



Somalia Urban Resilience Project Phase II (SURP-II)

**Component 4 (former CERC):
Response to Urban Forced Displacement**

**ENVIRONMENTAL AND SOCIAL MANAGEMENT
PLAN**

Construction of 4 boreholes
Construction of 80 communal water collection points
Construction of 600 gender sensitive twin latrines
Construction of 7 information centers
Laying of 7 km water supply pipe network
Rehabilitation of one health center
Excavation of 500 refuse pits at household level
Small scale site development activities (flood mitigations)

Daynile district (Zone-2, 4 & 5) & Kahda district

**BANADIR REGIONAL ADMINISTRATION-
SOMALIA**

FINAL FOR PUBLIC DISCLOSURE

24 May 2023

Prepared by IOM

Table of Contents

TABLE OF CONTENTS	2
LIST OF TABLES	3
LIST OF FIGURES	3
ABBREVIATIONS AND ACRONYMS	5
INTRODUCTION	6
SUBPROJECT SITES	7
SUBPROJECT DESIGN	12
ENVIRONMENTAL AND SOCIAL MANAGEMENT PLAN	26
LABOR MANAGEMENT PROCEDURES	38
STAKEHOLDER ENGAGEMENT	45
GRIEVANCE REDRESS MECHANISMS	48
MONITORING AND REPORTING	52
ROLES AND RESPONSIBILITIES IN IMPLEMENTING & SUPERVISING THE ESMP	52
INDICATIVE COST OF IMPLEMENTATION OF THE ESMP (OMITTED BEFORE DISCLOSURE)	54
ANNEX 1: STAKEHOLDER CONSULTATIONS (OMITTED BEFORE DISCLOSURE)	55
ANNEX 2: LIST OF AVAILABLE GBV SERVICE PROVIDERS IN BRA	56
ANNEX 3: ENVIRONMENTAL AND SOCIAL SCREENING FORM	60
ANNEX 4: GRM SCREENING FORM	65
ANNEX 5: LAND AGREEMENTS FOR CIVIL WORK SITES (OMITTED BEFORE DISCLOSURE)	68
ANNEX 6: INFRASTRUCTURE LOCATIONS	69

List of Tables

Table 1 Overview of BRA sites	12
Table 2 Number of workers required for WASH.....	24
Table 3 Number of Workers for Health Center rehabilitation	24
Table 4 Environmental and Social Mitigation Plan for general civil work activities.....	27
Table 5 ESMP for WASH and HLP activities	33
Table 6 key labor risks.....	38
Table 7 Total Participants in Stakeholders Consultations	45
Table 8 Consultation Dates	45
Table 11 GRM Screening Form for IOM.....	65
Table 12 GRM Screening Form for CONCERN.....	66

List of Figures

Figure 1 IDP settlement sites and zones in Mogadishu	7
Figure 2 BRA area map.....	8
Figure 3 Site visit, September 2022	9
Figure 4 Site visit, September 2022	10
Figure 5 Site visit, September 2022	10
Figure 6 Planned area of service provision for the WASH infrastructures and Weydow clinic	13
Figure 7 Weydow Health Center Layout.....	14
Figure 8 Weydow Health Center Section.....	15
Figure 9 Weydow Health Center Section.....	15
Figure 10 Weydow Health Center Roof Plan Layout	16
Figure 11 Water kiosk fitted with 6 faucets.....	17
Figure 12 Design of Latrines.....	18
Figure 13 Design of latrines	19
Figure 14 Design of Information Centers.....	19
Figure 15 Design of Information Centers.....	21
Figure 16 Sample Picture refusal pit.....	23
Figure 17 GRM organigram	51
Figure 37 BH-1 Water Supply System	69
Figure 38 BH-2 Water Supply System	69
Figure 39 BH-3 Khada Water Supply System	70
Figure 40 BH-4 Water Supply System	70
Figure 41 Branching pipe length from BH-1	71
Figure 42 Branching pipe length from BH-2	71
Figure 43 Branching Pipe Length from BH-3.....	71
Figure 44 Branching Pipe length from BH-4	72
Figure 45 Water Collection Point from BH-1	72
Figure 46 Water Collection Points locations from BH-2	73
Figure 47 Water Collection Points location from BH-3.....	73
Figure 48 Water Collection Points locations from BH-4	74

Figure 49 Latrine locations.....	75
Figure 50 Twin latrines in Zone 2.....	82
Figure 51 Twin latrines in Zone 4.....	82
Figure 52 Twin Latrines in Zone 5	82
Figure 53 Twin latrines in Zone 6.....	83

Abbreviations and Acronyms

AAP	Accountability to Affected Persons
BRA	Benadir Regional Administration
CCCM	Camp coordination and camp management
CERC	Contingent Emergency Component
CGI	Corrugated Iron
CoC	Code of Conduct
CSO	Civil Society Organization
CWW	Concern Worldwide
E&S	Environmental & Social
ESHS	Environmental, Social, Health and Safety
ESMF	Environmental and Social Management Framework
ESMP	Environmental and Social Management Plan
ESS	Environmental and Social Standard
GBV	Gender-Based Violence
GRC	Grievance Redress Committee
GREDO	Gargaar Relief and Development Organization
GRM	Grievance Redress Mechanism
HDP	High density polyethylene
HH	Household
HLP	Housing, Land and Property
IDP	Internally Displaced Person
IOM	International Organization for Migration
LMP	Labor Management Procedures
MoHADM	Ministry of Humanitarian Affairs and Disaster Management
MoPW	Ministry of Public Works Reconstruction and Housing
NGO	Non-Governmental Organization
NoFYL	Northern Frontier Youth League
NRC	Norwegian Refugee Council
OHS	Occupational Health and Safety
PCU	Project Coordination Unit
PIU	Project Implementation Unit
SCC	Somali Community Concern
SEA	Sexual Exploitation and Abuse
SH	Sexual Harassment
SMP	Security Management Plan
SPSL	Solar-Powered Street Lights
SURP	Somalia Urban Resilience Project
UNICEF	United Nation's Children Fund
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization
WSP	Waste Stabilization Pond

Introduction

Historical Drought in Somalia. Given the current historical drought in Somalia, it has been estimated that 4.6 million Somalis will face acute food shortages. It is further projected that some 7.7 million people will require humanitarian assistance, and 1,379,000 may be displaced through drought.¹ Based on the estimates of authorities in Puntland, the past three consecutive rainfall seasons, desert locust invasions, the COVID-19 pandemic and inflation have put over one million people in Puntland in jeopardy in regards to accessing to water, pasture, and food. In addition, in November 2020, Puntland was hit by cyclone Gate and an estimated 120,000 people in the Bari region are still recovering from the disaster. The worst affected areas of the ongoing drought are Burtinle of Nugaal; Caluula, Bargaal, Wandala, Iskushuban, Bandarbeyle and Xaafuun and Bela in Bari Region; Xarfo in Mudug and Karkaar.² According to the FGS' needs assessment, the water shortages in coastal areas of Bari, Nugaal, and Sanaag Regions have displaced 10,000 people, mainly women and children and killed many livestock.³

Largest inflow of IDPs in BRA. In July 2021, the Camp Coordination and Camp Management (CCCM) cluster recorded almost 850,000 IDPs in Daynile and Kahda districts of BRA alone (see map below). This figure has increased by a further 120,000 IDPs in the first three months of 2022.⁴ Land in BRA is highly contested and the government has not been able to secure a large plot of land for IDP settlement. Consequently, the majority of IDPs are squatting on vacant private land without formal lease agreements with the private landowners, rendering them highly vulnerable to repeated forced evictions. In September 2021, Mogadishu accommodated more than 170,000 new drought-related IDPs from neighboring Lower Shabelle, Middle Shabelle, Bakool and Bay Regions.⁵

Component 4/CERC under SURP II. The Component 4⁶ 'Response to Urban Forced Displacement' of the Somalia Urban Resilience Project Phase II (SURP-II) finances approved drought response activities in the three cities of Mogadishu, Baidoa, and Garowe that will likely receive a large inflow of IDPs triggered by the drought. Support will be provided for multiple basic services in (i) water sanitation and hygiene (WASH), (ii) health, and (iii) housing, land and property (HLP) for IDPs, aimed at strengthening government responses to the drought. The implementation of activities will be led by the International Organization for Migration (IOM) in partnership with its partners in the Danwadaag Consortium, which comprise the Norwegian Refugee Council (NRC), Concern Worldwide (CWW) and Gargaar Relief and Development Organization (GREDO). While the Component 4 activities are implemented under a different modality to ensure timely implementation, the IOM closely coordinates with the existing SURP-II institutional arrangements. IOM has signed an Output Agreement with the federal-level Project Coordination Unit (PCU), which is responsible for the monitoring and supervision of overall Component 4 activities, while the municipality-level Project Implementation Units (PIUs) oversees the city-level day-to-day activities implemented by IOM and its partners.

ESMP for BRA Sites: The Environmental and Social Management Framework (ESMF) specific to Component 4 activities⁷ was prepared to address E&S risks and impacts of Component 4 activities⁸.

¹ Drought Response Plan Somalia 2022, p. 3.

² The Government of Somalia, Needs Assessment, March 22.

³ The Government of Somalia, Needs Assessment, March 22.

⁴ CCCM New Arrival tracker

⁵ PRMN Monitoring figures

⁶ The SURP-II Second Additional Financing (AF-II) restructured the project, adding a new component – Component 4: Response to Urban Forced Displacement - and merged the ongoing support for drought-IDPs under the CERC to this component.

⁷ IOM, Environmental and Social Management Framework (ESMF) for SURP-II Component 4: Response to Urban Forced Displacement', November 2022

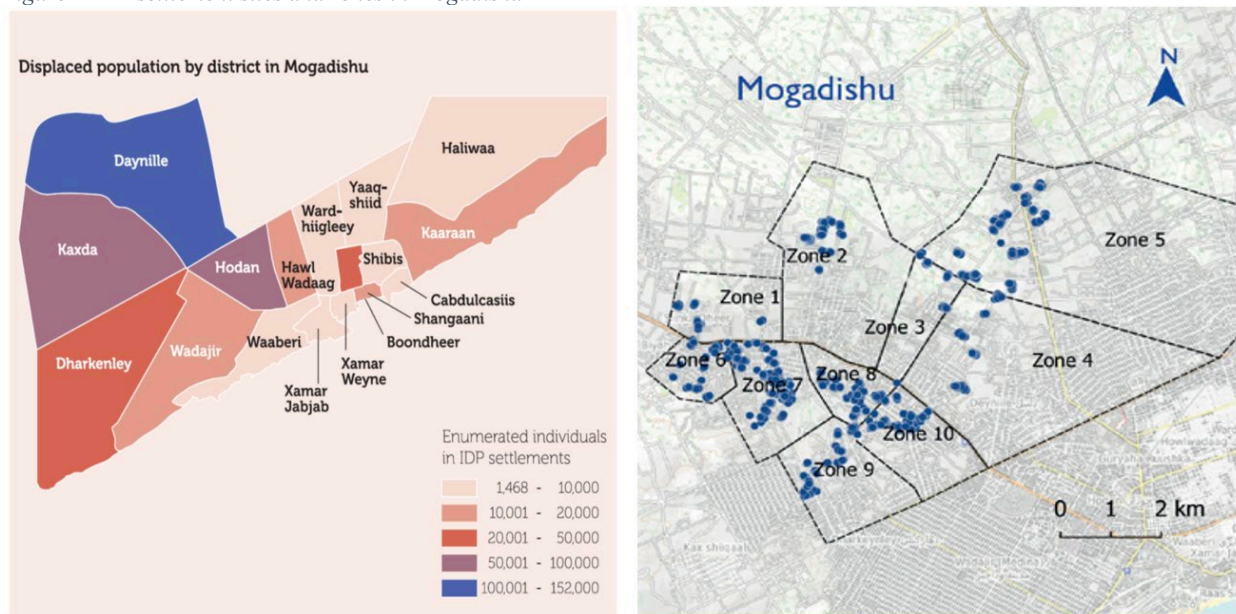
⁸ The Second Additional Financing to SURP II was approved in December 2022, for which the CERC-ESMF was renamed as "the ESMF for Component 4: Response to Urban Forced Displacement" and updated to incorporate the Second AF.

As per World Bank Guidance (October 2017), the Component 4 ESMF builds on the existing E&S framework instruments for SURP II as much as possible. While the Component 4-ESMF and site-specific ESMPs to be prepared for activities involving civil works are **designed to be as concise and action-oriented as possible to address time-sensitive emergency situations**, they should be read in conjunction with the existing E&S instruments of SURP II, which provide relevant environmental and social baseline information, legal and institutional framework, applicable WB E&S standards and guidelines and gap analysis. As indicated in the Component 4 ESMF, this ESMP for the BRA IDP sites has been prepared to cover activities involving civil works for the construction of 4 boreholes, 80 communal water collection points, 600 gender- disaggregated and lockable latrines, 7 information centers, laying of 7 km water supply pipe network and rehabilitation of one health center, excavation of 500 refuse pits at household level and small scale site development activities (such as flood mitigations) at Daynille district (Zone-2, 4 & 5) & Kahda district.

Subproject Sites

Daynille district (Zone-2, 4 & 5) & Kahda district in BRA:

Figure 1 IDP settlement sites and zones in Mogadishu



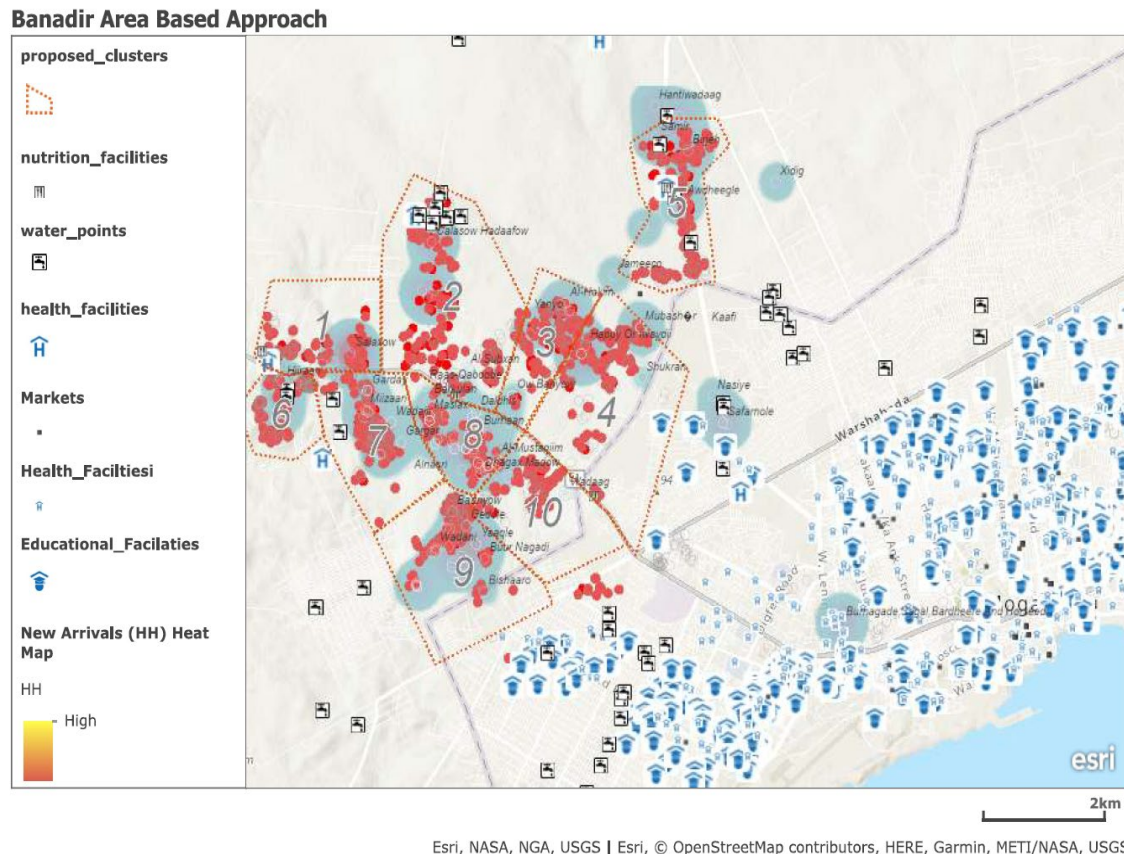
Source: IOM Oct. 2022

BRA hosts the largest number of IDPs, estimated at over 850,000,⁹ and is expected to have 275,730 people in IPC level 4 (“Emergency”), the highest number across the country based on the latest FEWSNET projections from September 2022. According to the Government’s needs assessment, the sites which are already overcrowded and overstretched with scarce basic services such as food, shelter and water and sanitation are also dealing with increased evictions of IDPs by private landowners.¹⁰ More than 42,000 IDPs are in urgent need of water; and 50 children in Daynille and Kahda Districts are

⁹ Amnesty International. 2020 “Somalia: Internally Displaced People Surviving by ‘the Grace of God’ amidst COVID-19.”

¹⁰ The Government of Somalia, Contingency Emergency Response Implementation Plan – CERIP, Somalia Drought Displacement Impact Response, March 22. In February, more than 500 IDPs were evicted from two settlements in Bangala area in Daynille, at the expiry of their tenure on the private land; and 2,700 IDPs were ordered to vacate Mandeeq, Balanbalis and Wardhere settlements in Section Three of Kahda District by a private landowner. Source: NRC eviction tracker.

suspected to have measles cases with deaths reported among new arrivals.¹¹ Given the number of newly drought displaced arrivals and the severity of the needs in BRA, the proposed activities will focus on the 3 zones in Daynille district marked on the figure below (Zone-2, 4 and 5) and Kahda district. This area-based approach will leverage the existing operational footprint of the Danwadaag partners and provide complementarity to other humanitarian funding such as ECHO.



Esri, NASA, NGA, USGS | Esri, © OpenStreetMap contributors, HERE, Garmin, METI/NASA, USGS

Figure 2 BRA area map

E&S Baseline at BRA subproject sites: The physical environment in BRA is broadly characterized by a strong existing anthropogenic imprint typical for intra-urban areas, including ageing and poorly maintained transport infrastructure, residences, shops, workshops, drainage systems and highly altered biodiversity and land cover. The stress of urbanization is particularly pronounced in BRA. As presented above, BRA hosts the largest number of IDPs, estimated at over 850,000, and is expected to have 275,730 people in IPC level 4 (“Emergency”), the highest number across the country. Since the areas have been inhabited by protracted IDPs for quite some time, it has almost become a settlement, de facto slums in precarious conditions. The growing number of IDPs has placed considerable stress on municipal service delivery capacity, increasing social tensions between host communities and the displaced. On the environmental aspects, no significant vegetation has been identified at the proposed site, and no significant impacts on habitats and fauna are anticipated. A quick E&S screening has been performed based on the E&S screening form included in the ESMF of the SURP-II and submitted to the PIU/PCU (Annex 3).

On September 2022, a field visit was conducted on both districts by IOM, CWW, District focal points, Somali Community Concern (SCC) in Kahda and Northern Frontier Youth league (NoFYL) as part of the project preparation and E&S screening. During the visit, the team had interviews with key community

¹¹ The Government of Somalia, Contingency Emergency Response Implementation Plan – CERIP, Somalia Drought Displacement Impact Response, March 22.

members and IDP households, assessed the overall humanitarian needs of the new IDP arrivals by asking their life conditions and priority needs (the section “Stakeholder Engagement” provides the summary of stakeholder consultations).

Key Findings

- The team confirmed and verified that both district’s targeted locations, Daynile IDPs (Zone 4 and 5) and Kahda IDPs, are the areas with the significant new IDP arrivals and with the most humanitarian needs.
- The team, together with the district authorities and the CCCM partners in both districts, identified the sites with significant new IDP arrivals, which have the most needs and to be targeted for SURP-II Component 4 activities.
- Potential stakeholders in both districts were identified for consideration in the stakeholder consultation process for the ESMP preparation.
- The number of the new IDP households in both districts with higher needs for basic WASH and Health and Nutrition services have doubled since the project design. During the visit, the team met large number of new IDP arrivals, with no shelter and other basic needs, who recently displaced from the conflict in Hiran and lower Shabelle regions between Government and the AS.



Figure 3 Site visit, September 2022



Figure 4 Site visit, September 2022



Figure 5 Site visit, September 2022

Land for construction activities:

1. **Private land:** Since the entire land for the proposed construction activities is privately owned, a thorough negotiation has to be conducted between different stakeholders to provide right of ways for the construction of the WASH and other proposed infrastructure. The HLP component has to make sure that any land tenure documentation secured for IDP sites also give access to the WASH infrastructures on the right of way section of the lands.

2. **Land documentation to be obtained before commencement of construction:** Considering above, the locations of the proposed construction activities (Annex 5) have been selected and finalized in close coordination with the local authorities, landowners, IDPs and host communities. Before commencing the construction, a due diligence and prior screening is being conducted and land tenure security is obtained through negotiations with private landowners by a written lease agreement for a certain period of years to cover project activities. As indicated in the CERC-ESMF, this arrangement aims to prevent social tensions, eviction and land dispute over the project sites. The BRA will have copies of all land tenure agreements and confirm them before the commencement of the construction to avoid any potential land disputes. No land acquisition, neither physical nor economical displacement will occur for this subproject in BRA. Such sites will be excluded from CERC activities, as per the CERC-ESMF.

3. **Land status of individual project sites:** The land status of the individual construction activities are as follows:

(1) **Rehabilitation of Weydow health center** (Daynille District, longitude 45.25416, latitude 2.06861): The land documentation for the Weydow clinic, with the support of NRC, has been cleared with the community and the public notary. The project team is now following up with the district authority to formalize the process, which will be finalized before the start of civil work.

(2) **Construction of 7 information centers** (4 by NoFYL & 3 by SCC): The land documentation for the following 7 information centers has been cleared with the community and the public notary and confirmed by the district authority.

IP	Site	GPS Coordinates
NoFYL	Kobciye	2.0796938, 45.2995328
NoFYL	Faanole	2.1014681, 45.2902758
NoFYL	Ruun Aduunyo	2.0860505, 45.2813821
NoFYL	Maracade	2.0842793, 45.2717666
SCC	Hoosweyne	N 2°4'7" E 45°14'18"
SCC	Samodeeq	N 2° 3'45" E 45°14'41"
SCC	Bananey	N 2°3'39" E 45°13'51"

(3) **Construction of 4 boreholes** (Daynille District Zone 4, 5, Gaarasbaley and Khada District): The land documentation for the following 7 information centers has been cleared with the community and the public notary and confirmed by the district authority.

(4) **Construction of 7 km piping networks, 80 water kiosks (with four 40 m³ water storage tanks) and 600 latrines:** Annex 5 provides the sample land documentation for these construction activities. The HLP support to secure land documentation (land titles and long-term lease agreement) with private landowners is ongoing. Should securing the land tenure agreements not succeed for the proposed sites, other locations with land tenure security will be considered.

(5) **Small scale site development activities (like flood mitigations) and excavation of 500 refuse pits at household level:** It has to be noted that the 500 refuse pits are located inside the IDP sites with land tenure documentation shown in the annexes with more sites to follow

suit. This means that same land documentation enables site related activities to be done within that specific IDP site with proper documentation.

