



## Response to Public Consultation Comments

**Project Name:** Sebzor Hydropower Project

**Project Sponsor:** Pamir Energy Co.

**Public Comment Period:** 23 December - 23 February 2023

**Report Author:** Joerg Hartmann

**Report Date:** March 2023



## Summary

Assessment details	Sebzor Hydropower Project (HPP) was assessed in its Preparation stage against the Hydropower Sustainability Standard. The assessment was conducted by Joerg Hartmann, Zaglul Khandkar, Nur Khairin Binti Bujang and Mohd. Firdaus Bin Ibrahim. The on-site assessment took place on 30 September – 5 October 2022.
Project details	Sebzor HPP is an 11 MW run-of-river project on the Shokhdara River in the south-western part of Gorno-Badakhshan Autonomous Oblast (GBAO) region of Tajikistan. The project sponsor is Pamir Energy Co.
Assessment report	Assessment report is available on the HS website following <a href="#">this link</a> .
Purpose of this Response Document	<p>In accordance with the HS Assurance System, the project’s HS Standard assessment report undergoes a 60-calendar day public comment period. At the close of the public comment period, a 30-calendar day period is available for the Accredited Assessor to respond to comments and revise the report in conjunction with the Project Proponent. The Assessor must respond to each comment, and to make a justified determination on whether there is a need to amend any parts of the report.</p> <p>In the event that the Accredited Assessor identifies the need to amend the report in response to comments, the amended report is published within 30 days on both the Project Proponent’s website, and on the HS website. The Final Assessment Report must include an annex outlining the changes made/not made in response to comments received.</p> <p>This response document represents compliance with Section 5 of the HS Assurance System.</p>
Approach to Consultation	<p>The 60-calendar day period for public comment on the Sebzor HS Standard assessment report run from 23 December 2022 – 23 February 2023. The preliminary assessment report was published on 23 December 2022 on <a href="#">HS website</a> and on Pamir Energy website in <a href="#">English</a> and <a href="#">Russian</a>. The report was placed in strategic areas for project affected communities to provide comments, photographic evidence is available <a href="#">here</a>.</p> <p>Within the consultation period, only one person submitted comments on the Sebzor HS Standard assessment report.</p>
Conclusion	The assessors concluded that the assessment report does not need any amendments. The assessment report will remain available on the HS website <a href="http://www.hydrosustainability.com">www.hydrosustainability.com</a> in its original form.
Layout of this Response Document	This document consists of three sections. Section 1 includes general comments, which do not directly correspond to specific sections of the HS Standard; Section 2 contains responses to comments related to

	specific sections of the HS Standard; and Section 3 indicates whether the report needs amending. Annex I contains a full set of original comments received.
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## 1. Response to General Comments

Table 1 below presents issues raised, which do not refer to specific sections of the HS Standard. Issues have been paraphrased and summarised. Annex I contains a full set of original comments received.

**Table 1 – Responses to general issues**

General issues	Assessor Response
<p>There are 64 entries on community health and safety (CHS), but very minor number of entries relates to ecosystem health. There is no reference to CHS under resettlement, even though resettlement may have significant mental health implications - on the whole, this score points to a satisfactory coverage of CHS issues.</p>	<p>Given the project’s small footprint and largely temporary impact on ecosystem health, there did not appear to be significant human health issues related to ecosystem health. Mental health did not appear to be an issue in this particular resettlement program. Almost all households will resettle within their own villages, in significantly better living conditions, and with close personal contact to the social team of PEC. Note however, that we find a gap under Outcomes, related to the generally somewhat generic approach to public health.</p>
<p>There is no reference to safely managed drinking water supply and safely managed sanitation in the assessment report. This appears to be an omission in a water project. Will the resettled people be supplied with groundwater extracted drinking water, and what will their sanitation facilities be like?</p>	<p>Water supply for villages generally comes from surface intakes (springs, tributary creeks) at higher elevations and quality is not a concern. In the one village (Barjingal) where quality and reliability was a concern, the project will improve the system (as a voluntary benefit sharing measure, rather than as a mitigation measure for a negative impact). All resettlement homes and the school will also receive improved sanitation facilities such as bathrooms and septic tanks. Despite these improvements, note that water quality monitoring is still considered a gap, with a pragmatic solution agreed in the Action Plan.</p>
<p>For this hydropower project the assessment is correct that Community Health and Safety are dealt with adequately; there are gaps that may need to be addressed as after-the-fact-repair, and there are lessons learned to further improve the health component in future assessments. An important consideration is that of</p>	<p>Agreed. While the rather generic treatment of public health issues in the ESIA was considered just sufficient to meet Minimum Requirements, given the limited health risks in this particular project, to meet Advanced Requirements would have required a more thorough and comprehensive assessment. Even the positive impacts</p>

covering both health risks and health opportunities - the latter can contribute significantly to the sustainability of projects. It is also important for due diligence of project planning that the criteria applied at the screening stage (to decide whether a health impact statement, an HIA embedded in EIA, or a full, stand-alone HIA is needed) are clearly defined with respect to the full scope of a project, bearing in mind that the boundaries for health impacts do not necessarily overlap with those of environmental impacts.

on public health that the project will have, are not really the result of identifying specific opportunities for health; rather they are side effects of water and sanitation investments.

