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# Combined Project Information Documents / Integrated Safeguards Datasheet (PID/ISDS)

Appraisal Stage | Date Prepared/Updated: 21-Sep-2019 | Report No: PIDISDSA27108



**BASIC INFORMATION**

**A. Basic Project Data**

Country Western Africa	Project ID P170788	Project Name Additional Financing - Regional Disease Surveillance Systems Enhancement Project in West Africa, Phase 1 (REDISSE 1)	Parent Project ID (if any) P154807
Parent Project Name Regional Disease Surveillance Systems Enhancement (REDISSE)	Region AFRICA	Estimated Appraisal Date 09-Jul-2019	Estimated Board Date 05-Sep-2019
Practice Area (Lead) Health, Nutrition & Population	Financing Instrument Investment Project Financing	Borrower(s) Republic of Sierra Leone, Republic of Senegal, Republic of Guinea	Implementing Agency WAHO

Proposed Development Objective(s) Parent

The objectives of the Project are: (i) to strengthen national and regional cross-sectoral capacity for collaborative disease surveillance and epidemic preparedness in West Africa, thereby addressing systemic weaknesses within the animal and human health systems that hinder effective disease surveillance and response; and (ii) in the event of an Eligible Emergency, to provide immediate and effective response to said Eligible Emergency.

Components

- Component 1: Surveillance and Information Systems
- Component 2: Strengthening of Laboratory Capacity
- Component 3: Preparedness and Emergency Response
- Component 4: Human Resource Management for Effective Disease Surveillance and Epidemic Preparedness.
- Component 5: Institutional Capacity Building, Project Management, Coordination, and Advocacy

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

**SUMMARY**

<b>Total Project Cost</b>	9.07
<b>Total Financing</b>	9.07
<b>of which IBRD/IDA</b>	0.00



<b>Financing Gap</b>	0.00
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**DETAILS**

**Non-World Bank Group Financing**

Trust Funds	9.07
CA- Dept of Foreign Affairs, Trade and Devlp (former CIDA)	9.07

Environmental Assessment Category

B-Partial Assessment

Decision

The review did authorize the team to appraise and negotiate

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Other Decision (as needed)

**B. Introduction and Context**

Context

The West Africa Regional Disease Surveillance Systems Enhancement Program (REDISSE) Program is an interdependent Series of Projects (iSOP) to strengthen national, regional and cross-sectoral capacity for integrated disease surveillance and response in West Africa. The REDISSE Program was developed jointly by the Health, Nutrition and Population and the Agriculture Global Practices using a One-health (OH) approach to ensure that the human-animal-environment interface is addressed in strengthening West Africa’s disease surveillance and response systems. The REDISSE Program has two objectives: 1) to address systemic weaknesses within the animal and human health systems that hinder effective cross sectoral and cross border collaboration for disease surveillance and response; and 2) in the event of an eligible emergency, to provide immediate and effective response to said eligible emergency. Overall, the ongoing REDISSE Program supports 11 countries in West Africa: Guinea, Senegal, Sierra Leone (REDISSE Phase 1, P154807); Togo, Guinea-Bissau, Liberia, Nigeria (REDISSE Phase 2, P159040); and Benin, Niger, Mauritania, Mali (REDISSE Phase 3, P161163). REDISSE Phase 4 is under preparation and will expand the program to five countries in neighboring Central Africa (Angola, Central African Republic, Chad, Congo, and Democratic Republic of Congo (DRC), P167817).

REDISSE Phase 1 (REDISSE 1) was approved by the Executive Directors on June 28, 2016 for an amount of US\$114.06 million equivalent to support the regional disease surveillance and response systems in West Africa. This amount includes IDA credits of US\$70 million equivalent, IDA grants of US\$40 million equivalent,



and a Multi-Donor Trust Fund (MDTF) of US\$4.06 million from the Government of Canada. REDISSE 1 became effective on December 2, 2016 and the closing date of the project is January 31, 2023. REDISSE 1 provides financing to the countries of Senegal, Sierra Leone and Guinea, and to the West African Health Organization (WAHO), which serves as a regional coordination and implementation agency and the Program Secretariat for the countries of West Africa and Mauritania. WAHO also engages with other regional, international, university-based and private sector organizations to undertake regional activities and provide technical assistance to participating countries.

### Sectoral and Institutional Context

The proposed AF is consistent with the Regional Integration & Cooperation Assistance Strategy (RIAS) for Africa, which covers the period from FY18 to FY23. The strategy highlights the need for collective action on critical transnational priorities, including disease surveillance, prevention, and control. As part of the REDISSE Program, the countries under REDISSE 1, 2, and 3 will benefit from regional activities financed by the AF.

