

United Nations Office for Project Services (UNOPS)

**Myanmar Health Assistance and Nutrition
Support Project (P508089) and Additional
Financing**

Appraisal Version

Stakeholder Engagement Plan (SEP)

March 2026

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ABBREVIATION AND ACRONYM

CBO	Community-Based Organization
CSO	Civil Society Organization
E&S	Environmental & Social
ESCP	Environmental and Social Commitment Plan
ESF	Environmental and Social Framework
ESIA	Environmental and Social Impact Assessment
ESMF	Environmental and Social Management Framework
ESS	Environmental and Social Standard
FGD	Focus Group Discussion
FM	Financial Management
GBV	Gender Based Violence
GRM	Grievance Redress Mechanism
IDA	International Development Association
IP/SSAH UTLC	Indigenous Peoples / Sub-Saharan African Historically Underserved Traditional Local Communities
IYCF	Infant and young child feeding
LMP	Labor Management Procedures
M&E	Monitoring & Evaluation
MNCH	Maternal, Newborn and Child Health
MOH	Ministry of Health
MUAC	Mid-upper arm circumference
NGO	Non-Governmental Organization
OIP	Other Interested Party
O&M	Operations & Maintenance
PAP	Project Affected Party
PDO	Program Development Objective
PIU	Project Implementation Unit
RUTF	Ready-To-Use Therapeutic Food
SEA	Sexual Exploitation and Abuse
SEP	Stakeholder Engagement Plan
SH	Sexual Harassment
STI	Sexually Transmitted Infections
UNICEF	United Nations Children's Fund
UNOPS	United Nations Office for Project Services
WB	World Bank
WHO	World Health Organization

INTRODUCTION

Background

The International Development Association (IDA) plans to finance the Myanmar Health Assistance and Nutrition Support Project. The project aims to deliver essential health and nutrition services and assistance to the population in need rapidly in the emergency context, with a particular focus on women, children, and vulnerable people. Implemented by UNOPS and UNICEF, the project will leverage established partnerships of these UN agencies with international and national NGOs, private entities and community-based organizations (implementing partners) to extend life-saving services and assistance to those in urgent need. The project's primary objectives are the provision of essential life-saving and urgent primary and secondary high-impact health and nutrition services, at the community, health posts and clinics, and secondary hospitals, and cash assistance where viable.

The World Bank's Environmental and Social Standard (ESS) 10 on Stakeholder Engagement¹ recognizes the importance of open and transparent engagement with all Project stakeholders, based on the recognition that effective stakeholder engagement can improve E&S sustainability of Project activities, enhance Project acceptance, and implementation, and allow stakeholders to contribute to Project design. The key objectives of stakeholder engagement include a) an assessment of the level of interest and support of the Project by stakeholders to promote effective and inclusive engagement with all project-affected parties and b) to ensure that Project information on E&S risks and impacts is disclosed in a timely and understandable way.

This Stakeholder Engagement Plan (SEP) outlines all stakeholder engagements for the UNOPS implemented activities under the Project in a systematic way. It defines legal and policy requirements in regard to stakeholder engagements, lists stakeholder engagements that have already been undertaken, provides a stakeholder analysis of all relevant project-affected parties, including members of vulnerable groups, to these activities and lays out the means of dissemination of information to different parties as well as means and ways to continue to consult different stakeholder groups throughout the Project cycle. Furthermore, it contains a monitoring plan for the implementation of the SEP.

Project Development Objective

The Program Development Objective (PDO) is to deliver essential health and nutrition services and assistance including basic WASH interventions and critical preventive health services to the vulnerable population, with a focus on women and children in Myanmar.

Project Component 2

Project Component 2 Health and Nutrition Services consists of two sub-components:

While sub-component 2.2 will focus on monitoring, sub-component 2.1 will:

- a) deliver an integrated package of community-level, preventative, primary health care and secondary/referral-level care, including basic WASH interventions. The service package can be expanded or refined based on funding availability, needs and priorities, and respond to natural and climate health disasters upon need.
- b) provide operational support for critical preventive health services

¹ The World Bank, Environmental and Social Framework (ESF), 2018.

