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Concept Environmental and Social Review Summary

Concept Stage

(ESRS Concept Stage)

Date Prepared/Updated: 03/26/2024 | Report No: ESRSC04204

I. BASIC INFORMATION

A. Basic Operation Data

Operation ID	Product	Operation Acronym	Approval Fiscal Year
P505188	Investment Project Financing (IPF)	Zambia HEPRR	2024

Operation Name	Zambia Health Emergency Preparedness, Response and Resilience Project Using the Multiphase Programmatic Approach

Country/Region Code	Beneficiary country/countries (borrower, recipient)	Region	Practice Area (Lead)
Zambia	Angola, Botswana, Burundi, Congo, Democratic Republic of, Ethiopia, Kenya, Lesotho, Malawi, Mozambique, Rwanda, Sao Tome and Principe, South Sudan, Tanzania, Zambia	EASTERN AND SOUTHERN AFRICA	Health, Nutrition & Population

Borrower(s)	Implementing Agency(ies)	Estimated Appraisal Date	Estimated Board Date
Republic of Zambia	Ministry of Health	29-Apr-2024	13-Jun-2024

Estimated Concept Review Date	Total Project Cost
13-Mar-2024	50,000,000.00

Proposed Development Objective

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

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

No

C. Summary Description of Proposed Project Activities

A brief summary of the areas of investment relevant to Zambia and within the scope of the approved menu of activities described in the Project PAD is provided below. The Project will implement activities in targeted provinces, building on

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the World Bank's earlier health sector investments. Component 1: Strengthening the Preparedness and Resilience of the Health System to Manage Health Emergencies (US$10 million equivalent). This component will support strengthening of the health system's preparedness and resilience to respond to health emergencies, and has two subcomponents: (i) Develop health workforce through training, regulatory and management mechanisms; and (ii) operationalize and improve interoperability of information systems for health emergencies and digitalize the health sector. Component 2: Improving the detection of and response to Health Emergencies through a multisectoral approach (US$ 35 million equivalent). This component will support operational readiness and capacities to respond to health emergencies and has three subcomponents: (i) Strengthen emergency management structures and processes & patient-centered healthcare provision; (ii) Risk communication and citizen engagement; and (iii) Climate change adaptive emergency preparedness and response. Component 3: Project Management (US$5 million equivalent). This component will ensure efficient and effective management and implementation of the project, including operational research in climate and health, NCDs, and other prioritized areas, M&E, partner mapping for better planning. Component 4: Contingent Emergency Response Component (CERC) (US$0). This component will facilitate access to rapid financing by allowing for the reallocation of uncommitted project funds in the event of a natural disaster in a country, either by a formal declaration of a national emergency or upon a formal request from the government.

D. Environmental and Social Overview

D.1 Overview of Environmental and Social Project Settings

The project will be implemented across all ten provinces of Zambia, supporting health emergency response activities. Specific project sites include small rural and remote health clinics, rural district hospitals, and major medical facilities in urban centers. The WASH infrastructure in urban health facilities is more advanced, featuring centralized connections to water and sanitation services. In contrast, rural health facilities typically have basic infrastructure, such as pit latrines, shallow water wells, and hand pumps. Urban medical facilities are likely to be connected to the main energy grid; however, due to the country's reliance on hydropower and the current drought, there are rolling power outages lasting 8-12 hours per day. An extended dry spell since mid-January 2024 has impacted most of the central and southern parts of Zambia, resulting in less than normal rainfall and the destruction of 1 million hectares of maize, nearly half of the country's maize cultivation. The drought is also expected to lead to a power deficit of over 400 Megawatts and affect ground and surface water levels, with severe repercussions for sectors beyond agriculture. Additionally, Zambia has experienced a surge in cholera cases since January 2024, due to the cross-contamination of shallow wells with sanitation waste, affecting nine out of the ten provinces. Moreover, the country's Human Development Index (HDI) value decreased by 1.8 percent between 2019 and 2021, largely attributable to disparities in health, education, and income.

