



Additional Financing Appraisal Environmental and
Social Review Summary
Appraisal Stage
(AF ESRS Appraisal Stage)

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BASIC INFORMATION

A. Basic Project Data

Country	Region	Borrower(s)	Implementing Agency(ies)
Senegal	AFRICA WEST	Ministry of Finances and Budget	Ministry of Health and Social Action
Project ID	Project Name		
P175992	Additional Financing for the Senegal COVID-19 Response Project		
Parent Project ID (if any)	Parent Project Name		
P173838	Senegal COVID-19 Response Project		
Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date
Health, Nutrition & Population	Investment Project Financing	4/7/2021	4/22/2021

Proposed Development Objective

To prevent, detect and respond to the COVID-19 disease outbreak in Senegal.

Financing (in USD Million)	Amount
Current Financing	0.00
Proposed Additional Financing	0.00
Total Proposed Financing	0.00

B. Is the project being prepared in a Situation of Urgent Need of Assistance or Capacity Constraints, as per Bank IPF Policy, para. 12?

Yes

C. Summary Description of Proposed Project [including overview of Country, Sectoral & Institutional Contexts and Relationship to CPF]

The proposed project and its additional financing aim to strengthen the Senegal's national public health preparedness capacity to prevent, detect and respond to the COVID-19 and future public health emergencies. The request total amount is approximately US\$154 million (20+134) for activities across three board categories: (i) prevention; (ii)



detection; (iii) response. The objectives of the project and activities included are fully in line with the COVID-19 financing facility and will support the implementation of the Senegal COVID-19 Response Plan endorsed by the Ministry of Health and Social Action (on March 17, 2020) and the National COVID-19 Vaccination Strategy and Plan (February 2021). The additional financing will help to expand the scope of activities of the parent project through three components:

Component 1. Emergency COVID-19 Response (US\$145.5 million). Under this component, the MoHSA will enhance its capacities to prevent, detect and treat the different cases. It will enable the country to mobilize surge response capacity through trained and well-equipped front-line health workers. The component will also support the implementation of the National COVID-19 Vaccination Strategy by ensuring equitable access to vaccines, its deployment and pharmacovigilance.

Component 2. Community Engagement and Risk communication (US\$ 5 million). The project will continue to support communication, mobilization, and community engagement campaigns to raise public awareness and knowledge on prevention and control of COVID-19 among the general population. This will include a comprehensive behavioral change and risk communication to deal with COVID-19 vaccine hesitancy.

Component 3. Program Management and Monitoring (US\$ 3.5 million). The proposed project will be managed by the MoHSA's Project Coordination Unit (PCU). The project will share the cost of running the PCU along with other projects funded by the World Bank (REDISSE, ISMEA). Details of the implementation arrangements are described in section III. Implementation Arrangements.

D. Environmental and Social Overview

D.1. Detailed project location(s) and salient physical characteristics relevant to the E&S assessment [geographic, environmental, social]

The parent project, the Senegal COVID-19 Response Project (P173838), approved on April 2, 2020 has been supporting the implementation of the Senegal COVID-19 Response Project. The proposed AF will include changes to the: (i) Components and Costs; (ii) Results Framework; and (iii) Loan Closing Date.

The changes under the proposed AF will also expand the scope of activities in the parent project to include vaccine purchasing under Component 1 (Emergency COVID-19 Response). Component 2 (Community Engagement and Risk Communication) will include additional risk communication and community engagement activities related to COVID-19 vaccines. Component 3 (Project Management and M&E) will include additional support to the PCU and other implementing entities. The AF will form part of an expanded health response to the pandemic, which is being supported by development partners under the coordination of the Government of Senegal. Additional World Bank financing will enable the procurement and deployment of COVID-19 vaccines that meet the World Bank's regulatory standards for the first 26 percent of the population. Senegal has an estimated population of 17.2 million in 2021 with a 12 percent estimated to be the front-line health workers, and approximately 19.8 percent considered highly vulnerable to COVID-19 (i.e., co-morbidities, over the age of 60 years, and hypertensive). The Government expects to provide COVID-19 vaccines to the population free-of-charge. It is expected that the supply of the vaccine through the COVID-19 Vaccines Global Access (COVAX) Facility will only be sufficient to vaccinate about 20 percent of the Senegalese population by the end of 2021. The Government of Senegal is also having discussions with manufacturers outside of the COVAX Facility to purchase additional vaccines with domestic resources. However, the Bank-financed



vaccines and their deployment will become a model for a broader population-based vaccination program when additional supply of COVID-19 vaccines becomes available.