Subproject Design

The proposed program in BRA will help reduce the vulnerability of the newly arrived IDPs by providing: (i) **health services** that are accessible to approximately 8,411 IDP households (HHS) (50,470 persons) in the two districts of Kahda and Daynile where the majority of the newly arriving IDPs are concentrated; (ii) 3,700 HHS will be reached through **WASH services** (Clean water and sanitation services); (iii) 7,500 HHS will receive **emergency health and nutrition services**; and (iv) 3,500 HHS will be supported with **tenure security**. The proposed civil works covered by this ESMP are the following: (i) IOM to construct essential WASH infrastructures, including boreholes, piping networks, water kiosks, latrines; and excavation of 500 refuse pits at household level and small scale site development activities (such as flood mitigations); (ii) Concern Worldwide to rehabilitate a health center (Weydow health center); and (iii) NoFYI and SCC (IOM's implementing partners (IPs)) to construct 7 information centers.

Table 1 Overview of BRA sites

Zone-2 , 4 & 5, Daynile District ; Kahda (Zone-6)	
Size	4,195 hectares
No of HH	77,034 HHS (392,345 individuals)
Individual Plot Size	Varying plot sizes
GPS	Zone-2 (Lat: 2.080033°; Long : 45.256614°) Zone-4 (Lat: 2.061694° ; Long : 45.286708°)Zone-5 (Lat: 2.081857° ; Long : 45.301765°); Kahda Zone-6 (Lat: 2.063864°; Long : 45.230325°)
Land Status	Privately owned

Project Activities

Following the screening process against the positive list and the excluded activities provided in the ESMF, the civil work interventions in BRA financed by the Component 4 have been determined as follows:

- Hydrogeological surveying
- Rehabilitation of Weydow health center (Daynile District, longitude 45.25416, latitude 2.06861): expansion into additional 5 rooms
- Construction of 4 boreholes
- Construction of 7 km piping networks
- Construction of 80 water kiosks & four 40 m³ water storage tanks.
- Construction of 600 latrines
- Construction of 7 information centers (4 by NoFYL & 3 by SCC).
- Small scale site development activities like flood mitigations via backfilling and sandbagging of low land areas; and bush clearance of paths (scoop out and clear any vegetative remnants, plastics, and other debris etc..) to reduce the risk of fire outbreak
- Excavation of refuse pits at household level, so that refuse is removed from the settlement before it becomes a nuisance or a health risk.

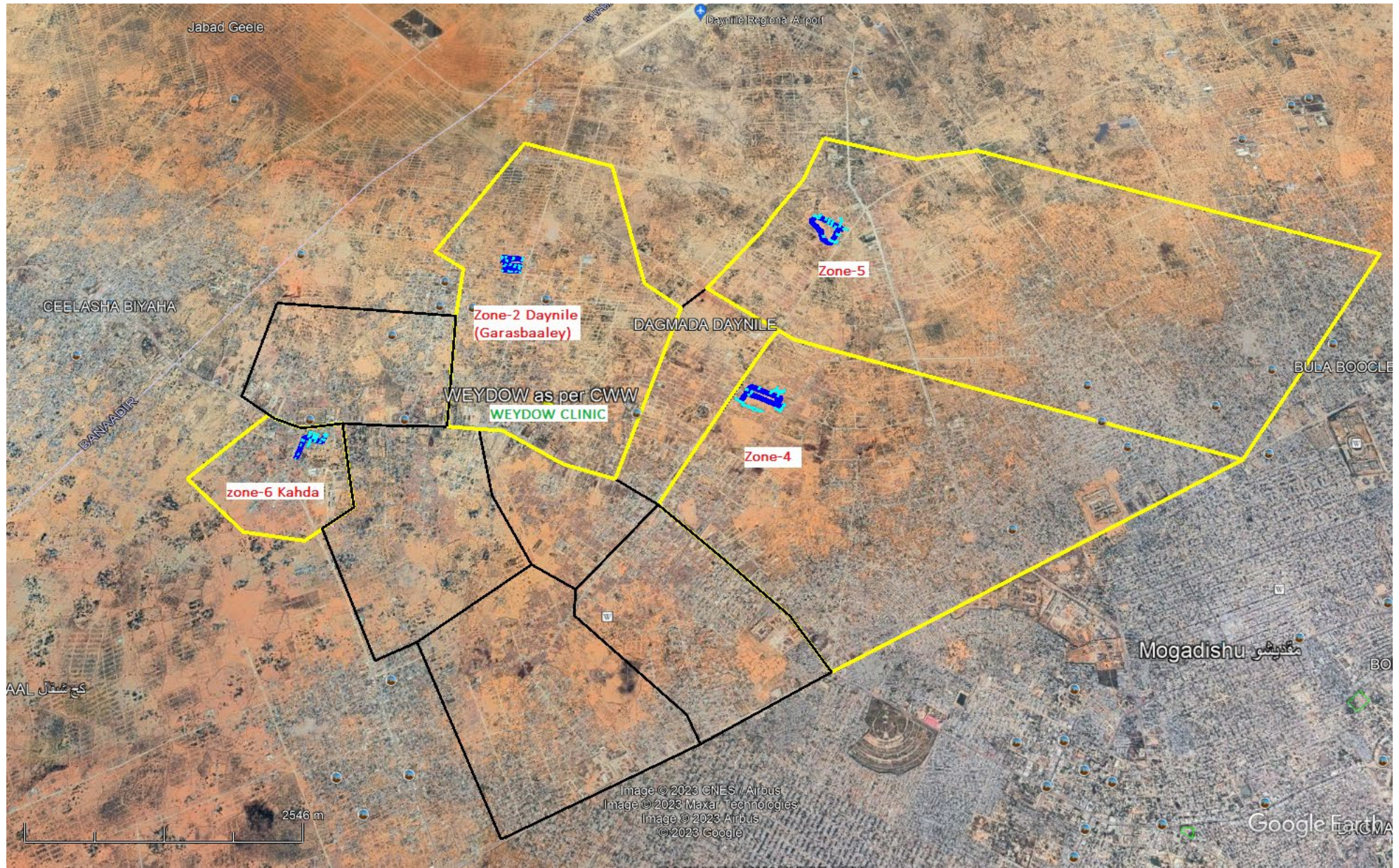
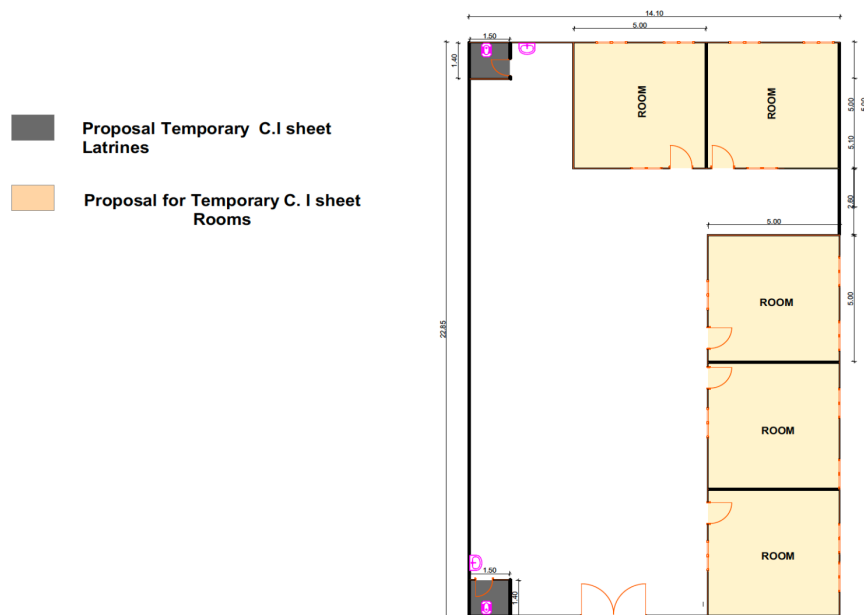


Figure 6 Planned area of service provision for the WASH infrastructures and Weydow clinic

The detailed locations of the planned WASH infrastructures (Boreholes, pipe lines, water collection points and 300 twin-latrines) have been attached in Annex 5.

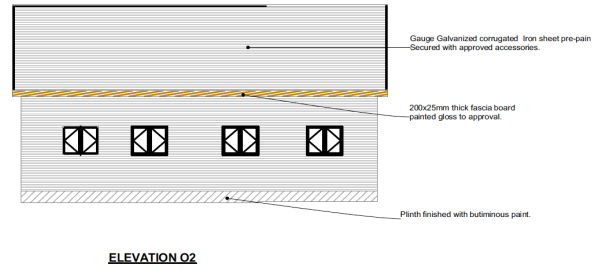
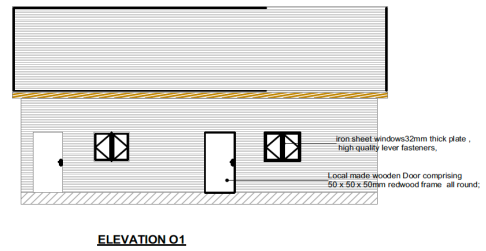
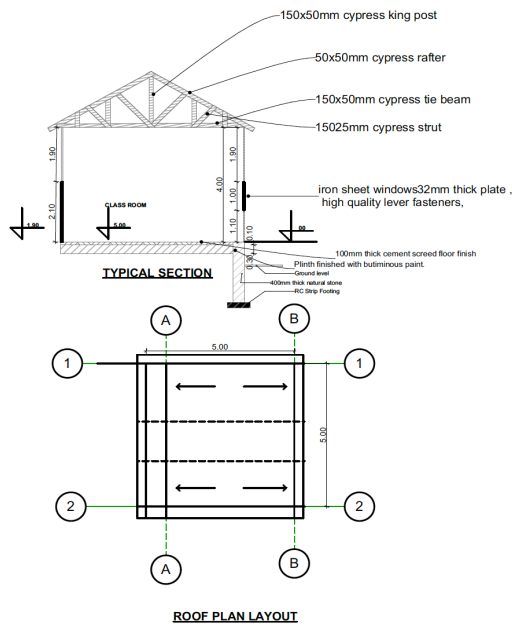
The design phase will include the following activities:

- **Hydrogeological surveying:** A local firm carried out the hydrological surveying of the site with a size of 4,195 hectares, covering all the features within and outside the boundary of at least a distance of 500 meters from the boundary. The hydrogeological surveying was conducted in Daynile district (Zone-2,4 & 5) & Kahda district (Zone-6) and 4 potential water bearing aquifers were pinpointed which will quench the water demand of the IDPs in the target zones. The locations of the 4 boreholes with their proper land tenure documentation are attached in Annex 5.
- **Design of Weydow Health Center:** Weydow health clinic rehabilitation will include the construction of 5 new rooms and a waiting area.



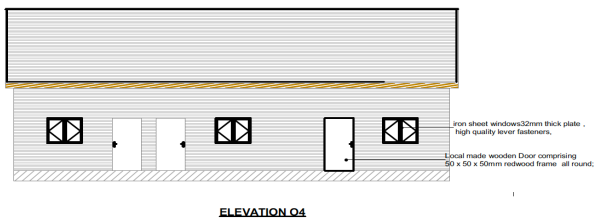
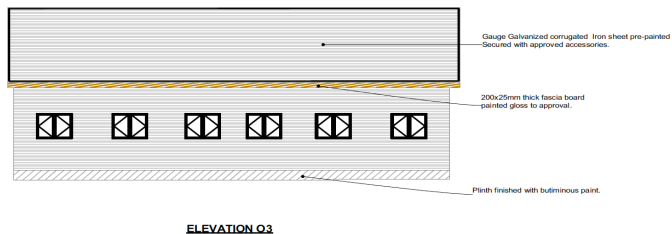
PROJECT TITLE	DONOR	DRAWING TITLE	Drg No.	Sheet No.	
Construction of 5 new rooms and one block of 2 ablution units in weydow MCH		LAYOUT	Drawing Scale	Date	
Mogadisho Somalia			1:100	Feb-2022	
			Modified by: Abdirahman Moallim	Checked by	

Figure 7 Weydow Health Center Layout



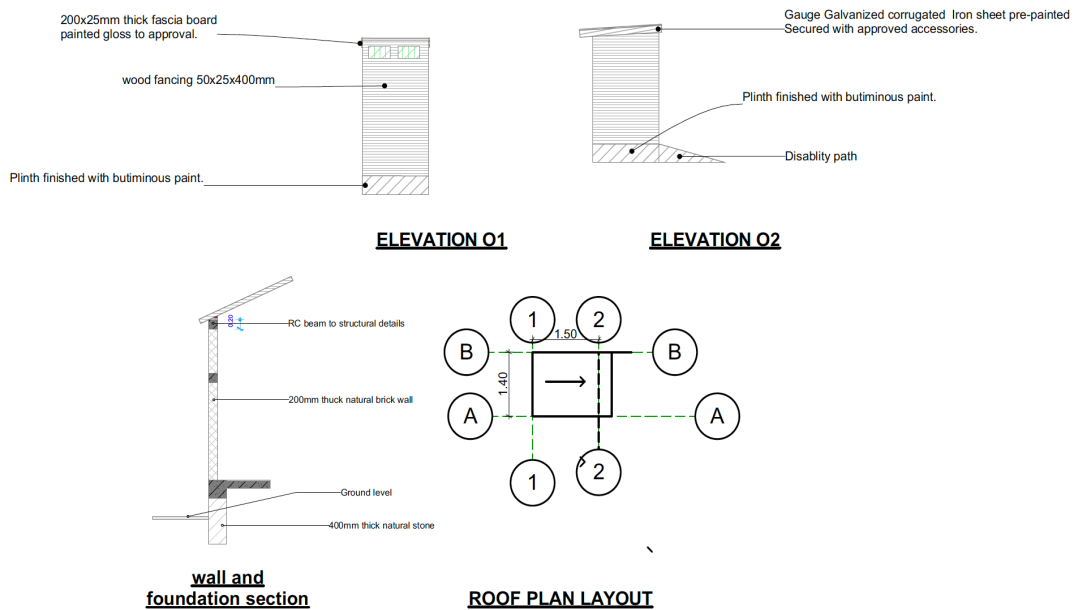
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Construction of 5 new rooms and one block of 2 ablation units in weydow MCH			Drawing Scale 1:100	Date Feb-2022	
Mogadisho Somalia			Modified by: Abdirahman Moallim	Checked by	

Figure 8 Weydow Health Center Section



PROJECT TITLE	DONOR	DRAWING TITLE SECTION	Drg No.	Sheet No.	
Construction of 5 new rooms and one block of 2 ablation units in weydow MCH			Drawing Scale 1:100	Date Feb-2022	
Mogadisho Somalia			Modified by: Abdirahman Moallim	Checked by	

Figure 9 Weydow Health Center Section



PROJECT TITLE	DONOR	DRAWING TITLE	Drg No.	Sheet No.	
Construction of 5 new rooms and one block of 2 ablution units in weydow MCH		SECTION	Drawing Scale	Date	
Mogadisho Somalia			1:100	Feb-2022	
			Modified by: Abdirahman Moallim	Checked by	

Figure 10 Weydow Health Center Roof Plan Layout

Design of Boreholes: The technical details of the borehole designs and type of submersible pump to be used etc. are presented in the hydrogeological report by Express engineering.

Design of Piping network: As seen in Annex 5, the water supply system consists of 3 components as depicted below:

1. Main water supply line which takes the water from the elevated tanks along the public road by respecting the right of ways. A small booster pump fitted at the outlet of the elevated tanks maintains the minimum pressure in the system.
2. Branching pipes which take the water from the main water supply line to the communal water collection points.
3. Communal water collection points located inside the IDP sites.

Design of Water kiosks:

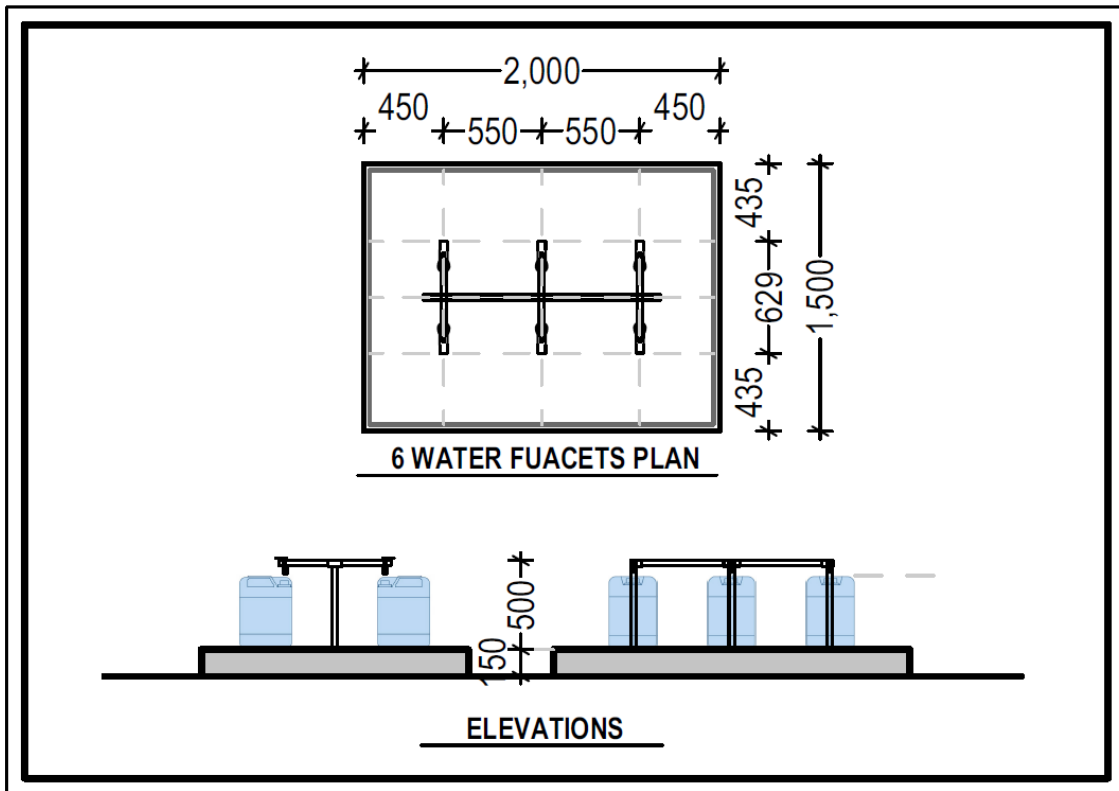


Figure 11 Water kiosk fitted with 6 faucets

Design of Latrines: Depicted below is the design of the 600 latrines to be constructed in both sites. Latrines will be located closely to the homes to ensure the safety, especially of women, at night. Latrine design and construction will consider a specific number of latrines to be adapted for disabled and elderly persons. Furthermore, the latrines will provide a disposal location for women’s hygiene materials in the form of a separate bin with cover or another suitable option to reduce the density of flies.

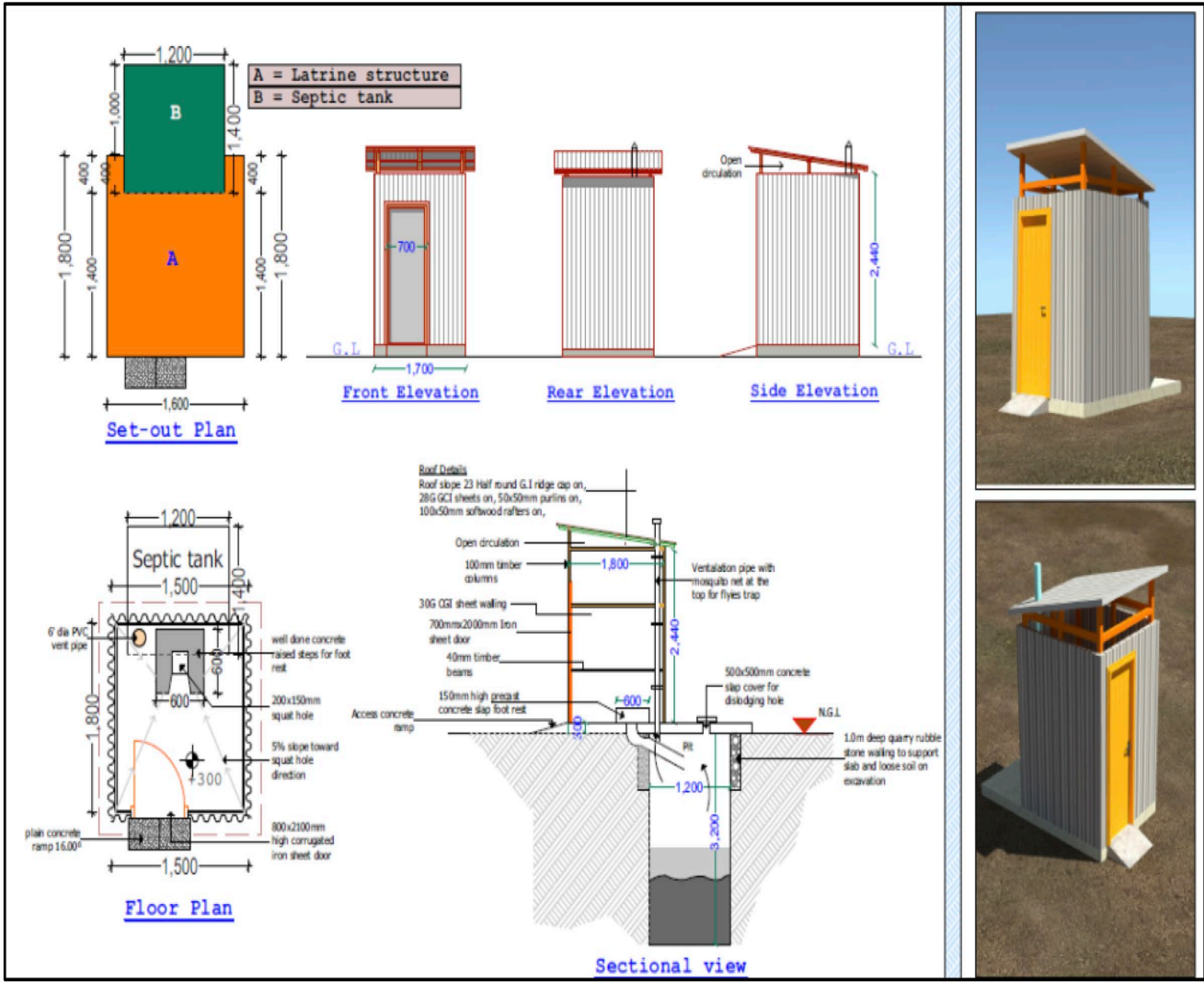


Figure 12 Design of Latrines

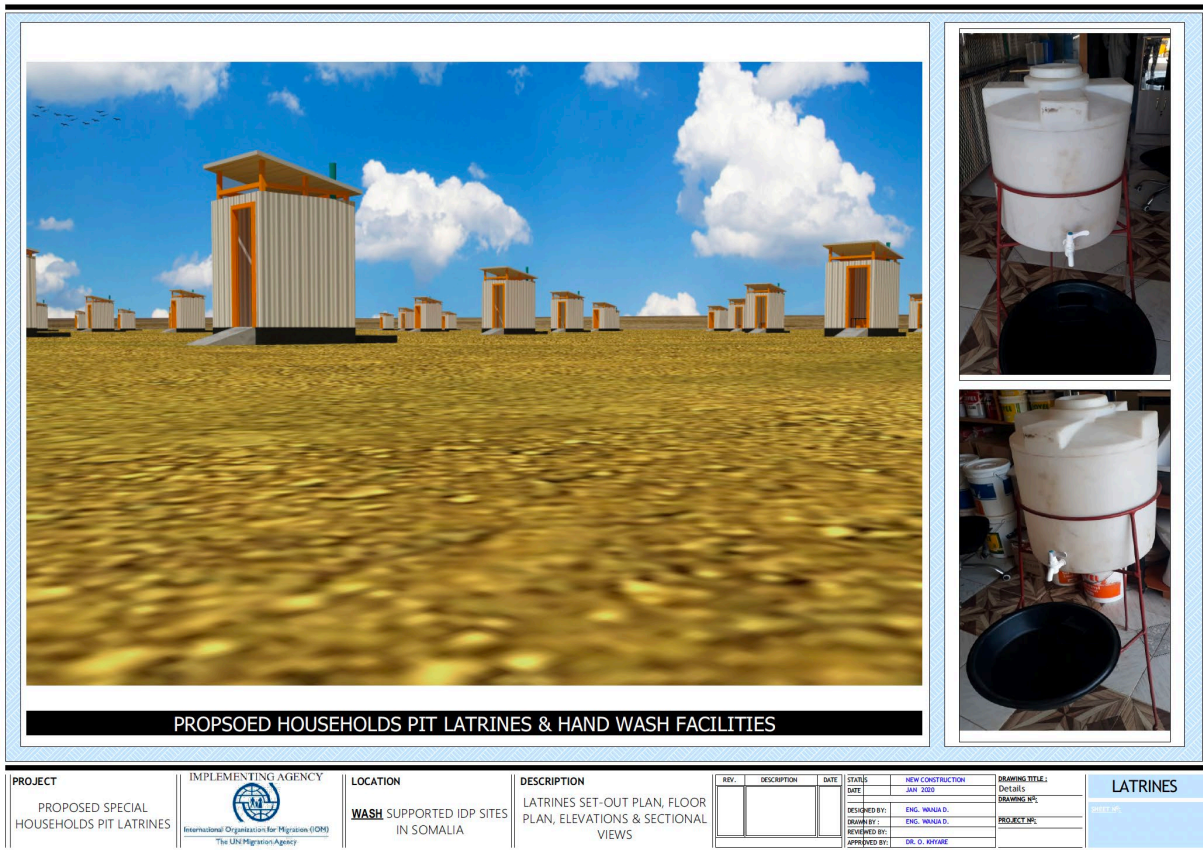


Figure 13 Design of latrines

Design of Information Centers: Depicted below is the design of the Information Centers.

