

# **LABOR MANAGEMENT PROCEDURES (LMP)**

Yemen COVID-19 Response Project (P173862)  
Yemen COVID-19 Response Project Additional Financing  
(P176827)

**May 2021**

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## Introduction

This Labor Management Procedures (LMP) are applicable to the Additional Financing Yemen COVID-19 Response Project in Yemen. These procedures set out the way in which project workers will be managed in accordance with the requirements of national labor laws and the World Bank's Environmental and Social Standard 2 on Labor and Working Conditions (ESS2).

The aim of the YCRP project is to prevent and limit to the extent possible the spread of COVID-19 in the country. This is achieved through providing immediate support to enhance case detection, testing, case management, recording and reporting, as well as contact tracing and risk assessment.

The Yemen COVID-19 Emergency Response and Health Systems Preparedness Project (P173862) additional Finance with support of the World Bank and FCDO aim to provide support for Deployment of COVID-19 vaccine from COVAX.

The Project management Unit (PMU) established to carry out such key functions as coordination, fiduciary, monitoring and evaluation, and reporting. The PMU will be led by a Director. WHO is the implementing agency.

The purpose of the LMP is to address the way in which the ESS2 provisions will apply to different categories of project workers, identify the main labor requirements and risks associated with the project, including maintaining a safe working environment for workers throughout the COVID-19 pandemic.

## LMP Objectives

- To promote safety and health at work.
- To promote the fair treatment, non-discrimination, and equal opportunity of project workers.
- To protect project workers, including vulnerable workers such as women, persons with disabilities, children (of working age, in accordance with this ESS) and migrant workers, contracted workers, community workers, and primary supply workers, as appropriate.
- To prevent the use of all forms of forced labor and child labor.
- To support the principles of freedom of association and collective bargaining of project workers in a manner consistent with national law.
- To provide project workers with accessible means to raise workplace concerns.

## 1. OVERVIEW OF LABOR USE ON THE PROJECT

In general, projects supporting COVID-19 response activities including additional financing will include different categories of workers. Project workers are classified into the following two groups: *direct workers* and *contracted workers*. This project will involve the use of (i) Direct Workers who will be engaged directly by WHO and staff from local health authorities; (ii) Contracted Workers (medical and non-medical) who are hired to respond to a surge in demand for services due to the COVID-19 pandemic in selected hospitals and to support implementation including training capacity building, and communications and iii) Supply Worker for providing services such as medical supplies, equipment, and vaccines. The following are the key categories of workers that would be engaged under the project, including groups of workers that are specifically at risk in the COVID-19 context including additional financing and thus require special attention.

This section describes the following, based on available information:

**Number of Project Workers:** The total number of workers to be employed on the project, and the different types of workers: direct workers and contracted workers.

**Characteristics of Project Workers:** To the extent possible, a broad description and an indication of the likely characteristics of the project workers e.g. direct workers, civil servants, national or international, female workers, and workers minimum age.

**Timing of Labor Requirements:** The timing and sequencing of labor requirements in terms of numbers, locations, types of jobs and skills required.

The Project engages the following categories of project workers as defined by ESS2.

## **i) Direct workers**

The sub-categories and characteristics of direct workers are outlined as follows:

### **Project Management Unit (PMU)**

#### **1. Number of PMU Workers**

Direct workers include the Project Management Unit. The estimated number of direct workers in the PMU would be around 20 workers of various disciplines.

#### **2. Characteristics of PMU Workers**

The PMU workers are Yemeni Nationals and International Staff, who are professional workers and would be a mix of males and females and none under the age of 18. The PMU encourages the appointment of women.

The Project management Unit (PMU) inside WHO is established to carry out such key functions as coordination, fiduciary, monitoring and evaluation, and reporting. The PMU will be led by a Director.

The PMU will be responsible for day-to-day coordination of the Project activities, including:

- (i) Carrying out Project financial management and procurement activities;
- (ii) Monitoring and evaluating Project activities and preparing Project progress reports and monitoring and evaluation reports.
- (iii) Ensuring compliance with the Environmental and Social Commitment Plan (“ESCP”) requirements and environmental and social instruments and
- (iv) Coordinating with other stakeholders on Project implementation.

In addition to that, The WHO technical officers assist the PMU by managing the YCRP pillars including AF.

#### **3. Timing of Labor Requirements**

In addition to these permanent staff required for the full duration of the Project, the Project may hire other technical staff for limited duration based on specific needs (International and national experts hired on short-term basis).

## **ii) Contracted Workers**

### **Service providers’ workers**

These include those contracted workers who are providing services such as medical supplies; pharmacies; rehabilitation works; etc. The project will also involve supply workers, Construction, and water supply.

#### **1. Consultant workers**

##### ***Number of Consultants workers:***

The project activities include the provision of translation or training activities. Training might cover a range of topics and might involve the procurement of service providers to perform these activities. Nevertheless, the expected number of consultants and potentially their collaborators (staff and sub-consultants) is 100.

##### ***Characteristics of consultant workers:***

The PMU is not able to determine from now if any of the consultants who will be hired under the project would bring any workers or sub-consultants. However, as the consultants themselves will be locally recruited, it is expected that any of their workers or sub-consultants would also be Yemeni nationals, professionals, with fixed term or casual. It is also not possible to know from now if any of these would include any women or any non-Yemeni or migrant workers. In all cases, no child labor will be contracted. Labors terms and conditions, including their rights related to

hours of work, wages, overtime, compensation, and benefits, will be governed by the Yemeni Labor Law and the relevant provisions of ESS2.

***Timing of Labor Requirements:***

During the whole project lifecycle

## **2. Third Party Monitoring (TPM) workers**

***Characteristics of TPM workers:***

The project activities include The Third-Party Monitoring (TPM) who is responsible of monitoring the project activities and provide feedback to the project to set proper mitigation measures.

***Number of TPM workers:***

The TPM for the YCRP including AF will be used and potentially its collaborators (staff and sub-consultants) is 101 .

However, The TPMs are being recruited from the local market. They are professionals, with fixed term or casual. Male and female are involved and thus, their labor terms and conditions, including their rights related to hours of work, wages, overtime, compensation, and benefits, will be governed by the Yemeni Labor Law and the relevant provisions of ESS2 and no child labor will be involved.

***Timing of Labor Requirements:***

The TPM who is delivering the monitoring of the YCRP parent project who was hired in November 2020 will continue until the end of the project. It is expected that the AF TPM who was hired in April 2021 will work until the end of the project.

## **3. Grievance Mechanism (GM) service provider workers**

***Characteristics of GM service provider workers:***

The project activities include the GM service provider who is responsible of receiving, recording, forwarding the complaints to the project and provide the complainant with the resolution taken.

***Number of GM service provider workers:***

The GM service provider usually has two call center operators (one male and one female) with good communication and English skills.

However, the GM service providers are being recruited from the local market and thus, their labor terms and conditions, including their rights related to hours of work, wages, overtime, compensation, and benefits, will be governed by the Yemeni Labor Law and the relevant provisions of ESS2.

***Timing of Labor Requirements:***

The project contracted two GM service providers: one from Jun 2020 until 16 Dec 2020. The second one from 18 Dec 2020 and will cover the additional finance activities until the end of the project.

## **4. Rehabilitation/ Maintenance workers.**

There are contracted workers to carry out rehabilitation works like maintenance, rehabilitations of hospitals, labs, and isolation units. No major construction is expected.

***Number of Rehabilitation Workers:***

The proposed Project might finance “minor civil works within existing structures and retrofitting of quarantine, isolation and treatment rooms in selected facilities”. These minor civil works would be implemented by local contractors who will be responsible for recruiting their own workers (typically small work crews of 5-15 workers) for the execution of these small works. These workers may be hired on a casual or temporary basis. Although it is not

possible to determine with certainty the size of the labor force that might be used by the contractors, for planning purposes it is estimated to be 550 workers.