The parent project has national coverage, with some existing facilities identified as treatment centers. The proposed AF will strengthen the national immunization and related health delivery system in a way that will promote an effective COVID-19 response. Purchasing vaccines is just one step in a complex, multi-dimensional effort that includes detailed planning and implementation of a vaccine deployment program in Senegal as well as effective microplanning, safe and appropriate transportation, storage, training, ancillary materials, registration, and effective vaccine logistics and a suitable information management system. Political support, technical assistance services, training, social mobilization campaigns, and mechanisms that remove demand-side barriers to access are also essential to foster confidence and promote the early take-up of vaccines.

D. 2. Borrower’s Institutional Capacity

The Ministry of Health and Social Action (MoHSA) is the implementing agency for the parent project. The General Secretariat (SG) of the MoHSA is the unit responsible for the overall technical coordination of the project, while the PCU of the ongoing Regional Disease Surveillance Systems Enhancement Project (REDISSE) (P154807) is responsible for the day-to-day management of the project, including fiduciary management (procurement, financial management [FM] and safeguards). The PCU has extensive experience in World Bank’s fiduciary, safeguards and technical implementation arrangements and will be the implementing agency for this proposed AF. The environmental and social performance for the parent project was rated as being Moderately Satisfactory in the latest ISR done in February 2021. For the AF, all immunization-related activities will be coordinated by the Prevention Department of the Ministry of Health and Social Action with the national immunization program.

The PCU of REDISSE recently lost the environmental and social specialist and only counts on the services of a local Consultant. The PCU will need to recruit additional specialists to monitor environmental, social and occupational health and safety aspects of the project.

Training on hospital hygiene for medical and paramedical staff in health structures was carried out in 11 regions. This training will continue to complement the other 3 regions of the country and all regions of the country will be involved in vaccination activities. However, the planned activities under this AF present environmental and social risks that will need to be monitored and addressed with the effective mobilization of safeguard specialists within a maximum period of one month after effectiveness Project and before the implementation of project activities.

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

A. Environmental and Social Risk Classification (ESRC)

Substantial

Environmental Risk Rating

Substantial

The environmental risks are considered Substantial due to the contagious nature of the pathogen (COVID-19) and various chemicals and other materials to be used in the project-supported laboratories, healthcare and quarantine facilities. The inadequate adherence to occupational health and safety standards in healthcare facilities can lead to illness and death among health and laboratory workers. The laboratories and relevant health facilities which will be used for diagnostic testing and isolation of patients can generate biological, chemical and other hazardous wastes. Under the AF activities, the vaccination campaigns will generate additional wastes such as sharps and used and expired vaccine vials. The waste generated by laboratories, quarantine facilities, screening, treatment and vaccination facilities requires special handling and awareness-raising as they may present an infectious risk for health workers and neighboring communities.



Social Risk Rating

Substantial

Like the parent project, the social risks related to the Additional Financing remain substantial. The social impacts are expected to be generally positive as the project addresses the COVID 19 global pandemic. Social risks relate to: i) delayed access to vaccines for vulnerable people or those at high risk; ii) social conflict related to restrictions put in place by the authorities because of the lack of vaccines; iii) the risk of poor communication about the vaccine to the population; and iv) EAS/SH risks to patients and health care from the distribution of life-saving vaccines ; v) risks of sexual exploitation and abuse related to the supply and distribution of vaccines, drugs and equipment, as well as access to treatment and testing centers (targeting of beneficiaries, etc.); risks of sexual harassment related to the potential lack of supervision of male and female staff in the health system, including the lack of a code of conduct at the national level, exist; vii) risk of elite capture and/or corruption as the Covid-19 vaccine will be in short supply relative to the demand; viii) risks associated with Adverse Events Following Immunization (AEFI); and viii) risks of harmful communication by unsociable individuals or groups that could tarnish the reputation of the Bank and the country.

Component 2 Community Engagement and Risk Communication and the SEP will include additional risk communication and community engagement activities specifically related to COVID-19 vaccines in order to address some of the abovementioned risks.

The Borrower will not use security personnel for vaccine deployment and security (army).

