Global Environment Facility

GEF

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July 10, 2009

Dear GEF Council Member:

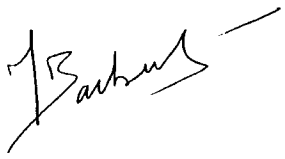
I am writing to notify you that we have today posted on the GEF's website at www.TheGEF.org, a medium-sized project proposal from UNEP entitled ***Global: Collection and Reporting Procedures for Evaluating the Continued Need of DDT for Disease Vector Control***, to be funded under the GEF Trust Fund (GEFTF).

The project aims to develop the capacity of the selected Parties to enable the provision of complete information on the production and use of DDT for disease vector control.

The project proposal is being posted for your review. We would welcome any comments you may wish to provide by July 24, 2009, in accordance with the new procedures approved by the Council. You may send your comments to gcoordination@TheGEF.org.

If you do not have access to the Web, you may request the local field office of the World Bank or UNDP to download the document for you. Alternatively, you may request a copy of the document from the Secretariat. If you make such a request, please confirm for us your current mailing address.

Sincerely,



Copy: Alternates, GEF Agencies, STAP, Trustee

REQUEST FOR CEO ENDORSEMENT/APPROVAL

PROJECT TYPE: Medium-sized Project
THE GEF TRUST FUND

Submission Date: July 07, 2009

PART I: PROJECT INFORMATION

GEFSEC PROJECT ID: 3349
GEF AGENCY PROJECT ID:
COUNTRY(IES): Global (Eritrea, Ethiopia, Madagascar, Mauritius, Mozambique, Morocco,. Namibia, Senegal, South Africa, Swaziland, Uganda, Yemen, Zambia, Gambia).
PROJECT TITLE: Establishment of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.
GEF AGENCY(IES): UNEP
OTHER EXECUTING PARTNER(S): WHO, MINISTRIES OF HEALTH IN THE PARTICIPATING COUNTRIES
GEF FOCAL AREA(S): Persistent Organic Pollutants (POPs)
GEF-4 STRATEGIC PROGRAM(S): SP-1 (Strengthening Capacities for NIP implementation)
NAME OF PARENT PROGRAM/UMBRELLA PROJECT: Demonstrating and Scaling-up of Sustainable Alternatives to DDT in Vector Management Global Programme (Global DSSA Programme), cleared by GEF CEO and approved by April 2008 GEF Council.

Expected Calendar	
Milestones	**Dates**
Work Program (for FSP)	(actual)
Agency Approval	September 2009
Implementation Start	January 2010
Mid-term Evaluation (if planned)	July 2011
Project closing date	December 2012

PROJECT FRAMEWORK (Expand table as necessary)

Project Objective: To develop the capacity of the selected Parties to enable the provision of complete information on the production and use of DDT for disease vector control.

Project Components	Indicate whether Investment, TA, or STA**	Expected Outcomes	Expected Outputs	Indicative GEF Financing*		Indicative Co-financing*		Total ($) c=a+b
				($) a	%	($) b	%	
1. Identification and strengthening through the development of institutional infrastructure of a central institution responsible for proper registration and regular reporting of data related to import/export/local formulation of DDT, the local application, areas of application, details of the field campaigns, impacts, etc.	STA	Identified central institutions in project countries strengthened and able to report DDT use, production etc. in an adequate way	- Names and contact details of responsible institutions in project countries - letter of commitment from each institution to register and report according to the requirements - at least 14 institutions received equipment, materials, other support as deemed relevant and training as part of strengthening - Institutional infrastructure	250,000	50	250,000	50	500,000

			for reporting in each country developed and operational - Guidelines for reporting developed and provided to identified institutions					
2. Training of spray team leaders and regional support teams on field data collection and reporting (Regional cascade training to develop critical mass for Parties).	STA	Spray Team leaders and regional support teams trained	-Regional cascade trainings developed and successfully held -Participants attend training sessions and receive training materials	150,000	75	50,000	25	200,000
3. Follow up activities to institutionalize training activity as routine in-service training within national vector control programmes	STA	Training institutionalized as routine in-service training within national vector control programs	-Training materials produced and handed over to national vector control programs in project countries -National training curriculum for vector control programs adapted	30,000	60	20,000	40	50,000
4. Training in resistance monitoring activities and establishing / strengthening vector resistance monitoring infrastructure in 12 countries	STA	Countries able to monitor chemicals resistance of vector in an adequate way	- Regional trainings on resistance monitoring developed and held - Participants attend training sessions and receive training materials - Country monitoring infrastructure developed and operational in each project country	200,000	50	200,000	50	400,000
5. Establishment of cross-sectoral alliances and implementation of guidelines for data collection and sharing between relevant government and non-government agencies	STA	Cross sectoral alliances established and guidelines implemented	- support to inter sectoral working groups is provided in all project countries in order to allow data sharing and implementation of guidelines	45,260	36	80,000	64	125,260

