

INITIAL ENVIRONMENTAL EXAMINATION & REQUEST FOR CATEGORICAL EXCLUSION

PROGRAM/ACTIVITY DATA:

Program/Activity Number: 617-008, SO8
Country/Region: Uganda / East Africa

Functional Objective: 3 – Investing in People
Program Area: 3.1-Health
Program Elements: 3.1.1-HIV/AIDS
3.1.2-Tuberculosis
3.1.3-Malaria
3.1.6-Maternal Child Health
3.1.7-Family Planning/Reproductive Health

Program Area: 3.2-Education
Program Elements: 3.2.1-Basic Education

Program/Activity Title: “Investing in People”

Funding to Begin: FY 2009 **Funding End:** FY 2014 **LOP Amount:** \$ 1.1billion DA Resources

The USAID/Uganda SO 8 program has over 40 partners implementing the SO activities, using a variety of funding and implementation mechanisms. The estimated budget for SO8 through FY2013 is approximately US\$1.1 billion.

IEE Prepared By: Sudi Bamulesewa USAID/Uganda Mission Environmental Officer, and SO8 Team

Current Date: August 25, 2008

Other Relevant Environmental Compliance Documentation: This IEE builds on the following USAID environmental compliance documentation that is already in effect for ongoing activities under USAID/Uganda SO8:

- USAID/Uganda SO8 Indoor Residual Spraying- Supplemental Environmental Assessment (SEA), File Names; P\GH env determination\Uganda Amendment to IEE February 2008.
- USAID/Uganda SO8 Indoor Residual Spraying- ,
http://www.encapafrica.org/documents/iee/36Uganda2_IRS_PERSUAP.pdf
- USAID/Uganda SO8, marketing, distribution and promotion of ITN's PERSUAP,
http://www.encapafrica.org/documents/iee/docs/34Uganda1_SO8_ITN_PERSUAP.doc

ENVIRONMENTAL DETERMINATION RECOMMENDED

Categorical Exclusion: X Negative Determination: X
Positive Determination: Deferral:

ADDITIONAL ELEMENTS

CONDITIONS: X

SUMMARY OF FINDINGS

The purpose of this Initial Environmental Examination (IEE) is to provide threshold determinations for the activities of USAID/Uganda's SO 8-Investing in People. All bi-lateral health and education activities funded through the USAID/Uganda Mission fall under this Environmental Threshold Decision designated at the Strategic Objective level. The SO has centrally-managed and funded mechanisms; these are covered by environmental determinations out of their home Bureau, usually the Global Health Bureau. In this case, SO8 activity managers are not responsible for ensuring environmental compliance with the provisions and conditions of the respective Global Health IEEs. However, they will consult with CTOs of centrally-funded mechanisms to ensure activities comply with the respective Global Health Bureau IEE.

USAID/Uganda's health and Education program is a diverse portfolio, with focus on HIV/AIDS, Tuberculosis, Malaria, Child and Maternal Health, Family Planning/Reproductive Health, and Basic Education.

This IEE evaluates the current activities and future activities under SO8 implemented through the following six program elements (PE):

3.1.1. HIV/AIDS

USAID/Uganda supports activities in all of the PEPFAR program areas and these include: Prevention of Mother-to-Child Transmission (PMTCT) activities include counseling and HIV testing for pregnant women, Anti-Retroviral (ARV) prophylaxis for HIV-infected pregnant women and their newborns; Prevention of HIV/AIDS program using the Abstinence/Be Faithful approach and the activities include community mobilization, training, information, education, and communication; other prevention activities which include purchase and promotion of condoms to high-risk groups, through social marketing and through free distribution; management of other sexually transmitted infections (if not in a palliative care setting); and behavior change information; and palliative care is the broadest category of HIV/AIDS interventions; Treatment of HIV/AIDS patients using ARV's, counseling and Testing; and support to the HIV/AIDS Orphans and Vulnerable Children (OVC)

3.1.2 Tuberculosis

The SO8 team provides support to the Government of Uganda through training and supervision, and through distribution of TB drugs. The activity also supports the TB prevention and care programs.

3.1.3 Malaria

USAID continues to use a comprehensive approach for implementing malaria prevention diagnosis and treatment programs. Prevention activities include marketing and distribution of long-lasting insecticide treated nets (LLITNs), intermittent preventive treatment for malaria in pregnancy (IPTp), and indoor residual spraying (IRS) using DDT and Pyrethroids. Diagnosis activities include the improving and maintaining good microscopic or rapid diagnostic tests (RDT). Treatment activities will include assistance in the transition to the new artemisinin combination drug therapy (ACT) and case management.

3.1.6 Child and maternal Health

The activity aims to provide technical assistance and capacity development of the Child and maternal health activities. These include support to the public sector to develop human resources in health, support to public and private sector to improve pharmaceutical logistics and supply chain management, improved public and private sector capacity to regulate and fortify local foods with micronutrients, improved service delivery at health care facilities and at the community level to address maternal and childhood illnesses, fistula, and nutrition, and health communication and behavior change messages.

3.1.7 Family Planning and Reproductive Health

The family planning and Reproductive activities focus on providing technical assistance, capacity development and procurement of contraceptives. This includes procurement of contraceptives into the national distribution system, fees to utilize this system, and TA to develop the capacity of the public pharmaceutical supply chain for contraceptives. Service delivery includes capacity development of health care providers in the public and private sector to provide information, counsel and contraception services to clients at the community and service facility levels. Also included is improved capacity of health care providers to identify and treat fistula. Funds are also utilized for advocacy and education on family planning issues to parliamentarians, decision-makers, religious leaders, and community members.

3.2.1 Basic Education.

The activity aims at providing technical support to Ministry of Education and Sports to enhance capacity for education at the primary level. USAID/Uganda also supports selected bright but needy girls and boys attain secondary education and this includes: paying tuition and other school requirements and basic needs for orphans and vulnerable children in about 100 schools. The SO8 team is planning a Public-Private Partnership with Microsoft to support the education sector's Management Information System (EMIS). This is a data collection, storage, retrieval, processing and dissemination system specifically designed for use by educational decision makers and administrators to plan and administer education systems more efficiently and effectively. Also, the SO intends to support a study/survey that will provide actionable programming data and information to USAID, other donors, and the Government of Uganda on supporting the schooling of orphans and vulnerable children (OVC) in Uganda.

This IEE evaluates each of these PE activities, and recommends Categorical Exclusions, Negative Determination with Conditions threshold determinations, and mitigation measures as summarized below and elaborated in Table 1.

1. A Categorical Exclusion is recommended for some of the activities in PE 3.1.1, PE 3.1.2, PE 3.1.3, PE 3.1.6, PE 3.1.7 and PE 3.2.1, pursuant to 22 CFR 216.2(c)(2)(i),(ii)(iii) and (v) for the following activities:

- (i) Activities involving education, training, technical assistance or training programs except to the extent such programs include activities directly affecting the environment (such as construction of facilities, etc.);
- (ii) Activities involving controlled experimentation exclusively for the purpose of research and field evaluation and carefully monitored;
- (iii) Activities involving analyses, studies, academic or research workshops and meetings;
- (v) Activities involving document and information transfers;
- (viii) Programs involving nutrition, health care, or family planning services except to the extent designed to include activities directly affecting the environment (such as construction of facilities, water supply systems, waste water treatment, etc.);
- (xiv) Studies, projects or programs intended to develop the capability of recipient countries and organizations to engage in development planning.

However, there are conditions for these activities; *i.e.*, if any topic associated with these activities is one that inherently affects the environment, such as training in HIV/AIDS testing that involves use and disposal of medical waste, or training related to malaria prevention then such training will include information on how to minimize and/or mitigate these impacts. Examples include, instruction on safe disposal of sharps and biological samples generated from HIV/AIDS testing or training in proper

household behaviors to minimize exposure during indoor residual spraying campaigns and proper use of insecticide-treated materials like bed nets.

2. Environmental Impact Threshold Decision and Conditions:

For the types of activities being implemented or planned to be implemented by SO8, the following recommended threshold determinations have been made.

Pursuant to 22 CFR216.3(a)(2)(iii), a **Negative Determination with Conditions** is recommended for SO8 activities that have potential for negative impact on the environment in the following categories, and as presented in Section 4 Table 1 of this document:

- 1) Procurement, storage, management and disposal of public health commodities, including pharmaceutical drugs;
- 2) Generation, storage and disposal of hazardous or highly hazardous medical waste, e.g. blood testing in VCT centers, STI/HIV testing, blood for malaria and anemia, and laboratory-related activities;
- 3) Small-Scale construction/rehabilitation of health facilities and education centers;
- 4) Provision of Equipment and supplies to Health and Education facilities.
- 5) Use of pesticides (*i.e.*, specific long-lasting insecticide treated bed nets)

The conditions for these activities draw on the Environmental Guidelines for Small-Scale Activities in Africa (EGSSAA), found online at <http://www.encapafrica.org/EGSSAA> .

3. Quality Assurance and Compliance Provisions

- USAID/Uganda is responsible for assuring that implementing partners have the human capacity necessary to incorporate environmental considerations into program planning and implementation and to take on their role in the Environmental Screening Process. Implementing partners should seek training as needed, such as through participation in the Africa Bureau's regional ENCAP training courses.
- Among the conditions recommended in this IEE include the implementation of an environmental review process prior to undertaking certain activities that may have adverse environmental impacts. These activities are designated with a Negative Determination with Conditions, and prescribe use of USAID Africa Bureau Environmental Review & Report Form (ERR/F), which is attached to this document as Annex 1.
- In general, SO 8 activities need to be subjected as appropriate to purpose-specific environmental screening, using the Africa Bureau ERR/F to identify activities that have a direct effect on the environment, and adhere to host country sectoral environmental guidelines for recommended measures for minimizing or preventing the occurrence of adverse environmental impacts.
- Proposed interventions for which the ERR/F is recommended include:
 - Infrastructure development, including health center construction, storage facility development, education center construction, among others;
 - Purchase and installation of medical equipment
 - Small grants for technology transfer activities

Activities that will be subjected to the ERR are those activities, especially with a biophysical impact, that will be executed under a sub-grantee scheme. Before a sub-grant is awarded, the main implementer will have to prepare an ERR for the Mission's review and approval.

The rationale for using the screening process (ERR) is to determine the relative scale and potential negative environmental impacts from the specifically planned activities. Depending on the scale, these could range from significant to negligible.

- Environmental Management Plans (EMPs) should be introduced into implementing programs' programs.
- Other conditions, which are described in section 4.2 will include use of best practices guidelines as described in the USAID Africa Bureau document, *Environmental Guidelines for Small-Scale Activities in Africa*. This document may be located at: <http://www.encapafrica.org/SmallScaleGuidelines.htm>.
- Additionally, periodic field visits should be made to assess the performance of implemented adverse impact mitigation and monitoring measures to identify any appropriate areas of improvement.

