



# Project Information Document (PID)

Appraisal Stage | Date Prepared/Updated: 12-Dec-2021 | Report No: PIDA33085

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

Country Guinea-Bissau	Project ID P178198	Project Name Additional Financing for the Guinea-Bissau COVID-19 Vaccine Project	Parent Project ID (if any) P176721
Parent Project Name GUINEA-BISSAU COVID-19 VACCINE PROJECT	Region AFRICA WEST	Estimated Appraisal Date 08-Dec-2021	Estimated Board Date 23-Dec-2021
Practice Area (Lead) Health, Nutrition & Population	Financing Instrument Investment Project Financing	Borrower(s) Republic of Guinea Bissau	Implementing Agency Office of the High Commissioner for COVID-19

## Proposed Development Objective(s) Parent

The Project Development Objective is to prevent, detect and response to the threat posed by COVID-19 and strengthen national systems for public health preparedness in Guinea-Bissau.

## Components

Emergency COVID-19 Response  
Project Management and M&E

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

<b>Total Project Cost</b>	2.20
<b>Total Financing</b>	2.20
<b>of which IBRD/IDA</b>	2.20
<b>Financing Gap</b>	0.00

**DETAILS****World Bank Group Financing**

International Development Association (IDA)	2.20
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IDA Grant	2.20
Environmental and Social Risk Classification	
Substantial	

## B. Introduction and Context

1. **This Project Paper (PP) seeks the approval of the World Bank’s Regional Vice-President to provide a grant in the amount of US\$2.2 million equivalent from the International Development Association (IDA) for an Additional Financing (AF).** This AF would support the costs of expanding activities of the Guinea-Bissau COVID-19 Vaccine Project (P176721) under the COVID-19 Strategic Preparedness and Response Plan (SPRP) using the Multiphase Programmatic Approach (MPA), approved by the Board on April 2, 2020, and the vaccines AF to the SPRP approved on October 13, 2020.<sup>1</sup> The primary objectives of the AF are to enable affordable and equitable access to COVID-19 vaccines under the parent project. The Guinea-Bissau COVID-19 Vaccine Project (P176721) in an amount of US\$5.0 million equivalent was approved on June 29, 2021, was prepared under the SPRP, and became effective on October 20, 2021.

2. **The purpose of the proposed AF is to provide upfront financing to help the Government of Guinea-Bissau (GoGB) to purchase additional COVID-19 vaccine doses through the African Vaccine Acquisition Task Team (AVATT), that meet the World Bank’s Vaccine Approval Criteria (VAC).** The GoGB’s target for COVID-19 vaccinations is to have 70 percent of the total population vaccinated (12 years of age and older) by the end of CY23. Currently, only 50.4 percent of the total population is eligible since COVID-19 vaccines are only being administered to adults 18 years and older. The remaining 19.6 percent of the total population represent adolescents; 12-17 years of age. The AVATT, convened by the African Union (AU), has agreed with the World Bank to provide the AU member states additional access to COVID-19 vaccines through the United Nations Children’s Fund (UNICEF) as a procurement agency. The proposed AF will help vaccinate an additional 15.86 percent of the Guinea-Bissau total population by completing the purchase of 300,000 Johnson and Johnson (J&J) vaccines, which would contribute to increasing the cumulative vaccination coverage. World Bank financing for the COVID-19 vaccines and deployment will continue to follow the World Bank’s VAC. As of April 16, 2021, the World Bank will accept as threshold for eligibility of International World Bank for Reconstruction and Development IBRD/IDA resources in COVID-19 vaccine acquisition and/or deployment under all World Bank-financed projects: (i) the vaccine has received regular or emergency licensure or authorization from at least one of the Stringent Regulatory Authorities (SRAs) identified by the World Health Organization (WHO) for vaccines procured and/or supplied under the COVAX Facility, as may be amended from time to time by WHO; or (ii) the vaccine has

