

Cambodia

**Health Equity and Quality Improvement
Project (H-EQIP) (P167351)**

Resettlement Policy Framework (RPF)

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Contents

| | |
|---|----|
| 1. Introduction..... | 1 |
| 2. Project Description..... | 2 |
| Project Component Descriptions | 2 |
| COMPONENT 1: Component 1: Strengthening Health Service..... | 2 |
| Sub-component 1.1: Service Delivery Grants: Health Centers | 3 |
| Sub-component 1.2: Service Delivery Grants: Referral Hospital CPA-1, CPA-2, CPA-3 | 3 |
| Sub-component 1.3: Service Delivery Grants: PHDs and ODs..... | 3 |
| COMPONENT 2: Improving Financial Protection and Equity | 4 |
| COMPONENT 3: Ensuring Sustainable and Responsive Health Systems..... | 4 |
| Sub-component 3.1: Health System Strengthening | 4 |
| Sub-component 3.2: Health Infrastructure Improvements..... | 4 |
| Sub-component 3.3: Project Management, Monitoring and Evaluation..... | 4 |
| COMPONENT 4: Contingent Emergency Response | 5 |
| 3. Scope of the Land Acquisition Policy and Procedures framework for Health Infrastructure..... | 6 |
| Policy Principles | 6 |
| A. Key Principles for Implementation:..... | 7 |
| B. Government Laws, Decrees, and Guidelines | 7 |
| Avoidance and Minimization of Adverse Impacts | 10 |
| Planning and Reporting Requirements | 11 |
| Entitlements Relating to Specific Categories of Impact..... | 12 |
| Consultations and Information Disclosure | 13 |
| Grievance Procedures | 13 |
| Organization Roles and Financial Responsibilities | 13 |
| World Bank Supervision Arrangements..... | 15 |
| 4. ANNEX 1: SOCIAL SCREENING CHECKLIST FORM | 16 |

Cambodia

Health Equity and Quality Improvement Program (H-EQIP) (P157291)

Resettlement Policy Framework (RPF)

1. Introduction

This document constitutes the Policy Framework for Compensation, Resettlement and Rehabilitation of Displaced Persons (RPF) for the **Cambodia Health Equity and Quality Improvement Program (H-EQIP) (P157291)** of which implementation will start in the second half of 2016. The Cambodian Government and the World Bank has agreed to implement the safeguard requirements under the project in accordance with the relevant Cambodian laws and regulations and the World Bank environmental and social safeguard policies in the design and implementation of this project, including OP 4.12, “Involuntary Resettlement”. For this project, design and scheduling considerations make it impossible to determine the extent of resettlement planning requirements at appraisal.

The RPF establishes principles and procedures to be followed if subsequent stages of project design or implementation are to cause land acquisition. In such instances, the RPF requires the preparation of a Resettlement Plan (RP) by the Government for World Bank review and approval. The RP ensures that any such potential impacts are minimized, and that any persons affected by such impacts are provided ample opportunity, through provision of compensation or other forms of assistance, to improve or at least restore their incomes and living standards.

2. Project Description

The H-EQIP will build on the innovations supported in the Second Health Sector Support Program (HSSP2), particularly Health Equity Funds (HEFs) and Service Delivery Grants (SDGs), and aims to increase the sustainability of these innovations by improving their resourcing and management as envisaged in the RGC's HSP-3. It will further strengthen the results-based focus of both HEFs and SDGs with a specific goal of improving quality of health service delivery and utilization of services by the poor. In addition, the Project will use a multi-pronged approach to strengthening health systems, especially to support improvements in quality of care, by focusing on enhancing provider knowledge through both pre-service and in-service training, improved availability of critical infrastructure in health facilities, and strengthening Public Financial Management (PFM). Using a set of disbursement-linked indicators (DLIs), the Project will disburse funds against targets achieved on these health system strengthening measures. Another key strategic shift is to attain institutional sustainability through a transfer of responsibility for third party HEF verification from an internationally recruited firm to an independent Government agency which will be established by June 2018, and extending this responsibility to include verifying SDG results at all levels of the health system. The final RPF had been publicly disclosed on the MOH's website and the World Bank's website in April 01, 2016 and April 11, 2016, respectively.

