



The World Bank

Zambia Health Emergency Preparedness, Response And Resilience Project Using The Multiphase Programmatic Approach (P505188)

Appraisal Environmental and Social Review Summary

Appraisal Stage

(ESRS Appraisal Stage)

Date Prepared/Updated: 04/25/2024 | Report No: ESRSA03426



The World Bank

Zambia Health Emergency Preparedness, Response And Resilience Project Using The Multiphase Programmatic Approach (P505188)

I. BASIC INFORMATION

A. Basic Operation Data

Operation ID	Product	Operation Acronym	Approval Fiscal Year
P505188	Investment Project Financing (IPF)	Zambia HEPRR	2024
Operation Name	Zambia Health Emergency Preparedness, Response and Resilience Project Using the Multiphase Programmatic Approach		
Country/Region Code	Beneficiary country/countries (borrower, recipient)	Region	Practice Area (Lead)
Zambia	Zambia	EASTERN AND SOUTHERN AFRICA	Health, Nutrition & Population
Borrower(s)	Implementing Agency(ies)	Estimated Appraisal Date	Estimated Board Date
Republic of Zambia	Ministry of Health	16-Apr-2024	14-Jun-2024
Estimated Decision Review Date	Total Project Cost		
09-Apr-2024	50,000,000.00		

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Proposed Development Objective

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

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]

A brief summary of the areas of investment relevant to Zambia and within the scope of the approved menu of activities described in the Project PAD is provided below. The Project will implement activities in targeted provinces, building on the World Bank’s earlier health sector investments. Component 1: Strengthening the Preparedness and Resilience of the



Health System to Manage Health Emergencies (US\$10 million equivalent). This component will support strengthening of the health system's preparedness and resilience to respond to health emergencies, and has two subcomponents: (i) Develop health workforce through training, regulatory and management mechanisms; and (ii) operationalize and improve interoperability of information systems for health emergencies and digitalize the health sector. Component 2: Improving the detection of and response to Health Emergencies through a multisectoral approach (US\$ 35 million equivalent). This component will support operational readiness and capacities to respond to health emergencies and has three subcomponents: (i) Strengthen emergency management structures and processes & patient-centered healthcare provision; (ii) Risk communication and citizen engagement; and (iii) Climate change adaptive emergency preparedness and response. Component 3: Project Management (US\$5 million equivalent). This component will ensure efficient and effective management and implementation of the project, including operational research in climate and health, NCDs, and other prioritized areas, M&E, partner mapping for better planning. Component 4: Contingent Emergency Response Component (CERC) (US\$0). 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]

The project will be implemented across all ten provinces of Zambia, supporting health emergency response activities. Specific project sites include small rural and remote health clinics, rural district hospitals, and major medical facilities in urban centers. The WASH infrastructure in urban health facilities are assumed to be more advanced and use centralized water supply and sanitation systems and services. In contrast, rural health facilities are likely to utilise basic sanitation and water supply infrastructure that includes pit latrines, shallow water wells and tube wells with hand pumps. The country's surface and groundwater supplies are under demand pressure due to the current drought conditions across the country and the outbreak of Cholera in some urban centres. However, the quality of ground water in Zambia is generally safe with very low concentrations of dissolved solids of less than 200 mg/l. The exception is where water sources are sourced from areas of mining. The main pollution sources in these areas are from metal mining activities, particularly in the Copper belt area with elevated concentrations of trace metals, including copper, zinc, chromium, nickel, cadmium, and arsenic and where groundwater sources are located in close proximity to residential areas and improperly constructed and maintained pit latrines and septic tanks.

Urban medical facilities are likely to be connected to the main energy grid; however, due to the country's reliance on hydropower and the current drought, there are rolling power outages for 8-12 hours per day. An extended dry spell since mid-January 2024 has impacted most of the central and southern parts of Zambia, resulting in less than normal rainfall and the destruction of 1 million hectares of maize, nearly half of the country's maize cultivation. The drought is also expected to lead to a power deficit of over 400 Megawatts and affect ground and surface water levels, with severe repercussions for sectors beyond agriculture. Additionally, Zambia has experienced a surge in cholera cases since January 2024, due to the cross-contamination of shallow wells with sanitation waste, affecting nine out of the ten provinces. Moreover, the country's Human Development Index (HDI) value decreased by 1.8 percent between 2019 and 2021, largely attributable to disparities in health, education, and income.



