



**The World Bank**

Malawi Health Emergency Preparedness, Response And Resilience Program Using The Multiphase Programmatic Approach (P505187)

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# Concept Environmental and Social Review Summary

## Concept Stage

### ( ESRS Concept Stage)

Date Prepared/Updated: 03/15/2024 | Report No: ESRSC04164



# The World Bank

Malawi Health Emergency Preparedness, Response And Resilience Program Using The Multiphase Programmatic Approach (P505187)

## I. BASIC INFORMATION

### A. Basic Operation Data

Operation ID	Product	Operation Acronym	Approval Fiscal Year
P505187	Investment Project Financing (IPF)	Malawi HEPRR	2024
Operation Name	Malawi Health Emergency Preparedness, Response and Resilience Program Using the Multiphase Programmatic Approach		
Country/Region Code	Beneficiary country/countries (borrower, recipient)	Region	Practice Area (Lead)
Malawi	Malawi	EASTERN AND SOUTHERN AFRICA	Health, Nutrition & Population
Borrower(s)	Implementing Agency(ies)	Estimated Appraisal Date	Estimated Board Date
Republic of Malawi	Ministry of Health	05-Apr-2024	31-May-2024
Estimated Concept Review Date	Total Project Cost		
18-Mar-2024	50,000,000.00		

### Proposed Development Objective

The Project Development Objective (PDO) for Malawi is to strengthen health system resilience and multisectoral preparedness and response to health emergencies in Malawi.

### 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]*

This project is proposed under the Health Emergency Preparedness, Response and Resilience (HEPRR) Program using the Multiphase Programmatic Approach (MPA) approved by the World Bank's Executive Directors on September 29, 2023 (P180127, Report No: PAD5376). Phase I of the HEPRR Program provided financing for Kenya, Ethiopia, Sao Tome



and Principe, the East, Central and Southern Africa Health Community and the Intergovernmental Authority on Development. Aligned with the Program Development Objective of the HEPRR Program, the Project Development Objective (PDO) for Malawi is to strengthen health system resilience and multisectoral preparedness and response to health emergencies in Malawi. Four components are proposed for the Malawi operation, aligned with those of the HEPRR Program including: (i) Strengthening the Preparedness and Resilience of the Health System to manage Health Emergencies (HEs) (ii) Improving Early Detection and Response to HEs Through a Multisectoral Approach; (iii) Project Management; (iv) Contingent Emergency Response Component (CERC). Component 1: Strengthening the Preparedness and Resilience of the Health System to manage HEs. This component supports a comprehensive approach to enhancing the preparedness and resilience of Malawi's health system to effectively manage HEs, while complementing overall health system strengthening. Four sub-components address key aspects of readiness and response. • Subcomponent 1.1: Enhancing Multisectoral Planning, Financing, and Governance for Improved Resilience to Health Emergencies • Subcomponent 1.2: Strengthening Health Workforce Development • Subcomponent 1.3: Improving Access to Quality Health Commodities • Subcomponent 1.4: Enhancing Information Systems for HEs and Digitalization of the Health Sector Component 2: Improving Early Detection and Response to HEs Through a Multisectoral Approach. This consists of three sub-components addressing key aspects of preparedness and response. • Subcomponent 2.1: Collaborative Multisectoral Surveillance and Laboratory Diagnostics • Subcomponent 2.2: Emergency Management, Coordination, and Essential Service Continuity • Subcomponent 2.3: Risk Communication and Community Engagement (RCCE), Empowerment, and Social Protection During HEs. Component 3: Project Management. This component will ensure efficient and effective management and implementation of the project by the Program Coordination Unit (PCU). • Subcomponent 3.1: Enhancing Project Monitoring and Evaluation (M&E) • Subcomponent 3.2: Delivering Tailored Technical Assistance and Facilitating a Learning Agenda • Subcomponent 3.3: Strengthening Project Management through Support of the Implementing Institutions and Multisectoral Collaboration. Component 4: Contingent Emergency Response Component (CERC). 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 Malawi, either by a formal declaration of a national emergency or upon a formal request from the government. The proposed Project is consistent with both the adaptation and mitigation goals of the Paris Agreement. It is expected to have a considerable contribution to improving climate adaptation and resilience in line with the Paris Agreement and is not anticipated to contribute to Greenhouse Gases (GHG) emissions, which is aligned with Malawi's commitment to reduction of GHG.

