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**REPUBLIC OF YEMEN
YEMEN EMERGENCY HUMAN CAPITAL PROJECT ADDITIONAL
FINANCING(P178665)**

Environmental and Social Management Framework (ESMF)

Updated

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Abbreviations

AF	Additional Financial
BEmONC	Basic Emergency Obstetric and Neonatal Care
CERC	Contingent Emergency Response Component
CEmONC	Comprehensive Emergency Obstetric and Neonatal Care
CMWs	community midwives
CSO	Civil Society Organization
DFID	Department for International Development
DLAs	District Local Authorities
DNA	Damage and Needs Assessment
ECRP	Yemen Emergency Crisis Response Project
EHS	Environmental, Health and Safety
EHNP	Emergency Health and Nutrition Project
EPL	Environmental Protection Law (26/1995)
ESF	Environmental and Social Framework of the World Bank
ESHS	Environment, Social (including labor), Health, and Safety
ESIA	Environmental and Social Impact Assessment
ESMF	Environmental and Social Management Framework
ESMP	Environmental and Social Management Plan
ESS	Environmental and Social Standard
FMFA	Financial Management Framework Agreement
FCV	Fragility, Conflict and Violence
GBV	Gender Based Violence
GDP	Gross Development Product
GHS	General Health and Safety guidelines
GIIP	Good International Industry Practice
GM	Grievance Mechanism
HCFs/HFs	Health Care Facilities/Health Facilities
H&N	Health and Nutrition
HSSE	Health, Safety, Social and Environment
IDA	International Development Association
IDP	Internally Displace Person
LMP	Labor Management Procedures
INSS	Integrated Nutrition Surveillance System
LTI	Lost Time Injury
MoPHP	Ministry of Public Health and Population
MSP	Minimum Services Package
MWMP	Medical Waste Management Plan
NGO	Non-Governmental Organization
NWSSIP	National Water Sector Strategy and Investment Program
O&P	Operation and Maintenance
PAP	Project Affected People
PMU	Project Management Unit
RoY	Republic of Yemen
SCAP	Safeguards Corrective Action Plan
SEA	Sexual Exploitation and Abuse
SH	Sexual Harassment
SEP	Stakeholder Engagement Plan
SESSP	Social and Environmental Sustainability Standards and Procedures

	(UNICEF).
SMP	Security Management Plan
TPM	Third Party Monitoring
UNDP	United Nations Development Program
UNICEF	United Nations Children's Emergency Fund
UNOPS	United Nations Office for Project Services
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization
YEHCP	Yemen Emergency Human Capital project

Glossary of Terms Used in the ESMF

Chance find procedure. A chance find is archaeological material encountered unexpectedly during project construction or operation. A chance find procedure is a project-specific procedure which will be followed if previously unknown cultural heritage is encountered during project activities. The chance finds procedure will set out how chance finds associated with the project will be managed. The procedure will include a requirement to notify relevant authorities of found objects or sites by cultural heritage experts; to fence off the area of finds or sites to avoid further disturbance; to conduct an assessment of found objects or sites by cultural heritage experts; to identify and implement actions consistent with national law; and to train project personnel and project workers on chance find procedures.

Child labor consists of work by children that is economically exploitative or likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral, or social development.

Compliance compares how well a process meet the requirements placed on the process.

Disposal. Final placement or destruction of wastes, polluted soils, and toxic or hazardous materials. Disposal may be accomplished through approved secure landfills, surface impoundments, or incineration.

Effluent. Wastewater, treated or untreated, that flows out of a treatment plant, sewer, or industrial outfall; generally, refers to wastes discharged into surface waters.

Environmental, Health, and Safety Guidelines (EHSGs) are technical reference documents with general and industry-specific statements of Good International Industry Practice. The EHSGs contain the performance levels and measures that are generally considered to be achievable in new facilities by existing technology at reasonable cost. For complete reference, consult the World Bank Group Environmental, Health, and Safety Guidelines, http://www.ifc.org/wps/wcm/connect/topics_ext_content/ifc_external_corporate_site/ifc+sustainability/our+approach/risk+management/ehsguidelines.

Environment and Social Impact Assessment (ESIA) identifies and assesses the potential environmental risks impacts of a proposed project, evaluate alternatives, and design appropriate mitigation, management, and monitoring measures.

Environmental and Social Management Plan (ESMP) details: (a) the measures to be taken during the implementation and operation of a project to eliminate or offset adverse environmental impacts, or to reduce them to acceptable levels; and (b) the actions needed to implement these measures.

Environmental and Social Management Framework (ESMF) is an instrument that examines the risks and impacts when a project consists of a program and/or series of subprojects, and the risks and impacts cannot be determined until the program or subproject details have been identified. The ESMF sets out principles, rules, guidelines and procedures to assess the environmental and social risks and impacts. this guidance will be used for preparation ES instruments when required.

Good International Industry Practice (GIIP) is defined as the exercise of professional skill, diligence, prudence, and foresight that would reasonably be expected from skilled and experienced professionals engaged in the same type of undertaking under the same or similar circumstances globally or regionally. The outcome of such exercise should be that the project employs the most appropriate technologies in the project-specific circumstances.

Grievance. An issue, concern, problem, or claim (perceived or actual) that an individual or community group wants a project implementor or contractor to address and resolve.

Grievance Mechanism (GM) is a locally based, formalized way to accept, assess, and resolve community feedback or complaints from individuals or communities who believe they are adversely affected by the Project.

Hazardous wastes. By-products of society that can pose a substantial or potential hazard to human health or the environment when improperly managed. Substances classified as hazardous wastes possess at least one of four characteristics—ignitability, corrosivity, reactivity, or toxicity—or appear on special lists.

Lost Time Injury (LTI) is the incapacity to work for at least one full workday beyond the day on which the accident or illness occurred.

Lost workdays are the number of workdays (consecutive or not) beyond the date of injury or onset of illness that the employee was away from work or limited to restricted work activity because of an occupational injury or illness.

Mitigation. Measures taken to reduce adverse impacts on the environment.

Monitoring. Periodic or continuous surveillance or testing to determine the level of compliance with statutory requirements or pollutant levels in various media or in humans, animals, and other living things.

Occupational Health and Safety deals with all aspects of health and safety in the workplace and has a strong focus on primary prevention of hazards (WHO).

Solid wastes. Nonliquid, non-soluble materials, ranging from municipal garbage to industrial wastes, that contain complex, and sometimes hazardous, substances. Solid wastes include sewage sludge, agricultural refuse, demolition wastes, and mining residues. Technically, solid wastes also refer to liquids and gases in containers.

Stakeholder. Persons or groups who are directly or indirectly affected by a project as well as those who may have interests in a project and/or the ability to influence its outcome, either positively or negatively. They may include locally affected communities or individuals and their formal or informal representatives, national or local government authorities, politicians, religious leaders, civil society organizations and groups with special interests, the academic community, or other businesses.

Stakeholder Engagement is a broad, inclusive, and continuous process between a project proponent and those potentially affected by the project that usually spans the project's life. It includes consultations, information disclosure and dissemination, and participation.

Executive summary

This Environmental and Social Management Framework (ESMF) was prepared by UNICEF and is specific to UNICEF's mandate in Components 1 and 3 of the Yemen Emergency Human Capital Project (YEHCP-Components 1&3; (P176570); the parent project This ESMF has also been updated to include the additional financing YEHCP-AF (P178665) - hereinafter the Project - of US\$150 million (USD 75million of UNICEF-AF related components/activities) to the parent project. The additional financing will maintain the same levels of service delivery within the same governorates targeted by EHNP and EHCP and possibly increase number of target HFs should additional resources be mobilized

The World Bank is financing the YEHCP to provide essential health, nutrition, water and sanitation services to the population of Yemen, with a rationale of added value by having the ability to deliver a continuum of response mechanisms along the humanitarian-development nexus and ensuring the Bank's effective collaboration with partners to mobilize a successful and technically sound crisis response in Yemen. The Project aims to improve access to healthcare, nutrition, and public health services (Component 1, which will be implemented by UNICEF and WHO) and to improve access to water supply and sanitation (WSS) and strengthening local systems (Component 2, which will be implemented by UNOPS) and Component 3 will be implemented by all three agencies, while component 4 will be activated by the agencies in case of need for an emergency response.

The ESMF was prepared to meet the requirements of the World Bank's Environmental and Social Framework (ESF), most particularly the Environmental and Social Standard on the Assessment and Management of Environmental and Social Risks, including the World Bank Group Environment, Health and Safety (EHS) Guidelines. It also meets the UNICEF Social and Environmental Sustainability Standards and Procedures (SESSP) and practices and complies with Yemeni environmental and social laws and regulations.

The use of this framework is appropriate and necessary, given that UNICEF's implementation of this project consists of a large number of interventions in many different localities, and that most of the location and activities will only be determined during implementation.

Specific to YEHCP-Component 1, UNICEF has in parallel prepared a Medical Waste Management Plan to meet the requirements of the ESS1 and ESS3, a Labor Management Procedure (LMP) to meet the requirements of ESS2, a GBV/SEA/SH Plan and a Security Management Plan (SMP) to meet the requirements of ESS4, and ESCP together with a Stakeholder Engagement Plan (SEP), which is prepared jointly by UNICEF, WHO, and UNOPS to meet the requirements of ESS1 and ESS10. All of these documents have been updated to include the additional financing to the parent project.

The United Nations Children's Fund (UNICEF) is responsible for YEHCP-Component 1, sub-components 1.1 and 1.2, implementation, in cooperation with local Partners including MoPHP and NGOs/CBOs to be determined during project implementation. As of the preparation of the YEHCP, UNICEF currently has an Environmental and Social Safeguards (ESS) Specialist based in Sana'a, to oversee Project safeguards, as well as Gender Mainstreaming team including a Gender focal point in the country office and a Prevention of Sexual Exploitation and Abuse (PSEA) specialist to support the implementation of the ESMF. In addition to the YEHCP parent project, UNICEF is currently managing two other projects funded by the World Bank - REAL and ECT - which follow the same World Bank Environmental and Social Standards and have similar ESMFs embedded within their project structures and agreements. In order to ensure efficient use of resources and learning and knowledge sharing among project teams UNICEF is increasing its capacity and efficiency by having a hub/unit dealing with Environmental & Social Safeguards for all World Bank projects including the AF being managed and implemented by UNICEF Yemen.

Component 1 of the project will mainly improve the health care and nutrition services; it is mainly provision and restoring of the Health Facilities (HFs) operation. AF will target the same HFs with a possibility of adding new HFs funds permitting, but with the same activities implemented by the EHNP and conducting currently by parent project. There will be no construction or creation of major new footprint. Component 1 under UNICEF will facilitate the operation of PHC HFs nationwide. The facilities will be managed by the MOPHP competent authorities. However, the project will oversee and will enhance the HFs in proper handling of the generated medical waste during operation. Therefore, the project has prepared a MWMP, updated to serve the Additional Financing (AF), and it will be implemented during the YEHCP-AF lifecycle. UNICEF led components of the Project will finance small/minor civil work inside selected health facilities, these civil works could be repairs of taps, doors, painting, and installation of small incinerators as required.

The bulk of the environment, social and health and safety (ESHS) risks and impacts is directly associated with the civil work activities of the contractors who will be conducting the small civil work inside targeted facilities. Although the risk profile might differ between specific activities, the overall risk profiles of construction activities are analogous.

The ESS Specialist will screen all subproject proposals prepared by UNICEF and its Implementing Partners to: (i) determine the environmental and social issues that might be triggered by the subproject, (ii) identify the relevant Environmental and Social Standards (ESS); (iii) determine the appropriate Environmental and Social risk rating for the subproject, and; (iv) specify the type of environmental and social assessment required, including specific instruments/plans.

According to the nature of the activities, component 1 interventions will not require a full ESIA and ESMP. If required and relevant, the UNICEF will prepare proportionate ESMPs for subprojects as required according to the following table of content:

- (i) Summary Sheet
- (ii) Subproject Description
- (iii) Environmental and Social Baseline
- (iv) Consultations
- (v) Mitigation Instruments

UNICEF will apply the World Bank's requirements for **consultation and disclosure**, as detailed in the Project Stakeholder Engagement Plan. The consultations are ongoing for the project and it was initiated for the AF interventions and consultation records will be kept in the Project Office. The consultations will take into consideration the sociocultural context of Yemen, as well as the ongoing COVID-19 epidemic.

UNICEF will incorporate **environmental and social requirements for contractors** in tender documentation and contract documents, so that potential bidders are aware of environmental and social performance requirements expected from them and are able to reflect that in their bids. The cost to contractors of meeting the ESHS requirements will be included in their respective contracts. UNICEF will monitor compliance by contractors with these requirements.

The requirements include 10 sections:

- (i) Contractor Environmental and Social Management Plan (C-ESMP)
- (ii) ESHS Training
- (iii) Construction Site Management
- (iv) Occupational Health and Safety (OHS)
- (v) Road safety and Traffic Safety
- (vi) Emergency Preparedness and Response
- (vii) Stakeholder Engagement
- (viii) Code of Conduct

UNICEF will **monitor and report** on implementation of the ESMF, with inputs from the TPM agent. The

UNICEF ESS Specialist will ensure that safeguards monitoring is included in the Project's reports to the World Bank.

The Project will use the Grievance **Mechanism (GM)**, as detailed in the Project Stakeholder Engagement Plan, which will be used for environmental, and social issues. The ESS Specialist in UNICEF will handle Project activity-related complaints.

The cost of due diligence for specific subprojects (preparation of the screening form, consultations, GM, preparation of ESMPs, and monitoring) are included in the costs/budget in the overall budget of Component 1 of the project.

Chapter 1.

Introduction and Background

1.1 Introduction

1. This Environmental and Social Management Framework (ESMF) prepared by UNICEF, is specific to UNICEF's mandate in Components 1, 3 and 4 of the Yemen Emergency Human Capital Project (YEHP), to meet the requirements of the World Bank's Environmental and Social Framework (ESF), as well as national environmental laws and regulations (YEHP; P176570). This ESMF has also been updated to include the additional financing YEHP-AF (P178665) of US\$150 million (USD \$75 million of UNICEF related activities/components) to the parent project. The use of an ESMF is appropriate at this stage of the project cycle to manage environmental and social risks and impacts of the project, given the exact sites of the health facilities to be supported will be only identified during the project implementation.

2. The ESMF will guide UNICEF to ensure that all interventions meet the requirements of the ESF, including the preparation of sub-projects or activities specific Environmental and Social Management instruments as relevant to the activity nature, type and scale in accordance with the ESF. For this purpose, the ESMF details how UNICEF will assess the environmental and social risks and impacts, identify the necessary mitigation measures, and monitor the ES measures implementation, most particularly the environmental and social performance of Project contractors/activities implementers.

3. Specific to YEHP-Component 1, UNICEF has in parallel prepared a Medical Waste Management Plan (MWMP) to meet the requirements of ESS1 and ESS3, a Labor Management Procedure (LMP) to meet the requirements of ESS2, a GBV/SEA/SH Plan and a Security Management Plan (SMP) to meet the requirements of ESS4, and ESCP and a Stakeholder Engagement Plan), which are prepared jointly by UNICEF, UNOPS and WHO, to meet the requirements of ESS10. All these documents have been updated to include the Additional Financial to the parent EHCP project.

1.2 Background¹

4. Violent conflict, now in its eighth year, has crippled Yemen's economy and created an unprecedented humanitarian crisis. Yemen has been embroiled in conflict, inflicting considerable physical damage to infrastructure, ravaging its economy, weakening institutions, and protracting what has already been the world's worst humanitarian crisis in a long time. According to the United Nations Development Program (UNDP)'s estimates, there were 102,000 combat deaths and 131,000 indirect deaths due to lack of food, health services and infrastructure, and many more injuries between 2015 and 2019.² Diverse factors including tribal, regional and sectarian divisions, long-standing grievances, elite capture of limited resources and rampant corruption have been the major causes of fragility drivers operating across Yemen. While conflict has been a key factor in the gradual breakdown of national structures essentially crippling service delivery, particularly in life-critical sectors such as health, violence alone cannot account for the magnitude of suffering with other factors like fragmentation, poor coordination, limited transparency and weak governance further complicating the picture on the ground.³

5. The country has long been mired in fragility and poverty, with dwindling natural resources further exacerbating tensions. As a direct consequence, even before the conflict, Yemen was plagued by

¹ The Background section is borrowed from the Project Appraisal Document

² Moyer J, et al. 2019, Assessing the Impact of Conflict on Human Development in Yemen, UNDP.

<https://www.undp.org/content/dam/yemen/General/Docs/ImpactOfWarOnDevelopmentInYemen.pdf> (accessed 11/23/20)

³ AlKarim T, et al. BMJ Global Health 2021; 6:e004740. doi:10.1136/bmjgh-2020-004740

cyclical violence, making it the poorest and least developed country in the Middle East and North Africa (MENA) region. Based on data from before the conflict, the World Bank Human Capital Index ranks Yemen at 143 out of 157 countries with an index score of 0.37, and girls scoring lower at 0.35. This essentially means that a child born today in Yemen will realize only 37 percent of his/her full productivity potential.

6. Yemen, a country located in a dry and semi-arid region, is already facing a severe water crisis in which several major cities are running out of water. Mostly due to high population growth, misguided agricultural development, traditional irrigation practices and type of cropping patterns, a lack of law enforcement to regulate water use, and vulnerability to climate change, the crisis may soon reach catastrophic levels. Yemen's acute water scarcity poses a serious threat to the country's stability and security. While the past six years of conflict cannot be attributed solely to water shortage, it is an important contributor. Studies reveal that water scarcity acts as a security threat multiplier in regions characterized by a growing population, social and political tensions, as well as ineffective and unaccountable state institutions – such as in Yemen. The recent impacts of climate change and armed conflict on the country's dwindling water resources create a new urgency to address this old problem.

7. The Yemeni economy has been badly affected by the prolonged conflict, depriving millions of their livelihoods and jobs and driving poverty levels up to over 80 percent. The Gross Domestic Product (GDP) for 2018 was estimated at US\$23 billion, and although official statistics are no longer available, evidence suggests that Yemen's GDP has contracted by about 40 percent cumulatively since 2015.⁴ Significant damage to vital public infrastructure including health, WASH, and education facilities and private residences has contributed to a decline in access to basic services (such as health, water and sanitation) and led to an internal displacement of over 10 percent of the population. Reconstruction costs are estimated at close to US\$25 billion over five years for only 16 cities and 12 sectors.⁵ About 17.8 million people lack access to safe water and sanitation and 19.7 million lack access to adequate healthcare.⁶ Cholera, diphtheria and other communicable diseases (dysentery, giardia, severe diarrhea) have hit the people in Yemen hard. The suspension of sporadic payment of civil service salaries since 2015, lack of fuel, electricity and operations and maintenance (O&M) financial budget, etc. have further compromised the government's ability to deliver public services. Fragmentation of monetary and exchange policy implementation and segmented banking supervision hindered any cohesive economic policy. Exchange rate volatility and an unprecedented depreciation of the Yemeni Rial has undermined households' purchasing power.

8. The country has suffered extensive damage to its human capital which will require time and steady resources to undo. A large swathe of the population is food insecure, and over two million children require treatment for acute malnutrition,⁷ causing irreparable damage to human capital. About 4.5 million children were born in Yemen since the escalation of violence in March 2015. An estimated 4.3 million people have fled their homes since the start of the conflict, of which over 3 million remain internally displaced with the numbers rising. The conflict has further limited already fewer opportunities open to women to access economic activities with their mobility and participation in the public domain further curtailed, while a climate of intensified gender-based violence, increased rates of child marriage, and reduced educational opportunities remain pervasive. At the same time, the operating environment for aid delivery is highly constrained, further complicating operational conditions for international agencies on the ground.

9. With over 24 million people food insecure,⁸ including a staggering 16.2 million people in Integrated Food Security Phase Classification (IPC) Phase 3+ requiring urgent emergency assistance, food insecurity in Yemen is deep rooted. Hunger, food insecurity and malnutrition are among the most

⁴ World Bank Republic of Yemen Overview, April 2018

⁵ Yemen Dynamic Needs Assessment, 2020.

⁶ <https://reliefweb.int/report/yemen/yemen-2019-humanitarian-needs-overview-enar>

⁷ Integrated Food Security Phase Classification 2020/2021 analysis for acute malnutrition

⁸ IPC Phase 2 and above.

pressing and overwhelming challenges faced by the country at present, at a scale that is not being fully met by national authorities and the international development and humanitarian communities. The high dependence on food imports, for most households combined with high food prices and significantly reduced income earning has resulted in low food access.

10. Socio-economic conditions deteriorated further in 2020, leading to a significant worsening of poverty. Distortions created by the fragmentation of institutional capacity and the divergent policy decisions between the areas of control have further compounded the economic and humanitarian crisis. As a result, anecdotal evidence indicated a likely contraction of the economy from an already low base in 2020. More than 50 percent of the population between the ages of 18 and 24 were unemployed in 2017.⁹ This dramatic deterioration of conditions in Yemen has translated into an estimated 80 percent of the population (around 24 million) living below the poverty line even before the crisis brought about by the coronavirus disease 2019 (COVID-19) pandemic (World Bank 2019). In addition to monetary poverty, up to 80 percent of households experience overlapping monetary and non-monetary deprivations (World Food Program 2020).

11. The COVID-19 outbreak, flooding, locust infestation and climate-related hazards have further compounded the impacts of the conflict on people and country systems and underscored their vulnerability to shocks. In recent years, the already dire humanitarian situation in Yemen has been exacerbated by multiple and overlapping infectious disease outbreaks such as cholera and dengue. The COVID-19 pandemic has further strained an already weak health and water and sanitation systems. The fatality rate is high, estimated around 25 percent among the severe, hospitalized cases, and COVID-19 initially reduced demand for routine health services such as immunization and maternal care, while school closures have left over six million children out of school, amid soaring food prices. Massive flooding and the threat of locusts has had a devastating effect on food security and livelihoods. In April and August 2020, floods severely impacted more than 100,000 people and displaced thousands. At the same time, Yemen is facing significant cuts to humanitarian assistance despite mounting challenges, with scarce assistance funding diverted to the pandemic.