6. Project coordination and management		76,140	50	76,140	50	152,280
Independent Mid Term Review and Terminal Evaluation		10,000	50	10,000	50	20,000
Total project costs		761,400	53	686,140	47	1,447,540

* List the $ by project components. The percentage is the share of GEF and Co-financing respectively to the total amount for the component.

** TA = Technical Assistance; STA = Scientific & technical analysis.

A. SOURCES OF CONFIRMED CO-FINANCING FOR THE PROJECT (expand the table line items as necessary)

Name of co-financier (source)	*Classification*	*Type*	*Amount ($)*	*%**
Project Government contribution	Nat'l Gov't	In-kind	351,140	51
WHO	Multilat. Agency	In-kind	335,000	49
Total Co-financing			686,140	100%

* Percentage of each co-financier's contribution at CEO endorsement to total co-financing.

B. FINANCING PLAN SUMMARY FOR THE PROJECT ($)

	Project Preparation a	*Project b*	*Total c=a+b*	*Agency Fee UNEP*	*Total at CEO Endorsement*	*For the record: Total at PIF*
GEF	0	761,400	761,400	76,140	837,540	837,540
Co-financing	0	686,140	686,140		686,140	655,000
Total	0	1,447,540	1,447,540	76,140	1,523,680	1,492,540

D. GEF RESOURCES REQUESTED BY AGENCY(IES), FOCAL AREA(S), AND COUNTRY(IES)

GEF Agency	*Focal Area*	*Country Name/ Global*	*(in $)*			
			Project Preparation	*Project*	*Agency Fee*	*Total*
UNEP	POPs	Global	0	761,400	76,140	837,540
(select)	(select)					
(select)	(select)					
(select)	(select)					
(select)	(select)					
(select)	(select)					
Total GEF Resources			0	761,400	76,140	837,540

***** No need to provide information for this table if it is a single focal area, single country and single GEF Agency project.

E. CONSULTANTS WORKING FOR THE TECHNICAL ASSISTANCE COMPONENTS

Component	*Estimated person weeks*	*GEF($)*	*Other sources ($)*	*Project total ($)*
*Local consultants**	116	81,500	0	81,500
*International consultants**	37,5	0	100,000	100,000
Total	93,5	81,500	100,000	181,500

* Provide detailed information regarding the consultants in Annex 4.

F. PROJECT MANAGEMENT BUDGET/COST

Cost Items	*Total Estimated person weeks*	*GEF ($)*	*Other sources ($)*	*Project total ($)*
*Local consultants**	39	0	31,140	31,140
*International consultants**	39	63,000	45,000	108,000
*Office facilities, equipment, vehicles and communications***		13,140	0	13,140
*Travel***				
Total	39	76,140	76,140	152,280

* Detailed information regarding the consultants is provided in Annex 4.

** Detailed information and justification for these line items: Office facilities of WHO HQ, Geneva will be used. The project budget will be charged pro ratio for this project. The same applies for office equipment, international communications, international travel, etc. WHO and UNEP have agreed upon a maximum of 10 % PSC for all projects included in the DSSA Program.

G. DOES THE PROJECT INCLUDE A "NON-GRANT" INSTRUMENT : NO.

H. DESCRIBE THE BUDGETED M&E PLAN:

Monitoring and evaluation efforts are a fundamental part of this project. On one level, it is clearly necessary to monitor and evaluate the activities and outcomes that are directly related to this project in order to ensure that the project is carried out as planned and that it achieves its desired results. Thus, achieving the primary project objective of promoting improved reporting procedures and practices in the 14 project countries relies heavily on the project's ability to promote consistent and reliable M&E within and even beyond the scope of this particular project. Activities and envisaged results related to improving procedures and guidelines for better reporting about the use, import etc. of DDT use in malaria vector control are described elsewhere in this proposal. This section focuses directly on monitoring and evaluating activities within the scope of this project.

