Project Information Document (PID)
### BASIC INFORMATION

#### A. Basic Project Data

<table>
<thead>
<tr>
<th>Country</th>
<th>Project ID</th>
<th>Project Name</th>
<th>Parent Project ID (if any)</th>
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<table>
<thead>
<tr>
<th>Parent Project Name</th>
<th>Region</th>
<th>Estimated Appraisal Date</th>
<th>Estimated Board Date</th>
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<thead>
<tr>
<th>Practice Area (Lead)</th>
<th>Financing Instrument</th>
<th>Borrower(s)</th>
<th>Implementing Agency</th>
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**Proposed Development Objective(s) Parent**

To prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness in Niger

**Components**

- Component 1: Emergency COVID-19 Response
- Component 2: Communication campaign, community engagement and Behavior change
- Component 3: Implementation Management and Monitoring and Evaluation

### PROJECT FINANCING DATA (US$, Millions)

#### SUMMARY

<table>
<thead>
<tr>
<th>Total Project Cost</th>
<th>29.20</th>
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<tbody>
<tr>
<td>Total Financing</td>
<td>29.20</td>
</tr>
<tr>
<td>of which IBRD/IDA</td>
<td>28.00</td>
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<td>Financing Gap</td>
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#### DETAILS

**World Bank Group Financing**

| International Development Association (IDA) | 28.00 |
B. Introduction and Context

Country Context

1. This Project Paper seeks the approval of the Regional Vice President to provide an Additional Financing (AF) in the amount of US$ 28 million equivalent IDA (US$14 million - IDA Credit; US$14 million - IDA Grant) and a trust fund grant from the Energy Sector Management Assistance Program (ESMAP) in the amount of US$ 1.2 million for the Niger-COVID-19 Emergency Response Project (ERP) (P173846). The AF will support expanding activities of the Niger-COVID-19 ERP, under the COVID-19 Strategic Preparedness and Response Program (SPRP) using the Multiphase Programmatic Approach (MPA), approved by the Board on April 2, 2020, and the vaccines AF to the SPRP approved on October 13, 2020.\textsuperscript{1} The primary objectives of the AF are to enable affordable and equitable access to COVID-19 vaccines and help ensure effective vaccine deployment in Niger through vaccination system strengthening, and to further strengthen preparedness and response activities under the parent project. The Niger COVID-19 ERP in the amount of US$ 13.95 million was approved on April 13, 2020 under the SPRP.

2. The purpose of the proposed AF is to provide upfront financing to help the Government of Niger (GoN) purchase and deploy COVID-19 vaccines that meet the Bank’s vaccine approval criteria (VAC), and strengthen relevant health systems that are necessary for a successful deployment and to prepare

\begin{footnotesize}
\begin{itemize}
\item The WB approved a US$12 billion WBG Fast Track COVID-19 Facility (FTCF or “the Facility”) to assist IBRD and IDA countries in addressing the global pandemic and its impacts. Of this amount, US$6 billion came from IBRD/IDA (“the WB”) and US$6 billion from the International Finance Corporation (IFC). The IFC subsequently increased its contribution to US$8 billion, bringing the FTCF total to US$14 billion. The AF of US$12 billion (IBRD/IDA) was approved on October 13, 2020 to support the purchase and deployment of vaccines as well as strengthening the related immunization and health care delivery system.
\end{itemize}
\end{footnotesize}
The World Bank
Niger COVID-19 Emergency Response Project - Additional Financing (P176345)

for the future. The proposed AF will support the deployment of vaccines secured through the COVID-19 Vaccines Global Access (COVAX) Advance Market Commitment (AMC) facility up to 20 percent of the population as a priority. It will also support the purchase of subsidized vaccines and deployment to help vaccinate up to 5 percent of the population, following the Bank’s Vaccine Approval Criteria (VAC). As of April 16, 2021, the Bank’s VAC for COVID-19 vaccines is: (i) the vaccine has received regular or emergency licensure or authorization from at least one of the Stringent Regulatory Authorities (SRA) identified by the World Health Organization (WHO) for vaccines procured and/or supplied under the COVAX Facility, as may be amended from time to time by WHO; or (ii) the vaccine has received WHO Prequalification (PQ) or WHO Emergency Use Listing (EUL). As vaccine development is rapidly evolving, Bank’s VAC may be reviewed. The country will provide free of cost vaccination to the population.