Furthermore, Zambia faces challenges in managing e-waste, which is often refurbished, cannibalized, dumped in open landfills or incinerated in the open air. Although there are plans to address this issue through e-waste regulations, the necessary funding, expertise, management, and facilities are still yet to be developed. It is treated as hazardous waste and there are very few facilities that are able to process it safely and in an environmental sound manner. There are Government initiatives to develop e-waste legislation but are not likely to effective over the lifetime of this project.

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 MoH has recently implemented several Bank funded projects under safeguards and the ESF. Projects in Zambia include P174185 Covid-19, P167916 Africa CDC, P155658 Southern Africa Tuberculosis Project and P176300 Eastern and Southern Africa: Strengthening Pandemic Preparedness in the Eastern, Central and Southern Africa Health Community Project. The performance of the MoH PIU E&S specialists to implement safeguards and ESS mitigation measures have varied but progressively improved over the course of the project’s lifecycles from non subproject screening and non development of any E&S instruments instruments (P155658) to closely following the requirements of the ESMF and delivering an acceptable quality of E&S instruments (P174185). On P155658 SATBHSS project building and fire codes were included in the ESMPs but did not materialise in the final building design leading to costly physical changes to the near built structure to accommodate agreed fire codes. Both P155658 and P174185 E&S performance were downgraded to MU but under close support from the Bank are now MS. ESF capacity building continues to be developed within the MoF by staff attending several face to face and online ESF training over the past four years and MoH leadership have assigned a staff member to this project with knowledge of World Bank projects under ESF. Since, this project is spread across all ten provinces, the design of the implementation arrangements needs to be robust to enable timely screening of subproject sites, development of ESMPs and oversight or supervision of contractors.

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

A. Environmental and Social Risk Classification (ESRC) Moderate

A.1 Environmental 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 environmental risk rating is Moderate. The main key factors contributing to this risk rating are generated from Component 1 and 2 and are (i) the purchase and disposal of electronic equipment to support capacity building and development of communications platforms, e-learning modules, community information systems etc, Photovoltaics (PVs) and associated equipment to power cold storage and groundwater pumps; (ii) the rehabilitation , construction and operation of WASH facilities that may include the construction of water tank stands, installation of water tanks, water distribution systems, construction or rehabilitation of single story sanitation facilities, an appropriate type of



sanitation systems ((Ventilated Improved Pit (VIP) pit latrines, flush systems etc) according to the remoteness of locations, water quality testing and treatment etc; (iii) the possible discovery of roof sheets containing asbestos fibres (ACMs). The project footprint will likely be confined to the existing Ministry of Health occupied land and will not likely encroach on surrounding land or environmental sensitive areas or any areas designated as national parks etc. However, sustainable and safe sources of groundwater in rural areas may not be available within the MoH footprint and may require access to private or community land for the installation of water distribution infrastructure. The Environmental and OHS risks and impacts under both components are predictable, reversible and have a low probability of adverse or serious impacts to human health or the environment. There will be no toxic or harmful substances used and simple management plans guided by a project ESMF are expected for risk mitigation. Environmental risks and impacts from the project include; (i) the generation and inappropriate disposal of e-waste over a longer term period (including solar equipment); (ii) unregulated extraction of raw materials for construction; (iii) minor amounts of construction waste from rehabilitation and construction of WASH related facilities; (iv) the inappropriate siting of boreholes and pit latrines resulting in water resource cross contamination with fecal matter; (v) unsustainable use of water resources in rural areas, inappropriate and unsustainable facilities for the urban and rural context (VIP v flush systems etc) and the inappropriate use of water resources based on its chemical, physical and biological qualities; (vi) discovery of roofing sheets containing asbestos fibres and; (vii) inadequate construction of water tank stands leading to subsidence and tank collapse.