4. Operationalizing Provisions of the IEE

USAID/Uganda SO 8 Team will make clear through RFA/Ps, APSs, contracts, cooperative agreements or grants, post-award briefings, implementation work plans, etc., as may be the case that the determinations specified in this IEE need to be heeded, and that project implementing partners must put in place appropriate systems or management tools to ensure that the recommended mitigation and monitoring actions are taken in to account as required. This applies to the Environmental Review & Report Form (ERR/F) process in particular. Activity Managers and the MEO shall ensure that the implementing partners are aware of and applying the EFF/R process.

Monitoring and Evaluation: As required by ADS 204.5.4, the SO 8 team and project activity implementing partners will “actively monitor and evaluate whether the environmental features designed for the activity resulting from the 22 CFR 216 process are being implemented effectively and whether there are new or unforeseen consequences arising during implementation that were not identified and reviewed in accordance with 22 CFR 216.” The SO team shall specify: **who** will monitor, **how** they will monitor, and **how** they will determine if there are “new or unforeseen circumstances.”

If additional activities not described in this document are added to this program, an amended environmental examination must be prepared and approved before any funds can be obligated.

APPROVAL OF ENVIRONMENTAL ACTION RECOMMENDED: (Type Name under Signature Line)

CLEARANCE:

Mission Director: _____ Date: _____
David Eckerson

CLEARANCE:

Deputy Mission Director: _____ Date: _____
Deborah Grieser

CONCURRENCE:

Bureau Environnemental Office _____ Date: _____
Brian Hirsch Approved:
Disapproved: _____

Filename: _____ (USAID/W BEO)

CLEARANCE:

General Counsel (Africa Bureau): _____ Date: _____

ADDITIONAL CLEARANCES: (Add as appropriate; type name under signature line)

Mission Environmental Officer: _____ Date: _____
Sudi Bamulesewa

SO 8 Team Leader: _____ Date _____
Elise Ayers

Sr. Regional Environmental
Officer: _____/cleared by e-mail/_____ Date: 18 September 2008 _____
Walter I. Knausenberger

INITIAL ENVIRONMENTAL EXAMINATION

PROGRAM/ACTIVITY DATA:

Program/Activity Number: 617-008, SO8

Country/Region: Uganda/East Africa

Program/Activity Title: Investing in People

1.0 BACKGROUND AND PROJECT DESCRIPTION

1.1 Purpose and Scope of Initial Environmental Examination (IEE)

This IEE covers all DA funded, planned activities under SO 8, “Investing in People” The purpose of this IEE is to provide a basis for Regulation 22 CFR 216 Threshold Determinations for all activities to be implemented under the SO 8 program so as to ensure that they are environmentally-sound. This also provides for future amendments of the IEE as new activities are included or existing ones are extended or cancelled.

As required by ADS 204.5.4, the SO 8 Team and activity Implementing Partners are responsible for incorporating recommended adverse environmental impact mitigation and monitoring measures in the activity design and implementation process, for all activities and to ensure that they remain as Categorical Exclusions or within the bounds of Negative Determination with Conditions.

USAID/Uganda's development goal is to have a stronger democracy, free of conflict, with sustainable rural economic growth, and a healthier and more educated population. There is a close link between vulnerability to poverty and absence/poor access to education and health services. The SO aims to promote the ability to reduce vulnerability to poverty through improved health and education status. This is because healthy educated people are better able to reap the benefits and also contribute to economic growth and political participation, and are also less likely to enter into conflict. Investments in health and education would help create opportunities for equity and stability that are necessary conditions for poverty reduction.

By focusing on health and education (human capacity), the SO will address and contribute to the reduction of major causes and effects of poverty, through six program elements PE's: HIV/AIDS, Tuberculosis, Malaria, Child and Maternal Health, Family Planning/Reproductive Health, and Basic Education.

1.2 Background and Description of Planned Activities

USAID/Uganda's health and education program is a diverse portfolio, with focus on HIV/AIDS, Tuberculosis, Malaria, Child and Maternal Health, Family Planning/Reproductive Health, and Basic Education.

Uganda is one of 15 focus countries for the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), which has meant a major expansion of HIV/AIDS programs, with special attention to care and treatment. Also Uganda is also one of the 15 focus countries for the U.S. President's Malaria Initiative (PMI) in Africa, which seeks to reduce malaria mortality by 50% in these sub-Saharan countries by 2010. As part of a new malaria control program under the PMI, USAID/Uganda is implementing the Indoor Residual Spraying (IRS) in some parts of Uganda and proposes to expand to cover a bigger part of the country. In addition, the SO is implementing the marketing, distribution and promotion of ITN's in Uganda.

1.3 Program Elements for Uganda Strategic Objective (SO) 8: “Investing in People”

3.1.1. HIV/AIDS

USAID/Uganda supports activities in all of the PEPFAR program areas and these include.

Prevention of Mother-to-Child Transmission (PMTCT) activities include counseling and HIV testing for pregnant women, Anti-Retroviral (ARV) prophylaxis for HIV-infected pregnant women and their newborns, counseling and support for maternal nutrition and safe infant feeding practices, and family planning counseling or referral. PMTCT services also include counseling on safe delivery options; referral to treatment (including Anti-Retroviral Therapy (ART)); referral to care services, both clinic- and home-based, for HIV-infected family members (the mother, the husband/partner, other children), including for opportunistic infections; and mobilizing mutual support and community support for PMTCT clients to improve health outcomes and reduce stigma and discrimination. Implementation of these activities may include provision of technical assistance, training, supervision, provision of commodities, and rehabilitation of facilities.

Abstinence/Be Faithful activities include community mobilization, training, information, education, and communication, community outreach activities, and mass media campaigns to promote abstinence, fidelity, delay of sexual activity, partner reduction messages, and related social and community norms.

Other Prevention Activities includes purchase and promotion of condoms to high-risk groups, through social marketing and through free distribution; management of other sexually transmitted infections (if not in a palliative care setting); and behavior change information, education, and communication through community outreach and mass media programs that focus on individual risk perception, ability to negotiate condom use, etc.

Palliative Care is the broadest category of HIV/AIDS interventions, and includes clinic-based and home- or community-based activities for HIV-infected adults and children and their families such as: symptom diagnosis and relief; psychological and spiritual support; clinical monitoring, related laboratory services, and management of opportunistic infections and other HIV/AIDS-related complications (including provision of pharmaceuticals and other supplies); and culturally appropriate end-of-life care. Activities in this category also may include social and material support such as counseling in nutrition, legal aid, and housing. Also covered is community mobilization and outreach to promote uptake of the services and to reduce stigma and discrimination. PEPFAR funding is also used to provide HIV-infected clients with insecticide-treated bed nets and simple household water purification kits to reduce water-borne infections. All palliative care activities include training and support of family caregivers, volunteers, and clinical and implementing partner staff. Clinical and home-based care givers are trained and supervised in line with MOH standards, which include physical care for chronically ill AIDS patients. Some rehabilitation of MOH clinical facilities may be supported in order to deliver these services. Funding in this area also is programmed to strengthen the capacity of local nongovernmental, including faith-based and community-based, organizations to provide community- and home-based services to HIV-infected clients.

TB-HIV activities include examinations, clinical monitoring, and related laboratory services; treatment and prevention of TB in basic health care settings (including provision of pharmaceuticals and other supplies); screening and referral for HIV testing; and clinical care provided in TB service settings.

Orphans and Vulnerable Children (OVC). These are activities that are targeting mainly orphans due to HIV and to war in the North. In addition, many more children are vulnerable because they are living in AIDS-affected families. Activities for this target group include provision of food and nutrition; schooling; health services; shelter and security; civil rights and registration; and psychosocial support. In addition to providing these services, OVC activities include technical assistance, training of caregivers and implementing partner staff, community mobilization, capacity strengthening of local nongovernmental organizations, advocacy, and monitoring and evaluation, including studies. PEPFAR funds also provide OVC households with insecticide-treated bed nets (to prevent malaria).

HIV/AIDS Counseling and Testing activities include counseling and rapid HIV testing, as well as referral to other HIV/AIDS services. Activities also include training, monitoring and evaluation, and could include rehabilitation of facilities.

Antiretroviral drugs (ARV) activities in this category include purchase of ARV medicines in line with Office of the US Global AIDS Coordinator (OGAC) guidance and Uganda Ministry of Health (MOH) standards and purchase of related supplies for administering ARV medicines; as well as supporting and strengthening the capacity of the MOH and other key organizations to manage the supply chain to ensure reliable ARV supplies for treatment scale up. Technical assistance and training, logistics support, rehabilitation of facilities, and procurement of medicines could be undertaken as part of this activity.

Antiretroviral Therapy activities include support to rapidly expand ART as part of comprehensive integrated HIV/AIDS detection, prevention, and care, treatment, and support services. In addition, HIV/AIDS activities place special emphasis on mobilizing and strengthening local community-based organizations to provide psychosocial and peer support and follow-up that can increase uptake of the services and help ensure treatment adherence and successful outcomes for the patient. ART activities can include rehabilitation of facilities, technical assistance and supervision, monitoring and evaluation, and provision of equipment and supplies,

Laboratory Services are provided under HIV/AIDS as related to treatment activities, with the purpose of strengthening the national laboratory network to improve patient monitoring.

Strategic Information activities aim to strengthen HIV/AIDS surveillance, health management information systems, and monitoring and evaluation. Activities involve technical assistance, training, procurement of equipment and supplies, and implementation and publication/dissemination of surveys and studies. Examples of activities include development of improved tools and models for collecting, analyzing, and disseminating HIV/AIDS behavioral and biological surveillance and monitoring information; facility surveys; strengthening country monitoring and evaluation or surveillance systems; developing and disseminating best practices to improve program efficiency and effectiveness in any PEPFAR programmatic area; evaluating national prevention, care, and treatment efforts; and analysis and quality assurance of demographic and health data related to HIV/AIDS.

Health Systems includes strengthening national policies and systems that are essential to HIV/AIDS service expansion and entails training, capacity building of local organizations to improve effectiveness and sustainability, technical assistance in a range of areas, and support in development of policies and advocacy. Activities address human resource constraints to scaling up services, reducing stigma and discrimination, addressing gender issues, and other cross-cutting activities in management and implementation.

3.1.2 Tuberculosis

The SO8 team provides support to the Government of Uganda through training and supervision, and through distribution of TB drugs. The activity also supports the TB prevention and care programs.

3.1.3 Malaria

USAID continues to use a comprehensive approach for implementing malaria prevention diagnosis and treatment programs. Prevention activities will include marketing and distribution of long-lasting insecticide treated nets (LLITNs) (only LLITNs will be procured), intermittent preventive treatment for malaria in pregnancy (IPTp), and indoor residual spraying (IRS) using DDT and Pyrethroids. Diagnosis activities include the improving and maintaining good microscopic or rapid diagnostic tests (RDT). Treatment activities will include assistance in the transition to the new artemisinin combination drug therapy (ACT) and case management. Both prevention and treatment are supported by intensive information, education, and communication (IEC) activities, including household and community mobilization, to encourage preventive and appropriate health-seeking behavior and to promote early and effective treatment of malaria and treatment adherence.