***Characteristics of Construction Workers:***

The labor force in the sector is comprised of Yemeni laborers. Contracted workers would be male, skilled, semi-skilled, or unskilled and are likely to be working casually, and informally. The number of women working in this sector is extremely low. Considering that recruitment no child labor in the project, the PMU will include this requirement in the related bidding documents. The labor terms and conditions, including their rights related to hours of work, wages, overtime, compensation and benefits, are governed by the Yemeni Labor Law and this LMP.

***Timing of Labor Requirements:***

Small civil works occur during the lifetime of project implementation.

## **5. Water Supply Workers**

Water supply is provided to the 37 isolation units and 8 Laboratories.

***Number of Water Supply Workers:***

The estimated number for water supply workers is 120.

***Characteristics of Water supply Workers:***

Contracted workers would be male, semi-skilled, and are likely to be working casually, and informally.

***Timing of Labor Requirements:***

The water supply occurs continuously during the time of the project implementation.

## **6. Other service provider workers**

***Number of other service provider workers:***

The number of workers who be involved in the activity's implementation around 100

***Characteristics of other service provider workers:***

The project activities include installing the project visibilities and might involve the procurement of service providers to perform these activities. Nevertheless, the number of service providers and potentially their collaborators (staff and sub-consultants) is not determined for the moment. However, it is expected that all service providers will be recruited from the local market and thus, their labor terms and conditions, including their rights related to hours of work, wages, overtime, compensation, and benefits, will be governed by the Yemeni Labor Law and the relevant provisions of ESS2.

***Timing of Labor Requirements:***

It is expected that the other service providers who will install the project visibilities will be hired during the project implementation including the Additional financing.

## **Civil servants**

Civil servants are engaged in the project such as Health Care Workers (HCWs) and waste management workers will remain subject to their terms and conditions of their existing public sector employment agreement. Their health and safety will be considered, and measures adopted by the Project for addressing OHS issues, including those specifically related to COVID-19 will apply to them.

## 1. Health Care Workers (HCWs)

### *Number of Health Care Workers:*

The Health Care Workers under the project are exclusively civil servants and carrying out a range of activities such as assessing, contact tracing, testing, treatment of COVID-19 patients, vaccination, etc. their estimated numbers are as follows:

- **General HCWs:** It is expected that up to 3100 will participate in capacity development activities funded by the project including the AF and related to COVID-19 response.
- **Contact Tracing; Rapid Response Teams (RRTs):** currently 1996 medical staff in addition to 16 involved in Emergency Operation Centers EOCs).
- **Laboratories:** The estimated number is 160 people.
- **Other treatment facilities/isolation Unit's workers;** 300 people (medical and non-medical)

### *Characteristics of Health Care Workers:*

The Health Care Workers civil servants and Yemeni nationals are professional workers and would be a mix of males and females and no child labor will be involved.

### *Timing of Labor Requirements:*

The Health Care Workers, including medical and non- medical workers are already involved in responding to the COVID-19 pandemic, within the different health sectors. Addition HCWs will be involved for AF activities.

## 2. Waste Management Workers

### *Number of Waste Management Workers*

The Waste Management Workers under this project will be mainly those already working in the different Yemeni public health care institutions, mainly isolation Units and Laboratories. Also, who are responsible for waste management of vaccination. Their estimated number is around 300 workers.

### *Characteristics of waste management workers*

These workers are civil servants and Yemeni Nationals, and none under the age of 18. These workers will remain subject to the terms and conditions of their existing public sector employment agreement or arrangement.

### *Timing of Labor Requirements*

The existing Waste Management Workers will be working throughout the duration of the project.

## iii) Primary Supply Workers

These include those providing services such as medical supplies, equipment, and vaccines.

### *Number of Medical Supply Workers:*

The estimated number of workers is ranging between 100-300.

### *Characteristics of medical supply Workers:*

Primary supply workers would be males with some females, skilled, semi-skilled, and are likely to be working casually, and informally.

### *Timing of Labor Requirements:*

It is expected that the medical supply workers who are delivering the supplies are contracted during the project implementation including the additional financing.

Table 1: Summary Of labor on the project

NO	Type of Workers	Description of Activities	Estimated Number	Characteristics	Timing
<b>Direct Workers</b>					
1	PMU staff	<p>The Project management carries out such key functions as coordination, fiduciary, monitoring and evaluation, and reporting.</p> <p>Ensuring compliance with the Environmental and Social Commitment Plan (“ESCP”) requirements and environmental and social instrument</p>	20	<ul style="list-style-type: none"> <li>• Fixed term employees</li> <li>• Full time or part-time</li> <li>• National/International</li> <li>• Skilled workers, professionals in various disciplines</li> <li>• Mix of male and females</li> </ul>	At the beginning/during the project.
<b>Contracted Workers</b>					
1	<b>Civil servants</b>				
1.1	<b>Health Care Workers</b> (Health care Workers including cleaners, paramedics, lab, radiology workers RRTs, and vaccinations teams supportive staff)	<p>Includes medical and non-medical workers carrying out a range of activities such as assessing, contact tracing, testing, treatment of COVID-19 patients.</p> <p>Working in isolation units, laboratories, treatment facilities, as contract tracers, etc.</p> <p>Working in outreach activities and vaccination campaigns.</p>	Around 5,500	<ul style="list-style-type: none"> <li>• Civil servants</li> <li>• Yemenis</li> <li>• Skilled and semi-skilled</li> <li>• Mix of male and female</li> </ul>	During project activities including additional financing activities.
1.2	Waste Management workers	Providing waste management services including dealing with hazardous/Infection preventions of medical waste.	300	<ul style="list-style-type: none"> <li>• Semi-skilled or unskilled</li> <li>• Fixed term or casual (temporary)</li> <li>• Yemenis</li> <li>• The majority is males with some females.</li> </ul>	At any time during the project

NO	Type of Workers	Description of Activities	Estimated Number	Characteristics	Timing
2	<b>Service Providers' workers</b>				
2.1	Consultant workers	include the provision of translation or training activities. Training might cover a range of topics and might involve the procurement of service providers to perform these activities	100	<ul style="list-style-type: none"> <li>• professionals</li> <li>• Fixed term or casual (temporary)</li> <li>• Yemenis</li> <li>• Predominantly male</li> <li>• No child labor</li> </ul>	During the whole project lifecycle
2.2	Third Party Monitoring (TPM) Workers	responsible of monitoring the project activities and provide feedback to the project to set proper mitigation measures.	101	<ul style="list-style-type: none"> <li>• professionals</li> <li>• Fixed term or casual (temporary)</li> <li>• Yemenis</li> <li>• Males and Females.</li> <li>• No child labor</li> </ul>	The TPM who is delivering the monitoring of the YCRP parent project who was hired in November 2020 will continue until the end of the project. It is expected that the AF TPM who was hired in April 2021 will work until the end of the project.
2.3	Grievance Mechanism (GM) service provider workers	The project activities include the GM service provider who is responsible of receiving, recording, forwarding the complaints to the project and provide the complainant with the resolution taken.	4	<ul style="list-style-type: none"> <li>• Yemenis.</li> <li>• Skilled.</li> <li>• Males and females.</li> <li>• No child labors.</li> </ul>	The project contracted two GM service providers: one from Jun 2020 until 16 Dec 2020. The second one from 18 Dec 2020 until 30 Sep 2021.
2.4	Rehabilitation/ Maintenance Workers	Minor civil works to perform maintenance at the Isolation Units.	550	<ul style="list-style-type: none"> <li>• Skilled, Semi-skilled or unskilled</li> <li>• Fixed and Casual (temporary)</li> <li>• Yemenis</li> <li>• Males</li> <li>• No child labor</li> </ul>	during the lifetime of project implementation

NO	Type of Workers	Description of Activities	Estimated Number	Characteristics	Timing
2.5	Water supply workers	Water supply is provided to the 37 isolation units and 8 Laboratories.	120	<ul style="list-style-type: none"> <li>• Yemenis.</li> <li>• Working casually and informally.</li> <li>• Males.</li> <li>• Unskilled</li> </ul>	during the time of the project implementation
2.6	Other service provider's workers	The project activities include installing the project visibilities and might involve the procurement of service providers to perform these activities	100	<ul style="list-style-type: none"> <li>• Skilled</li> <li>• Yemenis.</li> <li>• Working casually and informally.</li> <li>• Males.</li> </ul>	during the project implementation including the Additional financing.
<b>Primary Supply Workers</b>					
3.1	Primary Supply workers	<p>providing services such as Medical supplies and equipment and vaccines</p> <p>Office work involving procurement of medical supplies from international suppliers /manufacturers and water.</p>	100- 300	<ul style="list-style-type: none"> <li>• Skilled and Semi-skilled</li> <li>• Fixed term or casual (temporary)</li> <li>• Yemenis</li> <li>• The majority is males with some females.</li> </ul>	Throughout the project implementation including the additional financing.