1.3 Rationale

12. The project is providing services to identified facilities and settings, however, there are activities may be needed to improve the functionality of the facilities. These maybe minor rehabilitation of the facility, building of additional rooms or toilets if required and constructing/installation of incinerators. These activities will need new location to be identified inside the targeted facilities and may need further assessment to determine the nature of, the risk associated with the activities.. It may require preparing further Environmental and Social Safeguard Instrument. Perpetration of ESMPs if needed as per the ESMF guidance.

13. In line with ESS1, the Project uses an Environmental and Social Management Framework instead of an Environmental and Social Impact Assessment (ESIA) and an Environmental and Social Management Plan (ESMP) because the exact nature and location of subprojects under Component 1 of the Project and their impacts are not fully known at the time of Project appraisal.

14. As indicated in ESS1:

The ESMF sets out the principles, rules, guidelines and procedures to assess the environmental and social risks and impacts. It contains measures and plans to reduce, mitigate and/or offset adverse risks and impacts, provisions for estimating and budgeting the costs of such measures, and information on the agency or agencies responsible for addressing project risks and impacts, including on its capacity to manage environmental and social risks and impacts. It includes adequate information on the area in which subprojects are expected to be sited, including any potential

⁹ UNDP, 2019. Country Programme Document for Yemen, July 2019 to June 2020.
<https://erc.undp.org/evaluation/managementresponses/keyaction/documents/download/2284>

environmental and social vulnerabilities of the area; and on the potential impacts that may occur and mitigation measures that might be expected to be used.

1.4 Experience During Implementation of the EHNP and the Parent Project (EHCP)

15. The Project builds on the Yemen Emergency Health & Nutrition Project (EHNP) that is implemented by UNICEF and the ongoing EHCP project includes similar components.

- EHNP (Emergency Health and Nutrition) and the EHCP parent project interventions contribute in restoring services in more than 1900 HFs and getting them operational in order to serve the local communities including the poor and vulnerable groups living all over the country.
- UNICEF's WASH also conducted rehabilitation of water supply and sanitation systems in the urban areas and bringing them back to services. It also conducted the rehabilitation of the water and sanitation facilities inside the HFs and schools.
- UNICEF prepared ESMPs for all subprojects, and jointly supervised their implementation by contractors.
- UNICEF is implementing the Medical Waste Management Plan and conducting regular monitoring, in order to control the medical waste generated during the HFs operation and take the correction measures on a timely manner.
- None of the subprojects required the preparation of an ESIA.
- UNICEF conducted environmental, social, and OHS inspections usually on a regular basis during subproject implementation. Noncompliance was addressed and corrected immediately by the contractor's team/ESH consultant.
- UNICEF conducted EHS training for contractors, contractors' engineers, contractors' supervisors, PMU engineers and the NGOs working with UNICEF on project activities implementation. These trainings helped workers, contractors and engineer's behavior change towards compliance and apply the OHS measures during implementation.
- UNICEF conducted training to the TPMA personnel on safeguards measures contained in the ES instruments and how to monitor the ES safeguard compliance by contractor.
- Contractor noncompliance included: (i) Not all workers wearing appropriate PPEs; (ii) workers not fully aware of the worker's GM; (iii) waste and debris not collected immediately and transported to the assigned landfill; those were immediately addressed.
- Complaints also raised by the communities affected by the project activities implementation, like damage of private properties during excavation or track movement such as collapses of household's cesspits, and damage of the water supply pipelines.
- Most complaints were resolved immediately with the contractors to the satisfaction of the complainants.

1.5 Lessons learned

16. During the implementation of the EHNP and the ongoing parent project, which entailed a similar set of activities as are planned in the YEHCP-AF, UNICEF experienced and adapted the following lessons learned:

- At the start of the implementation of the project, there was some resistance from contractors and workers to the required ES safeguard measures contained in the ES instruments, especially PPEs use. The rationale was that it would distract and delay the work and would incur additional financial costs which had not been planned for. However, after thorough orientation and training on the importance of implementation of ES measures, compliance to operational health and safety (OHS) measures improved at all the project working sites, and the workers became more accustomed to these practices. No incidents or injuries were documented during

the project implementation period. This highlights the importance of adequately sensitizing workers in project sites on the ESMF provisions and the importance of implementing these instruments in order to ensure buy-in and compliance. Enhanced sensitization and training for health workers and other staff involved in the project have been incorporated into this ESMF and its related documents (ESCP, MWMP, LMP, GBV-AP) as a result of this lesson learned.

- To do no harm to the environment and people, during the project activities implementation, required ESMPs containing mitigation measures have been prepared, reviewed & approved by the WB. It became part of the project tendering documents and contract agreements. However, it was evident that these ES mitigation measure could not achieve its goal without close monitoring and follow-up by UNICEF. In the YEHCP-AF ESMF and associated plans, UNICEF has made provisions for enhanced monitoring mechanisms to ensure compliance among contractors and partners with these provisions, including increased human resources focused on these issues.
- During the course of the project implementation, minor damages to private properties accidentally occurred in different areas of the project. Affected beneficiaries complained via GM hotline, the complaints were investigated and resolved on time to the satisfaction of the complainants. This proved that the GM is efficient and effective tool to provide information on non-compliance and contributes to solving issues in a timely manner before disputes escalate and affect the project implementation.

Chapter 2.

Project Description

17.

18. The proposed AF, with a focus on essential health, nutrition and WASH service delivery and strengthening institutional capabilities, supports the objectives of both the FCV Strategy and CEN. Proposed changes include: (i) components and cost to account for expanded scope of activities including strengthening the resiliency of local institutions at decentralized level; (ii) results framework adjusted to reflect the expanded scope; and (iii) a 12-month extension of the closing date to June 30, 2025 to allow sufficient time for completing the activities and reconciling accounts by the implementing agencies. No changes are being proposed to the PDO as the proposed activities are aligned with the original PDO. The Environmental and Social Risk Classification (ESRC) will remain Substantial for the proposed AF. Finally, no changes are being proposed with respect to implementing agencies, fiduciary arrangements, or disbursement arrangements.

19. The overall objective of AF is to provide essential health, nutrition, water and sanitation services to the population of Yemen.

2.1 Project Components

20. The AF will finance activities that are currently supported by the parent project as well as new activities which will be implemented collectively by UNICEF, WHO and UNOPS. This will enable sustaining and expanding health and nutrition service delivery under Component 1, scaling up and expanding the scope of WASH interventions and strengthening the capacity of WASH institutions under Component 2.

Component 1: Improving Access to Healthcare, Nutrition, and Public Health Services

21. Sustain essential health and nutrition services at currently-supported health facilities. The majority of the requested funds will finance service delivery inputs (e.g. equipment, supplies, training and operational costs) for both primary and secondary health care facilities (over 2,000 health facilities, including approximately 1,970 primary health care facilities and 72 hospitals) in Yemen. The inputs will help the health facilities remain functional and deliver essential health and nutrition services for an additional 12 months (until September 2023).

22. Expand the delivery of essential health and nutrition services to additional facilities. The proposed AF will expand the critical support to additional facilities that are not currently supported under the parent project. The purpose is to expand access to health and nutrition services by increasing the number of functional health care facilities in additional catchment areas. This will be done by re-opening health care facilities that have closed and/or make additional health and nutrition services available in locations where they are not currently being provided (e.g. maternal and child health services at a primary level and trauma/emergency care at a secondary level).

Component 2: Improving Access to Water Supply and Sanitation (WSS) and Strengthening Local Systems.

Component 3: Project Support, Management, Evaluation and Administration

23. This component will support the implementation, administration, management, monitoring and evaluation, and environmental and social aspects of the Project, including: (a) Direct Cost; (b) Indirect

Cost; (c) provision of consultancy services required for Project monitoring, evaluation and coordination at local level; (d) conducting independent audits of Project activities; (c) audit; (d); Third-Party Monitoring; and e) Supporting the provision of technical assistance on system strengthening and service delivery improvement.

24. UNICEF will engage a Third-Party Monitoring (TPM) agent to undertake independent results verification of subprojects funded under the Project's related Components. The TPM agent will include female staff. On a quarterly basis, the TPM agent will report on the activity outputs, improving access to Health care and nutrition services for the intended beneficiaries, and the fiduciary and safeguard processes followed by the local partners. The Terms of Reference (TORs) for the TPM agent will be developed by UNICEF and agreed upon with the World Bank.

2.2 Project Beneficiaries

25. The project is a nationwide intervention and thus the project activities have no specific geographical targeting. All activities will be guided by the security situation of each governorate. Areas with ongoing conflicts will be reached once the security situation allows and the service delivery can be ensured. Similarly, the package of services will vary among governorates based on the population's health and WASH needs and the implementation capacity of the existing local providers.

26. Based on the proposed activities, the project is expected to: (a) reach 3.10 million people in Yemen with essential health, nutrition and population services; (b) train 3,000 health personnel; and (c) establish disease surveillance and early warning system for cholera and other outbreaks in 300 new sites. In addition, cholera suspected cases will be managed, and the entire population will be targeted for health education messages as well as for public health programs for polio, cholera, malaria, schistosomiasis, and trachoma which will be integrated within the package to sustain the service delivery.

27. The primary beneficiary of the WASH component will be the residents of the selected urban, peri-urban¹⁰ and rural areas in Yemen (850,000¹¹), including IDPs, marginalized groups such as women, girls and children¹² who are the primary beneficiaries of improved services by having more access to improved drinking water and improved wastewater collection and treatment services. Autonomous National and local institutions having partnerships with UNOPS under this component and their staff will also benefit from technical assistance and investments that will strengthen their performance and improve the services provision, which in turn will improve their social contract with the customers and general reputation in their communities.

28. The above project beneficiaries reflect the targets of the entire project, some of which will be covered by WHO and UNOPS rather than UNICEF. UNICEF's specific beneficiaries include health workers and staff providing primary health care services in health centers, health units, mobile teams, outreach teams, and community-based workers; women, children, and families accessing primary health care services through these channels; and staff and patients of mental health and psychosocial support services in primary health care facilities and communities. They will also include communities living in the catchment area of supported primary health care services, and staff in governorate health offices (GHOs) who have responsibility for management, supervision, and reporting of primary health care services.

¹⁰ For reporting the actual beneficiaries reached as part of the WASH indicators, people reached in peri-urban areas will be counted as part of the urban beneficiaries.

¹¹ Figures to be disaggregated by sex.

¹² According to UN statistics women (especially female head of households) and children constitute 76 percent of the displaced population in Yemen. More than half (52%) of displaced people live in female-headed households.

Source:

https://reliefweb.int/sites/reliefweb.int/files/resources/yemen_humanitarian_needs_overview_hno_2018_20171204_0.pdf

Chapter 3.

Institutional and Implementation Arrangements

29. The Project is an emergency operation processed under OP 2.30 and OP 10.00 paragraph 12. It uses UNICEF as the recipient of IDA funds and alternative implementation agency on an exceptional basis under the Financial Management Framework Agreement (FMFA) between the World Bank and UN agencies. The financial management arrangements will be governed by the FMFA, which provides for the use of the UN's Financial Regulations. UNICEF will follow its own procurement procedures as Alternative Procurement Arrangements allowed by the World Bank's Procurement Framework Policy.

30. The project was designed to complement existing WBG emergency operations in Yemen, and to become an integral part of the World Bank emergency response for Yemen. The project is also a continuation of the Yemen Emergency Health and Nutrition Project (YEHNP) and the parent EHCP project and now additional financing that focuses on improving health and nutrition services, livelihood, and WASH services restoration nationwide in urban and rural areas.

31. The Project is designed to work directly with independent local institutions, such as health offices at Governorate, District and HFs level, in addition to the relevant Ministries (Central Government/authorities) in Sana'a or in Aden.

3.1 UNICEF

32. Component 1 of the project will be implemented by UNICEF through direct implementation. UNICEF will: (a) take responsibility for project implementation; (b) monitor the project targets and results in coordination with the local partners; (c) handle relevant procurement, financial management, and disbursement management including the preparation of withdrawal applications under the project; and (d) ensure that all reporting requirements for IDA are met per the Project Financing Agreement.

33. The UNICEF office in Sana'a hosts a project management and implementation support team consisting of international and national staff: project manager, procurement specialists, finance specialists, an Environmental and Social Safeguards Specialist (ESS Specialist), supportive Gender Mainstreaming team, and other supportive staff in relevant sectors at UNICEF country office. This office has already successfully implemented the YEHNP, the parent project and will continue managing the implementation of YECHP-AF in which the office has a significant presence in Yemen. UNICEF has five hubs in five different regions, these HUBs are located to manage and implement UNICEF activities to serve the whole country. Every hub is staffed with qualified Health and Nutrition field officers and will support implementation the project activities.

3.1.1 TPM

34. UNICEF shall recruit a Third-Party Monitoring (TPM) agent (composed of international audit firm and an experienced technical firm) to undertake independent results verification of subprojects funded under the project, on the basis of ToRs developed by UNICEF and approved by the World Bank including the monitoring of the implementation of environmental and social aspects of the sub-projects.

3.1.2 ESMF Implementation

35. UNICEF is responsible for the overall implementation of the ESMF. More specifically UNICEF will ensure that:

- Site/activity specific ESMFs are prepared in a timely manner, as needed.

- Tender documents and construction contracts include effective and enforceable contractual clauses to manage environmental and social risks
- For activities that require activity/site specific ESMP, no activities will start before the required environmental and social risk management measures are in place
- The environmental and social performance of contractors will be monitored and reported to meet the Project's environmental and social requirements.

36. The ESS Specialist will be supported by UNICEF personnel, to conduct the management, monitoring and reporting of environmental and social risk management aspects throughout project implementation.

3.2 The World Bank

37. The World Bank will closely coordinate with UNICEF to support the implementation and overall oversight of the of site-specific environmental and social risk management instruments, e.g., MWMP and required/relevant ESMPs to ensure that their scope and quality are satisfactory to the Bank.

38. The World Bank will also monitor the implementation of the different prepared instruments through regular supervision missions (which will include an environmental and/or social specialist) during which document reviews, and site visits and spot-checks by TPM will be conducted as needed.

3.3 Local Partners

UNICEF will work closely with the MOPHP for coordination and planning of interventions, and with GHOs and DHOs for implementation of health and nutrition services. GHOs and DHOs will provide supervision and monitoring of environmental and social safeguards measures implemented through primary health care services (facility, outreach, and community), and will facilitate UNICEF's work with health facilities.

The MOPHP has established a directorate to provide guidance and oversight to medical waste management. UNICEF will coordinate closely with this directorate in implementing the medical waste management plan for the YEHCP-AF.

UNICEF will further work with the Ministry of Social Affairs and Welfare (MOSAL) governorate branches on the implementation of mental health and psychosocial support services.

Chapter 4.

Legal and Regulatory Framework

39. This ESMF is prepared to:

- (i) meet the requirements of the World Bank's Environment and Social Standards (ESS), including the World Bank Group Environment, Health and Safety (EHS) Guidelines, and other guidelines and guidance;
- (ii) meet UNICEF's Social and Environmental Sustainability Standards and Procedures (SESSP) relevant policies, procedures and guidelines; and
- (iii) comply with national environmental and social laws and regulations.

4.1 World Bank Requirements

4.1.1 World Bank Environmental and Social Framework

40. The World Bank Environmental and Social Framework (ESF) sets out the World Bank's Commitment to sustainable development. It includes a set of ten Environmental and Social Standards that establish the mandatory requirements that the Borrower and the projects must meet through the project life cycle:

- **Environmental and Social Standard 1.** Assessment and Management of Environmental and Social Risks and Impacts
- **Environmental and Social Standard 2.** Labor and Working Conditions
- **Environmental and Social Standard 3.** Resource Efficiency and Pollution Prevention and Management
- **Environmental and Social Standard 4.** Community Health and Safety
- **Environmental and Social Standard 5.** Land Acquisition, Restrictions on Land Use and Involuntary Resettlement
- **Environmental and Social Standard 6.** Biodiversity Conservation and Sustainable Management of Living Natural Resources
- **Environmental and Social Standard 7.** Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities
- **Environmental and Social Standard 8.** Cultural Heritage
- **Environmental and Social Standard 9.** Financial Intermediaries
- **Environmental and Social Standard 10.** Stakeholder Engagement and Information Disclosure.

41. Of the above standards, the following are relevant to UNICEF's components of the Project, ESS1, ESS2, ESS3, ESS4 and ESS10¹³. The standards establish objectives and requirements to avoid, minimize, reduce and mitigate environmental and social risks and impacts, and to compensate for or offset any residual impacts.

4.1.2 Environment, Health and Safety Guidelines

42. The ESF also requires all projects to apply the relevant requirements of the World Bank Group Environmental, Health and Safety Guidelines (EHSGs)¹⁴. These are technical reference documents, with general and industry specific examples of Good International Industry Practice (GIIP). They define

¹³ ESS5 and ESS6 are relevant to the project's water supply and sanitation component (Component 2), which will be implemented by UNOPS

¹⁴ A complete list of industry-sector guidelines can be found at:

www.ifc.org/ifcext/enviro.nsf/Content/EnvironmentalGuidelines.

acceptable pollution prevention and abatement measures and emission levels in World Bank financed projects.

43. The EHS Guidelines contain the performance levels and measures that are generally considered to be achievable in new facilities by existing technology at reasonable costs. Application of the EHS Guidelines to existing facilities may involve the establishment of site-specific targets, with an appropriate timetable for achieving them.

44. The application of the Guidelines to existing facilities may involve the establishment of site-specific targets with an appropriate timetable for achieving them. The environmental assessment process may recommend alternative (higher or lower) levels or measures, which, if acceptable to the World Bank, become project - or site-specific requirements.

45. If less stringent levels or measures than those provided in the EHS Guidelines are appropriate, in view of specific project circumstances, a full and detailed justification for any proposed alternatives is needed as part of the site-specific environmental assessment. This justification should demonstrate that the choice for any alternate performance levels is protective of human health and the environment. When host country regulations differ from the levels and measures presented in the EHS Guidelines, projects are expected to achieve whichever is more stringent.

46. In the context of YEHCP-AF- Component 1, UNICEF will use the General EHS Guidelines¹⁵, the Health care facilities EHS Guidelines¹⁶, and the Waste Management Facilities EHS Guidelines. The General Guidelines cover environmental, occupational health and safety, and community health and safety related risks. Section 1.6 of the General Guidelines covers Waste Management

4.1.3 Environmental and Social Risk Classification

47. The World Bank classifies all projects into one of four classifications: High Risk, Substantial Risk, Moderate Risk or Low Risk. This classification takes into account relevant issues, such as the type, location, sensitivity, and scale of the project; the nature and magnitude of the potential environmental and social risks and impacts; and the capacity and commitment of the recipient (including any other entity responsible for the implementation of the project) to manage the environmental and social risks and impacts in a manner consistent with the ESSs. Other areas of risk may also be relevant to the delivery of environmental and social mitigation measures and outcomes, depending on the specific project and the context in which it is being developed. These could include legal and institutional considerations; the nature of the mitigation and technology being proposed; governance structures and legislation; and considerations relating to stability, conflict or security.

48. The World Bank has classified the environmental and social risks of YEHCP-AF as substantial. It will review the risk classification on a regular basis during implementation, and will change the classification where necessary, to ensure that it continues to be appropriate. Any change to the classification will be disclosed on the World Bank's website.

4.1.4 Environmental and Social Management Framework

49. The ESMF examines the risks and impacts when a project consists of series of subprojects, and their risks and impacts cannot be determined until the subproject details have been identified during implementation. The ESMF:

- sets out the principles, rules, guidelines, and procedures to assess the environmental and social risks and impacts of subprojects

¹⁵ <https://www.ifc.org/wps/wcm/connect/e22c050048855ae0875cd76a6515bb18/Final%2B-%2BWater%2Band%2BSanitation.pdf?MOD=AJPERES>

¹⁶ (<https://www.ifc.org/wps/wcm/connect/960ef524-1fa5-4696-8db3-82c60edf5367/Final+-+Health+Care+Facilities.pdf?MOD=AJPERES&CVID=jqeCW2Q&id=1323161961169>)

- contains measures and plans to reduce, mitigate and/or offset adverse risks and impacts, provisions for estimating and budgeting the costs of such measures, and information on the agency or agencies responsible for addressing project risks and impacts, including on its capacity to manage environmental and social risks and impacts
- includes adequate information on the area in which subprojects are expected to be sited, including any potential environmental and social vulnerabilities of the area; and on the potential impacts that may occur and mitigation measures that might be expected to be used.

50. In the context of YEHCP-AF Component 1 and given the conflict circumstances, the World Bank will review and approve all instruments prepared under the ESMF.

4.1.5 Medical Waste Management Plan

51. Under requirement of ESS1 and ESS3, UNICEF has prepared a stand-alone Medical Waste Management Plan (MWMP) to control the impact of the produced medical waste to the human health and the environment, and to ensure that the health facilities performing environmental and health sound management. UNICEF prepared a MWMP, under the umbrella of the Environmental and Social Management Framework (ESMF), in consistent with the WBG-EHS Guidelines for Health Care Facilities. The MWMP was updated and will be implemented during the operation of the HFs using the YEHCP-Additional Fund. Adequate implementation of the measures contained in this management plan are set to contribute in a substantive reduction of disease burden, mitigate the community and workers health risk and protecting the environment as well.

52. It is important to mention that the original MWMP was also prepared by the UNICEF and cleared by the WB and implemented for the parent EHCP project.

53. The Medical Waste Management Plan was prepared to prevent and/or mitigate the negative effects of medical waste on human health and the environment. The plan includes advocacy for good practices in medical waste management, to be used by health, sanitary and cleaning workers managing medical waste in the project targeted Health Care Facilities, including the small HFs settings (Health Centers and Health Units). The plan also includes adequate and good practices and procedures for the waste collecting and storage, segregation, transportation, treatment and disposal.

54. The plan contains monitoring plan detailing the monitoring arrangements and it includes the monitoring indicators and the monitoring questionnaire as well. It will serve as a tool to avoid any unpredictable risk could likely occur during HFs operation due to improper handling and management of wastes. However, its implementation requires the HFs to have suitable capacities and procedures for medical waste management.

