



Project Information Document (PID)

Appraisal Stage | Date Prepared/Updated: 25-Mar-2020 | Report No: PIDA28954

**BASIC INFORMATION****A. Basic Project Data**

Country Kyrgyz Republic	Project ID P173766	Project Name Kyrgyz Republic - Emergency COVID-19 Project	Parent Project ID (if any)
Region EUROPE AND CENTRAL ASIA	Estimated Appraisal Date 25-Mar-2020	Estimated Board Date 31-Mar-2020	Practice Area (Lead) Health, Nutrition & Population
Financing Instrument Investment Project Financing	Borrower(s) Ministry of Finance	Implementing Agency Ministry of Health	

Proposed Development Objective(s)

To prepare and respond to the COVID-19 pandemic in the Kyrgyz Republic.

Components

Emergency COVID-19 Response
Implementation Management and Monitoring and Evaluation

PROJECT FINANCING DATA (US\$, Millions)**SUMMARY**

Total Project Cost	12.15
Total Financing	12.15
of which IBRD/IDA	12.16
Financing Gap	0.00

DETAILS**World Bank Group Financing**

International Development Association (IDA)	12.15
IDA Credit	6.08
IDA Grant	6.08



Environmental and Social Risk Classification

Substantial

Decision

The review did authorize the team to appraise and negotiate

Other Decision (as needed)

B. Introduction and Context

Strategic Context

1. **An outbreak of the coronavirus disease (COVID-19) caused by the 2019 novel coronavirus (SARS-CoV-2)¹ has been spreading rapidly across the world since December 2019, following the diagnosis of the initial cases in Wuhan, Hubei Province, China.** Since the beginning of March 2020, the number of cases outside China has increased thirteenfold and the number of affected countries has tripled. On March 11, 2020, the World Health Organization (WHO) declared a global pandemic as the coronavirus rapidly spreads across the world. As of March 23, 2020, the outbreak has resulted in an estimated 332,930 cases and 14,150 deaths in 168 countries.
2. This Project Information Document (PID) describes the emergency response to Kyrgyz Republic under the COVID-19 Strategic Preparedness And Response Program (SPRP) using the MPA expected to be approved by the World Bank's Board of Executive Directors on April 2, 2020 with an overall Program financing envelope of International Development Association (IDA) US\$1.3 billion and of International Bank for Reconstruction and Development (IBRD) US\$2.7 billion.²
3. This Project is prepared under the global framework of the World Bank COVID-19 Response financed under the Fast Track COVID-19 Facility (FTCF) and through an advance of the Kyrgyz Republic's Performance-based Allocation in IDA 19. The Project is expected to be complemented by the activation of the Contingency Emergency Response Component of the World Bank's Enhancing Resilience in Kyrgyzstan (ERIK) Project (P162635).

Country Context

4. **The Kyrgyz Republic is one of the poorest countries in Europe and Central Asia**, with a gross national income per capita of US\$1,220 in 2018 (World Development Indicators, 2020). The country has a population of about 6.2 million. The population is relatively young: 67% of the total population is under

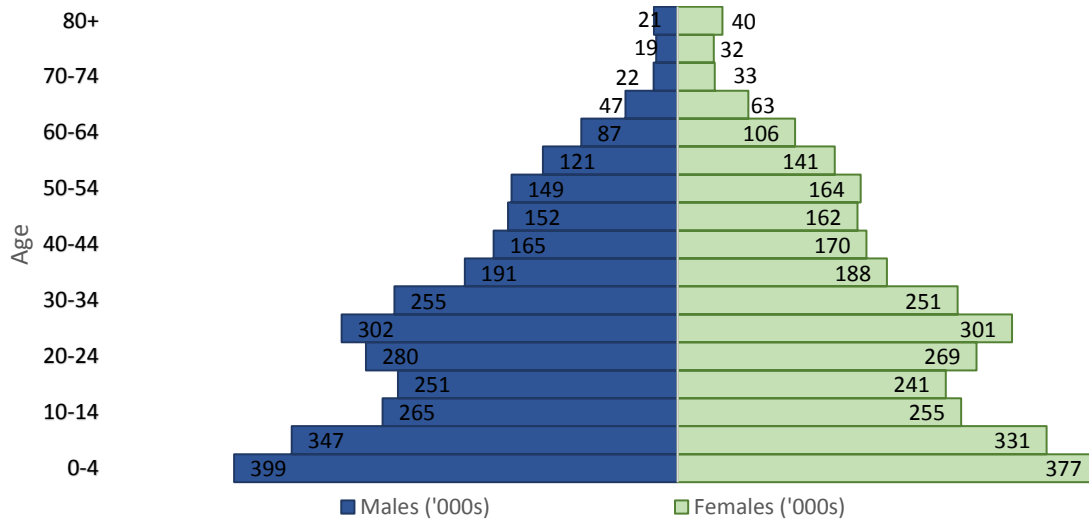
¹ SARS = Severe Acute Respiratory Syndrome

² PAD N°3810



the age of 35, and 64% of the population is within the working age, ages 15 to 64 (Figure 1). Approximately 4.5% of the population (or 278,200) is above the age of 65, of whom 61,370 are 80 or older.

