Re: Republic of The Gambia
Maternal and Child Nutrition and Health Results Project
Second Amendment to the Multi-Donor Trust Fund for Health Results Innovation Grant Agreement (MDTF-HRI Grant No. TF016640)

Honorable Minister:

We refer to the Multi-Donor Trust Fund for Health Results Innovation Grant Agreement (the Agreement) (MDTF-HRI Grant No. TF016640), dated April 9, 2014, between the Republic of the Gambia (the Recipient) and the International Bank for Reconstruction and Development and International Development Association, acting as administrator of the Multi-Donor Trust Fund for Health Results Innovation (the World Bank), for the above referenced project (the Project), as amended. We also refer to: (a) the Financing Agreement (the Original Financing Agreement) (Grant No. H923-GM), dated April 9, 2014, as amended, between the Recipient and the International Development Association (the Association) providing financing for the Project; (b) the Additional Financing Agreement (First Additional Financing) (Credit No.5623-GM, Grant No. D050-GM) dated April 9, 2015, as amended, between the Recipient and the Association providing additional financing for the Project; and (c) the Financing Agreement (Second Additional Financing), of even date herewith, between the Recipient and the Association providing additional financing for the Project.

In view of certain amendments made to the Original Financing Agreement and the First Additional Financing Agreement, the World Bank hereby proposes to amend the Agreement as follows:

1. The Project description in Schedule 1 to the Agreement is amended to read as follows (emphasis added):

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PART A: Community Mobilization for Social and Behavior Change

Promoting key family practices and health care seeking behaviors for improved maternal, reproductive, and child health and nutrition outcomes through:

1. Provision of Conditional Cash Transfers to communities and support groups (VDCs) in NBR-W, CRR, URR, NBR-E and LRR to finance a program of activities aimed at increasing demand for, and utilization of, health and nutrition services.
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2. Provision of Conditional Cash Transfers to individual women in NBR-W, CRR, URR, NBR-E and LRR to increase demand for, and utilization of, timely antenatal care.

3. Accompanying measures aimed at promoting behavioral changes, and improving household practices related to health and nutrition through the provision of technical advisory services and training, including capacity building measures as needed.

PART B: Delivery of Community Nutrition and Primary Health Care Services


2. Carrying out a program of activities in NBR-W, CRR, URR, NBR-E and LRR to build the capacity of communities and health facilities for effective service delivery, including the implementation of effective health care waste management measures, interventions to address bottlenecks in the quality of care for reproductive health and nutrition, food and nutrition security activities and primary health care scale up, including support for mechanisms using RBF principles to improve supply chain management and procure short-term supply of essential medicines.

PART C: Capacity Building for Service Delivery, Results-Based Management, Food and Nutrition Security and Cash Transfers

1. Strengthening the management capacity of key implementing entities including NaNA, MoFEA, MoHSW, MoHSW RBF Committee, health service providers, VDCs, VSGs, RHDs, and RTFs for effective implementation of the RBF, including: (i) strengthening governance and strategic RBF management capacity; (ii) improving the Health Management Information System (HMIS); (iii) supporting community demand, organization and mobilization; (iv) social and behavior change communication strategy development; (v) institutionalization of RBF; (vi) training for RHDs on the use of quality supervision tools and innovative ways to improve verification and supervision; and (vii) mentoring and peer learning among RBF stakeholders, all through the provision of technical advisory services, training, and the acquisition of goods.

2. Supporting monitoring and evaluation; verification of RBF activities including cost of the IVA and CVAs; and operational research, learning and knowledge management activities through the provision of technical advisory services and training.

3. Supporting project implementation including project management and coordination, fiduciary management, oversight, and communications, through the provision of technical advisory services, training and Operating Costs.

4. Ensuring effective management and implementation support of: (a) the RBF by the RHDs, NaNA, DCD, MoHSW RBF Committee and HMIS; and (b) food and
nutrition security interventions by RTFs, including through performance agreements.”

5. Provision of technical advisory services and training, for NaNA, RTFs and VHSCs in support of the implementation and management of the UCTs.”

2. Section IV.B.2 of Schedule 2 to the Agreement is amended to read as follows:

“2. The Closing Date referred to in Section 3.06(c) of the Standard Conditions is July 31, 2021.”

All other provisions of the Agreement, except as herein amended, shall remain in full force and effect.

Please indicate your agreement with the foregoing amendments to the Agreement on behalf of the Recipient by countersigning and dating two original copies of this letter and returning one countersigned original to us. The amendments to the Agreement shall become effective as of the date of this letter upon receipt by the World Bank of a duly countersigned original of this letter.

Sincerely,

INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT AND INTERNATIONAL DEVELOPMENT ASSOCIATION

[Signature]

Louise J. Cord  
Country Director  
Republic of the Gambia  
Africa Region

AGREED:  
REPUBLIC OF THE GAMBIA

By: [Signature]  
Authorized Representative

Name: Amadou Sanneh  
Title: Hon. Minister of Finance & Econ.

Date: 03/02/2017