The project is in line with the World Bank's Twin Goals to end extreme poverty and boost shared prosperity. Communicable and non-communicable diseases are a major constraint on the health, education and potential earnings of people living in the ECOWAS region and have the greatest impact on vulnerable populations. Compounding the threats in this reality is climate change, which will stress already weak systems, displace populations, and create environmental conditions more favorable for disease transmission. The REDISSE Program has climate change Co-Benefits of 51% based on its contribution to climate adaptation.

The Country Partnership Frameworks (CPF) for Guinea (2018) emphasizes the need for improved health and social protection, of which disease surveillance is a key pillar to improve health outcomes and reduce vulnerability to health emergencies. The AF is also in line with the recommendations from the WBG Systematic Country Diagnostic (SCD) for Senegal (2018) and Sierra Leone (2018), which recommends addressing the challenges in the development of human capital (including addressing shortage of skilled health professionals and the strengthening of disease surveillance and response systems, including disease surveillance capacity for early detection and response to disease outbreaks) as priority policy actions.

The AF is closely aligned to the IDA 18 commitment to support the development of pandemic preparedness plans is the commitment to support the development of a framework for consensus building, governance and practical implementation arrangements across multiple sectors and stakeholders involved in supporting health security. The AF is also complimentary to other WBG initiatives such as the Pandemic Emergency Financing Facility (PEF), and Universal Health coverage (UHC) for Sustainable Development goals (SDGs) 2030 through the strengthening of health systems to reduce the risks of disease outbreaks and their human, social and economic consequences and through the CERC component embedded in the program. REDISSE also compliments the WBG's other regional projects such as Africa Higher Education Centers of Excellence (ACE) Program, which promotes specialization among Universities — including of human and animal disciplines; and the Africa Centers for Disease Control (Africa CDC) project; bi-lateral investments in health security in health and non-health projects such as the new Health Services Reinforcement Project in Burkina Faso (P164696).

The proposed AF will also contribute to: (i) developing the national and regional capacity to fully implement the IHR through the IDSR strategy, which calls for the continuous monitoring of mortality and morbidity to identify and respond



to threats before they can develop into large scale or transboundary epidemics; (ii) facilitate country and regional compliance with international standards for veterinary services, with a particular focus on early detection and rapid response capacity, as adopted by the OIE members States in the Terrestrial Animal Health Code, and utilize the findings and recommendations from the OIE PVS Pathway; and (iii) ensure more efficient collaboration and synergies between human and animal epidemiological surveillance and response networks at country and regional levels.

### **C. Proposed Development Objective(s)**

#### Original PDO

The objectives of the Project are: (i) to strengthen national and regional cross-sectoral capacity for collaborative disease surveillance and epidemic preparedness in West Africa, thereby addressing systemic weaknesses within the animal and human health systems that hinder effective disease surveillance and response; and (ii) in the event of an Eligible Emergency, to provide immediate and effective response to said Eligible Emergency.

#### Current PDO

The objectives of the Project are: (i) to strengthen national and regional cross-sectoral capacity for collaborative disease surveillance and epidemic preparedness in West Africa; and (ii) in the event of an Eligible Emergency, to provide immediate and effective response to said Eligible Emergency.

#### Key Results

Four of the six PDO level indicators will be based on the periodic Joint External Evaluation (JEE) for monitoring progress in the implementation of the International Health Regulations (See Annex 1). The following key indicators will be used to track progress towards the PDOs:

- a. Progress towards establishing an active, functional regional One Health Platform (Number based on 5 point likert scale);
- b. Laboratory testing capacity for detection of priority diseases: number of countries that achieve a JEE score of 4 or higher out of 5;
- c. Progress in establishing indicator and event-based surveillance systems: number of countries that achieve a JEE score of 4 or higher out of 5;
- d. Availability of human resources to implement IHR core capacity requirements; number of countries that achieve a JEE score of 3 or higher out of 5;
- e. Multi-hazard national public health emergency preparedness and response plan is developed and implemented: number of countries that achieve a JEE score of 4 or higher out of 5;
- f. Progress on cross-border collaboration and exchange of information across countries: number of countries that achieve a score of 4 or higher out of 5.

