



# Project Information Document (PID)

Appraisal Stage | Date Prepared/Updated: 14-Dec-2021 | Report No: PIDA31715

**BASIC INFORMATION****A. Basic Project Data**

Country Bangladesh	Project ID P173019	Project Name Bangladesh Road Safety Project	Parent Project ID (if any)
Region SOUTH ASIA	Estimated Appraisal Date 16-Dec-2021	Estimated Board Date 24-Mar-2022	Practice Area (Lead) Transport
Financing Instrument Investment Project Financing	Borrower(s) People's Republic of Bangladesh	Implementing Agency Road Transport and Highways Division, Ministry of Road Transport and Bridges, Roads and Highways Division, Directorate General of Health Services, Bangladesh Police, Dhaka Transport Coordination Authority	

## Proposed Development Objective(s)

The Project Development Objective is to build road safety management capacity and achieve targeted reduction in traffic fatalities and serious injuries in Bangladesh.

## Components

Multi-sectoral Road Safety Pilot Projects  
Priority Road Safety Investments  
Technical Assistance

**PROJECT FINANCING DATA (US\$, Millions)****SUMMARY**

<b>Total Project Cost</b>	465.00
<b>Total Financing</b>	465.00
<b>of which IBRD/IDA</b>	315.00
<b>Financing Gap</b>	0.00



DETAILS

World Bank Group Financing

International Development Association (IDA)	315.00
IDA Credit	315.00

Non-World Bank Group Financing

Counterpart Funding	150.00
National Government	150.00

Environmental and Social Risk Classification

Substantial

Decision

The review did authorize the team to appraise and negotiate

B. Introduction and Context

Country Context

1. **Bangladesh has made rapid social and economic progress in recent decades and reached lower middle-income status in 2015.** Officially reported annual growth of gross domestic product (GDP) averaged close to 6 percent since 2000. Strong labor market gains contributed to a sharp decline in poverty, with the national poverty rate falling from 48.9 to 24.5 percent between 2000 and 2016, while extreme poverty declined from 34.3 to 13.0 percent.<sup>1</sup> However, the pace of poverty reduction slowed in recent years even as growth accelerated, particularly in urban areas and in the west of the country. Similarly, the progress on shared prosperity slowed between 2010 and 2016 after a decade of improvements, with annual consumption growth of the bottom 40 percent trailing that of the overall population (1.2 versus 1.6 percent).

2. **The COVID-19 pandemic caused major disruptions to economic activity in FY20 and FY21.** The initial phase of the pandemic in early 2020 disrupted the supply of intermediate goods from China, reducing manufacturing output. As the pandemic intensified abroad, export orders from Europe and the United States declined precipitously. The government implemented control measures that resulted in a sudden stop of economic activity in many sectors. Consequently, real GDP growth decelerated to 3.5 percent in FY20. Early signs of a recovery emerged in the first half of FY21, after movement restrictions were progressively lifted. Merchandise exports grew by 15.4 percent as RMG export orders were reinstated and factories remained open despite recurrent lockdowns. On the demand side, growth was primarily supported by private consumption, underpinned by a recovery in labor income and robust remittance inflows. Growth in imports of consumer goods and capital goods point towards a broad-based

<sup>1</sup> Household Income and Expenditure Surveys, 2000/01 and 2016/17.



recovery. Declining imports and large official remittances inflows, which increased by over a third in FY21, contributed to a balance of payments (BoP) surplus in FY21. With 5.4 percent in July 2021, inflation remained benign.

3. **The COVID-19 pandemic has put the substantial poverty reduction gains of the past decade at risk, and vulnerability to economic shocks has risen.** Poverty increased from 13.9 percent in FY19 to an estimated 18.1 percent in FY20, using the international poverty rate (\$1.9 in 2011 PPP). A nationally representative phone survey showed income losses and high levels of self-reported food insecurity in FY20. In poor areas of Dhaka and Chittagong, surveys showed that adults who stopped working due to COVID-19 were 11 percent more likely to report food insecurity. As growth strengthened in FY21, household surveys point to a gradual recovery in employment and earnings. Estimated poverty remained flat, although food security improved across the country.

