



## Additional Financing Appraisal Environmental and Social Review Summary

### Appraisal Stage

### **(AF ESRS Appraisal Stage)**

Date Prepared/Updated: 11/23/2021 | Report No: ESRSAFA272

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

Country	Region	Borrower(s)	Implementing Agency(ies)
Burkina Faso	AFRICA WEST	Burkina Faso	Ministry of Health
Project ID	Project Name		
P177535	Additional Financing for the Burkina Faso COVID-19 Preparedness and Response Project		
Parent Project ID (if any)	Parent Project Name		
P173858	Burkina Faso COVID-19 Preparedness and Response Project		
Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date
Health, Nutrition & Population	Investment Project Financing	12/6/2021	12/17/2021

**Proposed Development Objective**

To prevent, detect and respond to the threat posed by COVID-19, and strengthen national systems for public health preparedness in Burkina Faso.

Financing (in USD Million)	Amount
Current Financing	21.15
Proposed Additional Financing	61.30
Total Proposed Financing	82.45

**B. Is the project 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 [including overview of Country, Sectoral & Institutional Contexts and Relationship to CPF]**

The Additional Financing (AF) in the amount of US\$ 48.3 million equivalent IDA and US\$ 13 million equivalent grant from Global Financing Facility will support the costs of expanding activities of the Burkina Faso COVID-19



Preparedness and Response Project (P173858), in the amount of \$21.15 million IDA that was approved on April 28, 2020 under the SPRP. The primary objectives of this AF are in line with the parent's project PDO, which will remain unchanged.

The purpose of the proposed AF is to provide upfront financing to help the Government of Burkina Faso (GoBF) purchase and deploy COVID-19 vaccines that meet Bank's vaccine approval criteria, strengthen relevant health systems that are necessary for successful deployment, and ensure the continuity of essential health services (EHS). In line with the country's National Vaccine Deployment Plan, the proposed additional financing will support the GoBF to fully vaccinate 40 percent of the country's population (85 percent of the country's adult population) by: (i) funding the acquisition and deployment of vaccines doses through the African Union African Vaccine Acquisition Trust (AVAT) (up to 5.7 million J&J doses, to cover 19.1 percent of the country's population); and (ii) financing the deployment of vaccines subsidized through the COVAX mechanism , which will cover at least an additional 20 percent of the country's total population (as of November 22, 2021 the country has received 2,475,590 vaccine doses from COVAX to cover 6.8 percent of the country's total population).

In summary , the AF will include adjustment to the components content and costs. In the component 1 of the parent project the AF will include the following changes :

1- New Sub-Component 1.6. Vaccine Purchase and Deployment: This new sub-component will enable the acquisition of equipment and supplies directly linked to the COVID-19 vaccination campaign. This includes vaccine purchase, cold chain equipment , and consumables. Moreover, this sub-component will finance the operational costs of the deployment efforts (e.g., service delivery and human resources) as well as to provide TA to strengthen vaccine planning and management. This subcomponent will be entirely financed through the AF with an additional allocation of US\$45.3 million IDA.

2- Additional activities under Sub-Component 1.3. Health System Strengthening: Additional funds (US\$12 million GFF Grant) will be allocated to this component to implement activities related to the strengthening of the PHC and service delivery system to ensure access to essential community-based and facility services.

3- Additional activities under Sub-Component 1.4. Communication and Community Engagement: Additional funds (US\$2.0 million IDA) will be allocated to this component to implement communication campaigns related to the vaccination campaign and to address vaccine hesitancy and misinformation.

The Component 2 will be revised to reflect the expanded scope. Additional funds (US\$1.0 million IDA and US\$1.0 million GFF grant) will be allocated to this component to strengthen project management and to support M&E functions.

#### **D. Environmental and Social Overview**

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

This additional financing will be implemented throughout Burkina-Faso. It will contribute to COVID-19 response by acquiring COVID-19 vaccines, preparing the vaccination system for the deployment of the vaccines, and support the equitable distribution of these vaccines.