3.1.6 Child and maternal Health

The activity aims to provide technical assistance and capacity development of the Child and maternal health activities. These include support to the public sector to develop human resources in health, support to public and private sector to improve pharmaceutical logistics and supply chain management, improved public and private sector capacity to regulate and fortify local foods with micronutrients, improved service delivery at health care facilities and at the community level to address maternal and childhood illnesses, fistula, and nutrition, and health communication and behavior change messages.

3.1.7 Family Planning and Reproductive Health

The family planning and Reproductive activities focus on providing technical assistance, capacity development and procurement of contraceptives. This includes procurement of contraceptives into the national distribution system, fees to utilize this system, and TA to develop the capacity of the public pharmaceutical supply chain for contraceptives. Service delivery includes capacity development of health care providers in the public and private sector to provide information, counsel and contraception services to clients at the community and service facility levels. Also included is improved capacity of health care providers to identify and treat fistula. Funds are also utilized for advocacy and education on family planning issues to parliamentarians, decision-makers, religious leaders, and community members.

3.2.1 Basic Education.

The activity aims at providing technical support to Ministry of Education and Sports (MoES) to enhance capacity for education at the primary level. This includes professional development for enhancing the quality of primary teachers and Primary Teachers' College (PTC) tutors, expanding the implementation the Presidential Initiative on AIDS Strategy and Communication to Youth (PIASCY), increasing parental and community participation in education, and supporting the formulation and implementation of education policies with an aim of enhancing the capacity of the MoES/Education Planning Department (EPD).

USAID/Uganda also supports bright but needy girls and boys attain secondary education and this includes: paying tuition and other school requirements and basic needs for orphans and vulnerable children in about 100 schools, imparting knowledge and lifeskills among peer educators and about HIV/AIDS prevention and protection and various life skills in at least 10 schools with scholarship beneficiaries, and developing school and community level action plans to protect beneficiaries from HIV/AIDS.

USAID is planning a Public-Private Partnership with Microsoft to support the education sector's Management Information System (EMIS). This a data collection, storage, retrieval, processing and dissemination system specifically designed for use by educational decision makers and administrators to

plan and administer education systems more efficiently and effectively. There will be a component of Geographic Information System (GIS) that will provide the technology and methods to analyze *spatial data* (i.e., information about the physical location of schools).

USAID intends to support a study/survey that will provide actionable programming data and information to USAID, other donors, and the Government of Uganda on supporting the schooling of orphans and vulnerable children (OVC) in Uganda.

SECTION 2: COUNTRY AND ENVIRONMENTAL INFORMATION

2.1 General Overview

Uganda's national economy is a sustainable development success story, with a Gross Domestic Product (GDP) growing at an average annual rate of 6.7% since 1992/93. The country is also a poverty alleviation success story, with the proportion of people living in absolute poverty declining from 56% in 1992/93 to 32% in 2005. In 2000/2001, however, annual GDP growth has dropped to 5.1%, private investment is low at 13% of GDP or less, annual government revenues are stagnant at the level of under 12% of GDP, and the access to high quality education and health services are decreasing.

The cash economy is dependent on the export of cash crops, livestock and fisheries, forestry, and tourism industry. It has taken the economy 15 years to recover from decades of economic chaos and collapse. The agricultural production gains have been made primarily through expansion of the cultivated area, rather than through intensification of better production technologies, improved management and conservation of the land under cultivation

2.2 Population

Uganda is largely a rural society with a population of about 30 million people who are mainly involved in the cash and subsistence economy. The population growth rate is high at 3% per year. During the last three decades the population has tripled, and commercial and industrial activity has slowed down substantially. Over half the population in Uganda is under the age of 15 and it is highly vulnerable to a renewed wave of HIV/AIDS infection and spread. This erodes social service gains and also, adds 300,000 frequently frustrated job seekers to the economy every year. Continued political instability in the north and west, linked to regional conflicts, undermines both economic growth and poverty alleviation.

2.3 Environment and Natural Resources

2.3.1 Physical Environment

Although not a large country by African standards (241,000 km²), Uganda is among the richest countries with respect to its natural environment. The country has a wide variety of physical environmental features, ranging from tropical forests to grasslands, extensive surface drainage pattern (e.g., lakes, rivers, streams) and arid and semi-arid areas to snow-capped Ruwenzori Mountains range. Nearly all the water bodies, notably Lake Victoria, cover 20% of the national surface area. The country has seven of Africa's 18 biodiversity geographic regions, which is the highest concentration on the continent, and some 90 different vegetation communities.

Population increase has caused considerable adverse impacts on the environment, and the natural resource base. Forest and woodlands cover has declined rapidly in modern times, from an estimated 45% of land area in 1890 to around 21% at present. Population pressure has increased sharply and, population density per unit of land area is now more than four times higher than in 1950. Soil erosion is a serious problem in

the high potential agriculture and grazing areas. It is mainly caused by poorly regulated agricultural practices, overgrazing by livestock and game, and indiscriminate deforestation. This causes land degradation, due to loss of plant nutrients from agricultural fields and grazing areas, sediment transport and sedimentation of surface waters. The surface runoff also contributes to the transportation of solid and liquid waste to surface waters, causing water contamination due to pollution.

2.3.2 Biodiversity Resources

Uganda's is an exceptionally important area for biodiversity conservation. The natural resource base, especially its wide diversity of wildlife, is the country's greatest biological and economic asset for sustainable tourism industry development. The country ranks among the top five African countries with large mammal diversity and populations. Some 15 mammal species and sub-species are endemic to Uganda. Nine species of primates are known, including the mountain gorilla, the red colobus monkey and the chimpanzee. Uganda has Africa's third-highest number of mammal species, and the fourth-highest number of bird species, as well as over half of the world's remaining population mountain of gorillas.

Conservation of key biodiversity resource areas is a well-demonstrated priority of the Uganda Government. About 13% of the country's land area is protected under a comprehensive system of national Parks, Wildlife Reserves and Forest Reserves. The Uganda Wildlife Authority and the National Forestry Authority manage these areas.

2.4 Environmental Policies and Procedures

The Ugandan Environment Statute of 1995 provides general principles for environmental management in the country. This includes providing basic requirements for environmental planning at both the national and local (district) levels, a framework for environmental impact assessments (EIA) guidelines, requirements for adoption of environmental standards, environmental management measures for ecologically fragile sensitive areas, provision for environmental restoration orders, and other requirements for environmental management and protection.

The EIA guidelines and environmental standards are in the final stages of development. The development of both the statute and the various regulations concerning environmental reviews, mitigation and monitoring measures have benefited considerably from technical assistance provided by USAID under the Senior Regional Environmental Officer (SREO). As such, to date, much of the regulations and process in place closely resemble those of the United States.

2.5 Health and the Environment

Environmental factors are one of the major causes of disease in sub-Saharan Africa. Many environmental health problems are associated with poverty, such as lack of access to clean water, food, shelter, fuel, and air (EHP, 1999; WRI 1998). These environmental factors are a major underlying cause of many infectious diseases. Deficiencies in environmental sanitation – solid waste, wastewater, excreta disposal, drainage, and community hygiene – contribute to the continuing high rate of infant and child mortality from diarrheal diseases and also play a role in vector-borne diseases. Many studies indicate that lack of sanitation puts people at higher risk for diarrheal disease than lack of safe water. Nonetheless, sanitation has generally been neglected in favor of water supply by governments, external support agencies, and even unserved communities. Other environmental health hazards are associated with

development: increased use of chemicals; and burning of fuels. The World Resources 1998-99 Report (WRI, 1998) cites several critical environmental health issues relevant to sub-Saharan Africa:

- *Lack of adequate water and sanitation* accounts for an estimated 7% of worldwide death and disease;
- *Mosquito-borne diseases* are a major killer. Between 1 and 3 million die each year from malaria; millions more are affected by yellow and dengue fever;
- *Indoor air pollution*, from burning dirty fuels, help cause acute respiratory infections. World Bank estimates place the number of women and children exposed to severe indoor air pollution - mostly from cooking fires) as between 400 and 700 million;
- *Increasing use of toxic chemicals* in agricultural, manufacturing, and processing operations by both small- and large- scale operators place workers and locals at risk of exposure; and
- *Global climate change* threatens of alter short- and long-term health patterns due to changing climates.

USAID's Environmental Health Project (EHP, 1999), which addresses the role of environmental and behavioral risk factors in the world's health burden, has developed an environmental health framework for prevention and new approaches for the field, with emphasis upon reducing the burden of disease for children. Eight results areas have been highlighted: diarrhea prevention, malaria prevention, sanitation policies, and behavior change, and community involvement, services for urban poor, risk assessment and institutional strengthening.

Any health program should be cognizant of and responsive to the environmental components of health risks and trends as indicated below.

- There has been an increase in prevalence of malaria in traditionally malaria-prone areas such as in Eastern Uganda, but also a new trend towards increases in malaria in highland areas, especially after heavy rains, where it has rarely or never been seen before. The latter trend is particularly troubling because limited natural resistance exists in that area. The causes for this increase are not well understood, but likely are partly due to increased trends of agricultural conversion from woodland and forest.
- Though the country has realized a decline in HIV prevalence, there still exists the need to develop programs of HIV/AIDS and STI prevention and treatment services at the community level throughout the country. This brings with it healthcare waste management issues and related if relatively modest risk of disease transmission and environmental contamination.
- The under-five mortality rate for children in some ESA countries has recently swung upwards. This is probably related to a number of factors, and again it is not clear what links there are to environmental degradation or related environmental health parameters (e.g., deficiencies in water, sanitation, drainage, leading to diarrheal disease, malaria transmission).

3.0 EVALUATION OF PROJECT/PROGRAM ISSUES WITH RESPECT TO ENVIRONMENTAL IMPACT POTENTIAL

The evaluation of the environmental impact potential of the various activities for **Uganda Strategic Objective (SO) 8: Investing in People**, is done by Program Element, and involves the separation of the activities in terms of environmental impact potential. This document also draws heavily on the Environmental Guidelines for Small Scale Activities in Africa (EGSSAA), 2nd Edition, which is

USAID/Africa Bureau's principal source of sector-specific environmental guidance. It can be found on the web at <http://www.encapafrica.org/egssaa.htm>. The Small Scale Guidelines recommend Environmentally Sound Design (ESD) to select the means by which development objectives are achieved. ESD is prevention-based across the project lifecycle, such that the environmental harm associated with a desired development objective is kept to a practicable minimum by considering the environmental impacts associated with each alternative *alongside* technical, economic and social criteria.

USAID's mission is to create "sustainable development", and ESD is vital to this outcome. USAID is also required by 22 CFR 216 to apply its environmental procedures to all projects, programs or activities receiving USAID funds. The application of these procedures should be integral to project design and implementation. They are not an afterthought, and compliance with 22 CFR 216 should not be treated as simply an administrative requirement.

The activities of SO8 are numerous and complex. Many SO8 activities do not have direct adverse environmental impacts, as they entail information, education, communication, training, research, community mobilization, planning, management, and outreach activities. However, in the course of implementing these activities, partners should take advantage of opportunities to address environmental health issues (like hazardous and infectious waste management) with their health service delivery programs.