Services and Activities

Table 1 Services and activities to be provided

Primary Healthcare: Community level, village health/maternity posts, mobile clinics
<ul style="list-style-type: none"> ● Maternal, newborn and child health and nutrition interventions: <ul style="list-style-type: none"> ○ Ante-natal care and safe delivery and neonatal care: iron-folic acid supplementation, multi-micronutrient supplementation, deworming, malarial treatment; clean delivery kits; hygiene kits (including soap), blankets for neonatal warmth, etc. Referral to secondary care for emergency cases. ○ Child health and nutrition interventions: vitamin A supplementation, deworming, breastfeeding promotion, oral rehydration salts, zinc supplementation, antibiotics, fever-reducing medicine for key diseases such as pneumonia, diarrhea, dengue, malaria, etc. <ul style="list-style-type: none"> ○ For moderate and severe acutely malnourished children: ready-to-use therapeutic feeding (RUTF) for community-based management for moderate and severe acute malnutrition without medical necessity; mid-upper arm circumference malnutrition screening tapes, among others. ● General healthcare support and first aid: Essential medicine, medical and health kits; personal protective equipment (PPE), etc. <p>The following services and activities are to be provided in the additional financing.</p> <ul style="list-style-type: none"> ● Operational support for critical preventive health services ²: <ul style="list-style-type: none"> ○ Routine and catch-up critical preventive health services, including procurement, installation, and maintenance of storage facilities for critical preventive medical products and equipment ○ Strengthening critical preventive medical products supply chain management and potential procurement of critical preventive medical products ○ Training of frontline healthcare providers ○ Advocacy, community mobilisation, and engagement to promote critical preventive medical service uptake ○ Adverse event management and surveillance, including preventable disease surveillance and Health Management Information System (HMIS) strengthening ● Integration of basic WASH support into the primary healthcare and nutrition service package <ul style="list-style-type: none"> ○ Improving access to safe water through household water treatment and storage, including the distribution of chlorine tablets, water purifiers, and water filters. ○ Enhancing household and environmental sanitation through the distribution of sanitary items. ○ Improving food, hand, and personal hygiene through the distribution of food-storage containers, soap, hand-washing facilities and hygiene kits. ○ Reinforcing WASH, nutrition, and Infant and young child feeding (IYCF) practices through education and awareness sessions.
Secondary Healthcare: Health centers/private clinics, district/township small hospitals
<ul style="list-style-type: none"> ● Emergency obstetric care and child and neonatal care: clean delivery kits, medical utensils ● Severe acute malnutrition care of children with medical necessity ● Medical care for survivors of gender-based violence: post-exposure prophylaxis (PEP kits), dignity kits ● General secondary healthcare medical goods to be used for the delivery of women and children's healthcare: small utensils and tools, essential medicine, PPE, etc.

² No civil work will be included in the Additional Financing.

- c) Support essential health and nutrition commodities and supplies via various procurement methods, including climate-adaptative supplies. To deliver the service packages described above, UNOPS will apply two primary delivery modalities—via grants and via output-based direct service purchasing. UNOPS plans to support quality health services at the community, primary, referral and secondary care levels, including preventative care, via implementing partner grants. It aims to work with 5-7 non-governmental organizations to provide services for vulnerable populations in conflict-affected areas. Services can be expanded or refined based on priorities, needs and gaps. UNOPS plans to build on existing systems to ensure the delivery of essential items like medicines, clean delivery kits, hygiene kits, small equipment, and nutrition supplements and Ready-To-Use Supplementary/Therapeutic Food (RUSF/RUTF) including climate adaptive supplies to supported areas.

Program Geographical Location

Target locations (including potential new townships for additional financing) will be selected based on several considerations, including the needs and vulnerability of the people, accessibility and feasibility of the location, and the capacity of the implementing agencies. UNOPS will ensure that the project activities in these townships are not covered by existing funding from the Access to Health Fund or other funding sources. In areas where UNOPS has ongoing projects, a complementary approach is taken by prioritizing service packages and integrating additional services (e.g., adding nutrition promotion to maternal and child health services) and expanding coverage.

Coordination with UNICEF at the geographic level ensures complementarity and avoids overlap, using careful planning and collaboration with partners. This coordination occurs mainly at the township level, but in some cases UNOPS and UNICEF may support different partners in different parts of the same township.

Institutional Arrangements

UNOPS and UNICEF will implement the project. UNICEF will focus on the implementation of Component 1, while UNOPS will focus on the implementation of Component 2. The UN agencies will coordinate closely. UNOPS will provide grants to Implementing Partners, for the implementation of the health services. Procurement activities are implemented by UNOPS directly.

UNOPS will establish a Project Implementation Unit (PIU) for the implementation of Component 2. The PIU will include a Project Manager and a Social Specialist. While the main responsibility for the implementation of this SEP sits with the UNOPS Project Manager, the Social Specialist will be in charge of the day-to-day implementation, monitoring of partner stakeholder engagements and reporting activities. Stakeholder engagement responsibilities will be cascaded down to Implementing Partners to ensure that the beneficiary population is involved in all stages of the project. Implementing Partners will be required to report on their stakeholder engagement activities.

Objectives of the SEP

This SEP will apply to all activities of Component 2 of the Project, including activities in additional financing as they are implemented under the responsibility of UNOPS. The Stakeholder Engagement Plan (SEP) aims at facilitating stakeholder engagement throughout the Program's life cycle and across the various Program components.

The objectives of this SEP are:

- To identify Project stakeholders, including members of vulnerable groups, their priorities, and concerns.
- Identify strategies for information sharing and communication to stakeholders as well as consultation of stakeholders in ways that are meaningful and accessible throughout the Project cycle.
- To specify procedures and methodologies for stakeholder consultations, documentation of the proceedings and strategies for feedback.
- To maintain and expand the effective, transparent, and responsive grievance mechanism for the Project.
- To develop a strategy for inclusive and meaningful stakeholder participation in the monitoring of project impacts, documenting, reporting and dissemination of results among the different stakeholders.
- To establish a systematic approach to stakeholder engagement to build trust and increase adoption, especially with the targeted beneficiaries.

Regulations and Requirements

Stakeholder engagement is an inclusive process conducted throughout the Program life cycle to support the development of strong, constructive, and responsive relationships that are important for successful management of a Program's environmental and social risks. The World Bank's Environmental and Social Framework (ESF) includes Environmental and Social Standard (ESS) 10, "Stakeholder Engagement and Information Disclosure", which recognizes "the importance of open and transparent engagement with the Program stakeholders as an essential element of good international practice". ESS10 also provides that effective stakeholder engagement can significantly improve the environmental and social sustainability of Project, enhance Project acceptance, and make a significant contribution to successful Program design and implementation.

