



# Concept Environmental and Social Review Summary

## Concept Stage

### ( **ESRS Concept Stage** )

Date Prepared/Updated: 02/28/2024 | Report No: ESRSC04137



I. BASIC INFORMATION

A. Basic Operation Data

Operation ID	Product	Operation Acronym	Approval Fiscal Year
P504532	Investment Project Financing (IPF)	DRC - HEPRR	2024
Operation Name	Democratic Republic of Congo Health Emergency Preparedness, Response, and Resilience Project		
Country/Region Code	Beneficiary country/countries (borrower, recipient)	Region	Practice Area (Lead)
Congo, Democratic Republic of	Congo, Democratic Republic of	EASTERN AND SOUTHERN AFRICA	Health, Nutrition & Population
Borrower(s)	Implementing Agency(ies)	Estimated Appraisal Date	Estimated Board Date
DRC	Ministry of Public Health, Hygiene and Prevention	27-Feb-2024	29-Mar-2024
Estimated Concept Review Date	Total Project Cost		
19-Feb-2024	250,000,000.00		

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Proposed Development Objective

The Development Objective (DO) is to strengthen health system resilience and multisectoral preparedness and response to health emergencies in Eastern and Southern 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

[Description imported from the Concept 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 DRC and within the scope of the approved menu of activities described in the Program 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 Regional and National Health Systems to Manage Health Emergencies (US\$51.19 million equivalent). This component



will support the strengthening of essential institutions and activities that directly contribute to the resilience of the health systems to cope with Health Emergencies and complement other health systems strengthening (HSS) activities conducted by other World Bank and partner investments. The component has four sub-components: (i) Multisectoral and cross-border planning, financing, and governance for improved resilience to Health Emergencies; (ii) Health workforce development; (iii) Access to quality health commodities; and (iv) Information systems for HEs and the digitalization of the health sector. Component 2: Improving the detection of and response to Health Emergencies through a multisectoral approach (US\$ 173.12 million). This component will finance expenditures related to strengthening operational readiness and capacities across the critical subsystems to respond to Health Emergencies. This will have three subcomponents: (i) Collaborative multisectoral surveillance and laboratory diagnostics with a focus on completeness, accuracy and gender disaggregation; (ii) Emergency management, coordination, and essential service continuity including for RMNCAH services; (iii) Risk Communication and Community Engagement (RCCE), empowerment, and social protection during Health Emergencies; (iv) Performance-Based Financing (PBF) for Free Access to Maternity and Newborn care during deliveries; and (v) Climate change adaptiveness, emergency preparedness and response. Component 3: Program Management (US\$ 25.68 million equivalent). The component will finance expenditures related to Monitoring and Evaluation, the program learning agenda including building a body of evidence on gender in Prevention, Preparedness, and Response (PPR) and program implementation and coordination. 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 2,000]*

DRC is the second largest country in Sub-Saharan Africa, with a territory of close to 2.3 million square kilometers. It shares about 9,000 km of borders with nine countries and has a population of approximately 100 million people. The population is young - about 43 percent is less than 15-years of age. Armed conflict, continued insecurity, poor service delivery and limited access to services have led to persistently high poverty and weakened economic development. DRC remains highly vulnerable to the impacts of climate change, particularly flooding, as the majority of its territory is located within the Congo River basin. Over the last 30 years, DRC has experienced an increased frequency of extreme weather events, such as intense rainfall and flooding. These events have disproportionately impacted the most vulnerable, increasing their risk of food insecurity, poverty, health risks, and displacement. These climate-induced shocks also negatively impact service delivery, increasing the burden of climate-sensitive diseases; and exacerbating the impacts of other shocks such as ongoing conflict. Additionally, extreme heat increases the temperature in health facilities and affects patients traveling to facilities and health workers providing outreach services. This project will be implemented in 8 provinces including Equateur, Ituri, Kasai Central, Kasai Oriental, Kwilu, Nord Kivu, Tshopo and Tshuapa. Indigenous peoples are present in some of the project's provinces, notably Nord-Kivu, Kasai-Central, Kasai-Oriental and Tshuapa. In addition to this, there are internally displaced people and refugees in North Kivu and internally displaced people in Kwilu due to the presence of criminals called MOBONDO in this area.



Project activities could entail E&S risks and impact that include waste management and disposal, pollution of soil and water resources, the workforce and working conditions, the possible exclusion of members of vulnerable groups, security, GBV, etc,

**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 2,000]*

The project will be managed by the PIU in charge of implementation of all Bank-financed health projects in DRC such as the REDISSE IV (P167817), DRC COVID-19 Strategic Preparedness and Response Project (SPRP) (P173825), Health System Strengthening for Better Maternal and Child Health Results Project (PDSS) (P147555) and the Multi-sectoral Nutrition and Health Project (PMNS) (P168756), under the auspices of the Secretary General for Health. Given that the project will be a natural continuation of the REDISSE IV project, the PIU team in charge of REDISSE IV project will manage the proposed project as well. With qualified E&S staff that include an environmental specialist, a social development specialist and a GBV specialist, this PIU has gained experience in developing and managing and implementing environmental and social instruments, as well as the World Bank's environmental and social framework. However, a capacity-building plan will be drawn up by the PIU's E&S specialists to strengthen the capacity of the new stakeholders involved in this project in managing E&S risks and impacts of project.

