACE Project (P177233) became effective on September 16, 2022, with IDA grant of US\$300m and will close on March 31, 2027. The Project Development Objective (PDO) is to: (i) rebuild and improve access to basic services and climate-resilient community infrastructure; and (ii) improve access to multi-sectoral response services for Gender-Based Violence (GBV) survivors; in selected conflict-affected communities in Ethiopia.

The Federal Project Coordination Unit (FPCU) is established within the MoF and the Federal Project Implementation Unit (FPIU) within the MoWSA. Complementary structures have been established at regional and Woreda/district levels to move the Project forward. In Tigray region, United Nations Office for Project Services (UNOPS) and United Nations Fund for Population Activities (UNFPA) have been hired to implement activities on behalf of government.

The parent Project implements a comprehensive, multi-sectoral support package for survivors of gender-based violence (GBV) and responds to mental health and psychosocial care to conflict-affected populations. In coordination with relevant line ministries, the parent Project invests in the provision of mental health care at facility and community levels based either on approaches with demonstrated effectiveness in Ethiopia and/or another conflict-affected environment. The proposed Additional Financing (AF) will be financed from Trust Fund (TF) resources provided by KfW via a Single Donor Trust Fund (SDTF) and anticipated funds from the Early Learning Partnership Multi Donor Trust Fund (ELP-MDTF) and will support community-based childcare pilots.

The proposed AF would respond to the Government's request to scale up select activities to enhance the parent Project's development impact. Specifically, scaling up parent Project activities related to improved access to and delivery of GBV services including, among others, (i) Mental Health and Psychosocial Support (MHPSS) activities targeting conflict-affected communities; (ii) complementary socio-economic empowerment support services including personal initiative training, additional activities to support Village Savings and Loan Associations (VSLAs), and piloting of community-based childcare; and (iii) support for women and child-friendly safe spaces.

The management of parent Project's social and environmental risks has required preparation of environmental and social risk management (ESRM) instruments that are implemented during the Project's life. The Project has undertaken stakeholders' consultations not only during the preparation of environmental and social instruments throughout Project life to ensure that stakeholder's views are elicited and that stakeholders are meaningfully consulted. This Stakeholder Engagement Plan (SEP) presents the stakeholder consultation and engagement process for the parent Project and the AF. It describes a systematic approach to engagement of stakeholders, thus contributing to the development and maintenance of a constructive relationship with stakeholders throughout the Project's implementation period. The SEP also includes a Feedback and Grievance Redress Mechanism (FGRM) for stakeholders to raise concerns about the parent Project and the AF. This instrument was produced in accordance with the World Bank's Environmental and Social Framework (ESF).

The SEP will be revised from time to time during Project implementation, to reflect adaptive Project management, respond to implementation changes, adapt to unforeseen circumstances and in response to assessment of Project implementation performance conducted under the ESCP and SEP itself. It is with this understanding that the parent Project SEP is updated SEP for AF and would be used for the parent Project. And MoF will promptly disclose the updated SEP.

## **1.2. Parent Project Description**

The 3R-4-CACE Project has a five-year lifespan (2022-2026) and financed by a US\$150 million IDA Credit and a US\$150 million IDA Grant. The Project has three components, focusing on rebuilding of sustainable access to basic services and climate-resilient community infrastructure, improving multi-sectoral response services for survivors of GBV while piloting prevention interventions, and adaptive Project management. In addition, the Project includes a zero-dollar Contingent Emergency Response Component (CERC).

The Project has a national geographic scope and inclusive of all eligible areas in need. However, considering the situation at appraisal, it prioritized Amhara, Oromia, Benishangul-Gumuz, Afar and Tigray regions as these regions host the largest numbers of IDPs. Within these regions, the Project prioritized: (i) Woredas with the highest numbers of IDPs and/or assessed damages and (ii) Woredas located across subregional borders to avoid increasing tensions along border areas. The selection considerations also include the on-going level of conflict, security

(although insecurity will not be an exclusion criterion), accessibility constraints, and Woreda readiness and ownership. There are approximately four to seven Woredas in each region for targeting, and this number will increase if additional funding becomes available to the Project.

**Component 1:** Rebuilding Sustainable Access to Basic services and Climate-resilient Community Infrastructure: it focuses on rebuilding sustainable access for communities affected by the conflicts in the country to basic services and infrastructure. Under sub-component 1.1, the Project aims finance the provision of rapid response services to address the needs of conflict-affected communities in the immediate terms (i.e., 12-18 months) and to lay foundations for more sustainable support with a focus on health, education, water supply, sanitation, and hygiene (WASH), and other services as needed and feasible. Temporary support services, such as basic services and necessities, shelter, and psychosocial support, may also be financed for people without support networks, large families without income earners, or unaccompanied minors. This component also addresses the FCV risks and strengthens drivers of resilience from a socioeconomic recovery perspective. The implementation of this component is led by MOF.

**Component 2:** Improving Access to GBV Response Services: finances the strengthening of short and medium-term GBV response services for survivors of GBV within targeted Woredas under sub-component 2.1. It also encompasses piloting innovative GBV prevention programming, including change in behaviors, both as a mechanism to address underlying norms and dynamics that contribute to violence, and to address factors that prevent GBV survivors from seeking care under sub-component 2.2. Sub-component 2.3 include strengthening of institutional capacity for coordination and delivery for quality, confidential, and survivor-centered care across the country. Component 2 is implemented by MoWSA in coordination with relevant government actors with mandate for GBV prevention and response, notably MoH and the Attorney General, and in partnership with non-governmental partners that specialize in GBV prevention and response. This implementation approach acknowledges the capacity constraints in providing quality services at the community level, the lack of required equipment, and the ongoing instability in some targeted areas.

The interventions under Component 2 are expected to respond to the multiple needs of GBV survivors to enable short- and medium-term recovery from violence and to strengthen the capacity of vulnerable populations to cope with future shocks and stresses that may contribute to GBV incidence, including, among others, those related to conflict and to the impacts of climate variability and change. By targeting prevention and behavior change, this component also aims to address drivers and risk factors that contribute to acceptance and perpetration of GBV that may be exacerbated by conflict, climate events or other related shocks.