The application of these standards, by focusing on the identification and management of environmental and social risks, supports recipients in their goal to reduce poverty and increase prosperity in a sustainable manner for the benefit of the environment and their citizens. The standards:

- a. support recipients in achieving good international practice relating to environmental and social sustainability;
- b. assist recipients in fulfilling their national and international environmental and social obligations;
- c. enhance non-discrimination, transparency, participation, accountability, and governance; and
- d. enhance the sustainable development outcomes of projects through ongoing stakeholder engagement.

Stakeholder Identification and Analysis

The stakeholders of the Project are individuals or groups (parties) that can be affected by the Project outcomes, either directly or indirectly and both positively or negatively (Project-Affected Parties - PAPs) or have an interest in the Project (Other Interested Parties - OIP).

PAPs are individuals, groups, local communities, and other stakeholders that are directly or indirectly affected by the Project, with particular focus being accorded to those directly, positively and/or adversely affected. It also refers to those who are more susceptible to changes associated with project

activities, and thus need to be closely engaged in identifying impacts and their significance, as well as in decision-making on mitigation and management measures. For the purposes of this Project, it includes immediate beneficiaries, customary leadership in targeted communities, donor partners, among others.

OIPs refer to those who are not directly affected by project activities but are invested owing to its proximity, as in broader local communities where beneficiaries are located, or by virtue of their role in project preparation and implementation. This includes civil society organizations, interest groups, media sources, and so on.

Analysis of stakeholders therefore encompasses identification of the stakeholder groups that are likely to influence or be affected by the proposed Project components either positively or negatively and organizing them according to the potential impacts of the activities on them.

Disadvantaged and vulnerable groups, although somewhat covered under the first category, experience unique limitations and barriers to participating in consultation processes and being represented in overarching stakeholder engagement. By extension, they may be disproportionately impacted or further disadvantaged due to their vulnerable status, notably women and youth, elderly, unaccompanied and accompanied children, female-headed households, people with disabilities and/or chronic illnesses, or traditionally underserved communities and tribes. Given engagement efforts required to enable their equitable representation in consultation and decision-making process for the project, inclusion of this additional category places an emphasis on addressing their constraints, enhancing their means of receiving information and providing any additional assistance required.

Table 2 Summary of Stakeholders Identification

No.	Stakeholders	Stakeholder communication channels & needs	Stakeholders' influence over the project	
			Project-Affected Party (PAP) or Other Interested Party (OIP)	Explain why stakeholder has high/low influence
1	National Non-Governmental Organizations (NGOs)	Implementation partner forum, emails, phone calls, meetings Burmese language	PAP	Influences project results, interacts with communities
2	International NGOs	Implementation partner forum, Emails, phone calls, meetings	PAP	Influences project results, interacts with communities, accesses larger funding envelope
3	Civil Society Organizations (CSOs) Community-Based Organizations (CBOs)	Implementation partner forum, emails, phone calls, meetings Burmese language	PAP	Influences project results, interacts with communities
4	World Bank	Emails, phone calls, meetings, project reporting	PAP	Provide funding for priorities, control disbursements
5	Affected communities	Consultations, meetings, grievance redress mechanism Local language	PAP	Can choose not to access, engage, or cooperate with activities under the project
6	Members of vulnerable groups, incl. women, children, youth, elderly,	Consultations, meetings, grievance redress mechanism Local language	PAP	Can choose not to access, engage, or cooperate with activities under the project; at risk of being excluded from project
7	Other UN agencies	Coordination groups, emails, meetings	PAP	Coordination and complementarity of interventions
8	Other donors in the sector	Coordination groups, emails, meetings	OIP	Controls complementary funding

Stakeholder Engagement Program

Stakeholder engagement refers to the process of interacting and working with stakeholders identified as relevant to the Program to come up with new concepts, identify challenges and discrepancies and how to address issues that may rise. All this helps in the realization of stakeholder needs and expectations for effective implementation of Program components.

The SEP is used to formulate schedules, strategies and general plans to ensure there is effective, meaningful and inclusive participation of project affected persons, and other interested parties, throughout the entire Project life cycle. It consists of planning on how consultations will take place, developing the layout and how issues raised will be addressed and responded to in a transparent, meaningful, timely and inclusive manner. The importance of this is to provide an effective outline of activities to be undertaken within a given timeframe to ensure effective stakeholder involvement and improve the Program's sustainability and development benefits. The SEP outlines how consultations are to be carried out and the scope of work to be achieved. The SEP will be updated on a regular basis to promptly include new developments and issues that may arise. This may include the techniques to be used in the engagement of stakeholders to address stakeholder concerns and enhance Project ownership.

The SEP describes the timing and methods of engagement with stakeholders throughout the life cycle of the Project as agreed between Bank and UNOPS, distinguishing between project-affected parties and other interested parties. The SEP also describes the range and timing of information to be communicated to project-affected parties and other interested parties, as well as the type of information to be sought from them.

