



# Appraisal Environmental and Social Review Summary

## Appraisal Stage

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

Date Prepared/Updated: 03/24/2020 | Report No: ESRSA00551



**BASIC INFORMATION**

**A. Basic Project Data**

Country	Region	Project ID	Parent Project ID (if any)
Haiti	LATIN AMERICA AND CARIBBEAN	P173811	
Project Name	Haiti COVID-19 Response		
Practice Area (Lead)	Financing Instrument	Estimated Appraisal Date	Estimated Board Date
Health, Nutrition & Population	Investment Project Financing	3/25/2020	3/30/2020
Borrower(s)	Implementing Agency(ies)		
Republic of Haiti	Ministère de la Santé Publique et de la Population		

Proposed Development Objective(s)

To respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness in Haiti.

Financing (in USD Million)	Amount
<b>Total Project Cost</b>	<b>20.00</b>

**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]**

This project presents the COVID-19 response plan for Haiti, under the Fast Track COVID-19 Facility. The Project will aim to prevent COVID-19 from arriving or limiting local transmission through containment strategies and to provide the best care possible for people who become ill despite a surge in demand. It will also aim to strengthen the national public health preparedness so that the country develops a stronger capacity to face potential future emergencies from the health sector. The four project components are aligned to Haiti’s COVID-19 National Preparedness and Response Plan with overall project implementation responsibility given to the MSPP. The project will be implemented with support from UN agencies and other partners. Component 1 on Emergency COVID-19 response targets containment interventions aim to limit local transmission through various coordination mechanisms, strengthened



surveillance systems, and preventive measures such as social distancing as well as communication activities focusing on behavior change and transmitted through a national risk-communication strategy. Component 2 will support improving clinical care capacity and critical health system functions through procurement of essential goods, reinforcement of infrastructure, and mobilization of health personnel, and strengthen overall pandemic preparedness. Component 3 will finance activities supporting the MSPP and department-level health authorities for project implementation and supervision.

#### D. Environmental and Social Overview

D.1. Project location(s) and salient characteristics relevant to the ES assessment [geographic, environmental, social]  
This emergency operation has been prepared as a new stand-alone project which will be implemented throughout Haiti. It will contribute to COVID-19 preparedness, monitoring, surveillance and response. The specific locations where project sub-components will be implemented have not yet been identified but will be implemented in urban as well as remote areas in existing health facilities. No major civil works are expected in this project; any works involved will focus on rehabilitation of existing structures and within existing modified footprints, including health facilities, laboratories, and possibly warehouses. Should there be a need for major refurbishments and/or construction of any new structures, Environmental and Social Management Plans (ESMPs) will be prepared based on the provisions of the Environmental and Social Management Framework (ESMF). The ESMF for this project will be prepared by updating the ESMF prepared for the World Bank-funded Strengthening Primary Health Care and Surveillance in Haiti (P167512), approved in May 2019. The ESMF and project activities will consider international protocols for infectious disease control and will include updated provisions on medical waste management. The project is not expected to impact natural habitats or cultural sites.

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

The Ministry of Public Health and Population (MSPP) has implemented numerous World Bank-financed projects in the health sector over the years, including engagements to counter epidemics, namely Cholera. The MSPP's Unité de Gestion de Projet (UGP), the partner project implementation unit (PIU), has demonstrated its capacity to screen, implement, monitor and report on environmental and social commitments as part of Bank-financed activities. Nonetheless, the circumstances around preparedness and response to any potential COVID-19 outbreak poses a unique set of challenges given the importance of immediate action synchronized over a broad geographic space. Meeting these challenges is likely beyond the capacity of UGP in its current structure. The team in UGP has the capacity to update the existing Environmental and Social Management Framework (ESMF) to integrate the updates outlined above, with a particular focus on medical waste management, occupational health and safety, and stakeholder engagement. This is the first Project under ESF that MSPP will implement, and while the safeguards specialists have undertaken the Borrower training (2018), they will need targeted support through Effectiveness and beyond to prepare documents and instruments required under the ESF. Going forward, and throughout project implementation in particular, Borrower's institutional capacity will need to be strengthened in a coordinated approach between all Project partners, including the US Center for Disease Control (CDC), the Pan-American Health Organization (WHO-PAHO), and UNICEF. Capacity building interventions may include training, additional recruitment, and support from third party entities to deliver on the objectives of the COVID-19 response operation. Given the need for a comprehensive stakeholder engagement and communications strategy, specialists in the field of public health awareness and communication may be necessary immediate additions to the team.