Addressing drivers and impacts of GBV has important implications not only for the physical and psychosocial well-being of survivors, but also for social cohesion and sustainable development of communities more generally. Left unaddressed, GBV incidence contributes to communal instability and results in significant economic costs on families and communities alike, extending from lost productivity, lost earnings and out of pocket medical expenditures. Prevention activities under Component 2 may unlikely prevent the explicit use of GBV as a targeted weapon of war, but they should support an environment where overall tolerance for GBV is reduced and the communal support for survivors increases.

**Component 3:** Adaptive Project Management (Cost: US\$20.0 million): Implemented by MOF, with MoWSA being responsible for the management of Component 2 activities. Under sub-component 3.1, it finances the incremental costs of the various Project management aspects and the overhead costs of components 1 and 2. Under sub-component 3.2, support has been provided for learning activities that will help to improve the effectiveness of Project-financed activities and help with adapting them to changing settings.

**Component 4:** Contingency Emergency Response Component (Cost: US\$0.0): CERC is included under the Project in accordance with the World Bank's Investment Project Financing Policy, paragraphs 12 and 13, for situations of urgent need of assistance. This will allow for rapid reallocation of Project proceeds in the event of a natural or man-made disaster or health outbreak or crisis that has caused or is likely to imminently cause a major adverse economic and/or social impact. To trigger this component, the government needs to declare an emergency or provide a statement of fact justifying the request for the activation of the use of emergency funding. To allocate funds to this component, the government may request the World Bank to reallocate Project funds to support emergency response and early recovery. A CERC Operations Manual will be prepared as an annex to the POM, outlining triggers for its activation and detailing fiduciary, safeguards, and any other necessary implementation arrangements.

The AF is proposed to scale up the Parent Project to address improving access to GBV response services under Component 2 as the need for the services among the community is found to be high as the conflict in the Project areas is lingering.

**Institutional and Implementation Arrangement:** The MoF is leading the implementation of components 1 and 3 and overall Project coordination and oversight. MoF is an FPCU, led by a Project Coordinator, and comprising technical support personnel, and monitoring, FM, procurement, contract management, and E&S risk management specialists. MoF has hired One Environmental Specialist, One Social Development Specialist, One GBV/SEA/SH Specialist under the FPCU. Moreover, four environmental and social (E&S) specialists (one in each region) are hired in Afar, Tigray, Benishagul-Gumuz and Amhara regions. However, an E&S focal person is assigned in Oromia region and all beneficiary woredas. The FPCU is responsible for overall Project coordination, oversight, conducting Project-wide Monitoring and Evaluation (M&E) and reporting, preparing Project wide annual work plans and budgets (AWPBs), conducting procurement for components 1 (with exceptions as indicated in the PAD) and 3, and managing learning, communication, and grievance redress activities under Component 3.

The MoWSA leading the implementation of activities under Component 2. An FPIU is set up in MoWSA, led by an FPIU Coordinator, and comprising specialists in FM, GBV, health, M&E, procurement, and E&S risk management. One E&S specialist is hired at FPIU. The FPIU is responsible for overall component coordination, consolidation of Component 2 AWPBs, and procurement of component activities.

### **Rational for the Additional Finance (AF) and Proposed changes**

The rational for the proposed AF relates to the identified high number of people requiring MHPSS and livelihoods support given the large-scale violence experienced by communities, households, and individuals during the conflict. The World Bank is currently funding through the parent Project assessments and pilots for evidence-based interventions to address conflict-related trauma. The ongoing activities in the parent Project have also shown a considerable demand for livelihood activities for survivors of GBV and vulnerable women,—currently being implemented under Component 2 of the parent Project, both to enable longer recovery of survivors and to strengthen socio-economic independence to reduce exposure to violence.

The AF will foster increasing access to, and improving the quality of, childcare services in line with international best practices and the national development agenda so that parents can participate in economic activities. By financing the establishment of childcare provider centers, a vocational training module on childcare and early childhood development services, as well as the requisite training of caregivers in the centers, the Project, through this ELP-MDTF grant, will fulfill the objective of keeping children safe while parents/caregivers are engaged in economic activities. The services also provide children with the opportunity to playfully learn and develop their physical, cognitive, and socio-emotional skills.

The ongoing activities in the parent Project have shown a considerable demand for increased GBV service delivery, comprehensive MHPSS and economic empowerment interventions for survivors of GBV and for vulnerable women in targeted communities. Requests have been received from federal, regional, and local authorities to enhance these interventions. Initial reports from Tigray, where the Parent Project supports, through UNFPA and its partners women and child-friendly spaces, have demonstrated intensive demand for services, as well as satisfactory results on protection, women's empowerment, and strengthening of GBV response systems, which can also be scaled up in other parts of the country.

To address the severity and extent of mental health needs identified, the AF will support the adaptation and application of evidence-based therapeutic models to be integrated into wider MHPSS capacity building activities. Narrative Exposure Therapy (NET), for example, is an evidence-based short-term treatment for survivors of sexual or domestic violence as well as war or natural disasters that has been implemented in over thirty (30) countries. The individual-based therapy focuses on the reprocessing and integration of life experiences, allowing the survivor to establish a chronological narrative of her/his life, concentrating on traumatic experiences, but also incorporating some key positive events, to help foster a sense of personal identity. The therapy is meant to be delivered to those survivors and conflict-affected individuals who show signs of Post-Traumatic Stress Disorder (PTSD) symptoms and who are unlikely to recover without therapeutic support.

The AF will also support complementary socio-economic empowerment activities targeting GBV survivors and vulnerable women. As part of a package of multi-sectoral response interventions to support recovery and reintegration of GBV survivors into communities, and as a critical mechanism to increase socio-economic resilience of women in conflict-affected communities. The AF will support economic empowerment interventions targeting vulnerable women under component 2. This activity will build capacity and infrastructure that enables women to increase income through sustainable livelihood enhancements and improved access to financial and non-financial services. The activity will target GBV survivors as well as vulnerable women [and men], among IDP and host communities.

The proposed AF will support complementary activities to strengthen impact and effectiveness of the parent Project activities. The proposed activities may include:

Personal Initiative training: a psychology-based training program developed by a German university in Luneberg which has been proven to build up self-starting, future-oriented, persistent behavior integrated into VSLA/livelihoods activities.