4. **Bangladesh is extremely vulnerable to the effects of climate change.** The Global Climate Risk Index ranks Bangladesh as the world's seventh most affected country over the period 2000-2019.<sup>2</sup> Rising temperatures leading to more intense and unpredictable rainfalls during the monsoon season and a higher probability of catastrophic cyclones are expected to result in increased tidal inundation. It is estimated that a one-meter rise in sea levels would submerge 18 percent of arable land in coastal areas.<sup>3</sup> Recent studies estimate that by 2050 Bangladesh could have 13.3 million internal climate migrants.<sup>4</sup> Additional rural-urban migration would have significant consequences for air and water pollution and unsustainable consumption of natural resources, while putting additional pressure on urban labor markets. Addressing climate risks is increasingly urgent to ensure sustainable economic development of the country. In the region, and in particular in Bangladesh, climate is known to have a multiplying effect on the magnitude and occurrence of road accidents. Natural disasters can easily cause extreme damage to transport infrastructure, as well as on drivers. Harsh weather and natural disasters make driving conditions very dangerous, even deadly, whether it's a landslide, heavy rainfall, hurricane, earthquake, winter storm, etc. There is a need to have a clearer understanding of the actual proportion of vehicle crashes and fatalities that are due to adverse weather and climatic events for enhanced decision making and improved emergency planning, as well as to implement relevant measures to increase road safety and improve emergency planning in vulnerable locations.

5. **As Bangladesh recovers from the COVID pandemic and restores economic activities across all sectors, addressing the existing challenge of road traffic injuries is integral to the country's development.** Addressing road traffic deaths and injuries is integral to saving lives, in line with Green, Resilient and Inclusive Development (GRID). Prior to the COVID pandemic, road crashes killed more than 4,000 people<sup>5</sup> and seriously injured or disabled an estimated 200,000 in Bangladesh based on global studies. This has impacted the working-age population with road traffic crashes responsible for ~12 percent of all deaths among men in the 15-49 age bracket<sup>6</sup>. Besides death, injuries from road crashes are the second leading cause of permanent disability in the country – lack of adequate safety nets implies that these families would face even more loss of income, already exacerbated by the pandemic. Children, too, face risks: in 2017, road crashes were the fourth leading cause of death among children. From a gender

<sup>2</sup> Germanwatch (2021) Global Climate Risk Index 2021.

<sup>3</sup> UNFCC (2007) *United Nations Framework Convention on Climate Change*.

<sup>4</sup> World Bank (2018) *Groundswell: Preparing for Internal Climate Migration*.

<sup>5</sup> Depending on the source, the estimates of annual deaths range from 4,138 (reported fatalities in 2019) to nearly five times that – between 16,874 (Global Burden of Disease, 2017) and 24,954 (WHO, 2016). The World Health Organization estimate implies a death rate of 15.3 per 100,000 in 2016.

<sup>6</sup> The rate of increase in deaths for this age group in Bangladesh was 15 times higher than that across the South Asia region.



perspective too, inclusive development of roads is vital – while the road fatality ratio is skewed toward males across all ages<sup>7,8</sup>, this pattern actually reflects deeper issues of limited mobility, access, and opportunity for women. More women, particularly with lower incomes, than men have no alternative to walking, making them more risk prone.<sup>9</sup> All this comes at a price to the economy – where annual crash related costs are equivalent to 2-3 percent of GDP.

**6. Improving road safety in Bangladesh is vital to national health, well-being, and economic growth.** The road safety situation has been worsening in the past decades - between 1990 and 2017, the increase in country's road crash fatality rate has been three times that across the South Asian region. With growing motorization (2.5 times just between 2014 and 2017), the trend may further worsen when transport activities are restored to normal levels. Further, over half of all road death (54 percent) victims are the poor and vulnerable, with pedestrians accounting for almost half of these deaths, mainly due to lack of adequate pedestrian infrastructure.<sup>10</sup> Road crashes also affect the poor rural families disproportionately with a greater percent of them falling into economic distress than others<sup>11</sup>. Economic losses from inaction could be substantial – a World Bank report estimates that cost related to traffic crashes can be as high as 5.1 percentage of the national GDP<sup>12</sup>. A long-term commitment and sustained vision from the highest level of Government of Bangladesh (GoB) along with commensurate investments in effective road crash fatality and injury prevention will contribute to the accumulation of human capital in Bangladesh, which in turn, will contribute to sustainable and inclusive economic growth and overall country well-being.