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 social risk is moderate. Although the project will be implemented nationwide, there are no conflict-affected areas that might impact the project's implementation. The proposed construction of new installations and rehabilitation of water and sanitation (WASH) facilities within existing health facilities will not result in land acquisition or resettlement impacts. Key potential social risks include: (i) the risk of exclusion or discrimination against women, youth, people living with disabilities, and remotely located communities in accessing healthcare services and in participating in risk communication and community engagement activities; (ii) labor and working conditions risks due to non-compliance with national legislation on working hours, wages, overtime, compensation, or benefits, and the absence of a grievance settlement mechanism for workers; (iii) SEA/SH among project workers, stakeholders, and/or local communities; (iv) community health and safety risks involving the transmission of communicable diseases, including HIV/AIDS and COVID-19, due to interactions among project workers and between the project workforce and local communities, including community-based volunteers and community health assistants, as well as the inappropriate disposal of healthcare waste related to project activities; (v) challenges in organizing or obtaining access to grievance redress and referral processes for project beneficiaries, workers, and other stakeholders; and (vi) potential risks of exposure of patient-level data to unauthorized individuals, particularly as part of activities focusing on digitizing the health sector.

[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 is rated as moderate, considering that the risks and impacts associated with the project components are predictable, reversible, and have a low probability of causing adverse or serious impacts on local communities, the environment, or human health. The project footprint will likely be confined to the existing Ministry of Health-occupied land and will not likely result in land acquisition or resettlement impacts or encroach on surrounding land or environmentally sensitive areas or any areas designated as protected areas or national parks, etc. Although the project will be implemented nationwide, there are no conflict-affected areas that might impact its implementation. Environmental risks and impacts from the project include; (i) the generation and inappropriate disposal of e-waste over a longer term period (including solar equipment); (ii) unregulated extraction of raw materials for construction; (iii) minor amounts of construction waste from rehabilitation and construction of WASH related facilities; (iv) the inappropriate siting of boreholes and pit latrines resulting in water resource cross-contamination with fecal matter; (v) unsustainable use of water resources in rural areas, inappropriate and unsustainable facilities for the urban and rural context (VIP v flush systems, etc.) and the inappropriate use of water resources based on its chemical, physical and biological qualities; (vi) discovery of roofing sheets containing asbestos fibres, and; (vii) inadequate construction of water tank stands leading to subsidence and tank collapse. The potential social risks include: (i) the risk of exclusion or discrimination against women, youth, people living with disabilities, and remotely located communities in accessing healthcare services and in participating in risk communication and community engagement activities; (ii) labor and working conditions risks due to non-compliance with national legislation on working hours, wages, overtime, compensation, or benefits, and the absence of a grievance settlement mechanism for workers; (iii) sexual exploitation, abuse, and harassment (SEA/SH) among project workers, stakeholders, and/or local communities; (iv) community health and safety risks involving the transmission of communicable diseases, including HIV/AIDS and COVID-19, due to interactions among project workers and between the project workforce and local communities, including community-based volunteers and community health assistants, as well as the inappropriate disposal of healthcare waste related to project activities; (v) challenges in organizing or obtaining access to grievance redress and referral processes for project beneficiaries, workers, and other stakeholders; and (vi) potential risks of exposure of patient-level data to unauthorized individuals, particularly as part of activities focusing on digitizing the health sector. To mitigate and manage the project E&S risks, the Client will develop an Environmental and Social Management Framework (ESMF) in accordance with national laws and the World Bank's Environmental and Social Framework (ESF). This framework will include procedures for the systematic identification, screening, preparation of instruments, management, and monitoring of environmental and social risks and impacts. The project's ESMF will outline the required national, GIIP, and other best practices to manage these risks, and specific ESMPs and CESMPs will be developed for individual sites or areas. It will also detail the key environmental and social impacts of project activities, provide indicative plans for environmental and social management and monitoring, and incorporate an outline for a construction Waste Management Plan, a water management plan, an asbestos management plan, agreed and suitable construction codes, an e-waste management plan, suitable VIP and water distribution system designs, Labor Management Procedures (LMP), an SEA/SH action plan, an occupational health and safety plan, and an accountability and response framework. In addition, the ESMF/ESMP will detail maintenance and closure requirements of pit latrines and other sanitation equipment or