## 2. ASSESSMENT OF KEY POTENTIAL LABOR RISKS

### i) Project description

The project aims to help Yemen immediately respond and mitigate the risks associated with COVID-19 outbreak in Yemen. The Project Development Objective is to prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness. Based on the Yemen Preparedness and Response Plan, the project aims to fill critical gaps in technical areas, such as: points of entry interventions; national laboratories; infection prevention and control; care identified to immediately strengthen the local capacity to respond and address the current COVID-19 potential challenges in timely manner, while working within the country's existing systems and providing technical assistance as needed for local entities. Emphasis will be placed on strengthening capacities at the district level through a model of decentralization.

The Yemen COVID-19 Emergency Response and Health Systems Preparedness Project (P173862) additional Finance with support of the World Bank and FCDO aim to provide support for Deployment of COVID-19 vaccine from COVAX; The COVAX initiative seeks to provide enough vaccine to ensure 20% coverage of the population, support Disease Surveillance and Rapid Response, Strengthening National Laboratories, and support the Information Management and Roll-out of HeRAMS.

#### Component 1: Emergency COVID-19 Response

The aim of this component is to prevent and limit the spread of COVID-19 through providing immediate support to enhance case detection, testing, case management, recording and reporting, as well as contact tracing and risk assessment.

More specifically, this component will finance the procurement of medical and non-medical supplies, medicines, vaccines and equipment as well as training and implementation expenses and limited rehabilitation and upgrading of the existing facilities as needed for activities outlined in the Yemen Preparedness and Response Plan such as:

- (i) Rapid detection at the district level and at the POEs identified by assessing air, sea, and land movement/transportation.
- (ii) Disease Surveillance, Emergency Operating Centers and Rapid Response Teams (RRT) to allow timely and adequate system of detecting, tracing, and reporting suspected cases.
- (iii) Preparation and equipment of isolation and case management centers across the country to ensure adequate and trained clinical capacity to respond to any symptomatic cases.
- (iv) Infection prevention and control at facility and community levels to ensure coordinated supply and demand side hygienic practices.
- (v) Testing and laboratory capacity enhancement across the country for COVID-19 response.
- (vi) The deployment of COVID-19 vaccines provided by COVID-19 Vaccines Global Access COVAX.

The AF will provide additional support to ongoing activities under (ii) and (v), namely, strengthening disease surveillance, rapid response, and national laboratories as well as a new set of activities.

#### Component 2: Implementation Management and Monitoring and Evaluation

This component will support administration and monitoring and evaluation (M&E) activities to ensure smooth and satisfactory project implementation. The component will finance:

- (i) General management support for WHO.
- (ii) Hiring of Third-Party Monitoring TPM agents and auditors, with terms of reference TOR satisfactory to the World Bank.
- (iii) Direct cost for staffing and project management.

- (iv) Support for the Health Resources & Services Availability Monitoring System He RAMS.

With the AF, the scope of this component is expanded to include (iv) support for the Health Resources & Services Availability Monitoring System He RAMS, which provides core information on essential health resources and services to decision-makers at national, regional, and global levels and serves as a solid foundation to the country health information systems.

## ii) Key Labor Risks

All workers are affected by the general terms and conditions of employment (e.g. hours of work, overtime, benefits remuneration, termination of employment; disciplinary measures and grievance procedures). Although risks are considered substantial, Project workers may also be exposed to sexual harassment in a workplace.

Contracted construction workers involved in minor civil works, particularly temporary or casual. These workers are also exposed to Occupational Health and Safety risks, although the nature and scale of the works is small, and accordingly the OHS risks are considered low to moderate

The key labor risks which may be associated with the project. These could include, for example:

- Risks associated with GBV and SEA/SH in general and especially in quarantine/isolation facilities.
- Workers as vectors of COVID-19 and hence risks to community health and safety.
- Risks of exposure while handling of medical specimens or treatment of COVID-19 patients.
- Discrimination in relation to recruitment, hiring, compensation, working conditions, terms of employment, etc.
- Absence of a mechanism to express grievances and protect rights regarding working conditions and terms of employment.
- Difficulties to supervise the project as movements in country are extremely difficult.
- Social tensions due to concerns about infection spread to the communities in the vicinity of the HCFs, quarantine centers, etc.
- Discrimination in relation to recruitment, hiring, compensation, working conditions, terms of employment, etc.
- Risk of child labor especially for hazardous activities; and
- OHS risks during construction/rehabilitation work such as work at height, use of heavy machines and traffic accidents.
- Security risks that could affect the safety of project personnel and stakeholders include; lack of security arrangement, working and operating in high risk/ conflict areas, un trained security personnel

### COVID-19 Related Risks:

The key risk for all project workers is infection with COVID-19 or other contagious illnesses which can lead to illness and death of workers. High risk environments include laboratories, hospitals and health care centers, isolation units, out reach sites. where project workers may be exposed to the virus. Project workers are also exposed at risk of psychological distress, fatigue and stigma due to the nature of their work.

Potential risk is where the project activity is the treatment by health care workers of COVID-19 patients. In this case the risks could include pathogen exposure, infection and associated illness, death, illegal and untenable overtime, psychological distress, fatigue, occupational burnout, stigma and passing on infections to family and community. Identification of these risks would then feed into the mitigation measures set out in Section 6 of the LMP.

Vaccination activities are likely to require mobilization of a large workforce of health workers, and public health officials, many of whom will be working in challenging environments. In such circumstances, many of the risks identified above in relation to treatment of COVID-19 patients may also be relevant.

For all those involved in the different project at health facilities and laboratories, labor risks include:

- Pathogen exposure, infection and associated illness and death.

- Untenable overtime leading to physical and psychological ailment.
- Psychological distress.
- Fatigue and occupational burnout.
- Stigma and passing on infections to family and community.
- Health and safety risks for frontline service providers, especially against COVID contamination.
- Risks of pathogen exposure, infection and associated illness, death, for workers engaged in carrying out the testing, transporting samples, delivering training, etc.
- Untenable overtime, psychological distress, fatigue, occupational burnout, among health care workers.

The key activities and pathways for COVID-19 exposure are as follows :

- Exposure and dealing with biological waste, chemical waste, and other hazardous by-products generated by the laboratories and relevant health facilities which will be used for COVID-19 diagnostic, testing and isolation of patients.
- Exposure to the patients who have COVID-19 at health care facilities and vaccination sites.
- Workers under the project become vectors for transmission of COVID-19 to other workers within the different project's sites, their families and to the near community, such as:
  - 1- Workers brought in to carry out the civil works may become vectors for transmission of COVID-19 to other workers in rehabilitation project sites and nearby communities.
  - 2- Suppliers as vectors of COVID-19 & hence risks for health care workers and patients.
  - 3- HCWs.

