



Project Information Document/ Identification/Concept Stage (PID)

Concept Stage | Date Prepared/Updated: 14-Jul-2021 | Report No: PIDC249450



BASIC INFORMATION

A. Basic Project Data

Project ID	Parent Project ID (if any)	Environmental and Social Risk Classification	Project Name
P177168		Moderate	Piloting social protection and WASH interventions to keep adolescent girls in school in Zimbabwe
Region	Country	Date PID Prepared	Estimated Date of Approval
AFRICA EAST	Zimbabwe	14-Jul-2021	
Financing Instrument	Borrower(s)	Implementing Agency	
Investment Project Financing	Republic of Zimbabwe	CARE International	

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PROJECT FINANCING DATA (US\$, Millions)

SUMMARY

Total Project Cost	0.90
Total Financing	0.90
Financing Gap	0.00

DETAILS

Non-World Bank Group Financing

Trust Funds	0.90
Zimbabwe Reconstruction Fund (ZIMREF)	0.90

B. Introduction and Context

Country Context

COVID 19's impact on Zimbabwe's poor requires urgent action while the underlying economic crisis highlights the need for both urgent and longer-term support to the poorest in Zimbabwe. The pandemic comes at a time when Zimbabwe is already battling to contain effects of the failed 2019 agricultural season which resulted in high food insecurity as well as the Cyclone Idai Event. The number of extreme poor people in Zimbabwe (living under US\$1.90 per day) doubled in just two years to 6 million people in April/May 2019



and is estimated to have reached 8 million in 2020. The estimated number of orphans and vulnerable children is one million.

Zimbabwe's economy continues to be in deep recession, following a bad 2019 agriculture season which affected agriculture production leaving more than half of the population food insecure. Continued macroeconomic volatility coupled with the impact of COVID-19 have deepened the recession in 2020 and 2021. Gross Domestic Product (GDP) in 2020 was expected to be ten percent lower as COVID-19 disrupted movement of people, trade, and capital. The effects of COVID-19 have further elevated prices—year-on-year (y-o-y) inflation was recorded at 471 percent in October 2020. The rate is now going down due to the new monetary policies introduced. As at April 2021 year on year inflation was recorded at 194 percent. In terms of expenditure, household final consumption is estimated to have contracted by 12.8 percent, as a result of reduced disposable incomes due to effects of COVID-19 which saw most companies shutting down for some time during the year. While 70 percent of the extreme poor lived in rural areas, drops in consumption were particularly severe among the poor in urban areas, where the coverage of social assistance was especially low. Estimates suggest the number of extreme poor reached eight million in 2020—almost 50 percent of the population. Nearly 500,000 households have one member who lost her or his job in 2020, worsening the plight of the poor and forcing a large cohort into poverty.

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Sectoral and Institutional Context

For the purposes of this proposal, the focus is on the Social Protection and Water, Sanitation and Hygiene Sectors (WASH), given their immediate relevance to the severe ramifications of the pandemic for the economy, social security, and health.

A growing body of evidence points to the detrimental effects of harmful gender, social and economic barriers to girls' continued access to education and coping strategies as a result of poverty. These coping strategies, employed by households as a result of poverty and food insecurity, such as child marriage or prioritization of boys' education, result in higher dropout rates, lower school attendance, and lower high school completion rates among girls. In 2019, a total of 3,645 (19.01 percent) secondary school girls dropped out of school due to marriage, 2,864 (14.93 percent) due to pregnancy, 2,954 (35.16 percent) due to financial reasons and 146 (0.76 percent) due to child labour in Zimbabwe. In the COVID-19 context, where many households have adopted negative coping strategies and schools have closed, child protection issues are even more concerning. By the end of March 2020, some 9,500 schools had closed in Zimbabwe, affecting more than 4.6 million children. A second lockdown involving school closures in early 2021 further interrupted children's education. The pandemic adds to the layered vulnerability of girls living in poverty given the gendered dynamics and disproportionate impact it has on women and girls.