As of October 26, a total of 14,793 cases and 214 deaths have been confirmed in the country. Compared to its neighboring countries, Burkina Faso has shown a lower infection rate since the first case was confirmed on March 15, 2020. The country underwent its first significant wave of positive cases between November 2020 and February 2021, reaching 8.84 daily confirmed cases per million people. Currently the 7-day rolling average of cases has lowered to 0.27 confirmed cases per million people.

The proposed additional financing will help vaccinate 47% of the country's population, by availing an initial request of 1,866,932 doses to cover 8.6% the country's population through the African Vaccine Acquisition Trust (AVAT), led by the African Union (AU)<sup>2</sup> by the end of calendar year 2021. With the proposed financing envelope, the country will be able to maximize their request of J&J vaccine doses through the AVAT mechanism, with the possibility of acquiring an additional 3,798,579 doses to cover 17.5% of the country's total population by the first semester of 2022. The project will also support the deployment of vaccines received through the COVAX mechanism<sup>3</sup> to cover 20% of the country's total population (as of October 26th, the country has received 1,055,600 vaccine<sup>4</sup> doses from COVAX).

The potential E&S risks and impacts found during assessment are related to the generated wastes from vaccination activities, laboratories and health facilities as well as negative social impacts on the poor and / or other vulnerable groups. The prepared instruments contain measures to address these potential risks and impacts.

#### D. 2. Borrower's Institutional Capacity

The project will be implemented by the Ministry of Health (MoH) using the existing PIU for the Health Services Reinforcement Project (P164696, PRSS in French) and the parent Covid Project (P173858) . The Ministry has implemented numerous World Bank-financed projects in the health sector over the years and the existing PIU has a full time environmental and social specialist. The PIU has acquired experience on ESF instruments but has known some major delays in the preparation and disclosure of the safeguards instruments due to delays in procurement and the quality of instruments. The Environmental and Social Commitment Plan (ESCP) includes targeted support to strengthen the PIU's capacity , to deliver on the objectives of the COVID-19 response operation in a FCV context. The PIU needs to have permanent qualified environmental and social staff to manage the project E&S risk. At least one of the E&S (preferably the social specialist) should have communication skills to adequately implement the SEP . The PRSS has a full-time communication specialist assigned for the two projects (PRSS+COVID19) who can provide complementary support to E&S specialists in the implementation of the SEP and ESCP if deemed necessary.

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

### A. Environmental and Social Risk Classification (ESRC)

Substantial

#### Environmental Risk Rating

Substantial

Although the main long-term impacts are likely to be positive, there are several short-term risks that need to be considered. The main environmental risks include: (i) occupational health and safety (OHS) issues related to the availability and supply of personal protective equipment (PPE) for healthcare workers and the logistical challenges in transporting PPE across the country in a timely manner; environmental and community health risks related to storage, transportation and disposal of infected medical waste, the limited sanitary and hygiene services (clean water, soap, disinfectants) and limited isolation capabilities at health facilities across the country. Under the AF activities, the vaccination campaigns will generate additional wastes such as used PPEs, sharps and used and expired vaccine vials. The waste generated by laboratories, quarantine facilities, rehabilitation of existing cold chain rooms, 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