In June 2018, nineteen months since H-EQIP project effectiveness, an additional financing (AF) is proposed. The AF would support the supply side readiness and availability of key services that are or will be integrated into the expanded HEF benefit package, with a focus on non-communicable diseases including cervical cancer screening and treatment, diabetes and hypertension screening and treatment. Long-term family planning services will also be supported. This will be done through three additional new DLI indicators under Component 3 (subcomponent 3.1): (a) new DLI on availability and utilization of cervical cancer screening and treatment services; (b) new DLI on availability and utilization of diabetes and hypertension screening and treatment services; and (c) new DLI on availability and utilization of long-term family planning services. As with the original project, the AF will be national in scope and coverage. However, the additional financing will not include supports to any civil works and therefore the Resettlement Policy Framework (RPF) prepared under the original project remains valid as the construction of health care facilities has yet to commence. As the AF activities do not include any civil works, it does not entail any additional risk of resettlement.

Project Component Descriptions

COMPONENT 1: Strengthening Health Service

This Component will expand the current SDGs into a mechanism for providing performance-based financing to different levels of the Cambodian primary and secondary health system based on achievement of results. The SDGs at health centers and hospitals will be performance-linked against delivery of a basic and comprehensive package of services. This will include critical reproductive, maternal, neonatal, child and adolescent health services. Nutrition will

also be one of the indicators prioritized covering early breast feeding, vitamin A supplementation, deworming, iron folic acid supplementation and growth monitoring.

The Project aims to use performance-based payments under SDGs to complement the RGC's proposed fixed grants to health facilities, particularly by streamlining the funds flow and reporting arrangements envisaged for the same. These new lump-sum grants will form part of the SDG system through joint Prakas to be issued by the Ministry of Economy and Finance (MEF) and MOH, and are intended as a complement to the facilities' operational budget.

Sub-component 1.1: Service Delivery Grants: Health Centers

The Project will provide SDGs to HCs to help finance the MPA of HCs. The amount and payment of the grants will be based on the utilization (i.e. quantity) of services provided and on the quality of services. Initially, the OD, with its HCs will be considered as one unit and will implement the joint Prakas issued by the MOH specifying services to be provided. The quantity and quality of service delivery by the HCs, including utilization by the poor and vulnerable will be systematically determined by the respective OD through a new, standardized supervision checklist to be detailed in the updated SDG manual, and applied quarterly. The results would be cross-checked and verified by an independent agency (initially by the Health Equity Fund Implementer, HEFI, and, after its establishment, by the independent government agency acting as a payment certification agency (PCA) proposed for HEFs. Once the results have been verified, the MOH will inform MEF to make relevant SDG payments. Eligible categories of expenditure for SDGs at the HC level would include minor works, goods, and emergency purchase of drugs and/or recurrent costs including supplies, short term staff, consumables, communications, maintenance, transportation, accommodations, training, other incidental expenses and performance bonuses for health workers.

Sub-component 1.2: Service Delivery Grants: Referral Hospitals

This sub-component aims to incentivize improvements in the quality of care at the secondary level, improve performance in capacity building activities for in-service and pre-service candidates, and promote utilization of services by HEF beneficiaries. Using a new standardized supervisory checklist, to be included in SDG Manual, hospitals will be measured quarterly on their performance on structure, process, and outcomes. Structural measures will comprise the context in which care is delivered, including infrastructure, staff, financing and equipment. Process measures will include the technical and interpersonal process and actions that make up health care as reflected in the transactions between patients and providers and staff throughout the delivery of health care. Facilities will also be encouraged and rewarded for initiating quality improvement processes including self-assessments of quality and patient safety, continuous quality improvement, peer to peer evaluations and adverse event audits. Outcomes refer to the effects of health care on the status of patients and populations and will be considered to be a result of inputs and processes of care. The results would be cross-checked and verified by the independent agency (initially the HEFI and subsequently the PCA). Eligible categories of expenditure for SDGs at the hospital level are similar to health centers and include minor works, goods, drugs and/or recurrent costs including supplies, short term staff, consumables, communications, maintenance, transportation, accommodation, other incidental expenses as well as performance bonuses for health workers.

Sub-component 1.3: Service Delivery Grants: PHDs and ODs

These SDGs aim to strengthen the management of ODs and PHDs. The performance of ODs and PHDs will be measured every six months by the Quality Assurance Office (QAO) of MOH,

against their self-reported activities on a score card to be detailed in the SDG Manual, measuring key supervisory processes and health system outputs. These include: (i) timely completion of quality checklists for health facilities in their jurisdiction; (ii) contribution to capacity building activities for in-service and pre-service training; (iii) drug stock outs in health facilities, human resources availability; (iv) Health Management Information System (HMIS) reports submitted; (v) quarterly review meetings and system functionality. Similar to the other SDG grants, the proposed independent PCA would verify the PHDs' and ODs' performance. Eligible SDG categories of expenditure for ODs and PHDs will include minor works, goods, and/or recurrent costs including supplies, short term contracts, consumables, communications, maintenance, transportation, accommodation, other incidental expenses as well as performance bonuses.

