United States Agency for International Development (USAID)
Ukraine
Request for Categorical Exclusion (RCE)

Program/Project/Activity Data:

Activity/Project Name:	**Public Health System Recovery and Resilience Activity (PHS R&R)**	
Assistance Objective:	**DO 4 "Inclusive, Sustainable Market-Driven Economic Growth", IR4.2 "Infectious diseases burden reduced".** **It will also indirectly contribute to DO 2 "Impact of Russia's Aggression Mitigated", IR 2.1 "Conditions Improved for Reintegration" by improving access to health services including mental health services for veterans and conflict-affected populations.**	
Program Area:	**DR.2 Good Governance/DR.2.2 Non-security Executive Authority Function and Processes**	
Country(ies) and/or Operating Unit:	**USAID/UKRAINE**	
Originating Office:	USAID/Ukraine Office of Health	Date: July 21, 2021
PAD Level RCE: Yes☐ No☒ RCE/IEE Amendment: Yes☐ No☒ Supplemental RCE: Yes☐ No☒	DCN of Original RCE/IEE:	N/A
	DCN of Amendment(s):	N/A
If Yes, Purpose of Amendment:	N/A	
DCN(s) of Related EA/IEE/RCE/ER(s):	N/A	
Implementation Start/End:		LOP: March 2022 – March 2027
Funding Amount:		LOP Amount: $45,000,000
Contract/Award Number (if known):		
Recommended Determination: Categorical Exclusion		
Additional Elements: Government to Government: ☐ Local Procurement: ☐ Donor Co-Funded: ☐		

1. Project and Activity Description

1.1 Purpose and Scope of RCE

This RCE covers the new Public Health System Recovery and Resilience Activity (PHS R&R), which will run from March 2022 through March 2027, with an LOP Amount of $45,000,000.

No construction or procurement of specialized equipment are envisioned. No medical waste as a part of the activity implementation.

1.2 Project Overview

The goal of the Public Health System Recovery and Resilience Activity (PHS R&R) is to support the

Government of Ukraine in building a more resilient public health care system that will be better able to prevent, detect and respond to public health threats, sustain critical public health services during a crisis, and protect the health of all Ukrainians, including vulnerable and marginalized population groups. It is expected that achievement of the activity goal will result in reductions of hospitalizations due to COVID-19, improved national and regional preparedness and response capacity to address health threats including through improved immunization coverage and health promotion, and expanded access to mental health counseling services for vulnerable groups.

The PHS R&R activity will have the following 4 objectives with illustrative LOE shown in parentheses:

- Objective 1: Mitigate COVID-19 outbreaks and secondary impacts on essential health services (20% of LOE);
- Objective 2: Increase the resilience and capacity of the public health services at the regional level and below (40% of LOE);
- Objective 3: Strengthen community resilience against potential public health threats (30% of LOE);
- Objective 4: Increase the access and sustainability of mental health services for conflict-affected populations (10% of LOE).

The components and related sub-activities are further described in section two.

2. Project Description and Climate Risk Screening

The activities to be implemented under **Objective 1 will: Mitigate COVID-19 outbreaks and secondary impacts on essential health services will play a vital role in helping Ukraine get COVID-19 under control**, including through support for COVID-19 vaccination and response, and restoring and improving essential public health services that have been acutely impacted by the disease with a particular emphasis on primary health care services. The interventions under this objective will need to be flexible to support national-level needs where appropriate, as well as focused interventions in geographic areas most in need, such as those that are experiencing surges of new COVID-19 cases and hospitalizations.

Illustrative Activities include, but are not limited to:

- COVID-19 vaccine is promoted including outreach to vulnerable and marginalized population groups;
- Selected health facilities implement quality assurance and mitigation measures for COVID-19 19 response and case management;
- Strategic Behavior Change and Communication activities enable effective risk communication to support disease control and prevention;
- COVID-19 testing and contact tracing systems are established and institutionalized;
- Surveillance systems and functions, in cooperation with regional laboratories, are improved;
- Access to mental health counseling and psycho-social support for health care workers is expanded to address stress-related conditions related to COVID-19 response.