## **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]*

The project will be implemented nationwide and will work on developing resilient health emergency preparedness plans and systems to enable the client prompt response to any shocks. The project will therefore not interact with any physical features in space. The project however proposes to include technical assistance activities which will necessitate undertaking a preliminary identification of the vulnerable population sectors who could be directly or indirectly affected (positively or negatively) by the project activities. These vulnerable group could include people with disabilities, aged, people with chronic illness e.t.c.

### **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 client has existing projects namely ongoing Southern Africa Tuberculosis and Health Systems Support Project (P173228) under safeguards policies and Emergency Project to Protect Essential Health Services (P180231), and the Malawi COVID-19 Emergency Response and Health Systems Strengthening Project (P173806) under ESF. However, there are no adequate human capacity to undertake environmental and social risk management activities for these projects. Currently, P173228 has environmental and social specialist but is also providing support to P173806. The client is currently extending ToRs for ES specialist to formalize the support being provided. Additionally, an environmental safeguards officer will be hired to strengthen ES capacity of the PIU. The recently approved P180231 is in the process of hiring an environmental and social safeguards specialist. The PIU capacity does not translate to implementing agency ES capacity strengthening as the consultants do not have ES counterparts within the client structure hence the need for this project to meet ES capacity needs as a standalone project. Considering scope and type of risks, an environmental and social safeguards specialist will be hired to manage environmental and social risks for this project.

**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 project is working on strengthening systems including strengthening the preparedness and resilience of the health system to manage health emergencies. The project will not undertake any infrastructural activities, rather, the project will support Technical Assistance activities that will include i) trainings, ii) conducting of a vulnerability assessment of existing infrastructure and assessment of earmarked urban health centers to be upgraded to alleviate the congestion at district and central hospitals; iii) developing of architectural drawings, BoQs and bidding documents to enhance the capacity of the structures with a focus on adaptation to changing climate patterns and earmarked urban health centres for upgrading and iv) conducting environmental impact assessments for the earmarked urban centers. These activities may have downstream and cumulative impacts and other environmental liabilities such as management of hazardous wastes including asbestos containing materials. The project will also support procurement of ICT and digital equipment, solar systems, mobile vans, ambulances, medicines, medical equipment and reagents. The project will also develop policies, plans and install/ revamp administrative systems. Though TA activities include preparation of designs for construction works, the scope of construction is small as it will focus on increasing capacity of urban health centres to accommodate more patients during emergencies. The set up is urban hence It is unlikely that the potential adverse risks and impacts will have impact on the environment and biodiversity. The potential risks and impacts are predictable and expected to be temporary and/or reversible; of low magnitude; site-specific, within the project footprint and the project’s risks and impacts can be easily mitigated in a predictable manner. The project risk has therefore been classified as Moderate, guided by ES Directive and the Technical Note on Screening and Risk Classification, ESF.

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**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 proposed intervention seeks to strengthen health systems resilience and multisectoral response to health emergencies in Malawi. It has four components with various activities that will be implemented to facilitate attaining the project development objectives (PDO). However, some risks need to be highlighted so that they are considered and appropriate mitigation measures are put in place. The key social risks identified include: (a) potential exclusion of vulnerable groups of stakeholders in the design, preparation, and implementation of the project, particularly as a result of the limited experience of the participating agencies with stakeholder engagement processes; (b) labor risks, particularly associated with (b1) unfair preferential treatment to be potentially given to some people while disadvantaging and excluding others during recruitment and training, (b2) potential discrimination in the workplace, as employees with limited or no IT capacity may lag if adequate preparatory work is not done to develop their capacity to effectively use the new technologies to be introduced in their workplace, (b3) potential overburdening of health workers if new systems are introduced without a proper workload and workflow analysis, (b4) potential issues associated with the current plans to use a framework contract modality with suppliers and staff to be recruited by the Project, as part of Components 1 and 3, which might involve a level of risk if ESS2 requirements are not fully incorporated, and (b5) potential for sexual harrasment in the workplace; (c) potential risks of exposure of patient-level data to unauthorized people where systems’ security is weak, or there is lack of ethics in handling such data, particularly as part of Component 2 activities that focus on improving early detection and response to health emergencies; and (d) potential risks associated to the downstream aspects of the technical assistance activities to be supported by the project.

