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**WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR EUROPE**

MEETING OF THE PARTIES TO THE
PROTOCOL ON WATER AND HEALTH
TO THE CONVENTION ON THE PROTECTION
AND USE OF TRANSBOUNDARY
WATERCOURSES AND INTERNATIONAL
LAKES

Ad Hoc Project Facilitation Mechanism

**REPORT OF THE AD HOC PROJECT FACILITATION MECHANISM ON ITS FIRST
MEETING, HELD ON 25 JUNE 2008 IN GENEVA**

Part One: Proceedings

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**Part Two: Criteria for consideration of project proposals by
the Ad Hoc Project Facilitation Mechanism**

For practical reasons, Part Two of the present report is issued in a separate addendum (ECE/MP.WH/AC.1/2008/2/Add.1 - EURO/08/5086361/9).

INTRODUCTION

1. The Ad Hoc Project Facilitation Mechanism (AHPFM) was established by decision I/3 of the first Meeting of the Parties to the Protocol on Water and Health to help mainstream international support for national action. At the first meeting of the Parties, Norway, the lead country for this activity, was entrusted with the preparations for the first meeting of the AHPFM.
2. The meeting was attended by representatives of the following countries: Armenia, Azerbaijan, Croatia, the Czech Republic, Finland, Georgia, Hungary, Israel, Kazakhstan, Kyrgyzstan, Norway, the Republic of Moldova, Romania, Serbia, Slovakia, Switzerland, Ukraine and Uzbekistan.
3. Representatives of the following international organizations were also present at the meeting: the United Nations Development Programme (UNDP) and the Water Supply and Sanitation Collaborative Council (WSSCC).
4. Representatives of the following non governmental organizations (NGOs) participated in the meeting: Armenian Women for Health and Healthy Environment (AWHHE), International Office for Water (IOW), Eco-Forum, Women in Europe for a Common Future (WECF) and Union for the Defence of the Aral Sea and Amudarya (UDASA).

I. OPENING OF THE MEETING

5. Ms. Christina von Schweinichen, Acting Director of the Environment, Housing and Land Management Division, opened the meeting and welcomed the participants on behalf of the United Nations Economic Commission for Europe (UNECE).

II. ADOPTION OF THE AGENDA

6. The Ad Hoc Project Facilitation Mechanism adopted its agenda as set out in the document ECE/MP.WH/AC.1/2008/1 – EUR/08/5086361/3.

III. ELECTION OF THE CHAIRPERSON

7. The Ad Hoc Project Facilitation Mechanism elected Ms. Carola Bjorklund (Norway) as Chairperson.

IV. BURDEN OF WATER-RELATED DISEASE IN EASTERN EUROPE, CAUCASUS AND CENTRAL ASIA AND SOUTH-EASTERN EUROPE

8. The AHPFM Facilitator, Ms. Roisin Rooney (World Health Organization Regional Office for Europe (WHO-EURO)) gave a talk on the burden of water-related disease in Eastern Europe, Caucasus and Central Asia (EECCA) and South-Eastern Europe (SEE). She stressed that insufficient water supply and sanitation, and poor water quality continue to affect public health in several countries. More than 100 million people in the pan-European region still do not have access to safe drinking water and adequate sanitation, a situation that was unacceptable. Diarrhoeal diseases annually caused the death of an estimated 13,000 children under the age of 15 with the largest burden in the countries of Central and Eastern Europe and Central Asia. She added that chemical contamination of water might be of relevance in some areas. Governments in the region should address water and health as a higher priority in National Development Plans. Donors should also consider increasing investment in these activities.

V. EXPERIENCE OF EXISTING FINANCING MECHANISMS

9. The UNECE Co-Secretary to the Protocol presented examples of financial facilitation mechanisms established under other United Nations conventions and programmes e.g. the United Nations Framework Convention on Climate Change, the Convention on Biological Diversity, the Convention on the Transboundary Effects of Industrial Accidents and the Strategic Approach to International Chemicals Management (SAICM).