1. Additional VSLA interventions: setting aside funding to provide revolving funds for VSLAs as they mature, providing mobile phones for women, supporting group enterprises/collectives formed from VSLAs as they mature, providing digital financial services for VSLAs which can help them build a credit history.
2. Provision of start-up assistance for women engaged in income-generating activities: In discussion with MoWSA, the Project will explore provision of startup assistance for targeted women, including potential small-scale individual business development grants or in-kind contributions in the form of, e.g., seeds, tools and other inputs for business activities.
3. Childcare services: building on growing evidence of the effectiveness of childcare options in enabling women's participation in economic empowerment activities, this Project plans to establish around 80 full day childcare services to enable parents/caregivers to engage in economic activities while keeping children safe with opportunities to playfully learn and develop physical, cognitive, and socio-emotional skills. The specific childcare model(s) will be informed by a forthcoming needs assessment, as well as discussions with ministries and local leaders, but are likely to include childcare services within TVET centers and other modalities such as community-based childcare.
4. The proposed AF will also enable expanded support for Women and Child Friendly Safe Spaces (WFSS). These



spaces provide women and girls with a safe entry point for lifesaving GBV services and a place to access information, as well as safe gathering points to build social cohesion, build connections, solidarity and support with other women and girls. Effective models for WFSS offer integrated services including GBV response services, caregiver/parental interventions, life skills activities, sometimes nutrition and health care, etc.

## 2. Objective of SEP

The overall objective of this SEP is to define a program for stakeholder engagement, including public information disclosure and consultation throughout the entire Project cycle. The SEP outlines the ways in which the Project team including the MoF (FPCU), and MoWSA (FPIU) will communicate with stakeholders and includes a mechanism by which people can raise concerns, provide feedback, or make complaints about Project activities or any activities related to the Project.

## 3. Stakeholder identification and analysis per Project

### 3.1. Methodology

Stakeholder engagement is a necessary approach to engage specific stakeholder groups and provide them with relevant information and opportunities to voice their opinions on issues important to them. The first step in the stakeholder engagement process is to identify the key stakeholders to be consulted and involved. The stakeholders stated in this SEP include those currently associated with the Response, Recovery, Resilience for Conflict-Affected Communities in the Ethiopian (3R-4-CACE) Project and those who will be linked with the Project at a later stage of Project implementation. The 3R-4-CACE and the AF applies the following principles for stakeholder engagement:

- **Openness and life-cycle approach:** Public consultations for the Project will be undertaken continuously throughout the Project lifecycle from preparation through implementation. Stakeholder engagement will be free of manipulation, interface, coercion, and intimidation.
- **Informed participation and feedback:** Information will be provided and widely distributed among all stakeholders in an appropriate format; conducted on a timely basis.
  - understandable and accessible information related to the Project, including in relevant local and major languages and in formats that can be understood by people who are illiterate.
  - Assure those stakeholders' concerns and feedback is taken into consideration during decision-making.
- **Inclusiveness and sensitivity:** Stakeholder engagement is undertaken to support better communications and build effective relationships. The participation process for the Project is inclusive and the stakeholders are always encouraged to be involved in the consultation process.
- **Gender approach for consultation:** Consultation times will have to align with the needs of women. Women may have limitations about time of day or location for public consultation; they may need childcare for meetings or other additional support and resources to enable them to participate in consultations.

Improved access to information and sensitivity to stakeholder needs are key principles underlying the choice of engagement methods. In the AF, particular attention will be paid to socially vulnerable groups, especially female heads of household, IDPs, young people, the elderly, persons with disabilities, and the cultural sensitivities of different ethnic groups in the Project area.

### 3.2. Stakeholder Identification and Analysis

Stakeholders are identified and categorized into three: i) Project affected parties; ii) Other interested parties; and iii) Disadvantaged and vulnerable groups. Stakeholders are individuals, institutions, CSOs, or groups who are affected or likely to be affected by the 3R-4-CACE Project and who may have an interest in the Project.

The term "Project-affected parties" includes "those likely to be affected by the Project because of actual impacts or potential risks to their physical environment, health, security, cultural practices, well-being, or livelihoods". In the AF, these stakeholders include individuals or groups, including host/local communities and IDPs. The term "other interested parties" (OIPs) refers to individuals, groups, or organizations with an interest in the Project, which may be because of the Project location, its characteristics, its impacts, or matters related to the public interest. The identified IOPs for the parent and the AF are the same and these parties include government officials, the private sectors, the scientific community, universities, women's organizations working on GBV issues, other civil society organizations, and cultural and religious groups. "Disadvantaged/vulnerable individuals or groups" are potentially disproportionately affected and/or less able to benefit from opportunities offered by the Project due to specific difficulties to access and/or understand information about the Project and its environmental and social impacts and mitigation strategies.

MoWSA and MoF are committed to engaging in meaningful consultations with all stakeholders, paying attention to the inclusion of Historically Underserved Peoples, and vulnerable and disadvantaged groups (including the elderly, persons with disabilities, female-headed households and orphans, and vulnerable children). Thus far, a total of 13,451 (5632 of them are female) communities including vulnerable groups like youths, women, female-headed households, people with disabilities, elderly, etc. have been consulted in Project implementation Woredas for the issues related to Project components including its objective, Project ESRM mechanisms such as sub-Project type and identification, site selection process, the establishment of the committees such as GRC's, Project Grievances redress mechanism, among others.

### **3.2. Affected Parties**

Affected parties are those sets of people who are directly influenced actually or potentially by the proposed Project and/or have been identified as most susceptible to potential risks and impacts associated with the Project and who need to be closely engaged including local community members and other parties that may be subject to direct impacts from the Project. These include:

- ✓ General conflict affected population.
- ✓ Internally Displaced Persons (IDPs) and families.
- ✓ Host communities.
- ✓ Vulnerable population including women, female headed households, children/child headed households, Persons with Disability (PWD), elderly and others.
- ✓ Civil society organizations, NGOs and associations operating with IDPs and host communities in Project areas.
- ✓ Public servants (health, education workers, public administration in general).
- ✓ GBV/SEA/SH survivors
- ✓ Communities in adjacent kebeles and villages.
- ✓ Regional and woreda administrations/management.
- ✓ TPI like United Nations Fund for Population Activities (UNFPA) and United Nations Office for Project Service (UNOPS)
- ✓ Service providers like medical centers and health staff, and particularly staff providing services to GBV/SEA/SH survivors, etc.