The SEP includes a description of the Project with its anticipated environmental and social impacts, as known at the time; a list of the stakeholder groups identified; the proposed stakeholder engagement program (including topics stakeholders will be engaged on, how stakeholders will be notified, the methods of engagement, list of information/documents that will be in the public domain, languages they will be available in, length of consultation period, and opportunities to comment); indication of resources required and the responsibilities for implementing stakeholder engagement activities; summary description of the grievance mechanism; and contact information and process for seeking further information.

Preparation Stage: Summary of Previous Stakeholder Engagement Activities

UNOPS has undertaken stakeholder engagements as part of its Health and Nutrition Programme in Myanmar. The responses have shaped and informed the preparation of this Project.

These efforts will be complemented by further local level consultations carried out by UNOPS and its implementing partners prior to commencing project activities and throughout project implementation.

The stakeholder consultations carried out by UNOPS identified several key recommendations for the ongoing programme, as well as for this Project, and which informed the design of this project. These recommendations emphasize the need for flexibility, localization, Activities should continue to support partners in delivering integrated maternal, newborn and child health, sexual and reproductive health and rights services, malaria interventions, critical preventive health, mental health and psychosocial support,

and trauma care. They should also provide more support for humanitarian and emergency health needs in conflict-affected areas, including gender-based violence, WASH, and malnutrition. Activities should continue to scale up support to local organizations that are best placed to deliver health services to vulnerable communities in areas affected by conflict. They should further consider expanding its geographical priorities to include central Myanmar and other areas with rising health needs. Activities should support community-led services, including integrated community malaria volunteers. In this project, these recommendations are reflected in the choice of target areas to deliver health services.

Support should work more with the private sector as a service delivery channel. Services like family planning and adolescent health should be integrated into both Sexual and Reproductive Health and Rights and Maternal, Newborn and Child Healthcare programs. It should consider supporting emergency packages in communities that were previously not conflict-affected. It should simplify the approval process for referral cases and improve the referral guidelines. Activities should continue to explore more rapid ways to respond to emergencies and build learning systems into partnerships and programming. They should provide more support from UNOPS for transportation and procurement, and the procurement policy should be more flexible. UNOPS is also continuously working to simplify referral guidelines, and improve the fit and quality of support provided to implementing partners.

Specifically, it was recommended that UNOPS should continue its flexible and responsive approach to programming in conflict-affected areas, ensuring ongoing readiness to adapt to the evolving Myanmar context. It should continue to enhance partner involvement in strategic-level decisions, establishing structured working groups and providing clear communication about consultation objectives and feedback integration. It should continue targeted guidance on incorporating cross-cutting themes, particularly gender-transformative practices and the 'do no harm' principle, into partners' implementation practices. UNOPS should dedicate time to deepen analysis of M&E data, developing key learning questions and sharing insights with partners and stakeholders. In a similar vein, it should explore ways to strengthen qualitative insights into its results, such as conducting qualitative evaluations for selected partners yearly.

There are key gaps in service accessibility, vulnerable communities rely heavily on mobile health teams, but their reach is limited due to insufficient resources. Therefore, emphasis on flexible methods of service delivery has been relevant to this Project design. Communities also emphasized the importance of improving Maternal, Newborn and Child Health (MNCH) services, including nutrition for mothers and infants and access to emergency birth procedures. This has led to the inclusion of these work areas as potentially funded via the Project. Support for those injured by landmines also remains limited. These findings highlight the urgent need for tailored interventions to enhance healthcare delivery, improve workforce capacity, address access barriers, and ensure safety for both patients and providers.

The lessons learned from the project implementation and the respective corrective measures are listed below when implementing the stakeholder engagement activities during the additional financing period.

Lesson Learned	Corrective Measures
The disclosure of project services information via public channels was highly restricted. This constraint was primarily attributable to the project's	Through established local channels, the UNOPS and its implementing partners ensure the target community receives information regarding the project services. These modalities encompass engagement with community-based organizations, community networks, peer-to-peer channels,

<p>low-profile approach and the implementation of conflict-sensitivity measures at the community level.</p>	<p>local key influencers, and religious leaders, as well as coordination with local authorities. Moreover, project-specific information is disseminated through community volunteers who reside within the project's target areas. This multi-faceted approach ensures effective information disclosure to the community while adhering to the principle of 'do no harm.'</p> <p>Additionally, the project will ensure the community is consulted for the preferred approach on the project information disclosure.</p>
<p>The concept of a Grievance Redress Mechanism (GRM) is largely unfamiliar to the communities in the project's target areas. Consequently, there is limited community awareness regarding the GRM's function and the process for submitting and addressing project-related environmental and social concerns or complaints. Additionally, due to the sensitivity, the distribution of the GRM IEC materials was mostly unfeasible at the project's initial phase.</p>	<p>UNOPS and its implementing partners employ the following context-adapted mitigation strategies to enhance Grievance Redress Mechanism (GRM) awareness and accessibility for intake.</p> <ul style="list-style-type: none"> ● Integrated Awareness-Raising: GRM awareness sessions are integrated into all project implementation activities. ● Accessible Intake Channels: Intake channels (provided by both Implementing Partners and the Project Implementation Unit) are available and accessible to the community. The project specifically offers face-to-face intake to overcome language literacy barriers and ensure accessibility. ● Localized Information Materials: GRM posters, which include intake channels, are displayed in local languages during project service provision. The development of distributable Information, Education, and Communication (IEC) materials, featuring locally effective GRM intake channels, is currently underway. ● Stakeholder Disclosure: GRM information, including details about its intake channels, is disclosed during all project stakeholder engagement activities.