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facilities depending on the rural or urban setting. These environmental and social risks will also be addressed in other ESF instruments to be developed by the Borrower, such as the Environmental and Social Commitment Plan (ESCP), which will encompass all necessary environmental and social actions and commitments between the Borrower and the Bank to ensure that environmental and social impacts are managed in accordance with the Bank's ESF. The Stakeholder Engagement Plan (SEP) will guide structured stakeholder interactions through meaningful consultations and information sharing and includes a Grievance Redress Mechanism (GRM) to receive and address project-related complaints and grievances from project-affected people and groups. The World Bank team will provide support to the Borrower to enhance its capacity to manage environmental and social risks and impacts.

ESS10 - Stakeholder Engagement and Information Disclosure

Relevant

[Explanation - Max. character limit 10,000]

The project stakeholders are diverse and include the Ministry of Health, central government, other government ministries and departments, healthcare workers, health training institutions, the private sector, patients, and the general public living around the project areas. Stakeholders also comprise cooperating partners, the media, civil society, NGOs, and academic and research organizations. A draft Stakeholder Engagement Plan (SEP) was prepared during the early stages of project preparation. Consultations and engagement with stakeholders in the project's preparation phase included meetings organized in Lusaka. These meetings involved the Ministry of Health (MOH), the Zambia National Public Health Institute (ZNPHI), Smart Zambia, the Ministry of Local Government and Housing (MLGH), the Ministry of Finance and National Planning (MOFNP), and the World Bank. They took place from February 5 to March 27, 2024, to discuss project design and establish the project management team. Additionally, one virtual meeting was conducted with all provincial health office staff to share essential information about the project, including aspects related to community health and primary health care. The outcomes of the consultations are summarized in the SEP. Further stakeholder consultation will be conducted throughout the project's preparation and implementation. The SEP includes a GRM to receive and address complaints and grievances related to the project from affected people, groups, and stakeholders. The GRM builds upon the existing mechanisms established under other Bank-funded projects under the MOH, such as the Zambia COVID-19 Emergency Response and Health Systems Preparedness Project and the Southern Africa Tuberculosis and Health Systems Support Project. Additionally, it provides safe, confidential, and non-stigmatizing channels for filing SEA/SH cases, as well as a referral pathway for such cases. Project documents, including environmental and social risk management instruments including the EMSF and the ESCP, will be disclosed in a timely manner to ensure meaningful and informed engagement with all project stakeholders. The draft SEP shall be disclosed prior to Appraisal and finalized at the latest by project Negotiations.

ESS2 - Labor and Working Conditions

Relevant

[Explanation - Max. character limit 10,000]

Project workers are expected to fall into four categories: (i) Direct workers, including those employed or engaged directly by the Borrower, such as PIU staff, project implementing agencies, and consultants; (ii) Government workers, comprising civil servants from various ministries and government agencies involved in the project, like healthcare workers employed by the Ministry of Health; (iii) Contracted workers, such as individuals employed or engaged by contractors for the construction of new installations and rehabilitation of water and sanitation (WASH) facilities; and (iv) Community workers, including community-based volunteers and community health assistants involved in

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community-level project activities. Key labor risks involve non-compliance with national legislation and the requirements of ESS2 regarding working hours, wages, overtime, compensation, and benefits. To manage labor risks, the Borrower will develop Labor Management Procedures (LMP) as part of the Environmental and Social Management Framework (ESMF). The LMP will outline requirements related to working conditions, management of work relationships, occupational health and safety (including an assessment of likely subproject OHS risks), code of conduct (including relating to SEA/SH), age of employment, non-discrimination in hiring with a focus on women’s employment and provision of safe working conditions, grievance redress arrangements for employees, and contractor management. These will be based on the provisions of ESS2 and the Environmental, Social, and Health Guidelines (ESHG) while considering national laws and regulations. Civil servants, whether full-time or part-time, will remain subject to the terms and conditions of their existing public sector employment agreement or arrangement. ESS2 will not apply to such government civil servants, except for the provisions of paragraphs 17 to 20 of ESS2 in the Environmental and Social Framework (Protecting the Work Force) and paragraphs 24 to 30 (Occupational Health and Safety), which are under the requirements for workers' safety as outlined in ESS2. An appropriate level of OHS will be planned into project activities due to construction hazards, including working at height, slips, trips, and falls, use of hazardous materials, excavations, etc. Mitigation measures will include an activity specific OHS risk assessment or a simple OHS plan to mitigate OHS hazards.