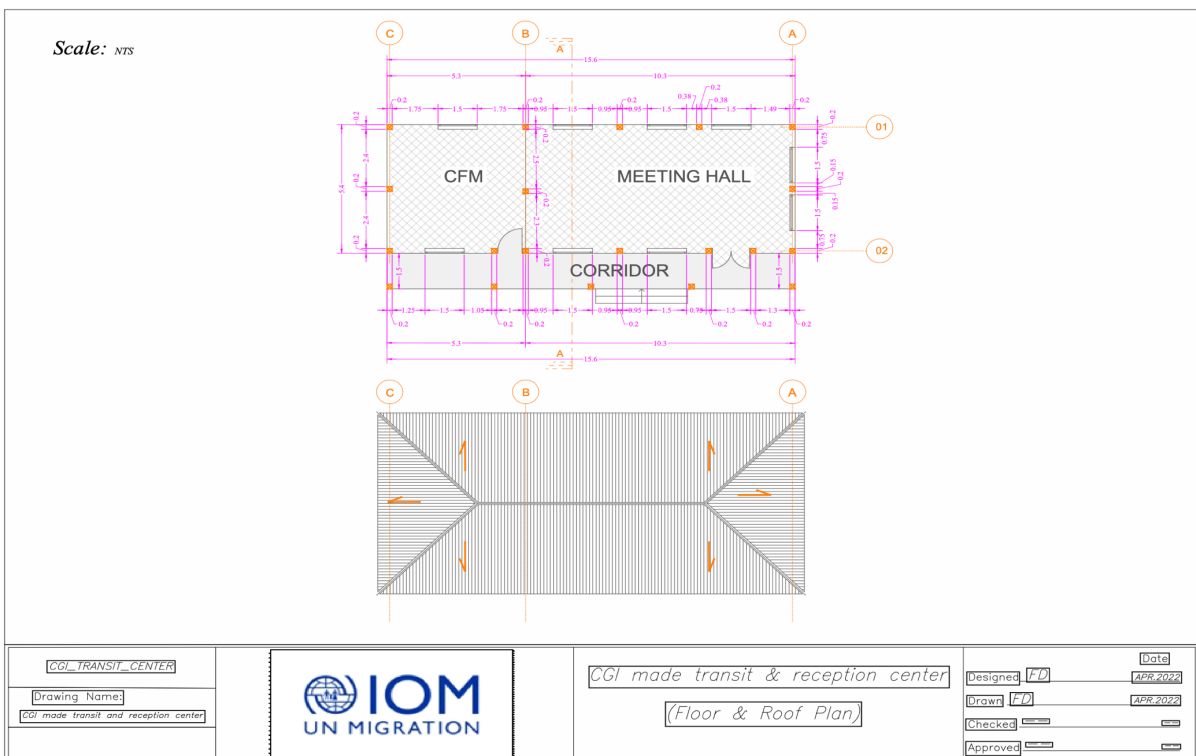
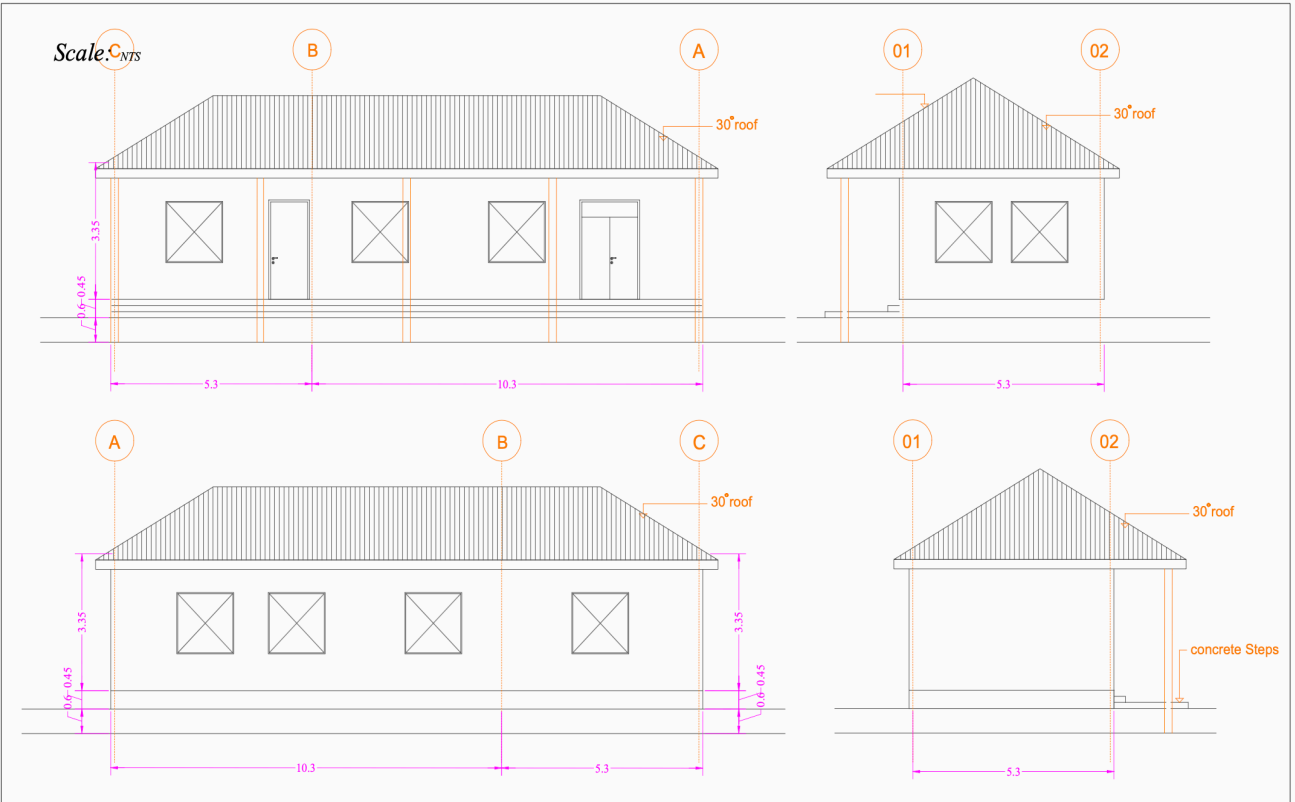


Figure 14 Design of Information Centers



CGI_TRANSIT_CENTER

Drawing Name:
CGI made transit and reception center



CGI made transit & reception center

(Elevation view)

Designed	FD	Date	APR 2022
Drawn	FD		APR 2022
Checked			
Approved			

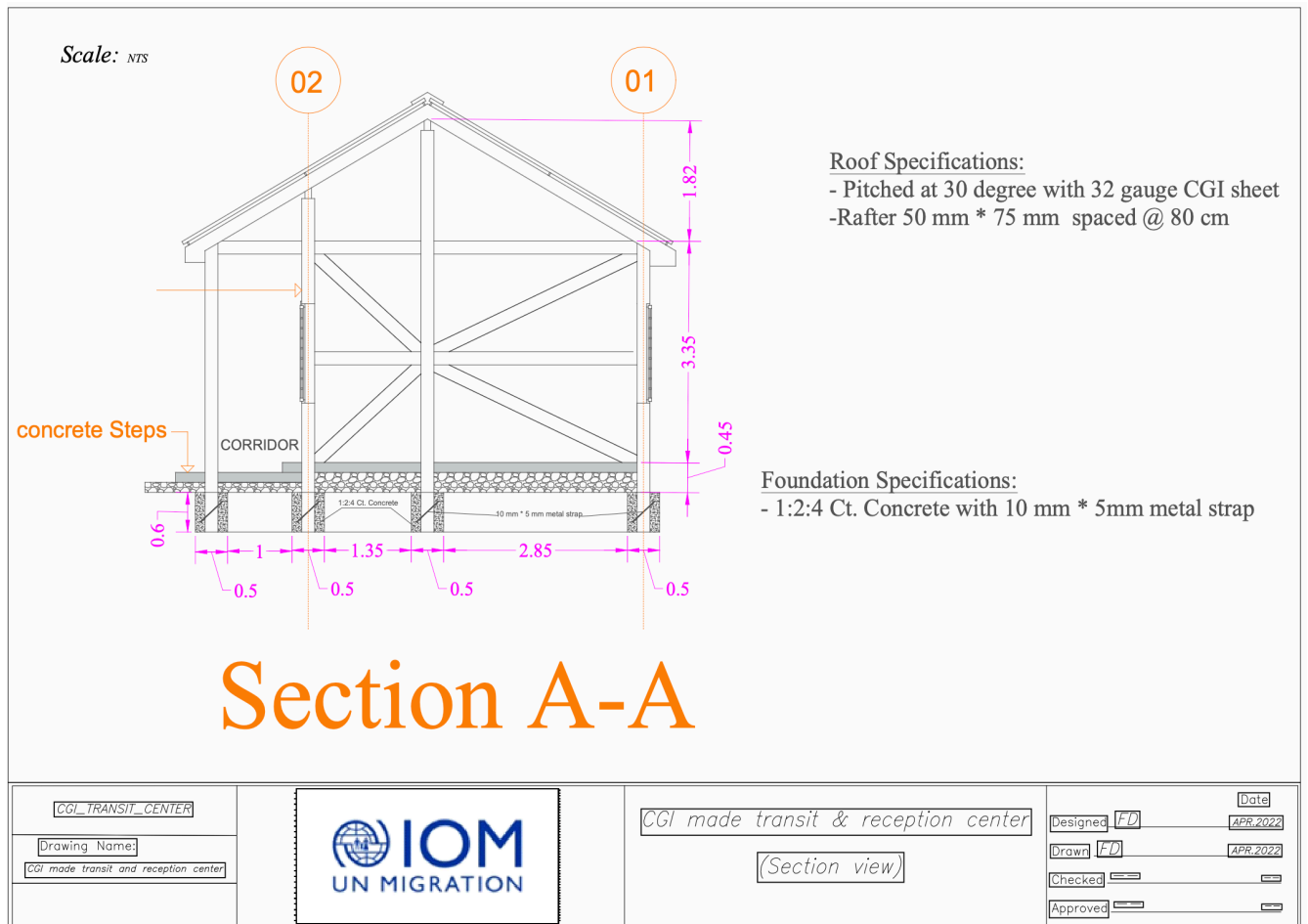


Figure 15 Design of Information Centers

The Construction Phase will comprise the following:

- **Rehabilitation of Weydow health center.** Activities for the rehabilitation of Weydow Health Center will include:
 - Site mobilization and clearance, including removal of damaged and extra materials when work is done
 - Excavation for foundation trench
 - Cast concrete for blinding on the floor
 - Return, fill and ram excavated materials to where directed by engineer
 - Construction of Strip Foundation
 - Installing of corrugated iron sheet with timber poles for wall construction
 - Install locally made lockable wooden door
 - Supply and fix iron sheet Windows
 - Construct roofing with galvanized corrugated iron sheets
 - Supply and fabricate timber trusses.
 - Supply and fix wall plate

- **Construction of boreholes:** The technical method of borehole construction and casing has been explained in the hydrogeological surveying report. Besides that, construction of 40m³ water storage tank, installation of solar system, genset, submersible pump and rooms for generator and Guards will be done concurrently.

- Construction of Piping Networks: The land tenure security agreements have been finalized for all of the sites. The right of way along the public roads shall be used for underlaying the main supply pipe networks. 7 km of transmission and distribution lines will be underlaid. In addition to that, gate valves, GI pipes at road crossings and other appurtenances will also be installed.
- Construction of water kiosks: 80 water kiosks, each fitted with 6 faucets and serving 30 HHS per kiosks, will be installed at the IDP sites with secured land tenure agreements.
- Construction of latrines: 600 gender disaggregated lockable latrines with hand washing facility will be constructed.
- Excavation of refuse pits at household level
 - ✓ 500 Households with sufficient space will be trained to excavate refuse pits. The pits will be not less than 10 m and 15 meters from dwellings and water sources respectively and at least 1.5 m above the water table. This activity will be done by the same households via Cash for Work (CFW) scheme.

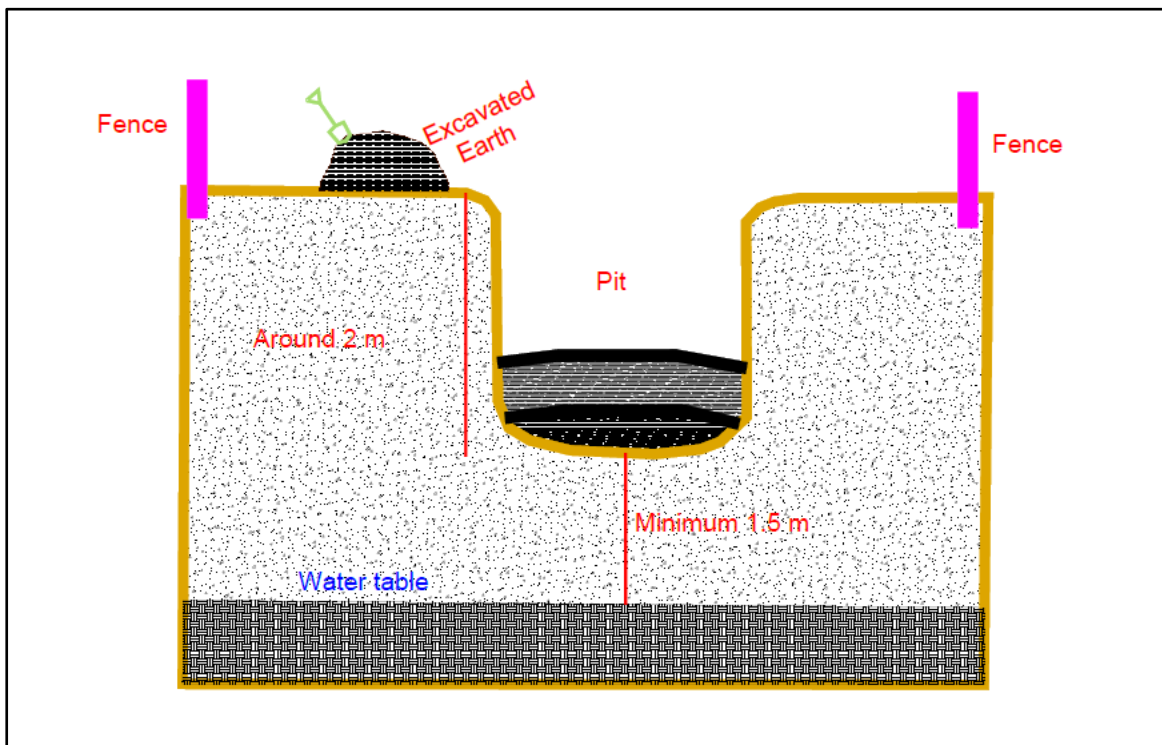


Figure 16 Sample Picture refusal pit

- Small scale site development activities like flood mitigations via backfilling and sandbagging of low land areas; bush clearance of pathways to reduce the risk of fire outbreak.

The following equipment will be used during construction by IOM and its IPs:

No.	Equipment Type and Characteristics	Minimum Number Required
1.	Rented cars for the to and from movement of workers from the project site	5
2.	Trucks for overhauling construction materials to the sites.	Maximum of 15 trucks per day.
3.	Hand tools & Digging tools for the pit excavation (Hammer, Pickaxe, shovel, wheelbarrow, spade, 5k.g Stone breaker)	To be determined by the selected contractor
4.	Hand tools (High density polyethylene HDPE pipe cutter, HDPE pipe jointer...etc.)	Depends on the vendor to be selected
5.	Digging tools for the small-scale site maintenance activities (Pickaxe, shovel, wheelbarrow, spade, 5k.g Stone breaker)	100 each
6.	Drilling rig (complete set), hammer bits, hydraulic hoses connections and fittings , drilling generators	One complete set

The following amounts and types of workers are expected:

- Workers under IOM IPs for small scale site maintenance activities: 500 persons will be targeted for the conditional cash for work (CFW), who will support site maintenance through sandbagging, digging of pit-holes for garbage collection, bush clearing of pathways, establishing /Rehabilitating /Enhancing drainage systems, and supporting the site decongestion exercise. Each person will work for 8 days per month (2 days per week for 3 hours each day) to be paid \$50 each per month for 2 months. (Minimum 12 Person per camp*40 Camps * \$ 50 per month* 2 months).
- For the construction of the 7 information centers, the contractor will provide the following workers.

Table 1 Number of Workers for Health Center rehabilitation

Item No.	Activity	No.	Skilled / Unskilled
1.	Site preparation and foundation works	23	2 Civil engineer and 21 foremen
2.	Construction of 14 latrines & 7 information centers	21	14 carpenters & 7 unskilled labourers

- Workers under IOM contractor for WASH activities: For activities like latrine construction, water supply pipeline installation, the contractors will recruit the workers. The combined work force will not exceed 120 as follows:

Table 2 Number of workers required for WASH

Item No.	Activity	No.	Skilled / Unskilled
1.	Latrine construction	Approx.50	1 or 2 field engineers, 10 foremen, 40 manual diggers.
2.	Water supply pipeline installation	Approx. 50	1 water supply engineer, 1 civil engineer, 10 foremen, 40 manual diggers.
3.	Borehole drilling	Approx.20	2 Hydro-geological engineers, 2 rig operators, 6 skilled formen, 10 unskilled labourers.

- Workers under Concern for Weydow Health Center rehabilitation: The contractor for the Health Center rehabilitations will recruit/provide the following workers. They will not exceed 20, as follows:

Table 3 Number of Workers for Health Center rehabilitation

Item No.	Activity	No.	Skilled / Unskilled
3.	Site preparation	5	1 Civil engineer and 4 foremen
4.	Construction of 2 latrines	5	1 Civil engineer, 2 carpenters & 3 unskilled labourers
5.	expansion of the Health enter with additional rooms.	10	1 Civil engineer & 10 foremen

Worker Accommodation

- Workers Accommodation for WASH activities: As the sites are just at the outskirts of Mogadishu city, most of their specialized and unskilled workers are likely to be from Mogadishu city and have their own residence in the city. It is therefore not anticipated that a workers' camp is required.
- Workers Accommodation for Health Center rehabilitation: No accommodation necessary, as most of them will be day workers from the area.
- Workers Accommodation for Information centers construction: No accommodation necessary, as most of the skilled and unskilled workers are from the area.

Material for WASH activities, information centers and Rehabilitation of the clinic: The Corrugated Iron (CGI) sheets, timbers of varying size, nails, cement, sand, HDPE pipes of varying diameters etc. are locally available.

The operational phase activities will include:

- A water committee from the block served by communal water collection point will be formed by **IOM** to labor voluntarily in routine cleaning/maintenance of intakes, tanks, and pipelines;

prevent vandalism; prevent improper water use; receive training and in turn educate the community members in the maintenance and benefits of the water system.

- Running of health center and mobile clinics by **CWW**, based on the relevant E&S measures specified in this ESMP (see the ESMP table).
- Operations & maintenance of latrines by **IOM**: As per the design, the constructed latrines have a capacity of giving the intended services for at least 2 years without the septic tank filling up. At the end of 2 years, it should be de-sludged and taken to the Waste Stabilization Pond (WSP), provided that the WSP is prepositioned and ready to work. However, routine maintenance of the CGI superstructure, cracks on the slab, maintenance of the sandbag after each rainy season is part of the O&M for constructed latrines.
- The four boreholes will be operated and maintained at least for 12 months under **IOM WASH**. After that they will be handed over either to a private water company via PPP (public private partnership) or community user committee. IOM will pay for the handover.
- The seven information centers will be owned and managed by **IOM**.
- The 500 refuse pits will be managed and operated by the same households via an awareness raising campaign and training given by **IOM IPs (NoFYL & SCC)**.

Environmental and Social Management Plan

Table 4 presents mitigation measures to be implemented to address negative environmental and social risks and impacts associated with the general civil works under this subproject. Additionally, Table 5 presents mitigation measures to address specific WASH and health activities. The tables cover E&S mitigations to be implemented during the **construction phase** as well as **operational phase** (Table 5 below indicates some mitigation measures with ***Italic and Bold*** which have been already taken during design stage of **WASH** infrastructure. For the construction of the **health center**, the following section on “health activities” will be applied during the operation phase of the center). The implementation of the measures proposed will be **monitored and reported** through the indicators presented in the tables.

This ESMP with the below tables will be attached to the local firm’s contract and full compliance with its content will be required. The contractor will also have to adhere to the dispositions described in the following sections of this ESMP, such as the labour management procedures, the grievance redress mechanism and the responsibilities and requirements in regard to sexual exploitation and abuse (SEA) and sexual harassment (SH). IOM, IPs and their contractors are also required to comply with applicable national and municipal regulations governing the environment, public health, and safety. The regulations are listed in the ESMF for the SURP-II.