<sup>1</sup> The World Bank approved a US\$12 billion World Bank Group (WBG) Fast Track COVID-19 Facility (FTCF or “the Facility”) to assist IBRD and IDA countries in addressing the global pandemic and its impacts. Of this amount, US\$6 billion came from IBRD/IDA (“the Bank”) and US\$6 billion from the International Finance Corporation (IFC). The IFC subsequently increased its contribution to US\$8 billion, bringing the FTCF total to US\$14 billion. The AF of US\$12 billion (IBRD/IDA) was approved on October 13, 2020 to support the purchase and deployment of vaccines, as well as strengthening the related immunization and healthcare delivery system.



received WHO Prequalification (PQ) or WHO Emergency Use Listing (EUL). The country will continue to provide vaccinations free of charge to the population.

3. **The need for additional resources to expand the COVID-19 response was formally conveyed by the Government of Guinea-Bissau on October 14, 2021** (Ref. No 242/GMPIR/2021). The Government has requested support for acquisition of additional doses of COVID-19 vaccine in the amount of US\$2.2 million from IDA financing. This AF will form part of an expanded health response to the pandemic, which is being supported by the development partners (DP) under the coordination of the Government of Guinea-Bissau. Additional World Bank financing will provide essential resources to enable the expansion of a sustained and comprehensive pandemic response that will appropriately include vaccination in Guinea-Bissau.

#### Country Context

4. **Guinea-Bissau, the 12th poorest country in the world, has faced continuous political instability, poverty and poor human development outcomes since its independence in 1973.** With a Gross National Income (GNI) per capita of US\$820 (2019), the country ranks 175th out of 189 countries and territories in the 2020 Human Development Report. The Country's Human Development Index (HDI) is 0.480, which is below the average among countries in the low human development category (0.513) and well below the average among countries in Sub-Saharan Africa (0.547). The population of Guinea-Bissau is estimated at 1.92 million (2019) of which 43.7 percent live in urban areas and 20 percent live in the capital Bissau.<sup>2</sup>

5. **Similarly, to other neighboring countries, the Guinea-Bissau economy was impacted by the COVID-19 pandemic.** The global economy contracted by 4.3 percent in 2020, but forecasts for 2021 show it is expected to bounce back at the fastest post-recession pace in 80 years and expand by 5.6 percent. Similarly, the COVID-19 pandemic also caused the economy of Guinea-Bissau to suffer in 2020 and it contracted by 1.4 percent, in real terms. However, it is forecasted to recover quickly and real GDP growth for 2021 should reach 3.3 percent, and 4 percent in 2022. Agriculture is still the mainstay of the country's economy driven by cashew nut production, which generates about 95 percent of the country's foreign exchange, 17 percent of fiscal revenues, and accounts for over 47 percent of GDP. Over 80 percent of the population relies on agriculture for their livelihood and the sector employs close to 70 percent of the country's work force - most of whom are women.<sup>3</sup> Lockdown measures in 2020 to contain the pandemic have had significant impact on domestic and global cashew demand and prices.

#### Sectoral and Institutional Context

6. **Latest COVID-19 situation in the country.** Guinea-Bissau registered its first COVID-19 case on March 24, 2020, and as of December 7, 2021 there were 6,444 confirmed cases and 149 deaths (Figure 1). Following the first case detection, the country experienced a significant increase in the number of daily cases, which peaked in the second week of May 2020 (first wave) and the first week of February 2021 (second wave). Similarly, to other neighboring countries, Guinea-Bissau experienced a third wave in July-August 2021 due to the delta variant. Confirmed cases have doubled in a July-August 2021 compared to the number of confirmed cases throughout the first year of the pandemic (the country has registered 27 percent of cumulative confirmed cases in this period since the beginning of the pandemic). Guinea-Bissau

<sup>2</sup> World Bank. World Development Indicators (2019).