USAID envisions that Objective 1 implementation will lead to the following *Illustrative Results:*

- COVID-19 vaccine coverage is 70% or higher for vulnerable population groups;
- Targeted oblasts ensure 95% of targeted health facilities meet standards for infection prevention and control;
- Epidemiological surveillance at the regional level is improved;
- Response to and management of COVID-19 outbreaks at the regional level is improved.

The activities to be implemented under **Objective 2: Increase the resilience and capacity of critical public health functions at the regional level** will support reform and strengthening of the public health system through national-level interventions and efforts in targeted oblasts (regions), focusing on key public health capacities and services, particularly related to immunizations, mental health, and preparedness and response to public health threats including strengthening surveillance, contact tracing and outbreak investigation, emergency preparedness and risk communication. Any geographic targeting will be determined in cooperation with the Ministry of Health during work planning.

Along with working in targeted oblasts, the PHS R&R activity will also support capacity-building at the national level to improve the governance and implementation of critical public health functions across oblasts, helping to operationalize new public health legal frameworks and in accordance with the MOH and CPH priorities and international practice.

The PHS R&R activity will develop tools and approaches for strengthening public health services in selected regions to inform the subsequent national roll-out of public health reform. Activities will need to be responsive to changes in the new Public Health Law pending approval by Verkhovna Rada, and other changes in the governance and financing of the public health system.

Illustrative Activities include, but are not limited to:

- Strengthen national and regional capacity to oversee infectious diseases surveillance, preparedness, and response to outbreaks;
- Contribute to the improvement of the governance frameworks related to public health system functioning, including linkages between public health, oblast health departments and providers;
- Strengthen immunization services and increase coverage at the regional level and below;
- Increase access to mental health (MH) counseling services for vulnerable and marginalized population groups, who experienced increased isolation and trauma in the context of COVID-19;
- Collaborate with the Center for Public Health and social science institutions to conduct applied research and assessments in the public health sector to inform future planning by the national and regional public health system managers;
- Strengthen public health workforce capacities to enable health systems reform and improved public health functions.

USAID envisions that Objective 2 implementation will lead to the following *Illustrative Results:*

- Improved national and regional capacity to sustain the critical public health functions in collaboration with MOH;
- Improved regional capacity to manage and provide immunization services;
- Improved sustainable access to mental health counseling services for priority populations;
- New tools for testing, screening, and counselling for infectious diseases and key risk factors/comorbidities – including remote screening tools - are introduced and scaled at the primary health care level;
- A minimum of 5 new regional public health entities are fully operational;
- Decisions to respond to outbreaks are made based on the evidence-based data.

The activities to be implemented under **Objective 3: Develop community resilience against potential public health threats** will be complementary to the activities of Objective 2 by strengthening national and subnational governments capacity to respond to public health threats through prevention, risk communication, and community health promotion. These activities will provide an opportunity for greater partnership and collaboration between the MOH, other ministries, local authorities and civil society

organizations (CSOs) at all levels to take an active part in institutional changes and the development of public health services that are more responsive to the community's needs. They will ultimately increase the general population's trust towards the public health system, health services and health providers.

COVID-19 also exposed and reinforced key gaps in care-seeking in Ukraine, such as tuberculosis (TB) and noncommunicable diseases (NCD) screening and demand for mental health services, and hesitancy of parents to vaccinate children. Under this objective, new tools and approaches on how to develop greater community resilience to public health threats will be developed and rolled out in the context of the national public health reform.

