Republic of South Sudan

Ministry of Health

South Sudan Health Sector Transformation Project (HSTP) Additional Financing (P181385)

ENVIRONMENTAL AND SOCIAL COMMITMENT PLAN

(SS-HSTP AF2 and Restructuring Version)

September 23, 2026

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ENVIRONMENTAL AND SOCIAL COMMITMENT PLAN

1. The Republic of South Sudan (Recipient) is implementing the South Sudan Health Sector Transformation Project (HSTP) (the Project), with the involvement of the Ministry of Health (MoH) as the implementing agency and United Nations Children's Fund (UNICEF), World Health Organization (WHO) and MoH-Direct Non-Governmental Organizations (NGOs) contracted by the Recipient as management organizations, and County Health Departments (CHDs) engaged by MoH as implementing entities in selected counties, as set out in the Restructuring Agreement. The International Development Association (the Association) has agreed to provide financing for the Project, as set out in the referred Agreement. This ESCP supersedes previous version of the ESCP for the Project and shall apply to the original, the Additional Financing, and the restructuring for the Project referred to above. This revised ESCP specifically reflects the changes introduced by the August 2026 restructuring and the inclusion of the pandemic fund grant, including: (a) the MoH-direct NGO pilot in 8 counties; (b) CHD engagement; (c) the revised health facility scope; and (d) scaling up pandemic prevention, preparedness and response.

2. The Recipient shall ensure that the Project is carried out in accordance with the Environmental and Social Standards (ESSs) and this Environmental and Social Commitment Plan (ESCP), in a manner acceptable to the Association. The ESCP is a part of the referred Agreements. Unless otherwise defined in this ESCP, capitalized terms used in this ESCP have the meanings ascribed to them in the referred Agreement.

3. Without limitation to the foregoing, this ESCP sets out material measures and actions that the Recipient shall carry out or cause to be carried out, including, as applicable, their respective timeframes, institutional, staffing, training, monitoring, and reporting arrangements; and grievance management. The ESCP also sets out the environmental and social (E&S) instruments that shall be updated, consulted, disclosed, adopted, and implemented under the Project, consistent with the ESSs and in form and substance acceptable to the Association. Said E&S documents may be revised from time to time with prior written agreement by the Association. As provided for under the referred Agreements, the Recipient shall ensure that there are sufficient funds available to cover the costs of implementing the ESCP.

4. As agreed by the Association and the Recipient, this ESCP will be revised from time to time, if necessary, to reflect adaptive management of Project changes or unforeseen circumstances or in response to Project performance. In such circumstances, the Association and the Recipient agree to update the ESCP to reflect these changes through an exchange of letters signed between the Association and the Recipient's Representative specified in the Agreements. The Recipient shall promptly disclose the updated ESCP.

5. The subsection on "Indicators for Implementation Readiness" below identifies the actions and measures to be monitored to assess Project readiness to begin implementation in accordance with this ESCP. Nevertheless, all actions and measures in this ESCP shall be implemented as set out in the "Timeframe" column below irrespective of whether they are listed in the referred subsection.