### iii) Lessons learned

The lessons learned from the parent project implementation are as follow:

- Irregular salary payments which caused labor dissatisfaction and inappropriate work environment.
- Shortage of PPEs, Hygiene materials in local and international markets.
- lack of technical capacity towards the infection prevention and control in the country.

### iv) Mitigation measures

based on the risks mentioned above the mitigation measures are as follow:

- conducting pre-employment health checks and COVID-19 testing
- controlling entry and exit from site/workplace
- reviewing accommodation arrangements, to see if they are adequate and designed to reduce contact with the community
- reviewing contract durations, to reduce the frequency of workers entering/exiting the site
- rearranging work tasks or reducing numbers on the worksite to allow social/physical distancing, or rotating workers through a 24-hour schedule
- providing appropriate forms of personal protective equipment (PPE)
- putting in place alternatives to direct contact, like tele-medicine appointments and live stream of instructions
- Trainings for workers on hygiene and other preventative measures will be carried out, and a communication strategy for regular updates on COVID-19 related issues and the status of affected workers, will be carried out.
- Sensitization and training about GBV and SEA/SH + signing of GBV code of conduct for all workers
- Access to psychosocial support based on the needs and availability of such services
- Communication strategy with the community, community leaders and local government in relation to COVID-19 issues on the site, will be followed.
- Training will be provided to medical staff, direct and contracted workers based on the latest WHO advice and recommendations on the specifics of COVID-19

- Reduction, storage and disposal of medical waste, will be duly carried out taking into consideration workers' health and safety in line with the Infection Control and Medical Waste Management Plan (ICMWMP) of the project and sensitize the HCWs about the ICMWMP.
- Risks to continuity of supplies of medicine, water, fuel, food and PPE, taking into account international, national and local supply chains, will be assessed and measures will be taken accordingly to address the supply constraints.
- Particularly for vaccine deployment; Training and monitoring of correct application of infection prevention and control (IPC) for health workers, decentralizing vaccine delivery to limit large gatherings, regular COVID-19 testing of health workers and triaging sick members of the public who attend for vaccination.
- Coordination with MoPHP to ensure regular salary payment for HCWs.
- Security Mitigation Measures are as follow:
  - ✓ Coordination with security authorities to assess the security risks and avoid operating in high risk environment.
  - ✓ Convoy security for transportation of medical supplies and mobile teams as needed.
  - ✓ When security personnel will be engaged the selection and screening of security personnel to verify that they have not engaged in past unlawful or abusive behavior.
  - ✓ Provision of adequate training on the use of force and appropriate conduct (including in relation to civilian-military engagement and GBV).
  - ✓ Including the security issues, risks, and mitigations during the Project stakeholders' engagement activities.
  - ✓ Any concerns or grievances in regards the conduct of security personnel will be received, monitored, documented, and addressed through the Project's grievance mechanism.

### 3. BRIEF OVERVIEW OF LABOR LEGISLATION: TERMS AND CONDITIONS

[This section sets out the **key aspects** of national labor legislation with regards to term and conditions of work, and how national legislation applies to different categories of workers identified in Section 1. The overview focuses on legislation which relates to the items set out in ESS2, paragraph 11 (i.e. wages, deductions and benefits).]

#### i) Written Employment Particulars

Employment contracts are regulated under the Labor Code. A contract of employment is the agreement between a worker and employer whereby a worker undertakes to work under the direction and supervision of the employer in consideration of a remuneration. Labor Code requires employment contracts to be in writing. A written employment contract is drawn up in three copies (signed by all the parties), one copy each for the worker, the employer and the competent office of the Ministry of Labor. In the absence of written contracts, an employee must establish his rights through any admissible evidence. An employment contract must specify the following: remuneration; work description; workplace; commencement date; and duration of employment contract. Contracts for working in cooperatives are considered employment contracts and each worker receives a copy of such contract on commencement of work. A worker may request an employer to provide him with a receipt for any (personal) documents, records or certificates entrusted to him. In order to apply different contractual provisions, an employer must devise and follow procedures, a copy of which is issued to the worker. It is forbidden for a foreign worker to work in Yemen unless he has an official work permit issued by the Ministry or one of its offices. Employers are also prohibited from employing foreign workers without employment permits. The number of foreigners working for an employer cannot exceed 10% of total Yemeni workforce. The ratio can be increased or reduced in accordance with guidelines decided by the Council of Ministers. Employment of a foreign worker is prohibited if he previously worked in Yemen and was dismissed for misconduct or for having been sentenced by a court; he left the services of his employer (resigned); entered the country for reasons other than work (and is without work permit); and the Ministry ascertains the possibility of nominating a local (Yemeni) worker to the advertised vacancy.

#### ii) Wage

The Labor Code differentiates between the "basic wage" and "full wage". Basic wage is the payment made by the employer in consideration of his work, whether in cash or in kind, which may be evaluated in currency excluding any entitlements. Full wage, on the other hand, is basic wage plus all entitlements of any kind. Wage rates for different worker categories and jobs are determined according to the volume and type of work involved in accordance with the following guiding principles: nature of functions, duties and responsibilities; qualifications and experience required to perform the job; importance and role of work in the development and quality of production; yield of work (worker productivity); working conditions and location of workplace (hazard pay and hard area allowance); efforts made by the worker (to perform work; hard workers to be paid higher wages). A worker must be paid his outstanding wages/dues on the day following termination of contract. If a worker leaves the service (resigns), his outstanding dues must be cleared within six days of his leaving the employment.

#### iii) Working hours

The normal working hours are eight hours a day and 48 hours a week. During the month of Ramadan, the working hours are reduced, and daily and weekly limit of six hours and 36 hours respectively is observed. Reduced working hours apply in the case of arduous and hazardous work (under an Order by the Minister, if any), young workers (seven hours), and pregnant as well as breastfeeding workers (five hours from sixth month of pregnancy to six months after childbirth). The working time for pregnant and breastfeeding workers may be further reduced for health reasons on the basis of a certified medical report. Employers are required to post at the main entrance to the workplace and in a visible place inside the workplace a table showing working hours, periods of rest and leave, and weekly closing times.

#### **iv) Leave**

Workers are entitled to the annual leave of at least 30 days with full pay for each calendar year, calculated on the basis of at least two-and-a-half days for each month of service. Public holidays falling within a worker's period of annual leave are not counted as part of annual leave. In order to be entitled to annual leave, a worker must have completed one year of service. Public holidays are paid days and if a worker is required to work on a public holiday, he is entitled to 200% of the normal wage in addition to entitlement to standard wages for such holidays.

#### **v) Weekly Rest Days**

Since the weekly hours of work are distributed over six working days, workers are entitled to one day (24 hours) of rest which is Friday. Friday may be exchanged for another day of the week as weekly rest day for all of some workers if work so requires.

#### **vi) Minimum Age for Hazardous Work**

Minimum age for hazardous work is 18 years. Section 7 of Ministerial Order No. 11 provides a list of 42 industries and occupations, including domestic work, work related to agriculture, fishing, textiles, X-ray and nursing establishments, working with iron and aluminum saws; mechanical work and construction, which are prohibited for children under 18 years. Moreover, section 8 prohibits carrying, pulling, or pushing heavy weights while section 15 prohibits night work and overtime work for children under 18 years. In accordance with section 24 of Ministerial Order No. 11, any person who incites a child under the age of 18 years to use, trade or promote drugs, particularly the trafficking of drugs is sentenced to imprisonment for a minimum of five years and a maximum of eight years.

#### **vii) Equal Pay**

Equal pay for equal work is regulated under the provisions of Labor Code. Women are equal to men in all employment related conditions and rights including wages. Women workers are entitled to equal wages for performing the same work under the same conditions and specifications. Employers are further required to pay equal wages to Yemenis and non-Yemenis if their working conditions, qualifications, experience and competence are the same.

