Appraisal Environmental and Social Review Summary

Appraisal Stage

(ESRS Appraisal Stage)

Date Prepared/Updated: 04/16/2020 | Report No: ESRSA00695
**BASIC INFORMATION**

**A. Basic Project Data**

<table>
<thead>
<tr>
<th>Country</th>
<th>Region</th>
<th>Project ID</th>
<th>Parent Project ID (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Togo</td>
<td>AFRICA</td>
<td>P173880</td>
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</tr>
</tbody>
</table>

**Project Name**

Togo COVID-19 Emergency Response and Systems Preparedness Strengthening

**Practice Area (Lead)**

Health, Nutrition & Population

**Financing Instrument**

Investment Project Financing

**Estimated Appraisal Date**

3/10/2020

**Estimated Board Date**

4/17/2020

**Borrower(s)**

Republic of Togo

**Implementing Agency(ies)**

Ministère de la Santé et de l'hygiène Publique

**Proposed Development Objective(s)**

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

**Financing (in USD Million)**

<table>
<thead>
<tr>
<th>Amount</th>
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<tbody>
<tr>
<td>Total Project Cost</td>
</tr>
</tbody>
</table>

**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]**

The proposed project will support the implementation of Togo COVID-19 Plan. It will support Strengthening Multi-sector, National Institutions and Platforms for Policy Development and Coordination of Prevention and Preparedness; Support National and Sub-national, Prevention and Preparedness; and Implementation and Monitoring and Evaluation. The proposed project will consist of three components: Component 1: Emergency COVID-19 Response - Case Detection, Confirmation, Contact Tracing, Recording, Reporting. This component will purchase and install a Mobile P3 laboratory, Construction, and equipping of one isolation and treatment center in Lomé, Training rapid response teams to investigate cases and trace contacts, training staff at POE for screening and provision of
surveillance equipment at POE and temporary holding facilities for isolation, mobilize additional health personnel, especially former FELTP participants; equip POE with surveillance equipment.

Component 2: Supporting National and Sub-national, Prevention and Preparedness. This component supported activities will be related to (i) Provision of laboratory Equipment, containers for specimen handling and transportation, diagnostic reagents and Commodities including kits for regional hospitals; (ii) Provision of drugs, medical equipment and supplies to public health facilities and for intensive care facilities within hospitals; (iii) Provision of 2 more medical ambulances; (iv) Elaboration of Standard Operating Procedures (SOPs), guidelines and Terms of Reference on sample collection, packaging, transportation and testing of samples at the WHO recommended laboratories for COVID-19 (for e.g. Pasteur Institute in Dakar, Senegal); (v) Provision of more emergency medical and non-medical supplies including PPEs such as gloves, surgical mask, respirator, eye protection and isolation gowns to health workers for their safety; (vi) Training of Health facilities staff and front-line workers on risk mitigation measures and providing them with the appropriate hygiene materials (such as detergents and disinfectants, and safety/sharp boxes) and Training of medical and veterinary laboratory personnel; (vii) Operation of the health emergency coordination center, Construction of a storage warehouse in Lomé and Operating costs.

Component 3: Implementation Management and Monitoring and Evaluation. This component will support (i) Recruitment of a dedicated accountant, project manager and STC for rehabilitation and construction works; (ii) Training of project management unit and technical consultants; (iii) Procurement, financial management, environmental and social safeguard, monitoring and evaluation, reporting, and operating costs; (iv) monitoring and evaluation activities.

D. Environmental and Social Overview
D.1. Project location(s) and salient characteristics relevant to the ES assessment [geographic, environmental, social]
The Togo COVID-19 Emergency Response and System Preparedness Strengthening (P173880) is an emergency operation that will be implemented nationally. It will contribute to COVID-19 preparedness, monitoring, surveillance and response in Togo. The project components are being finalized and the specific locations where project sub-components will be implemented are not yet known. The project is expected to finance civil works that will be undertaken within existing facilities. These works, aimed at improving services in health facilities, laboratories and warehouses, will be focused on rehabilitation and/or renovation of existing structures and the construction of some new buildings within existing footprints. The project is not expected to have an impact on natural habitats or cultural sites.