10. She noted that the communalities of the above examples included:

- (a) A clear link between the financial mechanism and the objectives of the relevant legal framework or programme;
- (b) Defined short- and long-term priorities for the financial mechanism;
- (c) Short-term priorities focusing on enabling activities that support long-term implementation and build capacity in the countries;
- (d) Adopted criteria for access to funding that underline accountability and commitment of recipient countries;
- (e) An embedded system to monitor the effectiveness of the financial mechanism.

11. Finally, she stressed that the success of such mechanisms strongly depended on the support and resources provided by donor countries.

VI. AD HOC PROJECT FACILITATION MECHANISM

12. The Chairperson presented the background of the AHPFM as well as the steps taken to prepare the first meeting. She recalled the terms of reference for the Facilitator and the Ad Hoc Project Clearing House, and outlined possible assistance needed to carry out future activities.

13. This session consisted of a discussion on the advantages of the AHPFM. Participants discussed the added value of the AHPFM under the Protocol, not only for donor countries but also for recipients.

14. There was general consensus that the AHPFM helped reduce duplication of work and improved aid effectiveness. It allowed for harmonization and coordination of the work of different donors and presented a “win-win” solution for recipients and donors, as it could help streamline work, including assessment of projects of relevance for the Protocol. The cooperative approach allows countries to undertake projects which exceed the individual funding capacity of each donor.

15. The AHPFM ensured better screening of projects and donors could still maintain direct supervision of implementation. Projects on setting targets and target dates could improve governance, an issue of concern to a number of donors.

VII. DRAFT SELECTION CRITERIA AND APPLICATION FORM

16. The AHPFM Facilitator presented an outline of the draft selection criteria and application form for consideration of project proposals by AHPFM. Criteria covered geographical scope, eligibility (e.g. applicant countries, designated focal points, NGO, international organizations, scope of projects, ownership and integration in national development efforts) and financing (e.g. arrangements for co-financing projects with potential partners).

17. In terms of eligibility, Parties would have first priority with regard to submitting projects for funding. Countries that were not yet Parties but were Signatories would be given priority over countries that had not yet signed the Protocol. However, projects could also be submitted from countries that demonstrated a strong commitment to the Protocol and the intention to ratify it. For example, a National Environmental Health Action Plan could service as proof of commitment.

18. The participants agreed that in order to coordinate the AHPFM project, there was a need to appoint at the national level an official “AHPFM focal point”. Depending on the administrative arrangements in each country, this focal point could be an individual/organization/committee with high-level authority and an official mandate for an overall project coordination. The appointed AHPFM focal point would represent the only channel through which the project proposal could be submitted.

19. Participants agreed that NGOs should be involved in the development of project proposals. However, NGOs would not be able to submit the project proposal.
20. In response to a proposal from UNDP, AHPFM agreed that the role of international organizations in the mechanism (e.g. project preparation and implementation) should also be clearly reflected in the criteria, as relevant international organizations had an important role to play. They could be involved in project proposal preparation or could be the implementing entity for projects. However, project proposals should be submitted by the official AHPFM focal point.
21. The meeting also agreed to reformulate the text of the criteria in order to spell out more clearly that target-setting and surveillance were the two priority areas for consideration of projects by AHPFM. As a second step, once targets and target dates were set, AHPFM could consider projects that supported Parties and non-Parties in achieving their targets.
22. AHPFM endorsed the amended criteria (see ECE/MP.WH/AC.1/2008/2/Add.1 - EURO/08/5086361/9) and entrusted its Chairperson to present them to the first meeting of the Working Group on Water and Health for formal adoption. At its first meeting (Geneva, 26–27 June), the Working Group adopted the criteria (see ECE/MP.WH/WG.1/2008/2 - EUR/08/5086340/12).