55. UNICEF will monitor the implementation of all the provisions and measures contained in the project medical waste management plan at MoPHP offices at national, local level and the targeted health care facilities. UNICEF-YEHCP AF will help in providing all the support and the capacity building required for systematic health care waste management during the project life cycle.

56. UNICEF will follow-up on regular basis the implementation of mentioned procedure as part of the regular monitoring of component 1 of the project.

4.1.6 Labor Management Procedures

57. Under ESS2 on Labor and Working Conditions, UNICEF is required to develop labor management procedures (LMP) for YEHCP-Component 1. The LMP was prepared as a standalone document according to the established template. This LMP was updated to meet the AF requirement and to be implemented during AF intervention implementation.

58. The purpose of the LMP is to facilitate planning and implementation of the project's Component 1. The LMP identifies the main labor requirements and risks associated with the Component 1, and help UNICEF determine the resources necessary to address Project labor issues. The LMP is a living

document, which is initiated early in Project preparation, and is reviewed and updated throughout the development and implementation of the project.

59. A concise and up to date LMP will enable different project-related parties, for example, staff of the project implementing unit, contractors and sub-contractors and project workers, to have a clear understanding of what is required on a specific labor issue. The level of detail contained in the LMP will depend on the type of project and information available. Where relevant information is not available, this should be noted and the LMP should be updated as soon as possible.

60. In preparing and updating the LMP, UNICEF refer to the requirements of national law and ESS2 and the Guidance Note to ESS2 (GN).

4.1.7 Stakeholder Engagement Plan

61. In the context of YEHCP, UNICEF, in consultation with the World Bank, have developed jointly with WHO and UNOPS and will implement a Stakeholder Engagement Plan (SEP) proportionate to the nature and scale of Component 1 of the project and its potential risks and impacts. UNICEF is conducting several consultations with stakeholders at central and local levels to update the SEP. The SEP must:

- Describe the timing and methods of engagement with stakeholders throughout the life cycle of the project, distinguishing between project-affected parties and other interested parties.
- Describe the range and timing of information to be communicated to project-affected parties and other interested parties, as well as the type of information to be sought from them.
- Take into account the main characteristics and interests of the stakeholders, and the different levels of engagement and consultation that will be appropriate for different stakeholders.
- Set out how communication with stakeholders will be handled throughout project preparation and implementation.
- Describe the measures that will be used to remove obstacles to participation, and how the views of differently affected groups will be captured. Where applicable, the SEP will include differentiated measures to allow the effective participation of those identified as disadvantaged or vulnerable. Dedicated approaches and an increased level of resources may be needed for communication with such differently affected groups so that they can obtain the information they need regarding the issues that will potentially affect them.

62. When the stakeholder engagement with local individuals and communities depends substantially on community representatives, UNICEF will make reasonable efforts to verify that such persons do, in fact, represent the views of such individuals and communities, and that they are facilitating the communication process in an appropriate manner.

63. The SEP for YEHCP is updated under ESS10 and its guidance note for the AF interventions, the SEP will be disclosed separately.

4.1.8 Security Management Plan

64. In accordance with the requirements of ESS1 and ESS4 UNICEF prepared the project SMP. It was prepared to provide and maintain a safe physical environment and manage staff activities to reduce the risk of personal injury and property loss during the implementation of YEHCP.

65. The SMP also outlines the requirements of contractors and project personnel, and the rights and responsibilities of project personnel and project participants in relation to their safety and security when interacting with the YEHCP and its implementation. It is also prepared to address the health and safety and security risk and impact associated with the project activities on project affected communities.

4.1.9 Grievance Mechanism

66. ESS10 requires that UNICEF propose and implement a grievance mechanism to receive and facilitate resolution of concerns and grievances of project-affected parties related to the environmental and social performance of the project in a timely manner.

67. The grievance mechanism required by ESS10 must *be proportionate to the potential risks and impacts of the project and will be accessible and inclusive. Where feasible and suitable for the project, the grievance mechanism will utilize existing formal or informal grievance mechanisms, supplemented as needed with project-specific arrangements.*

- *The grievance mechanism is expected to address concerns promptly and effectively, in a transparent manner that is culturally appropriate and readily accessible to all project-affected parties, at no cost and without retribution. The mechanism, process or procedure will not prevent access to judicial or administrative remedies. The Borrower will inform the project-affected parties about the grievance process in the course of its community engagement activities, and will make publicly available a record documenting the responses to all grievances received*
- *Handling of grievances will be done in a culturally appropriate manner and be discreet, objective, sensitive and responsive to the needs and concerns of the project-affected parties. The mechanism will also allow for anonymous complaints to be raised and addressed.*

4.1.10 Environmental and Social Commitment Plan

68. In the context of YEHCP, UNICEF developed jointly with WHO and UNOPS and will implement an Environmental and Social Commitment Plan (ESCP), which sets out the measures and actions required for the project to achieve compliance with the ESSs. The ESCP forms part of the legal agreement.

69. The ESCP took into account the findings of the environmental and social assessment, the World Bank's environmental and social due diligence, and the results of engagement with stakeholders. It is an accurate summary of the material measures and actions required to avoid, minimize, reduce or otherwise mitigate the potential environmental and social risks and impacts of the project. A completion date for each action is specified in the ESCP.

70. UNICEF will diligently implement the measures and actions identified in the ESCP in accordance with the timeframes specified and will review the status of implementation of the ESCP as part of its monitoring and reporting.

71.

UNICEF will notify the World Bank promptly of any proposed changes to the scope, design, implementation or operation of the project that are likely to cause an adverse change in the environmental or social risks or impacts of the project. The updated ESCP will be disclosed. This ESCP was updated according to the Additional Financial proposed interventions.

4.1.11 Information Disclosure

72. The World Bank requires that all documents provided to it by UNICEF meet the requirements of the World Bank Policy on Access to Information.

73. The World Bank will require UNICEF to provide sufficient information about the potential risks and impacts of the project for UNICEF's consultations with its stakeholders. Such information will be disclosed in a timely manner, in an accessible place, and in a form and language understandable to project-affected parties and other interested parties as set out in ESS10, so they can provide meaningful input into project design and mitigation measures.

74. The World Bank will disclose documentation relating to the environmental and social risks and impacts of YEHCP-AF. This documentation will reflect the environmental and social assessment of the project and be provided in draft or final form (if available). The documentation will address, in an

adequate manner, the key risks and impacts of the project, and will provide sufficient detail to inform stakeholder engagement and World Bank decision making. Final or updated documentation will be disclosed when available.

4.1.12 Contingent Emergency Response Components (CERC)

75. The World Bank requires all activities financed through the CERC to meet ESF requirements, keeping in mind that this requirement only applies once the CERC is triggered. An Emergency Response Operational Manual will be prepared jointly and agreed upon with the World Bank to be used if this component is triggered. CERC activities will rely as much as possible on the Project's environmental and social instruments.

76. If the CERC is activated, the World Bank will advise UNICEF on the following elements:

- Confirming which activities can proceed on the basis of the provisions of the CERC-ESMF, with no additional environmental or social assessment, and which ones require assessment (and at what level) prior to being initiated.
- Rapidly assessing the environmental and social baseline of the planned CERC activities and locations based on readily available information.
- Determining the sequencing and implementation plan for:
 - Mobilizing technical assistance and funding to prepare any additional safeguard instruments, e.g., Environmental and Social Management Plan, Medical Waste Management Plan, etc.
 - Preparing the safeguards instruments and carrying out their Bank review, revisions, clearance, and approval.
 - Consultations and disclosure.
 - Establishing roles and responsibilities for safeguards implementation, and monitoring.
 - Estimating the costs for safeguards preparation and implementation.

77. In the event that CERC activities exceed the scope of the original PDO and thus this ESMF, UNICEF might be called on to prepare a supplemental CERC-ESMF as part of an eventual Project restructuring. The CERC-ESMF would include a screening process for the potential activities, the institutional arrangements for environmental and social due diligence and monitoring, any needed capacity-building measures, and generic guidance on emergency small-scale civil works. It would also indicate which kinds of emergency response actions can proceed with no additional environmental or social assessment, and which ones would require assessment (and at what level) prior to being initiated. It may also identify trade-offs, where required short-term responses could create longer-term risks that need to be managed.

78. Given the uncertainties and rapid changes inherent in emergency situations and responses, the CERC-ESMF would be built around a flexible, "adaptive management" approach, i.e., with emphasis on monitoring of key outcomes and mechanisms to feed information rapidly and effectively into decision-making and management.

79. UNICEF will use the same institutional framework and the same screening process and criteria for the CERC as for the other Project components.

4.2 UNICEF environmental and social standards

80. UNICEF is in the process of developing a comprehensive set of environmental and social safeguards that will be applicable to all of the Projects it implements. The safeguards will be based on the Model Approach to Environmental and Social Standards for UN Programming¹⁷. The Model Approach represents a key step in moving towards a common approach among UN entities for

¹⁷ https://unemg.org/wp-content/uploads/2019/07/FINAL_Model_Approach_ES-Standards-1.pdf

addressing environmental and social standards for UN programming.

81. UNICEF has drafted a policy on Social and Environmental Sustainability Standards and Procedures (SESSP), which is now being reviewed and considered for adoption. These standards apply to underpin UNICEF’s commitment to mainstream social and environmental sustainability to support sustainable development. Through application of the SESSP, UNICEF enhances the consistency, transparency and accountability of its decision-making and actions, improves performance, and strengthens achievement of sustainable development outcomes. The main objectives of these standards are:

- Strengthen the quality of programming by ensuring a principled approach
- Avoid adverse impacts to people and the environment
- Minimize, mitigate, and manage adverse impacts where avoidance is not possible
- Strengthen UNICEF and partner capacities for managing social and environmental risks
- Ensure full and effective stakeholder engagement, including through a mechanism to respond to complaints from project-affected people

82. The SESSP are an integral component of UNICEF’s quality assurance and risk management approach to programming.

Table 1. Key Elements of UNICEF’s SESSP

Overarching Policy	Programme/Project Structure and Standards	Implementation Procedures: Social and Environmental Management System Requirements
<p>Principle 1. Leave No One Behind</p> <p>Principle 2. Human Rights Approach, Gender Equality and Women's Empowerment</p> <p>Principle 3. Sustainability and Resilience</p> <p>Principle 4. Accountability</p>	<p>Standard 1. Labor and Working Conditions</p> <p>Standard 2. Resource Efficiency and Pollution Prevention</p> <p>Standard 3. Community Health, Safety, and Security</p> <p>Standard 4. Land Acquisition/Displacement and Involuntary Resettlement</p> <p>Standard 5. Biodiversity, Conservation and Sustainable Natural Resource Management</p> <p>Standard 6. Indigenous People</p> <p>Standard 7. Cultural Heritage</p> <p>Standard 8. Climate Changes and Disaster Risks</p>	<p>Approach to Implementation</p> <p>Application of the Standards to Donor Proposals</p> <p>Use of Country or Partner Safeguard Systems</p> <p>Stakeholders Engagement and Accountability</p> <p>Monitoring, Reporting and Compliance</p>

4.3 National Requirements and Policies

83. The Republic of Yemen (RoY) has drafted policies, developed sectoral legislation and implementation procedures, established institutions responsible for environmental management, and joined international conventions. The ongoing conflict has considerably weakened the capacity of the assigned institutions to implement policies and existing laws. **As a consequence, the use of Yemen’s environmental and social management framework is not considered for the Project.**

4.3.1 National Environmental Action Plan

84. The foundational document for environmental management in Yemen is the National Environmental Action Plan (NEAP) that the ROY prepared in 1995, with the support of the UNDP and

the World Bank. The NEAP defines priority actions regarding key environmental issues such as water resources, land resources, natural habitats, and waste management.

4.3.2 Environmental Protection Law

85. The Environmental Protection Law (Law 26/1995; EPL), was enacted in 1995 in the wake of the NEAP. It constitutes the framework environmental legislation for Yemen, including provisions for environmental protection, the issuance of permits, and the requirement to prepare Environmental Impact Assessments (EIAs). The provisions of the law are implemented through By-Law 148/000.

86. The law is also designed to: (i) incorporate environmental considerations in economic development plans at all levels and stages of planning, (ii) protect the national environment from activities practiced beyond national boundaries, and; (iii) implement international commitments ratified by the RoY in relation to environmental protection, pollution control, the conservation of natural resources, and global environmental issues such as the depletion of the ozone layer depletion and climate change.

Environmental Protection Authority¹⁸

87. The EPL established an Environmental Protection Council (EPC) and granted it power to take all measures necessary to protect and improve the quality of environment and to prevent pollution of the environment. Decree 101/2005 established the Public Environmental Protection Authority (EPA) to replace the EPC and lays down its objectives, tasks and management. The functions assigned to the EPA include:

- preparing and executing appropriate policies/strategies/plans to protect the environment
- conducting environmental surveys
- assessing areas/resources/species to be protected through necessary measures conserving the ecosystem including flora and fauna, wild and marine life as per existing laws and monitoring their application
- developing legislative proposals for environment protection in coordination with other agencies involved
- developing a National Emergency Plan to combat natural disaster and environmental pollution in consultation with the agencies concerned implementing environmental protection law and other relevant laws/regulations
- reviewing EIA studies for public /private sector projects for giving clearance and monitoring their execution
- coordinating relevant programs/activities with national, regional and international agencies and organizations
- recommending necessary laws, regulations and systems to protect the environment, in accordance with regional and international agreements on environmental protection.
- collecting data, assessing and evaluating the status of the environment, and setting up suitable monitoring systems
- laying down appropriate standards for protecting the environment from pollution and formulating policy guidelines to combat industrial pollution and protect animal, plant and marine ecology

Environmental Impact Assessments

88. The EPL requires the preparation of EIAs for projects proposed by the public and private sectors. The proponent is responsible to undertake the EIA, but the report may be prepared by the proponent or the competent authority or both. Line ministries and Government bodies commission EIA studies

¹⁸ The information regarding the Environmental Protection Authority is purely indicative, as the EPA will not play any role during Project implementation.

at the request of funding agencies and seek the advice of the EPA.

89. The EPA is responsible for implementing screening procedures, assisting in scoping, evaluation and approval of the Environmental Impact Statement (EIS). However, there is still no regulatory framework to support the implementation of the EPL and the provision of undertaking EIAs for projects is not strictly enforced, particularly for project that are not internationally funded.

90. Given the current context, modifications to the EIA procedures are not expected during the project. Current procedures will be taken into account, but there is no expectation at this point that the EPA will review the Project's safeguard instruments.

National Environmental Standards and Specifications

91. The former Environment Protection Council (EPC) issued environmental standards and specifications as annexes to the Executive Regulations, covering potable water quality, wastewater quality for agriculture, and ambient air quality, emissions, noise, biodiversity, and protected areas. These include standard application forms intended for use by all relevant government bodies.

92. The EPC has released draft standards for wastewater quality and air quality but a comprehensive set of standards is not yet available. In their place international standards, primarily those of the World Health Organization (WHO) are used.

93. Decree 148/2000 sets permissible limits for pollutants for use by all government bodies (see Annex 2).

4.3.3 Water Law¹⁹

94. The Water Law (Law 33/2002, updated by Law 41/2006)) regulates water supply and sanitation. The structure of water sector institutions consists of two national-level ministries (MoWE and MAI) and an intermediate-level water authority (NWRA). According to the amended water law and its by-law, the MoWE/NWRA are jointly responsible for organizing and developing water resources. The MAI is responsible for formulating policies and legislation that regulate the use of the irrigation water in line with the national water policies and plans and under the umbrella of the National Water Sector Strategy and the Investment Program (NWSSIP). The MoWE is the lead ministry for the oversight of water resources and water service provision, including in rural areas. The MoWE also supervises local water companies/corporations (public utilities) and all water suppliers (including private) to the domestic and industrial sectors.

95. Each water supply and sanitation Local Corporation has a Decree issued at the date of its establishment that stipulates the provisions and rules to govern and manage the LC, as well as the functions, tasks and responsibilities of interrelated public bodies. Thus, each of the five cities targeted by the Project (Sana'a, Aden, Taiz, Ibb, and Mukalla) has its own decree. Each LC provides water supply and sanitation service to all customer groups in a specified area.

Water Supply

96. Under Article 54 of the updated Water Law, MoWE has *"the authority to protect the water resources from contamination, preserve its standard quality, and prohibit activities that lead to its contamination or deterioration of its standards and combat cases of emergency contamination in cooperation with the relevant and competent authorities."*

97. The Water Law also *"provides a legal basis for controlling groundwater abstractions. It includes measures like licensing and registration requirements for wells and rigs, and more strict control regimes in water stressed catchments. The Water Law also supports decentralization in the form of*

¹⁹ Based on the National Water Sector Strategy and Investment Program (original NWSSIP, 2004), and Dire Straits: The Crisis Surrounding Poverty, Conflict, and Water in the Republic of Yemen (World Bank, 2017)

encouraging the formation of basin committees and requires working closely with Local Councils in implementation of water management measures.” The government has worked to put in place a system of water rights, and to enforce contracts involving voluntary transfers of such rights between consenting parties. The NWRA (through its branch offices) is authorized to implement water laws and regulation and to allocate surface and groundwater resources to the most compelling needs.

Wastewater

98. The Water Law specifies that treated wastewater shall not be disposed of or allowed to be used except after coordination with the MoWE and the relevant authorities, and after consultation and coordination with its users and those who are affected by its use.

99. Article 54 of the Water Law indicates that the concerned competent agencies shall, in coordination with the MoWE, issue licenses for; (i) the disposal of waste, sludge, waste water, oils and specify locations and methods of their disposal and construction of their facilities; (ii) reuse of treated water sewerage effluents according to the approved standards and specifications, and; (iv) construction of sewerage networks and desalination plants according to the relevant laws

100. The NWSSIP Update defines acceptable sanitation systems, taking into account that Yemeni topography, and the low flow of wastewater can make centralized sewage treatment systems uneconomic.

4.3.4 Public Health and Healthcare System Laws

101. The Ministry of Health is responsible for the management of healthcare sector in the country and to ensure all required regulations are implemented.

102. Public Health Law, Law No: 04 / 2009

103. The law includes the regulations needed to improve the public health and the overall healthcare services at the country in addition to the requirements to control the infectious diseases. Occupational health and safety at the healthcare system in addition to the required rules to prevent any cause of infection from the health facilities.

104. Law No: 26 / 2002 Regulating the requirements for practicing the Medicine and Pharmaceutical professions in the Republic of Yemen.

4.3.5 Resettlement

105. The law most directly relevant to Project resettlement issues is the Public Eminent Domain Law (Law 1/1995), most particularly Articles 12-16 on temporary acquisition, and Articles 21-27 defining provisions for land acquisition. The Yemeni laws and regulatory framework are presented extensively in the Resettlement Framework (RF), which outlines the key issues and procedures for involuntary land acquisition under this Law.

4.3.6 Labor

106. The Labor Law (Law 5/1995) requires employers to address Occupational Health and Safety issues, including ventilation and lighting of workspaces; protection from emissions (gas, dust, etc.) hazards; protection from machine accidents and hazards; provision of gender-specific toilet facilities; provision of safe drinking water for workers; basic firefighting equipment and emergency exits; provision of appropriate personal protection equipment; fair compensation; access to periodic medical examinations; availability of first aid.

107. The Labor Law regulates the rights and wages of workers, their protection, occupational health and safety. In addition, the Social Insurance Law regulates retirement compensation.

Gender

108. The Labor Law states that women are equal to man in all aspects without any discrimination, and that equality should be maintained between women and men workers in recruitment, promotion, wages, training, social insurance. It also regulates work time for pregnant women.

109. Yemen also ratified the Convention on Elimination of all Forms of Discriminations Against Women (CEDAW) in 1984, and prepared a National Strategy for Women Development in 1997, which was updated in 2015. Implementation of CEDAW is delegated to relevant ministries and authorities (Decree 55/2009). Based on amendments proposed by the Women National Committee, 24 laws were amended to ensure building gender balance in accordance with the convention.

ILO Fundamental Conventions

110. Yemen has ratified ILOs eight “fundamental” Conventions, covering subjects that are considered to be fundamental principles and rights at work:

1. Freedom of Association and Protection of the Right to Organize Convention, 1948 (No. 87)
2. Right to Organize and Collective Bargaining Convention, 1949 (No. 98)
3. Forced Labour Convention, 1930 (No. 29) (and its 2014 Protocol)
4. Abolition of Forced Labour Convention, 1957 (No. 105)
5. Minimum Age Convention, 1973 (No. 138)
6. Worst Forms of Child Labour Convention, 1999 (No. 182)
7. Equal Remuneration Convention, 1951 (No. 100)
8. Discrimination (Employment and Occupation) Convention, 1958 (No. 111)

111. Law 7/2001 ratified ILO Convention Number 138 on Minimum Age for Admission to Employment. ILO Convention 182 on the Worst Forms of Child Labor refers to child labor as work that is mentally, physically, socially or morally dangerous and harmful to children; and interferes with their schooling by depriving them of the opportunity to attend school, by obliging them to leave school prematurely; or by requiring them to attempt to combine school attendance with excessively long and heavy work. Nonetheless, drawing a line between “acceptable” forms of work by children and child labor can prove difficult, as it depends on the child’s age, the types of work performed, the conditions under which it is performed and national.

4.3.7 International Conventions

112. The RoY is party to a number of international environmental agreements, the most important of which are:

- World Heritage Convention (UNESCO)
- International Convention on Civil Liability for Oil Pollution Damage (CLC)
- The Convention on Biodiversity (CBD)
- The Convention on the Conservation of Migratory Species (CMS)
- The Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES)
- The United Nations Framework Convention on Climate Change (UNFCCC)
- Kyoto Protocol (Yemen is not yet a party to the Paris Climate Agreement)
- The United Nations Convention on Combating Desertification (UNCCD)
- The Environmental Modification Convention (ENMOD)
- The Basel Convention on the Control of Transboundary Movements of Hazardous Wastes and Their Disposal
- Convention on Wetlands of International Importance Especially as Waterfowl Habitat
- Law of the Sea
- The Montreal Protocol on Substances that Deplete the Ozone Layer
- Stockholm Convention on Persistent Organic Pollutants

113. In general, national agencies are not currently in a position to handle the technical complexities and reporting requirements of international agreements. Project activities are not expected to be in breach of any international agreement to which the RoY is a party.