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

B.1. General Assessment

ESS1 Assessment and Management of Environmental and Social Risks and Impacts

Overview of the relevance of the Standard for the Project:

Both the parent project and the additional financing are expected to have positive environmental and social impacts as they support COVID-19 surveillance, monitoring, containment and response in accordance with WHO guidelines and GIIP, as well as prepare the country for future health emergencies. However, project activities could also induce substantial environmental, health and safety risks due to the infectious nature of the pathogen and potential exposure to chemicals and waste materials associated with the laboratories and health facilities. Project activities are also likely to have significant or potential negative social impacts on the poor and / or other vulnerable groups and have the potential to directly contribute to increased social fragility or conflict. Misinformation associated with COVID-19, which could lead to the rejection of public health interventions and control of the spread of COVID-19, may expose the government to criticism for reduced civil rights due to the adoption of quarantines and other related measures. There is also a risk associated with accessing and delivering vaccines to marginalized and vulnerable social groups, but also to facilities and services designed to control the disease. Social conflicts and risks to human security resulting from diagnostic tests, limited availability of vaccines and social tensions related to the difficulties of a pandemic situation, risks of SEA / H for patients and providers of health care should be considered. Attention will also be given to the storage and preservation conditions of vaccines which may be further affected by climate change and climate variability (eg heat waves, floods). Widespread energy loss can seriously threaten the cold chain of COVID-19 vaccines as vaccine storage standards will be affected. The following environmental and social instruments (ESMF, LMP, SEP, ESCP) for the parent project have been developed and publicly disclosed on the Bank's website and at country level. The environmental and social performance of the parent project was rated moderately satisfactory in the last ISR dated February 2021. The PCU experienced significant challenges in implementing environmental and social activities especially following the resignation of the PCU safeguard specialist. An assessment of the situation

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was carried out with the support of the Bank [when] and measures were put in place to ensure that implementation is back on track. The ESMF, LMP, SEP, ESCP are being updated for the proposed AF. As outlined in the SEP, the PCU will ensure appropriate stakeholder engagement, adequate awareness raising and timely dissemination of information. This will help address: (i) conflicts resulting from false rumors; and (ii) ensure equitable access to services for all who need it. These will be guided by standards set out by WHO as well as other international good practices including social inclusion and prevention of Sexual Exploitation and Abuse and Sexual Harassment ((SEA/SH). Currently the PCU is implementing an action plan with clear deadlines to deliver on its commitments. The experience gained with the parent project will allow the PCU to review its organization for AF activities. All documents prepared as part of the parent project will be updated and disclosed after effectiveness and will account for the AF related activities, which focus on the procurement, distribution and administration of vaccines, in addition to expanding existing activities under the parent project, including vaccination awareness and risk communication campaigns and training of vaccinators. These activities can largely be managed using the mitigation measures proposed in the ESMF for the parent project, but specific guidance on the selection of priority population groups to be vaccinated and monitoring of adverse health effects from vaccination will be included in accordance with WHO guidance, in addition to guidance on mitigation measures to address SEA/SH risk of project activities. Measures to ensure the quality of vaccines is maintained throughout the supply chain in accordance with WHO guidance for storage and transportation of vaccines will also be incorporated. Where necessary, existing measures and tools in the ESMF (Infection Control Plan and Biomedical Waste Management, checklists) will be revised to ensure they fully cover the additional risks associated with the AF funded activities. As such, the SEA/SH Action Plan will likewise be drafted and included as an annex to the ESMF in order to ensure that appropriate mitigation measures are taken into account to address these specific risks.

The activities of subcomponent 1.4 will establish policies to ensure that there is no forced vaccination and that any compulsory vaccination program (such as school entry) is well designed, including regards consent and follows due process for those who choose to opt out as well as the establishment of a robust electronic registry and platform for those vaccinated.