3. The need for additional resources to expand the COVID-19 response was formally conveyed by the GoN on January 8, 2021. The World Bank (WB) received a first letter from the GoN requesting US$28 million (combination of IDA credit and grant) for financing the vaccine procurement and delivery to 25 percent of the country’s population. The proposed AF will form part of an expanded health response to the pandemic, which is being supported by development partners under the coordination of the GoN. Additional WB financing will provide essential resources to enable the expansion of a sustained and comprehensive pandemic response that will appropriately include vaccination in Niger.

4. Critically, the AF seeks to enable the acquisition of vaccines from a range of sources to support Niger’s objective to have a portfolio of options to access vaccines under the right conditions (of value-for-money, regulatory standards and delivery time among other key features). The COVAX facility has put in place a framework that will anchor Niger’s strategy and access to vaccines: in December 2020, Niger has entered into an agreement with COVAX to get access to COVID-19 vaccines to cover 20 percent of the country’s population. The proposed IDA financing will build on this to expand Niger’s access. The availability and terms of vaccines remain fluid and prevent the planning of a firm sequence of vaccine deployment: rather the proposed financing enables a portfolio approach that will adjust during implementation in response to developments in the country pandemic situation and the global market for vaccines.

Sectoral and Institutional Context

5. The Project Development Objective (PDO) of the parent project and this AF is to prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness in Niger. The parent project includes the components as listed below and summarized in Annex 4. Detailed description of the project can be found at https://imagebank2.worldbank.org/search/31967302. The parent project includes three components: C1. Emergency COVID-19 Response; C2. Communication campaign, community engagement and behavior change; and C3. Implementation Management and Monitoring and Evaluation. The proposed AF activities will be housed primarily under C1, which will further strengthen early case detection, contact tracing, recording, reporting, essential health services supplies, in addition to expand project activities for vaccines purchasing and deployment (investments in cold chain upgrading, logistics, and training among others). Additional activities will also be added to the
other two components, in terms of public information vaccination campaigns and monitoring of immunization.

6. The Ministry of Public Health, Population and Social Affairs (MOPHPSA) is the implementing agency for the project. Fonds Commun pour la santé (FCS) is the Project implementation Unit (PIU) under the MOPHPSA. The MOPHPSA will be accountable for meeting AF objectives and providing oversight of project activities. While the COVID-19 pandemic is ongoing, the National Coordination COVID-19 Committee will be responsible for defining the implementation strategies and validating the Annual Work Plan and Budget of the project. In preparation for vaccination efforts, the national coordination committee has been expanded to include an immunization commission led by the Expanded Program on Immunization (EPI). The National Regulatory Authority is represented by the Directorate of Pharmacy, which is responsible for registering pharmaceutical products, including vaccines.

C. Proposed Development Objective(s)

Original PDO

7. To prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness in Niger

Current PDO

The PDO remains the same with the AF.

Key Results

8. To measure overall progress, the coverage and deployment of the COVID-19 vaccine, and the gender gaps the project can address, the following indicators are added to the project Results Framework.

At PDO level:

One indicator will be added to capture the coverage of COVID-19 vaccines among priority populations:
Percentage of population vaccinated, which is included in the priority population targets defined in national plan [by gender] - (Target 25 percent);

D. Project Description

9. The changes proposed for the AF entail expanding the scope of activities in the Parent Project Niger COVID-19 Emergency Response Project and adjusting its overall design (see Annex 2 for details). As the proposed activities to be funded under the AF are aligned with the original PDO, the PDO would remain unchanged; one additional PDO indicator will be added to measure the percentage of the priority population vaccinated, based on the targets defined in the national plan.
10. Proposed changes include:

a. Components and cost:
   i. Component 1
   • To reflect vaccine procurement and deployment (including cold chain cost, logistic arrangement), subcomponent 1.4 was added to deliver the vaccines to up to regional level
   • To reflect the expanded scope, subcomponents 1.1 and 1.2 were revised
   ii. Component 2 and 3: revised to reflect the expanded scope.

b. Results framework:
   i. Adding one PDO level indicator and four intermediate results indicators to reflect expanded scope of the proposed AF
   ii. Revising definition of two existing indicators to align to MOPHP SA guidelines
   iii. Gender aspect will be considered for some indicators (number of trained health personnel in infection control prevention) and new indicator is added on Gender sensitive educational materials on COVID-19 vaccines distributed (Y/N)

c. Institutional and implementation arrangements: The National COVID-19 Coordination Committee will continue to provide support for defining project implementation strategies and overall leadership, coordination, and strategic planning for the response. A new sub-committee on immunization led by the EPI will provide technical and strategic leadership.

d. Closing date: The closing date of the parent project will be extended from April 30, 2022 to December 31, 2024 to allow for sufficient time to implement activities considering global supply-side constraints resulting in longer procurement and delivery timelines and the complexity of rolling out nationwide vaccination.

