



Concept Environmental and Social Review Summary

Concept Stage

(**ESRS Concept Stage**)

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I. BASIC INFORMATION

A. Basic Operation Data

Operation ID	Product	Operation Acronym	Approval Fiscal Year
P179078	Investment Project Financing (IPF)	AFW Health Security MPA	2024
Operation Name	Health Security and Resilience in West and Central Africa		
Country/Region Code	Beneficiary country/countries (borrower, recipient)	Region	Practice Area (Lead)
Western and Central Africa	Burkina Faso, Cabo Verde, Cameroon, Cote d'Ivoire, Gambia, The, Ghana, Guinea, Guinea-Bissau, Liberia, Senegal, Sierra Leone, Togo	WESTERN AND CENTRAL AFRICA	Health, Nutrition & Population
Borrower(s)	Implementing Agency(ies)	Estimated Appraisal Date	Estimated Board Date
Republic of Cabo Verde, Republic of Liberia, Republic of Guinea	Guinea Ministry of Health, Cabo Verde Ministry of Finance, West Africa Health Organization (WAHO), Liberia Ministry of Health	09-Oct-2023	07-Dec-2023
Estimated Concept Review Date	Total Project Cost		
23-Jun-2023	168,000,000.00		

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Proposed Development Objective

Improve the capacity to prevent, detect and respond to health emergencies in West and Central Africa

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

The Program PDO will focus on Test

D. Environmental and Social Overview



D.1 Overview of Environmental and Social Project Settings

The project activities focus on capacity building, institutional and regulatory strengthening specifically for Cabo Verde, Guinea, and Liberia in this first phase of this MPA. Infrastructure is expected to be minimal and only consist of possible minor upgrades, thus, given the nature of the project there are minimal to low environmental impacts on the physical environment. This program aims to provide a platform for sustained, longer-term financing that is needed to strengthen critical health system capacities for preparedness and response to health emergencies. This will be achieved by building resilient and prepared health systems that can cope with health threats, detect swiftly, contain appropriately, and respond to minimize morbidity and mortality of Program beneficiaries. The enduring impacts of prior outbreaks in AFW demonstrate that future health emergencies risk devastating chronically strained health systems and undermining long-term gains in human capital and economic prosperity. Disruption of essential services during the COVID-19 pandemic has exacerbated existing disease burdens worldwide, disproportionately impacting vulnerable groups such as women, elderly, persons with disability, natural resource dependent communities, persons with co-morbidities, among others. According to the WHO global pulse surveys, at the end of 2021, service disruption remained at a median level of 48 percent across African countries. The Program focuses on detecting, containing and responding to health emergencies which have been contributing to fragility in the West Africa region, including Cabo Verde, Guinea and Liberia. These trends increase the exposure of the population to hazards that threaten public health within and across borders, given the strong social, cultural, economic and political ties linking the region; and strain the human, animal, and environmental health systems required to prevent, contain and respond to health emergencies. These threats are amplified amo

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

At the national level, the Program will be primarily implemented by existing project implementation units (PIUs) managed through the ministries of health (MoH). In Cabo Verde it will be implemented by the Ministry of Finance (MoF). The PIUs will be adapted to work across relevant sectors to improve efficiency and alignment in the implementation of project interventions in animal and environmental health. Given the multi-sectoral nature of the proposed activities, PIUs shall be further strengthened as needed, enabling resource sharing and more effective, efficient and timely management of implementation of project activities. A national steering committee supported by a technical committee will be established to oversee yearly planning and monitoring of the project. The technical committee will be composed of representatives from the concerned Ministerial departments involved in the project (health, agriculture/livestock, and environment). The PIUs will coordinate execution of activities by implementation partners as well as responsible for fiduciary and environmental and social risk management requirements under the ESF.