Table 4 Environmental and Social Mitigation Plan for general civil work activities

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
Noise pollution	<ul style="list-style-type: none"> • Restrict construction working hours between 7am to 5pm. • Educate workers on noise reduction measures. • Ensure an effective routine maintenance for construction vehicles and machinery. • Consideration of specific noise control measures for works near sensitive receptors (e.g., schools, health clinics and hospitals, etc.). • Select equipment with lower noise levels, e.g., the use of hand drilling machines. • Install suitable mufflers on engine exhausts and compressor components in cases where the service provider uses generators. • Provide fit for work PPE (ear plug/earmuffs) for all workers involved in the areas with elevated noise levels. • The contractor should use equipment that is/are in good working condition and are periodically serviced. 	Recorded cases of complaints by the project workers and community members
Fire hazards	<ul style="list-style-type: none"> • Provide fire hazard training to construction workers. • Provide fire extinguishers. • Designate areas as “assembly points”. • Establish, where possible, live fire breaks in form of appropriate vegetation. 	<ul style="list-style-type: none"> - # of fire extinguishers installed - - # of assembly points designated
Air pollution	<ul style="list-style-type: none"> • Educate workers about air pollution impacts from construction activities on human health, and good practices to avoid, reduce and mitigate. • As feasible, minimize the amount of time of areas of exposed soil (source of particulate material). • Sprinkle water on exposed road surfaces as appropriate. • No unnecessary idling during operation of vehicles and machines. • Regular and effective maintenance of construction vehicles and machineries to ensure that they are in good working condition. • No unauthorized slash-and-burn activity. 	# of complaints related to air pollution
Water pollution	<ul style="list-style-type: none"> • Educate workers about chemical hazards and safety. • Proper handling and storage of contaminants. • Proper waste management. 	# of complaints or incidents recorded

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
	<ul style="list-style-type: none"> • Proper soil erosion controls and management • Emergency procedure to control storm water and soil erosion during significant rain fall events or flooding • Careful measures taken not to pollute boreholes, stream and other water sources • Maintain register of any significant releases into surface or ground water 	
Soil pollution	<ul style="list-style-type: none"> • Educate workers about chemical hazards • Proper chemical, material and waste handling and storage • Effective vehicular and machinery maintenance • Maintain a register of any chemical or petroleum spills • Ensure proper site clean-up and closure upon completion of construction 	# of incidents recorded # of grievances registered
Loss of flora and fauna	<ul style="list-style-type: none"> • Minimize unnecessary vegetation clearance • Where vegetation/trees cut down, plant replacement • Sensitize workers about fauna conservation • Discourage fauna killings and set penalties for killing them 	# of trees cut and planted # of grievances recorded Record of sensitization workshops
Generation of solid waste	<ul style="list-style-type: none"> • Educate workers about proper waste collection, storage and disposal • Preparation of waste management plan for each waste stream and implementation of the waste hierarchy • Disposal of project-generated wastes at municipal approved sites only • The contractors shall ensure provision of waste bin at the project sites to handle wastes generated. • Efficient use of materials to as much as possible avoid and minimize waste production and purchase of the right quantities to avoid waste. • Ensure waste are recycled/reused before opting to dispose. • Use of durable, long-lasting materials that shall not need to be replaced often. • Ensure waste is collected and disposed in accordance with Somalia Government regulations. 	# of waste bins at the sites # of waste management plans Volume of total waste generated -% of waste collected
Occupational health and safety	<ul style="list-style-type: none"> • Select legitimate and reliable contractors through screening OHS records • Address OHS risks with non-compliance remedies in procurement documents. • Proper and effective Contractor OHS plan to be in place that meets applicable Somalia requirements and World Bank ESS2 and World Bank Environmental and Health and Safety General Guideline requirements 	Availability of accident logs # of first Aid Kits # of fire extinguishers

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
	<ul style="list-style-type: none"> ● The contractor shall always provide the workers with the required PPE and enforce their use while at the work sites. ● Provide drinking water ● The equipment used in the works should be routinely serviced to ensure proper and safe equipment functionality. ● Use of safety signage “MEN/WOMEN AT WORK” to warn contractor workers and visitors to worksites. ● Provision of adequate signage and communication of risk to workers and communities. ● Training and use of temporary fall prevention devices, such as rails, full body harnesses and energy absorbing lanyards, where possible. ● Electrical works should be performed by trained and qualified experts. ● Ensure that electrical equipment is properly connected before switching on sockets. ● In case of any spillage at working areas, this should be cleaned off immediately, anti-slip hazard warning when mopping floors should be provided to reduce on chances on slip and falls. ● Insurance coverage for all project workers ● Site construction layout and planning to help minimize potential project OHS risks ● Safety induction for workers during induction process ● Ongoing OHS training for workers and specialized OHS training for workers with specific risks (e.g., heavy equipment operators, welding, hazardous materials, etc.) ● OHS Officer should be on site to implement OHS requirements Proper PPE provided for workers ● Provision of sanitary facilities for workers ● Separate toilets and change rooms for male and female employees ● Worker health screening and monitoring where appropriate ● Maintain onsite appropriate first aid and other equipment associated with the level of worker OHS risk, and establish procedure to transport of injured worker to nearby hospital ● Ongoing monitoring and reporting of OHS performance ● Proper investigation of all worker accidents or project-related health issues, including documentation of investigation results and as needed implementation of corrective measures ● Establish emergency plan/procedure in case of emergencies such as chemical spills, fires, explosions, flooding. 	<p>Availability of insurance policy</p> <p>% of workers using PPE</p> <p># of trainings conducted</p> <p># of separate toilets for women and men</p>

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
Traffic and Road Safety	<ul style="list-style-type: none"> ● Use of competent drivers with defensive driving techniques. ● PIU to regularly inspect vehicle safety and maintenance. ● All fleet handling deliveries shall observe speeds limits to a maximum of 80km/h out of major towns but 30kms in the built-up areas in project areas. ● All drivers and loaders should sign the CoC. ● Drivers (especially going to high insecurity areas) should follow guidance on safe emergency driving. ● Information to direct affected local population on potential safety risks from pedestrian movements. ● Take appropriate safety measures, which are technically and financially feasible, to avoid the occurrence of incidents and injuries to members of the public associated with the operation of construction equipment. ● Safe driving awareness for construction drivers. ● As appropriate, separation of work areas from public spaces/areas such as barriers, fencing and signs highlighting potential risks or limitations. 	<ul style="list-style-type: none"> -# of accidents recorded # of vehicle inspection reports # of trip management plans
Poor management of ESHS risks, as well as risks to community health and safety	<ul style="list-style-type: none"> ● Establish and maintain continuous liaison with the communities in project areas, including sensitization on ESHS risks and mitigation measures. ● Use of local language and images for ESHS signage shall be encouraged. ● Ensure proper and adequate provision of sanitation and waste management facilities at all construction sites. ● Selected construction staff to be trained on EHS monitoring during civil works. 	<ul style="list-style-type: none"> # of ESHS incidents occurring
Management of chemicals and hazardous Materials	<ul style="list-style-type: none"> ● Educate workers about proper management of chemicals, hazardous materials and waste management (use, storage, and waste collection, storage and disposal). ● Waste separation and segregation to be undertaken by competent and well-trained staff only. ● Provide necessary PPE to workers and other equipment for chemical hazardous material use. ● Provide proper storage area for temporary storage of chemicals and hazardous materials. ● Provide waste bins and procedure for collection, temporary storage and disposal of chemical and hazardous wastes including waste oils and petroleum products, batteries, contaminated soil, empty chemical or hazardous material containers, etc. ● Disposal of project-generated hazardous wastes at Municipal approved sites only. 	<ul style="list-style-type: none"> # of waste management plans Volume of total waste generated % of waste collected # of trainings records

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
<p>Labor risks other than OHS: i) labor influx; ii) social tensions; iii) labor disputes over terms and conditions of employment; iv) Child labor risks, and v) Discrimination and exclusion of disadvantaged /vulnerable groups</p>	<ul style="list-style-type: none"> • Ensure proper clean-up and closure upon completion of work. • Implement the LMP including the following (See LMP section for detailed procedures): • Ensure contract has provisions to comply with the minimum age requirements including penalties for non-compliance. The contractor is required to maintain labor registry of all contracted workers with age verification. Verification of the age shall be undertaken prior to the engagement of labor and documented. • The employment of project workers will be based on the principle of equal opportunity and fair treatment, and there will be no discrimination with respect to any aspects of the employment relationship. • Contractually require the contractor to preferentially recruit unskilled labor from the local communities and nearby areas with priority given to hiring of qualified members of project affected households, female community members, local residents and IDPs. • Ensure fair terms and employment conditions consistent with national Labor Code in contracts. • Develop and operationalize grievance redress mechanisms (GRMs) for project workers (direct workers and contracted workers) to promptly address their workplace grievance. • Relevant trainings provided to workers, such as induction and daily toolbox talks outlining expected conduct and local community values, customs and traditions. • Develop remedial procedures to deal with child labor incidents as detailed in the LMP (Where a young looking person's age cannot be confirmed, use the GRC members from the area for age verification; assigning non-hazardous work for the child; employing adult family member; continue to pay the wage without work). 	<p>Labor registry with breakdown information of project workers (age, gender, contact info, etc.)</p> <p># of reported cases of disputes by workers</p> <p>Review of employment contracts</p>
<p>SEA/ SH and other forms of GBV</p>	<ul style="list-style-type: none"> • Implement the SEA/SH Action Plan including the following: • Hiring/assigning of a GBV Specialist in each implementing. agencies for the project implementation and monitoring; • Codes of conduct (CoC) for project workers; and plan for sensitization/awareness raising for the community and intended training activities for workers on CoC and SEA/SH provisions, GRM and services available. • Mapping and partnership with identified GBV service providers and development of referral pathways. 	<p>Progress report of the SEA/SH action plan</p> <p>% of female workers engaged in each subproject</p>

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
	<ul style="list-style-type: none"> • A Reporting and Response protocol that outlines key requirements for reporting cases if they arise and measures to enable safe, ethical, survivor-centered response. • An Accountability Framework that outlines how the PIU/contractor will handle SEA/SH allegations, including related to investigation (in alignment with national processes) and sanctions for potential perpetrators. • Establishment of special channel/procedures for safe, confidential reporting of GBV incidence that connect to the project GRM and enable training of GRM operators on how to respond to cases that come forward. • Clarification of GBV requirements in bidding document (including requirements for CoCs, training of workers, and how GBV related costs will be covered in the contract); bid evaluation to include consideration for GBV response proposal. • Arrange enough and suitable toilet and washing facilities, separate from men and women workers. 	
Security risks	<ul style="list-style-type: none"> • Prepare and implement a security management plans (SMP) in line with ESS4 and WB GPN on the use of security personnel including code of conduct, incident reporting, grievance redress and training/awareness-raising for security officers on the principles of proportionality in the use of force. • Close coordination with security authorities and local communities. • Deploy police officers to provide site security for the workers where appropriate. • Active use of remote monitoring tools, and cautious management of project visibility, e.g., public display of project information such as signboards at works sites. • Carry out consultations in small numbers and also through the telephone when necessary. • Minimize the time spent collecting project-related data and avoiding predictability in the sequencing of data collection locations. 	# of reported insecurity incidents
Damage or disruption to tangible and intangible cultural heritage	<ul style="list-style-type: none"> • Chance find procedures will be used as follows: • Stop the construction activities in the area of the chance find. • Delineate the discovered site or area. • Secure the site to prevent any damage or loss of removable objects. In cases of removable antiquities or sensitive remains, a night guard shall be present until the responsible local authorities and the Ministry in charge of Department of Archaeology and Museums take over. • Notify the supervisory Engineer who in turn will notify the responsible local authorities and the Ministry of Culture immediately (within 24 hours or less). • Avoid disturbance to local religious and cultural activities. 	

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
Lack of inclusive stakeholder engagement	<ul style="list-style-type: none"> • Implement the stakeholder engagement activities, including the following: • Identify disadvantage groups in each subproject. • Establish and maintain continuous liaison with the communities including disadvantaged groups. • Facilitate the participation of vulnerable groups to consultations (such as provision of transportation and accessible venues) • Establish GRCs involving vulnerable groups. • Inform and sensitize all stakeholders on accessible GRM. 	<p>% of disadvantaged groups consulted</p> <p>% of disadvantaged groups in the GRC</p> <p>Functionality of GRM (review of grievance logs and actions taken)</p>

Table 5 ESMP for WASH and HLP activities

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
<p>WASH activities</p> <p>1) Overall withdrawal of groundwater and impacts on other ground water users and other risks (e.g., subsidence)</p> <p>2) Provision of non-potable water for drinking or other uses</p> <p>3) Use of chemicals (storage, use, disposal, etc.) associated with water supply and waste water treatment</p> <p>4) Pit latrines and septic tanks if not well sited and maintained will be a source of foul smell that will affect those within the area</p> <p>5) Faecal matter may lead to underground water contamination if the water table is high or in the case of latrines, when there is an overflow due to heavy rains.</p>	<ul style="list-style-type: none"> • Ensure water balance is determined which will guide on the amount of water to be abstracted, and subsequently eradicating uncontrolled water abstraction by the relevant authorities such as the local council (done) • Protect drinking water sources to meet WHO guidelines for drinking water quality. • Safe storage and administration of chemicals associated with water supply • Keep number of employees handling chemicals to a minimum • Ensure proper siting of septic tanks and pit latrines in accordance with the MOH guidelines for siting and construction of pit latrines, including incorporation of roofing and ventilation pipes (done). • Promotion of appropriate latrine design (i.e., above ground, not pit latrines) in areas of high water table (done). • Ensure proper maintenance of sanitation facilities including cleaning and hygiene training. • Provide hand washing facilities and water in all the sanitation infrastructures (done). • Ensure and provide training on cleaning of toilet for communities. • Use biopesticides to manage pests. 	<p>Evidence of water balance having been determined</p> <p># of sites where quality of drinking water in accordance with WHO standards</p> <p># of sites where chemicals for water treatment are stored in a lockable storage</p> <p># of sites where construction of septic tanks consistent with MOH guidelines</p> <p># of checklists developed and used to indicate status of WASH facilities</p> <p># of hand washing facilities provided</p> <p># of checklists developed and utilized to record hygiene status of toilets</p>

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
<p>6) Contamination of water may lead to outbreak of diseases e.g. cholera, dysentery, typhoid, diarrhea etc.</p> <p>7) Pit latrines can be breeding grounds for flies and mosquitoes, which are disease vectors</p> <p>8) Final disposal of sludge (if removed) from latrines</p> <p>9) Attraction of common pests/disease vectors due to dirty environments, including rats, cockroaches, flies.</p> <p>10) Water quality issues from boreholes</p> <p>11) Exclusion/discrimination of vulnerable groups from accessing WASH facilities, including for persons with disabilities</p> <p>12) Increased community safety and GBV risks if the latrines are not gender-sensitive, especially for women, such as lack of functional locks and night-time lighting.</p>	<ul style="list-style-type: none"> • Precede borehole drilling with proper assessment on location and sustainable yield potential of water in the area. • Ensure continuous monitoring of groundwater quantity. • Introduce point-of-use treatment of drinking water. • Assess horizontal and vertical distance between latrines and drinking water source (done). • Ensure good siting of latrines so as to not pollute groundwater (done). • Design treatment technology to reduce pathogen hazard within the sludge by removal to a level appropriate for the intended end use or disposal practice. • lidding (to be placed over the hole) to reduce problems with both flies and odors. • Dewater and dry sludge disposal at location approved by the municipality. (N.B: Should the team come up with an ideal site for the SWDS (Solid waste disposal site) & WSP (Waste stabilization pond) in close coordination with the local authorities, the ESMP will be amended to incorporate this location). • Consider siting and design of WASH facilities to ensure accessibility for all users (done). • Define GBV requirements and expectations included in the contractual obligations as well as re-enforce CoCs that addresses GBV in the project locations. • Ensure regular consultation with women and key stakeholders including vulnerable groups, persons with disability to facilitate safe access to WASH facilities. • Ensure well-lit, safe and separate WASH facilities for males and females. • Put in place lockable WASH facilities to guarantee privacy and safety for the users. • Conduct regular safety audits to understand the GBV risks and limiting factors that female staff have and may experience in their working and learning environment. • Develop and deliver information, education, and communication materials in Somali language and understandable manner for 	<p># of trainings on cleaning toilets</p> <p># of sites in which appropriate sludge treatment technologies are used</p> <p># of site in which disposed sludge is dewatered and dried</p> <p>% of workers that have signed a CoC</p>

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
	<p>stakeholders to indicate that the project and/area is a GBV/SEA/SH free zone.</p> <ul style="list-style-type: none"> • Train all project staff and workers and integrate understanding of the CoC, GBV, SEA/SH as well as accountability and response framework including the referral processes, responsibilities and reporting in other trainings. • Sensitize communities on SEA/SH, services available, GRM including reporting channels. • Put in place a GBV sensitive GRM for project workers and for communities. • Conduct GBV service mapping and establish referral pathways. • Establish a partnership with existing GBV service providers to facilitate safe referrals to services and/or project GRM. 	
<p>Health activities</p> <ol style="list-style-type: none"> 1) Risk of indiscriminate disposal of medical waste 2) Risk of medical wastes, wastewater and air emissions leading to contamination of the environment 3) Risks of incineration residues 4) Risks of carriage of healthcare waste through public streets can be a risk in case of an accident or spill of health care waste 5) Risk of poor sanitation conditions at the HCF leading to discomfort and poor aesthetic values 6) Risk of infection among health professionals 	<ul style="list-style-type: none"> • Implement and monitor health care waste management procedures based on WBG Environmental, Health, and Safety General and Health Care Facilities Guidelines, including training of health care workers and auxiliary staff on how to safely handle health care waste up to its final disposal. • Provide adequate and appropriate protective clothing; use appropriate types of polyethylene bags and containers for waste; appropriate storage of health care waste until end of day; treat health care waste appropriately at hospitals, etc. • Ensure incineration of relevant delivered hazardous waste and appropriate disposal of the resulting ash at a licensed landfill. • Estimate and record potential waste streams including general, hazardous and medical before leaving the HCF and also recorded at incineration point to account for every medical waste that is moved from the HCF. • Require that receptacles for waste should be sized appropriately for the waste volumes generated, and color coded and labeled according to the types of waste to be deposited. Provide guidelines on color-coding. • Develop appropriate protocols for the collection of waste and transportation to storage/disposal areas in accordance with WHO guidance. Design training for staff in the segregation of wastes at the time of use. 	<p># of trainings held for health care workers</p> <p>% of workers with appropriate PPE available</p> <p>% of health care facilities in which health care waste is stored in appropriate colored containers</p> <p>% of health care facilities in which protocols for collection and transportation of waste are available</p> <p># of health care staff that has been trained in segregation of waste</p> <p># of health care facilities in which waste segregation and selection undertaken</p>

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
<p>7) Risk of infection to the handlers</p> <p>8) Risk of infection to the handlers due to secondary handling</p> <p>9) Indoor air quality at health care facility</p> <p>10) Water borne diseases for health care facilities with inadequate portable water.</p>	<ul style="list-style-type: none"> • Waste segregation and selection including removal of the following items from waste destined for incineration: halogenated plastics, pressurized gas containers, large amounts of active chemical waste, silver salts and photographic / radiographic waste, waste with high heavy metal content, and sealed ampoules or ampoules containing heavy metals • Management of incineration residues such as fly ash, bottom ash and liquid effluents from flue gas cleaning as a hazardous waste (see WBG General EHS Guidelines) as they may contain high concentrations of POPs.¹² • Transportation of medical waste will be done according to the WHO specifications which guides that during transportation, a defined route is used always and the vehicle is well labelled to indicate its transporting hazardous materials. • Avoid disposing hazardous wastewater into domestic streams, and separate, collect and dispose at licensed dumpsites. • Provide cleaning staff with adequate cleaning equipment, materials and disinfectant. Provide adequate facilities to disinfect the cleaning equipment and dispose of the used consumables in a safe manner; • Review general cleaning systems, training cleaning staff on appropriate cleaning procedures and appropriate frequency in high use or high-risk areas. • Train cleaners in proper hygiene (including handwashing) prior to, during and after conducting cleaning activities; how to safely use PPE (where required); in waste control (including for used PPE and cleaning materials) • Ensure appropriate training on Infectious Prevention and Control for healthcare workers and other staff. • WHO prescribed protocols for personal protection of healthcare professionals is to be enforced at all times • Ensure training in Health care waste management systems, which enable health care waste to be managed responsibly, without harming the 	<p># of times the defined route for transportation of medical waste and the vehicle properly labelled</p> <p># of times records are made available</p> <p>% of health care facilities in which cleaning equipment is available</p> <p>#Effective cleaning system</p> <p>% of cleaners trained</p> <p># of trainings held and who has been trained</p> <p># of facilities in which protocols are available at location</p> <p># of trainings held</p> <p>% of staff that wears PPE</p> <p>% of staff that wears PPE</p> <p># of health care facilities with records of medical waste treatment</p> <p># of health care facilities where medical is waste segregated at source to avoid double handling</p>

¹² See for WHO standards / specifications: <https://www.who.int/teams/health-product-and-policy-standards/standards-and-specifications>

Potential E&S risks and impacts	Proposed mitigation measures	Indicators for monitoring
	<p>community or the environment. Staff engaged in medical waste management should wear PPE.</p> <ul style="list-style-type: none"> • Staff engaged in auxiliary activities, such as food supply, medical waste management should wear PPE. • Medical waste should be treated as infectious clinical waste Category B (UN3291) [30] and handled in accordance with healthcare facility policies and local regulations • Segregate medical/health care waste at generation point • Disinfect infectious medical waste before handling, storage and disposal • Avoid burning both general and medical waste in open air, either on- or offsite • Place the different types of medical/health care waste in secured bags color-coded and labelled • Conduct air quality baseline assessments at facility level • Conduct water quality assessments at health care facilities with lack of portable water. • Life and fire safety measures in fixed health care facilities 	<p># of health care facilities in which medical waste in secured bags which are color-coded and labelled</p> <p>% of health care facilities in which indoor air quality baseline assessment are undertaken</p> <p>% of health care facilities where water quality assessments are undertaken</p> <p>% of vehicles well maintained</p> <p>% of engine exhausts with mufflers installed</p> <p>% of activities implemented during the days</p> <p># of speed control signage</p> <p># of safety/warning signs installed</p>

Labor Management Procedures

The Labor Management Procedures (LMP) for SURP II (updated in April 2022) are applicable to the activities proposed. This section summarizes key labor requirements of the LMP, highlighting key labor risk mitigations relevant to subproject activities.

Labor use under this subproject. Key project workers under this subproject include the following. The workforce is required for the duration of relevant activities:

- **Direct workers:** BRA PIU and PCU staff
- **Contracted workers:** (i) the permanent and program staff of IOM (140 workers), CONCERN (5 workers), SCC (5 workers) and NoFYL (5 workers) who fully or partially support the subproject; (ii) approx. 70 workers engaged by their contractors (e.g. construction companies for civil works, including 7 information centers, WASH activities (latrines, water supply pipelines, water points, boreholes) and Weydow Health Center); and (iii) 500 workers for the conditional cash for work (CFW) recruited from local communities to work for civil work directly by IOM/CONCERN/SCC/NoFYL.
- **Primary supply workers:** Workers engaged by primary suppliers who provide goods and materials essential for the subproject on an ongoing basis (e.g. construction materials, materials for latrines).
- **Government civil servants** (e.g. federal, state and municipal officers).