(I) Proposed New Activities

11. Vaccine purchasing will be done through Component 1 of the Global COVID-19 MPA (also known as Strategic Preparedness and Response Program, SPRP). The support for vaccines when available, which was anticipated in the initial Global COVID-19 MPA, will be added as part of the containment and mitigation measures to prevent the spread of COVID-19 and deaths under Component 1: Emergency COVID-19 Response. Niger will use three options for vaccine purchase and financing mechanisms: (i) Vaccine sourcing through COVAX facility as a first preference and priority, (ii) direct contracting with manufacturers, facilitated by UNICEF, and (iii) the African Union Program. Given the recent emergence of COVID-19, there is no conclusive data available on the duration of immunity that vaccines will provide. While some evidence suggests that an enduring response will occur, this will not be known with certainty until clinical trials follow participants for several years.

12. To support the GoN’s vaccination planning, the AF will finance upfront technical assistance to support Niger to establish institutional frameworks for the safe and effective deployment of COVID-19 vaccines. These will include:
a. Strengthening of planning and management of vaccination plan, including (i) support the implementation of the national deployment and vaccination plan and associated budget; (ii) support to developing the legal regulatory documents and plans to ensure swift importation of the COVID-19 vaccines; (iii) training for health personnel for vaccine roll-out; (iv) contingency measures included in the NVDP to deal with any unexpected disruptions to vaccine supply from climate change and natural disasters (i.e., flooding and extreme heat);

13. Procurement, supply and distribution of (i) COVID-19 vaccines and consumables in accordance with criteria adopted under the AF; (ii) ancillary supply kits that may include needles, syringes, alcohol prep pads, COVID-19 vaccination record cards for each vaccine recipient, and PPEs for vaccinators; (iii) equipment required to support low-carbon cold chains (storage, transportation and distribution of COVID-19 vaccines), including certified climate friendly solar powered refrigerators/freezer to reduce GHC emissions; (iv) equipment for remote temperature monitoring; (v) low-carbon and energy efficient incinerators and waste management equipment; and (vi) climate-smart civil works such as small rehabilitation of health facilities and cold rooms to ensure they are well-insulated against extreme heat from climate change.

<table>
<thead>
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<th>Legal Operational Policies</th>
<th>Triggered?</th>
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<td>Projects on International Waterways OP 7.50</td>
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<tr>
<td>Projects in Disputed Areas OP 7.60</td>
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</tr>
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Summary of Assessment of Environmental and Social Risks and Impacts

E. Implementation

Institutional and Implementation Arrangements

14. The institutional arrangements for the parent project implementation and oversight will be maintained. The PIU of the MoPH will contract procurement of vaccines to UNICEF, relying on its
technical expertise with COVID-19 vaccine procurement, including integrating indemnity provisions in-line with national regulations. The National COVID-19 Coordination Committee and its technical committees will continue to provide support for defining project implementation strategies and overall leadership, coordination, and strategic planning for the response. A new sub-committee on immunization led by the EPI will provide technical and strategic leadership. GoN will implement a COVID-19 vaccine post-introduction assessment in September 2021. The assessment will systematically assess the impact on the COVID-19 vaccine introduction on the existing health system and will assess the overall impact of the introduction of the COVID-19 vaccine on the national immunization program. The assessment will focus on the targets covered, the acceptability of the vaccine, the quality of vaccine storage and logistics.

15. The national COVID-19 coordination committee and its technical committee will continue to provide overall leadership, coordination, and strategic planning for the response. The sub-committees will continue to play their roles, with the new sub-committee on immunization, led by the EPI program providing strengthened technical and strategic leadership. The Project Steering Committee will remain in place, with additional representation from EPI.

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APPROVAL

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