COMPONENT 2: Improving Financial Protection and Equity

This component will continue to support the HEF system and co-finance with the RGC the cost of health services for the poor. The current HEF system is expected to evolve with changes in Government policy on beneficiaries and benefit packages and social health protection. Vouchers will be fully integrated into the HEF. This component would build on the current success of the HEF system, aiming to improve the quality of services, increase utilization by the poor, and ensure sustainability by transferring implementation responsibility to the RGC.

COMPONENT 3: Ensuring Sustainable and Responsive Health Systems

Sub-component 3.1: Health System Strengthening

This sub-component will support a program of activities designed to improve supply side readiness and strengthen the institutions that will be implementing project activities. This includes the implementation of comprehensive pre-service and in-service training programs for health workers, equipment of health facilities to meet minimum standards for the provision of obstetric and neonatal care, carrying out of enhanced health service quality monitoring, improved timeliness of SDG and HEF payments, and establishment of sustainable health service purchasing arrangements.

The AF is proposed to support the supply side readiness and availability of key services that are or will be integrated into the expanded HEF benefit package, with a focus on non-communicable diseases including cervical cancer screening and treatment, diabetes and hypertension screening and treatment. Long-term family planning services will also be supported. This will be done through additional three additional new DLI indicators under Sub-component 3.1. As with the original project, the AF will be national in scope and coverage.

Sub-component 3.2: Health Infrastructure Improvements

Approximately US\$13 million from Component 3 is expected to finance civil works as per priorities identified by MOH in their civil works plan 2016-2020. Prioritization will be based on access issues, attention to remote areas, concerns around patient safety and improving maternal and neonatal survival. A joint assessment with RGC, to identify priorities for infrastructure investments, will be undertaken and the final list of civil works will be identified in the first half of 2016. The expected type of investments will include maternity wards and other infrastructure for emergency maternity and neonatal services, HCs and hospitals.

Sub-component 3.3: Project Management, Monitoring and Evaluation

Project management will be integrated into the responsible departments of the MOH. This Component will support provision of technical and operational assistance for the day-to-day coordination, administration, procurement, financial management, environmental and social

safeguards management, and monitoring and evaluation of the Project, including the carrying out of financial audits of the Project. The subcomponent will also support capacity strengthening of responsible departments within the MOH to smoothly transfer the responsibility of project management from the currently existing Secretariat under HSSP2 to the relevant departments, as well as to support other implementation needs.

A technical assistance (TA) grant from the Japan Policy and Human Resources Development (PHRD) Trust Fund, a programmatic Trust Fund administered by the World Bank, of an amount of US\$1 million will provide complementary financing to Component 3. The grant is expected to contribute to the strengthening of Cambodia's Health Information System to ensure availability of relevant, timely and high quality health and health-related data to allow for evidence-based policy formulation, decision-making and management and planning. Support will be provided in four areas: (i) support for upgrading the HMIS including development of policy/regulation, protocols/guidelines and reporting system; (ii) TA to improve data management, analysis, interpretation, reporting, use, and dissemination (at central and decentralized levels); (iii) strengthening medical record systems including expansion of Patient Medical Registration System database; and (iv) enhancement and integration of disease surveillance and response systems (communicable diseases as well as non-communicable diseases). This financing has been approved in principle but will become available upon formal endorsement by the Japanese Government and the PHRD Unit and will be funded by Japan PHRD Trust Fund under its Performance and Results with Improved Monitoring and Evaluation window.

COMPONENT 4: Contingent Emergency Response

The objective of the contingent emergency response component, with a provisional zero allocation, is to allow for the reallocation of financing in accordance with the IDA Immediate Response Mechanism in order to provide an immediate response to an eligible crisis or emergency, as needed.

During implementation of the ongoing project (Second Health Sector Support Program – HSSP2), the Ministry of Health conducted a comprehensive review of land acquisition for the construction of 114 health centers (HCs) under the project support. It found that 108 HCs were built on the state lands, and six (6) were built on private lands which were acquired either through donations, land for land exchange or payment of compensation. Many land owners agreed to voluntarily donate land because they directly benefit from having HCs within their communities. The review also found that only less than 5% of the total productive lands owned by owners were acquired either through voluntary donation, or land-for-land exchange of against compensation. No physical relocation was observed.

Many of the activities to be supported under this Project are continuation and/or expansion of support currently being provided by the HSSP2 under the responsibility of the Minister of Health (MOH). The Framework for Land Acquisition Policy and Procedures (hereafter called “the (RPF) developed for HSSP2 is updated as part of H-EQIP preparation, taking into account their view of land acquisition mentioned above and the lessons learnt during the implementation of the HSSP2 and the First, Second and Third Additional Financing of HSSP2 (AF1, AF2 and AF3).