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

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

Substantial

#### Environmental Risk Rating

Substantial

Although the main long-term impacts are likely to be positive, there is a number of short-term risks that need to be taken into account. The main environmental risks include: (i) environmental and community health related risks from inadequate storage, transportation and disposal of infected medical waste; (ii) occupational health and safety issues related to the availability and supply of personal protective equipment (PPE) for healthcare workers and the logistical challenges in transporting PPE across the country in a timely manner; and (iii) community health and safety risks given close social contact and limited sanitary and hygiene services (clean water, soap, disinfectants) and isolation capabilities at health facilities across the country. To mitigate these risks the MSPP, with support from its Directorate for Health Promotion and Protection of the Environment (DPSPE) (the main entity of the Ministry responsible for environmental aspects and community health interventions) will update the existing Environmental and Social Management Framework (ESMF) prepared for the World Bank-funded Strengthening Primary Health Care and Surveillance in Haiti (PROSYS, P167512), approved in May 2019. The revised ESMF will contain updates on provisions for storing, transporting, and disposing of contaminated medical waste and outline guidance in line with international good practice and WHO standards on COVID-19 response on limiting viral contagion in healthcare facilities. The relevant parts of the WHO COVID-19 quarantine guidelines and COVID-19 biosafety guidelines will be reviewed so that all relevant occupational and community health and safety risks and mitigation measures will be covered. In addition to the ESMF, the client will implement the activities listed in the Environmental and Social Commitment Plan (ESCP). The Project will also support MSPP in coordination with PAHO, UNICEF, CDC, and other partners in overcoming logistical constraints in the timely provision of technical expertise, supplies, equipment and systems across the country.

#### Social Risk Rating

Substantial

One central social risk is that vulnerable social groups (poor, disabled, elderly, isolated communities) are unable to access facilities and services, which could undermine the objectives of the project. The project will also ensure that the medical isolation of individuals does not increase their vulnerability (for example, to gender-based violence, GBV) especially in rural areas of the country. Handling of quarantining interventions (including dignified treatment of patients; attention to specific, culturally determined concerns of vulnerable groups; and prevention of Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH) as well as meeting minimum accommodation and servicing requirements) can also be listed as issues that will require close attention while managing the social risks of the project. Social risks also include social tensions that could be exacerbated by the project and community health and safety-related outcomes (especially related to spread of disease and waste management) in addition to risks of social exclusion which is widespread in Haiti due to variance in communities' or individual's ability to pay. To mitigate these risks, the MSPP, in the ESCP, will commit to the provision of services and supplies based on the urgency of the need, in line with the latest data related to the prevalence of the cases. MSPP will also use the preliminary Stakeholder Engagement Plan (SEP) prepared for the emergency project to engage citizens and for public information disclosure while they update it during implementation to include more information on the environmental and social risks of project activities and new modalities that take into account the need for a comprehensive community engagement and participation plan, including improved hygiene and social distancing.



## 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:**

This Standard is relevant. The Project will have overall positive environmental and social impacts in that it will contribute to epidemic preparedness, monitoring, surveillance and response, specifically with regard to combatting COVID-19. Nonetheless there are wide-ranging environmental and social risks and impacts that will need to be assessed and managed through a risk-based approach. The primary risks identified include: (i) environmental and community health related risks from inadequate storage, transportation and disposal of infected medical waste; (ii) occupational health and safety issues related to the availability and supply of personal protective equipment (PPE) for healthcare workers and the logistical challenges in transporting PPE across the country in a timely manner; (iii) community health and safety risks given close social contact and limited sanitary and hygiene services (clean water, soap, disinfectants) and isolation capabilities at health facilities across the country; (iv) possible risks around social exclusion for access to health facilities and services, especially for the poorest and most marginalized who have a limited ability to pay, and for the elderly or those with underlying medical conditions who would be most at risk in the event of a pandemic outbreak; (v) patient-centric risks for those receiving treatment for COVID-19 symptoms, including GBV or sexual exploitation and abuse (SEA) of patients in quarantine; and (vi) socio-political risks specifically related to the ongoing civil unrest throughout the country and low trust in the government which could lead to the rejection of public health interventions and information in some country contexts, contributing to the continued spread of the disease, while extreme control measures to slow or halt the spread of COVID-19 may add to existing resentment against the government in some sectors of society.