Key labor risks and mitigations. Key labor risks under this subproject are similar to those listed in the SURP-II LMP. This subproject activities also entail risks of OHS, child labor, labor disputes, GBV/SEA/SH risks, discrimination and exclusion of vulnerable groups, and security risks. Labor influx risks and impacts are less expected, since most works will be implemented by local workforce. The summary of the policies and procedures to address such key labor risks is presented in the table below.

Table 6 key labor risks

Key labor risks	Policies to address risks	Procedures to back up the policy
1. OHS risks	<ul style="list-style-type: none"> • Abide by OHS requirements as set out in Labor Code (Articles 101-104), ESS2 (including general WBG EHSGs), the SURP II LMP and the CERC ESMF. 	<ul style="list-style-type: none"> • Develop and implement an approved site-specific ESMP, including OHS measures. • Select legitimate and reliable contractor through screening OHS records. • Address adequately OHS risks with non-compliance remedies in procurement documents. • Require the contractor to engage qualified ESHS staffing • Enhance workplace OHS awareness and training. • Conduct routine monitoring and reporting. • Implement COVID-19 mitigation measures as provided in Bank and FGS guidelines • Raise awareness on STDs/HIV
2. Child labor	<ul style="list-style-type: none"> • Set the minimum age of project workers eligible for any type for work (including 	<ul style="list-style-type: none"> • Include minimum age in procurement documents. • Raise awareness on child protection with contractors and in the communities.

Key labor risks	Policies to address risks	Procedures to back up the policy
	construction work) at 18 years.	<ul style="list-style-type: none"> • Maintain labor registry of all contracted workers with age verification. • Develop remedial procedures to deal with child labor incidents.
3. Labor influx	<ul style="list-style-type: none"> • Minimize labor influx through tapping the local workforce. • Minimize labor-related risks on the community through the code of conduct, including GBV. 	<ul style="list-style-type: none"> • Require the contractor to preferentially engage unskilled local workforce from the local communities. • Make all contracted workers sign code of conduct, including prevention of GBV. • Conduct induction and toolbox talks outlining expected conduct and local community values. • Introduce disciplinary measures for violations and misbehaviors.
4. Labor disputes	<ul style="list-style-type: none"> • Respect the national Labor Code and promptly address workplace grievances to minimize the risk of labor disputes. 	<ul style="list-style-type: none"> • Provide workers with contracts with fair terms and conditions. • Have grievance mechanisms in place to promptly address workplace concerns. • Respect the national Labor Code on workers' right of labor unions and freedom of association.
5. GBV/SEA/SH	<ul style="list-style-type: none"> • Implement SEA/SH prevention and response 	<ul style="list-style-type: none"> • Conduct awareness raising • Enforce signing of code of conduct by all project workers. • Train GRC GBV focal point on handling related complaints and also on GBV service providers referral mechanism • Require the contractor to address potential sexual exploitation or harassment in recruitment or retention of skilled or unskilled female workers.
6. Discrimination and exclusion of vulnerable or disadvantaged groups	<ul style="list-style-type: none"> • Promote no discrimination and equal opportunity with respect to any aspects of the employment relationship. 	<ul style="list-style-type: none"> • Require the contractor to employ vulnerable groups as part of unskilled workforce. • Provide maternity leave and nursing breaks where relevant. • Arrange sufficient and suitable toilet and washing facilities, separate for men and women workers.
7. Security risks	<ul style="list-style-type: none"> • Take appropriate and proportionate security measures to minimize the potential risk to the workers. 	<ul style="list-style-type: none"> • Security protection to be determined by security authorities to address external security risks (such as terrorism and armed insurgency). • Address internal security risks associated with the deployment of security personnel on the community and project workers in line with the WB Good Practice Note "Assessing and Managing the Risks and Impacts of the Use of Security Personnel".

Minimum age for project workers. The activities will engage IDP community members as project workers to provide them with short-term employment opportunities and support their livelihood, the following policies and procedures will be applied to manage the risk of child labor.

- **Hazardous work:** Considering national and WB requirements, the minimum age for hazardous work under the activities is set at 18.
- **Non-hazardous work:** Considering national and WB requirements, the minimum age of project workers for non-hazardous work is set at 15. IOM, NoFYL, SCC and CONCERN will conduct an appropriate risk assessment to see if particular risks exist for engaging workers under 18 and over 15 prior to engagement of such workers, which will be followed by regular monitoring of health, working conditions, hours of work and availability of functional GRM for them. The non-hazardous tasks to be performed will be conducted as part of the community roving team, which provides weekly tracking of newly arrived drought-affected IDPs, monthly service mapping and service gap monitoring, mobile health workers etc.
- **Age verification protocol:** In order to prevent engagement of under-aged labor, all contracts with work contractors shall have contractual provisions to comply with the minimum age requirements including penalties for non-compliance, and it will be well communicated to all potential stakeholders including the local community where the unskilled workforce will be sourced. The contractor is required to maintain a labor registry of all contracted workers with age information. Verification of the age shall be undertaken prior to the engagement of labor and be documented. Age verification should be done by: checking the birthday on official documents such as birth certificate, national ID or other credible records, where available; obtain written confirmation from the medical practitioner; obtain written and signed declaration from the worker and his/her parents or guardian; or Inquire with the local community leader, community action group or with other credible community sources.
- **Responsible remedial measures.** In case a project worker who does not satisfy the age limit is identified working on the project (i.e., under 18 years old for hazardous work; and over 15 years for nonhazardous work), the employer (contractor, subcontractor or primary supplier) shall be required to terminate the engagement of such a project worker in a responsible manner. Indicative responsible approach may include: offer a project employment to a member of the family who satisfies the age limit in exchange of keeping the under-aged worker away from work, if a family member who satisfies the age limit is not available, require the employer (using the contractual penalty provisions) to continue the wage payment to the underage worker without engaging in work for an agreed period, if the worker is over 15 years old and under 18, consider transferring the worker to an alternative position that is not hazardous and does not interfere his/her education (subject to prior risk assessment and regular monitoring).

Terms and conditions for IOM, NoFYL, SCC and CONCERN staff and consultants. The terms and conditions for direct staff and consultants of IOM, NoFYL, SCC and CONCERN will be governed by their respective labor standards, World Bank's Environmental and Social Standard 2 (ESS 2): Labor and Working Condition, and the national labor code, whichever is more stringent.

Terms and conditions for contracted workers engaged by IOM, CONCERN, NoFYL and SCC and contractors and service providers as well as IDP workers engaged under 'cash for work' program. Key components of the terms and conditions that should be applied to contracted workers under these categories:

- **Provision of written individual contract of employment.** A written individual contract of employment shall be provided to workers that specify the following: (a) name of workers; (b) address, occupation, age and sex of workers; (c) employer's name and address; (d) nature and duration of contract; (e) hours and place of work; (f) remuneration payable to the worker; (g) procedure for suspension or termination of contract. Depending on the origin of the employer

and the employee, employment terms and conditions will be communicated in a language that is understandable to both parties. In addition to written documentation, an oral explanation of conditions and terms of employment will be provided to workers who may have difficulty understanding the documentation.

- **For 'cash for work'**, all the beneficiaries will sign an MOU/CFW agreement with the IP, witnessed by the Camp Development Committee (CDC) representative. The MOU will stipulate the scope of work, output per day, working hours, daily CFW rate, conflict resolution among others. This MOU will formalize engagement of the CFW beneficiaries in the rehabilitation of the selected projects.
- **Notice for termination of contract.** Either of the contracting parties may terminate a contract of employment by giving written notice as under: (a) not less than ten days in the case of manual workers; or (b) not less than 30 days in the case of non-manual workers. No notice needs to be given in case the duration of contract does not exceed one month.
- **Minimum Wages.** The fair market rate will be identified and applied for project workers. For 'Cash for work', in recognition that CfW primarily aims to provide instant, temporary jobs for unskilled labour while rehabilitating community facilities and basic community services, skilled labour is also needed to lead, technically supervise, and ensure the quality of work being done. This means that skilled labour should not receive the minimum wage that the unskilled CfW beneficiaries receive, but rather a fair rate for their daily work. However, at minimum, the minimum wages have to be paid. There is an added benefit when unskilled labourers gaining vocational skills by apprenticeship when they are teamed up with skilled labourers. However, setting wages for CFW projects should take into account: beneficiary needs (i.e. what is the wage intended to cover), objective of the program, wage standards in the project location based on prevailing market rate or government set rate, other NGOs or local actors conducting CFW projects in the same intervention area/cluster recommended rate.
- **Hours of Work.** The normal hour of work of a project worker shall not exceed 8 hours a day or 48 hours a week. Hours worked in excess of the normal hours of work shall not exceed 12 hours a week and shall entitle a worker to a proportionate increase in remuneration, which shall in no case be less than 25 per cent of the normal remuneration.
- Working hours for the 'cash for work' activities are defined as 6-8 hours per day.
- **Rest per week.** Every worker shall be entitled to one day's rest each week, which should normally fall on Friday. It shall consist of at least 24 consecutive hours each week. Workers shall also be entitled to a rest day on public holidays recognized as such by the Federal and State governments.
- **Annual leave.** Workers shall be entitled to 15 days leave with pay for every year of continuous service. An entitlement to leave with pay shall normally be acquired after a full year of continuous service.
- **Maternity leave.** A female worker shall be entitled, on presentation of a medical certificate indicating the expected date of her confinement, to 14 weeks' maternity leave with half pay, of which at least six weeks shall be taken after her confinement, provided that she has been employed by the employer for at least six months without any interruption on her part except for properly certified illness.

- **Nursing breaks.** A female worker who is nursing her own child shall be entitled, for a maximum of a year after the date of birth of the child, to two daily breaks of one hour each. The breaks shall be counted as working hours and remunerated accordingly.
- **Deductions from remuneration.** No deductions other than those prescribed by the Code or regulations made hereunder or any other law or collective labour agreement shall be made from a worker's remuneration, except for repayment of advances received from the employer and evidenced in writing. The contractor shall not demand or accept from workers any cash payments or presents of any kind in return for admitting them to employment or for any other reasons connected with the terms and conditions of employment.
- **Death benefit.** In case of death of a worker during his contract of employment, the employer shall pay to his heirs an amount not less than 15 days remuneration as death benefit for funeral services.
- **Medical treatment of injured and sick workers.** It shall be the duty of the employer to arrange at his own expense for the conveyance to the nearest hospital of any injured or sick worker who can be so conveyed and who cannot be treated on the spot with the means available.
- **Collective Agreements.** A collective agreement is an agreement relating to terms and conditions of work concluded between the representatives of one or more trade unions, on the one hand, and the representatives of one or more employers, on the other hand. Where collective agreements exist between the employer and project workers, such agreements will be applied, where relevant.

Grievance Redress Mechanisms for Project Workers. While a general GRM will be established for general stakeholders (see below), a separate grievance mechanism will be established for project workers. Handling of grievances should be objective, prompt and responsive to the needs and concerns of the aggrieved workers. Different ways in which workers can submit their grievances should be allowed, such as submissions in person, by phone, text message, mail, email and grievance box. The grievance raised should be recorded and acknowledged within one day. While the timeframe for redress will depend on the nature of the grievance, health and safety concerns in work environment or any other urgent issues should be addressed immediately. Where the grievance cannot be addressed within a reasonable timeframe, the aggrieved worker should be informed appropriately, so that the worker can consider proceeding to the national appeal process. The mechanism will also allow for anonymous complaints to be raised and addressed. Individuals who submit their comments or grievances may request that their name be kept confidential. SEA/SH grievances from project workers can be reported through any available mechanism and will be handled in a survivor-based manner, as explained in the general Project GRM section.

IOM, NoFYL, SCC and CONCERN staff and consultants. IOM, NoFYL, SCC and CONCERN will apply their own internal grievance redress system.

Contracted workers engaged by IOM, CONCERN, NoFYL and SCC and contractors and service providers under 'cash for work' program. The project site manager and the ESHS officer (or any other appropriate officers such as E&S focal points) of the contractor and service provider (or IOM and IPs in case of cash for work program) will hold a daily team meeting with all present contracted workers at site at the end of the daily work to discuss any workplace grievances. The grievance raised will be recorded with the actions taken by the contractor and service provider (or IOM and IPs in case of cash for work program). The summary of grievance cases will be reported as part of periodic report. Where

appropriate and available, the contracted workers should be allowed to utilize an existing grievance mechanism within the contractor or service provider (or IOM in case of cash for work program). Where the aggrieved workers wish to escalate their issue or raise their concerns anonymously and/or to a person other than their immediate supervisor, the workers may raise their issue with the PIU/PCU and/or the municipality. The contracted workers will be informed of the grievance mechanism at the induction session prior to the commencement of work. The contact information of the PIU/PCU and/or the municipality will be shared with contracted workers.

National appeal process. As per the national Labour Code (Article 134), any individual labour dispute can be submitted by any of the parties to the competent district labour inspector for conciliation, where such labour inspector is available. The inspector is mandated to attempt to settle the dispute within 14 days of its submission.

Contractor management

- Selection of Contractors. IOM, NoFYL, SCC and CONCERN shall make reasonable efforts to ascertain that the contractor or service provider who will engage contracted workers is legitimate and reliable entities and able to comply with the relevant requirements under the LMP. Such requirements shall be included in the procurement documents. As part of the process to select the contractors or service providers who will engage contracted workers, IOM, NoFYL, SCC and CONCERN may review the following information:
 - Business licenses, registrations, permits, and approvals
 - Public records, for example, corporate registers and public documents relating to violations of applicable labor law; accident and fatality records and notifications to authorities; labor-related litigations Documents relating to the contractor's labor management system and OHS system (e.g., HR manuals, safety program); ESHS personnel and their qualification
 - Previous contracts with contractors and suppliers (showing inclusion of provisions and terms reflecting requirements on labor and working conditions).
- Contractual Provisions and Non-Compliance Remedies. IOM, NoFYL, SCC and CONCERN shall incorporate the relevant labor management requirements into contractual agreements with the contractor or service provider, together with appropriate non-compliance remedies (such as the provision on withholding 10 % of payment to the contractor in case of non-compliance with relevant environmental, social, health and safety requirements; removal of personnel from the works; or forfeiting the ESHS performance security). In the case of subcontracting, the IOM and IPs will require the contractor or service provider to include equivalent requirements and non-compliance remedies in their contractual agreements with subcontractors.
- Performance Monitoring. IOM and CONCERN shall establish resources and procedures for managing and monitoring the performance of the contractor in relation to the Component 4 ESMF. IOM, NoFYL, SCC and CONCERN will ensure that the contract with the contractor or service provider explicitly set out their monitoring responsibility for the contractor's performance on labor and working conditions on a daily basis. The monitoring may include, inspections, and/or spot checks of project locations or work sites and/or of labor management records and reports compiled by the contractor or service provider. Contractors or service providers' labor management records and reports that should be reviewed would typically include the following:
 - Representative samples of employment contracts and signed code of conduct;
 - Grievances received from the community and workers and their resolution;
 - Reports relating to fatalities and incidents and implementation of corrective actions;

- Records relating to incidents of non-compliance with national Labour Code and the provisions of
- the LMP; and
- Records of training provided for contracted workers to explain occupational health and safety risks and preventive measures.

Primary Supply Workers. When sourcing goods and materials essential for the activities from primary suppliers, the contractor will require such suppliers to identify the risk of (i) child labor/forced labor and (ii) serious safety risks in producing the goods and materials. IOM, NoFYL, SCC and CONCERN will review and approve the purchase of primary supplies from the suppliers following such risk identification/assessment and any other relevant due diligence (such as the review of license for quarries). Where appropriate, the contractor will be required to include specific requirements on child labor/forced labor and work safety issues in all purchase orders and contracts with primary suppliers. If child labor/forced labor and/or serious safety incidents are identified in relation to primary supply workers, IOM, NoFYL, SCC and CONCERN will immediately inform the PIU, require the primary supplier to take appropriate steps to remedy them. Such mitigation measures will be monitored periodically to ascertain their effectiveness. Where the mitigation measures are found to be ineffective, IOM, NoFYL, SCC and CONCERN will, within reasonable period, shift the project's primary suppliers to suppliers that can demonstrate that they are meeting the relevant requirements.

Stakeholder Engagement

Stakeholder identification. As per the CERC-ESMF, key stakeholders in this subproject include the following:

- **Project affected parties:** Beneficiary IDPs who will benefit from public works; other community members (IDPs or non-IDPs) who will be subject to potential E&S risks induced by subproject activities.
- **Other interested parties:** Community/clan leaders/members, religious leaders, landowners, BRA administration, federal and state ministries, Project implementing institutions (IOM and IPs), other UN/bilateral donors, international/national NGOs, private sector (water and power utilities), contractors (construction companies) and service providers (health care professionals, lawyers and paralegals) engaged in CERC activities.
- **Disadvantaged/vulnerable groups:** IDPs in general, but in particular those with disabilities, female-headed households, widows, elderly, orphans, illiterate persons, minority clans, persons living with severe illness.

Stakeholder Consultations for BRA site: Stakeholder consultations in regards to the planned activities were conducted with a variety of stakeholders. A total of 96 participants drawn from the community were targeted in six zones (zone 1, 2 ,4 and 5 in Deynile and zone 6 and 7 in Kahda). Women group: 30 (Deynile: 20 and Kahda: 10); men group: 30 (Deynile: 20 and Kahda: 10); Youth group: 30 (Deynile: 20 and Kahda: 10; IDP Camp leaders: 6 (Deynile: 4 and Kahda: 2); participants from NGO partners: 16; and, members of the government: 15, from both district and regional levels were consulted.

Table 7 Total Participants in Stakeholders Consultations

District	Women Groups	Youth Group	Men groups	IDP camp leaders	Total
Kahda	10	10	10	2	32
Deynile	20	20	20	4	64
NGO partners	n/a	n/a	n/a	n/a	16
Government	n/a	n/a	n/a	n/a	13
Total	30	30 (15 women and 15 men)	30	6	125

The meetings were conducted from 9th to 16th of January 2023.

Table 8 Consultation Dates

Theme	Participants	Date
Community consultation meetings for Deynile	Women, Men, Youth groups, Camp leaders	9 th January 2023
Community consultation meetings for Kahda	Women, Men, Youth groups, Camp leaders	10 th January 2023
Consultation meetings with NGO partners ¹³	Save the children (SCI), WARDI, SCC, Nofyl, SORDA, Concern Worldwide, IOM, Youthlink, NRC SOS, SOPHPA, Mercy	11 th January 2023

¹³ Save the Children (SCI) is an international NGO working in the Health, Nutrition, WASH and other sectors in these two districts; WARDI and SORDA are local NGOs working in the area, implementing Health, Nutrition and WASH activities. For this reason they are included as part of the stakeholder groups as Other interested parties.

Consultation meetings with Government level stakeholders.	BRA Director General of Social Services, BRA Director of Humanitarian Affairs, BRA Health Directorate, BRA-PIU Project Coordinator, BRA-PIU Community Engagement Specialist, BRA-PIU GBV Officer, BRA Special Envoy for Drought	16 th January 2023
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Consultations with Government level-stakeholders; BRA departments and Districts Commissioners

The stakeholder consultation meeting with Government officials was held in BRA on 16th of January 2023, with the support of the SURP-II BRA PIU. The General Director of BRA for Social Services and the Directors of the Departments of Health, WASH, General Services, Humanitarian office, the Special Envoy of Drought for the Mayor of BRA and representatives from different departments attended the meeting and participated in the consultation sessions with a total of 13 (2 women and 11 men) participants. A joint presentation about the project activities was done and participants were informed about the preparation of the E&S instruments, including the ESMP, and what its implementation entails, and the need to have mitigation measures.

The participants acknowledged that this project will help respond to needs of the new IDP arrivals in both districts. This project has come on board while the implementing partners have established relationship and signed MOUs with the BRA.

Key Concerns raised

- Land issues: the acquisition and ownership of the land where the construction activities are planned including boreholes and latrine and health care centre, is under private land ownership. Land owners can raise issues at any time during the project implementation, which may lead to relocation of IDPs and forced evictions. As a result, some long-term project activities, such as drilled boreholes, may go to private ownership and become inaccessible to the community making the project unsustainable. Concern and IOM had separate engagements with land owners in areas planned for construction and rehabilitation activities and prepared agreements to be signed with the landowners to mitigate such risks.
- Exclusions/discrimination of women, marginalized people and people with special needs including persons with disabilities: this can happen during selection of sites for intervention, with marginalized communities who are at risk of exclusion to access the services.
- IDPs face the risk of GBV from accessing WASH facilities during night time as there is insufficient lighting. IDPs identified the risk as coming from male IDP camp members as well as men from the surrounding area who can access the camp. Female IDPs fear using twin latrine (male and female latrines adjacent to each other) and requested a segregation of latrines.
- Community conflicts: since the project entails a long-term agreement between the landowners and the IDP communities, which will lead to resettlement on the secured site, the host communities may raise concerns towards changes in demography in the future. This means that in most areas, there are dominant clan groups who live in specific locations where they have the bigger representation; when there are new arrivals who resettle in the same area, they may lose their position. This perception can lead the host communities to object re-integration of IDP communities and may create conflicts.
- Poor coordination with other actors on the ground can cause service overlap, thus leading all funds to go to one area while leaving other needy areas in a service gap.

Suggested measures

- Long term agreements between the land-owners and the community, witnessed by the local authorities, will help secure long time use of the project land and to avoid eviction.
- Awareness-raising to the host communities about the need for integration of the IDPs in existing social structures.
- Partners to coordinate with respective BRA departments, clusters and other actors on the ground to avoid duplication of services in one location.
- Latrines and WASH facilities construction will be gender and disability friendly. They are clean, separate toilets with access to hygiene kit disposal, access ramp for PLWD with rail, doors fitted with pad locks, well lighted at night etc.
- Women and children, marginalized communities will be considered during targeting.

Consultations with Community groups: women, elderly men, youth groups, IDP camp leaders.

On 9th and 10th of January 2023, consultation meetings were held in both districts, Deynile and Kahda, where the project implementation will take place. Representatives from women's groups, IDPs, Youth Groups and elders and youth from 5 zones (Zone 1, 2, 4 and 5 in Deynile and Zone 6 and 5 in Kahda) were consulted and informed of the preparation of E&S instruments during the consultation. A total of 96 participants (48 women and 48 men) took part in the various engagement sessions.

During the meetings, the facilitators explained the scope of the project interventions, different aspect of the ESMP in order to deliver the project in an environmentally and socially sustainable manner. The participants discussed the key concerns around the project implementation and provided their suggestions to mitigate the potential risks.

Key Concerns raised and recommendations

- Inter- communal (resource-based) conflicts: the limited number of latrines and water distribution points may cause people to queue for a long-time, which leads to conflicts between the community members in the IDP camps.
- Risk of GBV: the layout and location of the latrines could put women at risk for GBV, particularly at night. Women are afraid of being attacked if they use latrines built far away from their homes at night. Additionally, due to rusty iron sheets in twin latrines with no concrete wall between them, people may sometimes be able to see each other.
- Inaccessible latrines for disabled and elderly people; most of the current latrines are not disability and elderly friendly, which leads people with disabilities and elderly to have difficulties to access the latrines. Elderly people have difficulties in accessing latrines long distances from their homes.
- Sustainability of the latrines constructed: the communities have expressed concern about the current designs of the latrine pits in terms of the length and width of the pit, which leads it to refill and collapse in a short period of time.
- Some health needs may not be covered because mobile clinic services are not enough: they are designed to visit different places and do not have maternal delivery services which are also part of the needs.