The Framework defines policies and procedures and provides guidance for voluntary and involuntary acquisition of land or other assets (including restrictions on asset use), and establishes principles and procedures to be followed to ensure equitable treatment for, and rehabilitation of, any persons adversely affected.

Under this project, the types and sites specific of civil works have been proposed but they have not been reviewed and approved. The framework will apply only in the cases that land acquisition will be required.

3. Scope of the Land Acquisition Policy and Procedures framework for Health Infrastructure

This RPF will be applied only in the event that resettlement occurs due to the implementation of the project. The Health Infrastructure Investment and Maintenance Plan and the maintenance infrastructure will be prepared during project implementation. The health infrastructure investment plan will be included in the 3YRPs and the financing to implement it will be provided through the Annual Operating Plans (AOPs).

All future infrastructure subprojects that involve new physical works or changes in the siting of existing infrastructure may cause land acquisition. Infrastructure screening measures will ensure that no major land acquisition or resettlement-related impacts occur. Specifically, screening will exclude the following:

- (a) Infrastructure Subprojects requiring relocation of residences or commercial enterprises;
- (b) Infrastructure adversely affecting more than 200 persons in total; and
- (c) Infrastructure for which sources of necessary compensation have not been established.

Those infrastructures which require acquisition of land or other assets but whose impacts do not exceed the threshold described above are allowed for financing under the project, provided that mitigation measures are provided in line with this framework.

Policy Principles

The fundamental principle incorporated in this Framework is that all necessary measures will be undertaken to improve, or at least restore, incomes and living standards of all persons adversely affected a result of land acquisition. The Framework further incorporates the major guiding principles espoused in the World Bank OP/BP 4.12, and relevant laws of the Royal Government of Cambodia.

Social screening and document required. All the investment projects/activities will conduct a social screening to identify potential negative impacts and appropriate mitigation measures (see form in Annex 1)

A Key Principles for Implementation:

Involuntary resettlement may cause severe long-term hardship, impoverishment and environmental damage unless appropriate measures are carefully planned and carried out. For these reasons the general principles and objectives of World Bank OP 4.12 are as follows:

- (i) Acquisition of land and other assets should be avoided when feasible and otherwise minimized;
- (ii) If any persons are to be adversely affected, mitigation measures must provide them with sufficient opportunities to improve, or at least restore, incomes and living standards;
- (iii) Lost assets should be replaced in kind, or compensated at replacement cost;
- (iv) Compensation should be paid in full, net of taxes, fees or any other deductions for any purpose;
- (v) If any persons are required to relocate, transfer costs and subsistence allowances will be paid in addition to compensation at replacement cost for lost structures and other assets;
- (vi) Absence of legal title to land or other affected assets will not be a barrier to compensation or other suitable forms of assistance; and
- (vii) Adversely affected persons will be provided information relating to impacts and entitlements, will be consulted as to their preferences regarding implementation arrangements, and will be informed regarding methods and procedures for pursuing grievances.

B. Government Laws, Decrees, and Guidelines

Existing laws that govern land acquisition and resettlement in Cambodia, together with the World Bank OP.4.12 shall govern the land acquisition and compensation of AHs under all subprojects where there will be land acquisition and/or resettlement. The legal and policy framework for addressing the adverse social impacts of any subproject or component of project is provided by World Bank OP.4.12 and laws of RGC.

1. The 1993 Constitution

The 1993 Constitution of Cambodia has established two governing principles pertaining to land acquisition.

Article 44 states that: All persons, individually or collectively, shall have the right to ownership. Only Khmer legal entities and citizens of Khmer nationality shall have the right to own land. Legal private ownership shall be protected by law.

The right to confiscate properties from any persons shall be exercised only in the public interest as provided for under the law and shall require fair and just compensation in advance.

2. The 2001 Land Law

The rights to land and property in Cambodia are governed by the 2001 Land Law, which is primarily based on the provisions of the 1993 Constitution. It defines the scope of ownership of immovable properties, such as land, trees and fixed structures.

The Land Law, Article 5, states that “No person may be deprived of his ownership, unless it is in the public interest. Any ownership deprivation shall be carried out in accordance with the governing procedures provided by law and regulations, and after the payment of fair and just compensation in advance.”