### **D. Description of Additional Financing**

This paper seeks management approval for the provision of the MDTF grant for US\$ 10.5 million as additional financing (AF) to the REDISSE 1 project. The proposed AF will provide much needed support to WAHO to maintain its regional coordinating functions and cross-cutting regional/international institution support for



REDISSE countries; and for completing the MDTF funded activities. The activities proposed are in line with the original project activities. This AF will allow the project to progress towards achievement of the PDO and the intended results as per targets as agreed during negotiations and set in the RF.

The AF is essential to the successful coordination of the expanded REDISSE Program and the full implementation of the donor financed activities under the MDTF. The initial funding allocation to WAHO for project coordination and regional activities under REDISSE 1 was US\$24.06 million equivalent (US\$20 million IDA grant and US\$4.06 million equivalent from the MDTF). REDISSE 1 covers three countries: Guinea, Senegal and Sierra Leone. The REDISSE Program quickly expanded with the addition of new projects in West Africa (REDISSE 2 covering Guinea-Bissau, Liberia, Nigeria and Togo; and, REDISSE 3 covering Benin, Mali, Mauritania and Niger). The Program continues to expand and REDISSE 4 is currently in appraisal stage for Central Africa. Continuation of regional activities under the REDISSE Program is essential to achievement of the REDISSE PDOs for all three West African projects in the series.

The AF to REDISSE 1 from the MDTF will be made available to WAHO and will be used as follows:

- i. US\$ 8.8 million to complete the program of work agreed with the Government of Canada under the REDISSE MDTF. In March 2016, the Government of Canada committed a total of US\$15 million (CAN 20 million equivalent) in support of the REDISSE Program through the MDTF intended to finance both Bank-executed (BE) and Recipient-executed (RE) activities. BE activities include support for enhanced project supervision and support for preparation activities under the REDISSE Program. These funds have been critical to the quality and timely preparation of REDISSE 2 and 3 and the supervision of the Program as a whole. The designated Recipient of the Canadian contribution to the MDTF is WAHO. RE activities include: (a) setting up 147 CES in selected ECOWAS countries; and (b) capacity building activities for ECOWAS member states in disease surveillance. The REDISSE 1 project at the time of approval included only an initial tranche of funding (i.e. “cash in hand”) for RE activities (US\$ 4.06 million equivalent) from the CAN 20 million (US\$ 15 million equivalent) commitment. As such, the target deliverable for the first phase of the Canada-financed RE activities was set at 47 out of the proposed 147 CES. The 47 CES have been established in five countries and capacity building activities for surveillance have been implemented in support of all ECOWAS member states and Mauritania. Following Board approval of the REDISSE 1 Project, the government of Canada has made additional contributions to the MDTF. A total of US\$ 4.84 million (approximately) is presently available in the trust fund to support the second phase activities, which include the establishment of an additional 53 CES. The remainder of the financing (CAN 5.5 million or US\$ 4.1 million equivalent) committed by the Government of Canada is expected by 31 March 2021. Disbursement details for the remaining funds are in the revised administrative agreement signed on 20 February 2019. As such additional financing for RE activities can now be made available to WAHO from the MDTF to establish additional CES and continue support for ECOWAS countries for capacity development in disease surveillance.
- ii. US\$ 0.27 million to WAHO to implement regional activities until the end of IDA 18. When REDISSE 1 was established, there were only three countries in the REDISSE Program in West Africa. This number has grown to 11 and all 15 ECOWAS member states, as well as Mauritania, are participating in and benefitting from regionally sponsored initiatives that are either implemented or managed by WAHO. This has placed a greater demand on the regional institution and created a need for additional regional resources. Funding from the MDTF for capacity building in disease surveillance will be used to support



key regional activities until an additional regional IDA grant can be mobilized under IDA 19 to support activities through the end of project implementation.

The AF is consistent with Investment Project Financing (IPF), which provides for AF in the context of ongoing, well-performing projects when there is a financing gap or cost overrun, for scaling up the project effectiveness, and/or in cases of Project restructuring, when the original funding is insufficient for the modified or additional project activities. As the AF will support the scale up activities of Component 1 and the continuation of activities under Components 1, 2, 3, and 5, it is expected to enhance the project's development effectiveness. The original funding under REDISSE 1 is insufficient for continuation of REDISSE regional activities. This is especially relevant considering the expansion of the REDISSE Program from REDISSE 1, which included three countries, to REDISSE 1, 2, and 3 (with 11 participating countries).

## **E. Implementation**

### Institutional and Implementation Arrangements

No changes are envisioned with regards to the implementation arrangements as the regional REDISSE steering committee will continue to provide oversight and strategic guidance to the project, and WAHO will continue to implement the regional activities.