Purpose and Timing of Stakeholder Engagement Program

UNOPS will disseminate all relevant project information to its stakeholders and consult them on relevant topics. However, given the current security situation in the country, UNOPS will need to assess carefully which information can be provided to which type of stakeholders at which time. UNOPS will remain in close contact with the World Bank task team on this issue.

Given the context of conflict and fragility, all consultations will seek to ensure conflict sensitivity and do-no-harm practices to avoid any unforeseen negative impact on stakeholders.

The objectives of information dissemination and consultations under the Project are: (a) understanding the concerns of the different stakeholders in relation to the Project; (b) reception of feedback and comments as well as grievances from all stakeholders on Project design and implementation; (c) feedback on potential environmental and social risks and impacts and mitigation measures; (d) provision of regular information to stakeholders related to Project implementation progress and any other emerging issues throughout the Project cycle and (e) provision of transparent and accountable mechanisms on all aspects of implementation.

To ensure this, the grievance redress mechanism (GRM) currently implemented for the UNOPS Health and Nutrition Programme will be modified and extended to this Project. It is designed to allow all affected stakeholders to report on Project-related grievances or to provide comments and feedback. In addition, the Environmental and Social Commitment Plan (ESCP) and this SEP will be publicly disclosed to ensure that everyone is informed about social and environmental risks and respective mitigation measures.

This section outlines the proposed methods of stakeholder engagement throughout the Project cycle. Stakeholder engagement will be undertaken on a continuous basis to inform the PAPs and other members of the public about Project activities and plans and will employ appropriate strategies to ensure effective and meaningful disclosure of information. Different engagement methods are proposed and cover different needs of the stakeholders.

Proposed Strategy for Information Disclosure

Information disclosure to all potential stakeholders will rely on the following key methods: correspondence by phone/mail; memos, virtual meetings, letters, website (<https://www.unops.org/myanmar>), and email. Information will be disclosed in English or the respective local language, where appropriate. Contact details will be updated during project implementation.

UNOPS suggests relevant communication channels with stakeholders as detailed in the Table below. UNOPS will continue utilizing existing channels and as necessary expand these for the Project. These channels will be utilized for disclosure of information and documents relevant for each stakeholder of this project. Information on applicable requirements under the ESF will be shared with selected stakeholders, while information on the different channels of the GRM will be made available to relevant stakeholders, including vulnerable groups, using the most appropriate and risk-attuned way, including through meetings organized by implementing partners and sub-implementing partners.

Table 3 Strategy for Information Disclosure for the Project

Information to be disclosed	Target Stakeholders	Messages/ Agenda	Methods of Communication	Time Table: locations / dates	Responsibility
Project Preparation					
General Project information SEP Labor Management Procedures (LMP) (with SEA/SH prevention and response measures) ESCP	National NGOs International NGOs CSOs and CBOs Other UN agencies	Present the project – objectives, rationale, components, benefits and beneficiaries, Implementation arrangements. Indicative implementation schedule and period, project contacts. Describe GRM Present stakeholders identified and describe approach to stakeholder engagement. Sets out measures, actions, plans	Correspondence by phone/email Memos Meetings (virtual) Telephone	During project preparation Relevant region	PIU
AS PART OF PROJECT INCEPTION					
General Project information SEP Labor Management Procedures (LMP) (with SEA/SH prevention and response measures)	National NGOs International NGOs CSOs and CBOs Affected Communities Village level authorities Members of vulnerable groups, incl. women, children, youth, elderly Other UN agencies	Present the Program – objectives, rationale, components, benefits and beneficiaries, Implementation arrangements. Indicative implementation schedule and period, project contacts. Describe GRM Present stakeholders identified and describe approach to stakeholder engagement.	Correspondence by phone/email Memos Meetings Telephone	After project signing/before start of project activities	PIU

Information to be disclosed	Target Stakeholders	Messages/ Agenda	Methods of Communication	Time Table: locations / dates	Responsibility
Environmental and Social Management Framework (ESMF)		Sets out measures, actions, plans			
THROUGHOUT THE PROJECT					
Progress reports	National NGOs International NGOs CSOs and CBOs Affected Communities Village level authorities Members of vulnerable groups, incl. women, children, youth, elderly Other UN agencies	Biannual narrative reports on project progress Quarterly financial and procurement reports General information on Program activities Updates to Project instruments	Correspondence by phone/email Meetings Letters Telephone	Throughout project implementation	PIU
Information on GRM LMP (with SEA/SH prevention and response measures) Simplified Environmental and Social Management Plans (ESMPs)	National NGOs CSOs and CBOs Affected Communities Village level authorities Members of vulnerable groups, incl. women, children, youth, elderly,	Access information about GRM, LMP and ESMPs at locality	Meetings	Throughout project implementation Relevant region	PIU Implementing partners Sub-implementing partners

Proposed Strategy for Consultation

As part of the project inception and throughout implementation, implementing partners will conduct consultations with affected communities and vulnerable groups. These consultations will be organized as close to target communities as possible using appropriate measures to mitigate these risks, while ensuring the engagement of disadvantaged and vulnerable groups.