<sup>3</sup> Female employment in agriculture in Guinea-Bissau was 70.7 percent in 2019, compared with 65.8 percent for male employment-<http://datatopics.worldbank.org/gender/country/guinea-bissau>

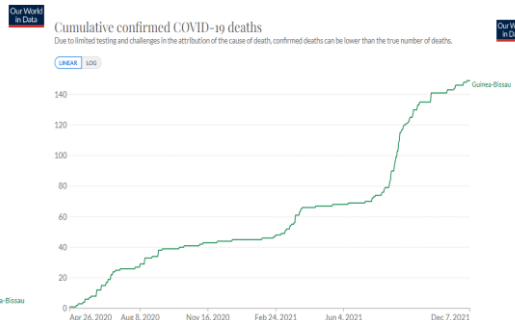
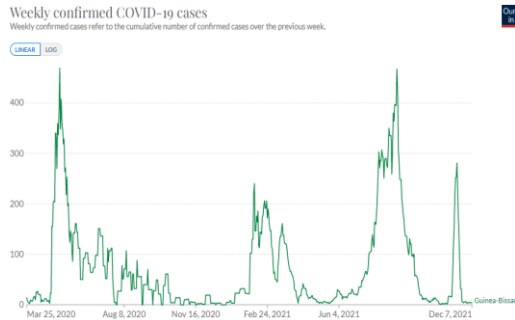


is ranked 14<sup>th</sup> out of 15 in the highest number of cases and highest number of deaths due to COVID-19 in West Africa.

Figure 1: COVID-19 in Guinea-Bissau

a) Number of cumulative confirmed cases

b) Number of confirmed deaths



7. **The COVID-19 Vaccination campaign started on April 2, 2021 with priority groups as planned in the National Deployment and Vaccination Plan (NDVP).** As of December 7, 2021, 388 626 doses were administered, or 12.5 percent of the total population is fully vaccinated, and 35 percent of the eligible targeted population has been fully vaccinated. In terms of Adverse Events Following Immunization (AEFIs), the country has registered 532 moderate AEFI cases, 5 severe AEFI cases, and 4 deaths are investigation to determine if it is due to COVID-19. The main challenges with the COVID-19 vaccination campaigns include: (i) low turnout for COVID-19 vaccinations; (ii) the weakness in communication and community sensitization which has also led to low turnout due to the lack of information on safety and efficacy; (iii) the short shelf-life of the vaccines received through COVAX, including the bilateral donations, have in some cases led to vaccine waste due to low vaccination turnout; (iv) vaccine storage challenges and cold chain capacity at central and regional levels had stopped the country from accepting new vaccine donations in October 2021; (v) active surveillance to detect and report AEFIs needs to be strengthened; (vi) the coordination challenges between the various agencies and partners is hampering COVID-19 vaccination efforts; and (vii) the national strike of healthcare workers in the public sector has impacted the availability of health professionals as of the end of October 2021. Moreover, as the country increases its vaccine coverage, more emphasis will have to be made on vaccination of adolescents (12-17 years of age), which represent approximately 19.6 percent of the national target.

8. **To address some of these challenges, the government instituted/implemented the following changes:** (i) **to address the vaccine hesitancy**, (a) the Government has opened eligibility to all population over 18 years of age since the first campaign (April 2021), (b) implemented vaccination campaigns rather than focusing only on fixed health facilities, (c) recently required vaccination (from November 2021) for the use of public transport, entry into schools and universities and travel between regions or a valid negative Polymerase Chain Reaction (PCR) test within the last 15 days<sup>4</sup>, and (d) intensified communication

<sup>4</sup> The decree states that as of November 10, partially vaccinated populations (one of two doses) or those with a valid negative PCR test within the last 15 days will be able to access public transportation, schools/universities, and travel between regions. As of January 10, 2022, populations will need to be fully vaccinated (two doses) or have a valid negative PCR test within the last 15 days to access these same locations.