**Financial Management.** All financial arrangements remain the same. The Financial Management is rated satisfactory at the last archived Portfolio and Risk Management (PRIMA) on December 30, 2018. There are no outstanding IFRs and all internal and external audits have been conducted and are unqualified and no major issues have been reported. All countries and WAHO are conducting business in compliance with World Bank procedures, and Financial Management Manuals have been prepared for all implementation entities, including WAHO. All countries in REDISSE 1 have prepared a Contingency Emergency Response Component (CERC) Operations Manual. The overall Financial Management residual risk rating is substantial for the three countries (Senegal, Guinea, and Sierra Leone) and moderate for WAHO.

**Procurement.** While procurement under the REDISSE 1, Concept Note of which was approved in January 15, is governed by the Procurement Guidelines dated January 2011 and revised July, 2014, procurement under the proposed Additional Financing shall be carried out in accordance with the World Bank's "Procurement Regulations for IPF Borrowers" (Procurement Regulations) dated July 2016 under the "New Procurement Framework (NPF)", and the "Guidelines on Preventing and Combating Fraud and Corruption in Projects Financed by IBRD Loans and IDA Credits and Grants", dated October 15, 2006 and revised in January 2011 and as of July 1, 2016, and other provisions stipulated in the Financing Agreements.

The majority of AF will be used to support ongoing activities. Procurement for new activities will be carried out by WAHO, who will prepare a Project Procurement Strategy Document (PPSD) in line with World Bank's "Procurement Regulations for IPF Borrowers" (Procurement Regulations) dated July 2016 and revised in November 2017 under the "New Procurement Framework (NPF)".

Procurement is currently rated Satisfactory based on the findings of the Procurement Revision recorded at the Procurement Risk Assessment Management System (P-RAMS) on March 5, 2019. No major issues or mis-procurements have been reported. Although country level planning and procurement processes have been slow,



WAHO has done a highly satisfactory job in implementing regionally financed activities and in convening REDISSE 1, 2 and 3 countries for regional coordination and harmonization of nationally led actions.

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**F. Project location and Salient physical characteristics relevant to the safeguard analysis (if known)**

The Additional Financing is for Regional Training activities only which will be held in existing facilities in selected countries (Nigeria, Mali, Mauritania, Niger and Benin).

**G. Environmental and Social Safeguards Specialists on the Team**

Kristyna Bishop, Social Specialist  
Fabienne Anne Claire Prost, Environmental Specialist  
Mame Safietou Djamil Gueye, Social Specialist

**SAFEGUARD POLICIES THAT MIGHT APPLY**

Safeguard Policies	Triggered?	Explanation (Optional)
Environmental Assessment OP/BP 4.01	Yes	
Performance Standards for Private Sector Activities OP/BP 4.03	No	
Natural Habitats OP/BP 4.04	No	
Forests OP/BP 4.36	No	
Pest Management OP 4.09	Yes	
Physical Cultural Resources OP/BP 4.11	No	
Indigenous Peoples OP/BP 4.10	No	
Involuntary Resettlement OP/BP 4.12	No	
Safety of Dams OP/BP 4.37	No	
Projects on International Waterways OP/BP 7.50	No	



Projects in Disputed Areas OP/BP 7.60      No

## KEY SAFEGUARD POLICY ISSUES AND THEIR MANAGEMENT

### A. Summary of Key Safeguard Issues

1. Describe any safeguard issues and impacts associated with the proposed project. Identify and describe any potential large scale, significant and/or irreversible impacts:

The activities proposed under the REDISSE project are not expected to induce any long term or irreversible environmental or social impacts. The project is expected to have overall positive environmental and social impacts through its support to surveillance, monitoring and containment of diseases including zoonosis. To mitigate any adverse impacts related to project activities, two Bank safeguards policies have been triggered for the project, namely: Environmental Assessment (OP/BP 4.01) and Pest Management (OP 4.09). ESMFs have been prepared and disclosed in each country and at the InfoShop. National medical waste management plans for each country have been disclosed in-country and at the InfoShop. Integrated Pest and Vector Management Plans for each country have also been disclosed in each country and at the InfoShop. To date, no site specific safeguards documents (ESMPs, WMPs) have been prepared under the parent project because no public works have been proposed by the clients. All of the safeguards instruments of the parent project remain in effect. The documents (ESMF, HCWMP, IPMP) were disclosed by the participating countries on 27 April 2016 and published in INFOSHOP on 28 April 2016.