### **3.3. Other interested parties**

As indicated above, other interested parties are individuals, groups, or organizations with an interest in the Project. Interested parties of the Project's stakeholders include: the federal ministerial institutions like Ministry of Finance

(MoF), MoWSA, MoP, Federal Attorney General, MoH, Ministry of Justice (MoJ), Ministry of Urban Development and Infrastructure (MoUDI) and Ministry of Agriculture (MoA), and their regional counterparts. The regional and local interested parties include, among other,

- ✓ 3R-4-CACE Project staff
- ✓ Regional and Woreda Agriculture and Natural Resource Offices.
- ✓ Regional and Woreda Finance Offices.
- ✓ Zone and Woreda Agriculture and Natural Resources Bureaus.
- ✓ Zonal Offices of Finance.
- ✓ Woreda Women, Children and Youth affairs office.
- ✓ Contractors, subcontractors and primary and suppliers.
- ✓ Different community groups.
- ✓ NGOs, especially those working on GBV, child and social action, and social protection reconstruction process.
- ✓ International organizations, including World Food Program (WFP), United Nations International Children's Emergency Fund (UNICEF), World Health Organization (WHO), include other organizations active in include other organizations active in Ethiopia particularly with IDPs, etc.).
- ✓ Universities and research institutions, National Disaster Management Institutes.
- ✓ National and international development partners, including the World Bank (WB), , and bilateral donors such as Kreditanstalt für Wiederaufbau (KfW) and Early Learning Partnership Multi Donor Trust Fund (ELP-MDTF).
- ✓ Consultants; and
- ✓ The public at large.

### **3.4. Disadvantaged/Vulnerable Individuals or Groups**

It is particularly important to understand whether parent Project and AF impacts may disproportionately affect disadvantaged or vulnerable individuals or groups, who often do not have a voice to express their concerns or understand the impacts of a Project. They may disproportionately be impacted or further disadvantaged by the Project as compared with any other groups due to their vulnerable status, and usually require special arrangement to ensure their equal representation in the consultation and decision-making process associated with the Project. Their vulnerability may stem from their origin, gender, age, health condition, including HIV/AIDS status, disability, economic deficiency and financial insecurity, lack of assets, disadvantaged status in the community and IDP areas, dependence on other individuals or natural resources, etc.

Thus, it is also crucial that awareness raising and stakeholder engagement with disadvantaged or vulnerable individuals or groups is adapted considering the sensitivities of such groups or individuals, their concerns, and cultural norms and to ensure that they are provided a full understanding of the Project activities and benefits. Engagement with these vulnerable groups and individuals often requires the application of specific measures and assistance aimed at the facilitation of their participation in the Project decision making so that their needs, views, and input to the overall process are commensurate to those of the other stakeholders. Moreover, it is important to closely examine the potential adverse impact and risks of the Project activities on different categories of people with particular focus on vulnerable groups and historically underserved communities in Benishangul-Gumuz, and in pastoral and agro-pastoral parts of the Oromia regional state.

Within the Project areas the vulnerable groups include, but are not limited to, the following:

- ✓ IDPs,
- ✓ Elders who do not have support,
- ✓ Women and children,

- ✓ Youths,
- ✓ People with disabilities, the unemployed youths,
- ✓ Female and child headed households, etc.

#### **4. Stakeholder Engagement Activities**

##### **4.1. Summary Stakeholder Engagement during parent 3R4CAC Project ESRM Preparation**

Stakeholder engagement for the 3R-4-CACE Project will continue during the whole Project lifecycle from preparation through implementation. Information will be provided and widely distributed among all stakeholders in an appropriate format; conducted based on timely, relevant, understandable, and accessible information related to the Project; opportunities provided to raise concerns and assure that stakeholder feedback is taken into consideration during decision making. During the preparation of the environmental and social risk management (ESRM) instruments of the 3R-4-CACE Project, including ESMF, RF, and comprehensive SA, a stakeholder consultation were made with relevant federal, regional, woreda sector institutions, community representatives, including host communities, as well as IDPs with the objectives to increase awareness about the Project, inform and get views, engage and maintain active participation and support by relevant stakeholders and communities to be involved in various phases of the Project. The community consultation is conducted by individual consultants hired for the purpose of ESRM instruments preparation with 87 (22 female) relevant stakeholders including expert, IDPs, representative of host communities in different Project implementing region such as Oromia, Afar, Benshangul- Gumuz and Amhara. The consultation and stakeholder activities are conducted (i) using local language and respecting community culture and norms; (ii) in inclusive manners i.e., discussion and consultation with various community representatives (clan leaders, community leaders, religious leaders, disabilities, ethnic minorities, and community development representatives); and (iii) by taking precautionary measures for COVID19 prevention. Accordingly, below is a summary of the community and stakeholders' consultation during the development of Project ESRM instruments.

During the stakeholders and community consultations with the host communities and IDPs, it was found that historically disadvantaged and vulnerable groups such as women, elders, and people with disabilities are disproportionately vulnerable. This was mainly due to their lower levels of education, lower participation in community awareness sessions and social norms, and, more importantly, the catastrophic damages they experienced during the conflicts. During the consultation, the participants highlighted the need for all-inclusive discussion in the target woredas of Project beneficiaries. One of the concerns they raised was related to the elite capture and/or different interest groups including traditional authority structures in influencing the community's prioritization and manipulation of support provided as well as lack of transparency during the selection of the beneficiaries for the financial and technical assistance that may worsen the situation. Besides, there might be weak consultation and participation of the beneficiaries of the conflict-affected communities including the IDPs and host communities. This could lead to oversight of appropriate needs, priorities, and skills as per the local context.

Furthermore, among the consulted stakeholders, IDPs, and host communities, the Project's mobile health response service, which includes medical assessment, medicine distribution, and medical services based on lessons learned from recent health interventions in the Tigray Region, has received top priority. This, on the other hand, can lead to a high level of mobility among displaced persons in search of better service. This is because there may be large mobility of displaced persons within the same Project target locality to kebeles or woredas that provide better Project benefit package services. Displaced persons seek to take advantage of whatever services and benefits are available because they are among society's most vulnerable groups, struggling to meet their fundamental needs. The majority lack a sustainable source of livelihood, or income sources, and want to maximize their life-saving opportunities by moving to Project locations where they believe that good benefits will be available. Participants of the discussion from the Afar region stated that mobile health teams are trying to give health services to the IDPs, but they did not satisfy the need. This is because the need and supply are not compatible, as a team does not come

with sufficient resources to address the needs of IDPs. Although there are attempts to meet IDP needs, the services are too minimal. At the same time, women did not get proper health services, and some of them delivered on their way to retreat and at IDP centers without getting any medical care as there were limited health services for women and girls. Hence, health provisions should be improved. The experts from Amhara, Oromia, and Benishangul Gumuz also supported this idea.