ESS3 - Resource Efficiency and Pollution Prevention and Management

Relevant

[Explanation - Max. character limit 10,000]

The project activities do not require the use or storage of toxic or harmful substances and are not likely to emit air pollutants. The project will extract, store, distribute, and consume groundwater or water supplied by commercial utilities and build or rehabilitate WASH facilities including flush systems in urban centres and/or Ventilated Improved Pits (VIPs) pit latrines in rural areas. The project will supplement urban and rural health facilities with Photo Voltaics (PVs) and associated equipment to power groundwater pumps and essential cold storage equipment. E-waste may be generated at the end of the life of PVs and equipment used to support capacity building and development of communications platforms, e-learning modules, community information systems, etc. The construction or rehabilitation of WASH facilities will require construction materials, and generate small quantities of construction waste and rehabilitation activities may require the dismantling of roof structures containing asbestos fibres. All new potential water sources used to supply project facilities are required to obtain legal permits, and permissions and undergo water quality testing. Sources used for drinking water at health facilities must comply with the Zambian Standards for Potable Water issued by the Zambia Bureau of Standards (ZABS). Water assessed to fall below the drinking water standards and will require substantial unsustainable (financial, technology, etc.) treatment could still be used for non-potable purposes, e.g., sanitation. The borehole at each site should undergo a sustainable yield test to determine long-term suitability and a sustainable supply coupled with a water management plan to manage demand and monitor water quality (chemical, physical, and biological parameters). Water storage tank stands should be properly designed and quality assured and foundations properly prepared and constructed to avoid subsidence and collapse. The project intends to construct or rehabilitate sanitation facilities at potential subproject locations. Where pit latrines are constructed, the poor construction, siting, and maintenance could lead to the risk of groundwater contamination especially where shallow wells are located in close proximity (in some cases less than 10m) to unlined pits and poorly constructed septic tanks. In urban areas, maintenance of sanitation facilities is challenging due to blocked pipes and infrequent emptying of septic tanks (reduces the capacity and treatment

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efficiency). Full latrine pits are typically covered and new pits are dug to replace them. Topography coupled with hydrogeological characteristics could lead to flooding which results in wastewater overflows from sanitation facilities during the rainy season that presents public health issues. Sanitation facilities developed or rehabilitated under the project need to be appropriate for the location (VIP v flush systems), sited correctly at a suitable distance and hydrogeological downstream from shallow wells, correctly constructed (VIP), and the ESMF/ESMP to detail maintenance and closure requirements of pit latrines and other sanitation equipment. The management of end-of-life electronic equipment, PVs, and associated equipment are inadequately managed in Zambia. It is treated as hazardous waste and there are very few facilities that are able to process it safely and in an environmentally sound manner. Some e-waste is incinerated in the open air, refurbished, reused, or cannibalised to maintain other equipment. There are Government initiatives to develop e-waste legislation but are not likely to be effective over the lifetime of this project. The Environmental Management (Licencing) Regulations (SI. No 112 of 2013) implements the Environmental Management Act 2011 and concerns a wide variety of matters including hazardous waste. E-waste belongs to the fifth schedule, regulation 18 (1), list of hazardous wastes, 'Waste electronic or electronic assemblies....' Any contractor that is contracted to treat, handle, transport, store, dispose of, transit, trade-in shall hold a ZEMA hazardous waste licence. If project related e-waste ends up in a dump site then the dump sites must be managed in accordance with the guidelines prescribed in the regulation's ninth schedule and in accordance with section 24. (2) requirements of an operator at a landfill/hazardous waste disposal site. There will be no transboundary movement of project-related hazardous waste. An e-waste management plan will be required to provide effective management of any e-waste generated during the project and will include upstream preventative measures such as buy-back schemes, guarantees, maintenance schedules, etc. If during refurbishment activities, roof sheeting containing asbestos fibres is identified (through local knowledge and identification or lab testing) then an asbestos management plan will be required to safely remove (if required), store, and dispose of the material. An outline Asbestos Management Plan (AMP) will be included in the ESMF and will follow national laws supplemented with the requirements of the ESHGs and ESS 3. The availability of construction materials in rural areas is challenging due to a lack of legally developed sources.. The project is not expected to require substantial quantities of materials and the ESMP/CESMP for a particular subproject site will detail the legal sources of materials. Construction or rehabilitation activities will follow an agreed building code that will be stated in the subproject's ESMP.

