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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**

Addendum

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

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I. BACKGROUND

1. The following criteria for consideration of project proposals by the Ad Hoc Project Facilitation Mechanism were adopted by the Working Group on Water and Health, at its first meeting, held on 26 and 27 June 2008 in Geneva (ECE/MP.WH/WG.1/2008/2-EUR/08/5086340/12).
2. The Protocol on Water and Health to the Convention on the Protection and Use of Transboundary Watercourses and International Lakes was adopted in June 1999 and entered into force in August 2005. The main aim of the Protocol is to protect human health and well-being through better water management, including the protection of water ecosystems, and by preventing, controlling and reducing water-related disease. The Protocol calls on Parties to improve the quality of their water supplies, sanitation services and management of water resources, to address future health risks and to ensure safe recreational water environments.
3. Article 11 of the Protocol calls for international cooperation between Parties, not only in terms of international action to support the objectives of the Protocol, but also, upon request, in terms of implementing national and local plans in pursuance of the Protocol.
4. Article 14 covers international support for national action. When cooperating and assisting each other in the implementation of national and local plans in pursuance of article 11, Parties shall, in particular, consider how they can best help to promote:
 - (a) Preparation of water management plans in transboundary, national and/or local contexts, and of schemes for improving water supply and sanitation;
 - (b) Improved formulation of projects, especially infrastructure projects in pursuance of such plans and schemes, to facilitate access to sources of finance;
 - (c) Effective execution of such projects;
 - (d) Establishment of systems for surveillance and early-warning systems, contingency plans and response capacities in relation to water-related disease;
 - (e) Preparation of legislation needed to support implementation of the Protocol;
 - (f) Education and training of key professional and technical staff;
 - (g) Research into, and development of, cost-effective means and techniques for preventing, controlling and reducing water-related disease;
 - (h) Operation of effective networks to monitor and assess the provision and quality of water-related services, and development of integrated information systems and databases;

(i) Achievement of quality assurance for monitoring activities, including inter-laboratory comparability.

5. The Ad Hoc Project Facilitation Mechanism (AHPFM) was established by decision I/3 of the Meeting of the Parties to the Protocol (ECE/MP.WH/2/Add.4 - EUR/06/506385/1/Add.4) to help mainstream international support for national action. The AHPFM comprises two elements: the Ad Hoc Project Clearing House and a Facilitator. The objective of the Ad Hoc Project Clearing House is to advocate funding of proposals submitted through the Facilitator and identify priority activities of non-infrastructure intervention, including:

- (a) Health-related aspects of integrated water resources management;
- (b) Safe drinking-water supply and adequate sanitation;
- (c) Reduction of childhood morbidity and mortality;
- (d) Meeting the water needs of vulnerable groups;
- (e) Gender issues related to water supply and sanitation.

6. The role of the Facilitator is:

(a) To identify strategic areas of international assistance and make these available to the Ad Hoc Project Clearing House;

(b) To review and analyse project proposals submitted by countries in Eastern Europe, Caucasus and Central Asia (EECCA) and South-Eastern Europe (SEE), as well as relevant non-governmental organizations (NGOs), to address their identified priority needs;

(c) Assist EECCA and SEE countries and NGOs in drawing up project proposals to meet the requirements of donor countries and organizations;

(d) To screen, analyse and further develop project proposals in accordance with criteria to be adopted by the Working Group on Water and Health, and to present such proposals in a standardized form to the Ad Hoc Project Clearing House;

(e) To develop and manage a Web-based platform to disseminate the project proposals and keep track of the state of their funding;

(f) To conduct yearly financial reviews of AHPFM for consideration by the Working Group on Water and Health.

7. The Protocol is the first international agreement of its kind adopted specifically to attain an adequate supply of safe drinking water and adequate sanitation for all. The AHPFM could be a “win-win” solution for both donors and recipients. Benefits include reduced duplication and improved aid effectiveness, better-quality screening of projects, increased coordination and

harmonization of action, and more transparent budget control. The main advantage of the Protocol is that it brings together all players/stakeholders under a single framework encompassing environment, health, water management, agriculture, tourism and development.

8. To ensure effectiveness and to address the priority needs related to the Protocol's implementation, it is proposed that the project proposals be presented to the Ad Hoc Project Clearing House and that they fulfil the criteria below. These criteria were adopted by the Working Group on Water and Health, at its first meeting, held on 26 and 27 June 2008 in Geneva (ECE/MP.WH/WG.1/2008/2-EUR/08/5086340/12).

II. CRITERIA FOR FUNDING PROPOSALS UNDER THE AD HOC PROJECT FACILITATION MECHANISM

A. Geographic scope

9. The Ad Hoc Project Facilitation Mechanism covers the countries of EECCA and SEE.

B. Eligibility

Applicant countries

10. Parties will have first priority with regard to submitting projects for funding. Countries that are not yet Parties but are Signatories will be given priority over countries that have not signed the Protocol. Projects from countries that have not signed the Protocol will also be considered for funding, provided that the submitting country demonstrates a strong commitment¹ to the Protocol and the intention to ratify it.