4.4 Comparison between World Bank Requirements and Yemeni Requirements

114. The following table compares World Bank environmental and social requirements with Yemeni Requirements, identifies gaps and suggests recommended actions.

Table 2. Comparison of World Bank and Yemeni Environmental and Social Requirements relevant to the Project

World Bank Requirements	Yemeni Requirements	Recommended Action
ESS1. Environmental Assessment		
Identify, evaluate and manage the environment and social risks and impacts of the project in a manner consistent with the ESSs.	<p>The Environment Protection (EPL, 26/1995) requires the preparation of an EIA during the preparation of all projects and the inclusion of mitigation measures in the project's capital and recurrent costs (Cabinet Decree 89/1993). The EIA should describe: (i) proposed project activities, design of activity, the surrounding environment that may be affected, including a land use map of the adjacent areas, the requirement and types and source of energy, raw material and infrastructure services and roads emergency plan and safety, waste disposal etc.; (ii) and (iii) alternatives using less polluted inputs, as well as consideration of the 'no-project' alternative (EPL Article 37 Para (b)).</p> <p>The EIA guidelines require that ESIs consider the social acceptability or refusal of the local communities to the proposed project, with evidence and record of public consultations and, if it is accepted, should include baseline data, indicators and monitoring plan. It also includes requirements for monitoring, capacity building, verification of monitoring results and findings (EPL Article 60).</p>	<p>National requirements and ESF objectives are aligned, and complement each other.</p> <p>UNICEF will apply the ESF and national requirements specific to the project activities</p>
<p>To adopt a mitigation hierarchy approach to anticipate and avoid risks and impacts;</p> <p>Where avoidance is not possible, minimize or reduce risks and impacts to acceptable levels;</p> <p>Once risks and impacts have been minimized or reduced, mitigate;</p> <p>Where significant residual impacts remain, compensate for or offset them, where technically and financially feasible.</p>	<p>Yemeni law has no equivalent to the mitigation hierarchy.</p> <p>National law gives priority to the principle of environmental protection and pollution prevention, and not only to the mitigation or compensation of impacts. All new projects must carry out EIAs to prevent adverse impact and must obtain an environmental permit. No project or new structure that could harm, pollute or deteriorate the environment and natural resources is allowed and all new projects should use best available practices for clean production and apply environment protection/pollution prevention measures.</p>	UNICEF will apply the ESF requirements
To adopt differentiated measures so that adverse impacts do not fall disproportionately on the disadvantaged or vulnerable, and they are not disadvantaged in sharing development benefits and opportunities resulting from the project.	Included in the EPL (26/1995)	<p>National requirements and ESF objectives are aligned, an complement each other.</p> <p>UNICEF will apply both ESF and national requirements</p>

World Bank Requirements	Yemeni Requirements	Recommended Action
To utilize national environmental and social institutions, systems, laws, regulations and procedures in the assessment, development and implementation of projects, whenever appropriate.	The Environmental Protection Council must inform the proposed projects proponents of the screening results within three months from submission of the project proposal and determines the appropriate EA instrument and required studies required to assess potential risks and impacts. The EIA guideline provides the possibility of using regional and international assessment procedures and norms when applicable. If the project is rejected, the rejection note should indicate the basis for the rejection, as well as the relevant sections of the regulatory framework. The EIA guideline also provides the possibility for project proponents to contest any rejection and to appeal to the special court, within a period of 60 days. The court is required to make a final judgment within six months (Chapter 1 Article 3, EPL 26/1995 - By-law 148/2000).	UNICEF will take into account national laws and regulations when applying the ESF requirements
To promote improved environmental and social performance, in ways which recognize and enhance Borrower capacity.	Include in the Environmental Protection Law No. 26/1995.	UNICEF will take into account national laws and regulations when applying the ESF requirements
ESS2. Labor and Working Conditions		
No equivalent in ESS2	To provide every employee with written particulars of employment Included in Yemen Labour Law Number 5/1995, Articles Number 27, 28, 29, 30, 31, 32, 33, 34	Contractors will be required to comply with national legislation when recruiting workers.

World Bank Requirements	Yemeni Requirements	Recommended Action
To promote safety and health at work.	<p>Included in Yemen Labor Law Number 5/1995, Articles 113, 114, 115, 116, 117 and 118,</p> <p>Chapter 9 of the Labor Law (5/1995), Law Number 25/1997 and Law Number 25/2003 address Occupational Health and Safety and work environment in Articles 113 to 118. Chapter 10 covers worker’s insurance.</p> <p>Employers are required to provide necessary occupational safety and health conditions, including: ventilation and lighting of workspaces; protection from emissions (gas, dust, etc.) hazards; protection from machine accidents and hazards; provision of gender-specific toilet facilities; provision of safe drinking water for workers; basic firefighting equipment and emergency exits; provision of appropriate personal protection equipment; fair compensation; access to periodic medical examinations; availability of first aid. The competent authority shall ensure the availability of the appropriate work environment and conditions for occupational safety and health. The Ministry of Labor is charged with advising employers in the field of occupational health and safety; organize and implement accident prevention training programs; exchange of technical information; identify and evaluate the means of accident prevention measures; etc.</p> <p>The Minister may establish sub-committees for occupational health and safety in the governorates and in the sectors and industries, which include the relevant bodies. The composition decision shall determine the functions of these committees, their terms of reference and the rules governing their work.</p> <p>Where employers fail to implement labor protection and labor safety regulations, they could receive a one week stop order from the Minister, until the reasons for the breach are explained. The Minister must refer the matter to the competent arbitration committee if the partial suspension is extended or if a total suspension is requested. If the risk is still not removed by the employer, the workers who have stopped working are entitled to full wages.</p>	<p>Each contractor will be required to have an OHS Officer and First Aider.</p> <p>Contractors required to keep logs of incidents and should be reported and investigated regularly.</p> <p>Contractors will do toolkit talks, and UNICEF will regularly conduct induction talks to workers and contractors.</p>
To promote the fair treatment, non-discrimination and equal opportunity of project workers.	Included in Yemen Labor Law Number/1995, Articles 5, 42, and 67.	Contractors recruitment policies will be reviewed to comply with national legislation when recruiting workers.

World Bank Requirements	Yemeni Requirements	Recommended Action
<p>To protect project workers, including vulnerable workers such as women, persons with disabilities, children (of working age, in accordance with this ESS) and migrant workers, contracted workers, community workers and primary supply workers, as appropriate.</p>	<p>Included in Yemen Labor Law Number (5/1995), Articles 5, 15, 42, 43, 44, 45, 46, 47a, 47b and 89; the Law for the Organization of Workers' Unions (35/2002); the Law for Social Insurance (26/1991).</p> <p>The Labor Law regulates the rights and wages of workers, their protection, occupational health and safety. In addition, the Social Insurance Law regulates retirement compensation.</p> <p>Gender</p> <p>Yemen ratified the Convention on the Elimination of all Forms of Discriminations Against Women (CEDAW) in 1984, and prepared a National Strategy for Women Development in 1997, which was updated in 2015. Implementation of CEDAW is delegated to relevant ministries and authorities (Decree 55/2009). Based on amendments proposed by the Women National Committee, 24 laws were amended to ensure building gender balance in accordance with the convention.</p> <p>The Labor Law (Law 5/1995) states that women are equal to man in all aspects without any discrimination, and that equality should be maintained between women and men workers in recruitment, promotion, wages, training, social insurance. It also regulates work time for pregnant women.</p>	<p>National legislation will be applied.</p> <p>However, the World Bank standards will be enforced where there are gaps.</p> <p>The higher standard between the national legislation and World Bank standards will always prevail in case of uncertainty in applicable requirements.</p>
<p>To prevent the use of all forms of forced labor and child labor.</p>	<p>Forced Labor</p> <p>Included in Yemen Labor Law Number 5/1995, Articles 55</p> <p>Child Labor</p> <p>Included in Yemen Labor Law Number 5 /1995, Article 49</p> <p>Yemen has also ratified ILO Convention Number 138 on Minimum Age for Admission to Employment (Law 7/2001). The Convention establishes a minimum age for admission to employment.</p> <p>Yemen has also ratified the ILO Convention 182 on the Worst Forms of Child Labor. It refers to child labor as work that is mentally, physically, socially or morally dangerous and harmful to children; and interferes with their schooling by depriving them of the opportunity to attend school, by obliging them to leave school prematurely; or by requiring them to attempt to combine school attendance with excessively long and heavy work.</p> <p>Drawing a line between "acceptable" forms of work by children and child labor can prove difficult, as it depends on the child's age, the types of work performed, the conditions under which it is performed.</p>	<p>Forced Labor</p> <p>Contractors will be required to comply with national legislation and as precautionary measure to conduct an induction and random inspection will be done on a regular basis to ensure compliance</p> <p>Child Labor</p> <p>Contractor will be prohibited to employ anyone under the age of 18 years.</p> <p>Monitoring will be done through the National ID system that every employee is required to produce on employment.</p> <p>If a contractor is found to have engaged underage children in the project: - a formal case will be reported, and the contract will be terminated.</p>

World Bank Requirements	Yemeni Requirements	Recommended Action
To support the principles of freedom of association and collective bargaining of project workers in a manner consistent with national law.	Included in Yemen Labor Law (5/1995) Articles 151 and 152, and the Law for the Organization of Workers' Unions (35/2002)	Contractors must inform workers of their right to organize according to the law.
To provide project workers with accessible means to raise workplace concerns.	Included in Yemen Labor Law (5/1995) Articles 129, 130, 132 and 136.	Contractors will be required to comply with national legislation in this regard. Contractors will be required to have a grievance procedure and inform workers of the same during induction. UNICEF and TPM will require contractors to log worker's grievances in monthly reports
ESS3. Resource Efficiency and Pollution Prevention and Management		
To promote the sustainable use of resources, including energy, water and raw materials.	Included in the EPL, the Water Law (33/2002), the Law for Mines and Quarries (24/2002), the Electricity Law (1/2009), and the Renewable Energy Strategy.	National requirements and ESF objectives are aligned and complement each other.
To avoid or minimize adverse impacts on human health and the environment by avoiding or minimizing pollution from project activities.	National law gives priority to the principle of environmental protection and pollution prevention, and not only to the mitigation or compensation of impacts. All new projects must carry out EIAs to prevent adverse impact and must obtain an environmental permit. No project or new structure that could harm, pollute or deteriorate the environment and natural resources is allowed and all new projects should use best available practices for clean production and apply environment protection/pollution prevention measures. Yemeni Law encourages related sectors and projects to provide institutional capacity and training for projects to enhance their capacity and knowledge in handling environmental issues. It also encourages research and development in all environmental aspects (EPL, Article 90).	UNICEF will apply both ESF and National requirements to the Project
To avoid or minimize project-related emissions of short and long-lived climate pollutants	Included in the EPL (26/1995), and is a Yemeni commitment under the Climate Change Convention.	Both World Bank ESF objectives and National requirements will apply to the Project
To avoid or minimize generation of hazardous and non-hazardous waste.	Included in the EPL (26/1995), the Pesticide Law (25/1999), the Public Cleaning Law (39/1999), and the Law Establishing Cleaning Funds (20/1999)	Both World Bank ESF objectives and National requirements will apply to the Project
To minimize and manage the risks and impacts associated with pesticide use	Included in the Pesticide Law (25/1999), and the EPL (26/1995)	Both World Bank ESF objectives and National requirements will apply to the Project

World Bank Requirements	Yemeni Requirements	Recommended Action
ESS4. Community Health and Safety		
To anticipate and avoid adverse impacts on the health and safety of project-affected communities during the project life cycle from both routine and nonroutine circumstances.	Yemeni Law does not specifically address community health and safety	UNICEF will follow ESF requirements
To promote quality and safety, and considerations relating to climate change, in the design and construction of infrastructure, including dams.	No equivalent in Yemeni law. However, IPCC National Contribution commitments and other various national laws (EPL Chapter 2 Article 5 and 7) address global environmental concerns, such as the ozone layer and climate change	UNICEF will follow ESF requirements
To avoid or minimize community exposure to project-related traffic and road safety risks, diseases and hazardous materials.	No equivalent in Yemeni law	UNICEF will follow ESF requirements
To have in place effective measures to address emergency events	Included in Yemen Labour Law Number 5 for 1995, Articles 119, 121	National requirements and ESF objectives are aligned, and no significant gaps are noted. Both World Bank ESF objectives and National requirements will apply to the Project.
To ensure that the safeguarding of personnel and property is carried out in a manner that avoids or minimizes risks to the project-affected communities.	No equivalent in Yemeni Law	UNICEF will follow ESF requirements
ESS5. Land Acquisition, Restrictions on Land Use and Involuntary Resettlement		
Not Relevant		
ESS6. Biodiversity Conservation and Sustainable Management of Living Natural Resources		
Not Relevant		
ESS7. Indigenous Peoples/Sub-Saharan African Historically Underserved Traditional Local Communities		
Not Relevant		

World Bank Requirements	Yemeni Requirements	Recommended Action
ESS8. Cultural Heritage		
Not Relevant		
ESS9. Financial Intermediaries		
Not Relevant		
ESS10. Stakeholder Engagement and Information Disclosure		
To establish a systematic approach to stakeholder engagement that will help Borrowers identify stakeholders and build and maintain a constructive relationship with them, in particular project-affected parties.	Article 35 of the Yemeni Constitution declares that Environment protection is the responsibility of the state and the community and that it is a duty for every citizen. Community and NGO participation are considered an essential part of consultation while planning proposed projects, and is a continuous process before, during and after project implementation (EPA EIA Guideline). Furthermore, NGOs and individuals can directly sue any person or entity who causes harm to the environment and natural resources or participate in its deterioration and pollution (EPL Article 4, para 4 and Article 82).	UNICEF will follow ESF requirements
To assess the level of stakeholder interest and support for the project and to enable stakeholders' views to be taken into account in project design and environmental and social performance.	Included in the Local Administration Law	UNICEF will follow ESF requirements
To promote and provide means for effective and inclusive engagement with project-affected parties throughout the project life cycle on issues that could potentially affect them.	Included in the Local Administration Law	UNICEF will follow ESF requirements
To ensure that appropriate project information on environmental and social risks and impacts is disclosed to stakeholders in a timely, understandable, accessible and appropriate manner and format.	ESIAs should include a reference list and a non-technical summary for public use and disclosure in a form and language understandable to general public (EPA EIA guideline).	National requirements and ESF objectives are aligned, and no significant gaps are noted. Both World Bank ESF objectives and National requirements will apply to the Project.

World Bank Requirements	Yemeni Requirements	Recommended Action
<p>To provide project-affected parties with accessible and inclusive means to raise issues and grievances, and allow Borrowers to respond to and manage such grievances</p>	<p>Article 51 of the Constitution allows for recourse to the courts. The Public Eminent Domain Law and the Local Administration Law provide for the right of grievance before the Estimation Committee/courts.</p> <p>To address grievances, PAPs can first seek satisfaction through local customary practices for resolving conflict. They can then initiate legal proceedings in accordance with provincial national law.</p>	<p>National requirements and ESF objectives are aligned, and no significant gaps are noted.</p> <p>Both World Bank ESF objectives and National requirements will apply to the Project.</p>

Chapter 5.

Environmental and Social Baseline Data

5.1 Health and Nutrition

111. Yemen's health sector is suffering from the cumulative impact of more than half a decade of conflict, economic recession, and institutional collapse. Currently, only about half of health facilities are functioning, and the system is riddled with a severe shortage of human resources and supplies. Health indicators are among the worst globally, with malnutrition impacting a large portion of the population, and maternal and child health being disproportionately affected. Communicable diseases including cholera, diphtheria, dengue and measles have been rampant due to poor water and sanitation conditions and proliferated causing further morbidity and mortality. Even more worryingly, the weak health system has also left the country vulnerable to pandemics such as COVID-19, with the virus spreading rapidly and exacerbating the humanitarian situation.

115. The conflict has also resulted in significant outbreaks of communicable diseases such as cholera, diphtheria, dengue and measles placing those displaced at risk.²⁰ Over one third of children are malnourished and vaccination rates remain low. Further, outbreaks of communicable diseases, including diphtheria and cholera, are affecting many Yemenis, amplified by a conflict-linked breakdown in the country's water and sanitation systems. Between Jan-Sep 2020, the cumulative total number of suspected cholera cases was 172,769 in a widespread outbreak.²¹ Overall, the cumulative number of suspected cholera cases in Yemen from October 2016-December 2020 was a staggering 2,510,806 including 3981 related deaths.²² A severe flooding in early 2020 impacting southern communities further exacerbated the prevalence of communicable diseases. Oral cholera vaccination campaigns have distributed over 4.3 million doses. There have also been significant measles and diphtheria outbreaks, due to low immunization rates.

116. To close some of the service delivery gaps and to bridge the humanitarian-development nexus, a Minimum Service Package (MSP) was developed and piloted by the MOPHP and scaled up under the YEHNP to over 320 districts. The MSP was scaled-up as part of the YEHNP, including most critical interventions at each level of care pertaining to 8 domains: 1) general services and trauma care; 2) child health; 3) nutrition; 4) communicable diseases; 5) reproductive, maternal, and newborn health; 6) non-communicable diseases; 7) mental health; and 8) Water, Sanitation and Hygiene (WASH) and Environmental Health in health facilities, from the community and mobile level up to the district and inter-district hospitals. To improve health service delivery in Yemen, overall framework and implementation plan reflecting facility-based outreach and

²⁰ Displaced people living in crowded informal sites or dense peri-urban neighborhoods are particularly at risk for infectious disease outbreaks and other health challenges. Currently, over 3 million people remain displaced across Yemen, including more than 700,000 people who live in more than 1,700 informal sites scattered across the country with little or no services.

²¹ Children under five represented 24.2% of the total suspected cases during 2020, with the outbreak affecting 22 of the 23 governorates and 296 of the 333 districts of Yemen. Source: WHO- EMRO, Outbreak update – Cholera in Yemen, 16 August 2020.

²² WHO-EMRO, Cholera Situation in Yemen- December 2020

community-based service delivery models rolled out in close collaboration with public health institutions. This approach is also naturally aligned with the cultural context of Yemen where community engagement is central to gaining community confidence and establishing trust so that the government is better positioned to prioritize and respond to the most pressing community needs, particularly of those vulnerable and the elderly, and people in hard-to-reach areas rendered even more inaccessible due to the conflict. Experience through the YEHNP has already demonstrated the pivotal role that health staff at the community level can play in the delivery of basic package of household services benefitting households through access to basic health, nutrition, and even psychosocial services. Capacity development of health workers, community health and nutrition volunteers (CHNVs), community health workers (CHWs) and community health monitors at the central, governorate, and district levels has also strengthened their capacity over time and can play an important role in sustaining the provision of services such as health promotion and awareness, including through active community sensitization and promotion of healthy behaviors. This project will also help expand the coverage of PSS for improved access at the community level service providers and PHCFs and integrate the mental health and PSS services at the hospital level where severe cases are referred for appropriate management. Vulnerable children such as IDPs and marginalized groups will be prioritized in the PSS. UNICEF and WHO will work together to establish and strengthen referral linkages between community and PHC service providers and secondary health care service providers level for more specialized mental health services.

117. The proposed AF will maintain essential health and nutrition services in HFs supported by EHCP and possibly expand to additional facilities funds permitting. If additional funds are mobilised over and above the current funding estimates of the AF, there EHCP -AF will expand access to health and nutrition services by increasing the number of functional health care facilities in additional catchment areas, with the same activities supported by the parent project. This will be done by re-opening health care facilities that have closed and/or make additional health and nutrition services available in locations where they are not currently being provided (e.g. maternal and child health services at a primary level and trauma/emergency care at a secondary level).

118. The environmental and social risks and impacts are expected to be generated from activities to be financed under Component 1: 'Improving Access to Health, Nutrition and Public Health Services' which will finance, inter alia, medical and non-medical supplies, essential drugs and vaccines. The main environmental risks associated with such interventions are: (i) MWM and community health and safety issues related to the handling, transportation, and disposal of vaccines, labs materials and tests, medical consumables and associated healthcare waste; and (ii) the occupational health and safety (OHS) issues related to vaccination, lab testing, handling of medical supplies and the possibility that they are not safely used by medical crews. This project will help expand the coverage of PSS for improved access at the community level service providers and PHCFs and integrate the mental health and PSS services at the hospital level where severe cases are referred for appropriate management. Vulnerable children such as IDPs and marginalized groups will be prioritized in the PSS. UNICEF and WHO will work together to establish and strengthen referral linkages between community and PHC service providers and secondary health care service providers level for more specialized mental health services.

119. UNICEF Health and Nutrition sector has consistently provided services since 2016, it succeeded on reaching HFs in rural remote areas and succeeded to restore them, and enable them to provide the required health care services to the local communities. So, during the Health Care

Facilities operation, they produce quantities of medical waste, this medical waste volume varies by the size and the activities of these HFs requiring adequate and safe management at sources. TPMA reports are the main sources of information on the medical waste management assessment in the HFs. During round 8 visit the TPMA reports came with the following:

Segregation:

- According to the reports the segregation of medical waste is performed differently at different HFs and locations. Al Hodeida HUB targeted HFs (Al Hodeida, Hajah, Al Mahweet and Raimah), shows that all the visited HFs are conducting complete (**100%**) medical waste segregation except for 6 HF located in Al Hodeida (**98.9%**) of the total visited HFs. The overall rate of medical waste segregation is 99.6%
- Aden and Sa'ada HUBs (Aden, Lahij, Abyan, Al Da'ala, Shabwah, Al Mukalla, Saiyoun, Al Maharah, Socotra, Sa'ada and Al Jawf) reports results showed that the visited HF in Al Maharah, Socotra and Sa'ada are fully segregating the medical waste (**100%**) with slight reduction not exceeds 1.2% in Sa'ada targeted HFs. As for the HFs in the other areas, the segregating rate fluctuates in the ranges from **82.4%** at Al Jawf to **93.4%** at Al Da'ala visited HFs. The overall rate of segregation record is **91%** of the total visited HFs in the mentioned above areas.
- Sana'a and Ibb HUBs (Sana'a, Amanat Al Asimah, Al Baida, Ammran, Dhamar, Marib, Ibb, and Taiz) the report revealed that mostly all the visited HFs are segregating medical waste with a rate above **91%**. The highset rate (**100%**) is recorded in Amanat Al Asimah, Ammran and Marib. The lowest rate (**91%**) is noted in Taiz. The overall all rate reach only 95% for the whole visited HFs.