**7. GoB is committed to address road safety and transport issues.** While road safety statistics in Bangladesh have been a concern for several decades, citizen's demand through a grassroots movement for stronger political ownership and urgent action to improve road safety came to the fore during a series of public *protests in 2018*. This led to subsequent inclusion of road safety in the political campaigns of 2019 elections that has set up a favorable context for road safety interventions in the country. The resulting media attention and strong advocacy by civil society have prompted a demand for broader reforms in the overall management of the transport sector to address road safety. In response, GoB constituted a high-powered committee on disciplining the road sector and reducing crashes focusing on multi-sectoral implementation and road safety management<sup>13</sup> in 2019. A new Road Transport Act, with

<sup>7</sup> The morbidity rate being 1551.4 injuries (95% CI 1520–1584) per 100,000 for males versus 264.3 injuries (95% CI 251.7–277.6) per 100,000 for females. The RTI mortality rates being 9.2 deaths (95% CI 6.9–12.01) per 100,000 in males compared to 4.7 deaths (95% CI 3.2–6.7) per 100,000 in females. Md. Kamran UI Baset et al. (2017) Pattern of Road Traffic Injuries in Rural Bangladesh: Burden Estimates and Risk Factors. *Int J Environ Res Public Health*. 2017 Nov; 14(11): 1354.

<sup>8</sup> One of the underlying factors beyond infrastructure and regulations can also be norms that lead to risk-taking behavior among men, a critical aspect to be considered in the design of awareness raising campaigns.

<sup>9</sup> Peters D. Gender Issues in Transportation: A Short Introduction. In UNEP Regional Workshop Deals on Wheels: Sustainable Transportation Initiatives in Developing Countries. San Salvador: The Institute for Transportation and Development Policy (ITDP); 1999.

<sup>10</sup> There is limited gender-disaggregated data on pedestrian deaths and injuries.

<sup>11</sup> About 70 percent of poor rural families suffering from a road death saw their income decrease compared to 50 percent for non-poor rural families. In the case of seriously injured victims, fewer rural poor were able to return to their job (56 percent vs. 75 percent of non-poor) and spent on average twice as many days searching for a new job than non-poor. See Aeron-Thomas et al (2004). The involvement and impact of road crashes on the poor: Bangladesh and India case studies. TRL Limited. July 2004.

<sup>12</sup> World Bank (2019). Guide for Road Safety Opportunities and Challenges: Low- and Middle-Income Countries Country Profiles. Washington, DC., USA

<sup>13</sup> The committee recommended 111 actions including: road user safety awareness and education programs using a variety of media; public transport user and driver safety; safer public transport route franchising and driver employment conditions; promotion of motorcycle and cyclist safety helmet use; safer pedestrian infrastructure including safety railings, rumble strips and raised pedestrian platforms at busy intersections; removal of roadside market encroachment to improve pedestrian access and safety; safer road signs, markings and lighting; improved driver licensing procedures; the establishment of a road safety authority and improved safety data collection; and the establishment of a road safety fund to ensure adequate resourcing of proposed actions and their monitoring and evaluation



substantial focus on road safety, came into effect in November 2019 replacing the old Motor Vehicle Ordinance of 1983. The new Act mandates stricter punishment for traffic offences, greater accountability from the operator and designer for safety performance, and increased enforcement of road safety behavior through deployment of mobile courts. To enforce these provisions on the ground, significant improvements in management, coordination, governance systems, procedures, processes, tools and facilities are necessary at every level of operation, and every government tier, specifically in ensuring safer infrastructure, certification of road-worthy vehicles and licensed drivers, enforcing good user behavior and prompt post-crash recovery and rescue.

## Sectoral and Institutional Context

8. **Institutions for road safety management in Bangladesh are not empowered or held accountable for safety outcomes.** The National Road Safety Council (NRSC) that was established in 1995, and now hosted by the Bangladesh Road Transport Authority (BRTA), is responsible for the planning, management, and coordination of road safety in the country. It comprises representatives from all key agencies and stakeholders, including BRTA, Police, Roads and Highways Department (RHD), transport owners, workers' associations, and professionals in the field. However, from the tripling of road fatalities between 1990 and 2017, this institutional arrangement has failed to coordinate effectively with all stakeholder agencies to achieve improved road safety outcomes. District Road Safety Committees have been established at the district and metropolitan levels with representatives from similar agencies (as in the NRSC). However, their functioning has been hampered by poor internal communications, a lack of coordination and integration between them and the NRSC, and general paucity of resources to support their effective engagement. This has affected the National Road Safety Strategic Action Plans (NRSSAP): interventions and targets are not scientifically set, not well aligned with maximizing road safety gains, and suffer from inadequate funding and unrealistic timelines. Organizations undertaking pertinent research on road safety issues are also limited.<sup>14</sup>

9. **Poor road safety performance in Bangladesh is a symptom of underinvestment in targeted initiatives.** General tax revenues provide the only source of sustainable funding for road safety in Bangladesh, allocated to the road safety units at RHD, Bangladesh Road Transport Authority (BRTA), and the police through their respective ministries. However, this funding is insufficient and not prioritized. Funding sources for road safety action plans have never been institutionalized. Several private organizations and NGOs support road safety activities through donor and multilateral development bank assistance, but in an uncoordinated manner; insurance companies do not contribute significantly to road safety. A recent WB analysis suggests that Bangladesh will require an estimated additional investment of US\$7.8 billion over the coming decade to achieve the Sustainable Development Goal 3.6 target of halving its road fatalities. Growing motorization<sup>15</sup> means that the upward trend in fatalities and injuries would continue, unless rapid, scaled-up, inclusive road safety investments are made.