The Ministry of Environment and Sustainable Development (MEDD) governs environmental policies and their compliance. MEDD’s technical agency in charge of environmental and social monitoring and management is the Congolese Environment Agency (ACE or Agence Congolaise de l’Environnement). In accordance with Law No. 11/009 of July 9, 2011 on fundamental principles relating to the protection of the environment and Decree No. 14/030 of November 18, 2014 establishing the statutes of the Congolese Environment Agency, its purpose is the evaluation and approval of all environmental and social studies as well as the monitoring of their implementation. Through other World Bank projects, ACE has already benefited from capacity building.

**II. SCREENING OF POTENTIAL ENVIRONMENTAL AND SOCIAL 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 2,000]*

The environmental risk is rated Moderate. Project activities can have adverse environmental, health and safety (EHS) risks if there are no appropriate systems for management of risks associated with renovation, rehabilitation, equipment installation, and operation of the health care and pharmaceutical manufacturing facilities. The renovation, rehabilitation, and installation activities are expected to have limited footprint on the environment. The potential environmental risks relate to the operations phase given the regulatory and institutional capacity concerns and risks related to potential HCF onsite existing environmental liabilities (e.g. waste management, soil/ground water contamination, asbestos, lead based paint, PCB containing equipment). During construction and/or rehabilitation of

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health care and pharmaceutical facilities, laboratories and installation of equipment, the main risks and impacts include (i) impact on air quality due to dust and other emissions from renovation, rehabilitation, and installation activities, (ii) impact due to noise and vibration generated from renovation, rehabilitation, and installation activities, (iii) impacts due to construction waste including solid, wastewater, and hazardous waste, (iv) impact on soil quality including soil compaction, aggravated erosion, and contamination, (v) impact on water resources due to sedimentation and contamination from construction waste, spill of hazardous chemicals, and wastewater, (vi) occupational health and safety risks due to physical, chemical, and biological hazards arising from renovation, rehabilitation, and installation activities, and (vii) risks associated with inefficient utilization of resources (construction materials, water, and energy).

**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 2,000]*

The Social Risk is rated moderate. The project activities will be implemented on a scale of 8 provinces out of the 26 existing in the Democratic Republic of Congo. Of the 8 provinces, we have 7 former provinces (Nord-Kivu, Equateur, Kasai- Central, Kasai, Tshuapa, Tshopo and Kwango) covered by the REDISSE IV project with almost the same activities and one new additional province, ITURI. The project's activities are beneficial to communities and could bring positive results to the countries concerned, notably the DRC. However, potential social risks that could have a negative impact on the project concern: i) the workforce and working conditions, ii) the possible exclusion of members of vulnerable groups, iii) security, iv) gender-based violence, and v) community health and safety. Main risks include: Labor and working conditions, Possible exclusion of members of vulnerable groups, Security, GBV, and community health and safety

*[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 2,000]*

**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

*[Optional Explanation - Max. character limit 1,000]*

As noted in Section A, the project activities expect to have both direct and indirect environmental and social risks and impacts during construction and operation phases. The main EHS risks and impacts during renovation and rehabilitation of health care, laboratories and pharmaceutical facilities, WASH and installation of equipment include (i) impact on air quality due to dust and other emissions from renovation, rehabilitation, and installation activities, (ii) impact due to noise and vibration generated from renovation, rehabilitation, and installation activities, (iii) impacts due to construction waste including solid, wastewater, and hazardous waste, (iv) impact on soil quality including soil compaction, aggravated erosion, and contamination, (v) impact on water resources due to sedimentation and contamination from construction waste, spill of hazardous chemicals, and wastewater, (vi) occupational health and safety risks

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**ESS10 - Stakeholder Engagement and Information Disclosure**

Relevant

*[Optional Explanation - Max. character limit 1,000]*

Stakeholder engagement is a critical tool for social and environmental risk management, project sustainability and success. In consultation with the Bank the client has prepared and will implement an inclusive Stakeholder Engagement Plan (SEP) proportional to the nature and scale of the project and associated risks and impacts. The DRC HEPRR MPA phase 2 activities will be implemented in a scale of 8 provinces out of the 26 existing in the Democratic Republic of Congo. Of the 8 provinces, we have 7 former provinces (Nord-Kivu, Equateur, Kasai- Central, Kasai, Tshuapa, Tshopo and Kwango) covered by the REDISSE IV project with almost the same activities and one new additional province, ITURI. As part of the MPA/HEPR program, public consultations were held in the provincial city of Kinshasa (February 14 and 15, 2024) to ensure the participation of the population in the project's action planning process.