Illustrative Activities include, but are not limited to:

- Strengthen public systems nationally and sub-nationally for conducting social and behavior change interventions, including risk communication for outbreak response as well as prevention and health promotion;
- Develop strategies and mitigate barriers to health screening, care, and treatment at the PHC level among vulnerable population groups;
- Promote improvement of the trust between communities and health providers;
- Increase role of communities in infectious diseases detection and care-seeking;
- Build the capacity of underutilized and emerging CSOs in cooperating with the public health system to promote more responsive PH services, healthy lifestyles and cooperation with local governments in prevention of public health threats and risk communication;
- Promote public-private partnerships with CSOs, educational institutions, and private sector within the public health system.

USAID envisions that Objective 3 implementation will lead to the following *Illustrative Results:*

- Improved communities' health knowledge, attitudes, and practices to support resilience to infectious disease threats;
- Improved national and subnational capacity for risk communication;
- Strengthened collaboration between communities and local authorities to detect and screen infectious diseases and priority health conditions;
- Improved utilization of PHC care services by communities;
- Increased public trust in health services and PHC doctors;
- Improved capacity of CSOs to represent their community's health needs.

The activities to be implemented under **Objective 4**: **Increase the access and sustainability of mental health services for conflict-affected populations** will focus on addressing mental health needs of conflict-affected populations, which continue to grow as the conflict with Russia endures. Activities under this objective will build on the USAID supported Common Elements Treatment Approach (CETA) and other evidence-based community counseling models as relevant, and will support the continued scale up of mental health counseling services in Eastern Ukraine and, potentially, in other oblasts where conflict-affected populations and veterans reside. This Objective will also enhance the delivery of these services through support for training of counselors, and improved linkages between health and other GoU institutions involved in provision of social and mental health services (such as the Ministry of Veterans Affairs, Ministry of Social Policy, Ministry of Temporary Occupied Territories, etc.). Additionally, activities under this Objective will consider integration of new models and approaches to address mental health disorders and provide psychosocial support to conflict-affected populations due to COVID-19.

Illustrative Activities include, but are not limited to:

- Expand access to the needed mental health care services for veterans and other people affected by the conflict in eastern Ukraine;

- Scale up and support institutionalization of evidence-based community models of mental health (such as CETA) for conflict-affected populations;
- Strengthen qualification and counselling capacity of the current providers of mental health and psycho-social support;
- Prepare a cohort of providers of mental health services for conflict-affected communities based in eastern Ukraine;
- Strengthen selected pre-service educational programs in mental health.

USAID envisions that Objective 4 implementation will lead to the following *Illustrative Results:*

- Psycho-social and mental health support needs met for conflict-affected populations including veterans at the community level in selected regions;
- Public institutions such as local governments and/or amalgamated communities provide financial support to community mental health care.

Defined or illustrative activities under Objective One — Mitigate COVID-19 outbreaks and secondary impacts on essential health services	**Potential Environmental Impacts**	**Climate Risk Rating***
1.1 COVID-19 vaccine is promoted including outreach to vulnerable population groups	N/A	Low
1.2 Selected health facilities implement quality assurance and mitigation measures for COVID-19 response and case management	N/A	Low
1.3 Strategic Behavior Change and Communication activities enable effective risk communication to support disease control and prevention	N/A	Low
1.4 COVID-19 testing and contact tracing systems are established and institutionalized	N/A	Low
1.5 Surveillance systems and functions, in cooperation with regional laboratories, are improved	N/A	Low
1.6 Access to mental health counseling and psycho-social support for health care workers is expanded to address stress-related conditions related to COVID-19 response	N/A	Low

Defined or illustrative activities under Objective Two— Increase the resilience and capacity of the public health services at the regional level and below	**Potential Environmental Impacts**	**Climate Risk Rating***
2.1 Strengthen the national and regional capacity to oversee infectious diseases surveillance, preparedness, and response to outbreaks	N/A	Low
2.2 Contribute to the improvement of the governance frameworks related to public health system functioning, including linkages between public health, oblast health departments and providers	N/A	Low
2.3 Strengthen immunization services and increase coverage at the regional level and below	N/A	Low
2.4 Increase access to mental health counseling services for vulnerable and marginalized population groups, who experienced increased isolation and trauma in the context of COVID-19	N/A	Low
2.5 Collaborate with the Center for Public Health and social science institutions to conduct applied research and assessments in the public health sector to inform future planning by the national and regional public health system managers	N/A	Low