Collection/storage (use of appropriate tools and equipment)

- **Containers:** The reports results, shows that the medical waste collection process in all the HFs is not conducted properly and not enough to match the segregation process. Concern is about the containers, the safety tools and the PPEs. So, their lack also will results to improper waste management at all in the HFs. Mostly all the HFs are using the safety box for the sharps, the highest 99% recorded HFs at the areas under the Al Hodeida HUB. However, the lowest was 82.4% HFs using the safety boxes at the areas under Aden HUB. It is important to note, that about 46% of the HFs in the areas supervised by Aden HUB, are using plastic bucket for collecting sharp medical waste. Various type of containers is used for the non-sharp medical waste, these includes plastic bucket and plastic bags. Overall, the data revealed that 49% of the HFs are using the safety boxes for collecting the sharps, 5.3% are using combination of safety boxes and plastic bags, and 1.7% using plastic bags.
The reports showed that almost more than 70% of the HFs are not using coded containers. These are practicing in all the targeted HFs at all the areas.
- **PPEs:** The reports also showed lack of use of the appropriate PPEs during collecting the medical waste, mostly 83% of HFs medical waste collectors are using gloves, and 43% using safety tools and about 26% using over all clothing. So as many which didn't use the safety tools and PPEs reason was either the equipment not available (out of the stock), available not used.

Treatment and Disposal

- **Incinerators:** The reports also revealed that only **929** HFs of the whole targeted HFs have

incinerators of them 35 were not functional. The majority of the available and functional incinerators (894) are almost used for sharp and non-sharp waste, only 74 of functional incinerators are used for sharp waste and the rest 23 for non-sharp waste. No information about the type and the size of the waste produced in each facility (sharp, infectious, domestic and others). Whether the HFs personnel separate the domestic from the medical waste or not? The TPM results also revealed further details about the availability of incinerator per governorate level, with the highest number of functional incinerators being in Dhamar (96), Sana'a (96) and Hadramout (94), and the lowest number were noticed in Socotra (5), Aden, Al Maharah and Marib (11). The Health Centers supported with 42% (396) only of the whole 703 incinerators, and the rest are located in the Health Units. It is important to mention that the number of incinerators in the HFs has been increased with compression with the TPMA round six results. There are about 226 (24% of the total HFs visited) new incinerators has been installed in different HFs in the whole country.

- **Burning and Burying:** There are different practices used in the HFs on the final disposal (sharp and non-sharp) of the medical waste, including the burning and burying inside and/or outside the HFs walls, dumping to open area near by the HFs and dumping to allocated garbage dumping site. However, no, indication on the appropriate practices and the safety of the medical waste final disposal.
According to the reports it is obvious the final disposal of the medical waste is an issue.
- **Waste management handlers/operators:** It was noticed that majority of the visited HFs have no personnel specified with delineated responsibilities in the waste management process. Although some of the HFs have people to collect the medical waste but those almost the health management which have another responsibility, however, the others like the cleaners or the guards and all of them are not fixed employees.

5.2 Climate

120. Yemen is a largely arid sub-tropical country with rainfall characterized by seasonally intense and short-lived heavy storms that often lead to flash floods with implications for soil erosion and degradation of agricultural terraces. Heavy rainfall is frequently followed by long dry periods. Although high year-to-year variability makes it difficult to detect a trend in precipitation, summer precipitation totals appear to have declined across the Yemen Highlands since the 1950s, although local data for Yemen are lacking, and there are inconsistencies between data sets.

121. Climate-related hazards in Yemen include extreme temperatures, floods, landslides, sea level rise, sea water intrusion and drought. Most of these risks exacerbate the country's water scarcity, pose serious threats to development and food security, and their intensity and frequency are likely to increase due to climate change.

5.3 Climate change challenges^{23,24,25}

122. Climate change poses a significant threat to Yemen's development across many sectors. Challenges include: (a) Short-burst, intense rainfall which often leads to flash floods, which can result in significant damage and high losses in urban areas due to their concentrated physical assets and population. Rainfall intensity, and therefore flooding, is projected to increase with climate change; (b) Greater rainfall variability could result in prolonged drought periods. Yemen's water crisis ranks among the worst in the world, and water stress is observed to be increasing, with groundwater reserves likely to be mostly depleted in two to three decades regardless of climate change; (c) A vast majority of the urban poor is vulnerable to rockslide and landslide risk as they typically live on marginal and environmentally sensitive land; and (d) A rise in sea levels would result in increased coastal flooding and possible damage to infrastructure and groundwater quality and supply. In response to these threats, improved urban infrastructure, water and waste management are key priorities. The project will help mitigate the potential impacts of these threats in relevant activities.

²³ World Bank Group. Climate Change Country Brief: Yemen. Retrieved from

<http://globalpractices.worldbank.org/climate/Pages/CountryBriefs/Yemen.aspx>

²⁴ World Bank Group. Climate Change Knowledge Portal: Yemen Dashboard. Retrieved from

http://sdwebx.worldbank.org/climateportal/index.cfm?page=country_historical_climate&ThisRegion=Asia&ThisCCode=YEM

²⁵ World Bank Group. (2011, April). Climate Risk and Adaptation Country Profile: Yemen.

Chapter 6.

Potential Environmental and Social Risks, Impacts and Mitigation

123. This chapter identifies the potential Environmental, Social (including labor), Health, and Safety (ESHS) risks and impacts associated with Project activities, and the matching mitigation measures. The project's Component 1 activities will have strong positive environmental, social, and health impacts by improving access to Health and Nutrition services and enhancing the capacity of local institutions, precisely the Health Care facilities in rural areas. Health and environmental impacts are generally minimal and expected to cause only minor negative environmental and social impact that can be readily addressed during the project implementation.

124. Component 1 of the Project will only finance activities that contribute in HFs institution strengthening the systematic operation of the Health Care facility provide the required health and nutrition services to the communities. These include provision of medicines, items for nutrition, operational cost and payments to health workers to implement integrated health and outreach to the community's outreach, and payments to the main workers in targeted health facilities. The project component 1, activities will include health promotions and awareness to the communities in different areas. This awareness and promotion are on general health protection and nutrition. In addition, the Component1 activities of the project could involve minor civil work, of small size type of incinerators could be constructed/installed if required inside selected Health Care Facilities for final safe waste treatment and disposal.

125. Component 1 will not finance activities that involve permanent or temporary land acquisition causing physical or economic displacement. Moreover, local contractors are expected to conduct all works using workers that already reside in the cities where the works are conducted. Subprojects should trigger minimal labor influx, and contractors are not expected to build or operate residential labor camps to host such workers.

126. The selection of interventions is based on the priority needs identified by UNICEF in consultation with the MoPHP offices at central and local level, relevant local authorities, and local communities. The Project will continue to support the operation and restore functionality of HFs targeted by the EHNP to ensure provision of essential services to the communities.

127. Risk and impact to health care workers, community and environment associated with the medical waste generation during health care facility operation. These impacts will be addressed during Health Care facilities operation through appropriate implementation of the MWMP prepared for the YECHP. Further, the potential impacts of the mitigation measures – i.e. risks and mitigation measures associated with the installation and running of incinerators – will also be addressed in the MWMP.

128. Project interventions, additionally, may carry social risks related to exclusion from project benefits, risks of sexual exploitation and abuse and/or sexual harrasment (SEA/SH). Possible factors of:

- exclusion could be due to gender, vulnerability, social and economic status

- Discrimination against vulnerable groups could be experienced during services provision at the health care facilities and other project services
- Female nurses could be subject to or could face SEA/sexual harassment issues
- conflict between IDPs and hosting communities could result in discrimination in employment and access to services; child employment could be practiced in the project activities.

129. COVID-19 and other communicable disease are other potential risk associated with the community health and safety.

130. Nonetheless, the environmental and social risk rating of the Project is substantial because the design of its components, their scale, magnitude and the nature of the activities of the project. Component 1 activities might cause risk and impacts on workers (including healthcare workers), communities, as well as on the environment, if sufficient mitigation measures do not accompany their implementation.

6.1 Selection, design and siting risks

131. A first tier of risks concerns the selection, and siting of activities. These risks include inherent security risks, the risk that the targeted HFs might carry social or environmental issues, the risk that might disadvantage certain groups, and the risk that the services do equally provided, particularly to vulnerable groups or persons. These risks would be addressed by avoiding insecure areas, identifying issues during the screening, assessment, and HFs operation process, inclusively, ensuring equal access to project benefits.

Contractor Related Risks and Impacts

132. The second tier of risks is directly associated with activities of the contractors who could involve in civil work activities (such as installation of small incinerators) if required in the Health Care Facilities, to enhance the appropriate medical waste management process inside the health care facilities. Although the risk profile might differ between specific activities, the overall risk profiles of civil work/construction activities are analogous. These risks and the relevant ESSs are detailed in the following table (table 2).

Table 3. ESHS risks and impacts associated with the activities of Contractors

Construction Site Management	
Vegetation	
<ul style="list-style-type: none"> • Construction activities can unnecessarily destroy, scar, or deface the natural surroundings in the vicinity of the construction site 	ESS6
Damage to Existing Installations	
<ul style="list-style-type: none"> • Existing installations, such as buildings, structures, works, pipes, cables, sewers, or other services may be damaged 	ESS4
<ul style="list-style-type: none"> • Owners, tenants or occupiers of properties may be disturbed or inconvenienced by the construction works 	ESS4
Waste from Construction Activities	
<ul style="list-style-type: none"> • Construction debris and spoils might contaminate soils and groundwater 	ESS3
<ul style="list-style-type: none"> • Transport of waste might litter roads 	ESS3
<ul style="list-style-type: none"> • Solid waste and debris might be disposed improperly 	ESS3

Air Pollution	
<ul style="list-style-type: none"> • Air pollution due to emissions from dust, construction vehicles and equipment • Dust generation during excavation, backfilling, compaction, or transportation of construction materials can affect the wellbeing of neighboring communities 	<p>ESS3</p> <p>ESS4</p>
Hazardous and Toxic Waste	
<ul style="list-style-type: none"> • The production of liquid wastes can lead to soil or groundwater pollution • Hazardous, or potentially hazardous, wastes from construction debris or the use of chemicals can spill into the environment 	<p>ESS3</p> <p>ESS3</p>
Health and Safety	
Severe Weather and Facility Shutdown	
<ul style="list-style-type: none"> • Workers can be injured or become ill if required to work in severe weather 	ESS2
Lavatories and Showers	
<ul style="list-style-type: none"> • Inadequate lavatories and showers can lead to worker illness or disease 	ESS2
Potable Water Supply	
<ul style="list-style-type: none"> • Inadequate supply of potable water on site can lead to worker illness and disease 	ESS2
Clean Eating Area	
<ul style="list-style-type: none"> • The absence of a clean eating area can lead to worker illness and disease 	ESS2
Personal Protective Equipment (PPE)	
<ul style="list-style-type: none"> • The lack of appropriate PPE, and of training in its use, can lead to injuries, and incidents 	ESS2
Noise	
<ul style="list-style-type: none"> • High noise levels can permanently affect the hearing of workers • Increased levels of noise and vibration due to heavy vehicles and construction equipment, which are a nuisance to the community around the site 	ESS2
Asbestos waste	
<ul style="list-style-type: none"> • Inadequate handling/disposal of old asbestos waste will cause harmful chronic disease, to workers and the people; • Use of paints contains lead could likely cause severe health problems to workers 	ESS2, ESS4, ESS3
Communicable Diseases	
<ul style="list-style-type: none"> • Construction site can facilitate the spread of communicable diseases 	ESS2, ESS4
COVID-19	
<ul style="list-style-type: none"> • Construction sites can increase the spread of COVID-19 	ESS2, ESS4
Road safety and Traffic Safety	
<ul style="list-style-type: none"> • Project related traffic can cause accidents 	ESS2, ESS4
Stakeholder Engagement	
<ul style="list-style-type: none"> • The lack of engagement with neighboring communities affected by Project activities might cause tensions, and result in complaints 	ESS10
Labour Force Management	
Labour Influx	
<ul style="list-style-type: none"> • Labor influx to work on Project activities can have major negative impacts on local communities 	ESS2, ESS4
Labor Conditions	

<ul style="list-style-type: none"> Contractors might not provide workers with the terms and conditions they are entitled to under Yemeni Labor Legislation, most particularly Decree 5/1995, and applicable International Labour Organization conventions on workplace conditions. 	ESS2
Insurance	
<ul style="list-style-type: none"> Contractors might not compensate workers and their families for workplace injuries or deaths 	ESS2
Grievance Mechanism for Workers	
<ul style="list-style-type: none"> Contractors might not act on worker grievances 	ESS2
Protection from Sexual Exploitation and Abuse	
<ul style="list-style-type: none"> Workers might sexually abuse of exploit women or children 	ESS2, ESS4
Protection from Child Labor	
<ul style="list-style-type: none"> Contractors might unknowingly employ workers under the age of 18. 	ESS2
Code of Conduct	
<ul style="list-style-type: none"> The behavior of workers can be prejudicial to neighboring communities, and to fellow workers 	ESS2

133. These construction-related risks will be mitigated by requiring that contractors meet a detailed set of Environmental, Social, Health, and Safety (ESHS) requirements²⁶ that match the risks and impacts listed in the above table, as detailed in Annex 3. The Requirements are largely based on the General EHS Guidelines, and other World Bank Guidelines. UNICEF will include the Project’s ESHS requirements in all bidding documents and contracts for works.

6.2 Sector Specific Risks and Impacts

134. The third tier of risks are sector specific and not related to contractor led activities. Some are associated with the technical design (ability to carry out/provide the services to the community) of the facilities, while some are potential risk and impacts associated with the operation of the facilities.

135. UNICEF will ensure that the targeted health care facilities are operated in accordance with the ESF-ESS and consistent with the WBG-EHS Guideline for health care facility operation and WHO related guidelines. The following table shows the main non-contractor related risks and impacts that might need to address, as well as matching mitigation measures. Sector specific risks and impacts are additional to the generic contractor related risks and impacts described in Table 4.

Table 4. Potential impacts and matching mitigation measures

Potential Impact	Mitigation Measure
Dust generation during construction equipment and materials loading and unloading, and working material mixing	<ul style="list-style-type: none"> Use well-maintained equipment Spray water for dust control

²⁶ Some of the ESHS requirements might not become relevant during Project implementation, for example the requirements for the management of worker camps or labor influx, etc.....

Potential Impact	Mitigation Measure
Increased levels of noise and vibration due to vehicles movement and construction machineries	<ul style="list-style-type: none"> • Use quiet/well-maintained equipment • Use operational noise muffler; • Limit noisy activities to normal daylight hours • Limit vehicle speed at critical locations
Air pollution due to emissions from construction vehicles and machinery	<ul style="list-style-type: none"> • Properly maintain construction machinery to minimize exhaust emissions of CO, suspended particulates and fumes
Work-related accidents and injuries are likely to increase during civil work	<ul style="list-style-type: none"> • Construction site must have protection measures (barriers, fence) • Removable barriers erected in high risk areas • Warning signs, and authorized persons are only allowed to access working area • Provide proper support for trench, to protect against collapse • Provide workers with personal protective equipment • Allocate an alternative route far from the site for pedestrians • Provide light and fence and warning signs
Disruption of proper work in the HF due to civil work implementation	<ul style="list-style-type: none"> • Isolate the work site from workers, patients and visitors • Limit the work in one area in series • Spray the site with water to dampen dust • Work during the day when noise is an issue • Get rid of oils and grease • Take care and caution while disposing liquid waste • Apply OHS measures • Use PPE as appropriate
Poor management of liquid wastes, leading to soil or groundwater pollution	<ul style="list-style-type: none"> • Remove and recycle liquid waste
Poor disposal of construction debris and waste materials	<ul style="list-style-type: none"> • Properly dispose of solid waste at designated permitted sites
Health problem due to stagnant water pools formation (vector borne disease spread)	<ul style="list-style-type: none"> • Ensure proper utilization of water • Take necessary actions for fighting vectors, such as spraying with insecticides • Eliminate and reclaiming stagnant pools.
Ground water pollution from pit latrines	<ul style="list-style-type: none"> • Ground water quality testing at source development and regular intervals
Poor onsite sanitation or water supply, leading to illness and disease	<ul style="list-style-type: none"> • Provide employees with access to toilets and potable drinking water

Potential Impact	Mitigation Measure
Issue related to delivery and storage of goods, (medicines)	<p>The UNICEF and the suppliers' companies/contractors will follow WHO guidelines and international procedures on transport and storage of medicines, pharmacy and other material. (well-equipped fit with the environment for the goods requirement storage, and transport facilities).</p> <p>The UNICEF will conduct regular inspection of goods and warehouse and will keep log of inventories for monitoring purposes.</p>
Issue of transparent and equitable distribution of supplied goods	The UNICEF will communicate transparently on eligible locations and facilities and will engage with communities to ensure fair access to project benefits, as indicated in the SEP.
Health and safety of the health workers	<p>UNICEF will ensure implementation the OHS and related grievance as detailed in the LMP.</p> <p>UNICEF will Provide the proper PPEs to all health workers, as appropriate for nature of work, provide training on health and safety. UNICEF will follow-up regularly on proper use of the PPEs</p> <p>MoPHP and Health offices at Governorate and district levels ensures that health workers are using the proper PPE for the work</p>
Medical waste generation	<p>UNICEF will ensure that the project MWMP will be properly implemented. UNICEF will provide appropriate equipment, material and training for proper medical waste management in the Health care facilities,</p> <p>MoPHP and Health offices at Governorate and district levels ensure proper systematic medical waste management in the health care facilities.</p> <p>Further, the MWMP outlines mitigation measures for the newly introduced risks associated with improved medical waste management practices, i.e. risks arising from installation and running of incinerators.</p>
Incompetent hygiene practices and behavior	<p>UNICEF and MOPHP to ensure provision of proper and safe equipment and materials to be used by health workers including waste management staff and site workers,</p> <p>Provide awareness to employees, patients and the community on the importance of personal hygiene and cleanliness of the surrounding environment,</p> <p>Train cleaning crew and providing (appropriate PPEs) tools for safety and hygiene</p>

Potential Impact	Mitigation Measure
Health risk due to pandemic infection	UNICEF to ensure that targeted Health Care Facilities apply safety standards to avoid infection, provide the necessary medicines, continuously clean using proper detergents, provide the necessary equipment, chemicals and specialized medical staff, provide potable drinking chlorinated water, properly dispose of and manage medical waste, provide proper PPE to health workers and to patients, ensure safe disposal of used PPEs, and use related guidelines and procedures mainly those prepared by WHO, and the WBG EHS and apply the Project MWMP.
Exclusion of vulnerable groups	UNICEF will implement the project-SEP and ensure regular updates of the SEP (to ensure that vulnerable groups have equal access to the project benefits). The project will ensure all citizens, including with disabilities, will have equal opportunity in getting the project benefits. Strengthened communication with communities, at all levels, will be implemented during the implementation stages as well as widely disseminating the GM channels so any affected community member can communicate his/her suggestions, concerns and grievances. In addition, UNICEF will design interventions, operational modalities, and funding flows to avoid elite capture of resources and ensure that as much of the funds as possible reach the intended beneficiaries, including vulnerable groups. For example, direct payments to health workers and provision of operational needs directly to health facilities, rather than flowing through various levels of administration.
Risk associated with social issues GBV and SEA/SH	UNICEF will implement the project GBV and SEA/SH preventive action plan, as well as the relevant UN Policies regarding the gender-based violence and sexual exploitation and abuse.

136. UNICEF has prepared a set of management plans (environmental and social instrument/measures), these include the MWMP, LMP, SEP, SMP and GBV and SEA/SH action plan. These ES instruments are prepared as standalone documents but they also form part of this ESMF. These plans are prepared together with this ESMF to address the environmental and social risks associated with the implementation of component1 activities. The MWMP is the key environmental and social safeguard instrument for Component1 of the project. It contained specific measures to eliminate or and mitigate environmental and social risks associate with the medical waste generation during the operation of the health care facilities.

137. Similarly, the other plans are mainly to mitigate the social risks including the GBV and SEA/SH, the risk related to labor, labor force including the forced child labor, and involving the affected by project groups in the project benefits from the earlier stages of the project design.

138. Site/activity specific ESMP or ES checklists that might be prepared if required to address the

risk that could be occur during the construction of the small incinerators in selected facilities.

139. All these ES instruments together with the measures, EHS and guidance spelled in this document (ESMF) are enough to manage the associated environmental and social risk associated with Component 1 of the YECHPP.

140. UNICEF will follow-up on regular basis the implementation of the ES mitigation measures contained in the ES instrument for component 1 activities. UNICEF will conduct regular review for this ESMF and the all Environmental and Social Safeguard instrument prepared for relevant components of the project, and if required UNICEF will update in compliance with the ES standards, in a manner acceptable by the WB.

Chapter 7.