#### **viii) Sexual Harassment**

There is no specific law in Yemen addressing sexual harassment, however articles 270-274 of the Criminal Code stipulate that anyone who commits an offending or disgraceful act in public (any act which offends public morality or honor, exposes private areas or involves speaking indecently) can be sentenced to up to six months in prison or fines (1000 Yemeni Rial). The punishment rises to up to one year in prison and fines for forcing a female to behave immorally. The law does not protect explicitly against sexual harassment however it gives a worker the right to terminate his/her employment contract without prior notice when the employer (or his/her representative) commits a morally offensive act (which includes sexual harassment) or assault him/her or any of his/her family members. This will be taken into account in the GBV-SEA/SH Code of conduct. ANNEX I: Code of Conduct.

#### **ix) Yemen National COVID-19 Preparedness and Response Plan**

The Yemen National COVID-19 Preparedness and Response Plan is a strategic document prepared by both authorities in Sana'a and Aden, with the support of WHO, other United Nations Agencies, Funds and Programs and partners working in Yemen with inputs from donors. It provides guidance on a set of actions to be taken to ensure that the country is able (1) to detect, test, isolate and treat individuals that become infected by the coronavirus as well as (2) to slow down and contain the spread of the virus in the community.

#### 4. BRIEF OVERVIEW OF LABOR LEGISLATION: OCCUPATIONAL HEALTH AND SAFETY

Employers shall take the necessary precautions to protect workers and ensure their safety against such hazards as may arise from their work (including laboratory, health care, waste management, and any contracted or directly supplied work) and the use of machinery <sup>1</sup>.

The employer shall not deduct any amount from their wages in consideration of:

- (a) The provision of protective devices, equipment and clothing to protect workers from exposure to occupational injuries and diseases.
- (b) Any allowances granted to workers for working in conditions harmful to their health, or any meals provided to them in compliance with occupational safety and health requirements.
- (c) Expenses incurred on account of workers' medical examinations, regular or otherwise, as necessitated by occupational safety and health requirements; and (d) the provision of first aid equipment at the workplace.

The employer shall:

- (d) Advise and inform workers, before their engagement, on work-related and occupational hazards and on the preventive procedures which must be observed at work.
- (e) Provide continuous guidance to workers and control their observance of occupational safety and health.
- (f) Display in a visible place instructions, guidance and posters explaining work-related and occupational hazards and methods of preventing them and use all possible illustrative means to that end.
- (g) Increase worker's awareness of occupational safety and health protection and make them participate in training courses and seminars on these matters.

#### Occupational Health and Safety (OHS)

All project workers should receive training on OHS as well as COVID-19 prevention, social distancing measures, hand hygiene, cough etiquette and relations with local community. Training programs should also focus, as needed, on COVID-19 laboratory bio-safety, operation of quarantine and isolation centers and screening posts, communication and public-awareness strategies for health workers and the general public on emergency situations, reporting and actions on COVID-19 cases in the workforce, as well as compliance with monitoring and reporting requirements, including on waste management, OHS and project's labor-management procedures, stakeholder engagement and grievance mechanism.

OHS measures include the following provisions:

- Ensuring workplace health and safety standards in full compliance with Yemen law, at a minimum, and including (1) basic safety awareness training to be provided to all persons as well as on COVID19 prevention and related measures; (2) all vehicle drivers to have appropriate licenses; (3) safe management of the area around operating equipment inside or outside hospitals/ laboratories/treatment facilities/isolation centers; (4) workers to be equipped with hard helmets, safety boots and protective gloves and/or PPE equipment as needed (particularly facemask, gowns, gloves, handwashing soap, and sanitizer) to protect from COVID-19; (5) secure scaffolding and fixed ladders to be provided for work above ground level; (6) as a precaution, prohibition of the use of explosives for civil work (including for construction materials); (7) First aid equipment and facilities to be provided in accordance with the Labor Law; (8) at least one supervisory staff trained in safety procedures to be present at all times when rehabilitation work is in progress; and (9) adequate provision of hygiene facilities (toilets, hand-washing basins), resting areas etc. separated by gender as needed and with distancing guidelines in place;

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<sup>1</sup> The civil work activities of the project will only involve limited rehabilitation of health facilities and isolation rooms, no major construction works are planned. Waste management workers can also make use of machine for medical waste transportation and management.

- Comply with national legislation, WB’s ESS2 requirements and other applicable requirements which relate to OHS hazards, including WHO specific COVID-19 guidelines.
- All workplace health and safety incidents to be properly recorded in a register detailing the type of incident, injury, people affected, time/place and actions taken including COVID-19 cases in the workforce, which should be reported to the PMU and the World Bank immediately;
- All workers (irrespective of contracts being full-time, part-time, temporary or casual) to be covered by insurance against occupational hazards and COVID-19, including ability to access medical care and take paid leave if they need to self-isolate as a result of contracting COVID-19;
- Procedures confirming workers are fit to work, which may include temperature testing and refusing entry to sick workers (with insurance in place to cover payment, as described above);
- All work sites to identify potential hazards and actions to be taken in case of emergency.
- Any on-site accommodation to be safe and hygienic, and with distancing guidelines in place, including provision of an adequate supply of potable water, washing facilities, sanitation, accommodation and cooking facilities.
- Workers residing at site accommodation to receive training in preventing prevention of infection through contaminated food and/or water, COVID-19 prevention and avoidance of sexually transmitted diseases.
- Provide laminated signs of relevant safe working procedures in a visible area on work sites, in English and local language as required, including on hand hygiene and cough etiquette, as well as on symptoms of COVID-19 and steps to take if suspect have contracted the virus;
- Provide PPE as suitable to the task and hazards of each worker, without cost to the worker.
- Construction materials manufactured in Yemen be procured only from suppliers able to certify that no forced labor (including debt bondage labor) or child labor (except as permitted by the Labor Law) has been used in production of the materials.

The above Occupational Health and Safety Measures for **addressing health and safety issues** relevant to COVID-19 are complied with national legislation, WB’s ESS2 requirements and other applicable requirements which relate to OHS hazards, including WHO specific COVID-19 guidelines. The ESMF (section 3) includes a detailed Policy, legal and regulatory framework which is applied to the project including the Occupational Health and Safety (OHS). This is summarized in the following:

#### **The National Laws and regulations.**

- Labor and working conditions,
- Environmental protection and water management
- Waste Management and Pollution Prevention
- Public Health and Healthcare System Laws

#### **World Bank and International regulations**

- World Bank Environmental and Social Standards ESS relevant to the project
- World Bank Group Environmental, Health and Safety Guidelines (EHS Guidelines) relevant to the project.
- [Technical Note: Public Consultations and Stakeholder Engagement in WB-supported operations when there are constraints on conducting public meetings](#), issued on March 20, 2020
- [Technical Note: Use of Military Forces to Assist in COVID-19 Operations](#), issued on March 25, 2020
- [ESF/Safeguards Interim Note: COVID-19 Considerations in Construction/Civil Works Projects](#), issued on April 7, 2020
- [Technical Note on SEA/H for HNP COVID Response Operations, issued in March 2020](#)
- [Interim Advice for IFC Clients on Preventing and Managing Health Risks of COVID-19 in the Workplace](#), issued on April 6, 2020
- [Interim Advice for IFC Clients on Supporting Workers in the Context of COVID-19](#), issued on April 6, 2020
- [IFC Tip Sheet for Company Leadership on Crisis Response: Facing the COVID-19 Pandemic](#), issued on April 6, 2020
- [WBG EHS Guidelines for Healthcare Facilities](#), issued on April 30, 2007

#### **WHO COVID-19 technical guidance**

WHO technical guidance developed for addressing COVID-19 also apply to the Project. WHO resources include technical guidance on: (i) [laboratory biosafety](#), (ii) [infection prevention and control](#), (iii) [rights, roles and responsibilities of health workers, including key considerations for occupational safety and health](#), (iv) [water, sanitation, hygiene and waste management](#), (v) [quarantine of individuals](#), (vi) [rational use of PPE](#), (vii) [oxygen sources and distribution for COVID-19 treatment centers](#), (viii) [vaccine readiness assessment](#), (ix) [surveillance of adverse events following immunization](#).