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MATERIAL MEASURES AND ACTIONS		TIMEFRAME	RESPONSIBILE ENTITY
IMPLEMENTATION ARRANGEMENTS AND CAPACITY SUPPORT			
A	**ORGANIZATIONAL STRUCTURE** 1. Maintain the PMU with qualified and capacitated staff throughout Project implementation, including a functional environmental and social risk management structure with qualified staff (one Environmental Risk Management Specialist, and one Social Risk Management Specialist), assign one GBV specialist with expertise of gender, and designate local-level focal points with adequate resources to support the management of environmental, social, health and safety (ESHS) risks and impacts. ***Further technical support will be provided by the UNICEF and WHO.***	1. Maintain the established PMU with qualified and capacitated staff as set out in the referred Agreement, including the appointment of the two E&S specialists and maintain them throughout Project implementation.	Ministry of Health (MoH)-PMU with CHDs and IPs
	2. The MoH shall ensure that UNICEF and WHO resign the amended output and supply agreements of the Project. UNICEF, and WHO shall maintain existing management structure and revised implementation arrangement consistent with the ESCP and Environmental and Social Framework (ESF) instruments for ESHS implementation.	2. October 1, 2026; and thereafter maintain throughout Project implementation.	MoH with UNICEF, WHO
	3. Before commencement of activities by the four MoH-direct NGOs and the CHDs, MoH shall ensure that: (i) contracts with the NGOs and engagement arrangements with the CHDs include applicable E&S obligations, Codes of Conduct, access to the project GRM, reporting requirements, and remedies for persistent E&S non-compliance; (ii) each NGO prepares and submits a brief E&S implementation plan for its assigned counties; and (iii) each participating CHD designates a named E&S focal point to support local-level implementation and monitoring of E&S requirements. The MoH/PMU with the MOs conducts routine E&S readiness and capacity needs assessment of each participating CHD prior to commencement of activities. The findings and recommendations from such assessments will document and translate into a tailored capacity building plan and a structured onboarding process on ESF requirements.	3. Before commencement of respective activities; and thereafter maintain throughout implementation.	MoH with NGOs and CHDs
	4. The PMU shall maintain the contracted third-party monitoring agent (TPMA) with a revised Terms of Reference acceptable to the Association, requiring monitoring ESHS compliance across all project components, including compliance with this ESCP. The Terms of Reference of the TPMA has clear roles and deliverables for its engagement.	4. Reconfirm TPMA engagement status before the AF2 effective date, and thereafter maintain throughout Project implementation	MoH, with UNICEF, WHO, MoH-direct NGOs, and CHDs

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MATERIAL MEASURES AND ACTIONS		TIMEFRAME	RESPONSIBILE ENTITY
B	**CAPACITY BUILDING PLAN/MEASURES** MoH shall ensure that capacity-building measures are updated and implemented in accordance with the relevant E&S instruments, including the updated ESMF, LMP, SEP, and SEA/SH Action Plan, to reflect the revised implementation arrangements under the restructuring. The updated capacity-building measures shall cover the PMU, UNICEF, WHO, MoH-direct NGOs, CHDs, BHI community health workers, project workers, and relevant community stakeholders, and shall include training on ESCP/ESF requirements, stakeholder engagement and GRM, labor and OHS/IPC requirements, healthcare waste management, SEA/SH prevention and response, security risk management, and emergency preparedness.	Deliver training before commencement of respective activities and throughout Project implementation	MoH with PMU, UNICEF, WHO , CHDs, and 4 NGOs directly contract by MoH under the Pilot for Direct Implementations
MONITORING AND REPORTING			
C	**REGULAR REPORTING** Prepare and submit to the Association regular monitoring reports on the ESHS performance of the Project. The reports shall include: • Status of preparation and implementation of E&S documents required under the ESCP, including site-specific Laboratory Biosafety Plans and the updated Medical Waste Management Plan (MWMP). • Summary of stakeholder engagement activities carried out as per the Stakeholder Engagement Plan and the Pandemic Risk Communication and Community Engagement (RCCE) protocol. • Complaints submitted to the grievance mechanism(s), the grievance log, with explicit tracking of any pandemic- or quarantine-related grievances, and progress made in resolving them. • E&S performance of contractors and subcontractors as reported through [monthly] contractors' and supervision firms' reports. • Number and status of resolution of incidents and accidents reported under action E below.	Semi-annually throughout Project implementation. UNICEF, WHO, NGOs, and CHDs to provide their progress report to the Project Management Unit (PMU) 30 days after the end of each reporting period. Submit each compiled report to the Association no later than 45 days after the end of each reporting period	MOH
D	**CONTRACTORS' MONTHLY REPORTS** Require contractors and supervising firms to prepare and submit monthly monitoring reports on ESHS performance in accordance with the metrics specified in the respective bidding documents and contracts.	Monthly throughout the relevant contract period; submitted to the Association upon request or as annexes to progress reports under action A above.	MOH with UNICEF/WHO/NGOs/CHDs- Contractors, or Supervising firms