Furthermore, Zambia faces challenges in managing e-waste, which is often refurbished, cannibalized, dumped in open landfills, or incinerated in the open air. Although there are plans to address this issue through e-waste regulations, the necessary funding, expertise, management, and facilities are still lacking.

D.2 Overview of Borrower's Institutional Capacity for Managing Environmental and Social Risks and Impacts

The MoH has been and is involved in several projects in Zambia including P174185 Covid-19, P167916 Africa CDC, P155658 Southern Africa Tuberculosis Project and P176300 Eastern and Southern Africa: Strengthening Pandemic Preparedness in the Eastern, Central and Southern Africa Health Community Project. The performance of the MoH PIU

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E&S specialists have varied from non compliance with the project E&S instruments (P155658) to the desire to get ESF right (P174185) by using the screening tools and developing a good quality and agile ESMPs. MoH staff have attended several ESF training events over the past four years and have assigned a staff member to this project with some some knowledge of World Bank projects under ESF. ESF implementation experience and knowledge is within the MoH and MoH leadership should allocate additional seasoned staff to support. The Bank E&S specialists have been very proactive in their support to the health projects but activities are delayed due to slow responses, poor lines of communication within MoH, inadequately prepared E&S instruments or a basic lack of technical knowledge. This was apparent on P155658 SATBHSS project where the Infection Control and Waste Management Plan (ICWMP) was declared operational at multiple project sites but a mission visit found non-compliance. The agreed building and fire codes within the ESMPs were not followed in building designs and local codes adopted instead. This led to the reconfiguration of a laboratory to comply with the agreed fire codes. The implementation of this project needs to be on the right track from the start to avoid delays, exhaustive use of Bank specialists time, excessive project extensions and inadequate and inappropriate infrastructure.

II. SCREENING OF POTENTIAL ENVIRONMENTAL AND SOCIAL RISKS AND IMPACTS

A. Environmental and Social Risk Classification (ESRC)

Moderate

A.1 Environmental Risk Rating

Moderate

The environmental risk rating is Moderate. The main key factors contributing to this risk rating are generated from Component 1 and 2 and are (i) the purchase and disposal of electronic equipment to support capacity building and development of communications platforms, e-learning modules, community information systems etc; (ii) the rehabilitation , construction and operation of WASH facilities that may include water tanks and water storage, water distribution systems, single story buildings, an appropriate type of sanitation systems ((Ventilated Improved Pit (VIP) pit latrines, flush systems etc) according to the remoteness of locations, water quality testing and treatment etc and; (iii) the installation of solar energy equipment at health facilities to power compatible low energy rated cold storage equipment. The project footprint will be confined to the existing Ministry of Health occupied land and will not encroach on environmental sensitive areas or any areas designated as national parks etc. The Environmental and OHS risks and impacts under both components are predictable, reversible and have a low probability of adverse or serious impacts to human health or the environment. There will be no toxic or harmful substances used and simple management plans guided by a project ESMF are expected for risk mitigation. Environmental risks and impacts from the project include; (i) the generation of e-waste over a longer term period (including solar equipment); (ii) minor amounts of construction waste and OHS risks from the rehabilitation and construction of WASH facilities including installation of water storage and distribution equipment; (iii) a suitable standard of water quality for WASH; (iv) the possible discovery of asbestos roof sheeting material during preconstruction for rehabilitation activities and; (v) water tank collapse where stand foundations and construction are inadequate.

A.2 Social Risk Rating

Moderate

The social risk rating is Moderate at this stage, considering the nature and magnitude of the potential social risks and the impacts of the project activities, which are focused on strengthening health system resilience and multisectoral preparedness and response to health emergencies in the country. Although the project will be implemented

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

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

The Environmental, Social and OHS risks are rated Moderate considering the risks and impacts under the project components are predictable, reversible and have a low probability of adverse or serious impacts to human health or the environment. Key environmental and social risks include the generation of e-waste and construction waste, occupational health and safety concerns, water quality issues, the presence of hazardous materials, the potential for discrimination against vulnerable groups, labor and working conditions, sexual exploitation and abuse/sexual harassment, difficulties in accessing grievance redress mechanisms and referral processes, unauthorized exposure of patient data, and risks associated with the technical assistance's downstream activities. The project's ESMF will outline the required national, GIIP and other best practices to manage these risks, and specific ESMPs and CESMPs will be developed for individual sites or areas.