The Steering Group will be responsible for M&E. The Logical Framework (Annex 1) describes the rationale underlying the project and provides the basis for a results-based monitoring and evaluation strategy, which is presented in detail for M&E in the table below. Monitoring and evaluation activities are intended to assess the impact of the development and implementation process on a number of key objectives and outcomes. These activities will take place at several stages throughout the project cycle. The project team will be responsible for several M&E activities, with WHO taking a lead role in these efforts. In addition, a Mid-Term Evaluation (by an external independent evaluator) and a Terminal Evaluation (by an external independent evaluator) will be undertaken. A detailed budget for these M&E activities is presented at the end of this section.

<u>Internal evaluation: Surveys and Interviews</u>

WHO will have primary responsibility for carrying out evaluation activities that will measure the impact of the development and implementation on key outcomes. These evaluation activities focus on tracking stakeholders' use of and satisfaction with the procedures and guidelines provided and the capacity strengthening in general, using a series of surveys and interviews conducted at various stages of the project's development. In particular, the selected central entity in charge of registration DDT use, production, import etc. will be surveyed in each country at the initiation of project activities (baseline), mid-way through Mid-Term Evaluation, and following complete project implementation (Terminal Evaluation). These surveys and interviews will assess the following outcomes:

- Are DDT reporting procedures and guidelines informed by evidence from a variety of cross sectoral sources?

- Are sustainable reporting links established with both WHO and the Secretariat of the Stockholm Convention?
- What is the level of collaboration between the various sectors in generating, collecting, and reporting relevant data within the framework of this project?
- What is the level of international communication between DDT applying countries in the project area/region (regional information exchange)?

WHO will also conduct interviews with the NIPs Coordinating Committee and Stockholm Convention Focal Points in each country during project implementation and following project completion in order to assess the effects of the project on NIPs formulation and implementation activities.
WHO will during the project implementation and after the first reportings have taken place, asses as well the level of satisfaction with the end-user of the data (Secretariat of the Stockholm Convention) in order to identify as early as possible eventual modifications in the reporting procedures and guidelines as well as to tackle practical inefficiencies.

Mid-Term Evaluation
The key role of the **Mid-Term Evaluation** will be to verify that the project has been successfully started up in **all** project countries according to the Work Plan and whether the project is on schedule. It will as well identify potential problems and areas for improvement as the project enters its next phase.
Independent Mid-Term Evaluation will be executed by an external consultant to be selected in collaboration between UNEP and WHO, and to be contracted by UNEP.

External M&E: Terminal Evaluation
In addition to the internal evaluation activities, an independent evaluator will conduct Terminal Evaluations to assess the progress and impact of the project team's efforts. The **Terminal Evaluation** will occur at 36 months. The Terminal Evaluation will have to confirm whether the capacity building efforts have resulted in a proper and complete multi sectoral provision of data related to DDT use, application, etc. for malaria vector control in all project countries and that collected data is properly and timely channeled to the Secretariat of the Stockholm Convention for further assessment. The Terminal Evaluation will as well provide a more general review of the success of the completed project and assessing the potential and need for replication in relevant countries.
Independent Terminal Evaluation will be executed by an external consultant to be selected in collaboration between UNEP and WHO, and to be contracted by UNEP.
The table below provides a detailed budget for the M&E activities described above. There are two sets of activities:

1) **Surveys** of NIP Coordination Committees and Stockholm Convention Focal Points – surveys in each of the 14 project countries conducted by project team;
2) **Mid-Term Report** – conducted by independent evaluator with focus on only a few selected countries; **Terminal Evaluation** – conducted by independent evaluator with focus on a few selected countries but including all available relevant reporting information from all project countries.

As mentioned above, the surveys and interviews the project team will conduct (Item 1) will often coincide with other project development activities. Thus, the staff time and other items listed in this budget represent the *incremental* costs associated with adding the M&E component to other project activities. Total incremental costs for conducting the survey component of M&E are estimated at $10,500, while the incremental budget for interviews with NIPs Coordinating Committees is $4,500. In addition, the budget for the external Mid-Term Report is $8,000, and the Terminal Evaluation is

budgeted at $12,000. Total monitoring and evaluation costs for this project are $35,000, which are not part of Project Management costs.