Other Reference may also be made to applicable international conventions, and directives for addressing health and safety issues relevant to COVID-19, such as:

- [ILO Occupational Safety and Health Convention, 1981 \(No. 155\)](#)
- [ILO Occupational Health Services Convention, 1985 \(No. 161\)](#)
- [ILO Safety and Health in Construction Convention, 1988 \(No. 167\)](#)
- [WHO International Health Regulations, 2005](#)
- [WHO Emergency Response Framework, 2017](#)
- [WHO SAGE Values Framework for the Allocation and Prioritization of COVID-19 Vaccination \(Sept 2020\)](#)
- [WHO SAGE Roadmap for Prioritizing Uses of COVID-19 Vaccines in the Context of Limited Supply \(Nov 2020\)](#)
- [WHO Target Product Profiles \(TPP\) for COVID-19 Vaccines \(2020\)](#)
- [EU OSH Framework Directive \(Directive 89/391\)](#)

## 5. RESPONSIBLE STAFF

This section identifies the functions and/or individuals within the project who will be responsible for managing different E&S risks relating to project workers. Since the project is meant to respond specifically to COVID-19, there will be specialized staff for enhanced monitoring and supervision, to conduct training of workers in mitigating the spread of COVID-19 and to treat patients and workers infected with COVID-19. These functions and/or individuals within the project responsible for (as relevant):

- Engagement and management of project workers
- Engagement and management of contractors/subcontractors
- Occupational health and safety (OHS)
- Training of workers
- Addressing worker grievances

No.	Activities	Responsible staff
1	Engagement and management of direct project workers	Social / environmental specialist, project coordinator, Contractor.
2	Engagement and management of contracted workers	The Contractor will be responsible for engagement and management of individual contracted workers.  The Project coordinator and the E&S specialists will be responsible for monitoring E&S risks and mitigation measures for direct and contracted workers.
3	Monitoring of Occupational Health and Safety (OHS) of health care workers (HCFs) in laboratories, quarantine centers, isolation units; etc.	Social / Environment Specialist, Project Coordinator

4	Conduct OHS training and put in place Grievance Mechanism for workers	Contractor
5	Monitoring, supervising, and reporting on health and safety issues relating to COVID-19 (COVID-19 focal point) including vaccination activities.	Social Specialist, Environment Specialist, Monitoring and Evaluation Specialist
6	Engagement and management of contractors /subcontractors, including coordination and reporting arrangements between contractors	Procurement Specialist, Project Coordinator
7	Training of workers, including raising awareness and training of workers in mitigating the spread of COVID-19, OHS, GBV sensitization, and immunization.	Social / Environment Specialist, Project Coordinator, Contractor, and MoPHP
8	Addressing worker grievances	Social specialist and PMU and Contractor
9	Raising awareness and training of workers in mitigating the spread of COVID-19	PMU staff including Environmental and social specialist.
10	Assessment, triaging and treatment of patients and/or workers infected with COVID-19	MoPHP health facilities.

## 6. POLICIES AND PROCEDURES

The Project will adopt the following Policies and Procedures to apply the mitigation measures:

### a) The Yemen National COVID-19 Preparedness and Response Plan:

The Yemen National COVID-19 Preparedness and Response Plan is a strategic document prepared by both authorities in Sana'a and Aden, with the support of WHO, other United Nations Agencies, Funds and Programmed and partners working in Yemen with inputs from donors. It provides guidance on a set of actions to be taken to ensure that the country is able (1) to detect, test, isolate and treat individuals that become infected by the coronavirus as well as (2) to slow down and contain the spread of the virus in the community.

### b) Labor Code:

As specified in the Labor Code, employment of project workers will be based on the principles of nondiscrimination and equal opportunity. There will be no discrimination with respect to any aspects of the employment relationship, including recruitment, compensation, working conditions and terms of employment, access to training, promotion or termination of employment.

### c) In addition, the following measures, will be followed by contractors and monitored by the social specialist, M&E Specialist and procurement specialist, to ensure fair treatment of all employees:

- Recruitment procedures will be transparent, public and non-discriminatory, and open with respect to ethnicity, religion, sexuality, disability or gender.
- Applications for employment will only be considered if submitted via the official application procedures.
- Clear job descriptions will be provided in advance of recruitment and will explain the skills required for each post.

- All workers will have written contracts describing terms and conditions of work and will have the contents explained to them. Workers will sign the employment contract.
- Employees will be informed at least two months before their expected release date of the coming termination.
- The contracted workers will not be required to pay any hiring fees. If any hiring fees are to be incurred, these will be paid by the Employer.
- Depending on the origin of the employer and employee, employment terms and conditions will be communicated in two languages, in the state language and the language that is understandable to both parties.
- In addition to written documentation, an oral explanation of conditions and terms of employment will be provided to workers who may have difficulty understanding the documentation.
- It is noted that language-related problems are not expected, but if they are interpretation will be provided for workers as necessary.
- Foreign workers will require work permits, which will allow them to work in Yemen.
- All workers will be 18 years old or above.
- Normal working time should not exceed 48 hours per week. With a six-day working week, the duration of daily work is determined by the internal work regulations approved by the employer after prior consultation with the representatives of the workers, in compliance with the established working week duration.

All direct and contracted workers of the project will sign the GBV SEA/SH Code of Conduct of the Project. (Annex I). The Contractors/suppliers will be responsible for the following:

- To obey requirements of the national legislation and this labor management procedure.
- Maintain records of recruitment and employment process of contracted workers.
- Communicate clearly job description and employment conditions to contracted workers.
- Have a system for regular review and reporting on labor, and occupational safety and health performance.

#### **d) Sexual Exploitation and Abuse (SEA)**

The ESMF – (section III) has identified mitigation measures related to SEA, and such measures will be reflected in site specific ESMPs, including the contractors ESMPs, where required. In addition, the PMU will seek the advice of organizations and services who are actively engaged in prevention of gender-based violence, sexual exploitation and workplace sexual harassment, should there be indications of increased risks.

### **COVID-19 Guidelines**

- For health workers rights, roles and responsibilities, including on OHS, consult [WHO COVID-19 interim guidance](#)
- For guidance on infection prevention and control (IPC) strategies for use when COVID-19 is suspected, consult [WHO IPC interim guidance](#)
- For rational use of PPE, consult [WHO interim guidance on use of PPE for COVID-19](#)
- For workplace-related advice, consult [WHO guidance getting your workplace ready for COVID-19](#)
- For guidance on water, sanitation and health care waste relevant to viruses, including COVID-19, consult [WHO interim guidance](#)
- For projects requiring management of medical waste, consult guidance issued by [WHO Safe management of wastes from health-care activities](#)
- For guidance on immunization and vaccine safety, consult [WHO Immunization Safety guidance](#)
- For guidance on implementation of mass vaccination campaigns in the context of COVID-19, consult [WHO framework for decision-making](#)

## 7. AGE OF EMPLOYMENT

This section sets out details regarding:

- The minimum age for employment on the project
- The process that will be followed to verify the age of project workers
- The procedure that will be followed if underage workers are found working on the project
- The procedure for conducting risk assessments for workers aged between the minimum age and **18**

Regardless, due to the hazardous nature of the work no children under the age of 18 will be employed on any aspect of the Project. **The use of forced labor to carry out any activities is also prohibited.**

Contracted workers' contracts should be in line with the requirements of ESS2 including details of hours of work, rest periods and compensation, health insurance, and access to Personal Protective Equipment (PPE).