Procedures to Address Environmental and Social Issues

141. This section sets out in detail the procedures to be followed in addressing the environmental and social risks and impacts of subprojects

7.1 Exclusion List

142. The first step in addressing a subproject's environmental and social risks and impacts is for the ESS Specialist to exclude as **ineligible for UNICEF support** all subprojects that include any of the following attributes:

- Production or activities involving harmful or exploitative forms of forced labor/harmful child labor.
- Production or trade in any product or activity deemed illegal under host country laws or regulations or international conventions and agreements.
- Production or trade in weapons and munitions.
- Gambling, casinos and equivalent enterprises.
- Trade in wildlife or wildlife products regulated under CITES.
- Production or trade in radioactive materials.
- Production or trade in or use of un-bonded asbestos fibers.
- Production or trade in wood or other forestry products from unmanaged forests;
- Production or trade in products containing PCBs.
- Production, trade, storage, or transport of significant volumes of hazardous chemicals, or commercial scale usage of hazardous chemicals.
- Production or trade in pharmaceuticals subject to international phase outs or bans.
- Production or trade in pesticides / herbicides subject to international phase outs or bans
- Production or trade in ozone depleting substances subject to international phase out.
- Production or activities that impinge on the lands owned, or claimed under adjudication, by indigenous peoples, without full documented consent of such people.
- Power plants,
- Large-scale transport infrastructure such as highways, expressways, urban metro-systems, railways, and ports,
- Investments in extractive industries; commercial logging,
- Dams, or projects involving allocation or conveyance of water, including inter-basin water transfers or activities resulting in significant changes to water quality or availability,
- Activities that would significantly convert natural habitats or significantly alter potentially important biodiversity and/or cultural resource areas, and
- Activities that would require the relocation of residential households and/or significant involuntary land acquisition,
- Activities in disputed areas.

7.2 Screening

143. Within one week of receiving a draft subprojects proposal from UNICEF’ technical staff, the ESS Specialist will prepare, sign, and pass on to the Project Manager for review, a subproject specific screening form (Template in Annex 1), indicating:

- The proposed environmental and social risk rating (High, Substantial, Moderate or Low), with justifications,
- The proposed environmental and social risk management instruments to be prepared.

7.3 Environmental and Social Risk Management Instruments

Subprojects requiring an ESMP

144. Based on the screening the ESS Specialist will determine if the subprojects require further ES instrument, proportionate ESMPs for subprojects will be prepared by the UNICEF ESS Specialists, for subprojects directly implemented by UNICEF. A subproject’s ESMPs must be prior reviewed and cleared by the World Bank before a subproject can be implemented.

145. The proportionate ESMPs will be prepared according to the following table of content:

Summary Sheet

Subproject Name	
Subproject Location	
Implementing Partner	
Risk level (low, moderate, substantial or high)	
Date of the field visit	
Consultation Summary	
Observations/Comments	
Signature of responsible ESS Specialist	
Date	

Subproject Description

- Nature and scope of activities, particularly construction and rehabilitation works. Include all the technical details that are relevant to understand the environmental and social risks and impacts of the subproject
- Location, including a map. If the subproject includes multiple locations, then the particulars of each location must be provided.

Environmental and Social Baseline

- Provide all the necessary information required to understand the environmental and social risks and impacts of the subproject.

- Provide enough pictures to illustrate environmental and social issues, with appropriate legends.

Consultations

- Document all consultations with stakeholders likely to be affected by the subproject (date, location, list of participants, topics discussed, and conclusions). The consultations must include the persons that might be negatively affected, and not only beneficiaries or interested and concerned parties.
- Join photos of the consultations
- Detail the grievance mechanism procedures specific to the subproject

Mitigation Instruments

- Refer to the Environment, Social (including labor), Health, and Safety requirements (Annex 3) and attach them to the ESMP
- Highlight the ESHS requirements to which subproject contractors must pay the greatest attention. If necessary, the ESMP will “proportionalize” the ESHS requirements to the subproject’s nature, scope, the specific environmental and social risks, and the number of workers involved. For example, UNICEF might need to specify for small contracts the type of PPE, or the contents of First Aid Boxes.
- If necessary, indicate additional requirements that will be applicable to the subproject contractor.
- Indicate the mitigation measures that UNICEF will be implementing to address the environmental and social risks and impacts not associated with contractors (see section 6.2 of this ESMF), including legacy issues, and technical assistance.
- Provide a subproject specific monitoring plan that indicates what parameters will be monitored, how they will be monitored, who will monitor them, and how frequently they will be monitored.
- Detail any training provided by UNICEF to the contractors and their workers.

Budget

- Provide a budget for the mitigation measures to be implemented by UNICEF and its implementing partners. The cost to contractors of meeting the ESHS requirements will be included in their respective contracts.

7.4 Incorporating ESHS requirements in contracts

146. UNICEF or its Implementing Partner will ensure that:

- Requests for Proposals reference the ESHS requirements in Annex 3
- Bidders submit a preliminary environmental and social plan as part of their bids, describing the principles and methodology they will use to address environmental, social, health and safety issues under the contract, and will include all costs associated with managing environmental and social issues in their bids.
- The quality of the preliminary environmental and social plan, the bidders' past environmental and social performance, and their ability to manage environmental and social issues will be considered in the selection of contractors.
- The selected contractors will prepare a Contractor Environmental and Social Management Plan (C-ESMP), detailing how the ESHS requirements will be implemented, including personnel

- It approves the C-ESMP before the start of activities
- C-ESMPs will serve as the benchmark for monitoring and evaluating the contractor's environmental and social performance

7.5 Consultation and Disclosure Requirements

147. The proposed AF will support similar activities currently being implemented by the parent EHCP project. No change in activity type and nature, is envisaged as such all earlier consultations conducted for the EHCP project remain relevant for the AF. However, UNICEF conducted additional consultations with public authorities and affected beneficiaries to ensure that AF responds to the identified needs. A consultation meeting on the AF activities and their associated potential impact was held with the Ministry of Public Health and Population (MoPHP) personnel in Sana'a on 21-22 March 2022. The consultation was conducted during the workshop held to discuss the Minimum Service Package (MSP) priorities and future planning for its implementation. Before this meeting a discussion had been held on the 15th of March, on the proper and safe management of medical waste inside the HFs. The project's contribution towards the mitigation of the risk and impact of the medical waste generated during services provision and during the operation of the targeted primary health care facilities, the proposed training plan for Healthcare Workers involved in the medical waste management inside the HFs, the provisions and use of the PPEs and the WTU installation/constructing for proper waste disposal as also discussed. Details of the discussion have been included in the Stakeholders Engagement Plan (SEP). Additional consultations will be conducted during the course of the project implementation including at selected sites for incinerators installation during preparation of site specific Environmental and Social Management Plan.

148. For each subproject, the ES specialists will engage with affected communities, including host communities, through the process of stakeholder engagement described in the Project Stakeholder Engagement Plan (SEP). UNICEF will initiate consultations with individuals and communities that might be affected by the subproject, directedly from the start of the project. The purpose of the consultations will be to: (i) inform them about the activities to be undertaken, possible impacts, and (ii) document and address their concerns. Consultation summaries should be included in safeguard instruments, including who was consulted, where and when, what concerns were expressed, and how these concerns were addressed. The records of consultations are kept in the Project Office. In addition, subprojects should regularly consult with project affected persons and communities throughout subproject implementation, as indicated in the Project's Stakeholder Engagement Plan. Furthermore, all stakeholders participating to the consultation will be informed on the GM and where/how complaints can be made.

149. The consultation process will take in account the sociocultural context of Yemen. Consultations can take the form of focus groups, discussions with elders/community leaders, or interviews. Separate consultations will be done for women in order to ensure that any special concerns and needs are taken into account during the preparation of the safeguard instruments. In light of the fragility, conflict, and violence (FCV) context, the ESS Specialist of the concerned will ensure that PAPs are not exposed to risks as part of their participation in subproject consultations, for example by avoiding large meetings, and not disclosing personal information/photos.

7.6 Grievance Mechanism

150. UNICEF will apply the Project Grievance Mechanism detailed in Section 5 of the Project Stakeholder Engagement Plan (it could be found in UNICEF web site), to all subprojects. Each

ESMP will include a subproject specific Grievance Mechanism, with procedures relevant to its specific context.

151. Intervention related grievances can be brought up by affected people in case of: (i) non-fulfillment of contracts or agreements; (ii) compensation entitlements; (iii) types and levels of compensation; (iv) disputes related to destruction of assets or livelihoods; disputes in receiving project services (x) issues related to GBV or (x) disturbances caused by construction activities, such as noise, vibration, dust or smell.

152. The GM will be gender- and age-inclusive and responsive and address potential access barriers to women, the elderly, the disabled, youth and other potentially marginalized groups as appropriate to the Project. The GM will not impede access to judicial or administrative remedies as may be relevant or applicable and will be readily accessible to all stakeholders at no cost and without retribution.

153. Information about the Grievance Mechanism and how to make a complaint and/or grievance must be communicated during the stakeholder engagement process. It will be made available to workers during induction. It will be placed at prominent places for the information of the key stakeholders and at visible location in working sites.

154. All complaints and/or grievances regarding social and environmental issues can be received by calls through a toll-free call center (8003090). Trained Call Centre Agents – both males and females - ensure that these grievances are registered in the Grievance module of the MIS within the appropriate grievance type, to ease the analysis and redressal. The Responsible Party maintains a register of inquiries, complaints and/or grievances during the payment cycles, including grievances from workers. The following information will be recorded:

- time, date and nature of enquiry, concern, complaints and/or grievances.
- name contact address and contact number.
- response and review undertaken as a result of the enquiry, concern, complaints and/or grievances; and
- actions taken and name of the person taking action.

155. The GM also handles anonymous complaints, though the extent to which action can be taken to address them will depend on the information the caller is willing to provide. Where the complainant is not satisfied with the resolution, grievances can also be escalated.

156. The UNICEF GM-Call Center (CC) agents have been trained to receive GBV complaints and refer them to the appropriate channels. For all cases received, the national GBV referral pathway is used to refer the survivor to the services available including medical care and psychosocial support. This process is elaborated further in the GBV Action Plan.

Chapter 8.

Monitoring and Reporting

157. The UNICEF ESS Specialist/consultant will monitor the overall implementation of the ESMF by UNICEF, most particularly the:

- timely preparation of environmental and social screening forms for all subprojects (list of subprojects by risk category by date)
- timely preparation and clearance of subproject ESMPs, as needed (list of instruments with dates)
- management of prior review requirements of the World Bank (non-objection requests with dates)
- preparation and monitoring of ESMP implementation, including monitoring of mitigation measures and monitoring of contractors environmental and social performance (indicators)
- training of Project staff, Partners staff, TPMA personnel and contractors.

158. The ESS Specialist/consultant will prepare:

- bi-annual reports summarizing monitoring results, to be included in the Project's bi-annual Reports to the World Bank
- reports that aggregate and analyze monitoring results ahead of regular "reverse" World Bank implementation support missions with UNICEF
- an annual evaluation of all environmental and social monitoring results, which will be submitted to the World Bank as part of overall project implementation reporting

159. Environmental and social risk management aspects are also part of the scope of the Third-Party Monitoring (TPM) services contracted by UNICEF. As per their Terms of Reference, the:

"Specific Requirements for Safeguards Compliance Verification include two phases of subprojects' implementation:

- *Phase 1 includes compliance check with the environmental and social safeguards requirements per Project documents (PAD; ESMP; RAP; other) in regard to the subproject's preparation/design and existence of these requirements in the bid and contract documents or other related implementation arrangements;*
- *Phase 2 includes verification of conformity with safeguards' requirements during implementation of subprojects; and compliance check with all environmental and social safeguards requirements per the Project documents (PAD; ESMP; RAP; other)."*

8.1 Subproject Environmental and Social Database

160. The ES Safeguard Specialist will establish, maintain, and update a database of all subprojects that will be shared with the Implementing Partners. The database will include for each subproject:

- type of subproject, name of subproject, Implementing Partner
- environmental and social risk level
- timeline (clearance of screening form, clearance of ToRs, clearance of safeguard instruments)

- supervision reports by ES Safeguard Specialists during implementation
- contractor reports
- noncompliance by contractors
- cross references to the Grievance Redress Mechanism’s log of complaints.

8.2 Monitoring of ES Safeguard instruments

161. The ESS Specialist will conduct onsite visits for the subprojects on regular basis to monitor the implementation of their ES Safeguard measures. These visits will be conducted if the security situation and COVID-19 spread allow.

162. The following table provides an indicative monitoring plan for minor civil work/rehabilitation subproject including the installation of small incinerators, to be included in subproject ESMPs.

Table 5. Key components of the monitoring plan

Parameters	Monitoring requirement	Responsible party	Frequency
<ul style="list-style-type: none"> • Mitigating measures included in the set of interventions. • Mitigating measures cost included in the bill of quantities of the intervention. • Awareness activities are carried out 	Review of sub- project component and bills of quantities. Review of awareness program materials before the start of the activities and reviewing the reports and indicators after conducting the program.	Environmental Safeguards Specialist; UNICEF engineers;	During preparations of bill of quantities for the project components
Health and safety measures: <ul style="list-style-type: none"> • Protective clothes • Site protection • Disposal of hazardous materials • Readiness of health facilities for emergencies • Normal working hours (not more than 8 hours /day) 	Site inspection checklists photos	Environmental Safeguards Specialist; Local Authorities; UNICEF engineers; GHOs and DHOs TPMA	Monthly/ Quarterly Regularly
Noise and dust level: <ul style="list-style-type: none"> • Ear protection and dust masks for workers • No work at night • Spray water 	Site inspection checklists and photos	Environmental Safeguards Specialist; UNICEF engineers; TPMA	Monthly Regularly
General Hygiene Condition: <ul style="list-style-type: none"> • Safe disposal of all toxic materials including medical waste • Health and safety of worker; • Capacity building program • Training of local staff and awareness 	Visual inspection Laboratory test Interview with staff and community members WHO standards of drinking water	Environmental Safeguards Specialist; Local Authorities; UNICEF engineers; GHO and DHOs TPMA	Monthly Regularly

8.3 Monitoring of Contractors

163. As part of their regular activities, the ESS Specialist will monitor and document (including

pictures) the environmental and social performance of contractors for each subproject throughout the contract period. This will involve both spot check visits to work locations, and reviews of records kept by the contractor and of reports submitted by the contractor. The frequency of site visits should be commensurate with the magnitude of activities and their associated environmental and social impacts. Overall, each construction site should be visited at least once during interventions/subproject implementation.

164. For any incident or accident that causes or has the potential to cause material or significant environmental and/or social harm, the site supervisor/designated officer shall notify the responsible party's senior management and the Project Manager as soon as possible, and no later than 48 hours. UNICEF will report any significant accident or incident to the World Bank within 48 hours, once confirmed, in accordance with the provisions set out in the ESCP.

165. UNICEF will document in the database each visit and interaction with a contractor, including identification of contractor noncompliance, the significance of the non-compliance, and guidance provided on actions to be taken. The ESS Specialist within UNICEF will follow up as needed to ensure timely resolution of issues of noncompliance with environmental and social clauses. This may include additional visits to the contractor's site or offices, further communications with contractor personnel, issuance of notices of deficiency or warnings to the contractor, and other actions as needed.

166. At any stage of construction or other work, if the contractor has not taken appropriate action to achieve compliance with the environmental and social clauses after repeated notices of violation and warnings of noncompliance, and significant environmental or social impacts are occurring or imminent, UNICEF should order the contractor to stop work until environmental and social performance is brought under control and up to acceptable standards.

8.4 Completion Reports

167. Upon subproject completion, the ESS Specialist will prepare a subproject completion report that flags any unresolved environmental or social issue, with recommended remedial action. This report will be shared with the Program Manager who will decide the way forward. For subprojects with significant environmental or social impacts, the completion report might recommend periodic routine inspections/monitoring during operation of the facility by dedicated environmental and social specialists.

Chapter 9.

Capacity

168. This chapter reviews the capacity and skills available within UNICEF and its Implementing Partners to implement and monitor the ESMF and proposes measures to enhance this capacity.

169. UNICEF' Environmental and Social Specialist will oversee the management of environmental and social risks for the Project. He will:

- Prepare/review and clear environmental and social screening forms for all subprojects
- Prepare and provide project/sub-projects ESMPs/instruments to the World Bank for review and approval
- Monitor subproject compliance with their ESMP, including field visits and spot checks
- Work closely with project engineers and procurement officers to incorporate environmental and social requirements into subproject design, appraisal, and resource mobilization
- Compile biannual reports on environmental and social risk management performance of the Project that will be incorporated into the Project reports
- Provide assistance and deliver capacity building trainings to Project staff, Implementing Partners, and contractors
- Organize and oversee the preparation, production and distribution of training manuals and awareness materials

170. The ESS Specialists will work closely with the UNICEF Gender Mainstreaming Team and with other relevant sectors in UNICEF Country Office.

9.1 Capacity Development

171. UNICEF will ensure that the ESS Specialists, receive training on the ESF and its implementation.

172. The UNICEF ESS Specialist, and relevant specialized personnel in UNICEF, will organize training for the partners/persons involved in Project implementation, including:

- A launch workshop to operationalize the ESMF and agree on roles and responsibilities moving forward
- A workshop with project engineers and technical staff to explain the ESMF and its implementation.
- Environmental and social risk management training and capacity enhancement for participating contractors, and Local Councils.
- Toolbox talks for contractors to explain the ESMF and the ESHS requirements, including the grievance mechanism for workers, sexual exploitation and abuse (SEA)/sexual harassment (SH) and the associated grievance management, and worker OHS, including:
 - On-site risk identification and mitigation
 - Use of PPEs
 - Emergency Prevention and Preparedness

9.2 ESMF Implementation budget

173. ESMF implementation costs are allocated according to the budget line items in table below. Such costs include training, development of E&S due diligence measures and other to be determined tools. Costs for undertaking travel, monitoring and trainings as well as any other stakeholders' engagement and communication.

Table 6. Indicative costs of capacity building activities

ESMF Implementation Costs	USD
Training and workshops	
1. Training on E&S good practice rolling out during the lifetime of the project	
2. Training on Medical Waste Management, and on Gender Based Violence	560,000
3. Workshops - OHS for project workers and raising awareness campaigns	
Information and Communication	
1. Production and dissemination of communication materials targeting the vulnerable groups	30,000
Supervision, consultation, monitoring, and reporting	
1. Travel to for training and conducting monitoring and reporting	
2. Monitoring including preparation of monitoring report for application of the ESMF and MWMP and SEP	40,000
3. Stakeholders' consultation	
TOTAL	630,000
Total +10% for contingency	693,000

Annex 1.

Template for Subproject Screening

Screening Form for Potential Environmental and Social Issues

UNICEF will use this form to screen for the potential environmental and social risks and impacts of a proposed subproject. The form will allow UNICEF to: (i) identify the relevant Environmental and Social Standards (ESS); (ii) establishment an appropriate Environmental and Social risk for the subproject, and; (iii) specify the type of environmental and social assessment required, including specific instruments/plans.

The Screening Form is not a substitute for subproject-specific environmental and social assessments or specific mitigation plans.

Subproject name	
Subproject location	
Implementing Partner	
Estimated Investment	
Was the site visited beforehand	
Estimated Start/Completion Date	
Observations/Comments	
Signature of ESS Specialist	
Signature of Program Manager	

Question	Answer		Relevant ESS	Extent of Required Measures
	Yes	No		
Does the subproject involve civil works including new construction, expansion, upgrading or rehabilitation of existing infrastructure?			ESS1	ESIA/ESMP, SEP
Does the subproject involve land acquisition and/or restrictions on land use?			ESS5	Resettlement Plan, SEP
Is the subproject associated with any external waste management facilities such as a sanitary landfill, incinerator?			ESS3	ESIA/ESMP, SEP
Does the subproject have an adequate system in place (capacity, processes and management) to address waste?			ESS1, ESS3	ESMP

Does the subproject involve the recruitment of workers including direct, contracted, primary supply, and/or community workers?			ESS2	LMP, SEP
Does the subproject have appropriate OHS procedures in place, and an adequate supply of PPE (where necessary)?			ESS2	LMP
Does the subproject have a GM in place, to which all workers have access, designed to respond quickly and effectively?			ESS10	SEP
Does the subproject involve use of security or military personnel during construction and/or operation of healthcare facilities and related activities?			ESS4	ESIA/ESMP, SEP
Is the subproject located within or in the vicinity of any ecologically sensitive areas?			ESS6	ESIA/ESMP, SEP
Is the subproject located within or in the vicinity of any known cultural heritage sites?			ESS8	ESIA/ESMP, SEP
Does the project area present considerable Gender-Based Violence (GBV) and Sexual Exploitation and Abuse (SEA) risk?			ESS1	ESIA/ESMP, SEP

Conclusions of the screening:

1. **Indicate the proposed environmental and social risk ratings²⁷ (High, Substantial, Moderate or Low), and provide justifications.**
2. **Indicate the proposed environmental and social risk management instruments that must be prepared and how they will be implemented (responsibilities, resources, timeline).**

²⁷ **High Risk** subprojects are likely to generate a wide range of significant adverse risks and impacts on human populations or the environment, because of the complex nature of the Project, their large to very large scale, or the sensitivity of the subproject locations. Impacts are likely to be long term, permanent, irreversible, and impossible to avoid entirely due to the nature of the Project

Substantial Risk subprojects are likely to generate some significant adverse risks and impacts on human populations or the environment, because of their large to medium scale. They are not located in a highly sensitive area. Impacts are likely to be mostly temporary, predictable and reversible.

Moderate Risk subprojects have adverse risks and impacts on human populations and/or the environment that are not likely to be significant, because the subproject is not complex or large, do not involve activities that have a high potential for harming people or the environment, and are located away from environmentally or socially sensitive areas.

Low Risk subprojects have potential adverse risks to and impacts on human populations or the environment that are likely to be minimal or negligible. These subprojects do not require further ES assessment following the initial screening.

Annex 2.

Yemeni Environmental Quality Standards

Table 7. Permissible limits for key air pollutants

Pollutant	Time Period	Value
Carbon Monoxide and Dioxide gas (CO/CO ₂)	8 hours	10 micrograms\m ³
Nitrogen oxide (NO _x)	24 hours	150 micrograms\m ³
Sulphur oxide (SO _x)	24 hours	250 micrograms\m ³
Ozone (O ₃)	8 hours	120 micrograms\m ³
Particulate Matter (PM)	24 hours	70 micrograms\m ³
Lead (Pb)	Annually	1 micrograms\m ³

The Yemeni standards for air quality do not specify sources of industrial emissions; they are also less strict than those in the World Bank Group EHS Guidelines.