10. **Poor quality and unreliable data on crash deaths and injuries impede proper road safety management.** The current system of recording, analyzing, and reporting crashes in Bangladesh is cumbersome, error-prone, time-consuming, and unfit for analysis and benchmarking. Crash data is characterized by irregular and unreliable year-on-year changes, indicating incompleteness and a lack of

<sup>14</sup> NGOs such as BRAC (Building Resources Across Communities), Centre for Rehabilitation of the Paralyzed, Nirapad Sarak Chai, Work for Better Bangladesh, Safe Community Foundation, Poribesh Bachao Andolon, and the Safe Road Movement primarily undertake community road safety programs, publicity and awareness campaigns, driver training; and treatment and rehabilitation of paralyzed road crash victims

<sup>15</sup> 250% increase from 2014 to 2017 and a 11-fold increase in the last 28 years.



consistent procedures. Poor coordination between the ministries and weak internal organizational capacity result in crashes not being recorded and consequent severe underreporting of fatalities and injuries: a comparison of the recorded fatalities with the WHO estimated fatalities from 2010-2015 shows a discrepancy of more than 90%; official crash fatality data from 2016 up to the present is still unavailable. Further, the Highway Police has no executive power to prosecute violators. Most of its staff is on deputation from the Bangladesh Police, invariably short of qualified and capable manpower; logistics and equipment, including unavailability of vehicles; and other transport facilities, which affects its mobility.<sup>16</sup> As such, it has been primarily engaged in awareness programs for school children, driver training programs, and the coordination of meetings with public transporters and other stakeholders<sup>17</sup>.

**11. Road crash fatalities in Bangladesh are predominant on highways and in urban areas.** Nearly 60% of road crashes are on inter-urban national and regional highways<sup>18</sup>, highlighting the need to systematically tackle highway and district-level safety issues; the rest are in urban areas. A substantial number of the highway crashes occur at uncontrolled junctions of these highways and minor roads<sup>19</sup>. Despite this, and the high wayside population and high traffic on the highway network, basic safety infrastructure and furniture – signage and markings, crash barriers, traffic calming and facilities for vulnerable road users (VRUs – pedestrians, cyclists and motorcyclists) – and enforcement and post-crash care are almost non-existent. Unsafe and under-invested road infrastructure remains one of the key risk factors for road safety in Bangladesh: International Road Assessment Program (iRAP) pilot assessments on some roads<sup>20</sup> in 2010 highlighted the high safety risks for VRUs and the massive road safety investments required for upgrading infrastructure. Almost half of urban crash fatalities occur in the Dhaka metropolitan area, with buses involved in a majority of these;<sup>21</sup> other metropolitan cities account for another 30% of fatalities.<sup>22</sup> VRUs account for almost half (45%) of all urban road fatalities<sup>23</sup> - an observational study in Dhaka also revealed that pedestrians are at risk even on the footpaths due to their poor condition, presence of driveways, encroachments etc. This underlines the need for systematically addressing VRU safety and broader bus operational issues in urban metropolitan areas.

**12. Vehicle regulations and inspections are inadequate to cater to the rapid growth in vehicle ownership.** About 3000 vehicles are registered daily in Dhaka alone – vehicle inspections that are a pre-requisite for registration are done visually by motor vehicle inspectors at testing centres. The mismatch of supply and demand in vehicle inspections has reduced the exercise to a mere formality putting unsafe vehicles on Bangladesh roads - according to the BRTA, in 2018 more than 55,000 vehicles didn't have the vehicle fitness certificate renewed for more than 10 years; the number of unregistered vehicles in Bangladesh is around 1.5 million<sup>24</sup>. Lack of compliance to safety standards also applies to other protective equipment such as two-wheeler helmets, where the local supplier market mainly caters to cheap and sub-standard quality<sup>25</sup> helmets. Lack of technological knowhow and trained personnel are key constraints in

<sup>16</sup> Mahmud, S.M. Sohel, Md. Shamsul Hoque, and Abdus Shakur Qazi. 2009. "Road Safety Problems in Bangladesh: Some Major Initiatives, Constraints and Requirements." *Transport & Communications Bulletin for Asia and the Pacific*, UNESCAP

<sup>17</sup> Ahmed, Imtiaz. 2016. "Road Safety Situation in Bangladesh." Presentation by Bangladesh Police, Seoul.