Increasing insecurity related to the growth of armed groups in the bordering countries such as Burkina Faso could negatively affect the implementation of project activities. In addition, with the recent elections, the government is facing a tense social climate that will be compounded by severe pressure from unions and the threat of strikes. The country has just shifted from a fragility, conflict and violence (FCV) context and is dealing management of the post-electoral crisis and risks due to insecurity, especially in its northern region. It is in this context that the current project will be implemented.

D. 2. Borrower’s Institutional Capacity
The Government of Togo has an acceptable legal and regulatory environmental and social framework, with a national agency that oversees the approvals of environmental and social studies and monitoring and evaluation of such studies. This agency is not well staffed, but its capacities for social risk management are considered acceptable by the World Bank. The government has received capacity-building support through World Bank-financed projects on
environmental and social risk management provisions, including the requirements of the Environmental and Social Framework (ESF). However, capacity building is nevertheless required to enable this structure to play its role fully. The project will be implemented by the Ministry of Health and Public Hygiene (MHPH) using staff in the project coordination unit (PCU) of REDISSE-Phase II (Regional Disease Surveillance Systems Enhancement-Phase II in Togo - P161163). The Ministry has implemented numerous World Bank-financed projects in the health sector over these last years and the existing PCU has a full-time environmental specialist. The REDISSE PCU has demonstrated its capacity to screen, implement, monitor and report on environmental and social commitments as part of Bank financed activities. However, it is recognized that a potential COVID-19 outbreak poses a unique set of challenges given the importance of immediate actions being synchronized over a broad geographic space with many key stakeholders. Meeting these challenges will strain the capacity of the REDISSE coordination unit and this is also the first Project prepared under ESF that MHPH will implement. The Environmental and Social Commitment Plan (ESCP) will include targeted support to build their capacity including training, additional recruitment of specialists (mainly a social specialist recruited by the project) and support from third party entities to deliver on the objectives of the COVID-19 response operation. Moreover, given the need for a comprehensive stakeholder engagement and communications strategy in the context of COVID-19 management, specialists in the field of public health awareness and communication will be included on the project team immediately at the beginning of project implementation. These additional specialists will be drawn from other Bank-financed projects and/or appointed by MHPH.

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

A. Environmental and Social Risk Classification (ESRC)

**Environmental Risk Rating**

Although the main long-term environmental impacts of this project are likely to be positive, there are several short-term risks that need to be considered. The main environmental risks of project include: (i) environmental and community health related risks from inadequate storage, transportation and disposal of infected medical waste; (ii) occupational health and safety (OHS) 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 Togo. To mitigate these risks the MHPH, will prepare and disclose an Environmental and Social Management Framework (ESMF), drawing on the ESMF for REDISSE II. The 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 integrated into the ESMF. The Project will also support MHPH in coordination with other partners to address logistical constraints in the timely provision of technical expertise, supplies, equipment and systems across the country.

**Social Risk Rating**

One key social risk related to the COVID-19 operations in general is that vulnerable social groups (poor, disabled, elderly, isolated communities, people and communities living far from the health facilities, etc.) may be unable to access facilities and services, which could increase their vulnerability and undermine the general objectives of the
Other social risks include the rise of social tensions that could be exacerbated by the lack of awareness regarding the behavior change required to decrease transmission (social distancing, hand washing and hygiene), stigma associated with victims of COVID-19 and their families, perceived exclusion from key health facilities and services and misinformation regarding how COVID-19 is transmitted and prevented. In addition, quarantine/isolation of patients may introduce other social challenges such as how to maintain dignified treatment of patients, attention to specific, culturally relevant 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. In addition, the planned activities may present risks to project workers – specifically, to health care workers potentially exposed to COVID-19 and more generally to project workers whose working conditions may be adversely affected due to the need to address the COVID-19 emergency. Based on these findings, the social risk rating of this project is Substantial.