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E	**INCIDENTS AND ACCIDENTS** 1. Promptly notify the Association of any incident or accident relating to the Project which has, or is likely to have, a significant adverse effect on the environment, the affected communities, the public or workers, including those resulting in death or significant injury to workers or the public; acts of violence, discrimination or protest; unforeseen impacts to cultural heritage or biodiversity resources; pollution of the environment; forced or child labor; displacement without due process (forced eviction); allegations of sexual exploitation or abuse (SEA), or sexual harassment (SH); or disease outbreaks. Provide available details of the incident or accident to the Association upon request. 2. Arrange for an appropriate review of the incident or accident to establish its immediate, underlying and root causes. Prepare, agree with the Association, and implement a Corrective Action Plan that sets out the measures and actions to be taken to address the incident or accident and prevent its recurrence.	1. MOH to notify the Association no later than 5 days, and UNICEF/WHO/NGOs/CHDs to the MOH within 4 days, after learning of the incident or accident using such reporting formats as the Association may specify. 2. Provide subsequent report to the Association within 30 days to the Association.	MOH with UNICEF/WHO/NGOs/ CHDs
ESS 1: ASSESSMENT AND MANAGEMENT OF ENVIRONMENTAL AND SOCIAL RISKS AND IMPACTS			
1.1	**ENVIRONMENTAL AND SOCIAL ASSESSMENTS AND/OR PLANS** 1. Consistent with the relevant ESSs, update, consult upon, redisclose, adopt and implement an (a) Environmental and Social Management Framework (ESMF) (including, as annexes, the Labor Management Procedures (LMP), Social Assessment (SA) including Social Development Plan (SDP), GBV/SEA/SH Prevention and Response Action Plan, and Medical and e-Waste Management Plan, and capacity assessment and action plan); (b) Resettlement Framework (RF); and (c) Security Risk Assessment and Management Plan (SRAMP). The framework documents should be periodically reviewed and updated as necessary to address any challenges with Project E&S performance or emerging issues during project or subproject implementation. 2. The MoH to ensure that UNICEF, WHO, NGOs, and CHDs to prepare, consult upon, disclose, adopt and implement site specific Environmental and Social Impact Assessments (ESIAs)/ corresponding Environmental and Social Management Plans (ESMPs) for health facility rehabilitation subprojects as set out in the updated ESMF. In line with the updated ESMF and site specific ESIAs/ESMPs, ensure that contractors will prepare C-ESMPs before commencement of any rehabilitation/construction activities. The proposed subprojects/activities described in the exclusion list set out in the updated ESMF shall be ineligible to receive financing under the Project. Draft site-specific instruments will be reviewed and cleared by the Association as described in the updated ESMF.	1. The updated draft instruments to be reviewed and cleared by Association, and redisclosed and adopted within 60 days of the Project effectiveness date, and thereafter implement throughout Project implementation. 2. Adopt the site-specific ESIA/ESMP before launching the bidding process for the respective Project activity/subproject that requires the adoption of such as ESIA/ESMP. Once adopted, implement the respective instruments throughout Project implementation.	MoH with UNICEF, WHO, NGOs, and CHDs