Table 8. Maximum noise level allowed in different environments (Decibel Unit dB)

Environment	Time		
	7h00-18h00	18h00-23h00	23h00-07h00
Rural housing and entertainment places	45	40	25
Suburban housing areas	50	45	40
Urban housing areas	55	50	45
Housing areas in city centers	60	55	50
Industrial and commercial areas	70	70	70

Table 9. Physical Characteristics of drinking water

Characteristic	Unit	Optimal limit	Maximum limit
Taste		Acceptable to consumers	
Odor		Acceptable to consumers	
Color	Platinum Cobalt	5	25
Turbidity (NTU)	Turbidity Unit	1	5
Temperature	Degree Celsius	-	25
pH (Potential of hydrogen)		6.5-8.5	5.5- 9
Electrical Conductivity EC	Micro mohs/cm	450-1000	2500

Table 10. Inorganic substances in drinking water

Substance	Symbol	Optimal limit (mg/L)	Maximum limit (mg/L)
Total Dissolved Salts	TDS	650	1500
Bicarbonate	HCO ₃	150	500

Chloride	Cl ⁻	200	600
Sulphate	SO ₄	200	600
Fluoride	F ⁻	0.5	1.5
Calcium	Ca	75	200
Magnesium	Mg	30	30-150
Barium	Ba	0.1	0.15
Sodium	Na	200	400
Potassium	K	0-12	12
Nitrate	NO ₃	10	50
Iron	Fe	0.3	1
Manganese	Mn	0.1	0.5
Copper	Cu	0.1	1.5
Zinc	Zn	5	15
Total Hardness (as Calcium Carbonate)	TH	100	500
Aluminum	Al	0.2	0.3
Nickle	Ni	0.05	0.1
Boron	B	0.50	1
Silica	SiO ₂		40

Total residual chlorine concentration in treated water reaching the consumers should be between 0.2 to 0.5 ppm. It might be increased in the event of an epidemic to the level determined by the related authorities and international organizations.

Table 11. Maximum limits for organic pollutants in drinking water

Substance	Maximum limit (mg/L)
Aldrin	0.0002
Lindane	0.004
Methoxine	0.01
Toxaphene.	0.002
2,4 Dichlorophenoxy acetic acid	0.1
Propionic acid	0.01
Malathion	0.19
Parathion	0.035
Permethrin	0.01
Dimethoate	0.002
Diazinon	0.002

Table 12. Maximum limits for toxic substances in drinking water

Substance	Unit	Maximum limit
Lead (Pb)	mg/L	0.05
Selenium (Se)	//	0.01
Arsenic (As)	//	0.01
Chromium (Cr)	//	0.05

Cyanide (CN)	//	0.01
Cadmium (Cd)	//	0.005
Mercury (Hg)	//	0.001
Antimony (Sb)	//	0.005
Barium (Ba)	//	0.5-1.0
Silver (Ag)	//	0.01-0.1
Halogenated methane group (TTHM) includes: Chloroform, Bromoform, Bromodichloromethane and Dibromochloromethane	µg/L	150

The amount of radioactive materials in water should not exceed the limits mentioned below:

The microbiological pollutants in treated public water supplied through the distribution network or any other distribution means must be free of Total Coliform and Colon Bacillus form as mentioned below:

Table 13. Bacterial Pollutants

Bacteria	Unit	Maximum limit
Total coliforms	CFU/100 ml	Zero
Fecal coliform	CFU/100 ml	Zero

Microbiological pollutants in untreated public water conveyed into the distribution network

- 98% of the annually tested samples must be free of total coliforms.
- The fecal coliform must not exceed three in any one isolated sample and not successive samples.
- Water not supplied through the distribution network such as: wells, springs, rain water reservoirs the Fecal coliform that found in a 100 ml water sample must not exceed 10-15 coliform.

Biological Pollutants

The drinking water must be free from the following:

- Protozoa harmful to health.
- Parasitic worms (Helminths) that can involve human as a host during its life cycle and transfer infection to human.
- Parasites including fungi that affect health or produces toxic materials that affect human health.

Waste Water

Physical Standard physical requirements:

- Maximum temperature should not exceed 45 C°
- Should not contain substances susceptible to freezing, settling or become viscous in temperature ranging from 0-40 C°
- Should not contain solid or liquid hazardous and explosive materials

Table 14. Maximum levels of chemical substances in industrial and commercial waste water discharged in the public sewerage network

Compound/Substance	Symbol	Unit	Maximum limit
Chemical Oxygen Demand	COD	mg/L	2100
Biochemical Oxygen Demand	BOD	mg/L	800
Power of Hydrogen	pH	---	5.5-9.5
Maximum Temperature Degree	C°	C	45
Total Suspended Solids	TSS	mg/L	1100
Total Dissolved Solids	TDS		2000
Oil and Grease	---		100
Phenolic Compounds	---		10
Sulphate	SO ₄		1000
Phosphorus	P		50
Cyanide	CN		5
Sulphur	S		1
Hydrogen Sulfide	H ₂ S		10
Iron	Fe		50
Chloride	Cl		600
Fluoride	F		8
Arsenic	As		5
Tin	Sn		10
Barium	Ba		5
Boron	B		5
Cadmium	Cd		1
Chromium (VI)	Cr		5
Copper	Cu		5
Lead	Pb		0.6
Mercury	Hg		0.01
Nickel	Ni		5
Selenium	Se		0.1
Silver	Ag		1
Manganese	Mn		10
Beryllium	Be		5
Zinc	Zn		15
Cobalt	Co		0.05
Lithium	Li		5
Vanadium	V		0.1
Aluminum	Al		5

Wastes that must be handled with control set up by the administration under the competent authority of which wastes lie:

Clinical wastes generated from medical care in hospitals, clinics and medical centers.

3. Wastes generated from pharmaceutical preparations and products.
4. Wastes generated from medicaments and drugs.

5. Wastes generated from production of biological insecticides, preparation of medicaments from plants and shrubs and its usage.
6. Wastes generated from wood chemical protective materials and their preparation and utilization.
7. Wastes generated from organic solvent materials and their preparation and usage.
8. Wastes generated from thermal processing and printing processes which contains cyanide.
9. Wastes from unusable mineral oil.
10. Wastes from oil/water and mixes of hydrocarbons etc.
11. Wastes from substances and compounds containing alkaline phenol with multitude bonds (PCBs) and/or phenyls of multiple chlorine bonds.
12. Wastes from tar sediments resulting from refining and distillation and any thermal processing analysis.
13. Wastes from production of links, paints, coloring materials, lacquers, varnishes and their preparation and usage.
14. Wastes left from the production of resins, gingival, plastics, furs, sticking materials and their preparation and usage.
15. Wastes from chemical materials generated from research and development activities or from any uncategorized/ or new educational activities the effects of which on human beings and the environment are not known.
16. Wastes of explosive nature not subjected to any other legislation.
17. Wastes left from production of chemical, processing and photographic materials and their usage and preparation and usage.
18. Wastes from surface treatment of plastics and metals.
19. Residues resulting out of disposing of industrial wastes.

Hazardous wastes for which transportation and handling is prohibited except with a permission from the Competent Authority include:

- Wastes that include the following materials in their composition:
 20. Carbonic metal.
 21. Barium and barium compounds.
 22. Chrome hexa equivalence compounds.
 23. Copper compounds.
 24. Zinc compounds.
 25. Arsenate, arsenic compounds.
 26. Selenium, selenium compounds.
 27. Cadmium, cadmium compounds.
 28. Antimony, antimony compounds.
 29. Tellurium, tellurium compounds.
 30. Mercury, mercury compound.
 31. Thallium, thallium compounds.
 32. Lead, lead compounds.
 33. Fluorine inorganic compounds except calcium fluoride.
 34. Cyanide inorganic compounds.
 35. Acid solutions or acids in solid state.
 36. Alkaline solutions or alkalines in solid state.
 37. Rock silk (Asbestos) (fiber dust)
 38. Phosphorous organic compounds.

39. Cyanide organic compounds.
 40. Phenol, phenol organic compounds including chlorophenol.
 41. Organic compounds of Ether/air.
 42. Halogenic organic solvents.
 43. organic solvents expect halogenic solvents.
 44. Any similar substance to bi-benzene of multiple chlorine bonds.
 45. Any substance similar to dioxin-pho-bi-benzene of chloride bonds.
 46. Most organic halogen compounds
- Pesticides and home insecticides.
 - Petroleum substances.
 - Substances from which ionic radiations are emitted.
 - Inflammable and explosive substances.

Annex 3.

Environmental and Social Requirements for Contractors

Contractors shall meet the following Environmental, Health, Safety and Social (including labor) requirements – thereafter called ESHS requirements²⁸.

The ESHS requirements include 9 sections

1. Contractor Environmental and Social Management Plan (C-ESMP)
2. ESHS Training
3. Construction Site Management
4. Occupational Health and Safety (OHS)
5. Road safety and Traffic Safety
6. Emergency Preparedness and Response
7. Stakeholder Engagement
8. Labor force management, including the Code of Conduct
9. Contractor Environmental and Social Reporting

Contractor Environmental and Social Management Plan (C-ESMP)

The Contractor shall:

- Prepare and submit to UNICEF for approval a Contractor Environmental and Social and Social Management Plan (C-ESMP).
- Include in the C-ESMP a detailed explanation of how the contractor's performance will meet the ESHS requirements
- Ensure that sufficient funds are budgeted to meet the ESHS requirements, and that sufficient capacity is in place to oversee, monitor and report on C-ESMP performance.
- Put in place controls and procedures to manage their ESHS performance.
- Get prior written approval from UNICEF Engineers before starting construction or rehabilitation activities.

ESHS Training

The Contractor shall

- Determine ESHS training needs in collaboration with UNICEF
- Maintain records of all ESHS training, orientation, and induction.
- Ensure, through appropriate contract specifications and monitoring that service providers, as well as contracted and subcontracted labor, are trained adequately before assignments begin.
- Demonstrate that its employees are competent to carry out their activities and duties safely. For this purpose, the Contractor shall issue a Competence Certificate for every person working

²⁸ The ESHS requirements build on the General EHS Guidelines of the World Bank Group, but also take into account other World Bank guidelines, and good practice notes, however, only some of them are applicable for the scale of Component1 activities

on site (relative to trade and aspect of work assignment) that specifies which tasks can be undertaken by which key personnel.

Orientation Training

The Contractor shall:

- Provide ESHS orientation training to all employees, including management, supervisors, and workers, as well as to subcontractors, so that they are apprised of the basic site rules of work at/on the site and of personal protection and preventing injury to fellow employees.
- Training should consist of basic hazard awareness, site-specific hazards, safe work practices, and emergency procedures for fire, evacuation, and natural disaster, as appropriate. Any site-specific hazard or color coding in use should be thoroughly reviewed as part of orientation training.

Visitor Orientation

The Contractor shall:

- Establish an orientation program for visitors, including vendors, that could access areas where hazardous conditions or substances may be present.
- Visitors shall not enter hazard areas unescorted.
- Ensure that visitors shall always be accompanied by an authorized member of the contractor, or a representative of UNICEF or of its Implementing Partners, who has successfully fulfilled the ESHS orientation training, and who is familiar with the project site construction hazards, layout, and restricted working areas.

New Task Employee and Contractor Training

The Contractor shall:

- Ensure that all workers and subcontractors, prior to commencement of new assignments, have received adequate training and information enabling them to understand work hazards and to protect their health from hazardous ambient factors that may be present. The training should adequately cover the step-by-step process that is needed for Project activities to be undertaken safely, with minimum harm to the environment, including:
 - Knowledge of materials, equipment, and tools
 - Known hazards in the operations and how they are controlled
 - Potential risks to health
 - Precautions to prevent exposure
 - Hygiene requirements
 - Wearing and use of protective equipment and clothing
 - Appropriate response to operation extremes, incidents and accidents

Construction Site Management

Vegetation

The Contractor shall:

- Prevent any unnecessary destruction, scarring, or defacing of the natural surroundings in the vicinity of the construction site

- Protect all trees and vegetation from damage by construction operations and equipment, except where clearing is required for permanent works, approved construction roads, or excavation operations
- Revegetate damaged areas on completion of the Works, and for areas that cannot be revegetated, scarifying the work area to a condition that will facilitate natural revegetation, provide for proper drainage, and prevent erosion
- Use, as much as possible, local species for replanting and species that are not listed as a noxious weed
- Repair, replant, reseed or otherwise correct, as directed by UNICEF or its representative, and at the Contractor's own expense, all unnecessary destruction, scarring, damage, or defacing of the landscape resulting from the Contractors operations
- Transport labor and equipment in a manner to avoid as much as possible damage to grazing land, crops, and property

Protection of the Existing Installations

The Contractor shall:

- Safeguard all existing buildings, structures, works, pipes, cables, sewers, or other services or installations from harm, disturbance or deterioration during construction activities
- Coordinate with local authorities to identify existing infrastructure that might not be visible
- Repair any damage caused by the Contractor's activities, in coordination with concerned authorities.
- Take all reasonable precautions to prevent or reduce any disturbance or inconvenience to the owners, tenants or occupiers of properties to the construction activities, and more generally to the public
- Maintain safe access to public and private properties that might be affected by construction activities. If necessary, provide acceptable alternative means of passage or access to the satisfaction of the persons affected.
- Avoid working during night hours

Waste from Construction Activities

The Contractor shall:

- Collect and properly manage all solid wastes resulting from the construction activities, including construction debris and spoils, to prevent the contamination of soil and groundwater
- Remove unneeded excavation material from construction sites as soon as possible
- Agree with relevant municipalities about construction waste disposal
- Carefully select waste disposal sites, to be approved by UNICEF or its Implementing Partner
- Minimize littering of roads by ensuring that vehicles are licensed and loaded in such a manner as to prevent falling off or spilling of construction materials, and by sheeting the sides and tops of all vehicles carrying mud, sand, other materials or debris
- Transfer construction waste to assigned places in the selected waste disposal sites with documented confirmation.
- Properly dispose of solid waste and debris at designated permitted sites waste disposal sites allocated by the local authorities and obtain a receipt of waste from the authorized landfill authority.

Air Quality

The most common pollutant involved in fugitive emissions is dust or particulate matter (PM) that is released during the transport and open storage of solid materials, and from exposed soil surfaces, including unpaved roads. Accordingly, the Contractor shall:

- Use dust control methods, such as covers, water suppression, or increased moisture content for open materials storage piles, or controls, including air extraction and treatment through a baghouse or cyclone for material handling sources, such as conveyors and bins.
- Use water suppression for control of loose materials on paved or unpaved road surfaces. Oil and oil by-products are not a recommended method to control road dust.
- Use wheel washes at quarries, ready-mix plants, construction sites, and other facilities to prevent track-out of mud, dust and dirt on to public road.
- Regularly clean road surfaces within the construction sites to remove accumulated fine material, and regularly clean transportation vehicles.
- Cover open bodied trucks handling sand, gravel or earth.
- Minimize smoke from diesel engines by regular and proper maintenance, in particular by ensuring that the engine, injection system and air cleaners are in good condition.

Hazardous and Toxic Materials

Toxic and deleterious wastes resulting from the Contractor's activities require special attention in order to forestall their introduction into the natural environment which could result in harm to people, aquatic life or natural growth of the area. Accordingly, the Contractor shall:

- Train workers regarding the handling of hazardous materials
- Label using easily understandable symbols, and provide material safety data sheets, for chemical substances and mixtures according to the Globally Harmonized System (GHS) of classification and labelling of chemicals.
- Store hazardous materials as per the statutory provisions of the Manufactures, Storage and Import of Hazardous Chemicals Rules (1989), under the Environment (Protection) Act, 1986.
- Provide adequate secondary containment for fuel storage tanks and for the temporary storage of other fluids such as lubricating oils and hydraulic fluids,
- Use impervious surfaces for refueling areas and other fluid transfer areas
- Train workers on the correct transfer and handling of fuels and chemicals and the response to spills
- Provide portable spill containment and cleanup equipment on site and training in the equipment deployment
- Deposit or discharge toxic liquids, chemicals, fuels, lubricants and bitumen into containers for salvage or subsequent removal to off-site locations.
- Treat hazardous waste separately from other waste
- Avoid the storage or handling of toxic liquid adjacent to or draining into drainage facilities.
- Keep absorbent materials or compounds on Site in sufficient quantities corresponding to the extent of possible spills.
- Locate landfill pits for the disposal of solid waste at least 100 m from water courses, and fencing them off from local populations.
- Ensure adequate primary treatment of sanitation effluents and installing septic tanks away from village watering points.

Area Signage

The Contractor shall:

- Appropriately mark hazardous areas.
- Install warning signs
- Ensure that signage is in accordance with international standards and is well known to, and easily understood by workers, visitors and the general public as appropriate.
- Demarcate work sites with safety tape, fencing or barricades, as appropriate, to prevent unauthorized access to the construction sites
- Safeguard public safety by covering holes and by installing guardrails along temporary pathways.

Health and Safety

Contractors will collaborate with other contractors in applying health and safety requirements, when workers from more than one contractor are working together in one location, without prejudice to the responsibility of each party for the health and safety of its own workers.

Severe Weather and Facility Shutdown

The Contractor shall:

- Design and build workplace structures to withstand the expected elements for the region and designate an area designated for safe refuge, if appropriate.
- Develop Standard Operating Procedures (SOPs) for project or process shutdown, including an evacuation plan.

Lavatories and Showers

The Contractor shall:

- Provide adequate lavatory facilities (toilets and washing areas) for the number of people expected to work at the construction sites, and make allowances for segregated facilities, or for indicating whether the toilet facility is “In Use” or “Vacant”.
- Provide toilet facilities with adequate supplies of hot and cold running water, soap, and hand drying devices.
- Where workers may be exposed to substances poisonous by ingestion and skin contamination may occur, provide facilities for showering and changing into and out of street and work clothes.

Potable Water Supply

The Contractor shall:

- Provide adequate supplies of potable drinking water from a fountain with an upward jet or with a sanitary means of collecting the water for the purposes of drinking
- Ensure that water supplied to areas of food preparation or for the purpose of personal hygiene (washing or bathing) meets drinking water quality standards

Clean Eating Area

The Contractor shall:

- Where there is potential for exposure to substances poisonous by ingestion, make suitable arrangements to provide clean eating areas where workers are not exposed to the hazardous or noxious substances

Personal Protective Equipment (PPE)

The Contractor shall:

- Identify and provide at no cost appropriate PPE to workers, the workers of subcontractors, as well as to visitors, which gives adequate protection without incurring unnecessary inconvenience to the individual
- Ensure that the use of PPE is compulsory.
- Provide sufficient training in the use, storage and maintenance of PPE to its workers and workers of its subcontractors.
- Properly maintain PPE, including cleaning when dirty and replacement when damaged or worn out;
- Determine requirements for standard and/or task-specific PPE based on of Job specific Safety Analysis (JSA);
- Consider the use of PPE as a last resort when it comes to hazard control and prevention, and always refer to the hierarchy of hazard controls when planning a safety process.

Noise

The Contractor shall institute appropriate measures to reduce the exposure of workers to construction noise, including but not limited to:

- Avoid exposure to a noise level greater than 85 dB(A) for a duration of more than 8 hours per day without hearing protection. In addition, no unprotected ear should be exposed to a peak sound pressure level (instantaneous) of more than 140 dB(C).
- Enforce the use of hearing protection should be enforced actively when the equivalent sound level over 8 hours reaches 85 dB(A), the peak sound levels reach 140 dB(C), or the average maximum sound level reaches 110 dB(A).
- Provide hearing protective devices capable of reducing sound levels at the ear to at most 85 dB(A).
- Reduce the “allowed” exposure period or duration by 50 percent for every 3 dB(A) increase in in excess of 85 dB(A).
- Perform periodic medical hearing checks on workers exposed to high noise levels.
- Rotate staff to limit individual exposure to high levels.
- Install practical acoustical attenuation on construction equipment, such as mufflers.
 - Use silenced air compressors and power generators
 - Keep all machinery in good condition
 - Install exhaust silencing equipment on bulldozers, compactors, crane, dump trucks, excavators, graders, loaders, scrapers and shovels.
- Post signs in all area where the sound pressure level exceeds 85 dB(A).
- Shut down equipment when not directly in use
- Provide advance notice to occupants if an activity involving high level impact noise is in close proximity to buildings.

Old asbestos waste

The contractor shall apply all the required measures to protect the workers and the surrounding communities from the hazards associated with the old asbestos waste, in accordance with the WBG General EHS Guidelines (www.ifc.org/EHSguidelines), including but not limited to the following:

- Treat the waste contaminated with asbestos safely in collection, transportation and proper disposal in the authorized site to prevent spreading into the air.
- Providing the containers to use for isolating the asbestos material, the signs to install in the site and the criteria for choosing the location in which to bury the asbestos are available for the disposal.
- Ensure that the equipment used for and next to the Asbestos Cement Material (ACM) is washed after use.
- Ensure that the resting areas and the eating facilities are clear from any potential contamination from asbestos.
- Provide adequate washing facilities.
- Ensure that the PPE provided to the workers on site includes disposable coveralls, safety goggles, gloves and footwear.
- Ensure that a local exhaust ventilation system (LEV) that draws in airborne asbestos is in place when cutting (ACM).
- Ensure that the appropriate filter is installed in the LEV to capture the airborne asbestos before releasing to the environment. The filters should also be treated as a hazardous waste for disposal.
- Ensure that training that is fit for purpose is delivered to the workers to enhance their awareness of the health and safety risks when working with asbestos, to inform them on the method of work and on the control measures to have in place.
- Excavated contaminated soil to be directly placed into the truck and cover it and transport it while it still wet to minimize its effects
- Contaminated soil and damaged asbestos materials and pipes should be buried to prevent spreading into the air.
- Arrangements in the disposal area should be done to ensure it is done properly and documented.
- Proper masks should be worn by all workers and supervisors in the working area. Respirators must be equipped with HEPA filtered cartridges (color coded purple) or an N-100, P-100 or R-100 NIOSH rating.

Painting

The contractor shall apply all the required measures to protect the workers and the surrounding communities from the hazards associated with painting works including the hazards resulting from use of lead containing paint, in accordance with the WBG General EHS Guidelines (www.ifc.org/EHSguidelines), including but not limited to the following:

- Provide workers with specialized training and provided with, and wear, appropriate PPE (gloves, apron, splash suits, face shield or goggles, etc);
- Ensure that the air is renewed and ventilation are continuous inside the work station;
- Apply working shift time with minimum time for every worker;

- Ensure that emergency showers are close to the working site;
- Ensure availability of the first aid box.
- Ensure not procure or use paints containing lead.