The Government of Zimbabwe (GoZ)'s social protection programs are critical to improving human capital development through improving girls' education outcomes. In 2020 GoZ adopted the Education Amendment Act, 2020, which has fairly extensive provisions to protect, respect and fulfill the right to basic education for all children and addresses issues pertinent to the girl child, including the prohibition of



expelling pregnant girls from school and promoting sexual and reproductive health. Moreover, since 2001, GoZ has implemented the nationwide Basic Education Assistance Module (BEAM) social protection program, which covers school and examination fees and levies to support the education of orphaned and vulnerable children aged 4-19 years old including the disabled.

Nonetheless, the educational performance of adolescent girls remains hindered by household food and nutrition insecurity, lack of access to menstrual hygiene products, inadequate girl and disability friendly WASH facilities in schools, overwhelming household chores, and social constraints such as early marriage or pregnancy. Given the increased vulnerability of adolescent girls due to the indirect effects of the COVID -19 pandemic, and the reopening of schools in Zimbabwe, there is interest in working to reduce school dropout among adolescent girls' through providing complementary social protection and WASH support addressing key barriers to regular attendance at school. This will not only inform the COVID 19 response by stakeholders in Zimbabwe, but also the longer-term design of the GoZ's social protection programs, particularly the BEAM.

Another cost-effective strategy for increasing public health pandemic preparedness, prevention, and mitigation especially in resource-constrained settings, is investing in public health awareness. The World Health Organization (WHO,2020) asserts that, sustained personal hygienic behavior such as handwashing with soap and water, masking up, staying in adequately ventilated spaces, including proper WASH and waste management practices serve as preventive mechanisms to the spread of COVID-19 virus in homes, communities, health care facilities, schools, and other public spaces. In Zimbabwe, COVID 19 will affect the country's most vulnerable people, many of whom live in, go to school or work in crowded conditions or rural community settings without the most basic WASH facilities.

Girls' access to education is especially affected by inadequate menstrual hygiene and a lack of access to WASH in schools. Most schools do not provide facilities to support menstrual hygiene management, thus disproportionately reducing education outcomes for girls. Already, one in ten girls in Sub-Saharan Africa miss school during their menstrual cycle due to inadequate sanitation and hygiene facilities in schools, and many girls drop out of school once they begin menstruating. In addition, according to UNICEF, only 57 percent of students focus group participants in Zimbabwe felt that handwashing after defecating at school was common. Students who did wash their hands said they were likely to use soap after defecation, but much less likely after urination or before eating. Since many schools in Zimbabwe lack running water, many pupils, teachers and other school workers are unable to sustain hygiene practices such as handwashing. Even where WASH infrastructure exists in schools, services are often poorly maintained, prematurely falling into disrepair and often ultimately disused. Soap and water for handwashing are often unavailable, limiting potential behavior change promoted by handwashing campaigns and hygiene education.

Relationship to CPF

The activity "Piloting Social Protection and WASH Interventions to Keep Adolescent Girls in School in Zimbabwe" is well aligned with the WBG's Strategy for Fragility, Conflict and Violence 2020-2015 objective to support countries in addressing the impacts of Fragility, Conflict and Violence (FCV) and strengthen resilience



for the most vulnerable populations given that women and girls are disproportionately affected by fragility and shocks. Due to this, adolescent girls in particular are especially vulnerable and at risk of dropping out of school after the economic shocks and school closures caused by the COVID-19 pandemic. This activity falls under the FCV Strategy's fourth pillar of mitigating the spillovers of FCV to the most vulnerable that are impacted by shocks such as pandemics.

Further, it is also aligned with the WBG's first high-priority issue in FCV settings, namely human capital. The intervention aims to keep adolescent girls in school after interruptions to their education, and thus continue to invest in Zimbabwe's human capital development. This activity is also aligned with the World Bank's COVID-19 Response Approach Paper, falling under Pillar 2: Protecting the Poor and Vulnerable, given that social protection support is being provided to the poorest households targeted by the Government's BEAM program. Further, the focus on adolescent girls from the poorest households, who disproportionately fail to complete secondary education in Zimbabwe and are more vulnerable to shocks, responds to the priority to focus on gender in FCV settings outlined in the above mentioned documents.