To mitigate these risks and their related impacts, MSPP-UGP, in coordination with national and international partners, will develop or update and implement tailored risk management plans and communications strategies to promote the Project objectives. MSPP-UGP will update the existing Environmental and Social Management Framework (ESMF) prepared for the World Bank-funded Strengthening Primary Health Care and Surveillance in Haiti (P167512). The revised ESMF will contain updates on provisions for storing, transporting, and disposing of contaminated medical waste and outline guidance in line with international good practice and WHO standards on COVID-19 response on limiting viral contagion in healthcare facilities. To mitigate impacts related to OHS, MSPP-UGP will work with relevant partners, including CDC, PAHO, and UNICEF to leverage all existing supply chain options and open new ones where possible to ensure that PPE and other relevant equipment, kits and material can be procured and dispatched nationwide in a timely manner, subject to the existing health PPE constraints in the global supply chain. To manage the potential for social exclusion, the Project design takes into account aspects of service access in preparing for and responding to any COVID-19 outbreak, drawing on lessons learned from the response to the cholera epidemic in ensuring the poorest and most marginalized have equal access to health services. To minimize Community Health and Safety impacts, MSPP-UGP will outline a comprehensive community engagement and participation plan to engage and inform citizens on good practices to limit COVID transmission. To mitigate any potential patient-centric risk, MSPP-UGP with support from the World Bank will develop codes of conduct and training materials targeted at the healthcare sector and develop communication strategies (as part of the SEP) to raise awareness around GBV and SEA. These various actions and protocols will be captured in the ESMF as it is updated throughout implementation. To limit potential socio-political risks and impacts, the SEP will be a critical tool



to help identify intervention points and communication strategies to reinforce the behaviors that limit transmission and to counter any likely rumors or misinformation that may circulate as a result of COVID-19 interventions.

### **ESS10 Stakeholder Engagement and Information Disclosure**

Once approved, the project will establish a structured approach to stakeholder engagement and public outreach that is based upon meaningful consultation and disclosure of appropriate information, considering the specific challenges associated with combating COVID-19. In addition to updating the existing ESMF for the WB-funded PROSYS Project in line with the provisions of the ESCP, the client will apply the preliminary Stakeholder Engagement Plan (SEP) prepared for the emergency project, to engage citizens as needed and for public information disclosure purposes. Within one month of project effectiveness, this SEP will be updated to include more information on the environmental and social risks of project activities and new modalities that take into account the need for improved hygiene and social distancing. The updated SEP will also include a more elaborate Grievance Redress Mechanism for addressing any concerns and grievances raised in relation to the project.

The updated SEP will acknowledge the particular challenges with engaging marginalized and vulnerable social groups, especially those living in remote or inaccessible areas, while keeping a clear focus on those who are most susceptible to the transmission of the novel coronavirus, such as the elderly and those with compromised immune systems due to pre-existing conditions. Stakeholder engagement strategies will point out ways to minimize close contact and follow the recommended good hygiene procedures as outlined in the US-based Centers for Disease Control (CDC) for patients with confirmed COVID-19 or persons under investigation for COVID-19 in healthcare settings. People affected by or otherwise involved in project-supported activities, including different types of health care workers, will be provided with accessible and inclusive means to raise concerns or lodge complaints, via the Grievance Redress Mechanism (GRM) included in the SEP.

Beyond this, project implementation will be underlain by a strong and well-articulated broader National Risk Communication and Communication Engagement Plan for COVID-19, which will not only help with the implementation of the community mobilization and behavioral change objectives of the project, but also help in a broader sense to tamp down on false rumors about COVID-19, to ensure equitable access to services, and to counteract the isolation and uncertainty that comes from people being kept in quarantine.