Suggested measures

- Latrine pits will be made longer with enough width and built with 3 barrels for long time use.
- Increase the number of latrines, based on the number of household member.
- Establishment and support of camp management committee will help resolve inter-communal conflict with the IDPs.
- Expand the health and nutrition services and increase the number of physical health centres for the IDPs sites.

- Construct a greater number of latrines for people with disabilities and the elderly, where persons with disabilities (PWD) and the elderly are consulted on their siting.
- As requested by both districts community for security purposes, construct single latrine toilet with solar lights and locks to mitigate the risk of GBV.

Consultations with Non-governmental organizations (NGOs)

Representatives from NGO partners implementing WASH and health and nutrition activities were consulted and informed about the planned activities. The consultation was held on 11th of January 2023 and total of 16 representatives from international and local NGO actors including CONCERN, IOM, SCC, NOFYL, SCI, WARDI SOPHPA, MERCY, SOS CV, Youthlink and SORDA attended. SOS Children villages, Mercy and Save the children (SCI) are international NGOs working in the area implementing health, Nutrition and WASH activities in these two districts while SOPHPA, SORDA and WARDI are local NGOs working in the area, implementing health, Nutrition and WASH activities. they were included in the stakeholder groups as other interested parties (OIP).

During the meeting, the partners shared their current activities in both districts and challenges and have suggested improved coordination between actors to avoid service overlapping. It was agreed that this project will coordinate with the NGO partners through regular coordination meeting at districts level and the area based coordination meetings, which are often held by the CCCM.

Grievance Redress Mechanisms

IDPs and host communities will be informed about the grievance redress process in the course of community engagement activities. The summary of registered grievances and actions will also be made public. Handling of grievances is discreet, objective, sensitive and responsive to the needs and concerns of the beneficiaries. The mechanism also allows for anonymous complaints to be raised and addressed. The aggrieved person also has the option to resort to the formal judicial system. Individuals who submit their grievances may request that their name be kept confidential.

The SURP-II GRM is already in place in BRA. The current SURP-II GRM will be available and open for case registration for the Component 4 activities. At the same time, however, IOM, NoFYL, SCC and CONCERN will implement their own GRM, which specifically target aggrieved individuals in and around the project sites. This section describes both GRM.

SURP-II GRM: The current Project GRM consists of a three-tier grievance system. Other than in person reporting, available channels are: email: bmsurp2grc@gmail.com and [toll free number for Mogadishu is 2323](#).

- District level GRM (Tier 1 GRM): A grievance redress committee (GRC) was established in Kahda and Daynile districts and consists of representatives from women and youth groups, elders, religious leaders, representatives from the PAPs, and representatives of the municipality. The mechanism takes into consideration the existing local practices.
- Municipality-level GRM (Tier 2 GRM): The municipal-level GRM already exists under the SURP-II. It addresses unsolved grievances at the district-level GRM. The municipal-level GRC is comprised of the representatives of each district and the PIU and the representatives of the aggrieved persons/communities.

- Federal-level GRM (Tier 3 GRM): The existing federal-level GRM addresses unsolved grievances at the municipality level, which may require higher-level solution or common issues across municipalities participating in Component 4 activities. The federal-level GRC is formed by the Project Coordination Unit (PCU) at the Ministry of Public Works, representatives of relevant municipalities, and other relevant federal ministries and agencies.

IOM's GRM. IOM has been applying an 'Accountability to Affected Persons (AAP)' mechanism. This mechanism will also apply for the work of local partners, NoFYL and SCC. The AAP is based on a) participation, b) complaints and feedback mechanism (CFM), and c) Information sharing and transparency. AAP contains GRM, but also the involvement of the community in the design and implementation of activities and feeding back information and learning to the communities. Where the use of the existing GRM under SURP II is not optimum (in particular Tier-1 GRM), the Component 4 allows the continuation of IOM's GRM as Tier 1 mechanism. However, IOM has formed a new GRC, consisting of IDPs local administration representatives, and the CFM Focal Points to ensure that IOM grievance redress is inclusive. The steps of IOM's GRM, otherwise, will be maintained:

- Operation through two CFM focal points. These individuals will be trained on how to record complaints and provide information request response, in addition to referral pathways and specialized trainings from GBV partners on sensitive case referrals. These individuals will record complaints using the standardized intake form which is provided by the CCCM cluster. Once this form is complete, it can either be photocopied for referral purposes to service providers or filed safely in IOM's office. One of the CFM focal points should be a female staff member to encourage participation from female beneficiaries.
- When setting up a CFM desk for a day, it is important that half of the day is located at a fixed desk, with the other half of the day desk operators are mobile inside of the site. This will allow the focal point to deliver complaints information to individuals who have recently filed complaints, as well as allowing for access to individuals who may not be able to reach the fixed desk. Lastly, this person should be wearing designated CFM visibility which also displays the logo of the CCCM partner. This CFM logo should be circulated with the community so that they are able to associate that logo with the CCCM partners CFM system. In addition to the desk, a hotline number is available: 461.
- Once a complaint has been filed, data should be compiled using an intake form with informed consent being obtained from the individual making the complaint. The CFM focal point and/or other members of staff should now work on contacting service providers according to the complaints that have been registered. A referral form/or copy of intake form/detailed email with necessary data should be filled out for each complaint and sent via email to the respective focal point with follow up done via mobile phone. IOM CFM staff should obtain a response from the service provider about how they are going to rectify a raised complaint within 14 days. Indicative timeline for the escalation process is provided in Table 12 below. Where inclusive decision making should be applied the newly formed GRC will be consulted.
- Information related to how a service provider is going to remedy a complaint will be provided to the individual who has made a complaint based on how they'd like to best receive feedback. When submitting a complaint, individuals have the option of stating how they want to be informed by the CCCM partner on the overall response to the complaint (mobile phone or home visit).
- Once a service provider has fully addressed a specific complaint, details regarding the action should be provided to the community member who originally raised the said complaint. If satisfied with the outcome, the case will be changed from pending to close. Once this has been done, the CFM staff member will upload the complaints data using the cluster's standard kobo form. CFM data will be linked directly to the CCCM cluster via the use of a central CFM database/ODK account. This data will be displayed using power bi on a separate CCCM website

which will allow for stakeholders to disaggregate data and information related to particular sectors, geographic location and demographic making complaints. This data will also be showcased within the CFM database that is created through the kobo data that has been submitted. IOM to upload complaints data using the cluster provided Kobo form for all cases that are closed, or cases that have been open for more than 14 days. IOM will have the ability of accessing their uploaded complaints data via Kobo and will have the ability to alter the status of a complaint in addition to the satisfaction of the complainant.

CONCERN GRM:

A Complaints Response Mechanism (CRM) platform is in place in order for the target communities to provide their complaints and feedback towards activities either through a toll-free call (no. 311) or during our staff meetings with the community. There is a dedicated staff member assigned to respond to all incoming toll free number calls from the communities and record the type of complaint or feedback from the communities. The channels through which feedback is received are;

- Outreach to community: pay visit during informal community gathering, engage with them instead of asking them people to come to you
- Focal persons: designated members of the community (often trusted members of the community), of Concern, of partner organization
- Beneficiaries complaints committee
- Existing community structures which deals with complaints and resolve disputes (village leader, community meetings, etc.)
- Direct visit to Concerns/partner’s office

The PIU project team and IOM, NoFYL, SCC and CONCERN aim to address grievances with the following steps and indicative timelines:

Table 12 Steps and timelines for grievance redress

Number	Steps to Address Grievance	Indicative Timeline	Responsibility
1.	Receive, register and acknowledge complaint in writing	Within 1 day	IDP site-specific GRC ¹⁴ supported by IOM /CONCERN
2.	Screen and establish the basis of the grievance; where the complaint cannot be accepted (e.g. complaints that are not related to the project, the reason for the rejection should be clearly explained to the complainant	Within 3 days	IDP site-specific GRC supported by IOM / CONCERN
3.	GRC to consider ways to address the complaint	Within 3 days	IDP site-specific GRC supported by IOM / CONCERN
4.	Implement the case resolution or the unsatisfied complainant can seek redress through the appeals process	Within 3 days	IDP site-specific GRC/ Municipal GRC/Federal GRC in case of appeal
5.	Document the grievance and actions taken and submit the report to PIU/PCU	Within 3 days	IDP site-specific GRC supported by IOM / CONCERN

¹⁴ IOM CCCM has a conflict resolution committee which is part of the CMCs (Camp Management Committee).

6.	Elevation of the case to a national judiciary system, if complainant wishes to do so	anytime	IDP site-specific GRC supported by IOM / CONCERN
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Figure 17 GRM organigram

Grievances related to Gender Based Violence (GBV). To avoid the risk of stigmatization, exacerbation of the mental/psychological harm and potential reprisal, the grievance mechanism has a different and sensitive approach to GBV cases. The GRCs will have a female member trained in dealing with GBV grievances. The member will be supported by GBV specialists/focal points engaged by IOM and CONCERN. The female community engagement office in BRA will also coordinate with those responsible for the implementation of the SURP II’s SEA/SH Prevention and Response Action Plan, who is also experienced in dealing with GBV issues. The PCU has a GBV specialist who will also closely work with GBV specialists/focal points of IOM and CONCERN.

Where a case is reported, actions taken will ensure confidentiality, safety and survivor-centered care for survivors. Any survivors reporting through the GRM, should be offered immediate referral to appropriate service providers based on their preference and with informed consent, such as medical and psychological support, emergency accommodation, and any other necessary services. In SURP-II, appropriate GBV service providers mapping has been conducted and working relationships established. In BRA, GBV service providers have been mapped by the PIU. Details are attached in Annex 2.

The GBV service providers are expected to refer project related survivors of GBV to the project GRM according to their wishes. GRM operators will be trained on the empathetic, non-judgmental and confidential collection of these complaints. Project workers will also have the right to lodge complaints related to SEA/SH through the GRM, with any supervisor at any level or directly with the PCU (GBV Specialist). Only the nature of the complaint (what the complainant says in her/his own words), whether the complainant believes the perpetrator was related to the project and additional demographic data, such as age and gender, will be collected and reported with informed consent from the survivor. If the survivor does not wish to file a formal complaint, referral to available services will still be offered. The preference of the survivor will be recorded and the case will be considered closed. Recorded GBV/SEA/SH cases should be reported to the World Bank project team within 24 hours.

IOM has recruited protection focal points and protection mobile teams that, who cover general protection, GBV/SEA/SH issues and inclusion issues for the implementation of the Component 4. IOM will identify and seek to address GBV through deliberative dialogue sessions that will be facilitated during community-based planning to ensure that the safety, dignity, well-being and equitable access to services, especially women and girls, is prioritized, integrated and coordinated across all partners. This will create safe spaces for: (a) mitigating risks: by mitigating the risk of GBV in activity planning

and doing no harm; (b) supporting survivors: by facilitating access to survivor-centered, multisectoral services; and (c) addressing the root causes: by contributing towards progressively transforming the conditions that perpetuate GBV.

Monitoring and Reporting

The PIU will conduct monitoring of the activities, including environmental and social risk mitigation measures and compliance with this ESMP and its indicators. Review of documentation and field monitoring will be undertaken on a monthly basis. The PIU will report monitoring observations and results to the PCU. In cases of non-compliance, the PIU will require IOM to take corrective measures to bring activities back to compliance.

IOM will prepare monthly reports, including inputs from CONCERN, NoFYL, SCC and the contractors on the status of implementation of the ESMP to the PIU. Details of these reports and their content are given in the Table below.

Table 13 E&S Monitoring and Compliance Report

#	Title of the Report	Contents of the Report	Frequency of Report Preparation	Report to be prepared by
1.	E&S Progress Reports	Compliance status of the sub-project with the environmental and social mitigation and monitoring measures laid out in this ESMP.	Monthly	CONCERN, NoFYL, SCC and contractors to IOM
3	E&S Monitoring Report	E&S Updates	Informal meeting / monthly	IOM to PIU/PCU
4	E&S Progress Report	Contribution in regards to sub-project to compliance status of overall Project with E&S requirements	Quarterly	IOM to PCU
5	Incident Reports	Incident investigation reports for all major incidents covering details of the incident, root cause analysis, and actions taken to address the future recurrence of this event	Initial investigation report for severe incidents within 24 hours. Detailed Investigation Report within ten days	Contractor/ Service provider/ CONCERN / IOM/ with support of PIUs/PCU

Roles and responsibilities in implementing & supervising the ESMP

Overall institutional arrangement: The proposed Component 4 activities will be implemented under the overarching umbrella of the SURP-II institutional arrangements. The SURP-II PCU, embedded in the Ministry of Public Works Reconstruction and Housing (MoPW) at the federal level has the overall responsibility for the monitoring and supervision of all Component 4 activities, including environmental and social risk management. The established Project Implementation Unit (PIU) in BRA

will support the day-to-day supervision and monitoring of compliance with all mitigation measures for this specific subproject. The PCU and the PIU will also coordinate with the Ministry of Humanitarian Affairs and Disaster Management (MoHADMD) and Durable Solutions Units within SWS, and the SURP-II Federal Member States (FMS) inter-ministerial committee.

The BRA PIU will have overall responsibility for the E&S due diligence, and compliance monitoring of the subproject activities. Based on the IOM, NoFYL, SCC and CONCERN reporting, it will prepare regular monthly/quarterly/semi-annual progress reports for the Bank.

IOM: The WASH activities in the two districts will be implemented by a contractor. The PCU has signed an output agreement with IOM to implement all Component 4 activities. While the small scale site maintenance will be implemented by NoFYL & SCC with the assistance of local community workers, all other construction activities will be implemented by a local firm contracted by IOM, NoFYL & SCC. IOM, NoFYL & SCC will be responsible for: Management of the contractor on implementation of this ESMP, including review and approval of the contractor-ESMP, as advised by the PIU; management of directly recruited community workers including in regards to EHS responsibilities; liaise with various Government agencies on E&S matters; continuously interact with key stakeholders including IDPs, relevant NGOs and host community groups; establishment of dialogue with affected communities and ensuring that environmental and social concerns and suggestions are incorporated and implemented; ensuring the performance of the project in terms of E&S safeguards; provision of quarterly updates on E&S measures and incidents to the PIU; provision of informal monthly updates to the PIU; reporting on severe incidents within 24 hours to the PIU with copy to the World Bank.

CONCERN: The health activities in the two districts will be implemented by CONCERN and a contractor. The PCU has signed an output agreement with IOM to implement all Component 4 activities. CONCERN will be an implementing partner of IOM. CONCERN will be responsible for: Management of its contractor(s) on implementation of this ESMP, including review and approval of the contractor-ESMP, as advised by the PIU; management of directly recruited community workers including in regards to EHS responsibilities; liaise with various Government agencies on E&S matters; continuously interact with key stakeholders including IDPs, relevant NGOs and host community groups; establishment of dialogue with affected communities and ensuring that environmental and social concerns and suggestions are incorporated and implemented; ensuring the performance of the project in terms of E&S safeguards; provision of quarterly updates on E&S measures and incidents to the PIU; provision of informal monthly updates to the PIU; reporting on severe incidents within 24 hours to the PIU with copy to the World Bank.

The Contractors: IOM, NoFYL, SCC and CONCERN will recruit at least 3 contractors for activities like health facility rehabilitation, latrine construction, water kiosks, piping networks etc. The contractors will be responsible for employment of a qualified environmental, social, occupational health and safety expert to manage ESHS issues; and preparation and implementation of the labor management procedures. These procedures and plans will be submitted to IOM, NoFYL, SCC and CONCERN for review and approval before the contractors are allowed to mobilize to the field; supervising of subcontractors to ensure adherence to the LMP, ESMP, maintenance of records of recruitment and employment of contracted workers (including subcontractors) with age verification to avoid child labor; provision of induction and regular training to contracted workers on environmental, social and occupational health and safety issues, including training to workers exposed to specific risks associated with their work; requiring potential primary suppliers to identify and address risks of child labor, forced labor and serious safety issues for primary supply workers; developing and implementing grievance mechanism for contracted workers, including ensuring that grievances received from contracted workers are resolved promptly, and report the status of grievances and resolutions; ensuring that all contracted workers understand and sign the Code of Conduct prior to the

commencement of works, and all other measures to address risks SEA/SH as specified in the contractor's LMP/ESMP are taken; reporting to IOM, NoFYL, SCC and CONCERN on labor and OHS performance.

Indicative Cost of implementation of the ESMP (Omitted before disclosure)

Annex 1: Stakeholder Consultations (Omitted before disclosure)

Annex 2: List of available GBV Service Providers in BRA



Psychosocial Support (For Children and Adults)

New Dawn Somalia

Phone: 0615271964
Open: Sunday to Thursday
08:00 am - 4:00pm

Danish Refugee Council

Phone: 06191005552
Open: Sunday to Thursday
08:00 am - 4:00pm



Health Care

WARDI

Kalkal & Hamar Jajab
Phone: 0615189993
Open: Everyday (24 hours)

International Medical Corps (IMC)

Phone: 061659427
Open: Sunday to Thursday
24 hours

SOYDA

Phone: 0615199110
Open: Sunday to Thursday
8:00am to 4:00pm

SWCCA

Waberi
Phone: 0615830812
Open: Sunday to Thursday
08:00am - 5:00pm

NoFYL

Taleex
Phone: 0615433761
Open: Sunday to Thursday
9.00am – 3.00pm

Somalia Health and Demographic Organization

Phone: 0618059888
Open: Sunday to Thursday
8.30am – 4.00pm

SWDC

Wadajir, Kahda, Daynile, Hodan
Phone: 0613615341
Open: Sunday to Thursday
8:30am - 4:00pm

Elite Relief Society (ERS)

Phone: 0616872705
Open: Mondays and Thursdays
8:30am – 4:30pm

IRC

Wadajir, KM8, KM12, Karan
Phone: 0615232117
Open: Sunday to Thursday
08:00am -5:00pm

OSPAD

Hodan
Phone: 0615784478
Open: Everyday (24 hours)

SSWC

Waberi
Phone: 0618106541
Open: Sunday to Thursday
08:00am -5:00pm

WOCCA

Kaxda
Phone: 0615224511
Open: Sunday to Thursday
08:00am -3:00pm

SORDA

Phone: 0616067706
Open: Sunday to Thursday
08:00 am - 4:00pm

ACORDO

Abdiaziz
Phone: 0615598428
Open: Everyday (24 hours)

WEDO

Phone: 0617720258
Open: Saturday to Friday
(24 hours)

Somali Community Concern

Phone: 0615889948
Open: Sunday to Thursday
Hours: 8:00am – 4:00pm

MMD

Wadajir & Kaxda
Phone: 0615507981
Open: Sunday to Thursday
08:00 am - 4:00pm

HINNA

Dayniile
Phone: 0615969745
Open: Sunday to Thursday
8:00 am - 4:00pm



Health Care

SOS Children Villages Somalia

Phone: 0612671770
Open: Sunday to Thursday
8:00am – 4:00pm



Safe Shelter

New Dawn Somalia

Phone: 0615271964
Open: Sunday to Thursday
08:00 am - 4:00pm

AVORD

Phone: 0615884767
Open: Sunday to Thursday
Hours: 8:00am – 5:00pm

Somali Youth Concern

Phone: 0615591277
Open: Sunday to Thursday
08:00 am - 4:00pm

Somali Peace Line

Phone: 0615444323
Open: Sunday to Thursday
08:00 am - 4:00pm

HINNA

Dayniile
Phone: 0615969745
Open: Sunday to Thursday
8:00 am - 4:00pm

Danish Refugee Council

Phone: 06191005552
Open: Sunday to Thursday
08:00 am - 4:00pm

SOYDA

Phone: 0615199110
Open: Sunday to Thursday
8:00am to 4:00pm

Somali Community Concern

Phone: 0615889948
Open: Sunday to Thursday
Hours: 8:00am – 4:00pm

ACORDO

Abdiaziz
Phone: 0615598428
Open: Everyday (24 hours)

Somalia Health and Demographic Organization

Phone: 0618059888
Open: Sunday to Thursday
8.30am – 4.00pm

SWDC

Wadajir, Hodan.
Phone: 0613615341
Open: Sunday to Thursday
8.30am – 4.00pm

WEDO

Phone: 0617720258
Open: Saturday to Friday
(24 hours)

SORDA

Phone: 0616067706
Open: Sunday to Thursday
08:00 am - 4:00pm

WARDI

KalKal & Hamar Jajab
Phone: 0615189993
Open: Everyday (24 hours)

IRC

Wadajir, KM8, KM12, Karan
Phone: 0615232117
Open: Sunday to Thursday
08:00am -5:00pm

MMD

Wadajir & Kaxda
Phone: 0615507981
Open: Sunday to Thursday
08:00 am - 4:00pm

SSWC

Waberi
Phone: 0618106541
Open: Sunday to Thursday
08:00 am - 4:00pm

CRS (through partners)

Phone: 0619234906



Legal Assistance

ACORDO
Abdiaziz
Phone: 0615598428
Open: Everyday (24 hours)

OSPAD
Hodan
Phone: 0615784478
Open: Everyday (24 hours)

HINNA
Dayniile
Phone: 0615969745
Sunday to Thursday
8:00 am - 4:00pm

WITNESS SOMALIA
Phone: 0612115100
Open: Sunday to Thursday
8:30am – 4:30pm

SIHA NETWORK
Phone: 0619325204
Open: Sunday to Thursday
8:30am – 4:30pm

Elite Relief Society (ERS)
Phone: 0616872705
Mondays and Thursdays
8:30am – 4:30pm

New Dawn Somalia
Phone: 0615271964
Open: Sunday to Thursday
08:00 am - 4:00pm

SWDC
All 17 Districts
Phone: 0613615341
Open: Sunday to Thursday
8.30am – 4.00pm

IRC
Wadajir, KM8, KM12, Karan
Phone: 0615232117
Open: Sunday to Thursday
08:00am -5:00pm

SSWC
Waberi
Phone: 0618106541
Open: Sunday to Thursday
08:00 am - 4:00pm

WEDO
Phone: 0617720258
Open: Saturday to Friday
(24 hours)

Somali Peace Line
Phone: 0615444323
Open: Sunday to Thursday
08:00 am - 4:00pm



Hotline Services

SWDC
Hotline number: 2004
Children only hotline: 116
All are free to call

SWCCA
Hotline number: 3003
No charges apply

DRC
Hotline number: 332
No charges apply

NoFYL
Hotline number: 2181
No charges apply

Region: Banadir Regional Administration



Psychosocial Support (For Children and Adults)

NoFYL

Taleex

Phone: 0615433761
Open: Sunday to Thursday
9.00am – 3.00pm

AVORD

Phone: 0615884767
Open: Sunday to Thursday
Hours: 8:00am – 5:00pm

KAHRO

Medina
Phone: 615880840
Open: Sunday to Thursday
8:00am – 12:00pm

WITNESS SOMALIA

Phone: 0612115100
Open: Sunday to Thursday
8:30am – 4:30pm

International Medical Corps (IMC)

Phone: 061659427
Open: Sunday to Thursday
8:30am – 4:30pm

WARDI

Kalkal & Hamar Jajab
Phone: 0615189993
Every day (24 hours)

SWCCA

Waberi

Phone: 0615830812
Open: Sunday to Thursday
08:00am - 5:00pm

SOYDA

Phone: 0615199110
Open: Sunday to Thursday
08:00am - 5:00pm

Somalia Health and Demographic Organization

Phone: 0618059888
Open: Sunday to Thursday
8:00am – 5:00pm

Elite Relief Society (ERS)