Defined or illustrative activities under Objective Two— Increase the resilience and capacity of the public health services at the regional level and below	Potential Environmental Impacts	Climate Risk Rating*
2.6 Strengthen public health workforce capacities to enable health systems reform and improved public health functions	N/A	Low

Defined or illustrative activities under Objective Three— Strengthen community resilience against potential public health threats	Potential Environmental Impacts	Climate Risk Rating*
3.1 Strengthen public systems nationally and regionally for conducting social and behavior change interventions, including risk communication for outbreak response as well as prevention and health promotion	N/A	Low
3.2 Develop strategies and mitigate barriers to health screening, care, and treatment at the PHC level among vulnerable population groups	N/A	Low
3.3 Promote improvement of the trust between communities and health providers	N/A	Low
3.4 Increase role of communities in infectious diseases detection and care-seeking	N/A	Low
3.5 Build the capacity of underutilized and emerging CSOs in cooperating with the public health system to promote more responsive PH services, healthy lifestyles and cooperation with local governments in prevention of public health threats and risk communication	N/A	Low
3.6 Promote public-private partnerships with CSOs, educational institutions, and private sector within the public health system.	N/A	Low

Defined or illustrative activities under Objective Four— Increase the access and sustainability of mental health services for conflict-affected populations	Potential Environmental Impacts	Climate Risk Rating*
4.1 Expand access to the needed mental health care services for veterans and other people affected by the conflict in eastern Ukraine	N/A	Low
4.2 Scale up and support institutionalization of evidence-based community models of mental health (such as CETA) for conflict-affected populations	N/A	Low
4.3 Strengthen qualification and counselling capacity of the current providers of mental health and psycho-social support	N/A	Low
4.4 Prepare a cohort of providers of mental health services for conflict-affected communities based in eastern Ukraine	N/A	Low
4.5 Strengthen selected pre-service educational programs in mental health	N/A	Low

3. Justification for Categorical Exclusion Determination

The activities under the Public Health System Recovery and Resilience activity will not have an effect on the natural or physical environment and are among the classes of activities listed in 22 CFR 216.2(c)(2). Therefore, under §216.2(c)(1), neither an IEE nor an EA will be required for these activities. Instead, a categorical exclusion threshold determination is recommended for the following identified activities under 22 CFR 216.2(c)(2):

- Activities 1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 2.1, 2.2, 2.3, 2.4, 2.6, 3.1, 3.2, 3.3, 3.4, 3.5, 3.6, 4.1, 4.2, 4.3, 4.4, and 4.5 under §216.2(c)(2)(i) Education, technical assistance, or training programs except to the extent such programs include activities directly affecting the environment (such as construction of facilities, etc.);
- Activity 2.5, under §216.2(c)(2)(iii) Analyses, studies, academic or research workshops and meetings; and
- Activities 1.1, 1.3, 1.4, and 3.1 under §216.2(c)(2)(v) Document and information transfers.

4. Limitations of the Categorical Exclusion Determination:

This categorical exclusion does not cover classes of actions normally having a significant effect on the environment under §216.2(d):

i. Programs resulting in the development of medical protocols, distribution of medicine, or those that result in healthcare waste as defined in the USAID Sectoral Environmental Guidelines on Healthcare Waste Management;
ii. Programs of river basin development;
iii. Irrigation and water management;
iv. Agricultural land leveling;
v. Drainage projects;
vi. Large scale agricultural mechanization;
vii. Resettlement projects;
viii. New land development;
ix. Penetration road building and road improvement;
x. Powerplants;
xi. Industrial plants;
xii. Potable water and sewerage projects;
xiii. Support for governmental policies or legislation that deal with the environment or climate; and
xiv. Communications activities that deal with the environment or climate.