for vaccination throughout the country; (ii) **to solve storage challenges**, (a) the Government asked the Central Drug Purchasing Office (CECOME-Central das Compras de Medicamentos) to store some of the Sinopharm vaccines that take up a lot of space (one vial = one dose), (b) vaccination campaigns have been accelerated, such as the last vaccination campaign (October-November 2021) which was successful and freed up space, (c) additional refrigerators and freezers have also arrived in the country to allow for more central storage, including for vaccines that require ultra-cold storage; (iv) **to address coordination issues**, the Office of the High Commissioner for COVID-19 and the Ministry of Public Health (MINSAP) are meeting more regularly to ensure better planning and deployment of COVID-19 vaccines; and (v) **to address the health care providers' strike and its impact on vaccine deployment**, the government will continue to deploy temporary vaccination teams during vaccination campaigns and to use the military health services as vaccination sites (opening of 7 additional vaccination sites managed by the military health services). The Government is also preparing a specific strategy to ensure the vaccination of adolescents (12-17 years old). The National Deployment and Vaccination Plan (NDVP), which was revised in November 2021 (not yet validated), provides additional details regarding the planned strategy for adolescents.

**9. Guinea-Bissau's health system faces severe shortcomings to adequately respond to a pandemic on the scale of the COVID-19, which makes access to COVID-19 vaccines even more critical.** The country's capacity for detection and reporting (which encompasses laboratory systems, real-time surveillance and reporting, the epidemiological workforce, and data integration across human/animal/environmental health sectors) is considered among the least prepared as per the Global Health Security Index (with a score of 23.4 vs average of 41.9, and a ranking of 145).<sup>5</sup> The Joint External Evaluation (JEE) of the implementation of International Health Regulations (IHR) (2005) completed in July 2019 found very low capacity in a number of areas, including: (i) legal framework; (ii) financing; (iii) coordination; (iv) biosafety and biosecurity; (v) the national laboratory system; (vi) points of entry; (vii) emergency preparedness and coordination; and (viii) emergency medical teams. In the absence of health system's capacity to detect, prevent the spread, and respond to a pandemic such as COVID-19, widespread access to vaccines becomes even more paramount for the country's recovery.

**10. The proposed AF will play a critical role in increasing access to affordable vaccines in Guinea-Bissau.** The additional vaccines that will be procured through this financing will enable the country to increase its vaccination coverage by 15.86 percent. Moreover, the vaccines that will be purchased are one-dose regimens (Johnson and Johnson), which will enable an increase in fully vaccinated people, particularly in hard-to-reach areas that are difficult for follow-up with patients. The financing for the parent project will ensure that some of the COVID-19 vaccines that will be procured are WHO-approved for adolescents (12-17 years of age). COVID-19 vaccination is essential to protecting lives and enabling the country to reopen safely. The global economy will not recover fully until people feel they can live, socialize, work, and travel with confidence. Given the importance of limiting the spread of COVID-19 to both health and economic recovery, providing access to COVID-19 vaccines will be critical to accelerate economic and social recovery.

### C. Proposed Development Objective

Original PDO

<sup>5</sup> <https://www.ghsindex.org/wp-content/uploads/2019/10/2019-Global-Health-Security-Index.pdf>



11. The Project Development Objective (PDO) is to prevent, detect and response to the threat posed by COVID-19 and strengthen national systems for public health preparedness in Guinea-Bissau.

## Current PDO

12. The PDO remains the same for the Additional Financing.

## Key Results

13. PDO level indicators have been revised:
- Target population fully vaccinated (percentage) [by sex]
  - Population in the priority group fully vaccinated (percentage) [by sex]