The plan below lays out the overall consultative processes of the project with different stakeholders. The GRM will be another means of consultation, as complaints received will be filed, assessed and responded to (see below). Subsequent sections further describe how the project and implementing organizations analyse and track changes in the local context, and specific measures for the engagement of disadvantaged and vulnerable groups.

Table 4 Strategy for Consultation

Topic of Consultation	Target Stakeholders	Expected outcomes	Suggested Method of consultation	Timetable: location and dates	Responsibility
PROJECT PREPARATION					
SEP ESCP ESMF	National NGOs International NGOs CSOs and CBOs	Inputs into GRM. Inputs into stakeholders identification and approach to stakeholder engagement.	Coordination meetings Correspondence phone/email Meetings (virtual) Telephone	One off activity as part of project preparation Relevant region	PIU
AS PART OF PROJECT INCEPTION					
Overall project activities SEP and GRM ESMF	National NGOs International NGOs CSOs and CBOs Affected Communities Village level authorities Members of vulnerable groups, incl. women, children, youth, elderly Other UN agencies	Inputs into project activities design and modalities including benefits and beneficiaries Inputs into indicative implementation schedule and period, project contacts.	Correspondence phone/email Meetings (virtual) Telephone	One-off activity as part of project inception Relevant region	PIU Implementing partners
THROUGHOUT THE PROJECT					
Site-specific project activities / simplified ESMPs	National NGOs International NGOs CSOs and CBOs Affected Communities Village level authorities Members of vulnerable groups, incl. women, children, youth, elderly	Inputs into Project activities Inputs into E&S risks and impacts and mitigation measures	One to one meeting, Email, Meetings (virtual) Focus group discussions/Key informant interviews Meetings (virtual) with representative organizations Social/community listening and third party field monitoring	Throughout project implementation Relevant region Minimum frequency: biannually with all groups	PIU Implementing partners

Topic of Consultation	Target Stakeholders	Expected outcomes	Suggested Method of consultation	Timetable: location and dates	Responsibility
M&E	National NGOs International NGOs CSOs and CBOs Affected Communities Village level authorities Members of vulnerable groups, incl. women, children, youth, elderly Other UN agencies	Inputs into M&E of project	Email, Phone Meetings (virtual) with representative organizations GRM including social/community listening and third party monitoring	Throughout project implementation Relevant region Minimum frequency: biannually with all groups	PIU

Review of the local context

The information gained from reviews of the local context will inform the planning of project information and consultation sessions with key stakeholders and target communities, especially vulnerable groups, which are to be held as part of sub-project inception. These consultations inform E&S risk assessments and mitigation measures, as well as the local structure of the GRM. It also informs activity design and implementation, and E&S risks and impacts and mitigation measures on the side of implementing partners, seeking to address special requirements of key groups.

Throughout project implementation, implementing partners are further required to submit regular situation updates on staff safety, the situation of communities, especially disadvantaged and vulnerable groups in the township, and their plans to respond to the needs of communities and the vulnerable groups. These updates will be reviewed and summarized in regular situation updates and inform adoptive project management. Implementing partners will also consult affected communities and vulnerable groups regularly throughout project implementation and update township analyses as necessary.

Engagement with Disadvantaged and Vulnerable Groups

UNOPS has ample experience in strategically targeting vulnerable populations through its Health and Nutrition Programme and by identifying those most affected by conflict, displacement, and inadequate healthcare access, as well as specific vulnerability to disease. Vulnerability is assessed based on factors, such as limited access to health services, heightened disease risks, and social or identity-based marginalization. UNOPS will further include identification and consultation of Indigenous Peoples / Sub-Saharan African Historically Underserved Traditional Local Communities (IP/SSAHUTLC) where applicable in the specific locations.

All implementing partners will carry out community engagement activities where women and girls, persons with disabilities and minority groups are included and consulted for their opinions/perspectives. All implementing partners will mindfully collect sex-disaggregated data to understand the quality and impact of the project on different sexes. Reach on gender minorities will be recorded wherever possible and case studies collected to understand the impact of the project.

At least 30% of the members of the Village Health Committees will be women. The GRM will be made available particularly for women, children, persons with disabilities and all minority groups. Wherever possible, women-only Focus Group Discussions in safe spaces will be carried out to understand their needs, gender issues and respond effectively. Implementing partners will carry out gender analysis to understand different needs of women, men across different social groups.

In identifying activities and beneficiaries, UNOPS will conduct inclusive, accessible, culturally appropriate and gender-sensitive consultations target communities, as well as with NGOs, religious and community leaders, and community-based organizations . These consultations will take into account the specific obstacles that may be faced these communities . UNOPS will conduct such consultations as far as possible in the current situation in the project areas.

These consultations will enable target communities to provide input into the design of project activities and priorities, as well as provide feedback on implementation of project activities, benefits and risks to communities, with the objective of obtaining broad community support for project activities.

UNOPS will, as far as possible under the current circumstances, provide transparent information on project activities, benefits, eligibility criteria to target communities, through accessible and culturally appropriate channels, trusted intermediaries, in relevant languages.

UNOPS will proactively identify, consults with and reach out to target communities (through surveys, consultations or other means as appropriate), and includes specific culturally appropriate measures to address the potential obstacles to access for them in delivery of assistance.