In addition, this categorical exclusion does not cover activities that:

- Support project preparation, project feasibility studies, engineering design for activities listed in §216.2(d)(1);
- Affect endangered species;
- Provide support to extractive industries (e.g. mining and quarrying);
- Promote timber harvesting;
- Lead to construction, reconstruction, rehabilitation, or renovation work;
- Support agro-processing or industrial enterprises;
- Provide support for regulatory permitting;
- Lead to privatization of industrial facilities or infrastructure with heavily polluted property;
- Assist the procurement (including payment in kind, donations, guarantees of credit) or use (including handling, transport, fuel for transport, storage, mixing, loading, application, clean-up of spray equipment, and disposal) of pesticides or activities involving procurement, transport, use, storage, or disposal of toxic materials--pesticides cover all insecticides, fungicides, rodenticides, etc. covered under the Federal Insecticide, Fungicide, and Rodenticide Act; and/or
- Procure or use genetically modified organisms.

Any of these actions would require a Europe and Eurasia Bureau Environmental Officer (BEO) approved amendment to the categorical exclusion.

5. Mandatory Inclusion of Environmental Compliance Requirements in Solicitations, Awards,

Budgets, and Work Plans

- Appropriate environmental compliance language, including limitations defined in Section 4, shall be incorporated into solicitations and awards for categorical exclusions.
- The implementing partner shall ensure annual work plans do not prescribe activities that are defined as limitations in Section 4.

6. Revisions

Under §216.3(a)(9), if new information becomes available that indicates that activities covered by the categorical exclusion might be considered major and their effect significant, or if additional activities are proposed that might be considered major and their effect significant, this categorical exclusion determination will be reviewed and, if necessary, revised by the Mission Environmental Officer (MEO) with concurrence by the BEO. It is the responsibility of the USAID Contract Officer's Representative (COR)/Agreement Officer's Representative (AOR) to keep the MEO and BEO informed of any new information or changes in the activity that might require revision of this determination.

7. Recommended Determination for Categorical Exclusion:

Approval: James Hope Digitally signed by James Hope Date: 2021.07.26 17:03:56 +03'00'
James M. Hope, Mission Director — Date

Clearance: Susan Kutor Digitally signed by Susan Kutor Date: 2021.07.23 15:53:06 +03'00'
Susan Kutor, Deputy Mission Director — Date

Clearance: Mark Hyland Digitally signed by Mark Hyland Date: 2021.07.22 10:49:26 +03'00'
Mark Hyland, Residential Legal Officer — Date

Clearance: Pamela Strong Digitally signed by Pamela Strong Date: 2021.07.21 17:47:07 +03'00'
Pamela Strong, Acting Program Office Director — Date

Clearance: Tatiana Kistanova Digitally signed by Tatiana Kistanova Date: 2021.07.21 08:48:39 +03'00'
Tatiana Kistanova, Mission Environmental Officer — Date

Clearance: Tatiana Rastrigina Digitally signed by Tatiana Rastrigina Date: 2021.07.21 09:31:13 +03'00'
Tatiana Rastrigina, Activity Manager — Date

Concurrence: POOJAN BHASKER TRIPATHI (affiliate) Digitally signed by POOJAN BHASKER TRIPATHI (affiliate) Date: 2021.07.27 13:19:34 -04'00'
Poojan Tripathi, Bureau Environmental Officer
USAID Europe and Eurasia Bureau — Date

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ANNEX A: PHS R&R Activity – Climate Risk Screening and Management Tool for Activity Design
ACTIVITY CRM TOOL OUTPUT MATRIX: CLIMATE RISKS, OPPORTUNITIES, AND ACTIONS
*** = A required element, according to the Mandatory Reference**