As stated by stakeholder and community consultations in selected woredas of Amhara and Afar, revealed that the wars had a significant impact on multiple infrastructures. The destruction of schools, health centers, and WASH services is among others. In addition to the damage incurred upon the institutions, those organizations saved from destruction have made IDP centers. Therefore, there are a serious of water scarcity in most towns where IDPs are settled. The influx of new IDPs because of the ongoing conflicts worsen the scarcity of basic resources like water, electricity, food, etc. In the long run, the scarcity of basic resources may trigger conflict between the IDPs and the local communities even though the host has been supportive enough.

Participants in the stakeholder and community meetings proposed that labor aspects such as worker safety and training, as well as contractor inductions are necessary to alleviate the public health and safety risks. They proposed that a LMP should be prepared in accordance with the ESS2 standard. Stakeholders and community consultation participants explained the risk of land acquisition because the Project will support the reconstruction efforts in the existing damaged facilities and the development of new facilities in new settlement areas. This may be worsened if the affected people are not effectively and quickly compensated for the land, they lost for the implementation of the 3R-4-CACE Project. Hence, those individuals who will lose their land should be properly treated, consulted, and compensated, and their livelihood should be restored. In Tigray, Oromia, and in some parts of Amhara and Afar regions, 3R-4-CACE Project will be implemented in high-risk ongoing conflict (HROC) Woredas. Thus, proper government structures may encounter problem of implementation. As a result, some third-party implementers will lead the implementation functions in HROC and the third-party implementer to consider environmental and social risk management related issues during implementation. Stakeholders during the discussion expressed that capacity enhancement activities are vital to make the Project serves its intended purposes. This includes training and awareness creation and strengthening formal and informal community structures, including Women's Groups, traditional burial associations (Iddirs) and other structures.

Regarding the improving access to the GBV response service, participants from the Amhara and Afar regions were asked to explain the extent of GBV among the IDPs. They explained that although there is a possibility, there is no such visible GBV at IDP centers. On the other hand, participants described that there were lots of rapes and other forms of GBVs in the Amhara and Afar regions in the areas where Tigray People Liberation Front (TPLF) militias controlled. Also, it was indicated that cases of GBV from IDP centers are not properly assessed. Attempts were made to give health services for the victims of rape but due to the demolition of healthcare services, victims are not getting the right treatment. Gaps related to GBV survivors are mentioned by participants of community consultation as a major risk of the 3R-4-CACE Project. Limited institutional capacity and lack of skilled human power are among the major obstacles to providing the required services for GBV survivors. The gaps related to service delivery for GBV survivors include a lack of enough resources, training, and guidance to deliver quality care and services to the victims. Knowledge gaps among clients and healthcare workers, and weak multi-sectoral referral links create disjoint and incomplete pathways of care for GBV survivors. Moreover, the sociocultural norms that foster stigma for survivors and normalize violence within partnerships inhibit women, men's, boys', and girls' from seeking access to comprehensive GBV care and treatment. This coupled with dissatisfaction of service or being unaware of the availability of services. Thus, it is vital to pave ways in making health facilities friendly for GBV survivors by ensuring confidentiality or service provision. Therefore, for the smooth implementation of the Project, the gaps identified to give quality services for GBV survivors should be addressed. It is also necessary to strengthen One-Stop-Centers (OSCs) in terms of facilities and human power. Frequent training should be given for OSCs

including updating of gender action plan and making sure it has a protocol on how to carry out referrals of GBV to response services.

There may be gaps in the grievances redress mechanism related to SEA/SH to respective service providers based on the demands of survivors and without forgetting confidentiality and lack of knowledge and skill to provide basic referrals. It is imperative to strengthen the existing and new OSC facilities as needed, including training of OSCs' critical personnel to perform core services (including medical, case management, psychosocial, police, and legal support), and procurement of essential medical supplies and other materials for the OSCs. Stakeholders and communities were asked their reflect on the general responses and support given to GBV survivors. Some of the participants explained that there are no friendly reporting mechanisms for GBV survivors or other individuals to report any form of violence. Therefore, the 3R-4-CACE Project should work both on community awareness creation and in forging friendly SEA/SH reporting mechanisms for the victims and for anybody else. Expanding and strengthening community-level response and referral mechanisms for GBV survivors through the delivery of essential response services and training of key personnel, including community-based actors, frontline providers, and health personnel are vital for the 3R-4-CACE Project to meet its basic objectives on GBV and related issues.

In the discussion with gender experts, they explained the need for the establishment of rehabilitation safe houses or safe spaces for GBV survivors for vulnerable children. The establishment of Women and Girl Friendly Spaces will enable multi-layered access to key support activities, including case management, counseling, and other social activities. It will also explore the feasibility of supporting innovative reporting systems, including hotlines/helplines. Recognizing the importance of survivors' economic independence as a measure to reduce economic dependence on perpetrators and improve resilience to violence, the Project will support opportunities to integrate economic empowerment interventions in community-level response programs or, at a minimum, to enable referral to existing livelihoods and income generation programming outside of this Project.

Regarding Project management, there are also concerns about the capacity of the 3R-4-CACE Project coordinators and implementers. As raised by officials from sector government offices in the sample woreda, they have reservation about the capacity of MoF and MoWSA in coordinating and implementing the Project. They argued that the two ministerial offices will face capacity limitation at various levels in coordinating and managing the required Environmental and Social Risk Management (ESRM) and in coordinating Project implementers at different levels. So far, the linkages and coordination among institutions, sectors, programs, and Projects at all levels are weak. Therefore, the capacity gaps of the Project implementers coupled with their limited experiences in coordinating and implementing the World Bank supported Projects including lack of experience in environmental and social risk management with ESF requirements can be the potential risks of the 3R-4-CACE Project at its implementation stage. Thus, the participants are suggested to address the gaps by prioritizing them. In addition, the MOF and MOWSA should employ social and environmental specialists if they do not have any and should enhance their capacity through training before the implementation of 3R-4-CACE Project. Also, capacity building training for all relevant stakeholders such as MoWSA, MoF, MOE, MOH, MOJ, etc. at federal, regional, and woreda levels should be delivered. Besides technical skills, Project workers should be trained in occupational health and safety to enhance their overall capacity in implementing and coordinating the Project. The detailed stakeholder's consultation is incorporated in the Project SA for further references.