## 2. Response to HS Standard section-specific comments

Table 2 below presents issues raised, which are related to specific sections of the HS Standard. Issues have been paraphrased and summarised. Annex I contains a full set of original comments received.

**Table 2 – Responses to HS Standard section-specific issues**

Section-specific issues	Assessor Response
<b>HSS-2: Labour and Working Conditions</b>	
There is a strong legal framework in Tajikistan for occupational health and safety, capacity to enforce the law through pre-project assessments and inspections on the ground may be limited though.	Inconsistent application of labour standards is mentioned as an issue in Tajikistan more generally, but was not found in PEC. We were told by public officials that OH&S inspections do happen but that inspectors will focus on companies and construction sites with weaker procedures and higher risks.
In the background for this section reference is made to the transmission lines. Depending on the nature of these transmission lines, electromagnetic radiation for communities living under the powerlines may be a health issue, but it is also very well possible (as this is a thinly populated area) that there are no communities at risks. The issue needs referencing.	The TL from the power station to Khorog substation does not run along the valley where people would be exposed, but along a ridge line. This is mentioned in the report: "Other than potential low-level noise and EMF impacts, no issues have been identified for the operations phase. These are mainly addressed through design solutions, e.g. the transmission line runs mostly at a distance from settlements."
Reference to COVID-19 as a workforce risk seems to cater to the "flavour of the month" in public health: at the same time a potentially serious risk for the 75-150 non-local workers of Sexually Transmitted Infections (STIs) is not brought up.	We mention the risk of contagious diseases from community-workforce interactions in the Action Plan. These would include both 'traditional' diseases such as STDs as well as novel ones such as Covid-19. Covid-19 was a particular concern for Pamir Energy because it can lead to interruptions of power supply and of construction of new projects. (Please note, that we do find a gap under Outcomes - more could have been/be done to understand and manage health impacts.)
There is reference to two health staff on site (a safety office and a trained nurse), but there is no mention of preventive measures	These are part of the measures that were assessed as necessary in the ESIA and covered in the ESMP and contractor tender documents:

<p>targeting the work force (access to safe drinking water and sanitation; free access to condoms; hygiene measures include water and soap, disinfecting hand lotion).</p>	<p>“Several generic public health issues and management measures are identified in the ESIA. Community Health and Safety Plans will be required for major contracts.” (Please note, that we do find a gap under Outcomes - more could have been/be done to understand and manage health impacts.)</p>
<p><b>HSS-3: Water Quality and Sediments</b></p>	
<p>"Significant bacterial pollution in the Shokhdara River, especially in warm weather, primarily from return flows from irrigation channels." This statement is not further elaborated: what is the nature of the bacterial pollution (better terminology would be microbiological contamination), and what is the source? Return flows from irrigation and drainage normally contain chemical pollutants (pesticide residues, fertilizer); microbiological contamination usually results from run-off from areas where livestock is raised (this is alluded to in the section "Water quality issues assessment").</p>	<p>We have identified gaps both under water quality and under public health. Pollution of return flows from the small-scale irrigation canals is very likely caused by livestock, but this has not been demonstrated in the ESIA or other documentation. Local people are aware of risks and do not use irrigation water for domestic purposes.</p>
<p>"Settlements primarily use springs/groundwater as source for domestic and irrigation purposes, and river water is used only in exceptional cases." This statement is not elaborated on, and leaves open the question what is done to ensure the human rights to safe drinking water and sanitation are adequately dealt with.</p>	<p>Pamir Energy only has direct responsibility for water supply and sanitation for their workforce and for resettled people; these are dealt with adequately. As part of benefit sharing measures, the water supply to Barjingal village will be improved, which is mentioned in the report. Also, the new school will have significantly better sanitation facilities.</p>
<p><b>HSS-4: Community Impacts and Infrastructure Safety as it is presented in the Environmental and Social Action Plan</b></p>	
<p>There should be transparency about criteria applied at the screening stage to decide whether a health impact statement would suffice, whether a health component integrated in the EIA would be enough or whether a full, stand-alone Health Impact Assessment should be performed. It would still have been helpful to go outside of the HIA framework to ensure the five health categories have been properly addressed: communicable diseases, non-communicable diseases, malnutrition, accidents and injuries, and mental disorders.</p>	<p>Agreed that a more comprehensive and better documented health impact assessment would have been desirable. Note that several gaps are related to this, but again, a pragmatic solution has been identified and included in the Action Plan.</p>

The procedure for the preparation of Assessment Reports should include a consolidation of all Community Health and Safety issues at the end, to ensure the risks AND opportunities for health have been covered in a comprehensive way.