Detailed Budget for M&E Activities

ACTIVITY	COMPONENTS	COST	
1. Interviews with NIPs Coordinators and SC National Focal Points	(Incremental) **Staff Time** to develop M&E questions and conduct interviews, report	30 days @ $500/day=	$15,000
Total budget for Interviews			**$ 15,000**
2. Mid-Term Report (Independent Evaluator)	**Consultant fee** for external evaluator	10 days @ $500/day=	$5,000
	Travel for external evaluator to a selection of project countries		$3,000
Total budget for Mid-Term Report			**$8,000**
3. Terminal Evaluation (Independent Evaluator)	**Consultant fee** for external evaluator	14 days @ $500/day=	$7,000
	Travel for external evaluator to a selection of project countries		$5,000
Total budget for Terminal Evaluation			**$12,000**
TOTAL COSTS:			**$35,000**

PART II: PROJECT JUSTIFICATION

A. STATE THE ISSUE, HOW THE PROJECT SEEKS TO ADDRESS IT, AND THE EXPECTED GLOBAL ENVIRONMENTAL BENEFITS TO BE DELIVERED:

Background

Given the uncertainties associated with the use of DDT, there is urgent need to monitor its production and use to establish its continued need for disease vector control. Paragraph 4, Part II of Annex B of the Stockholm Convention on persistent organic pollutants states that 'every three years, each Party that uses DDT shall provide to the Secretariat and the World Health Organization information on the amount used, the conditions of such use and its relevance to that Party's disease management strategy, in a format to be decided by the Conference of Parties (COP) in consultation with the World Health Organization (WHO)'. Concomitantly, paragraph 6, Part II of Annex B requires that 'the Conference of the Parties shall, in consultation with the WHO, evaluate the continued need for DDT for disease vector control on the basis of available scientific, technical, environmental and economic information…'

In paragraph 4 of its decision SC-1/25 made at its first meeting in 2005, the COP adopted the format and questionnaire contained in annex III to the decision by which Parties that produce, use, export, import or maintain stocks of DDT are to inform the Secretariat of the Stockholm Convention (SSC) in order to assist the COP in its evaluation in the continued need for DDT in disease vector control. This questionnaire was revised and simplified by the Secretariat and the COP, at its third meeting in 2007, adopted the new format.

Further, in paragraph 7 of decision SC-1/25, based on the recommendations from the first meeting of the Expert Group that assessed the global information collated on DDT, the COP concluded that 'sufficient capacity at the national and sub-national levels is necessary for effective implementation, monitoring and impact evaluation (including associated data management) of the use of DDT and its alternatives for disease vector control, and recommends that the financial mechanism of the Convention support activities to build and strengthen such capacity as well as measures to strengthen relevant public health systems.' The GEF is now the interim principal financial mechanism of the Convention to which capacity building and efforts to reduce the need for DDT are priority areas to be addressed for funding.

This project aims at providing support to activities in order to build and strengthen such capacity.

The COP further requested the Secretariat in collaboration with the WHO to undertake, subject to the availability of funds, activities for strengthening the capacity of Parties as referred to in paragraph 8 (b) of the note by the Secretariat (UNEP/POPS/COP.2/4) on evaluation of the continued need for DDT for disease vector control and alternative strategies to replace DDT.

These activities are to be in accordance with Section 3.2 of document UNEP/POPS/COP.2/INF/3 concerning a proposal for reporting on and evaluating the use of DDT and its alternatives for disease vector control which was prepared by the WHO in cooperation with the UNEP and the Secretariat of the Stockholm Convention based on a request made in decision SC-1/25. The WHO currently works closely with Ministries of Health in malaria endemic countries by providing technical support for establishing regimes for controlling the malaria disease and by extension the malaria vector. The training activities will be undertaken by the technical team of the WHO working in collaboration with the central and regional health teams in the targeted countries. The Secretariat of the Convention and UNEP will provide support during these training activities by improving the understanding of the

process, the critical role being played by the trainees in satisfying the obligations of the Convention and how the information being collected can impact positively on vector control in the future.

The WHO, based on a request by the COP in its decision SC-1/25 section 8, conducted a study of the data collection and reporting procedures for DDT from five countries. This study concluded that the following priority areas required attention:

1. Lack of or inadequate insectaries and associated capacities for entomological evaluations
2. Ineffective capacities for spray team supervision
3. Inadequate capacities for stock management of DDT and other pesticides
4. Weak capacity for data management
5. Weak inter-sectoral collaboration

In addressing these issues, at its second meeting, in paragraph 5 of its decision SC-2/2, the COP re-affirmed that 'capacity strengthening is necessary for Parties adequately to collect data and report on DDT production and use.