Stakeholders and community interests, priorities, concerns, community's aspiration to proposed Project components have been voiced and identify potential risks and impacts with mitigation measures. The outcomes from such stakeholder engagements are incorporated into the site specific ESRM instruments including ESMP. Regarding this proposed AF activities stakeholders and the community's consultation were not conducted as the various stakeholder consultations have been conducted during the implementation of the ongoing parent Project. In addition, currently, it is difficult to conduct stakeholders and community consultation in AF target regions due to conflict and volatile

security situation in the country. The local level community consultation during the subproject implementation and other ESRM activities are under implementation by the assigned woreda E&S focal person and other Project experts. Also, the Project team has used electronic means of communication such as text messages, telegram channels, and telephone to exchange information related to the Project ESRM activities. Besides, there is a plan to develop and distribute communication materials such as brochures, and fliers to create awareness on the Project activities.

#### 4.2. Summary of Project Stakeholder Needs and Methods, Tools, and Techniques for Stakeholder Engagement

The SEP summary table below outlines the engagement process, methods, including sequencing, topics of consultations, and target stakeholders. As part of the preparation of this proposed AF activities, stakeholder and community consultation were not conducted. However, various stakeholder consultations have been conducted during the implementation of the ongoing parent Project and the AF activities are identified as noted in the PAD. In addition, currently, there is security changes and volatile security situation to conduct stakeholders and community consultation as part of AF preparation in target regions. Thus far, as part of the parent Project implementation, a total of 13,451 (5632 of them are female) communities including the vulnerable groups have been consulted in Project implementation Woredas for the issues related to Project components including its objective, Project ESRM mechanism such as sub-Project type and identification, site selection process, the establishment of the committees such as GRC's, Grievances Project redress mechanism, among others.

The World Bank and the MoF and MoWSA do not tolerate reprisals and retaliation against Project stakeholders who share their views about the Project or any World Bank-financed Project.

**Table 1: SEP Summary Table**

Project stage	Target stakeholders	The topic of consultation / message	Method used	Responsibilities	Frequency/Time line
AF Project Design	Government institutions, local authorities / implementers, local NGOs, implementation partners, donors, IDPs and the public in general.	SEP and ESCP as well as updated SEP	Stakeholder public consultation and meetings	MoF/FPCU and MoWSA/FPIU ESRM team	Continuously
	IDPs, public in general, local authorities, local and international NGOs, implementation partners, donors.	The ESRM instruments of the Project	Public consultation meetings, formal meetings, one on one interviews, e-mail, website, electronic	MoF/FPCU and MoWSA/FPIU ESRM team	quarterly

			and social media		
AF and continued Project implementation	Potential beneficiaries, local authorities, and the general public.	Implementation of site-specific instruments, including ESMPs, SEA/SH Prevention and Response Action Plan, and RAPs	Community meetings, woreda notice boards, electronic and local social media, including radio, SMS, website including the WB, MoF and MoWSA,	MOF and MoWSA together with local counterparts and community institutions	To be defined by the FPCU - before commencement of activities in subprojects that require these specific instruments and during preparation of instruments.

### 4.3. Proposed Strategy to Incorporate Views of Vulnerable Groups

The FPCU and FPIU under MoF and MoWSA, respectively, are ensuring and will ensure that vulnerable groups are participating in consultative processes and that their voices and concerns are captured during the subproject activities identification and implementation. This may require specific meetings with vulnerable groups in addition to general community consultations. In general, women may be more outspoken in women-only consultation meetings than in general community meetings. Similarly, separate meetings may be held with IDPs and host communities. Further, it is important to consider other consultation methods besides physical meetings, such as radio broadcasting, use of social media like telegram channels, flyers and posters, text messages, etc. to ensure that groups that cannot physically be present at meetings can participate. Comprehensive social assessment was conducted for the parent Project and identified the needs and concerns of vulnerable and underserved groups specific to the Project.

Based on the findings of the social assessment, there is a potential risk of social exclusion of the most vulnerable and underserved groups from sharing the benefit packages of the Project particularly related to recovery packages such as transition skill training, seed grants, etc. as well as SEA/SH and MHPSS referral services like mobile community-based services on health, education, and WASH. The elite capture and/or different interest groups including traditional authority structures in influencing the community's prioritization and manipulation of support provided as well as lack of transparency during selection of the beneficiaries for the financial and technical assistance may worsen the situation. In addition, there might be weak consultation and participation of the beneficiaries of the conflict-affected communities including the IDPs and host communities. This could lead to a lack of consideration of appropriate needs, priorities, and skills as per the local context. Thus, skill training that misses the local context and exclusion of vulnerable groups from the skill trainings as well as from the provision of cash grants/seed funds to kick start sustainable livelihood models may be risks during the implementation of the Project.

To address identified the social risks to vulnerable people and groups the following mitigation measures, among others, are under implementation that will also continue throughout the implementation of AF: (i) providing priority to vulnerable and underserved people in the benefit packages of the Project particularly



during transition skill trainings SEA/SH and MHPSS referral services, WASH, etc.; (ii) targeted consultations with underserved and vulnerable people, key community representatives, (iii) Select beneficiaries realistically in consultation with representatives of the community and vulnerable/underserved people; and (iv) ensuring functionality of established GRM and accessibility for underserved and vulnerable people.

A grievance redress committee (GRC) was established in all Project regions, woredas and localities before commencing of each subproject implementation and will continue operating through the AF, in such a way that all groups identified such as vulnerable have access to the information and can submit their consultations, feedback, and grievances and receive feedback.

## 5. Resources and Responsibilities for Implementing Stakeholder Engagement

### 5.1. Implementation Arrangements and Resources

MoF together with MoWSA and the relevant local government institutions will continue to be responsible for the implementation of the activities in this updated SEP. The FPCU and FPIU allocated and will also allocate adequate resources for the implementation of the SEP. The financing will be further used for producing communication materials, including local media and radio content, and traditional information-sharing mechanisms for effective information sharing with communities (including IDPs) and documentation. The budget for SEP implementation will be updated when the SEP is updated as needed. Besides, the FPCU has assigned E&S experts to oversee the overall updated SEP implementation.