ESS4 - Community Health and Safety

Relevant

[Explanation - Max. character limit 10,000]

The potential adverse impacts on the community may arise from: (i) the mismanagement of sanitation waste, which could contaminate water resources and wells, increasing the risk of spreading infectious diseases such as cholera; (ii) the improper disposal of e-waste, which could lead to open incineration, localized air pollution, and (iii) an increased risk of sexual exploitation, abuse, and harassment (SEA/SH) among project workers, local communities, and stakeholders, including community-based volunteers and community health assistants. Site-specific or area-grouped Environmental and Social Management Plans (ESMPs) will be developed in accordance with national laws, Good International Industry Practice (GIIP), and other best practices. Project activities will be conducted under an Occupational Health and Safety Plan (annexed to the ESMP) to prevent community incidents and accidents. Additionally, an SEA/SH Action Plan will also be prepared as part of the ESMF. Although the project will be implemented nationwide, there are no conflict-affected areas that might impact its implementation.



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

Not Currently Relevant

[Explanation - Max. character limit 10,000]

The proposed construction of new installations and rehabilitation of water and sanitation (WASH) facilities will be carried out within existing health facilities owned by the government, which are free of any encumbrances. Therefore, project activities do not involve land acquisition, land use restrictions, or involuntary resettlement.

ESS6 - Biodiversity Conservation and Sustainable Management of Living Natural Resources

Not Currently Relevant

[Explanation - Max. character limit 10,000]

ESS 6 is not relevant because the project activities will be confined to the footprint of existing Ministry of Health facilities and are not likely to encroach on environmental sensitive areas or areas of biodiversity.

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

Not Currently Relevant

[Explanation - Max. character limit 10,000]

ESS 7 is not relevant because there are no indigenous peoples or Sub-Saharan African Historically Underserved Traditional Local Communities in Zambia.

ESS8 - Cultural Heritage

Relevant

[Explanation - Max. character limit 10,000]

ESS 8 is relevant because the project may involve excavating foundations for WASH facilities in the grounds of MoH locations. The project’s ESMF will require all subproject ESMPs to include a chance find procedure.

ESS9 - Financial Intermediaries

Not Currently Relevant

[Explanation - Max. character limit 10,000]

N/A

B.2 Legal Operational Policies that Apply

OP 7.50 Operations on International Waterways

No

OP 7.60 Operations in Disputed Areas

No

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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]

N/A

Use of Common Approach

No

[Explanation including list of possible financing partners – Max. character limit 4,000]

N/A

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 and occupational health and safety (OHS) risk rating is Moderate. The identified risks and impacts are predictable and reversible, with a low likelihood of causing serious impacts on human health or the environment. The project footprint will be confined to the existing Ministry of Health-occupied land, thereby avoiding encroachment on environmentally sensitive areas, such as national parks and critical habitats. No conflict-affected areas are anticipated to impact project implementation. The project will involve the constructing small single-story water, sanitation, hygiene (WASH)-related infrastructure, as well as water distribution and storage and appropriately scaled and functional sanitation facilities. Key potential environmental risks include: (i) generation and purchase, use, and inappropriate disposal of e-waste over a longer term period (including solar equipment); (ii) unregulated extraction of raw materials for construction; (iii) generation of minor amount of construction waste from rehabilitation and construction of WASH facilities; (iv) the inappropriate siting of boreholes and pit latrines resulting in water resource cross contamination with fecal matter; (v) unsustainable use of water resources in rural areas, inappropriate and unsustainable facilities for the urban and rural context (VIP v flush systems, etc.) and the inappropriate use of water resources based on its chemical, physical and biological quantities; (vi) potential risks associated with the discovery of roof sheets containing asbestos fibres; (vii) inadequate construction of water tank stands leading to subsidence and the water tank collapse; and (viii) occupational health and safety risks primarily related to construction activities..