However, certain interventions supported by SO8 will directly or indirectly affect the environment, or have the potential to do so. Based on information available, the Mission Environmental Officer and the SO team have determined that the following activities could have an effect on the environment. The activities therefore fall under the Threshold Determination of Negative Determination with Conditions under Regulation 216.

1. Procurement, storage, management and disposal of public health commodities, including pharmaceutical drugs;
2. Generation, storage and disposal of hazardous or highly hazardous medical waste, e.g. blood testing in VCT centers, STI/HIV testing, blood for malaria and anemia, and laboratory-related activities;
3. Small-Scale construction/rehabilitation of health facilities and education centers;
4. Provision of Equipment and supplies to Health and Education facilities.
- 5) Use of pesticides (*i.e.*, specific long-lasting insecticide treated bed nets)

Potential impacts of these activities are discussed in detail below.

Procurement, Storage, Management and Disposal of Public Health Commodities

This activity includes procurement of pharmaceutical drugs and vaccines, personal protective gear for application of pesticides or to prevent communicable disease, family planning products including condoms and intrauterine contraceptive devices, medical supplies and basic medical equipment, including insecticide treated bed nets. For this latter commodity, the issue is not the insecticide (pesticides are addressed below), but rather their inappropriate use as fishing gear. The very small mesh size makes these nets quite non-selective in the size of fish that could be captured. Conceivably, their use could be significant detriments to the recovery and sustainable management of fisheries.

Pharmaceutical drugs are chemicals used for diagnosis, treatment (cure/mitigation), alteration, or prevention of disease, health condition, or structure/function of the human body. Pharmaceuticals including vaccines have specific storage time and temperature requirements, and may expire or lose efficacy before they are used, particularly in remote areas where demand is low and/or infrequent. Pharmaceutical waste may also accumulate due to inadequacies in stock management and distribution, and the lack of a routine system of disposal.

The effects of pharmaceuticals in the environment are different from conventional pollutants. Drugs are designed to interact with bodily functions at low concentrations to elicit specific biological effects in humans, but they may also cause biological responses in other organisms. There are many drug classes of concern, including antibiotics, antimicrobials, antidepressants, and estrogenic steroids. Their main pathway to the environment is through household use and excretion, and through the disposal of unused or expired products.

Effects on aquatic life are a major concern in disposal of pharmaceuticals. A wide range of pharmaceuticals have been discovered in fresh and marine waters globally, and even in small quantities some of these compounds have the potential to harm to aquatic life. Exposure risks for aquatic organisms are much larger than those for humans because aquatic organisms have continual (and multi-generational) exposures, relative concentrations are higher and there are possible low-dose effects.

Traditional environmental toxicology focuses on acute effects of concentrated exposures rather than chronic effects of low level exposures. Measured toxicities of some tested pharmaceuticals have shown that acute effects of single substances in the aquatic environment are very unlikely. However, effects of pharmaceuticals may be subtle because they occur in the environment in low concentrations. Some tests with combinations of various pharmaceuticals have revealed stronger effects than expected from the effects measured singly. More research is needed on combination effects and chronic studies are needed to assess the environmental risk of drug residues. Certainly pollution prevention (e.g., source elimination or minimization) is preferable to remediation or restoration to minimize both public cost and human/ecological exposure.

Antibiotics, cancer or autoimmune drugs, and undiluted disinfectants should not be disposed of into the sewage system as they may kill bacteria necessary for the treatment of sewage. Additional health risks related to disposal include burning pharmaceuticals and plastic medical supplies (including new or used condoms) at low temperatures or in open containers. This results in release of toxic pollutants to the air. Further, inefficient and insecure sorting and disposal may allow drugs beyond their expiry date to be diverted for resale to the general public. In some countries scavenging in unprotected, insecure landfills is a hazard.

The other commodities covered under this activity are not associated with major health risks, including packaging material, and should be disposed of as solid waste.

References for this section include:

<http://www.ameliaww.com/fpin/ProductsEnv.htm>

http://www.who.int/water_sanitation_health/medicalwaste/pharmaceuticals/en/

http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6T6D-4HJ47W6-1&_user=10&_coverDate=05%2F31%2F2006&_rdoc=1&_fmt=&_orig=search&_sort=d&_view=c&_acc=t=C000050221&_version=1&_urlVersion=0&_userid=10&md5=784d197352a5109a74d5f64faae56c36

Pharmaceuticals In The Environment: Sources, Fate, Effects And Risks (2nd ed). 2004. Klaus Kümmerer, ed. Online at

<http://books.google.com/books?id=A3GQsHZCmDsC&pg=PA218&lpg=PA218&dq=ecotoxicity+of+antibiotics&source=web&ots=Iqugo6LSRu&sig=4gB287Lo28veyihR8EILGe0F4ac#PPP1,M1>

Generation, Storage and Disposal of Hazardous and Highly Hazardous Medical Waste

Small-Scale healthcare activities, such as rural health posts, immunization posts, reproductive health posts, mobile and emergency healthcare programs, and urban clinics and small hospitals, provide important and often critical healthcare services to individuals and communities that would otherwise have little or no access to such services. They are the front line of defense against epidemics such as AIDS,

malaria, and cholera and a key component of any comprehensive development program. The medical and health services they provide improve family planning, nurture child and adult health, prevent disease, cure debilitating illnesses, and alleviate the suffering of the dying.

However, improper handling, storage and disposal of the waste generated in these facilities can spread disease through several mechanisms. Transmission of disease through infectious waste is the greatest and most immediate threat from healthcare waste. If waste is not treated in a way that destroys the pathogenic organisms, dangerous quantities of microscopic disease-causing agents—viruses, bacteria, parasites or fungi—will be present in the waste. These agents can enter the body through punctures and other breaks in the skin, mucous membranes in the mouth or by being inhaled, swallowed, or transmitted by a vector.

People who come in direct contact with the waste are at greatest risk. Examples include healthcare workers, cleaning staff, patients, visitors, waste collectors, disposal site staff, waste pickers, drug addicts and those who knowingly or unknowingly use “recycled” contaminated syringes and needles.

Healthcare wastes generally fall into three categories in terms of public health risk and recommended methods of disposal:

- **General** healthcare waste, similar or identical to domestic waste, including materials such as packaging or unwanted paper. This waste is generally harmless and needs no special handling; 75–90% of waste generated by healthcare facilities falls into this category, and it can be burned or taken to the landfill without any additional treatment.
- **Hazardous** healthcare wastes including infectious waste (except sharps and waste from patients with highly infectious diseases), small quantities of chemicals and pharmaceuticals, and non-recyclable pressurized containers. All blood and body fluids are potentially infectious. Used condoms can also contain infectious body fluids, and fall into this category. They should be removed carefully, wrapped so that there is no risk of exposure by waste handlers, and disposed of in a trash receptacle. They should not be flushed down the toilet into either a septic or municipal system, because the rubber, vinyl or natural products can clog the piping and interfere with the sewage treatment.
- **Highly hazardous** healthcare wastes, which should be given special attention, includes sharps (especially hypodermic needles), highly infectious non-sharp waste, highly infectious physiological fluids, pathological and anatomical waste, stools from cholera patients, and bodily fluids of patients with highly infectious diseases. They also include large quantities of expired or unwanted pharmaceuticals and hazardous chemicals, as well as all radioactive or genotoxic wastes.

In any area that produces hazardous waste - hospital wards, treatment rooms, operating theatres, laboratories, etc., three bins plus a separate sharps container will be needed to separate these types of waste. However, if hazardous and highly hazardous waste will be disposed of in the same manner, they should not be collected separately. For hazardous waste and highly hazardous waste the use of double packaging, *e.g.* a plastic bag inside a holder or container is recommended for ease of cleaning. To make separate collection possible, hospital personnel at all levels, especially nurses, support staff, and cleaners, should be trained to sort the waste they produce.

Although sharps pose an inherent physical hazard of cuts and punctures, the much greater threat comes from sharps that are also infectious waste. Healthcare workers, waste handlers, waste-pickers, drug addicts and others who handle sharps have become infected with HIV/AIDS and hepatitis B and C viruses through pricks or reuse of syringes/needles.

Contamination of water supply from untreated healthcare waste can also have devastating effects. If infectious stools or bodily fluids are not treated prior to disposal, they can create and extend epidemics. The absence of proper treatment facilities is believed to have increased the severity and size of cholera epidemics in Africa during the last decade.

Treatment and disposal methods for hazardous and highly hazardous waste may be classified into three categories: thermal processes, chemical processes, and containment processes, or a combination of these methods.

References for this section include:

http://www.who.int/water_sanitation_health/medicalwaste/167to180.pdf

<http://www.bchealthguide.org/healthfiles/hfile29.stm>

Small-Scale Construction/Rehabilitation of Health Facilities

As with water and sanitation construction activities, some potential environmental impacts are possible with these interventions, and will depend on the local circumstances, including:

- Damage to sensitive or valuable ecosystems from construction of infrastructure, associated temporary worker dwelling, or construction storage units for personnel or equipment
- Removal of vegetation and/or compaction of the soil and grading of the site, altering drainage patterns and water tables, changing access to water by animals, people and vegetation, or degrading water resources
- Sedimentation of surface waters through removal of natural land cover, excavation, extraction of construction materials and other construction-related activities that result in soil erosion
- Contamination of groundwater and surface water supplies through improper disposal of human and other biological wastes during the construction period
- Contamination of ground and surface water supplies through improper disposal or handling of toxic materials used in construction (e.g., solvents, paints, vehicle maintenance fluids (oil, coolant), and diesel fuel)
- Adverse social impacts due to displacement of local inhabitants, influx of outside workers, inequitable distribution of economic benefits of construction, etc.
- Spread of disease through migration of construction workers from other regions or construction of a new road, especially sexually transmitted diseases such as HIV/AIDS
- Damage to aesthetics of site/area
- Improper extraction of construction materials such as wood, stone, gravel, or clay that damages terrestrial ecosystems (e.g., wood may come from relatively intact or natural forests)
- Use of toxic materials during construction

Reference for this section is: Environmental Guidelines for Small-Scale Activities in Africa

<http://www.encapafrica.org/egssaa.htm>

Use of Pesticides

Use of any pesticide is of major concern because of the potential for both health and/or environmental effects. Pesticides can cause short-term adverse health effects, called acute effects, as well as chronic adverse effects that can occur months or years after exposure. Examples of acute health effects include stinging eyes, rashes, blisters, blindness, nausea, dizziness, diarrhea and death. Examples of known chronic effects are cancers, birth defects, reproductive harm, neurological and developmental toxicity, immunotoxicity, infertility and other reproductive problems; disruption of the endocrine system, and damage to the liver, kidneys, lungs and other organs. Chronic effects may not appear for weeks, months or even years after exposure, making it difficult to link health impacts to pesticides.