ESS10 Stakeholder Engagement and Information Disclosure

Like the Parent Project, the social risks of the Additional Financing are considered Substantial. Component 2: Community Engagement and Risk Communication activities will be maintained to ensure effective risk communication and community/citizen engagement to raise public awareness and knowledge on prevention and control of COVID-19 among the general population. New activities will be added to Subcomponent 2.2, Comprehensive Behavioral Change and Risk Communication to prepare a multifaceted communications campaign as part of a broader social engagement and mobilization strategy to address vaccine hesitancy, with tailored content and channels, to target priority groups. The communication campaign will be implemented in all stages of the national vaccination rollout, and will leverage mass media, social media, and healthcare workers. Activities that will be financed include: (i) implementation of national risk-communication and outreach campaign, demand creation and community engagement plans for COVID-19 vaccines; (ii) ensure vaccines reach the target populations; and (iii) strengthen and adapt Pharmacovigilance System (PVS) to be sensitive to detect AEFI for the COVID-19 vaccine. Stakeholder engagement is a critical tool for social and environmental risk management, project sustainability and success. To ensure a participatory, inclusive, and culturally appropriate approach during the project's life cycle, the Borrower prepared a Stakeholder Engagement Plan (SEP) for the parent project in compliance with ESS10 requirements. The AF project will take advantage to review the PP SEP to introduce the vaccines requirements and



including potential new stakeholders, other interested stakeholders and vulnerable groups and/or persons. During the consultations for the updated SEP, specific attention will be given to the vaccine roll-out strategy. The SEP will be updated and disclosed by Project Effectiveness.

An assessment of the functioning of the current GM will be conducted as part of the SEP update process to ensure the current GM includes the requirements in relation to the potential risks and impacts of the AF and includes measures that are accessible to potential new stakeholders. Based on the assessment outcomes, the recommendations regarding the SEA/SH in the current GM will be strengthened to include SEA/SH-sensitive measures related to the vaccine aspects.

B.2. Specific Risks and Impacts

A brief description of the potential environmental and social risks and impacts relevant to the Project.

ESS2 Labor and Working Conditions

The activities of the project financed by the AF will be carried out mainly by health and laboratory staff. According to the PCU, the government does not intend to use the army in the framework of the project, even for the transport it will request funding from partners to buy the refrigerated trucks to do the transport themselves.

During implementation, the client will include the existing Labor Management Procedures (LMP) in the contracts which will define how the project workers are to be managed in accordance with the requirements of national law and ESS2.

Due diligence is also necessary to ensure that measures to mitigate against child labor, forced labor, and occupational health and safety are addressed. For example, the LMP will include measures to ensure that labor is provided on a voluntary basis and further ensure that the health and safety of workers, especially women, receives adequate attention. As such, these measures will also address the risks related to SEA/SH as well as Health and Safety in the workplace for project staff. As for the parent project, the workers who will be recruited under the AF will have to sign the same? Code of Conduct and they will be trained and sensitized regarding SEA / SH issues.

The prevention strategy adopted with the parent project will be maintained and reinforced as needed with a procedure for entering health care facilities, including minimizing visitors and submitting to strict checks before entering. The verification of the wearing of PPE, the temperature, the purpose of the visit ... will be carried out by dedicated staff at the level of the various accesses.

The provisions referred to in the Infection Control Plan and Biomedical Waste Management Plan will be enforced along with a worker protection procedure with regard to infection control precautions and these requirements will be included in workers' contracts. All workers will be continuously trained by? on preventive measures and adequate signage will be placed in the appropriate places (public spaces, offices, etc.)

Likewise, the updated LMP will also contain details regarding the GRM for workers and the roles and responsibilities for monitoring these workers. As for the project, the GRM for workers will also outline specific procedures to ensure the ethical and confidential management and resolution of SEA / SH complaints, including prompt referral of survivors to appropriate support services. These different arrangements for dealing with the SEA / HS risk for workers with external companies must also be included in the supplier's tender and contractual documents. For health and laboratory personnel, a key issue to be addressed in PML will be contamination by COVID-19. The project will ensure the application of occupational health and safety measures in accordance with WHO guidelines.



The availability of PPE (especially a face mask, gowns, gloves, hand washing soap and disinfectant) should be ensured at all times to minimize the risk of virus proliferation with adequate OHS protections in accordance with EHSs general and industry-specific EHSs and follow evolving international best practices in COVID-19 protection.

ESS3 Resource Efficiency and Pollution Prevention and Management

The activities of the parent project currently being implemented as well as the activities planned with the AF are likely to have impacts on the environment and human health. Indeed, biomedical waste from health facilities with current activities and those planned with vaccination constitute potential risks of contamination of the soil and water bodies if they are not managed properly. Health personnel, patients who frequent health facilities as well as certain neighboring populations may also be exposed to the risks of contamination with the COVID-19 virus or other pathogens.