Other provisions of the Land Law that are relevant to land acquisition, compensation and resettlement are:

(i) Legal possession is the sole basis for land ownership as defined by law, and all transfers or changes of rights of ownership shall be carried out in accordance with the required general rules for sale, succession, exchange and gift or by court decision. (Article 6);

(ii) Any regime of ownership of immovable property prior to 1979 shall not be recognized. (Article 7);

(iii) Article 15 states that "the following properties are included as public properties of state and public legal entities: a) any property that has a natural origin, such as forests, courses and banks of navigable and floatable rivers or natural lakes and seashores; b) that is made available for public use such as quays of harbours, port, railways, railways station and airports; or, c) any property which is made available, either in its natural state or after development, for public use such as roads, tracks, oxcart ways, pathways, gardens or public parks and reserved lands;

(iv) Article 18 states that "the following are null and void and cannot be made legal in any form whatever: (a) any entering into possession of public properties of State and public legal entities and any transformation of possession of private properties of State into ownership rights that was not pursuant to the legal formalities and procedures that have been stipulated prior to that time, irrespective of the date of creation of possession or transformation; (b) any entering into possession of private properties of State, through any means, that occurs after this law comes into effect;”

(v) Article 19 states that "any persons whose land title or factual circumstance fall within the scope of Article 18 of this law shall not have the right to claim compensation or reimbursement of expenses paid for the maintenance or management of immovable property that was illegally occupied;”

(vi) Any illegal and intentional or fraudulent acquisition of public properties of state or of public legal entities shall be penalized pursuant to Article 259 of this law;

(vii) The penalties shall be doubled where any occupation of public properties cause damages or delay to works undertaken in the general interest, especially the occupation of roadway reversed land;”

(viii) Ownership of immovable properties described in Article 25 is granted by the state to indigenous minorities¹ as collective ownership. This collective ownership includes all

¹As per Article 23 of the Land Law, “An indigenous community is a group of people that resides in Cambodia whose members manifest ethnic, social, cultural and economic unity and who practice a traditional lifestyle, and who cultivate the lands in their possession according to the customary rules of collective use.

of the rights and protections as enjoyed by private owners. The exercise of collective ownership rights shall be subject to the responsibility of traditional authorities and decision-making mechanisms of the indigenous community, according to their customs and subject to the laws of general enforcement related to immovable property such as the law on environmental protection. (Article 26);

(ix) Persons with legally valid possession of land for five years (at the time the law came into effect) are allowed to be registered as the owner of the land (Article 30). Persons who (at the time the law came into effect) held legal possession but had not yet completed the five years are allowed to remain in possession until they are eligible to be registered as the owner. (Article 31);

(x) Any beginning of occupation for possession shall cease when this law comes into effect (Article 29). After this law comes into force, any new occupant with title to an immovable property belonging to the public bodies or private persons shall be considered as illegal occupant and shall be subject to the penalties provided in Article 259 of this Law (Article 34);

(xi) Article 38 states that "in order to transform into ownership of immovable property, the possession shall be unambiguous, non-violent, publically known, continuous and in good faith;" and

(xii) Landless people may apply for land for residential and subsistence farming purposes at no cost, as part of a social land concessions scheme. The concessionaire may obtain ownership of this land after fulfilling conditions set out in a separate Sub-Decree on Social Land Concessions. (Articles 50, 51).

3. The Expropriation Law - February 2010

The Expropriation Law defines the procedures for acquiring private property for the national or public interest.

(i) Article 2: the law has the following purposes: (a) ensure reasonable and just deprivation of a legal right to ownership of private property; (b) ensure payment of reasonable and just prior compensation; (c) serve the public and national interests; and (d) further the development of public physical infrastructure;

(ii) Article 7: Only the state may carry out an expropriation for use in the public and national interest;

(iii) Article 8: The state shall accept the purchase of the remaining part of real property left over from an expropriation at a reasonable and just price at the request of the owner of land/or the holder of rights in the expropriated real property, if he is no longer able to live near the expropriated scheme or build a residence or conduct any business; and

(iv) Article 22: Stipulates the amount of compensation to be paid to the owner of and/or holder of rights in the real property, which is based on the market value of the real property or the replacement cost as of the date of the issuance of the *Prakas*² on the expropriation scheme. The market value or the replacement cost shall be determined by an independent commission or agent appointed by the expropriation committee.

² A "Prakas" is a ministerial or intra-ministerial decision signed by the relevant minister(s). A parkas must conform to the Constitution and to the law or sub-decree to which it refers.

4. Other Relevant Policies

The private ownership of land was re-established in 1989, and confirmed in 2001. The Land Law (Article 4) enables Cambodians to register the land they occupy with the local Cadastral Administration Office, whereupon a certificate of land title is granted. Issuing land titles is a lengthy process and most offices have a major backlog of applications. People are given a receipt and until the official title deed is issued, this receipt is accepted as a proof of real occupant of the land for land purpose or sale.

Sub-Decree on Social Land Concession, March 2003. This provides for allocations by the State for private land for the purposes of the alleviation of landlessness and poverty, including the replacement of land lost in the context of involuntary resettlement.