Phone: 0616872705
Open: Mondays and Thursdays
8:30am – 4:30pm

ACORDO

Abdiaziz

Phone: 0615598428
Open: Everyday (24 hours)

SWDC

Wadajir, Hodan, Dayniile, Kahda

Phone: 0613615341
Open: Sunday to Thursday
Hours: 8:00am – 4:00pm

Somali Community Concern

Phone: 0615889948
Open: Sunday to Thursday
Hours: 8:00am – 4:00pm

IRC

Wadajir, KM8, KM12, Karan

Phone: 0615232117
Open: Sunday to Thursday
08:00am -5:00pm

OSPAD

Hodan

Phone: 0615784478
Open: Everyday (24 hours)

WEDO

Phone: 0617720258
Open: Saturday to Friday
(24 hours)

WOCCA

Kaxda

Phone: 0615224511
Open: Sunday to Thursday
08:00am -3:00pm

HINNA

Dayniile

Phone: 0615969745
Open: Sunday to Thursday
8:00 am - 4:00pm

MMD

Wadajir & Kaxda

Phone: 0615507981
Open: Sunday to Thursday
08:00 am - 4:00pm

SORDA

Phone: 0616067706
Open: Sunday to Thursday
08:00 am - 4:00pm

Somali Peace Line

Phone: 0615444323
Open: Sunday to Thursday
08:00 am - 4:00pm

Annex 3: Environmental and Social Screening Form

INDICATIVE ENVIRONMENTAL AND SOCIAL SCREENING CHECKLIST

No	ITEM	DETAILS		
INTRODUCTION				
1	Project Name	SURP-II and SURP-II Additional Financing		
2	Project Location	Daynille District (Zone-2, 4 & 5) & Khada district, BRA, Somalia		
3	Project Description (brief)	Provision of improved WASH services (clean water & sanitation facilities); emergency health and nutrition services via fixed and mobile clinics; Facilitating land tenure documentation for vulnerable IDPs who are at risk of evictions.		
4	Does the Project require any:	<i>yes</i>	<i>no</i>	<i>If yes, extent in ha.</i>
	Reclamation of land, wetlands		No	
	Clearing of grazing lands		No	
	Felling of trees	No		Since the BRA area has been inhabited by protracted IDPs for quite some time, it has almost become a settlement and there is no significant vegetation at the proposed site, and no impacts on habitats and fauna are anticipated.
5	Minimum land area required for the proposed development (ha)	4,512 hectares		
6	Available total land area within the identified location (ha)	4,034 hectares		
7	Expected construction period	6 months		
8	Responsible contact person, contact Information	Fasika Dabesa Diro fdiro@iom.int		

No	ITEM	DETAILS		
20	Interference with normal movement of animals	No mass animal migration is there on the target area.	----- (Not applicable)	
21	Irreversible/irreparable environmental change	Since the BRA area has been inhabited by protracted IDPs for quite some time, it has almost become a settlement and there is no significant vegetation at the proposed site, and no impacts on the environment is anticipated.	----- (Not applicable)	
21	Possible exposure to COVID-19 transmission	Risk of the spread of Covid-19 is expected	All project personnel and workers, including visitors, shall use PPE such as masks.	
22	Enhanced risk of flooding in riparian cities	No site development activities take place.	----- (Not applicable)	
23	Adverse impacts on river and coastal ecosystem resulting from: (i) alterations of surface runoff through compaction of soils and increase in impermeable surfaces, (ii) changes to flow regimes of ephemeral streams and intermittent rivers (water velocity, depth, depositional patterns, and channel morphology) and, (iii) locating of outfall points at or near the shorelines of Mogadishu and Kismayo	No site development activities take place.	----- (Not applicable)	
24	Accidental leaks/spills of oil/fuel from on-site construction facilities, equipment, or machinery, and accidental damage to septic tanks located on the right of way	The maximum number of heavy-duty machineries to be used at any one time will be 1. i.e., The drilling rig accompanied by the generator.	We ensure that the equipment is in good shape and well serviced before commencing the activity.	
COMMUNITY ENGAGEMENT				
21				Participants

No	ITEM	DETAILS		
9	Present land ownership	State:	<u>Private Land owned by different landlords.</u>	Other:
10	Source of funding of the borrower	World bank		
11	Total Cost of the Project	\$ 1.8 Million		
12	Anticipated Date of Completion	September 2023		
ENVIRONMENTAL IMPACT AND MITIGATION/ENHANCEMENT DURING CONSTRUCTION PERIOD				
	Impacts	Description	Mitigation/Enhancement	
13	Soil erosion	No site development activities take place.	----- (Not applicable)	
14	Water pollution	No major water bodies are located in the vicinity of the target districts.	----- (Not applicable)	
15	Noise pollution	No heavy-duty machineries shall be used except the water drilling rigs	no significant noise pollution is anticipated.	
16	Excessive solid waste generation and inappropriate disposal	No site development activities take place.	----- (Not applicable)	
17	Loss of vegetation cover	Since the BRA area has been inhabited by protracted IDPs for quite some time, it has almost become a settlement and there is no significant vegetation at the proposed site, and no impacts on habitats and fauna are anticipated.	----- (Not applicable)	
18	Habitat loss or fragmentation	No significant alteration on the natural habitat.	----- (Not applicable)	
19	General disturbance to animal behaviour	No Animal is living on the area.	----- (Not applicable)	

No	ITEM	DETAILS				
	Number and nature of public consultation meetings conducted so far	Type of Meeting	Number of Meetings	Nature of Participants	Male	Female
		Stakeholder consultation	1	Local NGO; Women Group; Youth Group; Elderly Group; Host communities; IDP's Communities; private water companies operating in the two districts.	70	50
CONTACT DETAILS OF OFFICIALS						
	Name of the person completing form		Fasika Dabesa Diro			
	Designation and contact information		Site development Engineer, fdiro@iom.int ; +251911243261			
	List of team members		Abdirahman Abdulahi (abdirahmoham@iom.int); David Wanja (dwanja@iom.int); Ahmed Abdulkadir (ahabdulkadir@iom.int) ; Masud Mohamud (masud.mohamud@concern.net)			
	Signature and date					

Fasika
Dabesa
Diro

Digitally signed by
Fasika Dabesa Diro
Date: 2023.03.12
16:26:24 +03'00'

Annex 4: GRM Screening Form

Table 9 GRM Screening Form for IOM

Name of Implementing Partner: IOM				
Date: October 2022				
Name of Respondent:				
No.	Criteria	Yes	No	Comment/ Explanation and Gap-filling measures
General GRM				
1.	Does the IP have clear, formal, and transparent internal mechanisms and rules for addressing grievances?	X		Yes, IOM has a clear mechanism in place
2.	Does IP staff responsible for grievance redress have the authority to take or demand remedial action?	X		Yes, as part of the mechanism staff can take actions
3.	Are IP staff responsible for grievance redress obliged to take action on all grievances?	X		Yes, if they are related to the project
4.	Are beneficiaries allowed to lodge grievances anonymously without fear of retaliation?	X		Yes, that is possible
5.	Are beneficiaries aware of their right to file a grievance and of the grievance redress process in general?	X		Yes, awareness raising of the mechanism is undertaken
6.	Do clear mechanisms of communication exist for potential users of the GRM on the existence and processes of the GRM?	X		Yes, awareness raising and written pamphlets are available
7.	Does communication material exist for the general public (what kind of material is it? How is it disseminated)?	X		Yes, communication material does exist
8.	Are there internal processes in place to record, track, and monitor the grievances and the action taken?	X		Yes, grievance registers exist
9.	Does the GRM provide timely feedback (written or otherwise) to the aggrieved party on actions taken?	X		Yes, timely feedback is provided
10.	Is a system in place to keep complainants informed with status updates?	X		Yes, complainants are kept informed

11.	Is there an appeals process in place that GRM users can access if they are not satisfied with how their grievance has been resolved?	X		An appeals process exist
12.	Do multiple grievance uptake channels and locations exist?	X		Yes, multiple channels exist
13.	Are grievance uptake channels accessible for all stakeholders including vulnerable groups (such as women, persons with disabilities, illiterate persons)?	X		Yes, vulnerable groups are included in the GRM
14.	Is there a fixed service standard for grievance resolution?	X		Yes, there is a procedures in place
15.	Do clear grievance processing guidelines exist?	X		Yes, clear guidance exists
16.	Does the GRM contain the typical GRM value chain (Uptake, sort and process, acknowledge and follow-up; verify, investigate and act; monitor and evaluate; provide feedback)?	X		Yes, it follows the GRM value chain
17.	Does a process for periodic evaluation of the GRM logs/data exist that informs proactive actions to stem complaints and grievances?	X		Yes, periodic reviews are undertaken

Table 10 GRM Screening Form for CONCERN

Name of Implementing Partner: CONCERN				
Date: May 2023				
Name of Respondent:				
No.	Criteria	Yes	No	Comment/ Explanation and Gap-filling measures
General GRM				
1.	Does the IP have clear, formal, and transparent internal mechanisms and rules for addressing grievances?	X		Yes, CONCERN has a clear mechanism in place
2.	Does IP staff responsible for grievance redress have the authority to take or demand remedial action?	X		Yes, as part of the mechanism staff can take actions
3.	Are IP staff responsible for grievance redress obliged to take action on all grievances?	X		Yes, they do
4.	Are beneficiaries allowed to lodge grievances anonymously without fear of retaliation?	X		Yes
5.	Are beneficiaries aware of their right to file a grievance and of the grievance redress process in general?	X		Yes, information is provided at project site

6.	Do clear mechanisms of communication exist for potential users of the GRM on the existence and processes of the GRM?	X		Yes, information is provided at project site
7.	Does communication material exist for the general public (what kind of material is it? How is it disseminated)?	X		Yes, communication material does exist
8.	Are there internal processes in place to record, track, and monitor the grievances and the action taken?	X		Yes, grievance registers exist
9.	Does the GRM provide timely feedback (written or otherwise) to the aggrieved party on actions taken?	X		Yes, timely feedback is provided
10.	Is a system in place to keep complainants informed with status updates?	X		Yes, complainants are kept informed
11.	Is there an appeals process in place that GRM users can access if they are not satisfied with how their grievance has been resolved?	X		An appeals process exists
12.	Do multiple grievance uptake channels and locations exist?	X		Multiple channels exist
13.	Are grievance uptake channels accessible for all stakeholders including vulnerable groups (such as women, persons with disabilities, illiterate persons)?	X		Yes, vulnerable groups are targeted by the GRM
14.	Is there a fixed service standard for grievance resolution?	X		Yes
15.	Do clear grievance processing guidelines exist?	X		Yes, clear guidance exists
16.	Does the GRM contain the typical GRM value chain (Uptake, sort and process, acknowledge and follow-up; verify, investigate and act; monitor and evaluate; provide feedback)	X		Yes, it follows the GRM value chain
17.	Does a process for periodic evaluation of the GRM logs/data exist that informs proactive actions to stem complaints and grievances?	X		Reviews are undertaken

Annex 5: Land Agreements for Civil Work Sites (Omitted before disclosure)

Annex 6: Infrastructure Locations

Water Supply System

Figure 18 BH-1 Water Supply System

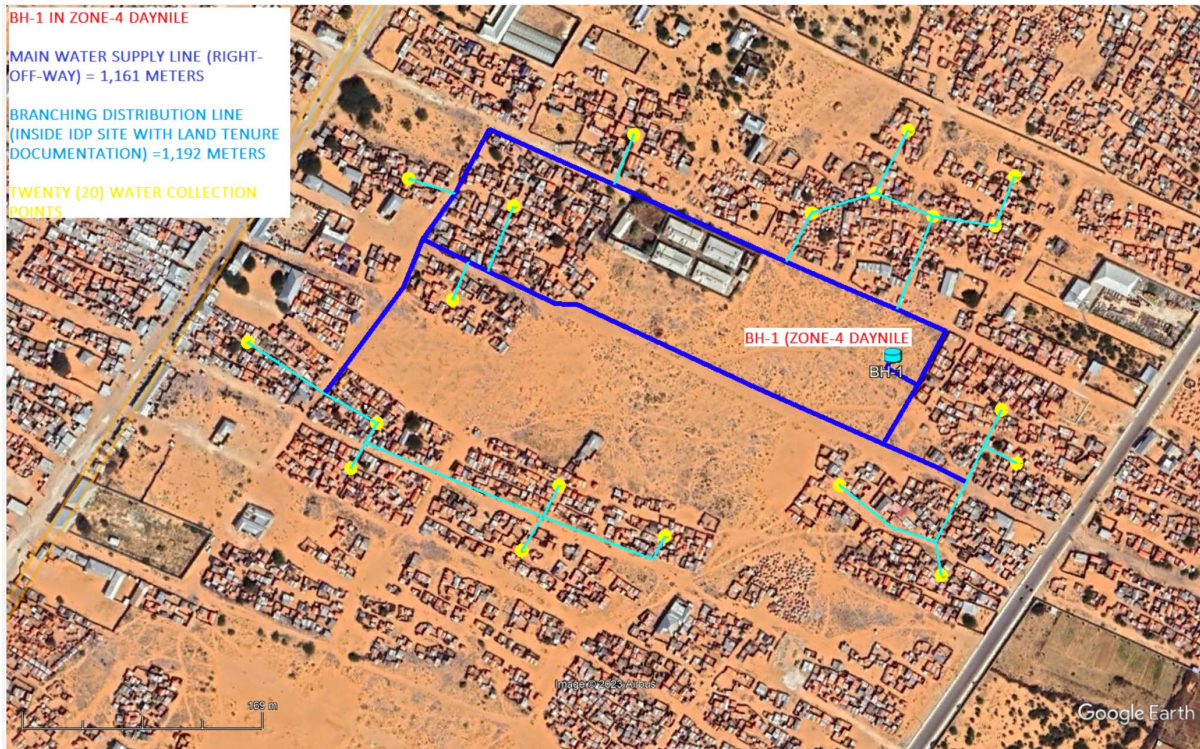


Figure 19 BH-2 Water Supply System

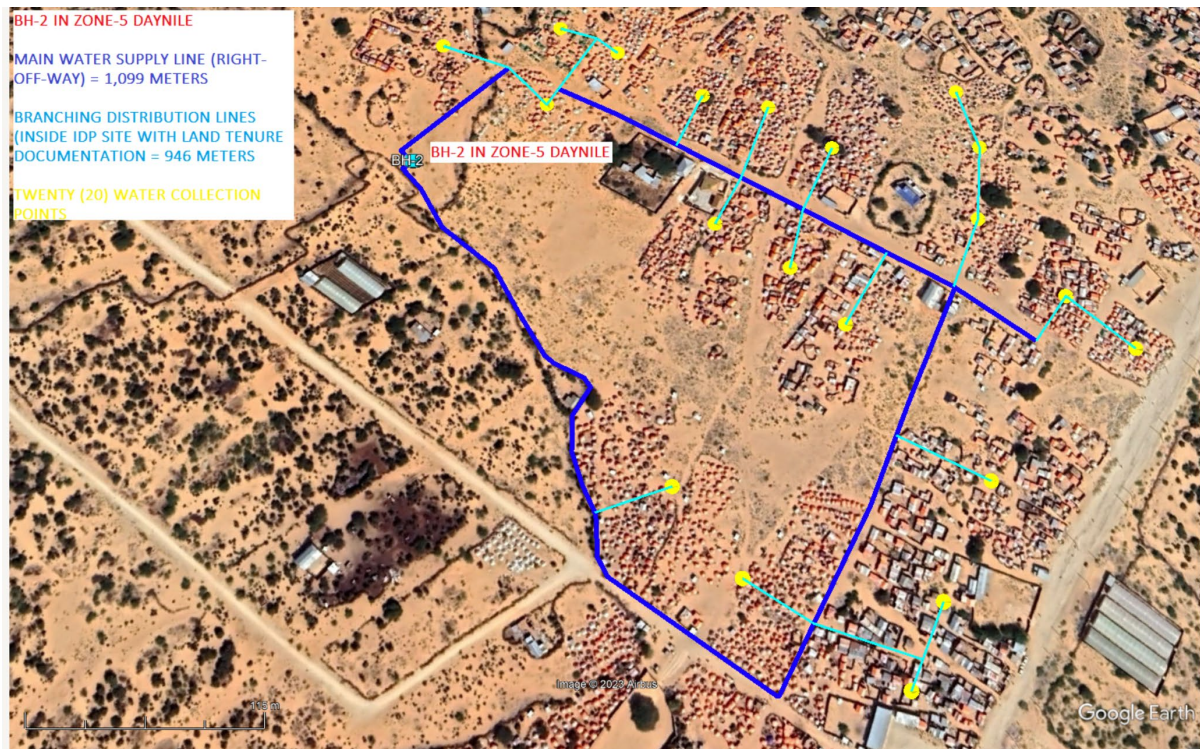


Figure 20 BH-3 Khada Water Supply System

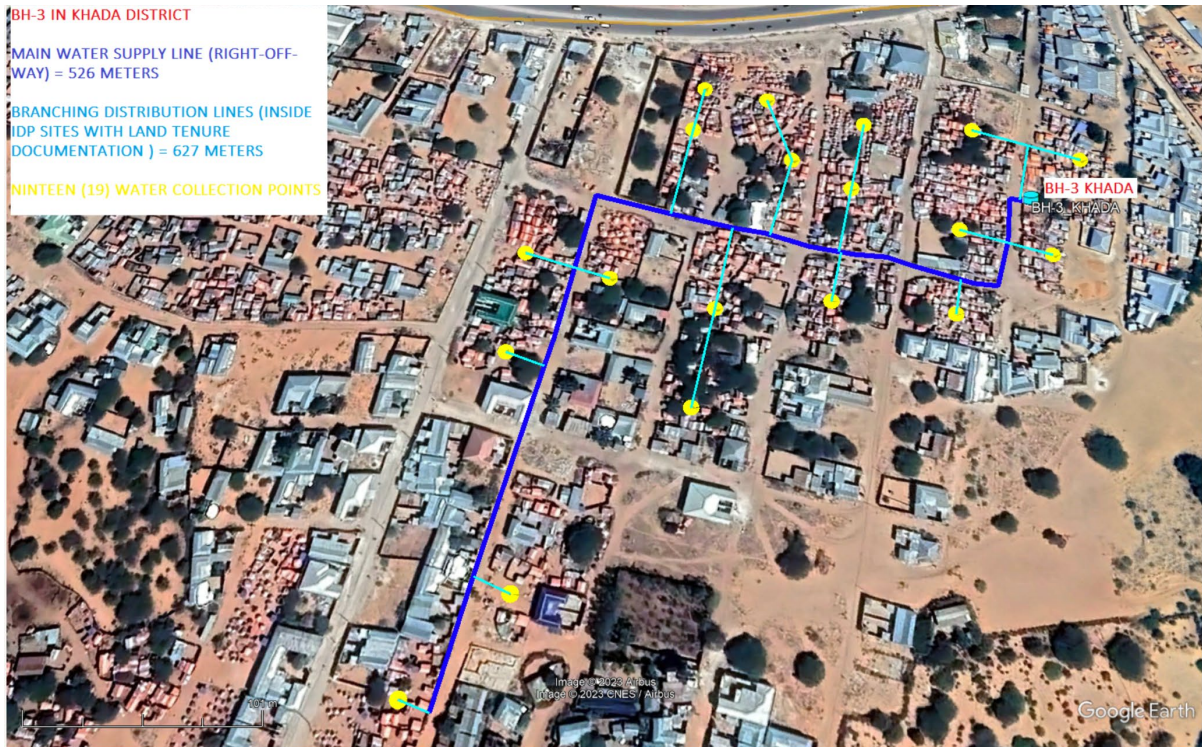


Figure 21 BH-4 Water Supply System

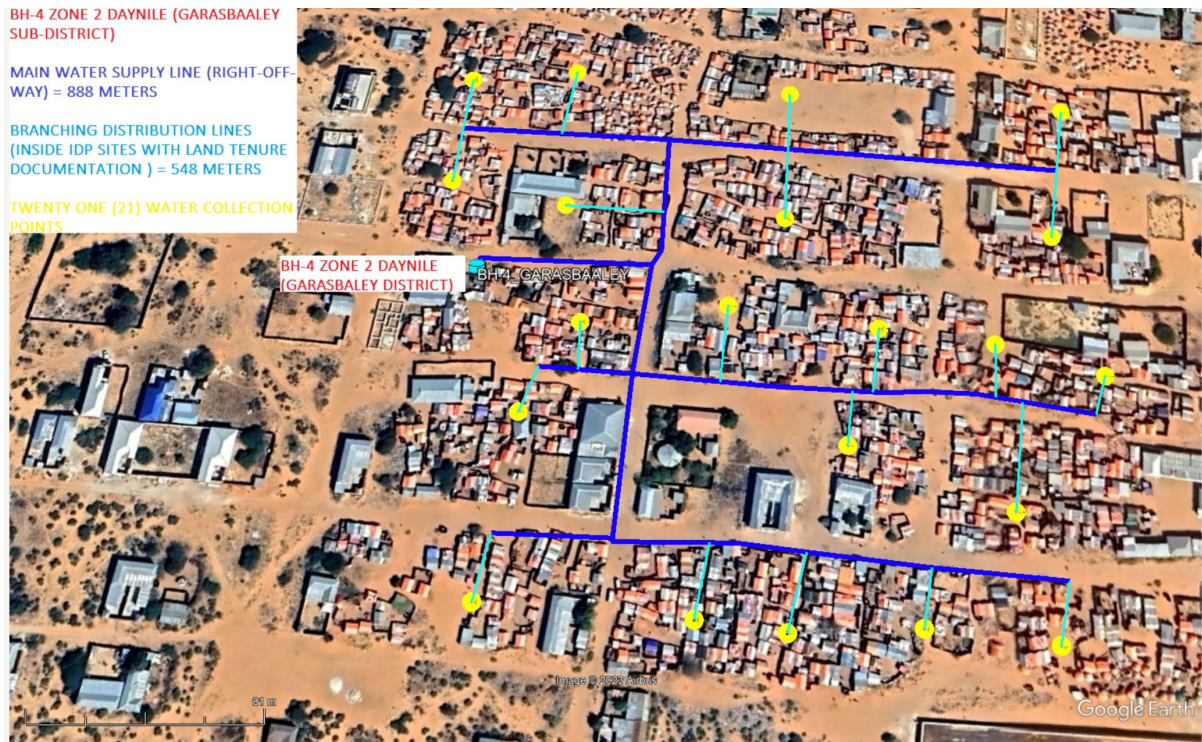


Figure 22 Branching pipe length from BH-1

SOURCE	pipe branch inside the IDP site with land tenure security	length (meters)
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-1	39
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-2	142
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-3	131
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-4	73
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-5	59
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-6	27
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-7	74
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-8	83
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-9	131
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-10	29
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-11	161
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-12	127
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-13	30
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-14	51
BH-1 ZONE-4 OF DAYNILE	Branching Pipe-15	36

Figure 23 Branching pipe length from BH-2

SOURCE	pipe branch inside the IDP site with land tenure security	length (meters)
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-1	50
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-2	45
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-3	47
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-4	42
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-5	42
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-6	93
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-7	90
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-8	55
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-9	146
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-10	84
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-11	56
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-12	50
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-13	101
BH-2 ZONE-5 OF DAYNILE	Branching Pipe-14	45