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 operation is being prepared as an emergency response using condensed procedures under the Fast Track COVID-19 Facility.

ESS 1 is relevant. The Project will have overall positive environmental and social impacts as it will contribute to epidemic/pandemic preparedness, monitoring, surveillance and response, specifically with regard to combating transmission of COVID-19. However, there are also wide-ranging environmental and social risks and impacts that will need to be assessed and managed through a risk-based approach during implementation. The primary risks identified during preparation include: (i) environmental and community health related risks from inadequate storage, transportation and disposal of infectious medical waste; (ii) OHS 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/quarantine 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, people and communities in remote rural areas living far from health facilities and for the elderly or those with underlying medical conditions who would be most at risk in the event of a pandemic outbreak; and (v) risks for those receiving treatment for COVID-19 symptoms, including discrimination and SEA/SH risks for patients in quarantine.

To address these risks, the MHPH with support from the REDISSE project will prepare an ESMF to provide clear guidance regarding the treatment of medical waste and the preparation of sub-projects’ ESMPs if and when necessary. The ESMF, which will be an update of the REDISSE project’s ESMF, will incorporate measures to address SEA/SH. This will include a commitment by the MHPH to provide services and supplies based on the urgency of the need in line with the latest data related to the prevalence of the cases. In addition, the ESMF will also screen and identify the risks related to contracting and/or using private and/or public security forces to provide protection for healthcare workers and at isolation/quarantine sites. The ESMF will provide guidance regarding how to address these risks according to the principles of proportionality and GIIP, and by applicable national provisions regarding civilian-military engagement, rules of conduct, training, equipping, and monitoring. The updated ESMF will be shared and consulted with stakeholders, taking into account the current need for social distancing approaches, and publicly
disclosed per the requirements of the ESF no more than 30 days after project effectiveness. The PIU has also prepared a draft ESCP and a preliminary SEP that will be updated during project implementation, including with further details on specific measures to address environmental and social risks.

The SEP provides guidance regarding how to effectively engage citizens, culturally appropriate adaptations regarding behavior change, how to seek their inputs regarding project activities and the most effective way to provide project relevant information to all stakeholders. After project approval, this preliminary SEP will be updated to include more information regarding the specific methodologies for information sharing, stakeholder mapping and identification of existing community-based platforms that can be used to facilitate effective community engagement and participation. Mitigation measures will be addressed in the ESMF and eventual Environmental and Social Management Plans (ESMPs).

ESS10 Stakeholder Engagement and Information Disclosure

A draft Stakeholder Engagement Plan (SEP) has been prepared and disclosed. This preliminary SEP outlines the main characteristics and interests of the relevant stakeholder groups, timing and methods of engagement throughout the project lifecycle as well as an outline for the establishment of a project Grievance Redress Mechanism (GRM). After project approval and no later than one month after project effectiveness, the SEP will be updated to include more detailed information regarding the methodologies for information sharing, more robust stakeholder mapping and identification of existing community-based platforms that can be used to facilitate effective community engagement and participation as well as the monitoring and evaluation plan.

The SEP will also identify in more detail the roles and responsibilities of religious leaders, traditional chefs, local elected people and NGOs, including the organization of traditional healers as important stakeholders with specific roles to play in project implementation and implementation of the SEP. The SEP will include a methodology to address: the possible social implications of supporting strict social distancing and isolation measures as a first step in slowing down the infection rate and to prevent overwhelming the already overstretched health system; prevention of social tensions, especially in the vicinity of quarantine facilities and isolation units over the spread of disease and waste management; conflicts that could result from the circulation of false information/rumors; risks related to the use of security personnel to protect the construction of isolation facilities; and developing conditional measures to support affected households and vulnerable groups. As indicated above, mitigation measures will be included in the ESMF and any eventual ESMPs.

