



CASE STUDY

ASSESSING THE
WORLD BANK-FUNDED
COVID-19 RESPONSE
PROJECT IN TUNISIA

Based on information available till August 2021.

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Introduction

On April 20, 2020, Tunisia received a \$20 million loan from the World Bank's COVID-19 fast track facility aimed at bolstering Tunisia's response to the pandemic. This study is an attempt by the Tunisian Association of Development Law to measure the efficiency of this project and the extent to which the Tunisian government was capable of upholding its commitments to use the loan for the purposes it was intended for.

Overview of the project and its goals

This financing aims to strengthen Tunisia's response and testing and tracing capacity in 2020 by ensuring the availability of enough medical supplies and equipment.

This World Bank project is part of a multi-pronged program that covers a range of activities aiming to rapidly provide and make available necessary equipment to the health sector to shore up the response to Covid-19. The project consists of procuring:

- Testing material and equipment;
- Personal protective equipment for healthcare workers (facemasks, visors, disposable gowns and shoe covers, etc.);
- Laboratory and testing equipment in addition to supplies and new Covid-19 testing kits;
- Equipment and supplies to counter contagion and strengthen protection.

One of the key components of this project is the setting up of a complaint mechanism to be used by citizens.

Research objectives

- Gather data and answers on the involvement of key players and stakeholders, including the civil society, in consultations to prepare the fast track project to address Covid-19;
- Determine the extent to which Tunisians benefited from this project;
- Measure the efficiency of the complaint mechanism, notably in terms of citizen's access;
- Determine the level of transparency relating to access to the project's information;
- Elaborate clear-cut recommendations to effectively involve the civil society in the World Bank's projects in Tunisia.

Methodology

This paper was completed as follows:

- Data gathering using different World Bank and Tunisian health ministry documents, including the project's documents available on the Bank's website¹;
- Preparing a two-version survey. The first version is dedicated to workers in the health sector, and the second is dedicated the rest of the beneficiary groups in two languages in order to make it available to all social groups;
- Conducting a survey through field research including phone calls, messages on social media and emails as well as undertaking questionnaires, research and information gathering;
- Synchronizing the collected data from the previous steps to present the findings and recommendations..

1. Survey content

The content of the survey was prepared after gathering data from the documents of the World Bank and the Health Ministry as well as text, audio and visual resources issued by different stakeholders in the project. These helped us to develop the questions that serve the main purpose of measuring the efficiency of delivering services to the intended population.

2. Context

Through this project we involved representatives of medics and paramedical workers as well as women affected by Covid-19 and vulnerable groups, including the disabled and people with chronic conditions in addition to refugees, migrants and inhabitants of marginalized areas.

3. Survey in the field

The survey was carried out as follows:

- Meeting the respondents and providing them with the survey to be filled immediately;
- Phone calls to interview the respondents and directly receive answers to the survey's questions.;
- Sending and receiving answers through emails following an introductory phone call to explain the framework of the survey:

4. Targeted groups

- Healthcare workers;

Vulnerable groups such as:

Women affected by the Covid-19 crisis;

¹ https://projects.worldbank.org/en/projects-operations/project-detail/P173945

- People with disabilities;
- People with chronic conditions;
- Refugees and migrants;
- Inhabitants of marginalized areas.

5. Sampling

The survey is based on a sample of 25 respondents divided as follows:

- Five healthcare workers;
- 20 people representing marginalized groups, i.e., four people representing each of the categories for women, the disabled, people with chronic conditions, refugees and migrants and people living in marginalized areas.

These groups were given the survey and have been interviewed either directly or through their associations.

Research outcomes

Despite the importance and appropriate timing of the financing received by Tunisia to counter Covid-19, the participation of the civil society and citizens in this project was not efficient neither at the consultations level, nor in terms of access to information and the project's documents.

The analysis covers the following elements:

- Civil society participation.
- Access to information and the project's documents.
- Language of the project's documents.
- The efficiency of the complaint mechanism.

1. Survey results

Two surveys were carried out in Arabic and French (annexes 1 and 2).

- The first survey is dedicated to healthcare workers and covers 11 questions that were answered by five people.
- The second survey is dedicated to the rest of the target groups and includes eight questions answered by 20 people.

We conducted the survey in the area of greater Tunis (governorates of Menouba, Ariana, Tunis and Ben Arous) in addition to the inner town of Tabarka in the country's north-west region.