The project will have beneficial social impacts on populations and need to promote Gender to support women as drivers of change for strengthening West Africa's capacity for disease surveillance and response to health emergencies. This AF needs to implement a Grievance Redress Mechanism (GRM) plan and a community engagement plan who can promote global health security and communication – sensibilization program for vulnerable groups particularly women and children in rural areas who are often the first victims of epidemiological threats.

2. Describe any potential indirect and/or long term impacts due to anticipated future activities in the project area: No long term environmental or social impacts are anticipated as a result of project activities.

3. Describe any project alternatives (if relevant) considered to help avoid or minimize adverse impacts.  
 N/A

4. Describe measures taken by the borrower to address safeguard policy issues. Provide an assessment of borrower capacity to plan and implement the measures described.

The respective Borrowers have each and collectively benefited from other (past and ongoing) IDA projects which provided/are providing relatively sufficient capacity for understanding and applying safeguard policies. The Bank's involvement in the health sector has been significant and the clients have overtime shown relatively sufficient capacity and good will in implementing World Bank funded projects. Nonetheless, to ensure timely and successful processing and implementation of this regional operation, the World Bank Group safeguards specialists will provide advice and support to the relevant institutions in each country, as well as ECOWAS/WAHO, to help strengthen technical capacity, including in the respective national environmental (and social) agencies.

5. Identify the key stakeholders and describe the mechanisms for consultation and disclosure on safeguard policies,



with an emphasis on potentially affected people.

The main beneficiaries of REDISSE will be the overall population of ECOWAS countries with Guinea, Liberia, Nigeria, Senegal and Sierra Leone during the first phase. The proposed project is expected to benefit over 215 million people (12.3 million in Guinea; 4.4 in Liberia 177.5 in Nigeria, 14.7 in Senegal and 6.3 in Sierra Leone) whose livelihoods may be affected by diseases. Secondary beneficiaries include service providers (both public and private), as well as national and regional institutions involved in human and animal health. WAHO will be a major institutional beneficiary of this project, alongside the Regional Animal Health Center (RAHC) (Centre Régional de Santé Animale-CRSA, based in Bamako) as well as RCDC and other regional technical partners. Hence population of the region will also benefit from the strengthened regional capacity to prevent, detect and react promptly to sanitary events of importance.

Design and preparation of REDISSE have been deeply grounded in an inclusive public consultation and participation style. Series of meetings have been held in Dakar (December, 2015 and March, 2016) and in each individual country (January, 2016) that offered a platform for open discussions and experience gathering to better frame the design and preparation of REDISSE. Support by ECOWAS as the regional entity to coordinate the program, especially through one of its branches (WAHO), adds a plausible weight in the consultative and inclusive coordination approach REDISSE is built on. Likewise, preparation, validation and public disclosure of the safeguards instruments has been done and will be done to ensure broad public engagement (taking into account women, youth, elderly, disabled and vulnerable groups) through ownership and social accountability mechanism that altogether are foreseen to foster a sustainable development path. Since consultation and participation is an iterative process, the same trend will be maintained throughout the lifecycle of REDISSE

**B. Disclosure Requirements (N.B. The sections below appear only if corresponding safeguard policy is triggered)**

**Environmental Assessment/Audit/Management Plan/Other**

Date of receipt by the Bank	Date of submission for disclosure	For category A projects, date of distributing the Executive Summary of the EA to the Executive Directors
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**"In country" Disclosure**

**Pest Management Plan**

Was the document disclosed prior to appraisal?	Date of receipt by the Bank	Date of submission for disclosure
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**"In country" Disclosure**



**C. Compliance Monitoring Indicators at the Corporate Level (to be filled in when the ISDS is finalized by the project decision meeting) (N.B. The sections below appear only if corresponding safeguard policy is triggered)**

**CONTACT POINT**

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## The World Bank

Additional Financing - Regional Disease Surveillance Systems Enhancement Project in West Africa, Phase 1 (REDISSE 1) (P170788)

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### APPROVAL

Task Team Leader(s):	John Paul Clark Ibrahim Magazi Maud Juquois
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### Approved By

Safeguards Advisor:	Hanneke Van Tilburg	19-Sep-2019
Practice Manager/Manager:	Sybille Crystal	22-Sep-2019
Country Director:	Deborah L. Wetzel	25-Sep-2019



## The World Bank

Additional Financing - Regional Disease Surveillance Systems Enhancement Project in West Africa, Phase 1  
(REDISSE 1) (P170788)

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