<sup>18</sup> National and Regional highways comprise about 8000 km or ~38% of the major road network in the country

<sup>19</sup> Either zilla roads of RHD or upazilla/union roads of LGED

<sup>20</sup> N2 and N3 highways, and on the Dhaka-Aricha road (a section of N5)

<sup>21</sup> Accident Research Institute, Bangladesh University of Engineering & Technology, Dhaka.

<sup>22</sup> Rahman Md M (2018), 'Urban Road Safety and Traffic Management: Introduction and Issues', Accident Research Institute, Bangladesh University of Engineering & Technology, Dhaka.

<sup>23</sup> Global Status Report on Road Safety, 2015, World Health Organization, Geneva, 2015

<sup>24</sup> According to a survey of the Bangladesh Passengers' Welfare Association (BPWA)

<sup>25</sup> Not meeting international safety standards for helmets, e.g., UN 22.05 standard



introduction and operation of automated vehicle inspection centers (VICs)<sup>26</sup>. GoB plans to have 21 automated VICs for testing both fitness and emissions within the next 5 years<sup>27</sup> – this includes rehabilitation of four of the five original VICs established two decades ago.<sup>28</sup>

**13. Post-crash care systems in Bangladesh are at a nascent stage of development.** Post-crash care involving pre-hospital care systems, appropriate hospital-based care and adequate rehabilitation services are all rudimentary: there is no formal pre-hospital emergency response system for road crash victims; no laws or policies are in place to protect bystanders who provide care to crash victims, from civil or criminal liability. There are multiple numbers to access emergency care<sup>29</sup>, and ambulances operate in a disjointed way, providing at best, limited coverage<sup>30</sup>. According to the Bangladesh Health and Injury Survey 2016, two-thirds of all road crash victims die on the way to hospital and three-fourths do not receive any form of pre-hospital care. Systematic bystander care to road crash victims is non-existent except for some services by NGOs such as Traumalink. Essential trauma care is provided only in large tertiary care hospitals and medical colleges, as primary and secondary care facilities lack adequately trained human resources and/or necessary equipment and supplies. There is no emergency room-based injury surveillance system, and no system of trauma registries to monitor quality of trauma care. Women face additional difficulties when providing or receiving bystander care.<sup>31</sup> Also, given that Bangladesh has only about a third of the number of hospital beds recommended by WHO<sup>32</sup>, augmentation of this would be important to cater better for other public health emergencies and disasters. Therefore, a reduction in road traffic injuries could free up— even by a conservative estimate - beds for up to 25,000 additional patients.<sup>33</sup>

**14. There is little recognition of the road safety risks associated with gender-differentiated mobility patterns and little response to the rampant problem of sexual harassment that female road users face.** This limited attention is rooted in weak institutional capacity to understand and respond to priorities and needs of female road users. Paucity of gender-disaggregated data on road crashes, injuries, post-crash care and road behavior has led to limited understanding on the nature and extent of risks that female road users face, and the socio-economic impact of high male death and injuries on women in the household. Road safety responses tend to overlook the gender differences in mobility patterns and needs. While unsafe and under-invested roads and infrastructure affect all, specific design needs of women tend to be ignored.<sup>34</sup> Weakness in enforcing safe road user behavior also affects women more. For instance, women are more likely to be the pillion riders without a helmet. In terms of access to post-crash care, service providers are predominantly men. While there is limited information on utilization of such services among female road crash survivors, studies show that women prefer receiving healthcare from female

<sup>26</sup> EST for Resiliency – Building Safe, Smart, Low-carbon and Resilient Cities in Asia, Bangladesh Country Report, November 2015

<sup>27</sup> Current road safety scenario in Bangladesh, Imtiaz Ahmed, Seoul, July 2016

<sup>28</sup> Project Completion Report, Southwest Road Network Development Project, Asian Development Bank, July 2007

<sup>29</sup> The national emergency number is 999 and the health center number of the Directorate General of Health Services (DGHS) is 16263

<sup>30</sup> Less than 10 percent of all seriously injured crash victims are transported by ambulance to their first point of emergency care

<sup>31</sup> Respondents of a study reported female victims are less likely to get attention from local people. Source: BRAC. 2021. Assessment of post-crash care system in three districts with high-frequency of road-traffic accidents and Dhaka Metropolitan, Bangladesh