2. Analysis of the survey content

a) Civil society participation

The survey responses submitted by civil society representatives and associations (feminist associations, people with special needs organizations and human rights groups, etc.) showed a lack of information and consultations of these groups about the project. 14 out of 25 people said they were unaware of the existence of such a project.

The participation of citizens and civil society, including organizations, associations, and labor unions, was neither efficient nor genuine, although a Tunisian health ministry document, entitled "Consulting and informing citizens about the project management framework" dated September 20- 2020- says the opposite. ²-

² https://documents1.worldbank.org/curated/en/551811601060656183/pdf/Environmental-and-Social-Management-Framework-ESMF-Tunisia-COVID-19-Response-project-P173945.pdf

Consultations were actually undertaken with official agencies, including the Central Pharmacy and the National Agency for Environment Protection as well as the Waste Management Agency and other public institutions in the health sector. The consultations took place on June 7 to 28, 2020 through emails and phone calls due to Covid-19 restrictive measures.

The same document showed that consultations fell short of including civil society organizations (feminist groups and associations of people with special needs among others), reportedly because of the Covid-19 context and also due to fears of the spread of the virus if consultations were carried out in person. This made us draw the conclusion that the civil society has not been involved in consultations for this project. No effort was reported to consult with, or inform, citizens and stakeholders about the project. There was a possibility to conduct consultations with representatives of the civil society using the same methods adopted to consult with the official agencies. These methods included emails and phone calls as well as social media and other means available on the internet. Tunisian Civil society organizations had been holding meetings remotely while often taking the lead in assisting Covid-19 victims.

Moreover, there was no consultation with the organizations representing doctors or the workers in the public and private health sectors. The head of the National Council of Doctors told the researcher that the council was excluded from the consultation although it represents doctors in both the private and public health sectors as per law number 21 of 1991. The head of the General Union of Dentists, Pharmacists and Healthcare Workers- affiliated with the Tunisian General Labor Union (UGTT)- told the researcher that the Union was also excluded from the consultations.

There was no consultation about the project with civil society associations working on health-related issues despite the key role that these associations play in disseminating information and awareness raising among citizens at large, and healthcare workers in particular, and in providing crucial data to decisions makers.

b) Access to information and project documents

What is at stake in this section is the extent to which information about the project was made available and the challenges to access information.

All five respondents from the healthcare workers group said they found difficulty in accessing information about the project.

c) The language of the project's documents

The purpose behind publishing documents is involving and informing citizens. The ability of citizens to be engaged in this project was hindered by the language barrier. The main documents of this project were published in English and French, two languages that are not accessible by the large public whose native language is Arabic.

d) The complaint mechanism and its efficiency

The World Bank project requires a mechanism to be in place for submitting complaints relating to social or health concerns or to the situation of vulnerable groups and the gender-based violence.

The 40-page project document provides for the setting up of a Covid-19 crisis cell that receives and addresses citizen's complaints. Complaints are also addressed by the strategic center for health operations and the citizen relations office. Two emails have been offered for this purpose: relation.citoyen@rns.tn and shocroom@rns.tn.

The document on the environmental and social framework states that complaints are managed daily and that reports are regularly sent to competent authorities. The unit in charge takes care of examining the complaints, including those related to the coordination of the project, with the strategic center for health operations and the citizen relations office. The complaint management mechanism cooperates with the above-mentioned crisis cells to address the grievances including those addressed to the strategic center for health operations and the citizen relations office. The document also states that the management unit, according to the goals of the project, launches a toll-free phone number available to all citizens in health institutions to send their complaints unanimously. ³

ATDD sent emails to the above mentioned email addresses of the GRM on February 6, 2021 requesting details on the process of filing a complaint through the GRM, the timeline to handle a complaint and how the mechanism would ensure safety of Tunisian citizens to file anonymous complaints. The emails also asked about the availability of equipment and supplies to treat Covid-19 patients. No answer was received during the study period. (Annex 3).

A toll-free number (1899) was launched to receive gender-based violence and domestic violence that covers all the Tunisian territory. A local CSO partner contacted that number and found that it is owned by the Ministry of Women, Family and the Elderly.

The answers to the survey filled in by civil society groups, particularly those show the following:

- The measures taken by the government to protect and treat Covid-19 cases received a satisfaction rate of 08/20 as they were seen as inadequate and below expectations.
- 2/20 answered 'yes' when asked about the availability of equipment and supplies to protect and teat the virus.
- 1/20 said she had sent a complaint through the mechanism established by the health ministry as part of the project.