Circular No. 02 dated on February 26th, 2007 Stated clearly that i) illegal occupant of state land has no right to compensation and can be punished in accordance to the land law 2001 and ii) illegal occupant who are poor, landless and part of vulnerable group can be provided a plot of land.

MEF Circular No.006 on the Resettlement Implementation Procedure for development projects dated on April 2nd, 2014. This new circular instructed clearly the administrative management and role and responsibility of all relevant Implementing Agency and Provinces in implementing the resettlement for development project.

C. Resolving Inconsistencies: In the event of conflict or inconsistency between Cambodian law and Bank principles as established in this framework, the RGC will include measures to address the identified gaps to the extent necessary for effective implementation of this project. The Bank will reserve the right not to finance project activities if they, after all efforts to bridge the gap, still do not comply with the Bank safeguard policies Avoidance and Minimization of Adverse Impacts

All civil works planned to be executed under the project (H-EQIP) will be located on the public lands within the compound of health centers or referral hospitals. However, there is a possibility that the new construction of health facilities on private land is newly proposed to be conducted with the financing from the project, requiring land acquisition. If the land required does not exceed 5% of the affected individual's total productive land holding, land may be acquired through local level participatory processes. The local authorities, who are responsible for providing land to Provincial Health Departments (PHDs) for construction of health facilities, may determine the willingness of individual owners or users to voluntarily contribute land. Where land is acquired through voluntary land donations based on the transparent negotiations and informed consent by land owners, the result shall be publicly disclosed and documented in voluntary donation report for review by the Bank.

If an informed consent of land owners to donate land or assets cannot be obtained, or if more than 5% of productive assets are to be affected, local governments should prepare a Land Acquisition Report (LAR) for review by the provincial governor (or his designee). The review and approval of the LAR must take place prior to MoH's adoption of the budget which includes the proposed infrastructure activity project. In other words, land acquisition issues must be resolved in the planning year before the implementation of the project.

Planning and Reporting Requirements

The experience under the HSSP2 project indicates that, as the number of health Infrastructure to be built on privately owned sites is expected to be very small, and even where they are built on privately owned sites, only relatively small pieces of land need to be acquired to house health infrastructure. The number of persons to be adversely affected by land acquisition is likely to be very small. Accordingly, planning and reporting requirements are kept as simple as possible.

A. No private land is affected or all private land will be acquired through voluntary donation: No Land Acquisition Report Required:

For all H-EQIP investments for which no significant acquisition is necessary, the relevant PHDs will provide to MOH the following information: EITHER a statement, signed by the local authorities that the investment will be implemented entirely on public land which is not under private cultivation; OR a voluntary donation report indicating the following information:

- (i) The amount of land (and other assets) to be utilized, and field measurement results indicating that no more than 5% of total land holdings are needed from any individual;
- (ii) A description of methods used to inform potentially affected individuals regarding the proposed investment, and their rights and options regarding land or other assets required, and confirmation that individuals have been informed that they have the option of refusing land contribution;
- (iii) Signed Statements of Voluntary Contribution from each individual voluntarily contributing land (and any attached assets), indicating their informed consent;
- (iv) A report of the meeting at which the land acquisition arrangements (including siting maps) have been disclosed to, and validated by, affected individuals.

B. Private land will be acquired through land swap or against compensation: Land Acquisition Report Required: In cases where more than 5% of any holding of productive land will be acquired, or where buildings or other fixed assets worth more than \$100 will be affected, or when affected people refuse to donate land, a Land Acquisition Report must be prepared, including the following elements:

- (i) Description of the investment necessitating land acquisition;
- (ii) Basic data identifying impacts and persons to be affected by them;
- (iii) Arrangements for in-kind replacement of land, or cash compensation at replacement value including signed statements by all affected landowners confirming that these arrangements are satisfactory;
- (iv) Arrangements to ensure adequate performance by contractors relating to compensation for temporary impacts;

- (v) A schedule of assets (other than land), which will require to be replaced as part of the construction contract, and signed statements by the affected owners confirming that these arrangements are satisfactory;
- (vi) An implementation schedule indicating that replacement land or compensation in replacement value will have been provided before implementation of the project begins;
- (vii) A siting map and field measurements validated by villagers, showing land to be acquired and replacement land to be provided, sufficiently detailed to allow verification; and
- (viii) Arrangements for disclosure of information, consultations, and procedures for pursuing grievances.

The planning report is to be prepared as part of feasibility studies and will be reviewed as part of the technical assessment process prior to approval of the plans by MoH. Following MoH approval, provision of in-kind or cash asset replacement, other than that to be included in the project implementation contract, will be completed before the contract for project implementation is signed.