Some people are more vulnerable than others to pesticide impacts. For example, infants and young children are known to be more susceptible than adults to the toxic effects of pesticides. Exposure during certain early development periods can cause permanent damage. Children are more vulnerable because their organs, nervous systems and immune systems are still developing, and they have higher rates of cell division and lower body weight than adults. In addition to being more vulnerable to pesticide toxicity, children's behavior and physiology make them more likely to receive greater pesticide exposure than adults. Most pesticide exposure occurs through the skin, and children have more skin surface for their size than adults. Children have a higher respiratory rate and so inhale airborne pesticides at a faster rate than adults. Children also consume proportionately more food and water -- and pesticide residues -- than adults. With their increased contact with floors, lawns and playgrounds, children's behavior also increases their exposure to pesticides.

People with asthma may have very severe reactions to some pesticides, particularly pyrethrin/pyrethroid, organophosphate and carbamate pesticides. Farm workers and pesticide applicators are also more vulnerable because they receive greater exposures, sometimes due to inadequate protective equipment or training. In many cases, symptoms of pesticide poisoning mimic symptoms of colds or the flu. Since pesticide-related illnesses appear similar or identical to other illnesses, pesticide poisonings are often misdiagnosed and under-reported. Immediate symptoms may not be severe enough to prompt an individual to seek medical attention, or a doctor might not even think to ask about pesticide exposure.

The persistence of a pesticide in the environment is determined by a number of factors including (1) the amount introduced and how it is distributed; (2) its reactivity in the environmental media; and (3) the conditions of the media. These factors help determine the concentration of pesticide in the air, soil, water, plants, and animals. Pesticides applied to enclosed areas, such as greenhouse spaces, and public and private buildings, usually break down at a slower rate than those applied outdoors.

Over time, the pesticides may (1) break down, (2) be redistributed around the application site or (3) move off site. Off site movement includes movement to groundwater, surface water, or the atmosphere, and also includes residues that remain on crops or livestock when they are removed from the site.

All pesticides react in the environment to form new chemicals but the rate at which they react and the products formed during breakdown are important. In addition to chemical reactions, all pesticides are subject to breakdown in the presence of sunlight.

The environmental media determines how fast pesticides break down. In the atmosphere, most pesticides breakdown rapidly by reaction with oxygen or free radicals, catalyzed by sunlight, or by directly absorbing sunlight. Pesticides that persist can travel long distances in the atmosphere. In water, breakdown is usually by hydrolysis, often mediated by pH, and breakdown by microorganisms. The predominant pathway in soil is microbial degradation, but chemical degradation and plant metabolism are also important.

In distribution of long-lasting insecticide-treated bed nets, the environmental impact potential is expected to be exceedingly small. Risks presented by the use of pre-treated nets include the following: 1) potential adverse impacts on aquatic organisms if large numbers of nets (100+) are washed in a river, stream or pond at the same time; 2) the small potential for adverse health effects in net users. Regarding the latter, the only impact expected to periodically occur is skin irritation among some users when the net is new, an effect that subsides rapidly and causes no long-lasting harm. Both types of risks are very small, and were found in the Global Health Programmatic Environmental Assessment to be greatly outweighed by the malaria prevention benefits stemming from the use of insecticide-treated materials.

For more information on the pesticides used by USAID/Uganda and the Safer use Action Plan, refer to : USAID/Uganda SO8 Indoor Residual Spraying- Supplemental Environmental Assessment (SEA), File Names; P\GH env determination\Uganda Amendment to IEE February 2008; USAID/Uganda SO8 Indoor Residual Spraying- , http://www.encapafrika.org/documents/iee/36Uganda2_IRS_PERSUAP.pdf; and USAID/Uganda SO8, marketing, distribution and promotion of ITN's PERSUAP, http://www.encapafrika.org/documents/iee/docs/34Uganda1_SO8_ITN_PERSUAP.doc

References for this section include:

<http://www.pesticidereform.org/article.php?list=type&type=38>

<http://www.pesticidereform.org/article.php?list=type&type=37>

Scholastic and clinical s equipment and supplies.

Providing equipment and supplies may have some potential environmental impacts. Where USAID supports the furnishing of schools, irresponsible logging to produce sawn timber will degrade the forest cover. Also equipment that is not certified like refrigeration equipment could be a source of hazardous products.

4.0 RECOMMENDED THRESHOLD DECISIONS & MITIGATION ACTIONS (INCLUDING MONITORING AND EVALUATION)

The table below summarizes the activities and recommended threshold determinations.

TABLE 1: Threshold Determinations for Illustrative activities, by Program Element

Activities	Threshold Determinations
PE 3.1.1: HIV/AIDS	
Provide Education, technical assistance and training on the control and management of HIV/AIDS.	Categorical Exclusion per 22 CFR 216.2 (c)2(i)(iii , (viii)and (xi)
Support the procurement, storage, management and disposal of Public Health Commodities e.g. ARV's, Condoms, Nutritional supplements	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Activities that will lead to the generation, storage and disposal of medical waste e.g. sharps, hazardous and highly hazardous medical waste.	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Small scale construction and rehabilitation of health facilities e.g. hospitals, clinics, labs, incinerators.	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Equipment and Supplies to Health and education facilities	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
P.E 3.1.2: T.B	
Provide Education, technical assistance and training on the control and management of TB	Categorical Exclusion per 22 CFR 216.2 (c)2(i)(iii , (viii)and (xi)
Support the procurement, storage, management and disposal of Public Health Commodities e.g. TB drugs	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Activities that will lead to the generation, storage and disposal of medical waste e.g. sharps, hazardous and highly hazardous medical waste.	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Small scale construction and rehabilitation of health facilities e.g. hospitals, clinics, labs, incinerators.	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)

Equipment and Supplies to Health and education facilities	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
P.E: 3.1.3: Malaria	
Provide Education, technical assistance and training on the control and management of TB	Categorical Exclusion per 22 CFR 216.2 (c)2(i)(iii , (viii)and (xi)
Support the procurement, storage, management and disposal of Public Health Commodities e.g. Anti malarial drugs, Insecticide Treated Nets (ITN's)	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Activities that will lead to the generation, storage and disposal of medical waste e.g. sharps and lancets for malaria testing, hazardous and highly hazardous medical waste, storage and disposal of Personal Protective Equipment, storage and disposal of pesticide packaging,	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Use of Pesticides in the ITN's and Indoor Residual Spraying	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
P.E: 3.1.6: Child and Maternal Health	
Provide Education, technical assistance and training on Child and Maternal Health activities.	Categorical Exclusion per 22 CFR 216.2 (c)2(i)(iii , (viii)and (xi)
Support the procurement, storage, management and disposal of Public Health Commodities	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Activities that will lead to the generation, storage and disposal of medical waste e.g. sharps, packing materials, hazardous and highly hazardous medical waste.	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
P.E: 3.1.7: Family Planning and Reproductive Health	
Provide Education, technical assistance and training on Family Planning and Reproductive Health	Categorical Exclusion per 22 CFR 216.2 (c)2(i)(iii , (viii)and (xi)
Support the procurement, storage, management and disposal of Public Health Commodities e.g. Condoms, contraceptives.	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Activities that will lead to the generation, storage and disposal of medical waste e.g. sharps, packing materials, hazardous and highly hazardous medical waste.	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
P.E 3.2.1:Basic Education	
Provide Education, technical assistance and training on the to improve on the Education sector	Categorical Exclusion per 22 CFR 216.2 (c)2(i)(iii , (viii)and (xi)
Support the procurement, storage, management and disposal of scholastic materials and equipment	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)
Small scale construction and rehabilitation of facilities e.g. schools, labs..	Negative Determination with conditions per 22CFR 216.3 (a)(2)(iii)

4.2 Mitigating and Monitoring Measures:

The threshold determinations indicated above have been made with the explicit commitment and understanding that all the conditions associated with the determinations constitute binding requirements. These conditions will be implemented in full for all activities implemented through USAID/Uganda's Investment in People Portfolio. If additional activities are added to the USAID/Uganda SO8 portfolio that

are not described in this document, an amendment to this IEE must be prepared that describes required mitigation activities. Beyond these standard mitigation requirements, additional measures may also be stipulated during the course of the environmental monitoring process for individual activities. These additional measures will be considered binding and are expected to be implemented in full.

A Negative Determination with Conditions is recommended pursuant to 22 CFR 216.3(a)(2)(iii) for some of the activities in PE 3.1.1, PE 3.1.2, PE 3.1.3, PE 3.1.6, PE 3.1.7, and PE 3.2.1 as follows:

(a) Procurement, storage, management and disposal of public health commodities

Consignees for all pharmaceutical drugs procured under this funding will be advised to store products according to the information provided on the manufacturer's Materials Safety Data Sheet (MSDS). These are supplied by the manufacturer, and can also be found on the internet by using active ingredients and MSDS as search terms. If disposal of these pharmaceutical drugs is required, due to expiration date or other reasons, the consignee will be advised that the preferred method of disposal is to return the product(s) to the manufacturer. If this is not possible (*e.g.*, if the expired or spoiled pharmaceuticals are considered hazardous and, if transferred across frontiers, become regulated and subject to the Basel Convention on the trans-frontier shipment of hazardous wastes) then follow the guidelines in the WHO document *Guidelines for Safe Disposal of Unwanted Pharmaceuticals During and After Emergencies*, found at www.who.int/water_sanitation_health/medicalwaste/unwantpharm.pdf. At the request of the Mission, subject to available funding, implementing partners will make reasonable attempts to facilitate the disposal of expired drugs under this activity to mitigate the impact of medical waste.

Another public health commodity of concern is bed nets. Here the issue is the inappropriate use of bed nets as fishing gear (their treatment with insecticide is addressed later). Generally, the geographic areas where bed nets are likely to be employed also contain water bodies such as lakes, rivers and streams; *i.e.*, areas where mosquitoes are likely to be found. Of course, such water bodies support fish stocks and other aquatic life that are key components of biodiversity and may be critical to rural livelihoods in such locales. Used bed nets could pose threats to the sustainability of fisheries because their small mesh size makes them rather 'non-selective' devices when used to harvest fish. They could negatively impact the abundance and distribution of juvenile fish, small fish species and the aquatic insects upon which fisheries and aquatic biodiversity depend.

Implementing partners will work with Government of Uganda on all aspects of essential pharmaceutical supply chain management, including estimating demand, distribution, and storage issues of time and temperature.

Commodities that, during use, become hazardous or highly hazardous waste are managed under the conditions in the following section "Activities that involve the collection, safe handling and disposal of hazardous and highly hazardous medical waste"

Packaging and disposal of other public health commodities will be treated using the guidelines provided in Environmental Guidelines for Small-Scale Activities in Africa (EGSSAA) 2nd Edition, Chapter 15: Solid Waste (http://www.encapafrika.org/EGSSAA/Word_English/solidwaste.doc).

(b) Generation, storage, handling and disposal of hazardous and highly hazardous medical waste

All USAID-supported activities entailing service delivery, including blood testing and laboratory support, USAID/Uganda's SO8 will work with its implementing partners to assure, to a reasonable extent possible, that the medical facilities and operations involved have adequate procedures and capacities in place to properly handle, label, treat, store, transport and properly dispose of blood, sharps and other medical waste. SO8 CTOs and activity managers will ensure implementing partners complete on an annual basis the ***“Healthcare Waste Management Minimum Program Checklist and Action Plan”*** (see **Annex 1 of this IEE**) for all facilities where implementing partners are directly providing services.