During the initial data collection and evaluation on DDT use that was completed at the first COP in 2005, the response by Parties to the request for information was poor and even the completed questionnaires received had major gaps in information. The poor response and paucity of information received during the first evaluation of DDT use continued during the second evaluation undertaken for the third COP in May 2007. The initial objective of this set of activities would be to improve the reporting performance for the third evaluation of DDT use to be undertaken at the fourth COP in 2009. To maximize the effect of the exercise, 14 countries from the countries of the attached list (Annex 2; all of them the WHO AFRO Region and WHO EMRO Regions) are selected based on known or intended DDT use for health purposes, poor current reporting procedures and infrastructure and supported by their endorsement of participation in the exercise (This project should be considered as a Global Project and as such and in line with the GEF regulations there are no Endorsement Letters attached to this proposal. However, several countries of this project have endorsed the project in writing. A full set of endorsement Letters can be obtained after the first 6 months of project implementation).
China (a well known producer of DDT) is not using DDT in the Health Sector and is as such not included in the list.
Other countries which have reported intended use of DDT include Marshall Islands and Myanmar.
Marshall Islands is already for a long period of time not using DDT but has registered its intended use of DDT in case climate change might cause a return of malaria to this country in future[1].
All malaria vectors in Myanmar are resistant to DDT[2]. However, seen the seriousness of malaria in the country, Myanmar has registered its possibility to apply DDT.
India is one of the main producers and users of DDT in the Health Sector globally. Seen its specific status, India will be included in a specific project("India: Reduction in the use of DDT by Enhancing Capabilities for the Implementation of Vector Management"), part of the global UNEP/WHO programme on demonstration of feasible alternatives to DDT in malaria vector control (Program outline soon to be submitted to GEF Council for approval).
DPR Korea is reportedly producing DDT and using DDT in agriculture. Seen the specific nature of this issue in this country, it is preferred to leave DPR Korea outside the project.

It is envisaged that given the success achieved in improving the flow of information on DDT production and use, further activities will be carried out subsequent to the third evaluation in 2009 to inform **all** relevant Parties globally to ensure that comprehensive and comparable data sets are achieved to make periodic informed decisions on the continued need of DDT for disease vector control.

[1] Source: Draft NIP, May 2007.
[2] Source: http://www.rbm.who.int/wmr2005/profiles/myanmar.pdf

All proposed project countries have ratified the Stockholm Convention.

Project rationale

After substantial progress in battling the spread of malaria in the 1960s and 1970s, the number of reported malaria cases and the geographic extent of the disease have both grown dramatically over the last two decades. Malaria is one of the greatest health challenges facing the developing world. World Health Organization (WHO) data indicate that malaria causes over 1 million deaths per year, with over 90% of those deaths occurring in sub-Saharan Africa.[3] Malaria causes over 300 million acute illnesses each year. Children account for over three-quarters of these cases, and malaria kills an African child every 30 seconds.[4] Beyond mortality losses, malaria imposes devastating costs on local economies, both through direct costs of treatment and prevention and indirect costs of lost productivity. This burden is especially great in the tropical developing world where malaria most often occurs.[5] A widely cited study by Gallup & Sachs estimated that malaria was responsible for lowering economic growth by 1.3% per person per year in malarial areas, controlling for a range of other factors.[6] The increase in the burden of malarial disease has stimulated a range of operational, research, financial, and policy responses.

Several different factors may account for the rising burden of malaria. In some countries, anti-malaria efforts (including but not limited to spraying of DDT) have been curtailed or their effectiveness diminished. In addition, activities that change land use patterns, such as deforestation, road building, irrigation for farming, livestock agriculture, and mining, may place humans in areas with naturally high endemism of mosquitoes and create new endemic areas. The movement of human communities into newly cleared areas correlates with exposure to *Anopheles* mosquito populations. Furthermore, factors such as climate, geography, and rainfall seasonality contribute to the growth of mosquito populations, which in turn drives the transmission of malaria. Meanwhile, global warming and the increasing globalization of both commerce and migration/travel patterns may foster the spread of malaria vectors into new ranges both within and outside the tropics.[7]
According to the recently submitted Final Report of the AIACC Project [8], observations of numbers of malaria cases vary with interannual variations in climate: Certain areas in Africa which experienced significant anomalies in temperature and rainfall were confronted with severe malaria outbreaks. Projected changes in rainfall and temperature have the potential to expose more people to vector-borne diseases by expanding the geographic range of vectors into new areas, increasing the area of suitable habitats and numbers of disease vectors in already endemic areas, and extending transmissions seasons. Even more important is the linkage between climate change and socio-economic factors (causing stress derived from interaction between environmental, demographic. social, economic, institutional, political, cultural and technological processes). Research (of other parts in the world) confirm the link between climate variability and the incidence and severity of malaria epidemics.