<sup>32</sup> 25-35 per 10,000 people

<sup>33</sup> Assuming injuries to be 10 times the official fatalities of 2,566 reported for 2016

<sup>34</sup> Although Dhaka has 43 foot over-bridges in the North City Corporation and 31 in the South City Corporation, women tend to avoid these as they do not find these infrastructures gender-friendly. Women with children or who are pregnant, sick or elderly cannot climb many stairs. Instead, they prefer jay walking even at the risk of accidents. PPRC, 2021. Young women and men have different preferences regarding various design features, and dire need for restructuring interiors of buses for female passengers from Sultana, Sharmin, et. al. 2020. *Redesigning the interiors of public buses in Dhaka city: Exploring the gender-based perceptions and preferences of young public bus users*. Asian Transport Studies Vol. 6. Global



providers due to comfort and social norms.<sup>35</sup> A rapid gender assessment confirmed that sexual harassment is the top concern for female road users—both pedestrians and public transport passengers.<sup>36</sup> Ninety-four percent of female public transportation users in Dhaka have reported facing verbal, physical, or other types of sexual harassment.<sup>37</sup> Despite the ubiquity of harassment in public transport, the reporting and response mechanisms usually limited to the police and helpline (999) are weak. Women cited social stigma, fear of retribution, limited knowledge on and complexity of reporting processes, and lack of perceived benefits as their top reasons for not reporting GBV. Moreover, bus employees are not aware of their responsibilities and many also commit these offences. Efforts to improve road safety must take into account all these gender-specific issues.

### C. Proposed Development Objective(s)

#### Development Objective(s) (From PAD)

The Project Development Objective is to build road safety management capacity and achieve targeted reduction in traffic fatalities and serious injuries in Bangladesh.

#### Key Results

- a. Targeted reductions in annual road crash deaths and serious injuries (reduction in fatal crashes per year on the highway pilot corridor segments and highway sections with mass actions implemented).
- b. A National Road Safety Authority or equivalent lead agency is established with adequate resources and coordination mechanisms (entity fully operational)
- c. A road safety funding mechanism is developed as an integral part of the road safety lead agency is established for systematic funding of road safety activities (fund fully set up).

15. The project will finance three components toward meeting the project development objectives (see Annex 2 for details including costs):

16. **Component 1: Multi-sectoral Road Safety Pilot Projects (US\$78 million):** Undertaking road safety pilot projects on selected national highways, urban and district roads and areas, to enhance coordination between road agencies, police, health agencies and civil society, including:

- (a) national highway safe corridor demonstration pilot project for engineering road safety treatments and physical traffic calming measures, and implementing measures to improve post-crash care;
- (b) urban road safety pilot project for improvement of post-crash care and implementation of targeted awareness programs; and
- (c) district road safety pilot initiatives to improve road safety at the district level.

17. **Component 2: Priority Road Safety Investments (\$214 million):** Implementing priority activities

<sup>35</sup> Rechecking reference

<sup>36</sup> A rapid gender assessment was conducted by Power and participation Research Center and completed in September 2021 to support the BRTA.

<sup>37</sup> Kotikula, Aphichoke, Ruth Hill, and Wameq Azfar Raza. 2019. *What works for working women? Understanding female labor force participation in urban Bangladesh*. Washington, DC: World Bank.



as per the National Road Safety Strategic Action Plan in the areas of infrastructure, vehicle and user safety and post-crash care, and help establish ICT systems, including: implementation of mass-action engineering treatment programs to improve infrastructure safety; development of crash database system; implementation of integrated traffic management and incident detection system; strengthening of highway and metropolitan police to manage traffic and respond to crash situations, integration of existing information systems/databases of vehicle registration, driver licensing and payments; implementation of road safety awareness and behavior change communication campaigns; trainings for bus employees and police on preventing and responding to sexual harassment in public transport and roads;<sup>38</sup> development and delivery of commercial driver's training program; implementation of trauma registries and trauma system improvement programs; and training of medical providers on essentials of trauma care.

**18. Component 3: Technical Assistance (\$58 million):**

a. Providing technical assistance to BRTA for strengthening of NRSC secretariat housed in BRTA; development of blueprint to establish a National Road Safety Authority; preparation of a National Road Safety Strategy and Investment Plan; review of current driver licensing, vehicle registration, and inspection regime; review of existing commercial driver training regime and development of a comprehensive driver training program; development of various technical manuals related to road safety; development of rules/sub-national legislation for the Transport Act of 2018; development of standard design and specification guidelines for set up of new Vehicle Inspection Centers<sup>39</sup>; develop a gender and inclusion strategy; and development and implementation of comprehensive training and capacity building programs for BRTA staff.

b. Supporting RTHD with setting up a system of road safety audit accreditation/certification; developing and upgrading road safety audit manuals and technical manuals; and conducting training and capacity building for RHD staff and units.

c. Providing training and capacity building of Highway Police, Metropolitan Police and District Police in modern road safety enforcement.

d. Supporting Ministry of Health and Family Welfare in developing standards, protocols and operational policies for emergency care services with the aim of setting up a formal emergency medical service; and providing training and capacity building on road safety aspects.

e. Providing Project implementation support, including technical, fiduciary and safeguard experts, and training and capacity building.