See EGSSAA Chapter 8, “Healthcare Waste: Generation, Handling, Treatment and Disposal” (http://www.encapafrika.org/EGSSAA/Word_English/medwaste.doc) for additional guidance on proper handling and disposal of medical waste. Other important references to consult in establishing a waste management program are “WHO’s Safe Management of Wastes from Healthcare Activities” (http://www.who.int/water_sanitation_health/medicalwaste/wastemanag/en/)

(c) Small-Scale construction or rehabilitation of health and education facilities

For the rehabilitation of existing facilities, and for construction of facilities in which the total surface area disturbed is less than 10,000 square feet, and no protected or other sensitive environmental areas could be affected, the condition is that these activities shall be conducted following principles for environmentally sound construction, as provided in the Small Scale Construction chapter of the USAID Environmental Guidelines for Small-Scale Activities in Africa (http://www.encapafrika.org/EGSSAA/Word_English/construction.doc)

For the construction of any facilities in which the total surface area disturbed exceeds 10,000 square feet (1,000 square meters), the program shall conduct a supplemental environmental review according to guidance in **Annex G** (www.encapafrika.org/EPTM/AnnexG_EPTM_Mar2005b.pdf) of the Africa Bureau **Environmental Procedures Training Manual (EPTM)** (<http://www.encapafrika.org/eptm.htm>). Construction will not begin until such a review is completed and approved by the Mission Environmental Officer.

An illustrative list of environmentally sound construction principles includes:

- The majority of materials used will be of local origin and will not contain any hazardous materials (e.g., asbestos or lead).
- Investigate and use less toxic alternative products.
- Excess construction material will be recycled wherever possible and disposal of unusable material will be done in an environmentally sound manner.
- Construction will not require the use of heavy equipment, or in the unlikely event it does, proper safeguards will be taken to prevent destruction of vegetation and soil erosion (e.g., runoff from the construction site which may be high in suspended solids or which may cause disruption to local drainage patterns).
- No lead-based paint will be used. When (lead-free) paint is used, it will be stored properly so as to avoid accidental spills or consumption by children; empty cans will be disposed of in a environmentally safe manner away from areas where contamination of water sources might occur; and the empty cans will be broken or punctured so that they cannot be reused as drinking or food containers.

If the facility construction or rehabilitation includes water supply and/or sanitation, the conditions in the “Small Scale Water and Sanitation” section also applies to this project.

If construction or rehabilitation requires use of fungicides or pesticides for termite control or any other reason, see also “Use of Pesticides” section below.

(d) Use of pesticides

USAID uses the USEPA’s definition of pesticides, which includes “*any substance intended for: preventing, destroying, repelling, or mitigating any pest. This includes herbicides, fungicides, plant regulators and plant desiccants*”

Use of Long-lasting Insecticide Treated Bed nets (LLITN)

The Africa Bureau’s *Programmatic Environmental Assessment for Insecticide-treated Materials (PEA ITM) in USAID Activities in Sub-Saharan Africa*, (http://www.afr-sd.org/documents/iee/docs/32AFR2_ITM_PEA.doc) describes the risks associated with the use of ITMs, including bed nets and curtains. Health and environmental risks from the use of ITMs include potential exposure of humans and the environment during production, distribution, storage, use, and disposal of pesticides, and a certain amount of exposure of persons using ITMs to pesticide vapors released from the materials. Use of bed nets for other purposes like fishing has also been reported.

As described in the PEA ITM, The World Health Organization-recommended brands of LLITNs rather than nets requiring re-treatment are the most effective risk mitigation measure available. This IEE cross references the SO8 LLITN IEE, http://www.encapafrika.org/documents/iee/docs/34Uganda1_SO8_ITN_PERSUAP.doc So long as SO8 restricts its product choice to the LLITNs described in the above IEE; further mitigation measures are not needed.

Additional resources on effective and safe use of insecticides in malaria programs can be found on WHO’s Roll Back Malaria site (See <http://mosquito.who.int>, multiple prevention, insecticide-treated materials), and EGSSA Chapter 13 on safer pesticide use http://www.encapafrika.org/EGSSAA/Word_English/saferpesticides.doc. An excellent resource for all aspects of ITM program management, including avoiding environmental or health problems with this technology, is a manual prepared for the Malaria Consortium, titled, “Insecticide Treated Net Projects: A Handbook for Managers” (http://www.who.int/malaria/cmc_upload/0/000/016/211/ITNinterventions_en.pdf).

Except for LLITNs, as outlined above, this examination does not cover pesticides, including their procurement, use, transport, storage or disposal. Support for any other pesticide-related activity considered under SO8, for example indoor residual spraying will refer to the existing PERSUAP’s, File name: P\GH env determination\Uganda Amendment to IEE February 2008 and the USAID/Uganda SO8 Indoor Residual Spraying-, http://www.encapafrika.org/documents/iee/36Uganda2_IRS_PERSUAP.pdf.

(e) Scholastic and medical equipment and supplies.

All USAID-supported activities entailing purchase of medical and scholastic equipment and supplies delivery, including blood testing and laboratory equipment, furniture etc, USAID/Uganda’s SO8 will work with its implementing partners to assure, to a reasonable extent possible, that the equipment and supplies and operations involved have adequate procedures and capacities in place to properly handle, transport and install. The SO 8 team and the implementing partners should ensure that the Source of equipment and supplies conforms to the U.S or National Standards.

4.3 Environmental Screening and Review

This IEE continues to promote the use of Environmental Screening and Review procedures for all the grantees' and contractors' activities and activities. These activities will be examined on an individual basis in order to comply with the determinations of this IEE in accordance with Reg 216, Section 216.3(a) (2). These procedures are intended to result in environmental accountability and soundness, by requiring that the MEO puts in place specific mechanisms to promote environmental capacity and other environmental capacity for implementing partners. To ensure that interventions are designed in a sound and sustainable manner each project leader will work with the appropriate sub recipients to achieve compliance with these procedures.

The procedures are based upon utilization of an Environmental Review Report, presented in Attachment 1. This form is consistent with the "Environmental Screening Form for NGO/PVO Activities and Grant Proposals" contained in the Africa Bureau *Environmental Guidelines for Small-Scale Activities in Africa*; it can be tailored to suit the needs of USAID-supported activities, based on consultations by the USAID/EA Regional Environmental Advisor (REO) and/or the Bureau Environmental Officer (BEO). The Mission will facilitate the refinement of this form with the partners and the USAID/EA REO/REA to meet project needs and to incorporate, where appropriate, information that will serve to identify and satisfy needs for environmental assessment in accordance with Uganda's environmental impact assessment policy and legislation.

All new activities designed by the mission and those from sub-grantees will be individually screened using the Screening Form, which utilizes a four-tier categorization process consistent with Africa Bureau's *Environmental Guidelines*, as defined below:

Very low risk (Category 1): Activities that would normally qualify for a categorical exclusion under Reg. 216 (e.g., community awareness initiatives, training at any level, provision of technical assistance, controlled experimentation exclusively for the purpose of research and field evaluation which is confined to small areas and carefully monitored, etc.). Certain, specifically defined, small-scale activities entailing rehabilitation of water points and construction or rehabilitation of facilities have also been placed in this category.

Low risk (Category 2): Activities that would normally qualify for a negative determination under Reg. 216, based on the fact that the sub-grantee used an environmentally-sound approach to the activity design and incorporated appropriate mitigation and monitoring procedures. For example, the design followed, and the manager has access to and will follow, a series of guidelines for the design of small-scale environmentally-sound activities in forestry, natural resource management, infrastructure, etc.

High risk (Category 3): Activities that have a clear potential for undesirable environmental impacts and typically under Reg 216 require an Environmental Assessment, such as those involving land development, planned resettlement, penetration road building, substantial piped water supply and sewage construction, large-scale irrigation projects, and projects involving the procurement and/or use of pesticides, or of large-scale or area-wide application of pesticides. All activities listed in Reg. 216 (Sect. 216.2(d) (1)) are automatically included, unless they are small-scale and qualify for a negative determination in accordance with the criteria listed under Category 2.

Very high risk (Category 4): This category groups activities that either USAID cannot fund or for which specific findings must be made in an Environmental Assessment prior to funding. Interventions that are likely to jeopardize a critical habitat for threatened or endangered species or

degrade a protected area must be placed in this category. Category 4 lists activities that trigger provisions of Sections 118 or 119 of the Foreign Assistance Act, which generally relate to degradation of national parks or protected areas, introduction of exotic species, or effects on tropical or undegraded forest lands.

The implementing agents responsible for the new activities including sub-grants will be responsible for ensuring that they employ the screening form (ERR) [Attachment 1], as refined (in consultation with the USAID/EA, REO or REA)] and prepare the Environmental Review Reports if/as necessary as a result of the categorization process. Preferably, the direct sub-grantee will prepare the Screening Form and the Environmental Review Report. Proposals seeking support must also comply with any approval criteria and procedures set out in general, which will include the requirement for environmental screening and review. The implementing agents will evaluate the Screening Form and the Environmental Review Reports as part of the overall evaluation and decision-making for grants.

An Environmental Review Report shall be prepared by the implementing partner and/or sub-grantee for all the Category 3 and 4 activities. The Mission Director, on behalf of USAID/Uganda, shall be responsible for clearances on the category determination and Environmental Review Reports.

4.4 Promotion of Environmental Management and Capacity Building

The procedures described above and incorporated within the Screening Form are intended to ensure environmental accountability and soundness, on the assumption that the Mission has the following additional elements in effect to build environmental capacity within implementing partners.

- The grantees and other appropriate implementing partners will help design, conduct, participate in, and apply environmental assessment and management training, in conjunction with USAID to assist sub grantees in properly fulfilling the screening and review requirements;
- Implementing partners will introduce individual Environmental Management Plans;
- A monitoring and evaluation process to follow-up on Environmental Review Reports will be put in place and used by the sub-grantees and implementing partners, in collaboration with project management at USAID as appropriate.

4.5 Environmental Responsibilities

USAID/Uganda assumes responsibility for environmental screening, review and decision-making for all USAID-assisted implementing partners and sub-grants as outlined below:

Monitoring and compliance measures for **Categorical Exclusions** and **Negative Determinations with Conditions** are necessary to ensure that no adverse impacts occur after the development program activities are implemented. The USAID/Uganda MEO will maintain a continuous monitoring and evaluation process for ensuring compliance with team responsibilities under ADS 204, for all ongoing and proposed program development activities. This will be achieved through review of project progress reports and periodic field visits to assess the environmental status of the various activities and to hold discussions with contractors and other implementing partners on compliance with environmental procedures and policies.

The USAID/Uganda MEO will ensure that the environmental screening process undertaken for all activities that have a direct effect on the environment is followed by the preparation of environmental review reports. This is to ensure that environmental screening and review processes are applied in conformity with the recommended environmental procedures.

The MEO will report on an annual basis through the Annual Report (or in more detail as the BEO or REO requires) on the status of environmental review and management, and the implementation of required mitigation and monitoring measures. This will include the review of implementing partners' progress and annual reports to help determine if environmental mitigation and monitoring procedures are in place.

