



Additional Financing Appraisal Environmental and
Social Review Summary
Appraisal Stage
(AF ESRS Appraisal Stage)

Date Prepared/Updated: 09/27/2021 | Report No: ESRSAFA238



BASIC INFORMATION

A. Basic Project Data

Country	Region	Borrower(s)	Implementing Agency(ies)
Gambia, The	AFRICA WEST	The Gambia	Ministry of Health
Project ID	Project Name		
P177263	AF to The Gambia Essential Health Services Strengthening Project		
Parent Project ID (if any)	Parent Project Name		
P173287	The Gambia Essential Health Services Strengthening Project		
Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date
Health, Nutrition & Population	Investment Project Financing	11/1/2021	1/28/2022

Proposed Development Objective

To improve quality and utilization of essential health services in The Gambia.

Financing (in USD Million)	Amount
Current Financing	0.00
Proposed Additional Financing	0.00
Total Proposed Financing	0.00

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 proposed project will support the following:

- a. Improving the Delivery and Utilization of Quality Essential Primary Health Care Services
- b. Project management



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 Gambia. Below is a list of health facilities and locations for renovations/constructions of selected health facilities including safe removal of asbestos products such as corrugated asbestos roof sheets, and asbestos-cement floor tiles. None of these locations are close to sensitive habitats or areas of social vulnerability.

Renovation and Upgrade

1. Basse District Hospital
2. Brikama District Hospital
3. Birkama Ba Health Center - including a new operating room for caesarean delivery which will be located close to the maternity ward
4. Bwiam General Hospital

Construction

5. New neonatal ward at Edward Francis Small Teaching Hospital
6. Construction of the Emergency Treatment Centre (ETC) Intensive Care Unit, the Emergency Observation and Treatment Centre, the Public Health Laboratory and Training Centre, the Blood Transfusion Centre, and Conference Centre

Safe removal of asbestos

7. Bwiam General Hospital (old health center)
8. North Bank East Regional Health Directorate office and staff quarters
9. Farafenni old Health center
10. Mansa Konko staff quarters
11. Kiang Karantaba Health Center
12. Kudang Health Center and staff quarters
13. Bansang Regional Health Directorate office and staff quarters
14. Bansang School for Enrolled Nurses and Midwives
15. Bansang General Hospital Staff quarters
16. Kaur Health center
17. Yorro Bawol staff quarters
18. Basse District hospital
19. Brikama district hospital

D. 2. Borrower's Institutional Capacity

The project will be implemented by the Projects Coordination Unit (PCU) of the Ministry of Health (MoH). The PCU has experience working on projects financed by multilateral development partners and has gained additional experience with the Parent Project as well as the COVID-19 project (P173798). The PCU has a Senior Operations



Officer who is the main coordinator and focal point for environmental and social issues, supported by the MOH Environmental Health Program Manager, the Health Communications Manager and the SEA/SH/GBV Focal Point. Implementation of the E&S agenda has been satisfactory, particularly with regard to medical waste management and the preparation of ESMPs. The same PCU has been implementing the E&S of The Gambia COVID-19 Preparedness and Response Project (P173798) since April 2020 subsequently the parent project of this AF. The PCU has benefited from a number of capacity-building activities organized by the World Bank team : a) orientation on November 17, 2020 for 37 key stakeholders working on this project to ensure appropriate E&S Due Diligence Report is carried out; b) three-day training (December 1-3, 2020) on implementing the E&S framework in WBG-financed projects for implementing agencies; c) workshop on sexual exploitation and abuse and sexual harassment risk management in WB-financed operations in The Gambia during December 8-10, 2020; and d) training on May 26, 2021 for more than two dozen participants and the topics covered included expanding the stakeholder communication program, ESMPs, SEA/SH Action Plan and health care waste treatment. Additionally, as part of the PCU commitment to monitor and report on the status of E&S due diligence, E&S Due Diligence Reports are submitted quarterly to the WBG and all required project actions are being tracked and reported on. I coordinate with the various related Government institutions to be involved in the implementation of the ESMF.