**19. Component 4: Contingent Emergency Response:** Provision of immediate response to an Eligible Crisis or Emergency, as needed.

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<sup>38</sup> Training for bus employees will emphasize bystander intervention and draw from global best practices.

<sup>39</sup> Studies have found difference in preference between young men and women regarding interior design of public vehicles. Sultana, Sharmin, et. al. 2020. *Redesigning the interiors of public buses in Dhaka city: Exploring the gender-based perceptions and preferences of young public bus users*. Asian Transport Studies Vol 6.



Legal Operational Policies

	Triggered?
Projects on International Waterways OP 7.50	No
Projects in Disputed Areas OP 7.60	No

Summary of Assessment of Environmental and Social Risks and Impacts

**E. Summary of Assessment of Environmental and Social Risks and Impacts**

20. **Environmental risks and impacts.** The project would follow the World Bank ESF and its E&S standards in addition to the national legal framework. It would not support any new road constructions but would undertake geometric correction of selected segments/intersections of highway corridors and pilot districts to reduce accident vulnerability. It would also support repair/rehabilitation of existing emergency care unit of a few hospitals for improvement of post trauma care which would involve minor civil work. Construction of a training center for highway police would also be supported under the project. No significant environmental risks and impacts are anticipated due to these activities. As there are no protected area or ecologically critical area in the vicinity of the probable operating area of the project, no impact on these sensitive receptors is expected. As no new road alignment would be constructed, necessity of cutting down of trees and disturbing any natural habitat would be limited. Environmental impacts during construction phase would be short term in nature and can be avoided or mitigated through adoption and implementation of measures. Civil and construction works may include air pollution due to dust emission, surface water pollution from construction debris, noise pollution from construction activities and Occupational Health and Safety (OHS) related issues. Movement of high-speed vehicles on the highways where civil works will be in progress would pose additional safety concern for workers and may trigger traffic congestion. Labor influx associated with the civil works contracts on the highway corridors may induce issues of community health and safety (CHS). Some of the laborers are likely to stay at the construction area, if in labor camps, may generate solid and liquid wastes. Transportation and unplanned stock piling of construction materials can also cause inconvenience to road users and surrounding communities. Renovation of the emergency section of the existing hospitals may induce risks to health and safety of the patients along with OHS of the project workers more also possibly for attending the COVID-19 patients. Blood, human tissues, medical and other health care wastes, generated during operation phase of the emergency care units, need to be disposed of properly. Suggestive mitigations measures responding to the risks and anticipated impacts have been included in the ESMF which would be finalized during site specific assessment.

21. **Social risks and impacts.** Potential social risks of the project are associated with the activities for improvement of selected highway sections and modification of junctions, some of those may require small scale acquisition of private land and repossession of existing public land leading to involuntary physical and economic displacement of titled and non-titled affected persons including informal settlers/occupiers. Given the scope of civil works, about 15 hectares of land may be acquired affecting about 400 households. Besides, there will be works for renovation and refurbishments of existing facilities,



in addition to studies, policy work and automation of related services. The small-scale civil works, at specific locations for improvement highway sections, junctions, and construction of highway police training center, is anticipated to induce labor influx of smaller number (max 100 at a given point of time). The associated risk of Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH) will therefore be “low” (para **Error! Reference source not found.**) at the works sites and surrounding communities. In addition to complexity in land acquisition and requirement of rehabilitation of affected persons, the social risk is relevant about institutional capacity of the implementing agencies on E&S management, community health and safety, labor and working conditions (including OHS), gender and vulnerability. Under the COVID-19 situation, improvement of trauma care facilities in existing hospitals may risk the patients’ and project workers of contraction. The social risks also arise because often the road crash victims are the main bread earners of the poor families. However, the specific risks and impacts of project activities will be known at the implementation level when detailed project reports (DPR) will be prepared and works packages are ready for bidding. Given the activities will be limited on the existing highways and in urban centers, adverse impact on small ethnic communities of indigenous status is unlikely. The vulnerable section of the communities and affected persons will equitably be engaged in identification, design, and implementation of site-specific activities.