Contractors and suppliers will be required to verify and identify the age of all workers. This will require workers to provide official documentation, which could include a birth certificate, national identification card, passport, or medical or school record. If a minor under the minimum labor eligible age is discovered working on the project, measures will be taken to immediately terminate the employment or engagement of the minor in a responsible manner, taking into account the best interest of the minor.

## 8. TERMS AND CONDITIONS

This section sets out details regarding:

- Specific wages, hours and other provisions that apply to the project
- Maximum number of hours that can be worked on the project
- Any collective agreements that apply to the project. When relevant, provide a list of agreements and describe key features and provisions
- Other specific terms and conditions

As specified in the Yemen labor code, the employment of project workers will be based on the principles of non-discrimination and equal opportunity. There will be no discrimination with respect to any aspects of the employment relationship, such as recruitment, compensation, working conditions and terms of employment, access to training, promotion or termination of employment.

The terms and conditions applying to PMU and other direct employees are set out in the contracts which provide for the rights of employees in line with the National Labor Act. Terms and conditions of contracted workers are determined by their individual contracts. The working hours are 48 per week for direct workers who are PMU employees.

As a core contractual requirement, the contractor is required to ensure all documentation related to environmental and social management, including the LMP, is available for inspection at any time by the PMU. The contractual arrangements with each project worker must be clearly defined. All environmental and social requirements will be included in the bidding documents and contracts.

In addition, the PMU will be responsible to ensure that safe messaging around COVID-19 prevention and OHS measures are distributed and available to all project staff directly hired/working for the PMU, as per provisions in this LMP.

## 9. GRIEVANCE MECHANISM

Besides the grievance mechanism for the overall project, the contractors should establish a separate GM for their workers. Workers will be able to lodge their complaints relating to their work environment or conditions such as a lack of PPE, lack of proper procedures or unreasonable overtime, etc. to the Worker's GM. The contractors will have the primary responsibility for managing work-place grievances for their own workforce (such as workers for

laboratory service providers, workers and medical supply workers). the project GM will function as the second tier GM for unresolved grievances and as a mechanism to prevent retaliation.

The workers grievance mechanism will include:

- a procedure to receive grievances such as comment/complaint form, suggestion boxes, email, a telephone hotline.
- stipulated timeframes to respond to grievances.
- a register to record and track the timely resolution of grievances.
- a responsible department to receive, record and track resolution of grievances.

The mechanism for workers' GM will be based on the following principles:

Handling of grievances will be objective, prompt and responsive to the needs and concerns of the aggrieved workers.

- ✓ The process will be transparent and allow workers to express their concerns and file grievances.
- ✓ There will be no discrimination against those who express grievances.
- ✓ All grievances will be treated confidentially, and individuals who submit their comments or grievances may request that their name be kept confidential particularly important for GBV-related grievances as and where appropriate to the circumstances.
- ✓ Anonymous grievances will be considered, and anonymous grievances will be treated equally as other grievances, whose origin is known.

Management will treat grievances seriously and take timely and appropriate action in response. Information about the existence of the grievance mechanism will be readily available to all project workers (direct and contracted) through notice boards, the presence of "suggestion/complaint boxes", websites, emails, and other means as needed.

Different ways in which workers can submit their grievances will be allowed, such as submissions in person, by phone, text message, mail and email. Contract workers will be informed of the grievance mechanism at the induction session prior to the commencement of work, and the contact information of the GM focal person and the PMU will be shared with contract workers.

Further, considering that in the context of COVID-19, allowing workers to quickly report labor issues, and allowing the project to respond and take necessary action immediately, would be important. Thus, the grievance raised will be recorded and acknowledged within one day. While the timeframe for redress will depend on the nature of the grievance, health and safety concerns in work environment or any other urgent issues will be addressed immediately.

Grievances raised by workers will be recorded with the actions taken by each unit and/or the contractor. The summary of grievance cases will be reported to the PMU as part of contractor's, healthcare facilities', and other relevant parties' periodic report. Where the aggrieved workers wish to escalate their issue or raise their concerns anonymously and/or to a person other than their immediate supervisor, the workers may raise their issue with the PMU.

The Project workers' grievance mechanism will not prevent workers to use conciliation procedure provided in the Labor Code.

## 10. CONTRACTOR MANAGEMENT

The PMU will use the Bank's 2018 Standard Procurement Documents for solicitations and contracts, and these include labor and occupational, health and safety requirements. The tendering process for contractors will require that contractors can demonstrate their labor management and OHS standards, which will be a factor in the assessment processes. Contractual provisions will require that contractors:

- Monitor, keep records and report on terms and conditions related to labor management, including specific aspects relating to COVID-19.
- Provide workers with evidence of all payments made, including benefits and any valid deductions.

- Ensuring there is a health and safety focal point, responsible for monitoring OHS issues and COVID19 prevention and any cases of the virus.
- Keep records regarding labor conditions and workers engaged under the Project, including contracts, registry of induction of workers including Code of Conduct, hours worked, remuneration and deductions (including overtime);
- Record safety incidents and corresponding Root Cause Analysis (lost time incidents, medical treatment cases), first aid cases, high potential near misses, and remedial and preventive activities required (for example, revised job safety analysis, new or different equipment, skills training, etc.);
- Report evidence that no child labor is involved.
- Training/induction dates, number of trainees, and topics.
- Insurance for workers against occupational hazards and COVID-19, including ability to access medical care and take paid leave if they need to self-isolate as a result of contracting COVID-19;
- Details of any worker grievances including occurrence date, grievance, and date submitted; actions taken and dates; resolution (if any) and date; and follow-up yet to be taken. Grievances listed should include those received since the preceding report and those that were unresolved at the time of that report; and
- Sign the Manager's Code of Conduct and/or the Individual Code of Conduct, as applicable.

Monitoring and performance management of contractors will be the responsibility of the PMU. The PMU will be responsible for oversight of labor management provisions as well as contract supervision. The PMU Focal Point will have overall responsibility for data collection, monitoring, and analysis of the LMP as part of the Project's M&E efforts. The PMU Focal Point will monitor the implementation of, and compliance with, this LMP, including management of worker-related grievances. Monitoring reports should be reviewed and submitted regularly to Manager of the PMU, who will submit with other monitoring reports to the World Bank.

Contractors will keep records in accordance with specifications set out in this LMP. The PMU may at any time require records to ensure that labor conditions are met and that prevention mechanisms and other safety issues, general to OHS and specific to COVID-19, are being followed. The PMU will review records against actuals at a minimum on a monthly basis and can require immediate remedial actions if warranted. A summary of issues and remedial actions will be included in quarterly reports to the World Bank.

**Contractual non-compliance remedy:** The contract with contractors will include non-compliance remedies (i.e., sanction clause) for possible noncompliance with E&S provisions by the contractors, for example, inadequate provision of PPE to workers, forced overtime work.

**Reporting on fatalities and serious incidents:** The contractors are responsible to report to PMU/WHO (and to WB) in case of fatalities and serious incidents within 24-48 hours.

## 11. PRIMARY SUPPLY WORKERS

Local suppliers who are the local agents of international manufacturers of medical equipment will be invited to bid. These will include ventilators, oximeters, laryngoscopes, oxygen generators, PPE, disinfectants and other equipment and supplies for COVID-19 case management, as well as medicines and vaccines. These private sector medical firms will be the primary suppliers of these equipment and their workers are considered Primary Supply Workers. The number of involved workers will not be possible to determine at this time. These workers will be procuring supplies of medical equipment procured internationally to the MoPHP Stores/ medical facilities. They are not engaged in manufacturing and the risks of serious safety issues, child labor or forced labor, are considered low.