1.1: Anticipated Activities	1.2: Time-frame	1.3: Geography	2: Climate Risks	3: Adaptive Capacity	4: Climate Risk Rating	5: Opportunities	6.1: Climate Risk Management Options	6.2: How Climate Risks Are Addressed	7: Next Steps for Project and/or Activity Design	8: Accepted Climate Risks*
1.1 COVID-19 vaccine is promoted including outreach to vulnerable population groups 1.2 Selected health facilities implement quality assurance and mitigation measures for COVID-19 response and case management 1.3 Strategic Behavior Change and Communication activities enable effective risk communication to support disease control and prevention 1.4 COVID-19 testing and contact tracing systems are established and institutionalized 1.5 Surveillance systems and functions, in cooperation with regional laboratories, are improved 1.6 Access to mental health counseling and psycho-social support for health care workers is expanded to address stress-related conditions related to COVID-19 response 2.1 Strengthen the national and regional capacity to oversee infectious diseases	0-20 years	Country-wide	-Challenges to improving health system outcomes due to health impacts from increasing temperatures, increased frequency and/or intensity of extreme weather events such as floods and droughts, as well as decreased water quality and quantity for an already limited potable water supplies -Impacts to stable supply of essential drugs and commodities at appropriate prices due to supply chain interruption from extreme weather events as well as altered demand resulting from changes in climate patterns and seasons -Impacts to medical education, e-health and health delivery strategies due to extreme weather events	-As many of the efforts to support health system transparency are nascent, there is limited consideration of or responsiveness to climate risks -The health system does not generally integrate climate risks -Financial resources are not allocated to support monitoring and research of potential climate risks and for governance to invest in addressing climate risks to the health system	Low	Technologies, policies, and procedures to improve health system resilience to climate-related risks can improve overall health outcomes -Increased resilience of the health system to climate-related risks can improve public perception of government functioning and effectiveness	-Consider climate risks to the health system and incorporate capacity building for health workers and policy-makers to identify, assess, and address climate risks	Climate risk rating is Low and as such, climate risks are not required to be addressed. However, the Mission will treat management options as feasible.	N/A	N/A

surveillance, preparedness, and response to outbreaks 2.2 Contribute to the improvement of the governance frameworks related to public health system functioning, including linkages between public health, oblast health departments and providers 2.3 Strengthen immunization services and increase coverage at the regional level and below 2.4 Increase access to mental health counseling services for vulnerable and marginalized population groups, who experienced increased isolation and trauma in the context of COVID-19 2.5 Collaborate with the Center for Public Health and social science institutions to conduct applied research and assessments in the public health sector to inform future planning by the national and regional public health system managers 2.6 Strengthen public health workforce capacities to enable health systems reform and improved public health functions 3.1 Strengthen public systems nationally and regionally for conducting social and behavior change interventions, including risk communication for outbreak response as well as			-Impacts to implementation of in-person trainings, meetings, events and capacity building activities due to extreme weather events							

prevention and health promotion 3.2 Develop strategies and mitigate barriers to health screening, care, and treatment at the PHC level among vulnerable population groups 3.3 Promote improvement of the trust between communities and health providers 3.4 Increase role of communities in infectious diseases detection and care-seeking 3.5 Build the capacity of underutilized and emerging CSOs in cooperating with the public health system to promote more responsive PH services, healthy lifestyles and cooperation with local governments in prevention of public health threats and risk communication 3.6 Promote public-private partnerships with CSOs, educational institutions, and private sector within the public health system. 4.1 Expand access to the needed mental health care services for veterans and other people affected by the conflict in eastern Ukraine 4.2 Scale up and support institutionalization of evidence-based community models of mental health (such as CETA) for conflict-affected populations 4.3 Strengthen qualification and counselling capacity of										

the current providers of mental health and psycho-social support 4.4 Prepare a cohort of providers of mental health services for conflict-affected communities based in eastern Ukraine 4.5 Strengthen selected pre-service educational programs in mental health										