**D. Project Description**

14. **Vaccine purchasing will be done through Component 1 of the Global COVID-19 MPA.** The support for vaccines, when available, which was anticipated in the initial Global COVID-19 MPA, will be added as part of the containment and mitigation measures to prevent the spread of COVID-19 and deaths under **Component 1: Emergency COVID-19 Response (parent project: US\$4.7 million; AF: US\$2.2 million)**. Guinea-Bissau will use the option for vaccine purchase and financing mechanisms through AVATT. Deployment of these vaccines will be covered under the parent project. This financing will enable the GoGB to complete a purchase of an additional 300,000 J&J vaccine doses, which will increase the coverage of the total population by 15.86 percent. This additional financing will enable the country to progress towards its 70 percent target coverage in terms of vaccine acquisition. Moreover, this additional financing will also allow for re-vaccination efforts if they are warranted by peer-reviewed scientific knowledge at the time. In the case that re-vaccination is required, limited priority populations (such as health workers and the elderly) will need to be targeted for re-vaccination given constraints on vaccine production capacity and equity considerations (i.e., tradeoffs between broader population coverage and re-vaccination).

**Table 1: Priority Groups for Vaccination in Guinea-Bissau**

Ranking of vulnerable group	Priority groups	Population estimates	% of Population
<i>First</i>	Public and private Healthcare workers, including Community Health Agents	15,690	0.83
	Population with underlying conditions	41,060	2.17
	<b>Sub-total</b>	<b>56,750</b>	<b>3.00</b>
<i>Second</i>	Population over the age of 50	166,469	8.8
	Police, National Guard, Border control and customs agents, firefighters, and Civil Protection	16,922	0.9
	Teachers and school support staff	13,092	0.69



	Army (estimation)	40,000	2.11
	People working in public and private markets, restaurants, locals, banks	65,831	3.48
	Other essential workers	19,230	1.01
	<b>Sub-total priority groups</b>	<b>321,544</b>	<b>17.00</b>
<i>Third</i>	<b>Population over the age of 12</b>	<b>945,845</b>	<b>50.00</b>
	<b>Sub-total</b>	<b>945,845</b>	<b>50.00</b>
	<b>Total</b>	<b>1,324,183</b>	<b>70.00</b>

15. The overall budget of this AF will be US\$2.2 million equivalent, all allocated to Component 1 for vaccine acquisition (see Table 4 below). Table 2 provides a summary of vaccine sourcing and World Bank financing.

**Table 2: Project Cost and Financing**

Project Components	Parent Project Cost (US\$ million)	AF1 Project Cost (US\$ million)	Parent Project + AF (US\$ million)
<b>Component 1: Emergency COVID-19 Response</b>	<b>4.7</b>	<b>2.2</b>	<b>6.9</b>
<i>Sub-component 1.1: COVID-19 Vaccine Acquisition, Planning and Distribution</i>	2.62	2.2	4.82
<i>Sub-component 1.2: COVID-19 Vaccine Planning and Distribution</i>	2.08	0	2.08
<b>Component 2: Project Management and M&amp;E</b>	<b>0.30</b>	<b>0</b>	<b>0.30</b>
<b>Total Costs</b>	<b>5.00</b>	<b>2.2</b>	<b>7.2</b>

#### 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





## E. Implementation

### Institutional and Implementation Arrangements

**16. The Office of the High Commissioner for COVID-19 will remain the implementing agency of the AF.**

The High Commissioner will be responsible for the overall coordination, oversight, and technical implementation of the project. The REDISSE II Project (P159040) PIU, which was established in 2017 within the MINSAP, will report directly to the Office of the High Commissioner for COVID-19 and will be responsible for the day-to-day project management, including fiduciary management (procurement and FM) and will: (i) coordinate project activities; (ii) ensure the FM of the project activities in all components; and (iii) prepare consolidated annual work plans, budgets, M&E, and the implementation report of the project to be submitted to the World Bank. The SIVE coordinated by the MINSAP is responsible for the COVID-19 vaccinations and deployment, including the quantification and forecasting of supply needs. The project's Administrative and FM Manual and POM financial will integrate the AF activities and the roles and responsibilities of the additional actors within one month of effectiveness.

## CONTACT POINT

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### Borrower/Client/Recipient

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**APPROVAL**

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