22. **SEA/SH Risks.** A preliminary assessment of SEA/SH risks of the Project using the Bank’s Good Practice Note (GPN) on sexual exploitation and abuse (SEA) and sexual harassment (SH) in projects with major civil works suggests a ‘low’ rating. This is due to project sites being distributed within urban, peri-urban, and rural areas along the highways, which are not hard to supervise, and the small scale of labor influx (up to 100 workers at one site at a time). However, the non-local workers may reside in the labor camps at project sites. Sites in peri-urban and rural areas will potentially be near school routes or pedestrian access that women and girls use for their daily activities, may induce the SEA/SH risks in the adjacent communities. Furthermore, lockdowns in the aftermath of COVID-19 exacerbate the risks. In response to the potential low risk, the project will incorporate proportional preventive measures, i.e., raising awareness among the beneficiary communities, stakeholders and the PIUs. The risk will be reassessed when more information on labor influx and displacement of informal settlers and land acquisition becomes available. The preventive measures will be included in the Gender Action Plan activities will include mapping of service providers, signing CoC, and training for the workers as well as capacitate GRM to deal with project related GBV/SEA/SH complaints.

23. **E&S management adopts a framework approach.** Although the tentative sites for key project activities have been proposed, exact location of the activities will be known, and design of the interventions will be available at the implementation level only. Therefore, specific locations, extent, magnitude, and duration of E&S impacts will be identified only during implementation of the project. Responding to this approach, an Environmental and Social Management Framework (ESMF) and a Resettlement Framework (RF) have been prepared to guide E&S assessment of works sites during implementation including land acquisition, involuntary resettlement and construction related E&S impacts and their management. The ESMF will guide preparing site specific E&S Management Plans (ESMPs) and the RF will guide preparation of Resettlement Plans (RPs) of works sites. The RPs will be prepared for compensation and rehabilitation of affected persons on the principle of replacement cost (current market price plus titling and transaction cost as defined in the ESS5) and supporting relocation and livelihood restoration irrespective of tenancy status (legal owners of private land and formal and informal users of public land). The project has also prepared Stakeholders Engagement Plan (SEP) and



Labor Management Procedures (LMP). A Grievance Redress Mechanism (GRM) has been designed building on the Government’s centralized Grievance Redress System (GRS) responding to E&S related grievances and any GBV complaints. The client has also agreed with the Bank, the E&S Commitment Plan (ESCP) for assessment and management of E&S risks during identification, design, and implementation of subprojects. A sum of BDT 8,380 million has been proposed in the RF for LAR management that will be met from borrower finance. The ESMF includes a negative list for any contingent emergency response (CER) work. The ESMF will be updated with an addendum when CER is activated.

## **E. Implementation**

### Institutional and Implementation Arrangements

24. A National Road Safety Project Implementation Unit (PIU) will be established by the Ministry of Road Transport and Bridges in coordination with the Ministry of Health and Family Welfare and Ministry of Home Affairs. The PIU will be headed by a National Project Director (NPD) and supported by Technical Specialists, Financial Management Specialist, Procurement Specialist, Social and Environmental Specialists, Accountant and Administrative Assistants. Under the national PIU there will be four Additional Project Directors (APD) on deputation from each of the implementing agencies: Roads and Highways Department (RHD), Bangladesh Road Transport Authority (BRTA), Ministry of Health and Family Welfare (MoHFW), and Traffic Police, Ministry of Home Affairs (MoHA). The APDs will assist the national PD for satisfactory implementation of the project activities under their purview, including compliance with procurement, fiduciary and safeguard requirements. The National PD will be supported by Project Management Consultants (PMC) for regular supervision, monitoring and reporting of project activities including the coordination of pilot initiatives involving multiple implementing agencies.

25. The PIU structure will be supported by a Project Implementation Committee (PIC) which will include technical heads of all involved implementing agencies to support working-level coordination across all agencies and to provide the linkages and updates of the project-financed activities to the secretariat of the National Road Safety Council. At an executive-level, a Project Steering Committee (PSC) will oversee the overall project headed by the Principal Secretary to the Honourable Prime Minister with participation from the secretaries of the three concerned ministries. Further details of implementation arrangements are provided in Annex 1.

26. For the Contingent Emergency Response Component (CERC), GoB will prepare an “Emergency Response Operations Manual” (EROM) acceptable to the Bank, which will constitute a disbursement condition for the CERC. RTHD is expected to be the implementing agency for the CERC component, unless the EROM specifies otherwise.

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