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

A. Environmental and Social Risk Classification (ESRC)

Moderate

Environmental Risk Rating

Moderate

The Parent Project is expected to have positive environmental impacts, insofar as it should continue to improve the quality of health services. The activities financed by the AF are expected to further enhance these positive impacts and help to improve utilization of quality health services; and building resilient and sustainable health systems to support the delivery of quality health services. The environmental risk can be considered as moderate because of inherent occupational health and safety risks for workers and community during the implementation of renovation, construction and removal of asbestos. In addition, there is also the production of biomedical waste in health facilities. The main environmental risks are: (i) the occupational health and safety issues related to the construction of the Emergency Treatment Centre Intensive Care Unit, the Emergency Observation and Treatment Centre, the Public Health Laboratory and Training Centre, the Blood Transfusion Centre, and Conference Centre at Farato and the New neonatal ward at the Edward Francis Small Teaching Hospital. Indeed, the level of risk will depend on the design of the project (construction in height, material used, capacity constructor...) (ii) the occupational health and safety (OHS) issues related to the removal of asbestos which is a cancer-causing substance; and (iii) medical waste management and community health and safety issues related to the handling, transportation and disposal of healthcare waste. These risks will be mitigated by preparing required ESMPs for all renovation/construction subprojects, including an asbestos abatement plan. An Environmental and Social Impact Assessment (ESIA) report plus Resettlement Action Plan (RAP) for the Project Affected Persons for the construction at Farato has developed under The Gambia COVID-19 Preparedness and Response Project (P173798), for the Bank's approval. The RAP will be implemented prior to the commencement of the construction. Regarding the management of biomedical waste, the Infection Prevention and Control and Waste Management Plan (IPC&WMP) will follow already established procedures defined in the earlier COVID-19 project and stipulated also in the ESMF. The E&S firm that prepared the



ESIA and RAP will be the same firm that will assist MOH to implement the RAP and supervise the contractor. MOH is finalizing the selection of a firm to assist with the E&S of the other civil works noted above.

Social Risk Rating

Moderate

The project's diverse set of activities are generally expected to provide significant social benefits to the targeted beneficiaries, including marginalized and disadvantaged people. The number of limited risks identified for the Parent project are also applicable to the activities of the AF. These include: a) Exclusion of vulnerable groups from various outreach and registration activities (health insurance, CVRS); b) Privacy and data misuse issues due to transition from written to electronic records. c) SEA/SH risks in relation to the construction/renovation activities. MOH has developed and is implementing a SEA/SH action plan. No additional resettlement is expected.

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 additional financing activities will have positive environmental and social impacts as they should improve quality and utilization of essential health services in The Gambia. It will entail improving the quality of essential primary health care services delivery using a results-based financing approach; community engagement to improve utilization of quality health services; and building resilient and sustainable health systems to support the delivery of quality health services.

However, the project could also cause moderate environmental, health and safety risks due to the potential risks associated with the renovation/construction of a new facility as well as the dangerous and potentially infectious nature of the biomedical waste. In addition, there is the risk of exposure to asbestos fibers for workers and neighboring communities during the removal of asbestos.

The ESMF prepared for the parent project gives guidelines for the environmental and social assessments to be carried out for the sub-projects and the mitigation measures to be implemented for the various activities proposed (construction and renovation work, management of waste from health activities, prevention and control of infectious diseases). The ESMF has been updated by the PCU to incorporate the activities of the AF for clearance and disclosure prior to appraisal. Regarding the Farato Medical Center the ESIA is being finalized with the consideration of the comments of WAESF team and RSA by PCU/SDF.

The mitigation measures are based on the Environmental and Social Codes of Practice (ESCP) included in the ESMF, the EHS guidelines of the World Bank and other IPMIs, with the responsibilities within the Ministry of Health, the requirements training, implementation schedule and budget. The ESMF should only require a minor revision with the integration of the aspects related to the removal of asbestos.

Community engagement to improve utilization of quality health services will scale-up and expand the highly successful Social and Behavior Change Communication (SBCC) activities initiated in the Maternal and Child Nutrition and Health Results Project (MCNHRP) which closed on June 30, 2021. The SBCC Program will focus on prevention activities and delivery of PHC as well as nutrition, women and girls' empowerment, NCDs, Water, Sanitation, and Hygiene (WASH), and climate change.

Energy-efficient measures will be put in place to reduce greenhouse gas emissions such as the procurement of energy-efficient equipment and materials for renovations as well as climate-resilient materials to mitigate flood risks

Public Disclosure



and climate-related emergencies with activities under Subcomponent 1.3 i.e. a) the construction, equipment and construction supervision of the proposed national emergency treatment center intensive care unit, emergency observation and treatment center, national public health laboratory and training center, and national blood transfusion center; and b) renovation and equipment of selected health facilities including safe removal of damaged asbestos roofing sheets.

ESS10 Stakeholder Engagement and Information Disclosure

The Stakeholder Engagement Plan (SEP), prepared for the Parent Project has been under implementation for several months, and a number of in-person and virtual consultations and meetings with key stakeholders have taken place and have been reported through the Quarterly E&S Monitoring reports. As part of the SEP, a Grievance Mechanism has been put in place, which has been operational, primarily in the form of a “Hotline”. The SEP has been updated for the AF to incorporate stakeholder analysis and engagement strategy, particularly with regard to project-affected people in the vicinity of the additional rehabilitation and construction sites. The GM might be further refined based on the lessons learned from early implementation.