## **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**

This Standard is relevant. Most activities supported by the project will be conducted by health and laboratory workers. Activities encompass thereby treatment of patients as well as assessment of samples. The key risk is contamination with COVID-19 (or other contagious illnesses as patients taken seriously ill with COVID-19 are likely to suffer from illnesses which compromise the immune system, which can lead to illness and death of workers). The Project will ensure the application of OHS measures as outlined in WHO guidelines which will be captured in the updated ESMF. This encompasses procedures for entry into health care facilities, including minimizing visitors and



undergoing strict checks before entering; procedures for protection of workers in relation to infection control precautions; provision of immediate and ongoing training on the procedures to all categories of workers, and post signage in all public spaces mandating hand hygiene and personal protective equipment (PPE); ensuring adequate supplies of PPE (particularly facemask, gowns, gloves, handwashing soap and sanitizer); and overall ensuring adequate OHS protections in accordance with General EHSs and industry specific EHSs and follow evolving international best practice in relation to protection from COVID-19. Also, the project will regularly integrate the latest guidance by WHO as it develops over time and experience addressing COVID-19 globally.

MSPP-UGP will develop procedures which respond to the specific health and safety issues posed by COVID-19, and protect workers' rights as set out in ESS2. This shall include Labor Management Procedures (LMP), included in the ESMF, to establish a procedure for the protection of workers' rights. The use of child labor will be forbidden in accordance with ESS2. The Project may outsource minor works to contractors. The envisaged works will thereby be of minor scale and thus pose limited risks, but workers will have access to necessary PPE and handwashing stations. Also, no large-scale labor influx is expected due to the same circumstance. In line with ESS2, the use of forced labor or conscripted labor in the Project is prohibited, both for construction and operation of health care facilities. The Project will also ensure a basic, responsive grievance mechanism to allow workers to quickly inform management of labor issues, such as a lack of PPE and unreasonable overtime via the MSPP.

### ESS3 Resource Efficiency and Pollution Prevention and Management

This Standard is relevant. Pollution prevention and management – specifically medical waste management – will be a particularly important activity under the Project. Medical waste, including chemicals, contaminated PPE and equipment, and lab testing kits from healthcare facilities will need to be safely stored, transported and disposed. Waste management in general is a binding constraint in Haiti due to limited authorized disposal sites, and contaminated medical waste is of special concern. A number of healthcare facilities operate their own incinerators to ensure safe disposal, although these are unevenly dispersed across Haiti. The current ESMF, which includes Medical Waste Management procedures, will be updated including to reflect WHO COVID-19 guidance and other international good practice, to prevent or minimize contamination from inadequate waste management and disposal.

### ESS4 Community Health and Safety

This Standard is relevant. In line with safety provisions in ESS2, it is equally important to ensure the safety of communities from infection with COVID-19. Medical wastes and general waste from the labs, health centers, and quarantine and isolation centers have a high potential of carrying micro-organisms that can infect the community at large if they are not properly disposed of. There is a possibility for the infectious microorganism to be introduced into the environment if not well contained within the laboratory or due to accidents/emergencies e.g. a fire or natural disasters such as seismic event.

The current ESMF will be updated to include further measures on medical waste including:

- how Project activities will be carried out in a safe manner with (low) incidences of accidents and incidents in line with Good International Industry Practice (WHO guidelines);
- measures in place to prevent or minimize the spread of infectious diseases;





- emergency preparedness measures.

Laboratories, quarantine and isolation centers, and screening posts, will have to follow respective procedures with a focus on appropriate waste management of contaminated materials as well as protocols, in line with WHO Guidance, on the transport of samples and workers cleaning before leaving the work place back into their communities. These will be captured in the updated ESMF.

The operation of quarantine and isolation centers needs to be implemented in a way that both the wider public as well as the quarantined patients are treated in line with international best practice as outlined in WHO guidelines referenced under ESS1.

Some project activities may give rise to the risk of Gender Based Violence (GBV), in particular Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH) risks. The ESMF to be updated for this project will include a GBV risk assessment and preventive measures, in the form of a GBV Action Plan, will be prepared and implemented if found pertinent. The Project will promote the avoidance of SEA by relying on the WHO Code of Ethics and Professional Conduct for all workers in the quarantine facilities as well as the provision of gender-sensitive infrastructure such as segregated toilets and enough light in quarantine and isolation centers.