**ESS2 - Labor and Working Conditions**

Relevant

*[Optional Explanation - Max. character limit 1,000]*

This standard is relevant. The project will employ i) direct workers including grant coordinators and project management, Environmental, Social and GBV specialists, health workers and community health workers . ii) contract workers that will be recruited by the PIU for the key implementation activities of the Project including consultants engaged in technical assistance, iii) primary supply workers such as those provide vaccines/pharmaceuticals, lab and other equipment and operate trucks and vehicles, and (iv) community health workers. This LMP will be prepared and adopted no later than 60 days after the Effective Date and then implement the LMP throughout the duration of the Project. In addition, the Grievance Mechanism (GM) for workers will be operationalized prior to engaging Project workers and thereafter maintain and operate it throughout project implementation.

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

Relevant

*[Optional Explanation - Max. character limit 1,000]*

ESS3 is relevant as pollution prevention and management measures are necessary to manage hazardous and non-hazardous wastes which could be generated because of the project activities. Environmental concerns associated with vaccine infrastructure and HCF include biohazard waste management, Bio safety risks, emissions to air and wastewater discharges. Similarly, potential environmental concerns associated with pharmaceuticals manufacturing projects include air emissions, wastewater solid and hazardous wastes, and hazardous materials. As mentioned above in section A, the project activities could lead to an increase in the generation of wastes such as infectious wastes; air emissions from exhaust air from heating, ventilation, and air conditioning (HVAC) systems; pharmaceutical wastes; chemical wastes; general healthcare waste such as food waste and paper, plastics, cardboard); wastewater; and air emission. There are risks related to poor management of chemicals and hazardous materials.

**ESS4 - Community Health and Safety**

Relevant

*[Optional Explanation - Max. character limit 1,000]*

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ESS4 is relevant. The main program activities likely to generate potential community risks are as follows:

(i) Infrastructure construction work, in particular the rehabilitation/construction of laboratories and water, hygiene and sanitation facilities. (ii) Strategic purchasing activities and (iii) Targeting beneficiaries. Community hazards include potential infection hazards within facilities and at waste disposal sites, hazards arising from the safety of project infrastructure and equipment, safety of service provided, traffic and road safety, community exposure to communicable diseases, and risks emanating from management and safety of hazardous materials. Ethical issues faced by the pharmaceutical manufacturing are potentially complex and depend significantly on the activity of the company.

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

Not Currently Relevant

*[Optional Explanation - Max. character limit 1,000]*

No physical or economic resettlement is expected

**ESS6 - Biodiversity Conservation and Sustainable Management of Living Natural Resources**

Not Currently Relevant

*[Optional Explanation - Max. character limit 1,000]*

Not Applicable to project activities

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

Relevant

*[Optional Explanation - Max. character limit 1,000]*

This standard is relevant. Taking into account the experience of past projects in the same areas as the current project, the presence of indigenous peoples is effective in the project area, particularly in the province of Equateur, North Kivu, Kasai- Central, Kasai- Oriental, Tshuapa, it is likely that the project will also affect people meeting the criteria of ESS7. Risks include unequal access to project benefits due to seasonal movements of IPs, such as hunting, gathering or fishing, low level of education, etc. The lack of appropriate infrastructure in IPs' settlements is a further risk that needs to be taken into account, and the low average income that does not allow IPs to access appropriate health care. Gaps may occur in identifying culturally appropriate and linguistically accessible risk communication and community engagement activities such as development of health messages.

**ESS8 - Cultural Heritage**

Relevant

*[Optional Explanation - Max. character limit 1,000]*

This standard is relevant and the possibility of finding of artifacts during the construction/rehabilitation of Laboratories may exist. So, it is possible to have impacts on an tangible or intangible cultural heritage such as objects, sites, structures, groups of structures, cultural practices, and natural features and landscapes that have archaeological, paleontological, historical, architectural, religious, aesthetic, or other cultural significance. Chance

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Finds procedure should be included as part of the ESMF and a chance finds clause will be added to the contracts, requiring contractors to stop construction as per procedures in the event that cultural heritage is encountered.

**ESS9 - Financial Intermediaries**

Not Currently Relevant

*[Optional Explanation - Max. character limit 1,000]*

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

**OP 7.50 Operations on International Waterways**

No

**OP 7.60 Operations in Disputed Areas**

No

**B.3 Other Salient Features**

**Use of Borrower Framework**

No

*[Optional explanation – Max. character limit 1,000]*

**Use of Common Approach**

No

*[Optional Explanation including list of possible financing partners – Max. character limit 1,000]*

**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 Concept Stage PID – Max. character limit 5,000]*

Project activities could entail environmental and social risks and impact that include waste management and disposal, pollution of soil and water resources, the workforce and working conditions, the possible exclusion of members of vulnerable groups, security, gender-based violence, occupational and community health and safety risks.

**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?**

*[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 3,000]*

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ESCP, SEP, LMP, IPPF (IPPs)and ESMF - (including a Healthcare Waste Management Plan and GBV Action Plan ) (ESMPs)

**III. CONTACT POINT**

**Contact Point**

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**IV. FOR MORE INFORMATION CONTACT**

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**V. APPROVAL**

Task Team Leader(s): Meta Mobula, Michel Muvudi Lushimba

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ADM Social Specialist: Moise Bo Nyambe Bolamu

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