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

Under the Parent Project, Labor Management Procedures (LMPs) were developed to provide provisions on terms and conditions of employment, nondiscrimination and equal opportunity, as well as occupational health and safety. The LMP for the AF will review the worker categories in light of the additional activities and, if needed, amend some of the Procedures.

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 positive impacts as they should improve quality and utilization of essential health services.

Resource Efficiency: The AF will support the provision of equipment and renovation/construction of selected health facilities noted above.. The Farato Medical Centre is expected to generate temporary and long-term employment, improved health and consequently better livelihoods. Despite the potential benefits, the project is also likely to create socio-economic negative impacts such as involuntary resettlement and loss of livelihood as a result of the displacement of current land users; public and occupational health and safety risks; VAC, GBV, SEA/H; spreading on infectious diseases and labor related issues. To address displacement and livelihood loss due to the Project implementation, the FMC RAP will be fully implemented and the ESIA recommend continuous stakeholder consultation and participation during all phases to encourage ownership and prevent grievances. Training of workers in implementing their specific roles in the ESMPs and education of the public is essential.

Energy efficiency measures will be put in place to reduce greenhouse gas emissions, such as the purchase of energy efficient equipment and materials for renovations, as well as climate resilient materials to mitigate flooding risks and climate related emergencies.



Environment, Health and Safety: All civil works (renovation/upgrading and construction) planned with the AF will be located on public land within the health center or referral hospital. These health facility improvements/renovations may generate limited negative impacts such as dust, noise, vibration, construction waste, sewage, traffic obstruction, safety issues, construction workers, etc. and environmental remediation and surrounding residents. These impacts are considered to be site-specific, temporary, and can be mitigated by good design and construction practices. A generic environmental management plan checklist (which includes ESCOPs) will be followed to avoid or minimize the impacts of these minor civil works.

Air Emissions: The planned work with the AF is likely to have impacts on air quality with dust and particulate emissions. Measures will be put in place to reduce the impact of air emissions during this construction phase. All of these provisions are detailed in the ESMF ESCOPs.

Healthcare Waste Management: The ICWMP contained in the ESMF of the parent project is currently operational and the quarterly reports submitted by the PCU provide the status of implementation of planned activities. The implementation of the ICWMP can be considered satisfactory following the consideration of the Bank's recommendations for improvement of the content of the quarterly reports. This implementation of the ICWMP will continue with the AF activities and follow-up will be done to ensure environmental and social requirements.

Construction Waste: The ESMPs, which will be prepared for each site, will include procedures for the treatment of construction waste. Additional risks and impacts associated with construction waste management will be managed by the contractors under the supervision of representatives of the MOH, PCU as well as the Consultant who will be engaged during the construction phase.

Asbestos: The AF provides for the removal of asbestos from 13 health structures and health facilities. Exposure to asbestos can have negative impacts on the environment and human health. A local architectural firm, to undertake a survey of the 13 facilities in order to establish the presence of asbestos products in the buildings. The report indicated damaged asbestos roofing sheets in all of the 13 health facilities surveyed, which are leaking and releasing dangerous asbestos fibers into the air and will require safe removal and disposal. The asbestos management procedure is described in the updated ESMF.

ESS4 Community Health and Safety

The Community Health and Safety impacts identified under the Parent Project include temporary exposure to pollution, increased traffic leading to accidents and the potential for gender-based violence committed by the workforce. To mitigate against them the ESMF has provided guidance, and an SEA/SH Action Plan has also been developed, validated and approved. These instruments will also apply to the new rehabilitation and construction activities envisaged by the AF.

ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement



This standard is not relevant to the Additional Financing because the project is only financing construction activities within existing compounds that do not require any land acquisition.

ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources

This standard is not relevant because all project activities are on existing compounds and project activities will not alter or cause destruction of any critical or sensitive natural habitats.

ESS7 Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities

This standard is not relevant as there are no Indigenous Peoples/Sub-Saharan Historically Underserved Traditional Local Communities in the project area of influence.

ESS8 Cultural Heritage

This standard is not relevant because all civil works are on existing compounds that will not affect any cultural heritage.

ESS9 Financial Intermediaries

This standard is not relevant as there are no financial intermediaries involved.

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

Public Disclosure



The World Bank

AF to The Gambia Essential Health Services Strengthening Project (P177263)

World Bank

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Borrower/Client/Recipient

Borrower: The Gambia

Implementing Agency(ies)

Implementing Agency: Ministry of Health

V. FOR MORE INFORMATION CONTACT

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VI. APPROVAL

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