**Table 2: estimated budget for the SEP implementation**

<b>No</b>	<b>Budget categories*</b>	<b>Total costs (Dollar)</b>
1	Technical Support for the implementation of the SEP	40,000
2	Consultations/ Participatory Planning, Decision-Making Meetings	20,000
3	Communication materials	50,000
4	Training	24,000
5	Grievance Mechanism	10,000
	<b>Total</b>	<b>144,000</b>

\*Note: this estimated budget is subject to change based on the needs at the ground

All Project-related activities for the parent Project and the AF will be based on these updated SEP principles. The stakeholder engagement activities are documented through quarterly, biannually, and annual progress reports and shared with relevant stakeholders including the World Bank as part of the ESRM monitoring report.

## **6. Feedback and Grievance Redress Mechanism (FGRM)**

The Feedback and Grievance Redress Mechanism (FGRM) addresses grievances in an efficient, timely, and cost-effective manner, that arise in the Project, either due to actions by MoWSA, MoF, or the contractors/subcontractors employed, from affected communities and external stakeholders. A separate GRM is established to address worker grievances by the FPCU and FPIU. FPCU and FPIU are responsible for managing the FGRM and cascade the responsibilities to contractors and subcontractors engaged with the respective implementing agency. The FPCU environmental and social experts has been monitoring the grievance resolution process from different sources at different levels. Project Affected Persons (PAPs) and other potential complainants are informed of the FGRM, its functions, procedures, timelines, and contact persons both verbally and through written materials (often used Kebele Center notice boards for posting) that would also continue for the AF. FPCU and FPIU are keeping a log of the complaints at hand including those resolved and pending. They are implementing an effective FGRM, to help third parties to avoid resorting to the judicial system as far as possible. However, complainants can seek redress from the judicial system at any time; the step-by-step FGRM process does not deter them from approaching the courts. Thus far, there are no complaints referred to the courts system.

A SEA/SH risk assessment has been conducted without line relevant measures that need to be implemented in line with the risk level. The risks assessment informed the design of SEA/SH action plan and code of conduct for the Project staff and construction workers. The SEA/SH action plan has been implemented and Project workers have signed the code of conduct. Grievances and complaints related to SEA/SH are managed confidentially by an assigned GBV focal person or the Women and Children Affairs office in each beneficiary region. As part of the FGRM Committee, a GBV focal person (delegate from Women and Children Affairs) who has the necessary training on GBV case management will be assigned to address GBV cases and support survivors to get the necessary services. GBV survivors will get the required GBV services like psycho-social support, medical services, legal support, and economic support free of charge which will be supported under component 2. Only the nature of the complaint and the processing outcome is recorded. However, there are no complaints related to SEA/SH that have been reported during the implementation of the parent Project. The detailed procedure included in the ESMF and SA.

Thus far, the Project GRC has been established at the Kebele and Woreda levels. The GRCs constituted three to five members varying from kebele to kebele and woreda to woreda. The Kebele and woreda GRC members are drawn from representatives of government, elders, Kebele members and representatives of PAPs. Special considerations are given to women and persons with disability in the composition of the committee. A total of the 51 GRCs with 364 (118 of them are female) members are established in four Project-implementing regions including Amhara, Oromia, Afar, and Benishangul. The GRCs have biweekly regular meetings at a place where complainants can easily access them. Further, the community and elected committees agreed on dates in a month for meetings, appeals and resolving the cases. The meeting date was decided by the GRC members in consultation with the PAPs. Moreover, awareness was created on accessing the GRCs during the committee election. This indicates that the accessibility of the committee is transparent and set on consensus with the community. So far, 98 cases have been registered, among which 91 are resolved and seven (7) are pending. The main causes of the complaints are issues related to dissatisfaction with the mobilization of stone excavation using an excavator machine, payment process related to the casual laborers involved in loading and unloading operations, there is a request for the construction of the entire compound fence, the amendment of the storekeeper's wages, an altercation that occurred between a daily worker and a site foreman, among others.

The complaints recorded, resolved, and referred are reported quarterly together with the environmental and social risk management implementation performance report to the World Bank and other relevant stakeholders. The same will continue for the AF.

### **6.1. Basic FGRM Process of the Project**

The FGRM is a distinct mechanism that will allow affected parties and other stakeholders, from the community to national level, to provide feedback on Project impacts, mitigation programs, and any other Project-related aspect. The Project has established and functionalized a separate grievance mechanism for all Project workers including community workers as well. to raise workplace concerns, which require prompt addressing and resolution particularly to avoid operational health and safety (OHS) risks of materializing, as provided under ESS2. An environmental and social risk management expert are assigned at MoF to follow up on complaints related to affected parties by the Project. The complaint, to be filed should be related to the Project components and/or to Project implementation and management. Any complaint not directly related to the Project are referred to the appropriate responsible government entity.

The Grievances Redress Committee (GRC) in each woreda are functional. The procedures are as follows:

#### **Woreda GRM**

- Receive responses to complaints from Kebele GRC written.
- Accept/receive grievances, complaints, and discontents from PAPs either verbally or written.
- The GRC will look at the scene/spot or investigate any available data to give a fair decision in written; and
- Give a response within one week written.

#### **Kebele GRM**

PAPs provided complaints on any aspect first be lodged either in writing or orally to the committee, which resolved by using customary rules and existing grievance resolution mechanisms. The GRC tries as much as possible to arrive at a compromise for the complaints raised. This has been obtained through a series of consultations, mediations, and negotiation exercises conducted with the PAPs. If the grievance is not resolved, the case will be forwarded to Woreda GRC. The seat of the Kebele GRC is at Kebele administration. Both Woreda and Kebele GRC follows the following procedures:

- *Receipt of grievances:* anyone from the affected communities or believing they are affected by the Project can submit a grievance (written, verbal, text message, telephone, etc. as appropriate for the complainant).
- *Registering the complaint:* the focal person who received the complaint uses the GRM logbook for registering.
- *Referral and examination of complaints:* a GRC are established at each Project implementation site/ Kebele (comprising of members from representatives of implementing agencies, PAPs, elders, a representative from Woreda Women and Children Affairs office, etc.) who will examine the complaint, resolve, or refer to the appropriate body such as formal courts.
- *Notifying the complainant:* the decision/solution/action by the grievance committee are communicated to the complainant as per the stipulated timeline for feedback.
- *Closing the complaint:* where the decision/solution of the complaint is accepted by the complainant, or a complaint that is not related to the Project or any of its components, or a Complaint that is being heard by the judiciary is closed following the appropriate procedure based on the acknowledge and signed of the complainant.