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C. Project Development Objective(s)

Proposed Development Objective(s)

To pilot complementary social protection and WASH dropout prevention interventions for adolescent girls after the COVID-19 pandemic in one district in Zimbabwe

Key Results

The following indicators will be measured by the pilot's process evaluation:

- Number of beneficiaries supported through the pilot;
- Number of households supported through the pilot;
- School attendance (retention) of adolescent girls
- Increase in awareness of key WASH and menstrual hygiene concepts by pilot participants
- Number of households that have successfully set up or expanded an income generating activity
- Average monthly income generated from pilot-supported income generating activities

D. Preliminary Description

Activities/Components

The pilot will be implemented in one district in rural Zimbabwe under the guidance of the World Bank and relevant government agencies. Having identified that economic hardships/negative coping mechanisms and menstrual hygiene/WASH are key barriers affecting adolescent girls' education, the pilot will aim to test the potential of providing layered support to the existing BEAM program. This would test the effect and viability of strengthening the government's Social Protection structure, specifically BEAM, through layered Social Protection and WASH interventions that allow it to be more comprehensive and better addresses the needs



of vulnerable and orphaned adolescent girls. The pilot will target BEAM households that contain adolescent girls and will work with public secondary schools who benefit from BEAM. This will ensure that girls receive comprehensive social protection and WASH support.

Component 1: Household-level Interventions- Cash transfer, Income Generating Activities (IGA), hygiene promotion and menstrual hygiene products: This component will pilot test complementary measures to the BEAM fee waiver, and will help 1,500 households in one rural District, thereby discouraging negative coping strategies that impact adolescent girls and their education, such as preventing girls from returning to school.

- a. **Cash Transfer:** The pilot will test a monthly unconditional cash transfers to at least 1,500 households with adolescent girls who currently benefit from the BEAM program. The transfer will be paid in monthly installments equivalent to US\$ 35 during a six-month period. These multi-purpose cash transfers are meant to help meet basic food and non-food needs of beneficiary adolescent girls and is intended to discourage households from employing negative coping strategies that impact adolescent girls, as mentioned above, including the interruption in their education.
- b. **Income Generating Activities (IGA):** A subset of households receiving the cash transfer (at least 50 percent) will receive an IGA grant to fund business plans developed with the support of the pilot. activities. These will be complemented with targeted capacity-building and training focused on business skills, financial literacy, etc. Given the rural focus of the pilot, the project expects to support activities such as small livestock rearing, gardening and petty trading.
- c. **Support improvement of water-related hygiene behavior:** the focus will be on awareness and safe sanitary practices of households with limited access to potable water and sanitary facilities. This will help ensure that households' use of health and WASH are enhanced and improved, through raising awareness and practicing sound hygiene practices, such as handwashing with soap and improved menstrual hygiene practices, targeted at adolescent girls. Additionally, the households and schools will receive support and training for the use of water purification tablets to mitigate water quality risks at school and in households. This component is particularly key given the COVID-19 context and will reinforce WASH messaging on hand washing and other practices delivered through schools.
- d. **Provision of Menstrual Hygiene Products:** Evidence suggests that a lack of menstrual hygiene products impacts girls' school attendance, which is why this activity is essential to combating school dropout among adolescent girls. The pilot will deliver menstrual hygiene kits to girls in cash transfer households.

Component 2: School-level Interventions- Sensitization, Capacity Building and WASH Promotion: This component will work closely with public secondary schools receiving BEAM support to test the promotion of positive gender norms, sexual and reproductive health messaging, good hygiene and menstrual hygiene management including raising awareness among adolescent girls.