First Aid and Accidents

The Contractor shall:

- Ensure that qualified first-aid by qualified personnel is always available. Appropriately equipped first-aid stations should be easily accessible throughout the place of work.
- Provide workers with rescue and first-aid duties with dedicated training so as not to inadvertently aggravate exposures and health hazards to themselves or their co-workers. Training would include the risks of becoming infected with blood-borne pathogens through contact with bodily fluids and tissue.
- Provide eye-wash stations and/or emergency showers close to all workstations where immediate flushing with water is the recommended first-aid response.
- Provide dedicated and appropriately equipped first-aid room(s) where the scale of work or the type of activity being carried out so requires.
- Equip first aid stations and rooms with gloves, gowns, and masks for protection against direct contact with blood and other body fluids.
- Make widely available written emergency procedures for dealing with cases of trauma or serious illness, including procedures for transferring patient care to an appropriate medical facility.
- Immediately report all accidental occurrences with serious accident potential such as major equipment failures, contact with high-voltage lines, exposure to hazardous materials, slides, or cave-ins to UNICEF.
- Immediately investigate any serious or fatal injury or disease caused by the progress of work by the Contractor and submit a comprehensive report to UNICEF.

Communicable Diseases

Sexually transmitted diseases (STDs), such as HIV/AIDS, are the communicable diseases of most concern because of labor mobility. Recognizing that no single measure is likely to be effective in the long term, the Contractor shall implement a combination of behavioral and environmental modifications to mitigate communicable diseases:

- Conduct Information, Education and Consultation Communication (IEC) campaigns, at least every other month, addressed to all construction site staff (including all the Contractor's employees, all subcontractors of any tier, consultants' employees working on the site, and truck drivers and crew making deliveries to the site for Works and Services executed under the Contract, concerning the risks, dangers and impact, and appropriate avoidance behavior of communicable diseases.
- Provide for active screening, diagnosis, counselling and referral of workers to a dedicated national STD and HIV/AIDS program, (unless otherwise agreed) for all Site staff and labor.
- Provide male or female condoms to all Site staff and workers, as appropriate.
- Provide treatment through standard case management in on-site or community health care facilities.
- Ensure ready access to medical treatment, confidentiality and appropriate care, particularly with respect to migrant workers.

- Promote collaboration with local authorities to enhance access of workers families and the community to public health services and ensure the immunization of workers against common and locally prevalent diseases.
- Provide basic education on the conditions that allow the spread of other diseases such as COVID-19, Lassa Fever, Cholera and Ebola. The training should cover sanitary hygiene education.
- Prevent illness in immediate local communities by:
 - Implementing an information strategy to reinforce person-to-person counselling addressing systemic factors that can influence individual behavior as well as promoting individual protection, and protecting others from infection, by encouraging condom use
 - Training health workers in disease treatment
 - Conducting immunization programs for workers in local communities to improve health and guard against infection
 - Providing health services
 - Contracting an HIV service provider to be available on-site

COVID-19²⁹

In the context of the COVID-19 pandemic, Contractors shall develop and implement measures to prevent or minimize an outbreak of COVID-19, and develop procedures indicating what should be done if a worker gets sick. The Contractor shall:

- Assess the characteristics of the workforce, including those with underlying health issues or who may be otherwise at risk
- Confirm that workers are fit for work, including temperature testing and refusing entry to sick workers
- Consider ways to minimize entry/exit to site or the workplace, and limit contact between workers and the community/general public
- Train workers on hygiene and other preventative measures, and implement a communication strategy for regular updates on COVID-19 related issues and the status of affected workers
- Treat workers who are or should be self-isolating and/or are displaying symptoms
- Assess risks to continuity of supplies of medicine, water, fuel, food and PPE, taking into account international, national and local supply chains
- Reduce, store and dispose of medical waste
- Adjust work practices to reduce the number of workers and increase social distancing
- Expand health facilities on-site compared to usual levels, develop relationships with local health care facilities and organize for the treatment of sick workers
- Build worker accommodations further apart, or have one worker accommodation in a more isolated area, which may be easily converted to quarantine and treatment facilities, if needed
- Establish a procedure to follow if a worker becomes sick (following WHO guidelines)
- Implement a communication strategy with the community, community leaders and local government in relation to COVID-19 issues on the site.

Vector-Borne Diseases

Reducing the impact of vector-borne disease on the long-term health of workers is best

²⁹ Based on the World Bank COVID-19 LMP Template, April 16, 2020

accomplished by implementing diverse interventions aimed at eliminating the factors that lead to disease. The Contractor, in close collaboration with community health authorities, shall implement an integrated control strategy for mosquito and other arthropod-borne diseases that includes the following measures:

- Prevent of larval and adult propagation through sanitary improvements and elimination of breeding habitats close to human settlements
- Eliminate unusable impounded water
- Increase water velocity in natural and artificial channels
- Consider the application of residual insecticide to dormitory walls
- Implement integrated vector control programs
- Promote the use of repellents, clothing, netting, and other barriers to prevent insect bites
- Use chemoprophylaxis drugs by non-immune workers and collaborating with public health officials to help eradicate disease reservoirs
- Monitor and treat circulating and migrating populations to prevent disease reservoir spread
- Collaborate and exchange in-kind services with other control programs in the project area to maximize beneficial effects
- Educate project personnel and area residents on risks, prevention, and available treatment
- Monitor communities during high-risk seasons to detect and treat cases
- Distribute appropriate education materials
- Follow safety guidelines for the storage, transport, and distribution of pesticides to minimize the potential for misuse, spills, and accidental human exposure

Road safety and Traffic Safety

The Contractor shall ensure traffic safety by all project personnel during displacement to and from the workplace, and during the operation of project equipment on private or public roads. The Contractor shall adopt best transport safety practices across all aspects of project operations with the goal of preventing traffic accidents and minimizing injuries suffered by project personnel and the public, including:

- Emphasize safety aspects among drivers
- Improve driving skills and requiring licensing of drivers
- Institute defensive driving training for all drivers prior to starting their job
- Adopt limits for trip duration and arranging driver rosters to avoid overtiredness
- Avoid dangerous routes and times of day to reduce the risk of accidents
- Use speed control devices (governors) on trucks, and remote monitoring of driver actions
- Require that drivers and co-passengers wear seatbelts, and duly sanction defaulters.
- Regularly maintain vehicles and use manufacturer approved parts to minimize potentially serious accidents caused by equipment malfunction or premature failure.

Where the project may contribute to significant changes in traffic along existing roads the Contractor shall:

- Commence activities that affect public motorways and highways, only after all traffic safety measures necessitated by the activities are fully operational.
- Arrange diversions for providing alternative routes for transport and/or pedestrians

- Minimize pedestrian interaction with construction vehicles, particularly at crossing points to schools, markets, and any animal crossing points of significance, through appropriate signage, engineered footpaths or traffic slowing devices.
- Organize meaningful road accident awareness events at all roadside schools and communities within 150 meters of the road centerline, covering safe road crossing, road accident hazards from weather conditions and vehicle roadworthiness, overloading and driver alertness, dangers posed by parked and broken-down vehicles, etc.
- Collaborate with local communities and responsible authorities to improve signage, visibility and overall safety of roads, particularly along stretches located near schools or other locations where children may be present.
- Collaborate with local communities on education about traffic and pedestrian safety (e.g., school education campaigns).
- Coordinate with emergency responders to ensure that appropriate first aid is provided to all affected persons in the event of accidents.
- Use locally sourced materials, whenever possible, to minimize transport distances, and locate associated facilities such as worker camps close to project sites.
- Employ safe traffic control measures, including road signs, traffic cones, removable barriers, and flag persons to warn of dangerous conditions.
- Avoid indirect damage to existing cultural heritage, such as affecting masonry through vibration. (In case of chance finding, stop the work inform the national responsible entity about the site, then work should be continuing under the national entity personnel supervising)

Emergencies

The Contractor shall:

- Establish and maintain an emergency preparedness and response system, in collaboration with appropriate and relevant third parties including to cover: (i) the contingencies that could affect personnel and facilities of the project to be financed; (ii) the need to protect the health and safety of project workers; (iii) the need to protect the health and safety of the Affected Communities. The emergency preparedness and response system shall include:
 - Identification of the emergency scenarios
 - Specific emergency response procedures
 - Training of emergency response teams
 - Emergency contacts and communication systems/protocols (including communication with Affected Communities when necessary)
 - Procedures for interaction with government authorities (emergency, health, environmental authorities)
 - Permanently stationed emergency equipment and facilities (e.g., first aid stations, firefighting equipment, spill response equipment, personal protection equipment for the emergency response teams)
 - Protocols for the use of the emergency equipment and facilities
 - Clear identification of evacuation routes and muster points
 - Emergency drills and their periodicity based on assigned emergency levels or tiers
 - Decontamination procedures and means to proceed with urgent remedial measures to contain, limit and reduce pollution within the physical boundaries of the project property and assets to the extent possible.

Stakeholder Engagement

As part of the overall Project Stakeholder Engagement³⁰, the Contractor will undertake a process of stakeholder engagement with representative persons and communities directly affected by the activities it undertakes, including if necessary, the public disclosure of its C-ESMP. The Contractor shall also maintain throughout the Project good relations with local communities and will give these communities prior notice of plans and schedules as they might affect local people.

Labour Force Management

Labour Influx

The Contractor shall:

- Establish worker camps when accommodation supply is insufficient for workers, including subcontractors and associated support staff
- Locate worker camps away from environmentally sensitive areas
- Build additional/separate roads to project and workers' camp sites
- Organize the commute from camp to project to reduce traffic
- Ensure workers' camp and associated facilities are connected to a septic tank or other wastewater systems that are appropriate and of sufficient capacity for the number of workers and local conditions
- Avoid contamination of fresh water sources
- Provide opportunities for workers to regularly return to their families
- Provide opportunities for workers to take advantage of entertainment opportunities away from rural host communities
- Ensure that children and minors are not employed directly or indirectly on the project and keep registration and proof of age for all employees on-site.
- Pay adequate salaries for workers to reduce incentive for theft
- Pay salaries into workers' bank accounts rather than in cash
- Get an appropriate mix of locally and non- locally procured goods to allow local project benefits while reducing risk of crowding out of and price hikes for local consumers
- Create supervised leisure areas in workers' camp.
- Establish substance abuse prevention and management programs
- Hire workers through recruitment offices, and avoid hiring "at the gate" to discourage spontaneous influx of job seekers
- Identify authorized water supply source and prohibiting use from other community sources.
- Separate service providers for community and workers' camp/construction site.
- Put in place measures to reduce water and electricity consumption.
- Employ locals to the extent possible.
- Develop and adopt a Gender Action Plan to promote the transfer of construction skills to local women, to facilitate their employment at the Project site, including training and recruitment targets.

Labor Conditions

The Contractor shall:

³⁰ The overall process of stakeholder engagement is described in the Project Stakeholder Engagement Plan (SEP)

- Implement the measures and commitments defined in the Project Labor Management Procedures.
- Provide all workers with terms and conditions that comply with Yemeni Labor Legislation, most particularly Decree 5/1995) and applicable International Labour Organization conventions on workplace conditions.
- Put in place workplace processes for project workers to report work situations that they believe are not safe or healthy, and to remove themselves from a work situation which they have reasonable justification to believe presents an imminent and serious danger to their life or health. Project workers who remove themselves from such situations will not be required to return to work until necessary remedial action to correct the situation has been taken. Project workers will not be retaliated against or otherwise subject to reprisal or negative action for such reporting or removal.
- Avoid all forms of forced or compulsory labor, i.e., all work or service which is exacted from any person under the threat of a penalty and for which the person has not offered himself or herself voluntarily.

Insurance

The Contractor shall:

- Protect the health of workers involved in onsite activities, as indicated in Chapter X of Yemen's Labor Code
- Compensate any employee for death or injury

Grievance Mechanism for Workers

The Contractor shall put in place a Grievance Mechanism for its workers and the workers of its subcontractors that is proportionate to its workforce. The GM for workers shall be distinct from the Project level Grievance Mechanism described in the Project Stakeholder Engagement Plan (SEP) for affected individuals and communities, and shall adhere to the following principles:

- *Provision of information.* All workers should be informed about the grievance mechanism at the time they are hired, and details about how it operates should be easily available, for example, included in worker documentation or on notice boards.
- *Transparency of the process.* Workers must know to whom they can turn in the event of a grievance and the support and sources of advice that are available to them. All line and senior managers must be familiar with their organization's grievance procedure.
- *Keeping it up to date.* The process should be regularly reviewed and kept up to date, for example, by referencing any new statutory guidelines, changes in contracts or representation.
- *Confidentiality.* The process should ensure that a complaint is dealt with confidentially. While procedures may specify that complaints should first be made to the workers' line manager, there should also be the option of raising a grievance first with an alternative manager, for example, a human resource (personnel) manager.
- *Non-retribution.* Procedures should guarantee that any worker raising a complaint will not be subject to any reprisal.
- *Reasonable timescales.* Procedures should allow for time to investigate grievances fully, but should aim for swift resolutions. The longer a grievance is allowed to continue, the harder it can be for both sides to get back to normal afterwards. Time limits should be set for each stage of the process, for example, a maximum time between a grievance being raised and the setting up of a meeting to investigate it.

- *Right of appeal.* A worker should have the right to appeal to the World Bank or national courts if he or she is not happy with the initial finding.
- *Right to be accompanied.* In any meetings or hearings, the worker should have the right to be accompanied by a colleague, friend or union representative.
- *Keeping records.* Written records should be kept at all stages. The initial complaint should be in writing if possible, along with the response, notes of any meetings and the findings and the reasons for the findings. Any records on SEA shall be registered separately and under the strictest confidentiality.
- *Relationship with collective agreements.* Grievance procedures should be consistent with any collective agreements.
- *Relationship with regulation.* Grievance processes should be compliant with the national employment code.

Protection from Sexual Exploitation and Abuse³¹

The Contractor shall:

- Provide repeated training and awareness raising to the workforce about refraining from unacceptable conduct toward local community members, specifically women
- Inform workers about national laws that make sexual harassment and gender-based violence a punishable offence which is prosecuted
- Prohibit its employees from exchanging any money, goods, services, or other things of value, for sexual favors or activities, or from engaging any sexual activities that are exploitive or degrading to any person.
- Develop a system to capture gender-based violence, sexual exploitation and workplace sexual harassment related complaints/issues.
- Adopt a policy to cooperate with law enforcement agencies in investigating complaints about gender-based violence.

Protection from Child Labor

The Contractor shall:

- Verify that workers are older than 18 when hiring
- Exclude all persons under the age of 18.
- Review and retain copies of verifiable documentation concerning the age of workers

Code of Conduct

The Contractor shall ensure that all employees, including those of subcontractors, are informed about and sign the following Code of Conduct:

CODE OF CONDUCT FOR CONTRACTOR'S PERSONNEL

We the Contractor [enter name of Contractor] have signed a contract with UNICEF for [enter description of the activities]. These activities will be carried out at [enter the Site and other locations where the activities will be carried out]. Our contract requires us to implement measures to address environmental and social risks related to the activities, including the risks

³¹ UNICEF has prepared a Sexual Abuse and Exploitation (SEA) and Sexual Harassment (SH) Prevention and Response Plan for the Project

of sexual exploitation and assault and gender-based violence.

This Code of Conduct is part of our measures to deal with environmental and social risks related to the activities. It applies to all our staff, including laborers and other employees at the at all the places where the activities are being carried out. It also applies to the personnel of every subcontractor and any other personnel assisting us in the execution of the activities. All such persons are referred to as “Contractor’s Personnel” and are subject to this Code of Conduct.

This Code of Conduct identifies the behavior that we require from all Contractor’s Personnel.

Our workplace is an environment where unsafe, offensive, abusive or violent behavior will not be tolerated and where all persons should feel comfortable raising issues or concerns without fear of retaliation.

Required Conduct

Contractor’s Personnel shall:

1. carry out his/her duties competently and diligently.
2. comply with this Code of Conduct and all applicable laws, regulations and other requirements, including requirements to protect the health, safety and well-being of other Contractor’s Personnel and any other person.
3. maintain a safe working environment including by:
4. ensuring that workplaces, machinery, equipment and processes under each person’s control are safe and without risk to health.
5. wearing required personal protective equipment.
6. using appropriate measures relating to chemical, physical and biological substances and agents; and
7. following applicable emergency operating procedures.
8. report work situations that he/she believes are not safe or healthy and remove himself/herself from a work situation which he/she reasonably believes presents an imminent and serious danger to his/her life or health.
9. treat other people with respect, and not discriminate against specific groups such as women, people with disabilities, migrant workers or children.
10. not engage in any form of sexual harassment including unwelcome sexual advances, requests for sexual favors, and other unwanted verbal or physical conduct of a sexual nature with other Contractor’s or Employer’s Personnel.
11. not engage in Sexual Exploitation, which means any actual or attempted abuse of position of vulnerability, differential power or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. In Bank financed projects, sexual exploitation occurs when access to or benefit from Bank financed Goods, Works, Consulting or Non-consulting services is used to extract sexual gain.
12. not engage in Sexual Assault, which means sexual activity with another person who does not consent. It is a violation of bodily integrity and sexual autonomy and is broader than narrower conceptions of “rape”, especially because (a) it may be committed by other means than force or violence, and (b) it does not necessarily entail penetration.
13. not engage in any form of sexual activity with individuals under the age of 18, except in

case of pre-existing marriage.

14. complete relevant training courses that will be provided related to the environmental and social aspects of the Contract, including on health and safety matters, and Sexual Exploitation and Assault (SEA).
15. report violations of this Code of Conduct; and
16. Not retaliate against any person who reports violations of this Code of Conduct, whether to us or the Employer, or who makes use of the Grievance mechanism for Contractor's Personnel or the project's Grievance Mechanism.

Raising Concerns

If any person observes behavior that he/she believes may represent a violation of this Code of Conduct, or that otherwise concerns him/her, he/she should raise the issue promptly. This can be done in either of the following ways:

1. Contacting the Individual designated by the Contractor [enter name of Contact]
2. In writing at this address []
3. By telephone at []
4. In person at []
5. Calling [] to reach the Contractor's hotline and leave a message (if available)

The person's identity will be kept confidential, unless reporting of allegations is mandated by the country law. Anonymous complaints or allegations may also be submitted and will be given all due and appropriate consideration. We take seriously all reports of possible misconduct and will investigate and take appropriate action. We will provide warm referrals to service providers that may help support the person who experienced the alleged incident, as appropriate.

There will be no retaliation against any person who raises a concern in good faith about any behavior prohibited by this Code of Conduct. Such retaliation would be a violation of this Code of Conduct.

Consequences of Violating the Code of Conduct

Any violation of this Code of Conduct by Contractor's Personnel may result in serious consequences, up to and including termination and possible referral to legal authorities.

For Contractor's Personnel

I have received a copy of this Code of Conduct written in a language that I comprehend. I understand that if I have any questions about this Code of Conduct, I can contact [enter name of Contractor's contact person with relevant experience in handling gender-based violence] requesting an explanation.

Name of Contractor's Personnel: [insert name]

Signature: _____

Date: (day month year): _____

Countersignature of authorized representative of the Contractor:

Signature: _____

Date: (day month year): _____

A copy of the code shall be displayed in a location easily accessible to the community and

project affected people. It shall be provided in languages comprehensible to the local community, Contractor's personnel (including sub-contractors and day workers) and affected persons.]

Contractor Environmental and Social Reporting

The Contractor shall report major work-related incidents, accidents or loss of life to UNICEF or the relevant Implementing Partner **within 48 hours** of their occurrence.

The Contractor shall monitor, keep records and report on the following environmental and social issues:

- *Safety*: hours worked, lost time injury (LTI), lost workdays, recordable incidents and corresponding Root Cause Analysis (lost time incidents, medical treatment cases), first aid cases, high potential near misses, and remedial and preventive activities required (for example, revised job safety analysis, new or different equipment, skills training, and so forth).
- *Environmental incidents and near misses*: environmental incidents and high potential near misses and how they have been addressed, what is outstanding, and lessons learned.
- *Major works*: those undertaken and completed, progress against project schedule, and key work fronts (work areas).
- *ESHS requirements*: noncompliance incidents with permits and national law (legal noncompliance), project commitments, or other ESHS requirements.
- *ESHS inspections and audits*: by the Contractor, UNICEF and its Implementing Partners, or others—to include date, inspector or auditor name, sites visited and records reviewed, major findings, and actions taken.
- *Workers*: list of workers at each site, confirmation of ESHS training, indication of origin (expatriate, local, nonlocal nationals), gender, age with evidence that no child labor is involved, and skill level (unskilled, skilled, supervisory, professional, management).
- *Training on ESHS issues*: including dates, number of trainees, and topics.
- *Footprint management*: details of any work outside boundaries or major off-site impacts caused by ongoing construction—to include date, location, impacts, and actions taken.
- *External stakeholder engagement*: highlights, including formal and informal meetings, and information disclosure and dissemination—to include a breakdown of women and men consulted and themes coming from various stakeholder groups, including vulnerable groups (e.g., disabled, elderly, children, etc.).
- *Details of any security risks*: details of risks the Contractor may be exposed to while performing its work—the threats may come from third parties external to the project.
- *Worker grievances*: details including occurrence date, grievance, and date submitted; actions taken and dates; resolution (if any) and date; and follow-up yet to be taken—grievances listed should include those received since the preceding report and those that were unresolved at the time of that report.
- *External stakeholder grievances*: grievance and date submitted, action(s) taken and date(s), resolution (if any) and date, and follow-up yet to be taken—grievances listed should include those received since the preceding report and those that were unresolved at the time of that report. Grievance data should be gender disaggregated.
- *Major changes to Contractors environmental and social practices*.
- *Deficiency and performance management*: actions taken in response to previous notices of deficiency or observations regarding ESHS performance and/or plans for actions to be taken

should continue to be reported to UNICEF until it determines the issue is resolved satisfactorily.