³ https://documents1.worldbank.org/curated/en/551811601060656183/pdf/Environmental-and-Social-Management-Framework-ESMF-Tunisia-COVID-19-Response-project-P173945.pdf

NB: After verifying the complaint that was submitted, the researcher found that the complainant was a migrant who was not aware of the complaint mechanism and that she had actually contacted the local authorities, not the GRM, to seek means to protect from Covid-19.

Communication means with the management unit according to the goals of the project:

The research team contacted the Management Unit, that is in charge of the project's implementation, to request a meeting, without success. Upon a second request, the Management Unit directed us to officials at the Ministry of Health without providing any contact information.

The document on the environmental and social framework for this project shows that all the members of the management unit in charge of implementing the project did not have professional emails and used only personal ones on Gmail and Yahoo accounts. Such emails are not protected from hackers and using them for sensitive and classified correspondences containing personal information of citizens or emails to the government is a big risk. Their use by senior state officials means that communications through these emails are not officials and erodes responsibility specially with the frequent turnover among senior government officials. (Since the onset of the Covid-19 pandemic, the position of health minister has been held by four different individuals).

Project recommendations

1. Recommendations to parties implementing the project

Communication and information:

- Improve communication means and content, while expanding the scope of targeted groups and developing digital means to facilitate responses.
- Keep citizens informed about the general situation and available capacities.
- Raise awareness about Covid-19 risks.
- Ensure the participation of the civil society, citizens and local authorities in the World Bank projects.

Use professional and safe emails. In this respect, official agencies and institutions in Tunisia should provide officials with professional emails that are protected against hackers to safeguard the confidentiality of data, ensure professionalism, and boost trust among citizens.

• Implemented Health measures:

- Facilitate administrative measures to make health services accessible to all citizens. I
- Improve services to refugees and migrants and offer them the required health assistance.
- Organize a national dialogue to improve the public health sector.
- Increase the health budget and dedicate budget for scientific research and acquiring more equipment.
- Increase health centers across the country and cut disparities between regions.
- Deploy transparency measures in regard to in the health sector.

Practical solutions:

- There is a need to enforce the decree for unified register for citizens that was issued on May 12,2020. Covid-19 showed the limited capacities of the central authority in Tunis to have information about the disparities in revenue and wealth and target those in in need of emergency economic, social or health assistance.
- There is a need to get civil society groups and municipalities more engaged in the design and implementation of the World Bank's projects in Tunisia. CSOs and municipalities are more capable to collect data about vulnerable groups including migrants and refugees from Arab and African countries who are in need of urgent assistance.

There is a need to review the statistics about the labor sector since the informal sector represented 40% as per a report by the IMF in 2019. Many more families have lost their income sources since the onset of the pandemic

2. Recommendations to the World Bank

- Engage with civil society organizations and citizens in consultations about the projects to build ownership and ensure they play an effective role the implementation of these projects.
- Improve communication and dissemination of information through social media about the consultations on the Bank's funded projects in Tunisia.
- Ensure proper monitoring to ensure the health ministry meet its commitments as stated in the project documents.
- Involve, and consult with, all stakeholders in the health sector in all health related decisions.