- a. **Sensitization and capacity building meetings:** The pilot will organize sensitizations and capacity building meetings covering two main areas. The first will be biweekly sensitization and capacity building meetings held in schools at a date and time chosen collectively by students targeting boys and girls at school, as well as their parents, where appropriate. Parent's consent will be sought. These sessions will aim to mitigate



negative coping strategies, adopted in times of domestic economic hardships where households forgo nutritional, hygiene and other needs resulting in prioritization conflicts amongst household members. Domestic violence usually follows where there are conflicts and disagreements over prioritization and address of these household needs. The project will facilitate capacity building sessions on positive parenting, savings to direct funds towards the support of the girl child. Sessions focusing on gender dynamics will touch upon sexual and reproductive health (SRH) and gender-based violence (GBV), among others. The meetings held for adolescent girls and boys and their caregivers will cover topics such as menstrual hygiene and WASH, positive coping strategies, and gender issues. For sessions focusing on menstrual hygiene and WASH, proven behavior change and health promotion techniques should be used to raise awareness on healthy menstrual hygiene practices and advocating for improved adoption of healthy personal hygiene practices including handwashing. Resources such as the Global Handwashing Partnership will be tapped into for development of information and communication materials for dissemination of messages through mass campaigns and interpersonal messages at school level. School level mass awareness sessions will complement the provision of menstrual hygiene kits, educational material and cleaning of school WASH facilities.

There will also be bi-monthly meetings for school staff focusing on WASH. Sessions for school staff will focus on gender responsive education and girl friendly WASH and menstrual hygiene management and will also employ the above-mentioned resources.

This Recipient Executed pilot will benefit from Bank Executed technical assistance from the World Bank under the ASA P172835 Technical Assistance for Social Protection Systems Building in Zimbabwe. This technical assistance is funded by an RSR-18 grant of US\$300,000 for social protection Bank Executed activities as well as a ZIMREF grant of US\$50,000 for water Bank Executed activities. Under the RSR-18 grant, the Bank will commission a process evaluation of the Pilot to assess its effectiveness and document lessons learnt to inform policy. A consultant will be engaged to do a mixed methods process evaluation that determines the effect of the pilot on school attendance and enrollment among adolescent girls. This will include carrying out a short quantitative survey and focus group discussions with adolescent girls and households participating in the pilot, adolescent girls and households who are BEAM beneficiaries but did not participate in the pilot and school and healthcare authorities.

Under the ZIMREF Water technical assistance, the World Bank will commission a consultancy on strengthening the enabling environment for improved, gender-balanced WASH at schools: This will focus on operational and accountability frameworks for delivering safe, improved sanitation at speed. This will entail activities captured in suitable documents including:

- A rapid assessment note, with recommendations on: 1) key gaps in school WASH facilities that need to be addressed in the short, medium and long term, especially (albeit not exclusively) ones that affect female learners; 2) alignment and any overlapping WASH roles that constrain accountability, planning, infrastructure construction, service delivery and quality control; 3) data limitations and constraints on school infrastructure and service delivery that make scoping, planning and implementation of WASH infrastructure at schools difficult; and 4) strategic priorities and actions to mitigate these data constraints and service delivery shortcoming;



- Guidance tools to improve the collection and use of data on WASH infrastructure and services, and safe sanitary practice at schools.
- Consultative and advisory briefings and training at national and sub-national levels of government, aligned to gender-balanced WASH-in-schools objectives and activities under this project, but where appropriate, also to a wider audience of officials, parents, and other stakeholders.

Environmental and Social Standards Relevance

E. Relevant Standards

ESS Standards

Relevance

ESS 1	Assessment and Management of Environmental and Social Risks and Impacts	Relevant
ESS 10	Stakeholder Engagement and Information Disclosure	Relevant
ESS 2	Labor and Working Conditions	Relevant
ESS 3	Resource Efficiency and Pollution Prevention and Management	Relevant
ESS 4	Community Health and Safety	Relevant
ESS 5	Land Acquisition, Restrictions on Land Use and Involuntary Resettlement	Not Currently Relevant
ESS 6	Biodiversity Conservation and Sustainable Management of Living Natural Resources	Not Currently Relevant
ESS 7	Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities	Not Currently Relevant
ESS 8	Cultural Heritage	Not Currently Relevant
ESS 9	Financial Intermediaries	Not Currently Relevant

Legal Operational Policies

Safeguard Policies

Triggered

Explanation (Optional)