Figure 1. Kyrgyz Republic’s Population Pyramid, 2017



Source: World Development Indicators (2019)

5. **The country has experienced strong but volatile economic growth in recent years.** Economic growth averaged 4% per year since 2010 but ranged from -0.5% in 2010 to 10.9% in 2013. Growth, however, has not translated into improvements in living standards and poverty reduction has stalled. In 2018, 1 in 5 Kyrgyz citizens lived below the national poverty line.³ Prior to the COVID-19 pandemic, Gross Domestic Product (GDP) was projected to grow on average by 3.7% in real terms between 2020 and 2024. It is now expected that growth will slow down substantially in 2020. The economy remains vulnerable to external shocks due to the high reliance on remittances, representing 29% of GDP, and dependence on global prices for gold – the main export.

6. **Although the Kyrgyz Republic has made some progress towards the twin goals of the World Bank Group to eliminate extreme poverty and promote shared prosperity, vulnerability remains widespread with a large majority of the population being clustered near the poverty line.** The population, therefore, face high risks of falling back into poverty given the high exposure to shocks and insufficient safety nets. Only 55% of households in the 2 lowest wealth quintiles received any type of social transfers (Multiple Indicator Cluster Survey, 2019). Moreover, economic growth relies on remittances and heavy exploitation of the country’s natural resources, which do not translate into labor force growth. In fact, jobs have not been created in the formal sector, and most of the employment that took place in the informal sector, estimated to be around 50% of GDP, is unproductive and undynamic.

³ National Statistics Committee. 22.4% of the population lived below the national poverty line in 2018.



Sectoral and Institutional Context

7. **The Kyrgyz Republic has adopted successive reforms to transform its health system.** This included the establishment of a single purchaser, the Mandatory Health Insurance Fund (MHIF), which pools funds at the national level to purchase a standardized package of services. The country was among the first former Soviet Union countries to shift from input- to output-based budgeting (i.e., capitation for primary health care and case-based payments for secondary care services). A reform of the service delivery model to promote family medicine practices and rationalize excess hospital capacity improved the efficiency of the system.

8. **Despite early successes, the reform agenda remains largely unfinished** and universal entitlement to the state guaranteed benefits package does not translate into effective universal access to quality service that contributes to improving population health outcomes. Although the Government of the Kyrgyz Republic (GoKR) has prioritized health in the Government budget, Government spending on health amounts to only US\$33 per capita. Out-of-pocket payment remains high, representing 56% of current health spending. Gaps in health worker training, coupled with poor infrastructure and lack of quality improvement systems, have resulted in poor quality care.

9. **The country is particularly vulnerable to the COVID-19 pandemic.** The WHO has assessed Kyrgyz Republic's operational readiness for preventing, detecting and responding to a public health emergency as 2 out of 5, among the lowest in the region. The key gaps highlighted in the country's emergency readiness for public health emergencies were in the areas of human resources (shortage of staff and low qualifications due to high turnover and low levels of pay), infrastructure, and lack of equipment and consumables for essential operations. As of March 23, 2020, there were 14 registered confirmed cases of COVID-19 in the Kyrgyz Republic. The Kyrgyz Republic is at high risk since it borders China, which has a high incidence of COVID-19 cases, and a large share of the population temporarily works abroad, increasing the likelihood of cross-border contamination.

10. **The Government has initiated a pandemic preparedness response.** On January 29, 2020, the GoKR adopted key legislation for COVID-19, including Government Order No. 30, order #52 of the Minister of Health on prevention of the spread of COVID-19 disease, and Protocol No.1 based on the meeting of the Republican Headquarters for the Prevention of the Spread of COVID-19 on the Territory of the Kyrgyz Republic⁴.