The preliminary SEP will also be updated to include details regarding the GRM.

The SEP will be complemented by a strong and well-articulated communication strategy on COVID-19 and it shall be updated to include the Risk communication and community engagement (RCCE) strategy, to be prepared under the Project in line with WHO provisions “Risk communication and community engagement (RCCE) readiness and response to the 2019 novel coronavirus (2019-nCoV)” (January 26, 2020). This will not only help with the implementation of the community mobilization and behavioral change objectives of the project, but also help minimize the circulation of false information regarding COVID-19, ensure equitable access to services, and to counteract the isolation and uncertainty that comes with people in isolation/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. Many activities supported by the project will be conducted by healthcare and laboratory workers and will include both the treatment of patients as well as the assessment of patient samples. The key risk for them is the possible COVID-19 infection. OHS measures as outlined in WHO guidelines will be captured in the updated ESMF. This includes procedures for monitoring 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 face masks, gowns, gloves, hand-washing soap and sanitizes); and generally ensuring adequate OHS protections in accordance with the general and industry specific EHSGs and consistent with the evolving international best practice in relation to COVID-19 protection. Also, the PIU will ensure that they are regularly integrating the latest COVID-19 guidance by WHO as it develops. A Labor Management Procedure (LMP) will be included in the ESMF. It will provide guidance regarding the policies and procedures that will govern health care workers, project staff and other workers hired under the project, including the management of OHS and SEA/SH risks. Per the requirements of ESS 2, the project will not employ children or forced labor. The project will be required to meet the Standard’s requirements for the employees’ working terms and conditions, equality of opportunity and workers’ associations. The project will also establish a labor GRM to address worker complaints.

ESS3 Resource Efficiency and Pollution Prevention and Management

The 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 big challenge in Togo due to limited authorized disposal sites, and contaminated medical waste is of special concern. The ESMF of the project will include Medical Waste Management procedures that integrate WHO COVID-19 guidance and other international good practices in order to prevent or minimize contamination from inadequate waste management and disposal.

ESS4 Community Health and Safety

This standard is relevant. Community health and safety risks identified during preparation include: (i) environmental and community health related risks related to the inadequate storage, transportation and disposal of infectious medical waste; (ii) community health and safety risks given close social contact and limited sanitary and hygiene services (clean water, soap, disinfectants) and isolation/quarantine capabilities at healthcare facilities across the country (WHO guidelines); (iv) possible risks around social exclusion related to access to healthcare facilities and services, specially for the poorest and most marginalized who have a limited ability to pay, those living far from health facilities and for the elderly or those with underlying medical conditions who would be most at risk in the event of a pandemic; (v) risks for those receiving treatment for COVID-19 symptoms, including discrimination and SEA/SH risks for patients in quarantine; (vi) sociopolitical risks specifically related to the recent presidential election within the country and the growth insecurity situation due to the armed groups from bordering countries; and (vii) low trust in the government which could lead to the rejection of public health interventions and information and violence against those providing services.

The project may use public or private security (e.g. police/private security companies) to guard and protect project sites. It is not likely to employ military personnel for civil works, but if the situation changes, the project will
undertake a Security Risk Assessment (SRA) to review the military’s rules of engagement with civilian authorities and identify the specific risks related to providing increased security at the various project sites. The project would then propose adequate mitigation measures, and strengthen them, where necessary, to ensure that the use of the military in project activities will not result in adverse consequences to community health and safety, including in matters relating to SEA/SH.

The project will promote the avoidance of SEA/SH 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 risks and mitigation measures will be addressed in the ESMF, drawing on input from project stakeholders, as documented in the SEP.

ESS5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement
This standard is not relevant. The project will not require any land acquisition leading to physical or economic displacement. All rehabilitation/renovation and construction will take place within existing health facilities.

ESS6 Biodiversity Conservation and Sustainable Management of Living Natural Resources
This standard is not currently relevant.