Entitlements Relating to Specific Categories of Impact

If substantial acquisition of land or other assets is necessary, as are defined below, the following provisions will be followed in development of mitigation measures:

- (a) *Loss of agricultural land:* Any eligible persons losing a significant proportion (i.e, more than 5%) of their agricultural land must be provided an opportunity for in-kind replacement, obtaining access to land of equal productive value. Such persons also may be offered optional cash compensation at full replacement cost, if so preferred. Those whose landholdings are not significantly affected can be compensated at full replacement cost.
- (b) *Loss of productive assets:* Landowners contributing land upon which seasonal crops are standing have the right to insist that project implementation is delayed until the crops are harvested, or to be compensated at the market value of the crop. Those losing perennial fruit or pulp trees should be compensated in cash at net present value by local government.
- (c) *Temporary loss of land:* No land may be taken temporarily during construction except by voluntary arrangement between the landowner and the contractor. Contractors should be informed before bidding of any case where use of private land or damage to private property, including crops, is likely to be necessary, in order that compensation or restoration costs can be included in the bid price.
- (d) *Loss of structures:* Project funds may not be used to fund activities which will require demolition or relocation of permanent dwelling or private business premises. For ancillary structures that may be affected, compensation will be paid at replacement cost.

- (e) *Loss of other assets:* Where fixed assets other than land (such as fencing) will be lost replacement of these should be negotiated with the owner and should then form part of the contract for construction of the project.

Consultations and Information Disclosure

As stated above, obtaining land or other assets through voluntary contribution and negotiated agreement requires that individuals potentially affected are informed about their rights and options. Prior to such negotiations, and prior to any land acquisition proceedings, the PHD must provide affected people information about key provisions of this Framework. Potentially affected individuals must be informed that they are not obligated to voluntarily contribute land for subproject purposes, that involuntary acquisition of land without appropriate compensation is not permitted, and that lodging of a valid objection by an affected landowner will be sufficient cause for subproject approval to be delayed or withheld. Additional information to be disclosed will include: entitlement to replacement in kind or compensation at replacement cost; methods to be used in establishing compensation rates; and procedures for pursuing grievances, including contact information. Information should be presented in a language and medium accessible to those potentially involved or affected.

Grievance Procedures

Each Commune Council will have an opportunity to comment on annual commune reviews of project implementation performance. Any grievances may be addressed as part of the review process. If project-affected persons are not satisfied with proposed entitlements or implementation arrangements, or are dissatisfied with actual implementation, they also can seek satisfaction through the PHDs or its designated officials. If this does not result in resolution of issues, project-affected persons can also make grievance verbally or in written form to district-level officials responsible for project facilitation and information dissemination. If this does not result in resolution of issues, project-affected persons can make grievance verbally or in written form to the provincial governor and ultimately to the national-level MOH. At each level, specified authorities should record receipt of grievances and reply to the project affected person or persons within ten days after receiving the grievances. Project-affected persons will be exempted from any administrative or legal charges associated with pursuing grievances.

Organization Roles and Financial Responsibilities

The mandate for carrying out land acquisition for public investments has been delegated to the Inter-Ministerial Resettlement Committee (IRC) of MEF. The Resettlement Plans under the project will need to be approved by the IRC before submission to the World Bank for review and approval. To achieve the objectives of this Framework, the operational manual for the project which will be prepared will reflect the policy on land acquisition and, the following roles and responsibilities of the IRC, MOH and PHDs

- A. The IRC, have the primary responsibility to ensure that the rules and procedures set out under this Framework are adhered to.
- B. The MOH will:
 - (i) Ensure that provincial representatives are informed about their responsibilities under this Framework;

- (ii) prepare the draft Resettlement instruments (if required) and submit to IRC for review and approval
- (iii) Review and approve PHD reports (as outlined above) as part of project feasibility study, prior to appraisal for any investment activities requiring access to privately owned or utilized land or other assets;
- (iv) Review contractor performance to ensure that any required payments to individuals for materials or temporary use of land are made, and to ensure that any temporarily utilized land is adequately restored, and;(vii) Respond to any grievances submitted by adversely affected persons.