In terms of E&S experience, all three countries have projects operating under the ESF for COVID-19 emergency projects (P173812 in Liberia, P174032 in Guinea and P173857 in Cabo Verde). E&S performance of existing health projects in the countries vary, ranging from Satisfactory to Moderately Unsatisfactory. A review of their technical staffing will also be carried out during preparation and recommendations regarding how to ensure they have adequate technical support for project implementation and capacity building on the ESF, monitoring and reporting will be organized for all PIUs in the participating countries and reflected in the ESCPs. WAHO will host the regional secretariat of the project. WAHO has served as the regional PIU (RIU) for REDISSE projects I, II and III. Given the nature of the expected activities to be implemented by WAHO, it i



II. SCREENING OF POTENTIAL ENVIRONMENTAL AND SOCIAL RISKS AND IMPACTS

A. Environmental and Social Risk Classification (ESRC)

Moderate

A.1 Environmental Risk Rating

Moderate

The project activities are aimed towards the building and strengthening of capacity of health systems resilience, to prevent and ensure early detection of disease through early warning or prediction of possible outbreaks of disease and build and strengthen capacity to contain and respond. There will be minimal infrastructure built and it is envisaged that mainly small upgrades to infrastructure will be made to accommodate for various technological requirements to support the building and strengthening of capacity. The minor upgrades will mostly focus on energy-efficient upgrades, including structural improvements, roofing, electrical safety, improvements in lighting, telecommunications, plumbing and water storage as well as the inclusion of ramps to facilitate access for people who are disabled. However, it is noted that the laboratories will be supplied with reagents, chemicals and apparatus that may constitute medical waste once used. The proper storage, handling, use and disposal needs to be carefully incorporated into the design to minimize the impact on both the environment and social spheres.

A.2 Social Risk Rating

Moderate

The social risk rating is Moderate at PCN stage. The project is expected to finance technical assistance to enhance health system capacity-building, minor civil works (i.e. energy-efficient upgrades, minor refurbishments, works limited to renovations and medical equipment) and IT acquisitions. Any civil works that lead to physical and/or economic displacement will be excluded from the project. Key social risks will include the potential for elite capture or the exclusion of the disadvantaged and vulnerable to project benefits (mainly health services), as well as community and occupational health and safety risks (exposure to biological, chemical and psychological hazards in healthcare settings). Comprehensive stakeholder identification and mapping, as well as implementing inclusive and participatory engagement is required to effectively manage stakeholder relations and minimize social exclusion. However, as the project is incorporating stakeholder and citizen engagement activities, such as incorporating community level surveillance and monitoring and evaluation platforms (including on discussion about land and animal management), and is targeting vulnerable groups, including women, are expected to reduce these risks. Reputational risks could also be present under sub-components 2.1, provision of technical assistance for regional level activities which could include rolling out regulatory and programming frameworks and training materials for implementing biosafety and biosecurity initiatives at the country level, delineating roles and responsibilities at national level, and training on ensuring safe transfer of biological agents. Overall, the social risks outlined above are expected to be localized and can be managed through the implementation of prevention and mitigation measures. Moreover, national PIUs have experience with the social and environmental risk management and monitoring requi Reputational risks could also be present under sub-components 2.1, provision

B. Relevance of Standards and Policies at Concept Stage

B.1 Relevance of Environmental and Social Standards

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

Relevant

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The relevance of ESS1 to this project mainly includes any Occupational Health and Safety requirements for upgrades to any infrastructure to facilitate the building and strengthening of capacity. Given that this project mainly focuses on capacity building and without large infrastructural changes, it does reduce the possible and probable risks to the environment from the project. All laboratories that will be supported by WB financing under this Program are currently supported by COVID19 emergency projects. Their standard practices/protocols in place will be assessed as part of the ESF instruments outlined below. Each national PIU will prepare an Environmental and Social Management Framework (ESMF). The ESMFs will include screening procedures to identify whether civil works lead to physical or economic resettlement impacts and whether the health structures to be renovated could contain asbestos. Any subproject with such impacts will be automatically excluded. Moreover, the ESMFs will ou