11. **Jointly with the WHO and other development partners, the Ministry of Health (MoH) has developed a Contingency Plan for COVID-19.** The Plan is designed to ensure an effective, timely, and coordinated response that will mitigate the impact of COVID-19 outbreak in the Kyrgyz Republic. The plan

⁴ The GoKR established a special COVID-19 Headquarters under the Prime Minister. The Republican Headquarters for the Prevention of the Spread of COVID-19 consist of all ministries and state agencies, including the Ministry of Health (MoH), Ministry of Emergency Situations, Ministry of Interior, State National Security Agency, State Committee for Defense, Security Council, Ministry of Foreign Affairs, Ministry of Economy, Ministry of Finance, Ministry of Culture and Tourism, Ministry of Transportation and Roads, State Border Service, State Custom Service, Veterinary Service, Phytosanitary Agency and others.



was approved by the GoKR on March 18, 2020. The plan has an estimated cost of US\$15.67 million for the first 12 months.

The GoKR approach to the COVID-19 pandemic

12. **Points of entry (PoE) into the country present a particular risk for introduction and spread of COVID-19 in the Kyrgyz Republic.** All arriving travelers are thermo-screened, and travelers from countries with a high incidence of COVID-19 are required to fill out a questionnaire based on the WHO template. Asymptomatic travelers arriving from countries with high incidence are taken to a designated hospital for 14 days for medical observation, while travelers displaying symptoms are taken to another designated hospital for treatment. Information is transmitted to the MoH 3 times per day from the oblast health authorities.

13. **The Republican Health Promotion Center (RHPC) is responsible for informing the population about the disease risk factors and prevention methods.** The RHPC is providing regular information and updates through mass media (television, radio and newspapers) and other mechanisms for informing the public. The MoH maintains a special web page for COVID-19 on the Ministry's website. A COVID-19 hotline has been established and is widely used. Village health committees, who are informed and educated by the RHPC, hold regular meetings to discuss threats and prevention methods and ensure preparedness. The MoH has distributed COVID-19 prevention communication materials and is using these fora to educate and inform the population about risks, prevention, and detection of COVID-19 cases and to avoid stigma or panic.

14. **The GoKR has designated 24 hospitals situated in all 7 oblasts for observation of suspected cases.** Confirmed cases of COVID-19 will be treated in two designated hospitals: The Republican Clinical Infection Disease hospital in Bishkek and the Osh Oblast hospital. Capacities for management of severe acute respiratory infections are limited at both designated reference hospitals. Room ventilation systems in infectious disease hospitals are not available. Annex 1 provides additional details on the GoKR's COVID-response plan.

15. **The GoKR has limited funds to adequately prepare for the onset of the COVID-19 epidemic.** All activities aimed at containing the spread of infectious diseases are funded through the Epidemic Fund of the MoH, but funding is extremely limited. In 2020, the Fund had 30 million Kyrgyz Soms (US\$500,000). Additional budgetary funds are only expected to be made available once the Government declares a public health emergency. The GoKR covers all health care costs associated with COVID-19, including testing and treatment. The MHIF, which finances hospitals with a case-based system, has established a rate of 9000 Kyrgyz Soms (approximately US\$123) for each treated COVID-19 case, but this will likely not cover the full costs incurred by hospitals to provide necessary care. The World Bank's support is thus critical to ensure that appropriate preventive measures are implemented to limit the onset and spread of COVID-19 and provide necessary treatment.

16. **Other development partners have also pledged support to the Kyrgyz Republic for COVID-19 preparedness.** These include the WHO, United Nations Children's Fund (UNICEF), United Nations Development Program, Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), and United States Agency for International Development (USAID). The WHO has already provided substantial support in delivering trainings, preparing the Contingency Plan, and providing logistic support to the MoH by



providing 1,000 COVID-19 laboratory tests and personal protection equipment (PPE). The Russian Federation and Turkey have also provided in-kind support (i.e. tests and PPE).

C. Proposed Development Objective(s)

Development Objective(s) (From PAD)

To prepare and respond to the COVID-19 pandemic in the Kyrgyz Republic.

Key Results

PDO Level Indicators

- Number of suspected cases of COVID-19 cases reported and tested
- Percentage of designated hospitals with personal protection equipment and infection control products and supplies, without stock-outs in the preceding two weeks.
- Number of new fully equipped and functional intensive care beds financed by the project