CHS issues are only one example where there is some overlap in the reporting template between different sections. This may be an issue to take note of and consider in the next update of the Standard.



### 3. Conclusions

The assessors concluded that the assessment report does not need any amendments. The assessment report will remain available on the HS website [www.hydrosustainability.com](http://www.hydrosustainability.com) in its original form.

## Annex I: Original comments received

Name	Robert Bos
Company	Independent consultant; retired staff World Health Organization; member Hydropower Sustainability Council
Job Title	Independent consultant
Comments	<p>General: there are 64 entries on community health and safety (CHS), concentrated on environmental and social assessment and management; labour and working conditions; community impacts and infrastructure safety; and, communications and consultation - a very minor number of entries relates to ecosystem health. There is no reference to CHS under resettlement, even though resettlement may have significant mental health implications - on the whole, this score points to a satisfactory coverage of CHS issues.</p> <p>General: there is no reference to safely managed drinking water supply and safely managed sanitation in the assessment report - this appears to be an omission in a water project. Will the resettled people be supplied with groundwater extracted drinking water, and what will there sanitation facilities be like.</p> <p>F. Environmental and Social Action Plan, section 4: "The health impact assessment was limited." Considering the size of the project, the low population density of the area (with a focus on the project area and the downstream area), and the limited number of families that will be displaced and resettled, it makes sense that in this case the HIA was limited. The question is not whether it was limited or not, but what criteria were applied at the screening stage to decided whether a health impact statement would suffice, whether a health component integrated in the EIA would be enough or whether a full, stand-alone HIA should be performed. There should be transparency about this critical decision at the start. It looks as if the second option was selected (HIA embedded in EIA) which explains the limited coverage of health issues as they are traditionally covered by EIA, which is justified by the condition referred to above. It would still have been helpful to go outside of the HIA framework to ensure the five health categories have been properly addressed: communicable diseases, non-communicable diseases, malnutrition, accidents and injuries, and mental disorders.</p> <p>Community Health and Safety issues are spread over Environmental and social Assessment and Management, Labour and Working Conditions, Community Impacts and Infrastructure Safety, and Communications and Consultation. The procedure for the preparation of Assessment Reports should include a consolidation of all CHS issues at the end, to ensure the risks AND opportunities for health have been covered in a comprehensive way.</p>

Section 2 Labour and Working Conditions - there is a strong legal framework in Tajikistan for occupational health and safety, capacity to enforce the law through pre-project assessments and inspections on the ground may be limited though.

In the background for this section reference is made to the transmission lines. Depending on the nature of these transmission lines, electromagnetic radiation for communities living under the powerlines may be a health issue, but it is also very well possible (as this is a thinly populated area) that there are no communities at risks. The issue needs referencing.

Reference to COVID-19 as a workforce risk seems to cater to the "flavour of the month" in public health: at the same time a potentially serious risk for the 75-150 non-local workers of Sexually Transmitted Infections (STIs) is not brought up.

There is reference to two health staff on site (a safety office and a trained nurse), but there is no mention of preventive measures targeting the work force (access to safe drinking water and sanitation; free access to condoms; hygiene measures include water and soap, disinfecting hand lotion).

Section 3 Water Quality and Management -

"Significant bacterial pollution in the Shokhdara River, especially in warm weather, primarily from return flows from irrigation channels."

This statement is not further elaborated: what is the nature of the bacterial pollution (better terminology would be microbiological contamination), and what is the source? Return flows from irrigation and drainage normally contain chemical pollutants (pesticide residues, fertilizer); microbiological contamination usually results from run-off from areas where livestock is raised (this is alluded to in the section "Water quality issues assessment").

"Settlements primarily use springs/groundwater as source for domestic and irrigation purposes, and river water is used only in exceptional cases." This statement is not elaborated on, and leaves open the question what is done to ensure the human rights to safe drinking water and sanitation are adequately dealt with.

In conclusion: for this hydropower project the assessment is correct that Community Health and Safety are dealt with adequately; there are gaps that may need to be addressed as after-the-fact-repair, and there are lessons learned to further improve the health component in future assessments. An important consideration is that of covering both health risks and health opportunities - the latter can contribute significantly to the sustainability of projects. It is also important for due diligence of project planning that the criteria applied at the screening stage (to decide whether a

health impact statement, an HIA embedded in EIA, or a full, stand-alone HIA is needed) are clearly defined with respect to the full scope of a project, bearing in mind that the boundaries for health impacts do not necessarily overlap with those of environmental impacts.