**Table 2: Project FGRM Management Process**

Process	Description	Time Frame
Establishment of FGRM Committees at Kebele Level	<ul style="list-style-type: none"> <li>✓ FGRM Committee will be established at the subproject kebele level comprising of members from representatives of implementing agencies, local elders, beneficiaries, woreda/kebele representative, and Woreda Women Youth and Children Officer.</li> </ul>	Before relevant subproject implementation
Identification of Grievance	<ul style="list-style-type: none"> <li>✓ Face to face, telephone call, letter, text message, mail, e-mail; website, recorded during public/community interaction; others.</li> <li>✓ A grievance can also be passed through other parties</li> </ul>	48 hours
Grievance Assessed and Logged	<ul style="list-style-type: none"> <li>✓ Grievances assessed and recorded or logged (i.e., in a logbook).</li> <li>✓ The FGRM Committee will have a grievance record book where the grievances are recorded for follow up.</li> <li>✓ Grievances concerning GBV/SEA/SH are treated as confidential. Only the nature of the complaint and the processing outcome shall be recorded. Woreda Women, Children, and Youth Offices will be responsible for GBV/SEA/SH case management. MoF shall allocate budget to this office for capacity building and related GBV aspects.</li> </ul>	Within a week of reception
Grievance is acknowledged	<ul style="list-style-type: none"> <li>✓ Acknowledgment of grievance through appropriate medium</li> </ul>	Within 4 days
Development of response	<ul style="list-style-type: none"> <li>✓ Grievance assigned to the appropriate party to respond and resolve with input from FGRM Committee</li> </ul>	Within 10 days
Verification, investigation, action	<ul style="list-style-type: none"> <li>✓ Investigation of the complaint is led by grievance committee chairperson. A proposed resolution is formulated by committee and communicated to the complainant by focal person in written form by the GRCs.</li> </ul>	within 15 Days
Feedback/ communication of response	<ul style="list-style-type: none"> <li>✓ Redress action implemented and update of progress on resolution communicated to the complainant.</li> </ul>	Within 20 days

Monitoring and evaluation	✓ Data on complaints are collected in uptake location and reported to every concerned body including World Bank as part of the ESRM report	Based on the regular reporting period
---------------------------	--	---------------------------------------

## 6.2. World Bank Grievance Redress System

Communities and individuals who believe that they are adversely affected by a World Bank supported Project may submit complaints to existing Project-level grievance redress mechanisms or the WB’s Grievance Redress Service (GRS). The GRS ensures that complaints received are promptly reviewed to address Project-related concerns. Project-affected communities and individuals may also submit their complaint to the WB’s independent Inspection Panel<sup>1</sup>, which determines whether harm occurred or could occur, because of WB’s non-compliance with its policies and procedures. Complaints may be submitted at any time after concerns have been brought directly to the World Bank’s attention, and Bank Management has been allowed to respond. For information on how to submit complaints to the World Bank’s corporate Grievance Redress Service (GRS), please visit <http://www.worldbank.org/GRS>. For information on how to submit complaints to the World Bank’s Inspection Panel, please visit [www.inspectionpanel.org](http://www.inspectionpanel.org).

## 7. Monitoring and Reporting

### 7.1. Process of monitoring and reporting

Adequate institutional arrangements, systems, and resources are in place to monitor implementation of Project activities and the E&S risk management instruments including the SEP.

The main responsibilities for monitoring the ESRM is FPCU and FPIU. The FPCU and FPIU Project Coordinator and E&S expert are responsible for the overall implementation of the environmental and social mitigation measures, including the SEP. It is the responsibility of the FPCU and FPIU to ensure that all relevant reporting is shared with the World Bank and other Project partners. At subproject level, FPCU and FPIU are responsible for disclosing their stakeholder engagement results and relevant reporting. Quarterly reports are prepared and will be prepared by FPCU and FPIU for the implementation of the SEP both the parent and AF as part of the E&S risk management monitoring report. When the security situation on the ground allows, quarterly stakeholder meetings will be convened to discuss and review key indicators of stakeholder engagement. Stakeholders will have the opportunity to indicate whether they are satisfied or not with the Project consultation process and what needs to be changed in the SEP implementation process to make it more effective.

A Third-Party Monitor is engaged on a competitive basis to provide an independent operational review of Project implementation, as well as verification of all Project results. This includes assessing adherence at all implementation levels to the procedures set out in the Project Operations Manual (POM) and other relevant Project documents including the SEP and verifying outputs of all Project activities.

### 7.2. Reporting back to stakeholder groups

Results of stakeholder engagements are reported for the parent Project and will be regularly reported back to World Bank and the affected communities and relevant local authorities. The stakeholder engagement process aims to support the development of strong, constructive, and responsive relationships among the key stakeholders for the successful management of the environmental and social risks. Effective stakeholder engagement between the FPCU, FPIU, and Project stakeholders improves the environment and social

sustainability of Projects, enhances Project acceptance, and makes a significant contribution to successful Project design and preparation.

All stakeholder engagement meetings minutes for the parent Project are documented and will be documented for of the future activities including the AF; will be stored in the Project stakeholder engagement database. This action will ensure that (i) there are records that can be referred to and that all views raised are taken into consideration, and (ii) commitments made are delivered upon.

The SEP will be periodically revised and updated as necessary during parent Project and AF implementation. Quarterly, annual, or other report summaries and internal reports on public grievances, inquiries, and related incidents, together with the status of implementation of associated corrective/preventive actions, have been and will be collated by responsible staff and referred to the authorities responsible for the Project. The quarterly, annual, or other summaries will provide a mechanism for assessing both the number and nature of complaints and requests for information, along with the Project's ability to address those in a timely and effective manner. Information on public engagement activities undertaken by the Project during the year may be conveyed to the stakeholders in various ways. Some of the most common ways of communicating with stakeholders include email updates, monthly progress reports, focus groups, physical notice boards, presentations, and meetings with various stakeholders.