Annexes

Annex. 1: Survey with healthcare workers

У	نعم	المعلومة
5/2	5/3	1) هل تعلم انه بتاريخ 20 أفريل 2020 حصلت تونس على قرض من البنك الدولي بقيمة 20
		مليون دولار في إطار مشروع لمحاربة فيروس كورونا؟
1	0/3	2) ما هو مستوى شفافية الحصول على المعلومات الخاصة بهذا المشروع؟ (بين 0 و 10 حيث
		أن 0 يمثل عدم وجود شفافية و10 توجد شفافية): المعدل على 10 بالنسبة للخمسة أشخاص
		المستجوبين
5/5	0	3)هل تم تشريككم في مشاورات هذا المشروع؟
دون المأمول/غير كافية		4) ما هو رأيك في الإجراءات التي اتخذتها تونس في الوقاية و العلاج من فيروس كورونا؟
5/3	5/2	5) هل استفدت او حاولت الاستفادة انت شخصيا او أحد المقربين اليك بهذه الإجراءات؟
5/4	5/1	 6) هل تعتقد ان الأجهزة والمعدات التي وفرتها وزارة الصحة في المستشفيات ومؤسسات الصحة
		العمومية كفيلة بمجابهة الفيروس؟
أسرة إنعاش وأجهزة غير كافية		7) كيف ذلك؟
نقص في الوسائل الوقائية وفي		
الإطار الطبي وشبه الطبي		
انعدام الشراكة بين القطاعين العام		
والخاص		
مديونية المستشفيات		
5/1	5/4	8) في حالة التفطن الى وجود أعراض الكورونا، هل تعتقد ان الاستجابة من الاطراف المعنية
		فعالة للتكفل بها؟
5/4	5/1	9) هل وصلتكم تشكيات من المواطنين وقمتم بتوجيهها عبر آلية الشكاوى الموضوعة
		من طرف وزارة الصحة؟
المعلومة غير متوفرة :شخص		10) كيف كانت الاستجابة؟
فقط من الخمسة المستجوبين كان		
على علم بآلية الشكاوي, حاول		
الاتصال برقم الهاتف ولم يتحصل		
على رد حيث أن استقبال		
المكالمات يجرى على موزع آلي		
لق بالتوصيات	انظر الجزء المتعا	11)هل لديكم توصيات أو مقترحات في هذا الشأن؟

Annex 2: Survey with other social groups (25 person)

Z	نعم	المعلومة
20/8	20/12	1) هل تعلم انه بتاريخ 20 أفريل 2020 حصلت تونس على قرض من البنك الدولي بقيمة 20 مليون
		دولار في إطار مشروع لمحاربة فيروس كورونا؟
20/12	20/8	2) هل تعتقد أن الإجراءات التي اتخذتها تونس في الوقاية والعلاج من فيروس كورونا مجدية؟
20/18	20/2	3)هل تعتقد ان الأجهزة والمعدات التي وفرتها وزارة الصحة في المستشفيات ومؤسسات الصحة العمومية
		كفيلة بمجابهة الفيروس؟
20/17	20/3	4) هل استفدت او حاولت الاستفادة انت شخصيا او أحد المقربين اليك بهذه الإجراءات؟
20/16	20/4	5) في حالة التفطن الى وجود أعراض الكورونا، هل تعتقد ان الاستجابة من الاطراف المعنية فعالة للتكفل
		بها؟
20/19	20/1	 6) هل قمت يوما بتقديم شكوى عبر الية الشكاوى الموضوعة من طرف وزارة الصحة؟
0		7)كيف كانت الاستجابة؟ (بين 0 و10 حيث أن 0 يمثل عدم الإستجابة و10 تمت الإستجابة).
بعد التثبت من		
الشكوى المصرح		
بها، تبین أن		
المستجوبة ،من فئة		
المهاجرين، لم تقم		
بشكوي عبر ألية		
الشكاوي لأنه لأعلم		
لها بها، وإنما		
تقدمت بشكوى		
للسلط المحلية لطلب		
الوقاية	وسائل	
رء المتعلق	انظر الجز	 8) هل لديكم توصيات أو مقترحات في هذا الشأن؟
بالتوصيات		■

Annex 3: GRM EMAIL

De: ong_alumni_tunisia <idlo_atdd@yahoo.fr>

À: shocroom@rns.tn <shocroom@rns.tn>; relation.citoyen@rns.tn <relation.citoyen@rns.tn>

Envoyé : samedi 6 février 2021, 01:02:07 UTC+1 Objet : 19 شکری حول الوقایة و معالجة من الکوفید 19

2 1 .1

شكر الكم على نشر هاذين البريدين الألكترونيين كي يتمكن المواطنون في تونس من التقدم بشكاويهم حول الوقاية والمعالجة من وباء الكوفيد-19

نود أن نسألكم عن مدى توفر أسرة في المستشفيات العمومية التي تعلج الكوفيد وماهي إجراءات التحصل على رحاية صحية لأحد الأشخاص الذي يشكو من أعراض الكوفيد

و دننا أن نعرف إن كان هناك ضرورة و واجب التنصيص على المعطيات الشخصية الخاصة بالمواطنين الذين يودون رفع شكوى لمبوء أداء الخدمات الصحية من طرف مؤسسات الصحة العمومية بتؤنس

أخيرا نود معرفة مأل الشكاوي التي يقدمها المواطن و أجال الإجابة عليها

مع الشكر مسبقا على تعاونكم

مجموعة من المواطنين من تونس