C. The PHDs or their designated officials will:

- (i) Ensure that potentially affected residents are informed regarding proposed investments, and their rights and options relating to land or other assets that may be affected;
- (ii) Closely monitor and assist the representatives in all matters relating to land acquisition, and attend and monitor public meetings to discuss land acquisition issues with potentially affected individuals;
- (iii) Ensure timely provision of compensation in cash or in kind, as required;

D. Commune Council: The Commune Council will assist the PHD in all matters concerning information, communication, discussion and negotiation with landowners, or with the villagers collectively, about land acquisition matters, including:

- (i) Scheduling open meetings to ensure that potentially involved village residents are informed regarding proposed investments, and their rights and options relating to land or other assets that may be involved;
- (ii) Identification of impacts on land and assets, individuals potentially involved, and the amounts and types of land and other assets sought from each individual;
- (iii) Scheduling open meetings for public validation of field measurements and maps relating to siting of proposed activities, and public disclosure and validation of any land-related agreements;
- (iv) Seeking voluntary contributions or negotiated agreements;
- (v) Preparing required reports on matters relating to land acquisition; and
- (vi) Ensure compensation in kind and exemptions from local contributions in relation to land acquisition; and
- (vii) Conducting consultations with potentially involved village residents to confirm the boundaries of the land.

E. Provincial Governor: At the provincial level, the governor (or designated officials acting on behalf of the governor) will be responsible for:

- (i) Approving or rejecting any LARs submitted in support of proposed provincial level investments;
- (ii) Ensuring that the local authorities have sufficient funds or other resources to pay necessary compensation or meet other obligations associated with acquisition of land or other assets;
- (iii) Monitoring implementation of any approved LARs and ensuring that any in adequate implementation is corrected; and
- (iv) Responding to any grievances submitted by adversely-affected persons.

World Bank Supervision Arrangements

The World Bank will undertake periodic project supervision in all the project provinces to assess compliance with Framework requirements, and to recommend any corrective measures that may be necessary to resolve implementation problems or inadequacies. To facilitate Bank supervision, all approved LARs (or is this Resettlement Plan) will be available for Bank review. And all village-level land use reports, including Statements of Voluntary Contribution and Statements of Negotiated Agreement, will be available for Bank review at the commune level.

4. ANNEX 1: SOCIAL SCREENING CHECKLIST FORM

Proposed Activity:

Brief Description:

.....

Location:

Filled out by:

Organization:

Date:

Attachments:

Prepared with the following Partner Organizations / Community Representatives:

Remarks:

General Instructions:

This checklist is to be completed to support the verification of the project activity or subproject that involves land acquisition, compensation, and/or restriction of resources access. It focuses on social issues to ensure that social dimensions are adequately considered during selection of the activities/subprojects. If applicable please use the “remarks” section to discuss any suggested mitigation measures. The information should be collected in consultation and coordination with local government, communities, NGOs and leaders of affected community.

Cambodia: H-EQIP - Resettlement Policy Framework (RPF)

QUESTIONS No / Yes MITIGATION MEASURESREQUIRED?

A. PROJECT SITING

ARE THERE ANY OF THE FOLLOWINGSTRUCTURES OR RESOURCES IN THESUB-PROJECT CONSTRUCTION AREA?

- Private households
- Private small businesses/shops
- Roads, footpaths or other access routes
- Agricultural land

- Natural resources shared by community members
- Cemetery or other area/structures of religious or cultural significance
- Other:

ADDITIONAL REMARKS/SUGGESTIONS:

B. POTENTIAL SOCIAL IMPACTS

WILL THE SUB-PROJECT CAUSE?

- Temporary loss of land or resources for any families?
- Permanent loss of land or resources for any families?
- Conflicts in water supply rights and related social conflicts?
- Impediments to movements of people and animals?
- Dislocation or involuntary resettlement of people?
- Potential social conflicts arising from land tenure and land use issues?
- Deterioration of livelihoods or living conditions of women or the poorest families in the sub-project service area?

C. OTHER REMARKS:

D. POTENTIAL SOCIAL IMPACTS ON

VULNERABLE GROUPS, IF ANY:

WILL THE SUB-PROJECT:

Cambodia: H-EQIP - Resettlement Policy Framework (RPF)

QUESTIONS No / Yes MITIGATION MEASURES REQUIRED?

- Affect poverty group?
- Affect women headed households?
- Be implemented where Indigenous People communities are present?
- Affect other vulnerable groups?

E. OTHER REMARKS:

MITIGATION MEASURES:

- Land Acquisition Agreement
- Voluntary Donations
- Indigenous Peoples Plan (IPP)
- Commune Resource Use Agreement
- Other?

F. OTHER REMARKS:

G. CONCLUSIONS/RECOMMENDATIONS:

H. SIGNING AND NAME OF IMPLEMENTING AGENCY:

H-EQIP SAFEGUARD COORDINATOR:

NAME:

Cambodia: H-EQIP Resettlement Policy Framework (RPF)

QUESTIONS No / Yes MITIGATION MEASURES REQUIRED?

POSITION:.....

DATE:.....

POSITION:.....

DATE:.....