ESS10 - Stakeholder Engagement and Information Disclosure Relevant

The project will develop a Stakeholder Engagement Plan (SEP) to guide structured stakeholder interactions through meaningful consultations and information sharing. The SEP will identify and differentiate stakeholders, schedule engagements throughout the project's duration, specify methods for disseminating information and collecting feedback, and include tailored measures for inclusive participation, particularly for disadvantaged or vulnerable groups. Additionally, it will outline a Grievance Redress Mechanism (GRM) in line with ESS10, leveraging existing health sector mechanisms in Zambia. Stakeholder engagement will commence early in the project lifecycle, and the SEP draft will be disclosed prior to project appraisal. The project will also ensure that appropriate information on E&S risks and impacts is accessible to stakeholders in a timely, understandable, and appropriate manner and format, through the public disclosure of the ESMF and other E&S instruments.

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ESS2 - Labor and Working Conditions Relevant

Project workers are categorized into: (i) Direct workers (PIU-employed staff, agencies, consultants), (ii) Government workers (civil servants, e.g., healthcare workers), (iii) Contracted workers (hired by contractors for construction and WASH facility rehabilitation), and (iv) Community workers (volunteers and health assistants at the community level). Labor risks include non-compliance with national laws and ESS2 standards on labor and working conditions. The Borrower will prepare Labor Management Procedures (LMP) within the EMSF to address working conditions, occupational health and safety, code of conduct, employment age, non-discrimination, grievance redress, and contractor management, adhering to ESS2 and ESHGs, and national regulations. Civil servants will follow their existing employment terms, with ESS2's workforce protection and health and safety provisions applying.

ESS3 - Resource Efficiency and Pollution Prevention and Management Relevant

ESS 3 is relevant for this project as resource management and pollution prevention is necessary to manage sanitation waste, water quality, water extraction and use. A blend of WHO and national guidance documents and other good international practices will be adopted to properly manage and monitor water quality, the management of sanitation waste, e-waste management, discovery of asbestos materials and the sourcing of construction materials etc. The project ESMF will provide the necessary level of detail to manage the project ESS 3 related risks.

ESS4 - Community Health and Safety Relevant

The potential adverse impacts on the community may arise from: (i) the mismanagement of sanitation waste, which could contaminate water resources and wells, increasing the risk of spreading infectious diseases such as cholera; (ii) the improper disposal of e-waste, which could lead to open incineration, localized air pollution, and issues of sexual exploitation, abuse, and harassment (SEA/SH) among project workers, local communities, and stakeholders, including community-based volunteers and community health assistants. Site-specific or area-grouped Environmental and Social Management Plans (ESMPs) will be developed in accordance with national laws, Good International Industry Practice (GIIP), and other best practices. Project activities will be conducted under an Occupational Health and Safety Plan (annexed to the ESMP) to prevent community incidents and accidents. Additionally, an SEA/SH Action Plan will also be prepared as part of the ESMF.

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

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

ESS6 - Biodiversity Conservation and Sustainable Management of Living Natural Resources Not Currently Relevant

ESS 6 is not relevant because the project will be confined to existing MoH land and facilities.

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

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

ESS8 - Cultural Heritage Not Currently Relevant

ESS 8 is not relevant because the project footprint is confined to existing MoH facilities.

ESS9 - Financial Intermediaries Not Currently Relevant

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

N/A

Use of Common Approach No

N/A

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?

The following E&S instruments are required before Appraisal (i) a draft ESCP; (ii) AESRS; (iii) SEP and before negotiations an ESMF TOR. An ESMF is required as a disbursement condition.

III. CONTACT POINT

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