The Project will also ensure via the above noted provisions, including stakeholder engagement, that quarantine and isolation centers and screening posts are operated effectively throughout the country, including in remote and border areas.

In case quarantine and isolation centers are to be protected by security personnel, it will be ensured that the security personnel follow a strict code of conduct and avoid any escalation of situation, taking into consideration the above noted needs of quarantined persons as well as the potential stress related to it.

#### **ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement**

This Standard is not currently relevant. The project is not expected to support construction or rehabilitation works of any sizable extent. Should any such activities come to be included--for example, as part of the establishment of local isolation units or quarantine wings in hospitals--they will be undertaken in existing facilities and within established footprints. In the unlikely event of temporary or permanent economic or physical displacement in connection with any Project activities that have not yet been identified, PROSYS's Resettlement Policy Framework (approved in May 2018) will be updated to encompass the ESF requirements, satisfactory to the Bank, and disclosed prior to commencement of the land acquisition or displacement.

#### **ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources**

This Standard is not currently relevant. The Project is not expected to support any significant construction activities that might jeopardize the integrity of biodiversity or living natural resources.





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

This Standard is not relevant as there are no groups in Haiti meeting the criteria as set out in ESS7.

**ESS8 Cultural Heritage**

This Standard is not currently relevant. With regard to tangible heritage, there are no significant construction activities anticipated and any physical works will be limited to rehabilitation or upgrading of existing facilities, entirely within their existing footprint. Should any new activity arise, Chance Find procedures will be included in the ESMF. No activities with a likely impact on intangible cultural heritage are under consideration.

**ESS9 Financial Intermediaries**

No financial intermediaries will be used.

**C. Legal Operational Policies that Apply**

**OP 7.50 Projects on International Waterways** No

**OP 7.60 Projects in Disputed Areas** No

**III. BORROWER’S ENVIRONMENTAL AND SOCIAL COMMITMENT PLAN (ESCP)**

DELIVERABLES against MEASURES AND ACTIONs IDENTIFIED	TIMELINE
<b>ESS 1 Assessment and Management of Environmental and Social Risks and Impacts</b>	
Updated Environmental and Social Management Framework (ESMF)  Timeline: The updated ESMF will be finalized within 30 days of Effectiveness. Between project approval and ESMF finalization PROSYS’ ESMF will be used. Some activities will not be eligible before the final ESMF is in place	06/2020
<b>ESS 10 Stakeholder Engagement and Information Disclosure</b>	
Updated Stakeholder Engagement Plan  Timeline: The SEP update will be finalized in 30 days after Effectiveness date. The SEP will then be continuously updated during project implementation.	06/2020
<b>ESS 2 Labor and Working Conditions</b>	

Public Disclosure



Labor Management Procedures	06/2020
Timeline: Finalized 30 days after Effectiveness as part of the ESMF	
<b>ESS 3 Resource Efficiency and Pollution Prevention and Management</b>	
Medical Waste Management Plan (MWMP) updated (and included within ESMF)	06/2020
Timeline: The MWMP will integrate WHO guidance and other international good practice and will be finalized with 30 days following Project Effectiveness.	
<b>ESS 4 Community Health and Safety</b>	
Relevant provisions included under ESS1.	06/2020
<b>ESS 5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement</b>	
<b>ESS 6 Biodiversity Conservation and Sustainable Management of Living Natural Resources</b>	
<b>ESS 7 Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities</b>	
<b>ESS 8 Cultural Heritage</b>	
<b>ESS 9 Financial Intermediaries</b>	

Public Disclosure

**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:**

None.

**IV. CONTACT POINTS**

**World Bank**

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**Borrower/Client/Recipient**

Borrower: Republic of Haiti

**Implementing Agency(ies)**

Implementing Agency: Ministère de la Santé Publique et de la Population

**V. FOR MORE INFORMATION CONTACT**

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**VI. APPROVAL**

Task Team Leader(s):	Andrew Sunil Rajkumar, Nicolas Antoine Robert Collin Dit De Montesson
Practice Manager (ENR/Social)	Valerie Hickey Cleared on 23-Mar-2020 at 16:23:29 EDT
Safeguards Advisor ESSA	Nina Chee (SAESSA) Concurred on 24-Mar-2020 at 18:04:42 EDT