*[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]*

Project Information Document and the tentative work plan documents were reviewed to assess project related risks. Infection Control and Waste Management Plan (2016) prepared under P155658 was reviewed. Potential environmental risks include e-waste, medical and general waste generation and poor management (segregation at source, storage, transportation and disposal); water, air and soil contamination from emissions, hydro carbons and heavy metal; OHS to workers, health and safety to patients and communities. Main social risks are related to labor aspects and potential exclusion of certain groups of stakeholders in the design, preparation, and implementation of the Project. Based on preliminary assessment, ESS1, ESS2, ESS3, ESS4, ESS6, ESS8 and ESS10 apply. TORs for TA activities will be in line with the requirements of the OESRC Advisory Note for TA and ESF; and will include exclusion and screen out criteria for all activities with adverse impacts on environmentally vulnerable areas.

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**ESS10 - Stakeholder Engagement and Information Disclosure**

Relevant

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

The Project will establish a structured approach to stakeholder engagement based on meaningful consultations and disclosure of appropriate information. The client will use the preliminary Stakeholder Engagement Plan (SEP) prepared for the Project to engage stakeholders as needed and for public information disclosure purposes, carrying out stakeholder engagement activities during project preparation to inform the design of the project and its E&S instruments. Within one month of Project effectiveness, this SEP will be updated to include information gathered from wider consultations. The SEP will also include a more elaborate Grievance Mechanism for addressing any concerns and grievances that may be raised regarding the Project activities.

**ESS2 - Labor and Working Conditions**

Relevant

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

The Project will build resilience and capacity of the health system to respond to health emergencies through training. There will be a need to ensure that there will be no unfair preferential treatment given to some staff or people while disadvantaging and excluding others during the selection of training participants. Finally, there will be recruitment of staff by the Project. All the above might present some labor-related issues that need to be examined and addressed in line with Bank requirements.

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

Relevant

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

Project activities will include procurement of e-materials that will produce e-waste, chemical contaminated waste water from the laboratory that may contaminate water and soils if not properly disposed, emissions from vehicles that may pollute the air. Medical wastes that may result from health services. The ESMF will have measures to address general wastes and e-wastes, policy and strategies cumulative impacts, while ICWMP will be updated to include all medical wastes. WB EHS general guidelines, Health care facilities EHS guidelines and GIIP for proper treatment and disposal will be applied to enhance management of health care wastes and potential risks for pollution. As the project is focusing on strengthening systems and preparing documents for future investments, the project should look at designs that will be water and energy efficient.

**ESS4 - Community Health and Safety**

Relevant

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

Exposure to medical and e-wastes, road safety risks especially in rural communities where mobile clinics will be operating. The updated ICWMP will incorporate mitigation measures for risks from medical waste while ESMF that includes a generic ESMP will ensure all community health and safety risks including road safety and exposure to generic wastes are mitigated using general and sector-specific EHSs for the identified subprojects. A SEA/SH Action Plan will be also prepared as part of ESMF



**ESS5 - Land Acquisition, Restrictions on Land Use and Involuntary Resettlement** Not Currently Relevant

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

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

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

The standard will guide screening out of TA activities that have potential adverse impacts on natural habitats, biodiversity and any environmentally vulnerable area in line with ESF.

**ESS7 - Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities** Not Currently Relevant

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

**ESS8 - Cultural Heritage** Relevant

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

The standard will provide guidance to screening out of TA activities that have significant impact on cultural heritage inline with ESF. A chance finds procedure will thus be included in the ESMF and for site-specific ESMPs to manage risks and impacts to cultural heritage.