The SO8 team will make it clear to its partners that through contracts, cooperative agreements or grants, as may be the case, the determinations and conditions specified in this IEE are mandatory and must be followed, and that implementing partners must put in place appropriate systems or management tools to ensure recommended mitigation actions are taken. This includes insertion of appropriate language into any sub-contracts, sub-agreements, or sub-grants that implementing partners may execute.

The sub-grantees will be encouraged to incorporate appropriate mitigation and monitoring procedures as listed below.

- Proposers will be encouraged to utilize the *Environmental Guidelines for Small-Scale Activities in Africa* and other -specific information to assist them in determining what potential impacts should be of concern for different types of development activities in various settings;
- The sub-grantee, with the assistance of appropriate implementing partners, must identify in each grant proposal all proposed environmental mitigation and monitoring requirements. The implementing agents will determine, based on the proposal, those impacts for which mitigation and monitoring are considered necessary;
- The mitigative measures and monitoring procedures stated in the report shall be considered a requirement;
- The sub-grantee, with assistance of the appropriate implementing partners shall be responsible for implementation of agreed-upon mitigation measures and monitoring of impacts;
- All sub-grantees' periodic reports to the implementing agents and from them to USAID/ Ethiopia shall contain a section on environmental impacts, success or failure of mitigative measures being implemented, results of environmental monitoring, and any major modifications/revisions to the project, mitigative measures or monitoring procedures.

In conclusion, to ensure that programs are designed in a sound and sustainable manner, SO 8 Team will work closely with its implementing partners to comply with the environmental guidelines.

USAID/Uganda assumes ultimate responsibility for environmental review and decision-making concerning USAID-funded activities. USAID/Uganda is responsible for assuring conformity with the procedures summarized above.

Annex 1.

INSTRUCTIONS FOR

AFRICA BUREAU ENVIRONMENTAL REVIEW AND REPORT (ERR) FORM

Note to individuals adapting this form for use on a particular program/activity:

- These instructions accompany the generic “Environmental Review & Report Form.”
- The Environmental Review Form and these instructions are for use in the review and approval of subproject proposals that are (1) carried out under an “umbrella” project AND (2) defined and reviewed *after* approval of the overall or “umbrella project.” Typical subprojects include microfinance activities or sub grants for small-scale development.
- For primarily NRM-oriented programs, consider and use the Supplemental Environmental Review Form for NRM sector activities, especially those considering NRM-based enterprises, CBNRM, ecotourism, etc..
- Underlined & blue-highlighted text MUST be modified to reflect project and mission name.
- Yellow highlighted text is only put emphasis on the points highlighted, and can also be dropped
- Both the form AND instructions should be reviewed and modified in general to reflect the needs of the specific umbrella project.
- Both form and instructions must be appended to the Initial Environmental Examination for the overall project.

DELETE THIS PAGE BEFORE MODIFYING/DISTRIBUTING THIS FORM

INSTRUCTIONS FOR

AFRICA BUREAU ENVIRONMENTAL REVIEW AND REPORT (ERR) FORM¹



USAID/MISSION OR BUREAU NAME INSTRUCTIONS FOR ENVIRONMENTAL REVIEW OF ACTIVITIES UNDER THE XXX PROJECT

Note: These instructions accompany the “Environmental Review & Report Form for XXX Project Activities.” Follow, but DO NOT SUBMIT, these instructions.

Who must submit the Environmental Review Form²?

All organizations applying to implement activities on the XXX Project must complete the “Environmental Review Form” form UNLESS the project or activity is carried out to address an emergency (e.g., international disaster assistance). *Emergencies are determined by the US Ambassador or USAID, not by the applicant.*³

Importance

The proposed activity cannot be approved and no “irreversible commitment of resources” can be made until the environmental documentation, including any mitigation measures, is approved by the Mission Environmental Officer (MEO). Approval by other authorities in USAID may also be required.

NOTE: USAID may request modifications, or reject the documentation.

If the activities are found to have significant adverse impacts, a full Environmental Assessment must be conducted.

Step 1. Provide requested “Applicant information” (Section A of the form)

Step 2. List all proposed activities

In Section B of the form, list all proposed activities. Include all phases: *planning, design, construction, operation & maintenance*. Include ancillary activities. (These are activities that are required to build or operate the primary activity. Examples include building or improving a road so that heavy vehicles can reach the project site, excavation of fill material or gravel for construction, provision of electricity, water, or sewage facilities, disposal of solid waste, etc.)

Step 3a. Screening: Identify low-risk and high-risk activities

For *each* activity you have listed in Section B of the form, refer to the list below to determine whether it is a listed low-risk or high-risk activity.

If an activity is specifically identified as “very low risk” or “high risk” in the list below, indicate this in the “screening result” column in Section B of the form.

¹ Last revised April 13, 2004, to include biosafety considerations and better reflect the Supplemental Environmental Review Form for NRM sector activities.

² See separate ERR Approval Form (2 p.) for submission. Also consider if the Supplemental NRM Screening Form applies.

³ See 22 CFR §216.2(b)(1). Most activities carried out under emergency circumstances are considered EXEMPT from USAID environmental procedures, except for the procurement or use of pesticides

Very low-risk activities (Activities with low potential for adverse biophysical or health impacts; including §216.2(c)(2))	High-risk activities (Activities with high potential for adverse biophysical or health impacts; including §216.2(d)(1))
Provision of education, technical assistance, or training. (Note that activities directly affecting the environment. do not qualify.) Community awareness initiatives. Controlled agricultural experimentation exclusively for the purpose of research and field evaluation confined to small areas (normally under 4 ha./10 acres). This must be carefully monitored and no protected or other sensitive environmental areas may be affected). Technical studies and analyses and other information generation activities not involving intrusive sampling of endangered species or critical habitats. Document or information transfers. Nutrition, health care or family planning, EXCEPT when (a) some included activities could directly affect the environment (construction, water supply systems, etc.) or (b) biohazardous (esp. HIV/AIDS) waste is handled or blood is tested. Rehabilitation of water points for domestic household use, shallow, hand-dug wells or small water storage devices. Water points must be located where no protected or other sensitive environmental areas could be affected. NOTE: USAID guidance on potable water requires water quality testing for arsenic, coliform, nitrates and nitrites. Construction or repair of facilities if total surface area to be disturbed is under 10,000 sq. ft. (approx. 1,000 sq. m.) (and when no protected or other sensitive environmental areas could be affected). Support for intermediate credit arrangements (when no significant biophysical environmental impact can reasonably be expected). Programs of maternal and child feeding conducted under Title II of Public Law 480. Food for development programs under Title III of P.L. 480, when no on-the-ground biophysical interventions are likely. Studies or programs intended to develop the	River basin or new lands development Planned resettlement of human populations Penetration road building, or rehabilitation of roads (primary, secondary, some tertiary) over 10 km length, and any roads which may pass through or near relatively undegraded forest lands or other sensitive ecological areas Substantial piped water supply and sewerage construction Major bore hole or water point construction Large-scale irrigation Water management structures such as dams and impoundments Drainage of wetlands or other permanently flooded areas Large-scale agricultural mechanization Agricultural land leveling Procurement or use of <u>restricted use</u> pesticides, or wide-area application in non-emergency conditions under non-supervised conditions. (Consult MEO.) Light industrial plant production or processing (e.g, sawmill operation, agro-industrial processing of forestry products, tanneries, cloth-dying operations). High-risk and typically not funded by USAID: Actions determined likely to significantly degrade protected areas, such as introduction of exotic plants or animals Actions determined likely to jeopardize threatened & endangered species or adversely modify their habitat (esp. wetlands, tropical forests) Conversion of forest lands to rearing of livestock Planned colonization of forest lands Procurement or use of timber harvesting equipment Commercial extraction of timber

Very low-risk activities (Activities with low potential for adverse biophysical or health impacts; including §216.2(c)(2))	High-risk activities (Activities with high potential for adverse biophysical or health impacts; including §216.2(d)(1))
capability of recipients to engage in development planning. (Does NOT include activities directly affecting the environment) Small-scale Natural Resource Management activities for which the answer to ALL SUPPLEMENTAL SCREENING QUESTIONS (attached) is “NO.”	Construction of dams or other water control structures that flood relatively undegraded forest lands Construction, upgrading or maintenance of roads that pass through relatively undegraded forest lands. (Includes temporary haul roads for logging or other extractive industries)

(This list of activities is taken from the text of Regulation 216 and other applicable laws, regulations and directives)

Step 3b: Identifying activities of unknown or moderate risk.

All activities NOT identified as “very low risk” or “very high risk” are considered to be of “unknown or moderate risk.” Common examples of moderate-risk activities are given in the table below.

Check “moderate or unknown risk” under screening results in Section B of the form for ALL such activities.

Common examples of moderate-risk activities	
CAUTION: If ANY of the activities listed in this table may adversely impact (1) protected areas, (2) other sensitive environmental areas, or (3) threatened and endangered species and their habitat, THEY ARE NOT MODERATE RISK. All such activities are HIGH RISK ACTIVITIES.	
Small-scale agriculture, NRM, sanitation, etc. <u>define what is meant by “small-scale” for each project</u>. Controlled and carefully monitored agricultural experimentation exclusively for the purpose of research and field evaluation of MORE than 4 ha. NOTE: No <i>biotechnology testing or release</i> of any kind are to take place within an assisted country until the host countries involved have drafted and <i>approved</i> a regulatory framework governing biotechnology and biosafety. All USAID-funded interventions which involve biotechnologies are informed by the ADS 211 series governing “Biosafety Procedures for Genetic Engineering Research”. In particular guidance details the required written approval procedures needed before transferring or releasing GE products to the field.	Construction or rehabilitation of small-scale water points or water storage devices for domestic or non-domestic use. (Covers activities NOT included under “Very low risk activities” above.) NOTE: USAID guidance on water quality requires testing for arsenic, nitrates, nitrites and coliform bacteria. Support for intermediate credit institutions when indirect environmental harm conceivably could result. Institutional support grants to NGOs/PVOs when the activities of the organizations are known and may reasonably have adverse environmental impact. Small-scale use of USEPA-registered, least-toxic general-use pesticides. Use must be limited to NGO-supervised use by farmers, demonstration, training and education, or emergency assistance. NOTE: Environmental review (see step 5) must be carried out consistent with