ESS7 Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities
This standard is not currently relevant. There are no Indigenous Peoples/Sub-Saharan African Historically Undeserved Traditional Local Communities in the project area.

ESS8 Cultural Heritage
This standard is not currently relevant. It is not anticipated that the project will impact cultural heritage and any physical works planned in the context of the project will be limited to rehabilitation or upgrading of existing facilities and some new constructions in existing sites. However, the planned works will include excavation during construction phase and demolition during the rehabilitation of some infrastructures. The ESMF will include a “chance finds” procedure which will require contractors to stop construction/rehabilitation if cultural heritage sites are encountered during civil works.

ESS9 Financial Intermediaries
This standard is not currently relevant.

B.3 Other Relevant Project Risks
This project will be implemented in the post-election context and may be affected by the security situation in neighboring countries like Burkina Faso. It should be noted that these contextual risks could affect the project implementation, especially the adequate supervision of activities.
C. Legal Operational Policies that Apply

**OP 7.50 Projects on International Waterways**
The project is not going to impact any international waterways or their tributaries

**OP 7.60 Projects in Disputed Areas**
The project is not located in disputed areas.

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

<table>
<thead>
<tr>
<th>DELIVERABLES against MEASURES AND ACTIONS IDENTIFIED</th>
<th>TIMELINE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ESS 1 Assessment and Management of Environmental and Social Risks and Impacts</strong></td>
<td></td>
</tr>
<tr>
<td>The ESMF will be prepared and disclosed in country no later than 30 days after Project effectiveness. It will be</td>
<td>06/2020</td>
</tr>
<tr>
<td>implemented during the project life cycle and specific ESMPs will be prepared and implemented overtime.</td>
<td></td>
</tr>
<tr>
<td>The ESCP was prepared March 31, 2020. It will be disclosed within the country prior to approval. The activities</td>
<td>04/2020</td>
</tr>
<tr>
<td>included will be implemented overtime during the project life-cycle.</td>
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</tr>
<tr>
<td>A social specialist will be hired or appointed to the project no later than 30 days after Project effectiveness and</td>
<td>06/2020</td>
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<tr>
<td>maintained throughout Project implementation.</td>
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**ESS 10 Stakeholder Engagement and Information Disclosure**

A preliminary SEP was prepared on March 31, 2020 and shall be disclosed prior to appraisal. It will be updated no later
than 30 days after Project effectiveness to include further details and implementation arrangements.

**ESS 2 Labor and Working Conditions**

The Labor Management Plan (LMP) will be prepared no later than 30 days after Project effectiveness.

**ESS 3 Resource Efficiency and Pollution Prevention and Management**

Considered under the ESMF (with medical waste management plan).

**ESS 4 Community Health and Safety**

Considered under the ESMF and SEP.

**ESS 5 Land Acquisition, Restrictions on Land Use and Involuntary Resettlement**

Not applicable.

**ESS 6 Biodiversity Conservation and Sustainable Management of Living Natural Resources**
Not applicable.

ESS 7 Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities
Not applicable.

ESS 8 Cultural Heritage
Considered under the ESMF that will include "chance find" procedure. 06/2020

ESS 9 Financial Intermediaries
Not applicable.

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:
N/A

IV. CONTACT POINTS

World Bank
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Telephone No: +1-202-458-4879 Email: atembon@worldbank.org

Borrower/Client/Recipient
Borrower: Republic of Togo

Implementing Agency(ies)
Implementing Agency: Ministère de la Santé et de l’hygiène Publique

V. FOR MORE INFORMATION CONTACT
VI. APPROVAL

Task Team Leader(s): Andy Chi Tembon

Practice Manager (ENR/Social) Kevin A Tomlinson Cleared on 08-Apr-2020 at 20:46:13 EDT

Safeguards Advisor ESSA Nina Chee (SAESSA) Concurred on 16-Apr-2020 at 20:20:40 EDT