VIII. PRESENTATION OF PROJECT PROPOSALS ON TARGET-SETTING BY THE REPUBLIC OF MOLDOVA AND UKRAINE

23. Two draft project proposals were presented. One was presented by the representative of the Republic of Moldova, the second proposal was presented the representative of Ukraine. Both projects were related to the implementation of the Protocol, and in particular to setting targets and target dates in accordance with article 6 of the Protocol.
24. The representative of the Republic of Moldova presented a project proposal on commonly agreed targets. The Republic of Moldova had ratified the Protocol on 29 July 2005, but had not yet established national targets. Almost annually over the past 15 years, waterborne disease outbreaks had been reported. The outputs of the project proposed would be commonly agreed national targets and target dates for the establishment of (a) a reporting mechanism based on indicators, (b) a national steering committee, and (c) an action plan to be approved by the Government.
25. The representative of Ukraine presented a project proposal for setting targets and target dates. Ukraine had ratified the Protocol on 9 July 2003. Over the last five years, 37 incidents of hepatitis A had been reported in Ukraine. A total of 1,437 people were affected, including 625 children. Addressing the problems of inadequate drinking water supplies and poor-quality drinking water were a priority for the Government, and concerted action was needed from a number of sectors. Envisaged outputs included a gap analysis, agreement on a common programme supported by the main stakeholders and communication to all concerned partners.

IX. EXPRESSIONS OF INTEREST

26. The meeting discussed the two project proposals presented by the Republic of Moldova and Ukraine. The representative of Switzerland expressed interest in supporting the project proposed by the Republic of Moldova, while the representatives from Norway and Israel expressed interest in supporting the project proposed by Ukraine.

27. UNDP expressed a general interest in contributing to the AHPFM projects through its own programmes, particularly in the area of gap analyses and the formulation of national development strategies. However, as a prerequisite UNDP needed to receive a request from the government for support.

28. Israel expressed interest in supporting the AHPFM, either by sending Israeli experts to the region or by organizing training courses in Israel.

29. Potential recipient countries were invited to express their interest and intention in participating in the mechanism. Among the suggestions made were expressions of interest from Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan and Uzbekistan.

30. Kyrgyzstan had plans to address inadequate water supply and sanitation as part of the National Policy Dialogues on integrated water resources management. As strategic partner of Kyrgyzstan, UNECE would provide assistance to this country, pending the renewal of a contribution agreement between the European Commission and UNECE, to draw up by June 2009 a policy package on “sustainable water management, safe drinking water supply and adequate sanitation” and a related project proposal.

31. Currently, the National Policy Dialogues, as the operational instrument of the European Union Water Initiative, were being carried out, with UNECE as key strategic partner, in Armenia, Kyrgyzstan, the Republic of Moldova and Ukraine.

X. FUTURE WORK

32. It was agreed that awareness should be raised about the AHPFM and the opportunities and advantages it offered to donors and recipient countries. To this end, a flyer on AHPFM¹ would be produced and distributed at the World Water Week in Stockholm in mid-August 2008.

33. A letter prepared by WHO-EURO and UNECE would be sent to each country in the European region, requesting the contact details of the official focal point. This letter would be sent to the ministers of Health and of Environment in EECCA and SEE countries, informing them about the AHPFM, the outcome of this first meeting and inviting them each to nominate a

¹ http://www.euro.who.int/Document/wsn/Flyer_AHPFM_WEB.pdf

AHPFM focal point. The text would clearly explain the difference between the Protocol focal point and the focal point for the AHPFM. This latter focal point must be official and can be either a person or an institution or body. This letter would be jointly signed by UNECE and WHO-EURO.

34. The Facilitator will work to assist AHPFM focal points for Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan and Uzbekistan in developing project proposals to submit to AHPFM. These proposals might be developed in collaboration with other partners, including UNDP, the European Union Water Initiative and relevant NGOs.

XI. DATE AND VENUE OF THE SECOND MEETING.

35. The next meeting of the Ad Hoc Project Facilitation Mechanism is tentatively scheduled to be held on 1 July 2009, back-to-back with the second meeting of the Working Group on Water and Health, tentatively scheduled to be held on 2 and 3 July 2009.