D. Project Description

17. Component 1 of the Project will focus on an emergency COVID-19 response with support to prevent additional arrivals of COVID-19 cases and to limit local transmission through containment strategies. It supports the enhancement of disease detection capacities through the provision of technical expertise, laboratory equipment, and systems to ensure prompt case finding and contact tracing. It will enable the Kyrgyz Republic to mobilize surge response capacity through trained and well-equipped frontline health workers. The Project will help to (a) strengthen disease surveillance systems, public health laboratories, and epidemiological capacity for early detection and confirmation of cases; (b) combine detection of new cases with active contact tracing; (c) support epidemiological investigation; (d) strengthen risk assessment; and (e) provide on-time data and information for guiding decision-making and response and mitigation activities. The Project aims to contribute to the strengthening of health system preparedness, quality of medical care provided to COVID-19 patients and minimizing the risks for health personnel and patients. These objectives will be achieved through procurement of essential medical goods, medicines, personal protective equipment and medical equipment, rapid conditioning of designated health facilities, and financing of surge staffing needs. Component 2, Implementation Management and Monitoring and Evaluation will support the Project Implementation Unit, as well as activities associated with Project monitoring and evaluation.



Legal Operational Policies

	Triggered?
Projects on International Waterways OP 7.50	No
Projects in Disputed Areas OP 7.60	No

Summary of Assessment of Environmental and Social Risks and Impacts

The project will have positive environmental and social impacts as it should improve COVID-19 surveillance, monitoring and containment to minimize spread among population. However, the project could also cause significant environmental, health and social safety risks due to the dangerous nature of the pathogen and reagents and other materials to be used in the project-supported ICUs, laboratories, and quarantine facilities. The project adopts ESS approach to address the risks. The Environmental Risk Rating is assessed as **Substantial** and Social as **Moderate**. Key risks relate to spread of virus and medical waste management: (i) occupational health and safety risk related for spread of virus for medical staff, laboratory staff and population at large in due course of detection, transportation of patients/tests/chemicals and reagents, and treatment stages; (ii) occupational health and safety related to collection, transportation and disposal of medical waste management; (iii) temporary environmental risks associated with minor repair works and occupational health and safety of construction workers, medical staff at hospitals and border posts and surrounding communities. Major challenges include: (i) ensuring a soothing environment so as to avoid panic/ conflicts resulting from false rumors and social unrest, (ii) assuring proper and quick access to appropriate and timely medical services, educate hand hygiene and PPEs, that is not based on ability to pay or other factors; and (iii) anticipating and addressing issues resulting from people being kept in quarantine. These risks are covered by the following Environmental and Social Standards (ESS): ESS 1, ESS 2, ESS 3, ESS 4, and ESS 10. Accordingly, mitigatory measures have been drawn.

E. Implementation

Institutional and Implementation Arrangements

18. The MoH is responsible for the coordination and implementation of COVID-19 activities. The implementing agency for this Project will be the MoH, which will coordinate the implementation of Project activities as well as coordinate them with other agencies. The Republican Headquarters for the Prevention of the Spread of COVID-19, led by the Prime Minister of the Kyrgyz Republic, will play a steering role in the national response overall and for the project interventions specifically. The Republican Headquarters include representatives from all ministries and state agencies, such as the MoH, Ministry of Emergency Situations, Ministry of Finance, and Ministry of Foreign Affairs. The MoH has also established its own COVID-19 Headquarters and a 24/7 Secretariat. The MoH Headquarters consist of the Public Health Department of MoH, Department of Health Care Delivery and Drug Policy, Department of Disease Prevention and State Sanitary Epidemiological Surveillance, Republican Center for Quarantine and Especially Dangerous Infections, Department of Drug Supplies and Medical Equipment, and the Republican Health Promotion Center. The Deputy Minister of Health assigned to the COVID-19 response



team will be responsible for the execution oversight of project activities and will regularly report to the Deputy Prime Minister and Republican Headquarters on project activities as part of overall response reporting. The Department of State Sanitary and Epidemiology Control will be responsible for the day-to-day management and coordination of technical activities supported under the Project. In addition, other technical divisions at the MOH, research institutes, national medical services, regional and local health authorities, village health communities, and other key agencies will be involved in project activities based on their functional capacities and institutional mandates.

19. The PIU will be the PIU of the Ministry of Emergency Situations (MoES). It will provide implementation and project management support, including procurement and financial management, to the MoH. It has extensive experience with World Bank procedures and is currently implementing Enhancing Resilience in Kyrgyz Republic (P162635) and Central Asia Hydromet Modernization Project (P120788). The PIU will directly implement certain technical activities, including procurement of medical supplies, equipment, and renovation works. Some other activities, such as health worker training may be outsourced to third parties through contract agreements acceptable to the World Bank. The PIU will also be in charge of preparing a consolidated annual workplan and a consolidated activity and financial report for the project components. The PIU will work closely with the MoH, which will provide the necessary documentation, including technical specifications for procurement.

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APPROVAL

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