The social risk rating of the project is Substantial, possible risks and impacts are reversible but, given the highly infectious nature of the COVID-19 virus, some risks could potentially persist. The main social risks are related to: (i) difficulties in access to health services and facilities by vulnerable social groups such as : (poor, disabled, elderly, isolated communities, internally displaced people (IDP), people and communities living far from the health facilities, people with chronic conditions, , migrants and disadvantaged sub-groups of women); (ii) other social risks include the rise of social tensions that could be exacerbated by the lack of awareness regarding the change of behavior required to decrease transmission (social distancing, hand washing and hygiene), stigma associated with victims of COVID-19 and their families, perceived exclusion from key health facilities and services and misinformation regarding how COVID-19 is transmitted and prevented (iv) the accelerated pace of vaccine development and the information conveyed by media on associated risks that could increase public anxiety and compromise public acceptance and reluctance. In Burkina Faso, there is a broader social risk of inequity in access to vaccines, such as due to political pressures to provide vaccines to groups that are not prioritized due to need or vulnerability or should target groups be misaligned with available vaccines. This includes possible exclusion of population groups based on gender, race, ethnicity, refugee status, or others. Use of security force is not anticipated for the implementation of this AF. The social risks could be exacerbated by a lack of transparency in the dissemination of information by the government and the social media, which may create public mistrust of vaccines; (v) social conflicts and risks to human safety resulting from diagnostic testing; (vi) the limited availability of vaccines and social tensions related to the challenges of a pandemic situation; (vii) the risks of sexual exploitation and abuse/sexual harassment (SEA/SH) among patients and health care providers, particularly with regard to vaccine distribution; (viii) SEA/SH risks among patients and health care providers, especially in relation to distribution of lifesaving vaccines; (ix) inadequate data protection measures and insufficient or ineffective communication by stakeholders on vaccine deployment strategy; (x) risks related to adverse events following immunizations, which may lead to the stigmatization of vaccine-friendly populations in certain communities and contribute to refusal of vaccines or second dose. Another potential risk is the increased incidence of reprisals and retaliation especially against healthcare workers and researchers. This risk will be mitigated through explicit inclusion in robust stakeholder identification and consultation processes.

**Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH) Risk Rating** Substantial

No separate SEA/SH risk assigned in parent project but social risk screening shows substantial risk of SEA/SH during vaccine distribution.

## 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. 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.

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 are concerns in many countries of elite capture of COVID-19 vaccines. 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. To mitigate these risks, the MoH prepared an Environmental and Social Management Framework (ESMF), an Health Infection Control and Medical Waste Management Plan (HWMP) based on WHO protocols for managing risks associated with COVID-19, an Envirnmental and Social Commitment Plan (ESCP), Stakeholder Engagement Plan (SEP) and a Labor Management Procedure (LMP). For the AF, the ESCP and SEP have been updated before appraisal and the other instruments (ESMF, LMP and HWMP) prepared under the parent project will be used to implement the activities of the AF and where necessary, existing instruments will be revised to ensure they fully cover the additional risks associated with the AF funded activities before the start of activities and this will be specified in the ESCP.

The following environmental and social instruments (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 unsatisfactory in the last ISR as the PIU experienced significant challenges and delays in preparing the required safeguards instruments (ESMF, LMP and HWMP) within the timelines specified in the ESCP.. An assessment of the situation was carried out with the support of the Bank and measures were put in place to ensure that implementation is back on track. The HWMP has been finalized and disclosed when? . The ESMF and LMP are being finalized and will be disclosed by end of November. The parent project instruments will be used to implement the AF activities and where necessary will be updated to take into account the additional risks associated with the AF funded activities before the start of activities.. As outlined in the SEP, the PIU will ensure appropriate stakeholder engagement, adequate awareness raising and timely dissemination of information. This will help address: (i) conflicts resulting from 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 PIU is implementing an action plan with clear deadlines to deliver on its commitments. The experience gained with the parent project will allow the PIU to review its organization for AF activities..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 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.



## ESS10 Stakeholder Engagement and Information Disclosure

Like the Parent Project, the social risks of the Additional Financing are considered Substantial. 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 was given to the vaccine roll-out strategy. The updated SEP will be disclosed by Project appraisal. An assessment of the functioning of the current GM was conducted as part of the SEP update process to ensure it includes the requirements in relation to the potential risks and impacts of the AF and it is accessible to potential new stakeholders. Based on the assessment outcomes, the recommendations regarding the SEA/SI in the current GM will be strengthened to include SEA/SI-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 staff in health facilities and laboratory staff.