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MATERIAL MEASURES AND ACTIONS		TIMEFRAME	RESPONSIBILE ENTITY
	3. Prepare and implement a Facility Transition Protocol, consistent with the ESMF and applicable policies, to ensure timely community communication, continuity of essential services and referral arrangements, and proper inventory, management, and transfer of Project-financed assets for facilities transitioning out of Project support. Implement the related healthcare-waste transition measures under Action 3.1 and stakeholder communication measures under Action 10.1	3. Prepare the Facility Transition Protocol before initiating transition from Project support at any facility; thereafter implement it throughout the transition period	
1.2	**MANAGEMENT OF CONTRACTORS** Incorporate the relevant aspects of the ESCP, including, inter alia, the relevant E&S instruments, as listed under 1.1.1 (including updated SEA/SH Prevention and Response Action Plan) and 1.1.2 (ESIA, ESMP), the updated Labor Management Procedures, and code of conduct into the E&S specifications of the procurement documents and contracts with contractors and supervising firms. Thereafter ensure that the contractors and supervising firms comply and that they require their subcontractors to comply with the E&S specifications of their respective contracts.	As part of the preparation of procurement documents and respective contracts. Supervise contractors throughout Project implementation. Copies of relevant contracts provided to the Association upon request.	MoH with UNICEF, WHO, CHDs, and 4 NGOs
1.3	**TECHNICAL ASSISTANCE** Carry out the technical assistance activities including feasibility studies, capacity building, training, and any other related activities under the Project are carried out in accordance with terms of reference acceptable to the Association, that are consistent with the ESSs. Thereafter prepare and finalize the outputs of such activities in compliance with the terms of reference.	Throughout Project implementation	MoH
1.4	**C ONTINGENT EMERGENCY RESPONSE COMPONENT (CERC) FINANCING** Ensure that activities and other technical assistance activities under the CERC are carried out in accordance with terms of reference acceptable to the Association, that are consistent with the ESSs. Also, maintain a chapter in the ESMF to outline CERC provisions (see 1.1 for ESMF timeline). Update the ESMF upon CERC activation, as necessary to reflect CERC activities. Implement the E&S provisions of the CERC activities in accordance with the ESMF.	Prior to implementation of activities under CERC Same timeframe as under Action 1.1(1) above Prior to any CERC activations under the Project. Throughout implementation of CERC activities	MoH

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ESS 2: LABOR AND WORKING CONDITIONS			
2.1	**LABOR MANAGEMENT PROCEDURES** Update, adopt and implement the Labor Management Procedures (LMP) for the Project, including, inter alia, provisions on working conditions, management of workers relationships, occupational health, and safety (OHS) plan (including personal protective equipment, and emergency preparedness and response), code of conduct (including relating to SEA/SH), forced labor, child labor, grievance arrangements for Project workers, and applicable requirements for contractors, subcontractors, and supervising firms.	Update and redisclose the LMP as part of the revised ESMF within 60 days of the Project restructuring effectiveness date, and thereafter implement the updated LMP throughout Project implementation. .	MoH with UNICEF, WHO, CHDs, and 4 NGOs
2.2	**GRIEVANCE MECHANISM FOR PROJECT WORKERS** Establish/strengthen and operate a grievance mechanism for Project workers, as described in the LMP and consistent with ESS2. Grievance mechanism procedures for Project workers shall be spelled out in the updated LMP.	Establish/strengthen a grievance mechanism for Project workers as part of the updated LMP, prior to engaging Project workers and thereafter maintain and operate throughout Project implementation	MoH with UNICEF, WHO, CHDs, and 4 NGOs
ESS 3: RESOURCE EFFICIENCY AND POLLUTION PREVENTION AND MANAGEMENT			
3.1	**MEDICAL WASTE MANAGEMENT PLAN:** Update, adopt and implement Medical Waste Management Plan (WMP) as part of ESMF and site specific ESIAs/ESMPs to manage hazardous and non-hazardous wastes, consistent with updated ESMF and ESS3. For facilities transitioning out of Project support, implement healthcare-waste transition measures in accordance with the Facility Transition Protocol under Action 1.1(3).	Same timeframe as under Actions 1.1 (1) for updated ESMF and 1.1 (2) for ESIAs/ESMPs above Same timeframe as under Actions 1.1 (3) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs
3.2	**RESOURCE EFFICIENCY AND POLLUTION PREVENTION AND MANAGEMENT** Consistent with ESS3, incorporate resource efficiency and pollution prevention and management measures in the updated ESMF (including: measures to carry out the purchase, storage, transportation and handling of vaccines (including, ultra-cold chain management) in a safe manner and in accordance with the good industry practice and relevant WHO guidelines; adequately manage and dispose of health care wastes (including, vaccines); sustainably manage construction-related waste generated during rehabilitation and construction activities, and other types of hazardous and non-hazardous wastes); sub-project	Same timeframe as for the adoption and implementation of the updated ESMF under Section 1.1 (1) above. Inclusion in site-specific ESIAs/ESMPs is same timeline for adoption and implementation as ESIAs/ESMPs under Section 1.1 (2) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs

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	activities will be designed for climate resilience; design health facilities to reduce/prevent accidental leakage or spillage of fuels, oils & other chemicals & wastes released during both rehabilitation/construction and operation; ensure efficient use of natural resources like water and energy in sub-project activities; and will be detailed in the site-specific environmental and social risk management tools such as ESMPs/ ESIAs to be prepared under Actions 1.1 (1) and 1.1 (2), respectively		
ESS 4: COMMUNITY HEALTH AND SAFETY			
4.1	**TRAFFIC AND ROAD SAFETY** Consistent with updated ESMF and ESS4, incorporate measures to manage traffic and road safety risks as required in the site-specific ESIAs/ESMPs to be prepared under section 1.1(2)	Same timeframe as for the adoption and implementation of the ESIAs/ESMPs under Section 1.1 (2) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs
4.2	**COMMUNITY HEALTH AND SAFETY** Assess and manage specific risks and impacts to the community arising from Project activities, including, inter alia, medical wastes, SEA/SH, child labor, behavior of Project workers, risks of labor influx and other issues. Include mitigation measures in the ESIAs/ESMPs, including facility-level Emergency Response Plans for all facilities in Jonglei, Western Equatoria, and Warrap covering evacuation routes, safe shelter, supply security, and staff safety, to be prepared in accordance with the updated ESMF. Establish community safety perimeters, waste-isolation controls, and emergency transport protocols for all diagnostic laboratories and treatment facilities.	Same timeframe as for the adoption and implementation of the ESIAs/ESMPs under Action 1.1 (2) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs
4.3	**GBV AND SEA RISKS** Update, adopt and implement a SEA/SH Action Plan as part of the updated ESMF to assess and manage the risks of SEA/ SH The assessment findings of the SEA/SH as part of the updated ESMF should be integrated into ESIAs and ESMPs to address local concerns specific to each sub-project. Update and implement targeted mitigation measures to address identified GBV/SEA/SH risks in the sub-project areas.	Same time frame as for the adoption and implementation of the updated ESMF under Section 1.1 (1) above Same time frame as for the adoption and implementation of the updated ESMF under Section 1.1 (2) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs

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4.4	**SECURITY MANAGEMENT** Assess and implement measures to manage the security risks of the Project, including the risks of engaging security personnel to safeguard project workers, sites, assets, and activities, as set out in the updated Security Risk Assessment and Management Plan (SRAMP) for the Project, guided by the principles of proportionality and by applicable law, in relation to hiring, rules of conduct, training, equipping, and monitoring of such personnel.	Same timeframe as under Section 1.1 (1) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs
4.5	Consistent with the updated ESMF and ESS4, Personal Data Protection: Safeguard personal data of individuals as an essential aspect of protecting people's lives, their physical and mental integrity, and their dignity on Personal Data Protection; take the appropriate measures, if any breach of the rules takes place.	Same time frame as for the adoption and implementation of the updated ESMF under Section 1.1 (1) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs
ESS 5: LAND ACQUISITION, RESTRICTIONS ON LAND USE AND INVOLUNTARY RESETTLEMENT			
5.1	**RESETTLEMENT POLICY FRAMEWORK** Adopt and implement a Resettlement Framework (RF) for the Project, consistent with ESS5.	Same timeframe as under Section 1.1 (1) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs
5.2	**RESETTLEMENT PLANS** Adopt and implement a resettlement action plan (RAP) for each activity under the Project for which the RF requires such RAP, as set out in the RF, and consistent with ESS5.	Adopt and implement the respective RAP, including ensuring that before taking possession of the land and related assets, full compensation has been provided and [as applicable] displaced people have been resettled and moving allowances have been provided.	MoH with UNICEF, WHO, CHDs, and 4 NGOs
ESS 6: BIODIVERSITY CONSERVATION AND SUSTAINABLE MANAGEMENT OF LIVING NATURAL RESOURCES			
6.1.	Where relevant, adopt and implement mitigation measures, including E&S screening process, analysis of alternatives and management plan for hazardous wastes as part of subproject specific ESIAs/ESMPs, consistent with ESS6 and the updated ESMF	Same timeframe as under Section 1.1 (2) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs
ESS 7: INDIGENOUS PEOPLES/SUB-SAHARAN AFRICAN HISTORICALLY UNDERSERVED TRADITIONAL LOCAL COMMUNITIES			
7.1	**INDIGENOUS PEOPLES** As most of South Sudan's population fall under the definition of Indigenous Peoples outlined in ESS7, this Project shall comply with the provisions of ESS7. Respective assessments and provisions shall be included in the Social Assessment (including Social Development Plan (SDP)) as part of the ESMF as well as the overall design of the project to ensure culturally appropriate communication as well as access to culturally appropriate benefits.	Same timeframe as under Section 1.1 (1) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs

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	The mitigation measures include to obtain the free, prior and informed consent of affected underserved, traditional, local communities, where relevant, as per the criteria of ESS7.		
7.2	**GRIEVANCE MECHANISM** Given it is envisioned that all Project beneficiaries are Indigenous Peoples, the grievance mechanism will be established under ESS10.	The GRM, as part of the updated SEP, is developed and will be disclosed before appraisal; and thereafter will be functional throughout Project implementation .	MoH with UNICEF, WHO, CHDs, and 4 NGOs
ESS 8: CULTURAL HERITAGE			
8.1	**CHANCE FINDS** Describe and implement the chance finds procedures, as part of subproject specific ESIAs/ESMPs consistent with ESS8 and the updated ESMF	Same timeframe as under Section 1.1 (2) above	MoH with UNICEF, WHO, CHDs, and 4 NGOs
ESS 9: FINANCIAL INTERMEDIARIES			
	Not relevant to this Project		
ESS 10: STAKEHOLDER ENGAGEMENT AND INFORMATION DISCLOSURE			
10.1	**STAKEHOLDER ENGAGEMENT PLAN PREPARATION AND IMPLEMENTATION** Update, adopt and implement a Stakeholder Engagement Plan (SEP). It shall include measures to, inter alia, provide stakeholders with timely, relevant, understandable and accessible information, and consult with them in a culturally appropriate manner, which is free of manipulation, interference, coercion, discrimination and intimidation, in a manner consistent with ESS 10 and acceptable to the Association Implement timely, accessible, and culturally appropriate communication with communities affected by facility transition, in accordance with the Facility Transition Protocol under Action 1.1(3).	Adopt the updated SEP prior to the Project Effectiveness date and thereafter implement the SEP throughout Project implementation	MoH with UNICEF, WHO, CHDs, and 4 NGOs
10.2	**PROJECT GRIEVANCE MECHANISM:** Establish, publicize, maintain and operate a grievance mechanism, as described in the SEP. The GRM shall be culturally appropriate and readily accessible to all Project-affected parties including any traditionally disadvantaged, vulnerable or marginalized communities. The grievance mechanism shall also receive, register and address concerns and grievances related to sexual exploitation and abuse, and sexual harassment in a safe and confidential manner, including through the referral of survivors to gender-based violence service	GRM established no later than 60 days after the project restructuring effectiveness date, and thereafter operate and maintain the GRM throughout Project implementation.	MoH with UNICEF, WHO, CHDs, and 4 NGOs

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	providers. The GRM will be enhanced with secure channels to flag, triage, and resolve pandemic-related community fears, quarantine complaints, or emergency response abuses.		
INDICATORS FOR IMPLEMENTATION READINESS			
	Finalize the recruitment and training of E&S staff in the Project Management Unit (PMU) Sign the amended Output and supply agreements between the MOH/PMU and the MOs (UNICEF, WHO, CHDs, and 4 NGOs directly contract by MoH under the Pilot for Direct Implementations) to ensure proper coordination of E&S risk management activities.	Within one month period after AF2 effective date	MoH MoH with UNICEF, WHO, CHDs, and 4 NGOs

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