Common examples of moderate-risk activities	
CAUTION: If ANY of the activities listed in this table may adversely impact (1) protected areas, (2) other sensitive environmental areas, or (3) threatened and endangered species and their habitat, THEY ARE NOT MODERATE RISK. All such activities are HIGH RISK ACTIVITIES.	
Moderate scale construction or rehabilitation of facilities or structures (surface area to be disturbed exceeds 10,000 sq. ft (1000 sq meters) but funding level is \$200,000 or less). Construction or rehabilitation of rural roads meeting the following criteria: ▪ Length of road work is less than ~10 km ▪ No change in alignment or right of way ▪ Ecologically sensitive areas are at least 100 m away from the road and not affected by construction or changes in drainage. ▪ No protected areas or relatively undegraded forest are within 5 km of the road. Food for Development programs under Title II or III, involving small-scale infrastructure with the known potential to cause environmental harm (e.g., roads, bore holes). Quantity imports of commodities such as fertilizers. Technical studies and analyses or similar activities that could involve intrusive sampling, of endangered species or critical habitats. (Includes aerial sampling.)	USAID Pesticide Procedures as required in Reg. 16 [22 CFR 216.3(b)(1)]. Nutrition, health care or family planning, if (a) some included activities could directly affect the environment (e.g., construction, supply systems, etc.) or (b) biohazardous healthcare waste (esp. HIV/AIDS) is produced, syringes are used, or blood is tested.
Common examples of moderate-risk activities	
CAUTION: If ANY of the activities listed in this table may adversely impact (1) protected areas, (2) other sensitive environmental areas, or (3) threatened and endangered species and their habitat, THEY ARE NOT MODERATE RISK. All such activities are HIGH RISK ACTIVITIES.	
Small-scale agriculture, NRM, sanitation, etc. [define what is meant by “small-scale” for each project]. Controlled and carefully monitored agricultural experimentation exclusively for the purpose of research and field evaluation of MORE than 4 ha. NOTE: No <i>biotechnology testing or release</i> of any kind are to take place within an assisted country until the host countries involved have drafted and <i>approved</i> a regulatory framework governing biotechnology and biosafety.	Construction or rehabilitation of small-scale water points or water storage devices for domestic or non-domestic use. (Covers activities NOT included under “Very low risk activities” above.) NOTE: USAID guidance on water quality requires testing for arsenic, nitrates, nitrites and coliform bacteria. Support for intermediate credit institutions when indirect environmental harm conceivably could result. Institutional support grants to NGOs/PVOs when the activities of the organizations are

Common examples of moderate-risk activities

CAUTION: If ANY of the activities listed in this table may adversely impact (1) protected areas, (2) other sensitive environmental areas, or (3) threatened and endangered species and their habitat, THEY ARE NOT MODERATE RISK. All such activities are HIGH RISK ACTIVITIES.

All USAID-funded interventions which involve biotechnologies are to be informed by the ADS 211 series governing "Biosafety Procedures for Genetic Engineering Research". In particular, the guidance details the required written approval procedures needed before transferring or releasing GE products to the field.

Moderate scale construction or rehabilitation of facilities or structures (surface area to be disturbed exceeds 10,000 sq. ft (1000 sq meters) but funding level is \$200,000 or less).

Construction or rehabilitation of rural roads meeting the following criteria:

- Length of road work is less than ~10 km
- No change in alignment or right of way
- Ecologically sensitive areas are at least 100 m away from the road and not affected by construction or changes in drainage.
- No protected areas or relatively undegraded forest are within 5 km of the road.

Food for Development programs under Title II or III, involving small-scale infrastructure with the known potential to cause environmental harm (e.g., roads, bore holes).

Quantity imports of commodities such as fertilizers.

Technical studies and analyses or similar activities that could involve intrusive sampling, of endangered species or critical habitats. (Includes aerial sampling.)

known and may reasonably have adverse environmental impact.

Small-scale use of USEPA-registered, least-toxic general-use pesticides. Use must be limited to NGO-supervised use by farmers, demonstration, training and education, or emergency assistance.

NOTE: Environmental review (see step 5) must be carried out consistent with USAID Pesticide Procedures as required in Reg. 16 [22 CFR 216.3(b)(1)].

Nutrition, health care or family planning, if (a) some included activities could directly affect the environment (e.g., construction, supply systems, etc.) or (b) biohazardous healthcare waste (esp. HIV/AIDS) is produced, syringes are used, or blood is tested.

Step 4. Determine if you must write an Environmental Review Report

Examine the "screening results" as they are entered in Table 1 of the form.

- If ALL the activities are "very low risk," then no further review is necessary. In Section C of the form, check the box labeled "very low risk activities." Skip to Step 8 of these instructions.
- If ANY activities are "unknown or moderate risk," you MUST complete an ENVIRONMENTAL REVIEW REPORT addressing these activities. Proceed to Step 5.

- If ANY activities are “high risk,” note that USAID’s regulations usually require a full environmental assessment study (EA). Because these activities are assumed to have a high probability of causing significant, adverse environmental impacts, they are closely scrutinized. Any proposed high-risk activity should be discussed in advance with USAID.

In some cases, it is possible that effective mitigation and monitoring can reduce or eliminate likely impacts so that a full EA will not be required. If the applicant believes this to be the case, the Environmental Review Report must argue this case clearly and thoroughly. Proceed to Step 5.

Step 5. Write the Environmental Review Report, if required

The Environmental Review Report presents the environmental issues associated with the proposed activities. It also documents mitigation and monitoring commitments. Its purpose is to allow the applicant and USAID to evaluate the likely environmental impacts of the project.

For moderate risk activities, the Environmental Review Report is typically a SHORT 2–3 page document. The Report will typically be longer when (1) activities are of higher or unknown risk, and (2) when a number of impacts and mitigation measures are being identified and discussed.

The Environmental Review Report follows the outline below:

- A. **Summary of Proposal.** Summarize background, rationale and outputs/results expected. (reference to proposal, if appropriate).
- B. **Description of activities.** For all moderate and high-risk activities listed in Table 1 of the form, succinctly describe location, setting, surroundings (include a map, even a sketch map). Provide both quantitative and qualitative information about actions needed during all project phases and who will undertake them. (All of this information can be provided in a table). If various alternatives have been considered and rejected because the proposed activity is considered more environmentally sound, explain these.
- C. **Environmental Situation & Host Country environmental requirements.** Describe the environmental characteristics of the site(s) where the proposed activities will take place. Focus on site characteristics of concern—e.g., water supplies, animal habitat, steep slopes, etc. With regard to these critical characteristics, is the environmental situation at the site degrading, improving, or stable? In this section, also describe applicable host country environmental regulations, policies and practices.
- D. **Evaluation of Activities and Issues with Respect to Environmental Impact Potential.** Include impacts that could occur before construction starts, during construction and during operation, as well as any problems that might arise with abandoning, restoring or reusing the site at the end of the anticipated life of the facility or activity.

Explain direct, indirect, induced and cumulative effects on various components of the environment (e.g., air, water, geology, soils, vegetation, wildlife, aquatic resources, historic, archaeological or other cultural resources, people and their communities, land use, traffic, waste disposal, water supply, energy, etc.)

- E. **Environmental Mitigation Actions (including monitoring).** Provide a workplan and schedule identifying the following:

Mitigation measures. Identify the means taken to avoid, reduce or compensate for impacts. (For example, restoration of borrow or quarry areas, replanting of vegetation, compensation for any relocation of homes and residents.) If standard mitigation or best practice guidance exists and is being followed, cite this guidance.

Monitoring Indicate how mitigation measures will be monitored to ensure that they accomplish their intended result. If some impacts are uncertain, describe the monitoring which will be conducted to identify and respond to these potential impacts.

Responsible parties. Identify *who* will undertake mitigation and who will conduct the monitoring, and at what frequency.

- F. **Other Information.** Where possible and as appropriate, include photos of the site and surroundings; maps; and list the names of any reference materials or individuals consulted.

(Pictures and maps of the site can substantially reduce the written description required in parts B & C)

Step 6. Based on the environmental review, reach a recommended determination for each high-risk or unknown/moderate-risk activity

For each high-risk or unknown/moderate-risk activity, the environmental review will help you decide between one of three recommended determinations:

- **no significant adverse impacts.** The activity in question will not result in significant, adverse environmental impacts. Special mitigation or monitoring is not required. Typically, this conclusion is not appropriate for high-risk activities.
- **no significant adverse impacts given specified mitigation and monitoring** With mitigation and monitoring as specified in the Environmental Review Report, the activities in question will not result in significant adverse environmental impacts.
- **significant adverse impacts.** The activities in question are likely to cause significant adverse environmental impacts and cannot be mitigated with best practices or other measures. A full environmental assessment will be required.

For each high-risk or unknown/moderate-risk activity, indicate your “recommended determination” in Section B of the form.)

Step 7: Summarize recommended determinations

In section C of the form, summarize your recommended determinations by checking ALL categories indicated in Table 1.

Step 8. Sign certifications (Section D of form)

Step 9. Submit form to USAID project officer. Attach Environmental Review Report, if any.



USAID/MISSION OR BUREAU NAME:
ENVIRONMENTAL REVIEW & REPORT APPROVAL
FORM FOR XXX PROGRAM/ACTIVITIES

Note: Follow, but do not submit, the above instructions.

A. Applicant information

Organization	Parent grant or project
Individual contact and title	Address, phone & email (if available)
Proposed activity (brief description)	Amount of funding requested
Location of proposed activity	Start and end date of proposed activity

B. Activities, screening results, and recommended determination

Proposed activities (continue on additional page if necessary)	Screening result (Step 3 of instructions)			Recommended Determinations (Step 6 of instructions. Complete for all moderate/unknown and high-risk activities)		
	Very Low Risk	High-Risk*	Moderate risk or unknown*	No significant adverse impact	With specified mitigation, no significant adverse impact,	Significant Adverse impact
1.						
2.						
3.						
4.						
5.						
6.						
7.						

*These screening results require completion of an Environmental Review Report

C. Summary of recommended determinations (check ALL that apply)

The proposal contains. . .	(equivalent Regulation 216 terminology)
☐ Very low risk activities	<i>categorical exclusion(s)</i>
☐ After environmental review, activities determined to have no significant adverse impacts*	<i>negative determination(s)*</i>
☐ After environmental review, activities determined to have no significant adverse impacts, given specified mitigation and monitoring*	<i>negative determination(s) with conditions*</i>
☐ After environmental review, activities determined to have significant adverse impacts*	<i>positive determination(s)*</i>

*for these determinations, the form is not complete unless accompanied by Environmental Review Report

D. Certification:

I, the undersigned, certify that:

1. the information on this form is correct and complete
2. the following actions have been and will be taken to assure that the activity complies with environmental requirements established for this Project:
 - Those responsible for implementing this activity have received training in environmental review AND training and/or documentation describing essential design elements and best practices for activities of this nature.
 - These design elements and best practices will be followed in implementing this activity.
 - Any specific mitigation or monitoring measures described in the Environmental Review Report will be implemented in their entirety.
 - Compliance with these conditions will be regularly confirmed and documented by on-site inspections during the activity and at its completion.

(Signature) _____

(Date) _____

(Print name) _____

BELOW THIS LINE FOR USAID USE ONLY

Clearance record

USAID Project Officer	(print name)	(signature)	(date)
☐ Clearance given			
☐ Clearance denied			
USAID MEO	(print name)	(signature)	(date)
☐ Clearance given			
☐ Clearance denied			
USAID REO*	(print name)	(signature)	(date)
☐ Clearance given			
☐ Clearance denied			

USAID	BEO*	(print name)	(signature)	(date)
☐	Clearance	given		
☐	Clearance	denied		

*REO and BEO approval required for all "high risk" screening results and for determinations of "significant adverse impacts"

Note: if clearance is denied, comments must be provided to applicant