During implementation, the client will include the relevant sections of 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. Child labor and forced labor are prohibited under the project. 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 of the Additional Financing includes measures to ensure that the health and safety of workers, especially women, receives adequate attention; including the risks related to SEA/SI. The workers who will be recruited under the AF will have to sign the project's Code of Conduct and they will be trained and sensitized regarding SEA / SI 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, taking 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 Health 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 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 GM for workers and the roles and responsibilities for monitoring these workers. As for the project, the GM for workers outlines specific procedures to ensure the ethical and confidential management and resolution of SEA / SI complaints, including prompt referral of survivors to appropriate support services. These different arrangements for dealing with the SEA / SI 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 ESMF outlines OHS measures and procedures for monitoring entry into healthcare facilities, including minimizing visitors and undergoing strict checks before entering; procedures for protection of workers in relation to infection control precautions; provision of immediate and ongoing training on the



procedures to all categories of workers, and post signage in all public spaces mandating hand hygiene and personal protective equipment (PPE); ensuring adequate supplies of PPE (particularly face masks, gowns, gloves, hand-washing soap and sanitizers); and generally ensuring adequate OHS protections in accordance with WHO guidelines, the EHSGs and consistent with the evolving international good practice 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 neighboring communities 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. The Infection Control Plan & Biomedical Waste Management describes measures to ensure the waste management practices at the various hospitals receiving assistance from the project comply with the EHSG and are in accordance 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. For the AF, each region's incinerator capacity to cover the incineration needs of the districts will be evaluated. The incinerators of the Epidemiological Treatment Centers (ETCs), hospitals and health centers could also be used. The AF will finance the acquisition for health centers of an incinerator with a capacity of 800 ° C minimum temperatures and meeting the standards in force in terms of smoke emission. . The subcommittee on vaccines and logistics was created to identify the additional need for strengthening the waste management system linked to the COVID-19 vaccination. The plan will include the purchase and installation of incinerators (environmentally friendly) to ensure appropriate COVID-19 waste management. The analysis of the situation shows the start of the implementation of certain activities such as the training of stakeholders. These activities will accompany the AF with the update of the ESMF which will also take into account the risks linked to the production of hazardous waste during the rehabilitation of cold rooms. This hazardous waste consisting of electrical and electronic equipment and thermal insulation materials that may contain refrigerants must be managed properly to avoid any risk of environmental pollution.

### **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. The Health Infection Control Plan and Biomedical 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 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 takes into account the requirements regarding the AF activities including the potential risk linked to the generation of hazardous waste during the rehabilitation of existing cold rooms. Mandatory vaccination is not expected under this project and the administration of vaccines to beneficiaries will be on a voluntary basis.

#### **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**

This ESS is not relevant. No construction or major rehabilitation activities are expected in this project and all works will be conducted within existing facilities. The risk on natural resources, biodiversity and natural habitats is negligible insofar as laboratories and health centers are in urban areas and medical waste is handled directly at these health facilities.

#### **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**

The project is planning minor rehabilitation of cold rooms so this standard is relevant at this time. 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**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:**

N/A

**IV. CONTACT POINTS****World Bank**

Contact: Moussa Dieng Title: Senior Economist

Telephone No: 5354+4165 / 221-33-8594165 Email: mdieng@worldbank.org

**Borrower/Client/Recipient**

Borrower: Burkina Faso

**Implementing Agency(ies)**

Implementing Agency: Ministry of Health

**V. FOR MORE INFORMATION CONTACT**

The World Bank  
1818 H Street, NW  
Washington, D.C. 20433  
Telephone: (202) 473-1000  
Web: <http://www.worldbank.org/projects>

**VI. APPROVAL**

Task Team Leader(s): Moussa Dieng

Practice Manager (ENR/Social) Maria Sarraf Cleared on 23-Nov-2021 at 18:14:50 GMT-05:00



**The World Bank**

Additional Financing for the Burkina Faso COVID-19 Preparedness and Response Project (P177535)

Safeguards Advisor ESSA

null on