The suppliers are required to describe their OHS measures which will be put in place as outlined in WHO guidelines. This will encompass procedures for entry into health care facilities including 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, and mandating hand hygiene and personal protective equipment (PPE);

ensuring adequate supplies of PPE (particularly facemask, gowns, gloves, handwashing soap and sanitizer); and overall ensuring adequate OHS protections in accordance with General EHSs and industry specific EHSs and following evolving international best practice in relation to protection from COVID-19. Also, the Suppliers will be required to regularly integrate the latest guidance by WHO as it develops over time and experience addressing COVID-19 globally. In addition, the suppliers will be required to identify the risk of child labor and/or forced labor. In line with ESS2, prohibited is the use of forced labor or conscripted labor in the project by primary suppliers. The use of child labor will also be forbidden in accordance with ESS2, i.e. due to the hazardous work situation, for any person under the age of 18.

## ANNEX I: CODE OF CONDUCT

This template must be adapted to the project :

### 1. Introduction

The company is committed to ensuring a work environment which minimizes any negative impacts on the local environment, communities, and its workers. The company also strongly commits to creating and maintaining an environment in which Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH) have no place, and where they will not be tolerated by any employee, sub-contractor, supplier, associate, or representative of the company. The purpose of this Code of Conduct is to:

1. Create a common understanding of what constitutes Sexual Exploitation and Abuse, and Sexual Harassment
2. Create a shared commitment to standard behaviors and guidelines for company employees to prevent, report, and respond to SEA and SH, and
3. Create understanding that breach of this code of conduct will result in disciplinary action.

### 2. Definitions

- **Sexual Exploitation and Abuse (SEA)**<sup>2</sup> Is defined as any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another<sup>3</sup>.
- **Sexual Abuse:** “The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.”
- **Sexual Harassment:** <sup>4</sup> Unwelcome sexual advances, request for sexual favors, and other verbal or physical conduct of sexual nature.
- **Sexual Harassment versus SEA**<sup>5</sup> SEA occurs against a beneficiary or member of the community. Sexual harassment occurs between personnel/staff of an organization or company and involves any unwelcome sexual advance or unwanted verbal or physical conduct of a sexual nature. The distinction between the two is important so that agency policies and staff trainings can include specific instruction on the procedures to report each.
- **Consent** is the choice behind a person’s voluntary decision to do something. Consent for any sexual activity must be freely given, ok to withdraw, made with as much knowledge as possible, and specific to the situation. If agreement is obtained using threats, lies, coercion, or exploitation of power imbalance, it is not consent. **Under this Code of Conduct**<sup>6</sup> consent cannot be given by anyone under the age of 18, regardless of the age of majority or age of consent locally. Mistaken belief regarding the age of the child is not a defense.

There is no consent when agreement is obtained through:

- the use of threats, force or other forms of coercion, abduction, fraud, manipulation, deception, or misrepresentation.
- the use of a threat to withhold a benefit to which the person is already entitled, or

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<sup>2</sup> As defined in the UN Secretary’s bulletin – Special Measures for protection from sexual exploitation and abuse October 9, 2003 ST/SGB/2003/13

<sup>3</sup> In the context of World Bank Financed operations exploitation occurs when access to or benefit from a World Bank Financed good or service is used to extract sexual gain.

<sup>4</sup> Inter-Agency Standing Committee Protection against Sexual Exploitation and Abuse (PSEA): Inter-agency cooperation in community-based complaint mechanism. Global standard Operating Procedures. May 2016

<sup>5</sup> Ibid

<sup>6</sup> In accordance with the United Nations Convention on the Rights of the Child.

- a promise is made to the person to provide a benefit.

While all forms of violence against a community resident or a co-worker are forbidden, this code of conduct is particularly concerned with the prevention and reporting of sexual exploitation and abuse (SEA) and sexual harassment which constitute gross misconduct, is grounds for termination or other consequences related to employment and employment status:

(1) Examples of sexual exploitation and abuse include, but are not limited to:

- A project worker tells women in the community that he can get them jobs related to the work site (cooking and cleaning) in exchange for sex.
- A worker that is connecting electricity input to households says that he can connect women headed households to the grid in exchange for sex.

(2) A project worker gets drunk after being paid and rapes a local woman.

(3) A project worker denies passage of a woman through the site that he is working on unless she performs a sexual favor.

(4) A manager tells a woman applying for a job that he will only hire her if she has sex with him.

(5) A worker begins a friendship with a 17-year-old girl who walks to and from school on the road where project related work is taking place. He gives her moto rides to school. He tells her that he loves her. They have sex.

(6) Examples of sexual harassment in a work context include, but are not limited to:

- Male staff comment on female staffs' appearances (both positive and negative) and sexual desirability.
- When a female staff member complains about comments male staff are making about her appearance, they say she is "asking for it" because of how she dresses.
- A male manager touches a female staff members' buttocks when he passes her at work.
- A male staff member tells a female staff member he will get her a raise if she sends him naked photographs of herself.

Individual signed commitment:

I, \_\_\_\_\_, acknowledge that sexual exploitation and abuse (SEA) and sexual harassment, are prohibited. As an (employee/contractor) of (contracted agency / sub-contracted agency) in (country), I acknowledge that SEA and SH activities on the work site, the work site surroundings, at workers' camps, or the surrounding community constitute a violation of this Code of Conduct. I understand SEA and SH activities are grounds for sanctions, penalties or potential termination of employment. Prosecution of those who commit SEA and SH may be pursued if appropriate.

I agree that while working on the project I will:

Treat all persons, including children (persons under the age of 18), with respect regardless of sex, race, color, language, religion, political or other opinion, national, ethnic or social origin, gender identity, sexual orientation, property, disability, birth or other status.

- Commit to creating an environment which prevents SEA and SH and promotes this code of conduct. In particular, I will seek to support the systems which maintain this environment.
- **Not** participate in SEA and SH as defined by this Code of Conduct and as defined under (country) law (and other local law, where applicable).
- **Not** use language or behavior towards women, children or men that is inappropriate, harassing, abusive, sexually provocative, demeaning or culturally inappropriate.
- **Not** participate in sexual contact or activity with anyone below the age of 18. Mistaken belief regarding the age of a child is not a defense. Consent from the child is also not a defense. I will not participate in actions intended to build a relationship with a minor that will lead to sexual activity.
- **Not** solicit/engage in sexual favors in exchange for anything as described above.
- Unless there is the full consent by all parties involved, recognizing that a child is unable to give consent and a child is anyone under the age of 18, I will not have sexual interactions with members of the surrounding communities. This includes relationships involving the withholding or promise of actual provision of benefit

(monetary or non-monetary) to community members in exchange for sex—such sexual activity is considered “non-consensual” under this Code.

I commit to:

- Adhere to the provisions of this code of conduct both on and off the project site.
- Attend and actively partake in training courses related to preventing SEA and SH as requested by my employer.

If I am aware of or suspect SEA and SH, at the project site or surrounding community, I understand that I am encouraged to report it to the Grievance Reporting Mechanism (GRM) or to my manager. The safety, consent, and consequences for the person who has suffered the abuse will be part of my consideration when reporting. I understand that I will be expected to maintain confidentiality on any matters related to the incident to protect the privacy and security of all those involved.

**Sanctions:** I understand that if I breach this Individual Code of Conduct, my employer will take disciplinary action which could include:

- Informal warning or formal warning
- Additional training.
- Loss of salary.
- Suspension of employment (with or without payment of salary)
- Termination of employment.
- Report to the police or other authorities as warranted.

I understand that it is my responsibility to adhere to this code of conduct. That I will avoid actions or behaviors that could be construed as SEA and SH. Any such actions will be a breach this Individual Code of Conduct. I acknowledge that I have read the Individual Code of Conduct, do agree to comply with the standards contained in this document, and understand my roles and responsibilities to prevent and potentially report SEA and SH issues. I understand that any action inconsistent with this Individual Code of Conduct or failure to act mandated by this Individual Code of Conduct may result in disciplinary action and may affect my ongoing employment.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_