. Strengthening medical waste management and disposal systems in healthcare facilities will be critical in this proposed AF due to the expected increased waste from the administration of COVID-19 vaccines. This will include the need to properly and safely dispose in compliant containments supplies/products such as syringes, partially used COVID-19 vaccines, unrefrigerated vaccines that are rendered ineffective, expired vaccines, PPE, and other vaccine-related waste. In order to also reduce the environmental impact of COVID-19 vaccination efforts in the country, procurement of environmentally friendly medical waste equipment will be made a priority depending on market availability.

Medical and general waste from laboratories, health centers, and quarantine and isolation centers have a high potential for carrying microorganisms that can infect the community as a whole if not properly disposed of.

A detailed Infection Control Plan & Biomedical Waste Management was described in the ESMF that was approved to ensure the waste management practices at the various hospitals receiving assistance from the project comply with WHO guidance and international best practice for infectious and hazardous waste management. The PCU is responsible for the implementation and monitoring of the ICP&BWM with the support of certain departments of the Ministry of Health such as the Operational Center of Emergency Sanitary, PRONALIN (National Program for the Fight against Nosocomial Infections)

The REDISSE and ISMEA projects already have a budget for the acquisition of incinerators and this equipment will be used within the framework of the project for the management of biomedical waste with a large capacity building program which has already started with the parent project. The incinerators used in the sanitary structures are of the Monfort type with low capacity of the order of 25 safety boxes per day, however the incinerators of the big companies Cement factories (SOCOCIM, DANGOTE) and extractive industries (SONACOS) will come in as needed and these companies are most often approved by the Minister of the Environment with a mastery of procedures and emissions.

ESS4 Community Health and Safety

Medical wastes and general waste from the health care facilities have a high potential of carrying the SARS-CoV-2 and other microorganisms that can infect the community at large if they are not properly disposed of. There is a possibility for the infectious microorganism to be introduced into the environment if not well contained within the health care facilities or due to accidents/emergencies e.g. a fire or natural disasters such as volcanic eruption. The Medical Waste Management Plan for the PP includes: 1) how Project activities will be carried out in a safe manner



with (low) incidences of accidents and incidents in line with Good International Industry Practice (WHO guidelines); 2) measures to prevent or minimize the spread of infectious diseases; 3) emergency preparedness measures. The ESMF for the PP takes into account the measures and specific procedures and protocols, in line with WHO Guidance, on appropriate waste management of contaminated materials; on the transport of samples; and on workers disinfection before leaving the workplace back into their communities. The ESMF will be updated to take into account the requirements regarding the AF activities. To manage and mitigate SEA/H) risks, a SEA/H Prevention and Response Action Plan, which includes an Accountability and Response Framework the UGPE was prepared for the PP and it will be updated as needed for the AF.

ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement

This standard is not relevant. Project activities are unlikely to require land acquisition, physical or economic displacement, or restriction of access to natural resources as no construction or major civil works are expected. Nonetheless, the Borrower will conduct regular E&S screening before the start of the works to ensure AF activities will not lead to any resettlement issues.

ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources

No construction or major rehabilitation activities are expected in this project and all works will be conducted within existing facilities. Hence, likely impacts of the project on natural resources and biodiversity are low. Therefore, the likely impacts of the project on natural resources and biodiversity are low. However, special attention must be paid to the potential risks associated with the contamination of certain primates (Chimpanzees, other animals).

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

This standard is not considered relevant as there are no Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities currently identified in the project area. Should the presence of indigenous communities be confirmed through further screening during implementation, the necessary assessments, consultations and instruments will be undertaken per the requirements of this standard.

ESS8 Cultural Heritage

Since there is no planned construction or major rehabilitation, this standard is not relevant at this time. However, the ESMF will include measures for “Chance Finds” of archaeological or other cultural heritage.

ESS9 Financial Intermediaries

This standard is not relevant for the suggested project interventions as no financial intermediaries will be used.

C. Legal Operational Policies that Apply

OP 7.50 Projects on International Waterways

No

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OP 7.60 Projects in Disputed Areas

No

B.3. Reliance on Borrower’s policy, legal and institutional framework, relevant to the Project risks and impacts

Is this project being prepared for use of Borrower Framework?

No

Areas where “Use of Borrower Framework” is being considered:

No

IV. CONTACT POINTS

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Implementing Agency(ies)

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V. FOR MORE INFORMATION CONTACT

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VI. APPROVAL

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