Figure 24 Branching Pipe Length from BH-3

SOURCE	pipe branch inside the IDP site with land tenure security	length (meters)
BH-3 ZONE-6 OF KAHDA	Branching Pipe-1	36
BH-3 ZONE-6 OF KAHDA	Branching Pipe-2	56
BH-3 ZONE-6 OF KAHDA	Branching Pipe-3	45
BH-3 ZONE-6 OF KAHDA	Branching Pipe-4	20
BH-3 ZONE-6 OF KAHDA	Branching Pipe-5	30
BH-3 ZONE-6 OF KAHDA	Branching Pipe-6	77
BH-3 ZONE-6 OF KAHDA	Branching Pipe-7 B11	84
BH-3 ZONE-6 OF KAHDA	Branching Pipe-8	106
BH-3 ZONE-6 OF KAHDA	Branching Pipe-9	78
BH-3 ZONE-6 OF KAHDA	Branching Pipe-10	44
BH-3 ZONE-6 OF KAHDA	Branching Pipe-11	19
BH-3 ZONE-6 OF KAHDA	Branching Pipe-12	18
BH-3 ZONE-6 OF KAHDA	Branching Pipe-13	14

Figure 25 Branching Pipe length from BH-4

SOURCE	pipe branch inside the IDP site with land tenure security	length (meters)
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-1	47
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-2	30
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-3	39
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-4	56
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-5	58
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-6	19
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-7	19
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-8	31
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-9	21
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-10	25
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-11	21
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-12	42
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-13	16
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-14 B18	24
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-15	27
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-16	29
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-17	21
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	Branching Pipe-18	23

Figure 26 Water Collection Point from BH-1

SOURCE	WATER COLLECTION POINT	EASTING (UTM)	NORTHING (UTM)
BH-1 ZONE-4 OF DAYNILE	1	530775	229219
BH-1 ZONE-4 OF DAYNILE	2	530906	229163
BH-1 ZONE-4 OF DAYNILE	3	530953	229178
BH-1 ZONE-4 OF DAYNILE	4	530978	229224
BH-1 ZONE-4 OF DAYNILE	5	530995	229161
BH-1 ZONE-4 OF DAYNILE	6	531041	229154
BH-1 ZONE-4 OF DAYNILE	7	531055	229190
BH-1 ZONE-4 OF DAYNILE	8	531046	229020
BH-1 ZONE-4 OF DAYNILE	9	531058	228981
BH-1 ZONE-4 OF DAYNILE	10	531002	228899
BH-1 ZONE-4 OF DAYNILE	11	530927	228965
BH-1 ZONE-4 OF DAYNILE	12	530798	228928
BH-1 ZONE-4 OF DAYNILE	13	530721	228965
BH-1 ZONE-4 OF DAYNILE	14	530693	228918
BH-1 ZONE-4 OF DAYNILE	15	530570	228978
BH-1 ZONE-4 OF DAYNILE	16	530589	229011
BH-1 ZONE-4 OF DAYNILE	17	530495	229069
BH-1 ZONE-4 OF DAYNILE	18	530643	229100
BH-1 ZONE-4 OF DAYNILE	19	530688	229167
BH-1 ZONE-4 OF DAYNILE	20	530611	229187

Figure 27 Water Collection Points locations from BH-2

SOURCE	WATER COLLECTION POINT	EASTING (UTM)	NORTHING (UTM)
BH-2 ZONE-5 OF DAYNILE	1	531521	231455
BH-2 ZONE-5 OF DAYNILE	2	531454	231495
BH-2 ZONE-5 OF DAYNILE	3	531528	231514
BH-2 ZONE-5 OF DAYNILE	4	531565	231497
BH-2 ZONE-5 OF DAYNILE	5	531620	231467
BH-2 ZONE-5 OF DAYNILE	6	531661	231458
BH-2 ZONE-5 OF DAYNILE	7	531624	231373
BH-2 ZONE-5 OF DAYNILE	8	531699	231427
BH-2 ZONE-5 OF DAYNILE	9	531667	231343
BH-2 ZONE-5 OF DAYNILE	10	531697	231306
BH-2 ZONE-5 OF DAYNILE	11	531782	231470
BH-2 ZONE-5 OF DAYNILE	12	531791	231427
BH-2 ZONE-5 OF DAYNILE	13	531783	231376
BH-2 ZONE-5 OF DAYNILE	14	531827	231324
BH-2 ZONE-5 OF DAYNILE	15	531863	231291
BH-2 ZONE-5 OF DAYNILE	16	531770	231214
BH-2 ZONE-5 OF DAYNILE	17	531736	231149
BH-2 ZONE-5 OF DAYNILE	18	531715	231104
BH-2 ZONE-5 OF DAYNILE	19	531630	231160
BH-2 ZONE-5 OF DAYNILE	20	531594	231210

Figure 28 Water Collection Points location from BH-3

SOURCE	WATER COLLECTION POINT	EASTING (UTM)	NORTHING (UTM)
BH-3 ZONE-6 OF KAHDA	1	526072	228565
BH-3 ZONE-6 OF KAHDA	2	526018	228582
BH-3 ZONE-6 OF KAHDA	3	526046	228506
BH-3 ZONE-6 OF KAHDA	4	526003	228522
BH-3 ZONE-6 OF KAHDA	5	525993	228473
BH-3 ZONE-6 OF KAHDA	6	525936	228482
BH-3 ZONE-6 OF KAHDA	7	525952	228548
BH-3 ZONE-6 OF KAHDA	8	525962	228586
BH-3 ZONE-6 OF KAHDA	9	525924	228566
BH-3 ZONE-6 OF KAHDA	10	525913	228603
BH-3 ZONE-6 OF KAHDA	11	525881	228612
BH-3 ZONE-6 OF KAHDA	12	525874	228586
BH-3 ZONE-6 OF KAHDA	13	525880	228480
BH-3 ZONE-6 OF KAHDA	14	525866	228425
BH-3 ZONE-6 OF KAHDA	15	525830	228497
BH-3 ZONE-6 OF KAHDA	16	525788	228511
BH-3 ZONE-6 OF KAHDA	17	525781	228454
BH-3 ZONE-6 OF KAHDA	18	525788	228340
BH-3 ZONE-6 OF KAHDA	19	525745	228299

Figure 29 Water Collection Points locations from BH-4

SOURCE	WATER COLLECTION POINT	EASTING (UTM)	NORTHING (UTM)
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	1	527806	230770
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	2	527812	230817
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	3	527855	230820
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	4	527851	230760
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	5	527942	230810
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	6	527937	230754
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	7	528053	230803
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	8	528041	230746
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	9	527834	230675
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	10	527857	230711
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	11	527914	230717
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	12	527955	230663
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	13	527970	230708
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	14	528014	230702
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	15	528014	230639
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	16	528054	230689
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	17	527820	230607
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	18	527898	230601
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	19	527930	230597
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	20	527978	230598
BH-4 ZONE-2 OF DAYNILE (GARASBAALEY DISTRICT)	21	528025	230593

Latrine Locations

Figure 30 Latrine locations

LATRINE NUMBER	LATITUDE	LONGITUDE
1	2.073864541	45.274785767
2	2.073755935	45.275019553
3	2.073638274	45.275298300
4	2.073375877	45.275478105
5	2.073384722	45.276629145
6	2.072995728	45.276458220
7	2.072615818	45.276071477
8	2.072443944	45.275954545
9	2.073429891	45.277006838
10	2.073773662	45.277114807
11	2.073927462	45.277114834
12	2.073085986	45.277663229
13	2.072932126	45.278004917
14	2.073683018	45.278094973
15	2.073827730	45.278328803
16	2.074053875	45.278508692
17	2.073800519	45.278724468
18	2.073646731	45.278652501
19	2.073456734	45.278697430
20	2.073411465	45.278886265
21	2.073302872	45.279048110
22	2.073203427	45.278634439
23	2.072751082	45.278580405
24	2.072669663	45.278553413
25	2.073710021	45.278877324
26	2.073728061	45.279183072
27	2.073664709	45.279308956
28	2.073592307	45.279452823
29	2.073447552	45.279461790
30	2.073103772	45.279407775
31	2.072995220	45.279335816
32	2.072859528	45.279254860
33	2.072072481	45.278975955
34	2.072072471	45.279029910
35	2.072018161	45.279182773
36	2.072000059	45.279227732
37	2.071891548	45.278921969
38	2.071819114	45.279245685
39	2.071764795	45.279452503
40	2.071692562	45.278643167
41	2.071773976	45.278697136
42	2.071484415	45.279002830
43	2.071439165	45.279083754
44	2.071303407	45.279380482
45	2.071574821	45.279371537
46	2.071511469	45.279497421
47	2.071448117	45.279623304
48	2.071774090	45.278049678
49	2.071737882	45.278166573
50	2.071556859	45.278625158

LATRINE NUMBER	LATITUDE	LONGITUDE
50	2.071556859	45.278625158
51	2.071493488	45.278858952
52	2.071240239	45.278463238
53	2.071077330	45.278813916
54	2.070977778	45.279002741
55	2.071222217	45.278058574
56	2.071113626	45.278202434
57	2.071050211	45.278688017
58	2.070977805	45.278849869
59	2.070860311	45.278184405
60	2.070787910	45.278319280
61	2.070615949	45.278696934
62	2.070552599	45.278813825
63	2.071186155	45.277339169
64	2.070941907	45.277204240
65	2.071548187	45.276493939
66	2.071448614	45.276808659
67	2.071846858	45.275828547
68	2.071711095	45.276152253
69	2.071385480	45.275693580
70	2.070643481	45.276475797
71	2.071286073	45.275055097
72	2.071973602	45.275342975
73	2.072181743	45.275010289
74	2.072652356	45.274066159
75	2.072561853	45.274254986
76	2.094345806	45.282307138
77	2.094517686	45.282388102
78	2.094644316	45.282549992
79	2.094680473	45.282720858
80	2.094164798	45.282675802
81	2.094110496	45.282783704
82	2.094300364	45.283449191
83	2.094237023	45.283512127
84	2.094707410	45.283844938
85	2.094770730	45.283898905
86	2.094815946	45.284006825
87	2.094761642	45.284123719
88	2.094173595	45.284051672
89	2.094264052	45.284123629
90	2.094571601	45.284411448
91	2.094662058	45.284483405
92	2.094752500	45.284645288
93	2.094698202	45.284726212
94	2.094363528	45.284357455
95	2.094263982	45.284510311
96	2.094435807	45.284888032
97	2.094381510	45.284968955
98	2.094001541	45.284923923
99	2.093902031	45.284878943
100	2.093820593	45.284959861

LATRINE NUMBER	LATITUDE	LONGITUDE
101	2.093911055	45.285004841
102	2.094182451	45.285094816
103	2.094254812	45.285184755
104	2.094191446	45.285382580
105	2.093865744	45.285418492
106	2.093730050	45.285355519
107	2.093214327	45.285571248
108	2.093395250	45.285670200
109	2.093675703	45.285706221
110	2.094001403	45.285679302
111	2.092988087	45.285912926
112	2.093422324	45.286038901
113	2.093965150	45.286030007
114	2.092589979	45.286110691
115	2.092798097	45.285921884
116	2.093069428	45.286362570
117	2.092770845	45.286524383
118	2.092363746	45.286416398
119	2.092979400	45.283943546
120	2.093115103	45.283961556
121	2.093078855	45.284285283
122	2.092662664	45.284429089
123	2.092843592	45.284501062
124	2.092716915	45.284599958
125	2.092653570	45.284680880
126	2.092988322	45.284626985
127	2.092933994	45.284878768
128	2.092364074	45.284626872
129	2.092228356	45.284689796
130	2.092165004	45.284815681
131	2.092354940	45.285103478
132	2.092626326	45.285247409
133	2.092074403	45.285526079
134	2.092137648	45.285984713
135	2.092083312	45.286281458
136	2.091495372	45.285624893
137	2.091820971	45.286146522
138	2.091803056	45.285166327
139	2.091775940	45.285031433
140	2.091875489	45.284860592
141	2.091712679	45.284653733
142	2.091477486	45.284482831
143	2.091178954	45.284365874
144	2.091278493	45.284248988
145	2.091631303	45.284392933
146	2.092011298	45.284294083
147	2.092264716	45.283745580
148	2.092282781	45.283907450
149	2.094028994	45.283215334
150	2.093911365	45.283305239

ATRINE NUMBER	LATITUDE	LONGITUDE
151	2.068433980	45.232888873
152	2.068262102	45.232771945
153	2.068008790	45.232717953
154	2.067683097	45.232699921
155	2.068280176	45.232906835
156	2.067728314	45.232825822
157	2.068424907	45.233059729
158	2.068415843	45.233176630
159	2.068216798	45.233230556
160	2.067692076	45.233158539
161	2.068162493	45.233383420
162	2.067836817	45.233248485
163	2.067411582	45.233383311
164	2.068252864	45.234057870
165	2.067999534	45.234129773
166	2.067710036	45.234066783
167	2.068089982	45.234291651
168	2.067510955	45.234363506
169	2.067402401	45.234291550
170	2.067194326	45.234228572
171	2.067194349	45.234075700
172	2.067248705	45.233581121
173	2.066995397	45.233500152
174	2.067140086	45.233940805
175	2.067004385	45.233904815
176	2.066968268	45.233419216
177	2.066977322	45.233374255
178	2.066986374	45.233338286
179	2.066895918	45.233239355
180	2.066932131	45.233068504
181	2.066995494	45.232843701
182	2.067285034	45.232627923
183	2.067556469	45.232484083
184	2.067502226	45.232214300
185	2.067457017	45.232034444
186	2.067556530	45.232070428
187	2.067384674	45.231800629
188	2.066878010	45.231971413
189	2.066787590	45.231620693
190	2.066760435	45.231719606
191	2.066208536	45.231881391
192	2.065991380	45.232052216
193	2.065946146	45.232043217
194	2.065873784	45.231944289
195	2.065475807	45.231287781
196	2.065394389	45.231242807
197	2.065331022	45.231494587
198	2.087891714	45.249851763
199	2.088027413	45.249896747
200	2.088325955	45.249977727

LATRINE NUMBER	LATITUDE	LONGITUDE
200	2.088325955	45.249977727
201	2.088497843	45.250022718
202	2.088497821	45.250157606
203	2.088488758	45.250256524
204	2.088479687	45.250409396
205	2.088452531	45.250499318
206	2.088063553	45.250202501
207	2.088063538	45.250292427
208	2.088045415	45.250472276
209	2.088045407	45.250526231
210	2.088452515	45.250598236
211	2.088434380	45.250850026
212	2.088389130	45.250939945
213	2.088253437	45.250858990
214	2.088162964	45.250867968
215	2.088371012	45.251092816
216	2.088352900	45.251200724
217	2.088343833	45.251326619
218	2.088325720	45.251443520
219	2.088325700	45.251569416
220	2.088316622	45.251758259
221	2.088262286	45.252090977
222	2.088235113	45.252288809
223	2.088235091	45.252423698
224	2.087972784	45.252054960
225	2.087936574	45.252189843
226	2.087592835	45.251875048
227	2.087502364	45.251875034
228	2.087574675	45.252279712
229	2.087909638	45.250912891
230	2.087927715	45.251020805
231	2.087864332	45.251353521
232	2.087855254	45.251542364
233	2.087547747	45.250957797
234	2.087511532	45.251119658
235	2.087475305	45.251362452
236	2.087918740	45.250571174
237	2.087909660	45.250778002
238	2.087574998	45.250274364
239	2.087556870	45.250481191
240	2.087982132	45.250184503
241	2.087629346	45.249860714
242	2.087339830	45.249914624
243	2.087195080	45.249896615
244	2.087457361	45.250427220
245	2.087321682	45.250256339
246	2.087384954	45.250616053
247	2.087267343	45.250607041
248	2.087294431	45.250939771
249	2.087086291	45.251290449
250	2.087411978	45.251344456

LATRINE NUMBER	LATITUDE	LONGITUDE
251	2.087411952	45.251506323
252	2.087402882	45.251650203
253	2.087086232	45.251659145
254	2.087384760	45.251821059
255	2.087059082	45.251713096
256	2.087140482	45.251856991
257	2.086950431	45.252243642
258	2.087158459	45.252585393
259	2.086923252	45.252477445
260	2.086841863	45.252261610
261	2.086923358	45.251820986
262	2.086534357	45.251668050
263	2.086498108	45.252045733
264	2.086498087	45.252171629
265	2.086914387	45.251344377
266	2.086977678	45.251587187
267	2.086661029	45.251587137
268	2.086642945	45.251524186
269	2.086914629	45.249833623
270	2.086996045	45.249887591
271	2.086706537	45.249887546
272	2.086815062	45.250139355
273	2.086806025	45.250076406
274	2.087059279	45.250481112
275	2.086417001	45.250067352
276	2.086534612	45.250076363
277	2.086579836	45.250148311
278	2.086570766	45.250292191
279	2.086561702	45.250400100
280	2.086380765	45.250364101
281	2.086190785	45.250310116
282	2.086425976	45.250516982
283	2.086471189	45.250660871
284	2.086290255	45.250606887
285	2.086154553	45.250579887
286	2.086272145	45.250705802
287	2.086235941	45.250804715
288	2.086127358	45.250912609
289	2.086109242	45.251047494
290	2.086172564	45.251101460
291	2.086082069	45.251245327
292	2.086063954	45.251380213
293	2.086082035	45.251461149
294	2.086136303	45.251551083
295	2.086190581	45.251578070
296	2.086407683	45.251757956
297	2.086416718	45.251829898
298	2.086181511	45.251721950
299	2.086226726	45.251847853
300	2.086362398	45.252063696

Figure 31 Twin latrines in Zone 2



Figure 32 Twin latrines in Zone 4

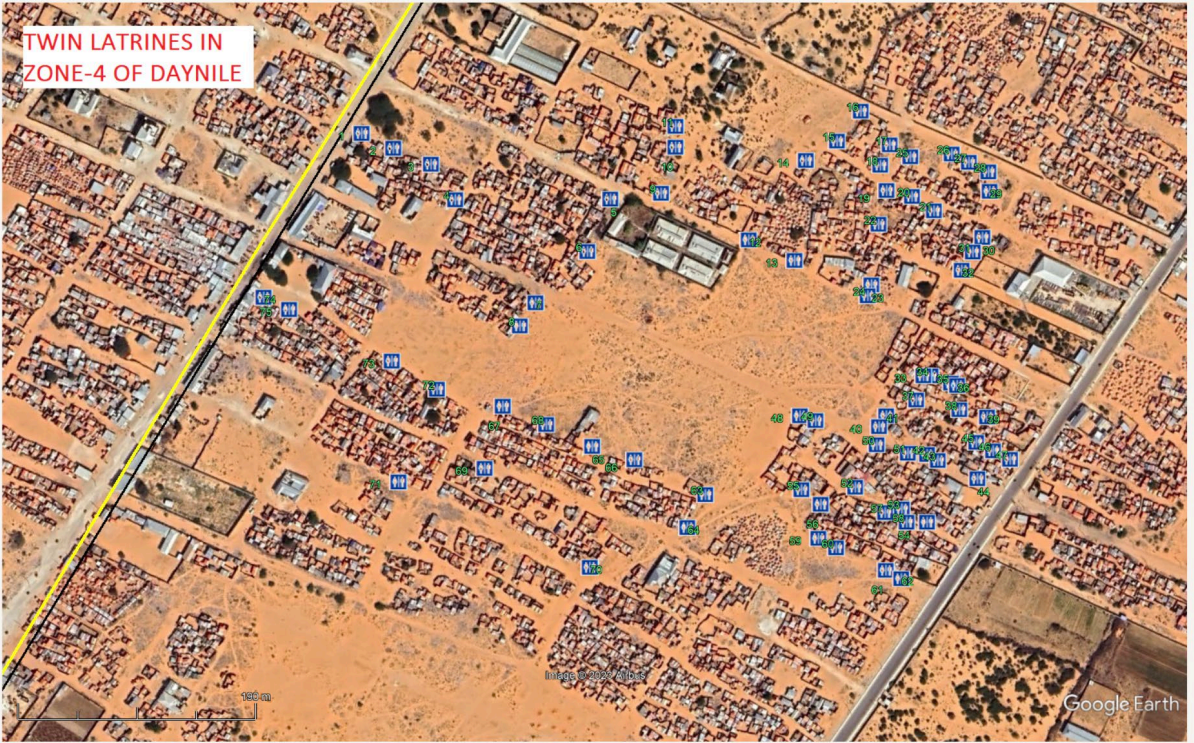


Figure 33 Twin Latrines in Zone 5

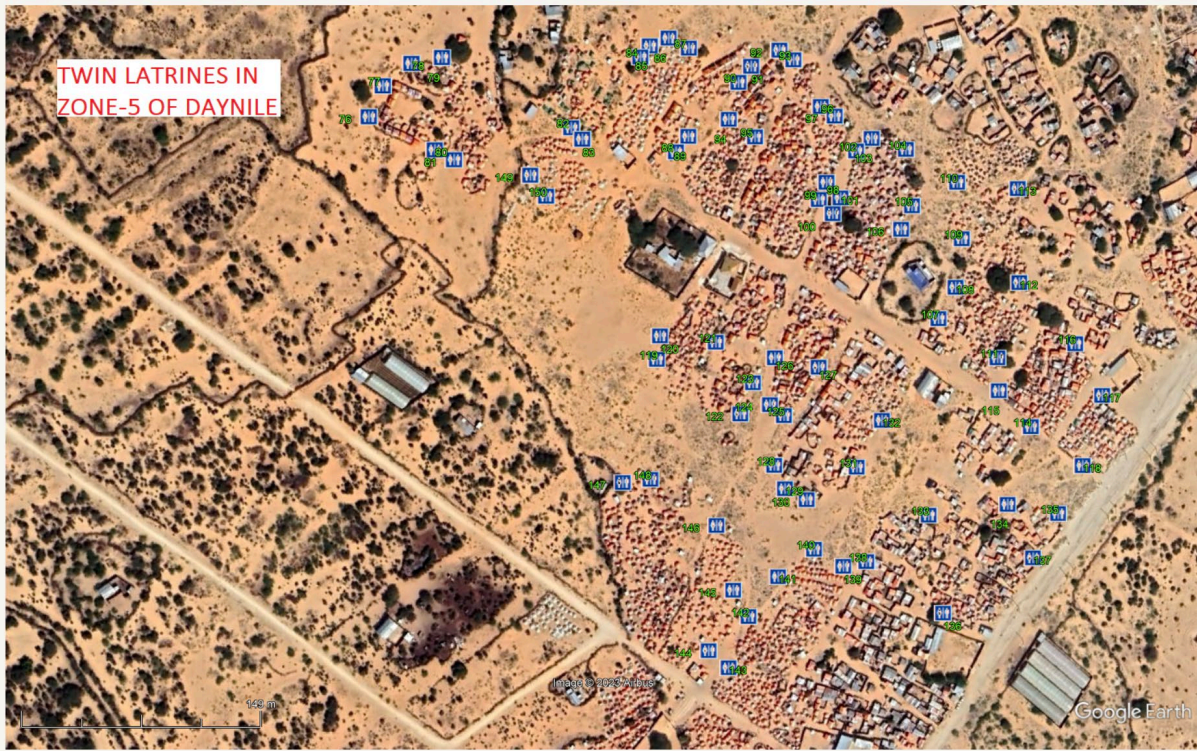


Figure 34 Twin latrines in Zone 6