The social risk is moderate. Although the project will be implemented nationwide, there are no conflict-affected areas that might impact the project's implementation. The proposed construction of new installations and rehabilitation of water and sanitation (WASH) facilities within existing health facilities will not result in land acquisition or resettlement impacts. Key potential social risks include: (i) the risk of exclusion or discrimination against women, youth, people living with disabilities, and remotely located communities in accessing healthcare services and in participating in risk communication and community engagement activities; (ii) labor and working conditions risks due to non-compliance with national legislation on working hours, wages, overtime, compensation, or benefits, and the absence of a grievance settlement mechanism for workers; (iii) sexual exploitation, abuse, and harassment (SEA/SH) among project workers, stakeholders, and/or local communities; (iv) community health and safety risks involving the transmission of communicable diseases, including HIV/AIDS and COVID-19, due to interactions among project workers and between the project workforce and local communities, including community-based volunteers and community health assistants, as

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well as the inappropriate disposal of healthcare waste related to project activities; (v) challenges in organizing or obtaining access to grievance redress and referral processes for project beneficiaries, workers, and other stakeholders; and (vi) potential risks of exposure of patient-level data to unauthorized individuals, particularly as part of activities focusing on digitizing the health sector.

To mitigate these environmental and social (E&S) risks, the Borrower will develop an Environmental and Social Management Framework (ESMF) that aligns with national laws and the World Bank's Environmental and Social Framework (ESF). This ESMF will set out the national standards, Good International Industry Practice (GIIP), and other best practices for managing E&S risks. Site- or area-specific Environmental and Social Management Plans (ESMPs) will be integrated into bidding documents. Contractors will be required to submit Contractor's Environmental and Social Management Plans (CESMPs) or detail mitigation measures in contracts to manage E&S risks during project activities. These measures will encompass E&S plans, including an E-Waste Management Plan, a Waste Management Plan, a Water Management Plan, an Asbestos Management Plan, a SEA/SH Action Plan, Labor Management Procedures (LMP), and an Occupational Health and Safety Plan. They will also cover the management and sourcing of construction materials and waste, ensuring climate-resilient infrastructure that adheres to approved construction standards, and selecting appropriate WASH facilities for each location to guarantee sustainability and effective management. Additionally, the plans and measures aim to prevent diseases, avoid incidents and accidents on-site and the roads, and establish an accountability and response framework. Furthermore, the Borrower will develop the Environmental and Social Commitment Plan (ESCP) that consolidates all commitments necessary to manage environmental and social impacts in compliance with the Bank's ESF. The Stakeholder Engagement Plan (SEP) will facilitate structured stakeholder interactions through meaningful consultations and information sharing, and includes a Grievance Redress Mechanism (GRM) to address project-related complaints and grievances from those affected by the project. The World Bank team will support the Borrower in enhancing its capacity to manage environmental and social risks and impacts.

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

The required actions to manage the environmental and social risks of the Project include; (i) draft an ESCP for appraisal and, thereafter amend during appraisal and negotiations; (ii) draft a SEP before appraisal; (iii) draft and clear an ESMF TOR by negotiations with the delivery of the ESMF by first disbursement; (ii) conduct E&S screening of all subprojects sites and develop appropriate E&S instruments to manage E&S risks and impacts during subproject implementation; (iii) the development of suitable and sufficient OHS risks and OHS plans and Contractor' ESMPs (CESMPs) during the implementation of subprojects.



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Zambia Health Emergency Preparedness, Response And Resilience Project Using The Multiphase Programmatic Approach (P505188)

III. CONTACT POINT

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IV. FOR MORE INFORMATION CONTACT

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