Designated focal points

11. Each recipient country should appoint an official focal point² for the AHPFM. For each country, only the focal point will be entitled to submit project proposals.

Non-governmental organizations

12. Relevant and competent NGOs have an important role to play. For instance, they can be involved in the project proposal preparation or they can be the implementing entity of projects. However, project proposals have to be submitted by the official focal point for the AHPFM.

International organizations

13. Relevant international organizations, including financing institutions as well as the organizations providing secretariat services to the Protocol, can be involved in the project

¹ The country must be willing to set targets and target dates.

² It is up to each country to decide upon its own procedures for designating an official focal point for the AHPFM. The Facilitator will check that proposals are submitted through official channels.

proposal preparation or they can be the implementing entity of projects. However, project proposals must be submitted by countries' official focal points for the AHPFM.

Scope of projects

14. The provisions of the Protocol apply to surface freshwater; groundwater; estuaries; coastal waters used for recreation or for the production of fish by aquaculture or the harvesting of shellfish; enclosed waters available for bathing; water in the course of abstraction, transport, treatment or supply; and wastewater.

15. In accordance with article 4, Parties shall take all appropriate measures to achieve:

- (a) Adequate supplies of wholesome drinking water;
- (b) Adequate sanitation of a standard that sufficiently protects human health and the environment;
- (c) Effective protection of water resources used as sources of drinking water, and their related water ecosystems, from pollution;
- (d) Sufficient safeguards for human health against water-related diseases arising from the use of water for recreational purposes, aquaculture, shellfish production and irrigation;
- (e) Effective systems for monitoring situations likely to result in outbreaks or incidents of water-related disease and for responding to outbreaks or incidents of water-related disease.

16. To achieve the above-mentioned objectives, Parties shall comply with two core obligations under the Protocol:

- (a) Setting targets and target dates in accordance with article 6 of the Protocol;
- (b) Establishing surveillance, early-warning and response systems in accordance with article 8. In the first stage, the AHPFM will only consider non-infrastructure project proposals that support implementation of these two articles.

Target-setting

17. As a first step the AHPFM will consider project proposal aiming to support Parties and non-Parties in setting targets and target dates in accordance with article 6 of the Protocol. The establishment of such targets will represent the roadmap of Parties to implement the Protocol, ensuring that the Protocol's implementation is part of a country's national strategy, thereby ensuring the long-term commitment to and sustainability of efforts and allowing for the assessment of progress.

18. Prerequisites for project support also include acceptance and compliance with obligations for review and assessment of progress (article 7). Parties need to collect data on their progress towards achievement of targets. Indicators should be designed to show how far this progress has contributed towards preventing, controlling or reducing water-related disease.

19. As a second step, once targets and targets dates have been set in accordance with article 6, the AHPFM will consider projects that support Parties and non-Parties to achieve their targets.

Surveillance and early-warning systems

20. The AHPFM will also consider project proposals aiming to support Parties and non-Parties in establishing surveillance and response systems in accordance with article 8 of the Protocol. The development of such surveillance systems comes under the second pillar of the Protocol: to prevent, control and reduce water-related disease and to assess the effectiveness of implemented measures.

C. Ownership and integration in national development efforts

Government priority

21. Actions to manage water resources must be a priority of Governments. Local problems, needs and knowledge should be taken into account. A governmental strategy should be prepared and actions should be taken at the lowest possible administrative level. Governments must be committed to a review and assessment process, for example, by allocating funding or in-kind support.

Public participation

22. Commitments must be made to public participation, public awareness, education, training, research and development, and information.

Vulnerable groups

23. Special consideration should be given to people who are particularly vulnerable to water-related disease, including disadvantaged populations in rural areas, women and girls, as well as disadvantaged and socially excluded groups.

III. FINANCING

Arrangements for co-financing projects with potential partners

24. Projects should normally be financed by one or more donors. Donors may fall into one of the following categories:

- (a) Bilateral donors;

- (b) Multilateral donors;
- (c) International organizations (e.g. the United Nations Children's Fund (UNICEF), the United Nations Development Programme (UNDP), the United Nations Economic Commission for Europe (UNECE) and the World Health Organization (WHO));
- (d) International NGOs;
- (e) International financing institutions (e.g. the World Bank and the European Bank for Reconstruction and Development)
- (f) International foundations.

25. The need for one donor or several donors will depend on the project to be financed. In the case of co-funding, bilateral agreements should be developed to specify the obligations and rights between the funding partners and to clarify the role of the joint secretariat of UNECE and WHO-EURO.

IV. MONITORING AND EVALUATION OF PROJECT IMPLEMENTATION

26. Funds should be used in an efficient, effective, transparent and ethical manner. Project implementation should be monitored according to criteria developed by the donor(s).

27. The Facilitator will play a role in assessing progress reports and in ensuring that the criteria developed by donor(s) are met.