ESS10 - Stakeholder Engagement and Information Disclosure

Relevant

Successful project implementation will require regular inputs from different stakeholder groups, including those directly and indirectly affected, as project activities engage many levels of stakeholders from regional, national, and community scales. Key stakeholders are expected to include: relevant government departments and ministries; staff from health service institutions and infectious disease surveillance laboratories; health care workers, including clinicians, pharmacists, nurses, first responders, and veterinarians; academics/universities/research centers; non-governmental organizations and civil society organizations at both the national and regional level working on One Health; and individuals seeking medical services, including potentially vulnerable individuals (i.e. IDPs, refugees, pastoralists, women/girls, persons living with HIV/AIDS, persons with disabilities, and individuals from sexual minorities). Prior to appraisal, each PIU and WAHO will prepare and disclose

ESS2 - Labor and Working Conditions

Relevant

The project includes financing for direct and contracted workers including those hired for capacity building and technical assistance, and workers for some minor refurbishments to health facilities (e.g., ensuring adequate facilities to accommodate installation of new medical and laboratory equipment, as needed). Direct workers include full and part time workers assigned to the RIU and PIUs and consultants hired based on project needs, such as PIU and WAHO staff, contracted workers, and civil servants who are subject to the employment terms in their contracts. As part of their respective ESMF, each PIU and WAHO will develop Labor Management Procedures (LMP) prior to Appraisal. The procedures will include measures to adopt a grievance mechanism (GM) for all categories of project workers and outline roles and responsibilities of contractors and PIUs in managing the requirements of ESS2, non-discrimination and equal opportunity, occupational, health and safety measures, prohibition of chi

ESS3 - Resource Efficiency and Pollution Prevention and Management

Relevant

Any of the envisaged minor refurbishments should consider ensuring that any possible waste is disposed of safely and will be included in the envisaged ESMFs to guide the preparation of ESMPs. The laboratories envisage using reagents and chemicals that need to be stored, handled, used and disposed of properly to avoid the contamination of the receiving environment and the users. The laboratories that will receive support for materials and reagents are laboratories have been previously supported by WB-financed COVID-19 response projects, and therefore are expected to have appropriate Standard Operating Procedures in place, including proper waste management. This will be confirmed during project preparation, and will be included in the ESMF and ESMPs as required. The ESMFs will include

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screening procedures to identify whether civil works lead to pollution impacts and whether the health structures to be renovated could contain asbestos. Any subproject with such impacts will be automatical

ESS4 - Community Health and Safety

Relevant

Civil works will be limited to minor upgrading and refurbishment, and as a result risks associated with labor influx due to construction, in particular including SEA/SH, are expected to be minimal. However, as the project will be engaging with a variety of stakeholders, all project workers will be required to sign and receive sensitization on Codes of Conduct and expected behaviors. Should the SEA/SH risk level be substantial or high, which will be determined during preparation, the program may require a country-specific SEA/SH Prevention and Response Action Plan. Other community health and safety risks include communities' exposure to biohazard resulting from poorly applied biomedical waste management practices or infectious control protocols. However, the laboratories that will receive support for materials and reagents are laboratories have been previously supported by WB-financed COVID-19 response projects, and therefore are expected to have appropriate Standard Operating Procedures

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

Not Currently Relevant

There are no physical works or activities planned that could lead to physical and/or economic displacement.

ESS6 - Biodiversity Conservation and Sustainable Management of Living Natural Resources

Not Currently Relevant

This standard is not relevant as there are no physical works envisaged in this project.

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

Not Currently Relevant

This standard is not relevant as there are no groups which meet the criteria of IP/SSAHUTLCs as per ESS7 in each country in this phase.

ESS8 - Cultural Heritage

Not Currently Relevant

This standard is not relevant.

ESS9 - Financial Intermediaries

Not Currently Relevant

This project does not involve the use of financial intermediaries.

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

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Use of Borrower Framework

No

The use of Borrower's Frameworks is not being considered.

Use of Common Approach

No

N/A

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 Appraisal?

- Stakeholder Engagement Plan per PIU, inclusive of a grievance mechanism and a SEA/SH grievance process
- Labor Management Procedures (for the RIU and each PIU)
- Environmental and Social Commitment Plan per country and regional institution
- ESMFs for each country (covering activities for each PIU and the RIU as applicable) that includes CERC chapter in each country ESMF,

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III. CONTACT POINT

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IV. FOR MORE INFORMATION CONTACT



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V. APPROVAL

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