Projects on International Waterways OP 7.50

No

Projects in Disputed Areas OP 7.60

No

Summary of Screening of Environmental and Social Risks and Impacts

The E&S risks are moderate. The project will apply the relevant requirements of the Environmental Health and Safety Guidelines (EHSs) and where there are gaps other relevant Good International Industry Practice (GIIP) for the activities of cash transfer and to achieve safe water for menstrual hygiene. There is a practical requirement to conduct a risk assessment for the cash transfer activity and to implement communication and training strategies. The ESHG requires where water may be used for drinking, washing, and bathing,

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water quality should comply with national acceptability standards or in their absence the current edition of the WHO Drinking Water Guidelines. The solution proposed is the use of water purification tablets to inactivate microorganisms in the water to prevent infections after menstrual hygiene activities. The borrower is required to conduct an E&S assessment to assess the E&S risks and impacts through the project lifecycle. As a minimum, it is recommended that an Environmental Social Management Plan (ESMP) is drafted to detail the measures to be taken during the implementation and operation of the project to eliminate or off-set adverse E&S impacts, reduce them to acceptable levels and provide the actions needed. The ESMP should include a Security Management Plan (SMP) to address the risks from cash transfers, guidelines on water purification and guidelines for the appropriate disposal of menstrual waste materials. While the overall social benefits are expected to be positive, identified social risks and impacts are related to (i) some local conflict over the cash transfer process, distribution of menstrual hygiene products, and small grants (for example, between eligible and ineligible people or within families); (ii) GBV/SEA-H risks that may relate to beneficiaries of the pilot; (iii) misinformation regarding the cash transfer scheme; and (iv) COVID-19 transmission between project workers and the beneficiaries. The risks and proposed mitigation measure are summarized below:

1. The Risk of spreading misinformation and local conflict over the cash transfer process: the pilot project will complement measures to the GoZ's BEAM program fee waiver and help 1,500 households in Buhera district to address the basic food, health and social needs of adolescent girls through cash transfers and a small grant to 375 households. There is the potential risk of misinformation spreading through communities, local media and social media about the eligibility criteria and anticipated benefits from the pilot project. As this pilot is layered over the BEAM program, which is nationwide, current beneficiaries of the BEAM may assume they are eligible to benefit from the pilot. The Stakeholder Engagement Plan (SEP) is the primary mitigation measure for addressing the risk of misinformation. The pilot project will utilize the existing stakeholder engagement / community targeting committees? mechanisms under BEAM for sharing information and undertaking meaningful consultation regarding the pilot project. Information about the pilot will be disclosed through social media, and the local media. Beneficiaries and the public can also access information, raise questions, and file grievances through CIZ's existing grievance mechanisms (GM) channels. These details about the GM channels and other information sharing, and consultation activities will be outlined in the SEP.
2. The risk of GBV/SEA-H for women and girls-project beneficiaries. The pilot will provide monthly unconditional cash transfers to 1,500 households with adolescent girls who currently benefit from the BEAM school fee waiver program. In Zimbabwe, men often control women and household finances. Given the domestic economic hardships, the negative coping mechanism may be to forgo nutritional and hygiene needs, and, therefore, there is a risk of conflicts and disagreements over the prioritization of households needs among household members. There is also a risk of GBV/SEA-H from intimate partners, community members and project workers related to the household and school-level interventions, given the high prevalence of GBV/SEA-H in Zimbabwe. These GBV/SEA-H risks will be managed through measures included in the ESMP. In addition, the project will ensure that grievances, including those relating to GBV/SEA-H, are received, handled, and directed to appropriate services consistent with Bank guidelines in relation to these matters. The grievance redress mechanism (GRM) procedures will be outlined in the SEP. Further to this, Component 2 capacity-building activities will explicitly address gender inequalities and GBV in program participation. The capacity-building activities will focus on gender dynamics, sexual and reproductive health (SRH), GBV, gender-responsive education, and girl-friendly WASH and menstrual hygiene management. A Labor Management Plan (LMP) will be prepared, as part of the ESMP, to outline the code of conduct for



project workers to prevent GBV/SEA-H. 3. COVID-19 transmission: project activities at the household and school level and stakeholder engagement activities may increase the risk of transmission of COVID-19, as such, a COVID-19 safety protocol will be developed as part of the ESMP and implemented throughout the project.

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