UNOPS will ensure that its grievance mechanism is accessible to target communities and culturally appropriate for them to bring forward grievances, through raising awareness among these groups in relevant languages, providing different intake channels etc.

UNOPS and implementing partners will employ staff and volunteers from among the target communities and who speak relevant languages, as needed and feasible. For implementing partner staff and volunteers who are from outside the target communities , provide awareness raising on culturally appropriate behavior .

Timelines

Information disclosure and consultations are especially relevant throughout the early stages of the Project, but also throughout the project cycle. The Project has been shaped and informed by information gathered from various consultations conducted for the Health and Nutrition Programme described in section Preparation Stage: Summary of Previous Stakeholder Engagement Activities above.

Activities under Component 2 of this Project including additional financing will include further consultations with target communities prior to their commencement of activities on site to ensure transparency and accountability on project modalities, and to allow stakeholder voices to form the basis of the concrete design of every intervention. Consultations will continue throughout project implementation.

Review of Comments

The PIU will compile all comments and inputs originating from the various consultations. It will ensure that the Project has general information on the perception of stakeholders and their concerns. This will help the Project to remain on target. It will be the responsibility of all implementers to respond to comments and inputs, and to keep open a feedback line to the stakeholders.

Estimated Costs for SEP Implementation

UNOPS will be in charge of managing and implementing the SEP. Adequate resources for the implementation of stakeholder engagements, including the GRM, will be covered by the budget assigned under the Project Management activities. UNOPS will as part of their annual workplans allocate adequate budget to undertake the required stakeholder engagement and implement the GRM noting the need for human and material resources will be required to implement the plan at all levels. With implementing partners responsible for conducting consultations with affected communities and implementing community feedback mechanisms as part of the GRM, the portion of their budgets to be dedicated to such activities as a minimum is also reflected here.

Table 5 Indicative Budget for Implementation of SEP

Stakeholder Engagement Activity	Total Cost (USD)
Social specialist in the PIU (UNOPS)	400,000
Consultations throughout the project	170,000
Portion of implementing partners' budgets for cross-cutting themes (minimum) 2% of total grant amount	280,000
TOTAL	850,000

Grievance Redress Mechanism (GRM)

Purpose

Under the ESSs, Bank-supported projects are required to facilitate mechanisms that address concerns and grievances that arise in connection with a project. One of the key objectives of ESS10 (Stakeholder Engagement and Information Disclosure) is 'to provide project-affected parties with accessible and inclusive means to raise issues and grievances, and allow borrowers to respond and manage such grievances'.³ This Project GRM should facilitate the Project to respond to concerns and grievances of the project-affected parties related to the environmental and social performance of the project.

As per World Bank ESSs, this GRM makes the following distinctions:

- a. Project-related complaints and grievances: it focuses on Project-related complaints and grievances and defines the different steps of handling such;
- b. Sexual Exploitation and Abuse / Sexual Harassment (SEA/SH) related complaints and grievances: complaints and grievances relating to SEA/SH, given their sensitivities and considerations related to a survivor-based approach, are reported to the available GRM grievance recipients, but the grievances follow a different process. This counts for complaints and grievances from PAPs as well as workers deployed by the project;
- c. Labor-related complaints and grievances: Complaints from project workers raising workplace concerns, terms of employment and other related concerns will be registered through the Workers' GRM, which is a separate GRM to the one elaborated here;
- d. Second tier / escalated complaints and grievances: This concerns complaints and grievances that cannot be solved by the first tier (project and workers' complaints and grievances) or have been escalated by users dissatisfied with the resolutions from the first tier. This GRM describes procedures on how these grievances shall be addressed through an appeals mechanism.

The objectives of the GRM are to:

1. Establish a mechanism to receive and process complaints in a timely manner with special attention given to vulnerable groups;
2. Provide an effective, transparent, timely, fair and non-discriminatory system that would allow affected individuals to complain and avoid litigation;
3. Promote the social and amicable resolution of complaints and avoid recourse to justice;
4. Minimize bad publicity, avoid/minimize delays in the execution of infrastructure works;

³ World Bank, Environmental and Social Framework, 2018, p. 131

5. Ensure the sustainability of the Project interventions;
6. Provide clarification in response to requests for information.

The principles and values guiding the mechanism are as follows:

- **Accessibility and inclusiveness.** The mechanism must be accessible to diverse community stakeholders including vulnerable groups;
- **Community involvement in the design.** Stakeholder representatives should be involved in the design of the mechanism and have the opportunity to suggest improvements at any time;
- **Confidentiality.** The anonymity and privacy of complainants (and the filing of complaints) should be preserved when circumstances require it;
- **Culturally appropriate.** The design and operation of the mechanism should take into account the cultural specificities and preferences of communities in the negotiation and resolution of complaints;
- **Use of a complaints register to monitor and improve the mechanism.** The register can be used to identify trends in complaints and conflicts related to project operations in order to anticipate problems and propose organizational or operational changes related to the project;
- **Identification of a central coordination point.** The mechanism and those in charge should be well identified and disclosed to stakeholders;
- **Transparent and non-retaliatory.** Complaints should be handled in an understandable and transparent process without cost or retaliation;
- **Proactive information.** Communities should be informed about the judicial and administrative remedies available in the country for conflict resolution at all times.