**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** In Part

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

The borrower has some framework for grievance redress that is established and operational. This project will only strengthen it in accordance with requirements of ESS10.

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All Environmental aspects of the project including medical waste management, management of Asbestos containing materials, any environmental liabilities and screening will use World Bank ESF and additionally, World Bank general and health care facilities ESHS guidelines GIIP will be utilized .

**Use of Common Approach**

No

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

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

The project is working on strengthening systems including strengthening the preparedness and resilience of the health system to manage health emergencies. The project will not undertake any infrastructural activities, rather, the project will support Technical Assistance activities that will include i) trainings, ii) conducting of a vulnerability assessment of existing infrastructure and assessment of earmarked urban health centers to be upgraded to alleviate the congestion at district and central hospitals; iii) developing of architectural drawings, BoQs and bidding documents to enhance the capacity of the structures with a focus on adaptation to changing climate patterns and earmarked urban health centres for upgrading and iv) conducting environmental impact assessments for the earmarked urban centers.

These activities may have downstream and cumulative impacts and other environmental liabilities such as management of hazardous wastes including asbestos containing materials. The project will also support procurement of ICT and digital equipment, solar systems, mobile vans, ambulances, medicines, medical equipment and reagents. The project will also develop policies, plans and install/ revamp administrative systems.

The main potential environmental risks include e-waste, medical and general waste generation and poor management (segregation at source, storage, transportation and disposal); water, air and soil contamination from fumes, emissions, hydro carbons and heavy metal; OHS to workers, health and safety to patients and communities while key social risks include (a) potential exclusion of vulnerable groups of stakeholders in the design, preparation, and implementation of the project, particularly as a result of the limited experience of the participating agencies with stakeholder engagement processes; (b) labor risks, particularly associated with (b1) unfair preferential treatment to be potentially given to some people while disadvantaging and excluding others during recruitment and training, (b2) potential discrimination in the workplace, as employees with limited or no IT capacity may lag if adequate preparatory work is not done to develop their capacity to effectively use the new technologies to be introduced in their workplace, (b3) potential overburdening of health workers if new systems are introduced without a proper workload and workflow analysis, (b4) potential issues associated with the current plans to use a framework contract modality with suppliers and staff to be recruited by the Project, as part of Components 1 and 3, which might involve a level of risk if ESS2 requirements are not fully incorporated, and (b5) potential for sexual harassment in the workplace; (c) potential risks of exposure of patient-level data to unauthorized people where systems’ security is weak, or there is lack of ethics in handling such data, particularly as part of Component 2 activities that focus on improving early detection and response to health emergencies; and (d) potential risks associated to the downstream aspects of the technical assistance activities to be supported by the project.

Though TA activities include preparation of designs for construction works, the scope of construction is small as it will focus on increasing capacity of urban health centres to accommodate more patients during emergencies. The set up is

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urban hence It is unlikely that the potential adverse risks and impacts will have impact on the environment and biodiversity. The potential risks and impacts are predictable and expected to be temporary and/or reversible; of low magnitude; site-specific, within the project footprint and the project’s risks and impacts can be easily mitigated in a predictable manner. The environmental and social risk has therefore been classified as Moderate.

Based on a preliminary assessment, ESS1, ESS2, ESS3, ESS4, ESS6, ESS8 and ESS10 apply and the following instruments will be prepared i) ESCP, ii) SEP at preparation and iii) ESMF that includes generic ESMP, OHS plan, SEA/SH action plan and LMP iv) Updated ICWMP, v) CERC Manual/ESMF and vi) ESMP as part of the designs documentation at implementation.

**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]*

The Client will have to prepare the following instruments by Appraisal

- 1. Environmental and Social Commitment plan
- 2. Stakeholder Engagement Plan

The client will have to prepare the following instruments by Project Effective date

- 3. ESMF including generic ESMP, LMP, SEA/SH plan, and OHS plans
- 4. Updated ICWMP
- 5. CERC Manual/ESMF
- 6. ESMP as part of the designs documentation

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**III. CONTACT POINT**

**Contact Point**

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## The World Bank

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### IV. FOR MORE INFORMATION CONTACT

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### V. APPROVAL

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