The Grievance Redress Mechanism (GRM) for the Project will be detailed in the ESMF. The ESS2 requirements for a workers' GRM are handled in the LMP, as part of the ESMF.

The GRM will comprise the following steps: grievance intake; sorting and processing; acknowledgement and follow-up; verification, investigation and acting; monitoring, evaluation and feedback. The GRM will include an appeals mechanism as well as monitoring indicators to measure its performance.

Monitoring and Reporting

The SEP will be monitored based on both qualitative reporting and quantitative reporting linked to results indicators on stakeholder engagement and GRM performance, to be summarized and included in the Project progress reports. The monitoring will take place on a biannual basis.

SEP reporting will include the following:

- (i) Qualitative reporting on the feedback received during stakeholder engagement activities, in particular issues that have been raised that can be addressed through changes in project scope and design.
- (ii) Quantitative reporting based on the indicators developed to measure the implementation of the SEP. A set of indicators for monitoring and reporting is included below.

Adequate institutional arrangements, systems and resources will be put in place to monitor the implementation of the SEP. The main monitoring responsibilities will be with the PIU. This will be led by the PIU Social Specialist. UNOPS will have overall responsibility for the implementation of the environmental and social mitigation measures, including the SEP, as well as for monitoring partner compliance with the SEP. The GRM will be an

additional mechanism that will allow stakeholders, at the community level in particular, to provide feedback on project impacts and mitigation programs.

Stakeholder engagement shall be periodically evaluated by the PIU. The following indicators will be used for evaluation:

- i). Six-monthly grievances received, key categories of grievances, speed of resolution and how they have been addressed; and
- ii). Number of stakeholders that participated in engagements

The below Table presents key indicators and evaluation questions for monitoring activities in relation to the SEP implementation. Targets and baselines will be developed as per Component 2 , once implementation locations are selected.

Table 8 SEP Performance questions and indicators

SEP Performance questions	SEP Performance questions	Indicators	Data Collection Method
<p>GRM.</p> <p>To what extent have PAPs been provided with accessible and inclusive means to raise issues and grievances?</p> <p>Has UNOPS responded to and managed such grievances?</p>	<p>Are PAPs raising issues and grievances?</p> <p>How quickly/effectively are the grievances resolved? Are grievances resolved according to the processing and resolution time?</p>	<p># of grievances raised by workers, disaggregated by gender</p> <p># of grievances disaggregated by key category</p>	GRM records
<p>Stakeholder engagement impact on project design and implementation.</p> <p>How have the results of stakeholder engagement made a difference in project design and implementation?</p>	<p>Was there interest and support for the project?</p> <p>Were there any adjustments made during project design and implementation based on the feedback received?</p> <p>Was priority information disclosed to relevant parties throughout the project cycle?</p>	<p># of consultation meetings and public discussions where the feedback and recommendation received is reflected in project design and implementation.</p> <p># of engagement sessions held, focused on at-risk groups (gender minority, PWD and etc) in the project.</p>	<p>Stakeholder Consultation Attendance Sheets/Minutes Consultation session forms</p> <p>Community Engagement Meeting records from IPs</p>
<p>Implementation effectiveness.</p> <p>Was stakeholder engagement effective in implementation?</p>	<p>Were the activities implemented as planned? Why or why not?</p>	<p>% of SEP activities implemented against the plan</p> <p>% of implementing partner offices and project sites with</p>	<p>Consultation Schedule</p> <p>Periodic Focus Group Discussions</p>

	Was the stakeholder engagement approach inclusive of vulnerable groups? Why or why not?	<p>active PSEA reporting mechanism</p> <p># and % of engagements with members of vulnerable groups</p> <p>% of feedback that were addressed by the Implementing Partners in the reporting period based on their procedures</p>	<p>Face-to-face meetings and/or Focus Group discussions with Vulnerable Groups or their representatives</p> <p>Reports from implementing partners</p>
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Reporting: The PIU will prepare and regularly avail important information on project status to stakeholders (based on information need) including Project implementation progress, actions on commitments made to various stakeholders and any new or corrected information since the previous report. The PIU will report on stakeholder engagement to the World Bank as part of its quarterly Project Progress Report. The PIU will require quarterly reporting from its implementing partners on stakeholder engagement activities, as part of their E&S reporting requirements. The incident and accidents reporting requirements are listed in the ESMF. The SEP will be revised and updated as necessary during project implementation.

Reporting Back to Stakeholder Groups: Summaries of public grievances, enquiries, and related incidents, together with the status of implementation of associated corrective/preventative actions will be received from implementing partners and collated by responsible staff and referred to the PIU.

Specifically, the PIU will report back on the participatory stakeholder engagements in project areas and follow up on any agreements made with stakeholders during the consultations. This reporting back to the stakeholders will be undertaken throughout the project, as appropriate.

The PIU will gather all comments and inputs originating from community meetings, and GRM outcomes. This includes collecting the relevant reports and information from implementing partners on the community consultations they conducted and the cases they took up through the GRM. The PIU will prepare minutes or reports of all stakeholder engagements – with any agreements made attached. The information gathered will help to ensure that the project has general information on the perception of communities, and that it remains on target. It will be the responsibility of the PIU to respond to comments and inputs, and to keep open a feedback line to the communities.