[3] World Health Organization. 2002. Roll Back Malaria Program brochure: "What is Malaria?" Available: http://www.who.int/inf-fs/en/InformationSheet01.pdf
[4] Ibid.
[5] ---. 2003. Roll Back Malaria Program Fact Sheet #94 “Malaria in Africa”. Available: http://www.rbm.who.int/cmc_upload/0/000/015/370/RBMInfosheet_3.htm.
[6] Gallup JL, Sachs JD. 2001. The economic burden of malaria. Am J Trop Med Hyg 64(1-2):85-96.
[7] Balbus JM, Wilson ML. 2000. Human Health and Global Climate Change; A review of potential impacts in the United States. Washington, DC:Pew Center on Global Climate Change, Martens WJ, Niessen LW, Rotmans J, Jetten TH, McMichael AJ. 1995. Potential impact of global climate change on malaria risk. Environ Health Perspect 103(5):458-464.
[8] Assessment of Impacts and Adaptation to Climate Change, final Report of the AIACC Project; a global Environment Facility Enabling Activity in the climate Change Focal Area, Project No. GFL-2328-2724-4330, December 2007.

Any sustainable malaria control program will need to strategically address a complex range of environmental and social determinants in a cost-effective manner.[9] Because different causal factors are important in different places, control programs need the flexibility to adjust their strategies as the relative impact of these causal factors changes.

Anti-malaria programs can include two very different sets of approaches: treating the disease or treating the vector.[10] Treating the disease includes prophylactic use of anti-malarial medication, early diagnosis and treatment, presumptive and preemptive treatment, and [as yet undeveloped] vaccines. Many areas of the world now host malaria parasites that are resistant to the early, anti-malarial medications.[11] For example, resistance to chloroquine is common across Africa.[12] The prevailing alternative to chloroquine, sulphadoxine-pyrimethamine (SP), is showing increasing failure rates[13] and some countries have announced their intentions to switch to the more expensive artemisinin combination therapy (ACT) for disease treatment.[14] The complementary approach, treating the vector, includes land use management, larvicides, pesticide application targeted to adult mosquitoes, indoor residual spraying (IRS), and the use of insecticide-treated netting materials (ITN). One of the most promising vector management approaches is integrated vector management (IVM). Stressing localized solutions and evidence-based decision-making, IVM includes local environmental management, personal control measures, biological controls, and pesticide spraying.[15] For both disease and vector management approaches, social and behavioral factors play a key role in determining how people respond to the malaria threat.[16] In addition to considering different technology options (e.g., antimalarial drugs, pesticides, larvicides), policymakers must pay attention to these behavioral factors in deciding among different malaria control strategies.

Perhaps the most controversial strategy for battling malaria and other vector-borne diseases is **the application of DDT in IRS** programs. Spraying indoor surfaces with DDT has been highly effective in interrupting malaria transmission in many developing countries. DDT, as a persistent organic pollutant, is toxic. Because of its chemical stability, it is slowly metabolized, it accumulates in the environment through food chains and in tissues of exposed organisms and is potentially harmful to wildlife and to humans. There is now considerable debate regarding the ability of DDT and other pesticides to disrupt the endocrine systems of mammals. New evidence is being published about links between low-level DDT exposure and adverse health effects, in particular related to childhood neurodevelopment, breast cancer in women and male reproductive health (reduced sperm counts and quality). The only use of

[9] Casman EA, Dowlatabadi H, eds. 2002. The Contextual Determinants of Malaria. Washington, DC:Resources for the Future.
[10] Miranda ML, Abrams M, Arcaya M. 2000. Pesticides in the Environment: DDT and Malaria (Unpublished Course Notes):Nicholas School of the Environment, Duke University.
[11] Fowler VG, Lemnge M, Irare SG, Malecela E, Mhina J, Mtui S, et al. 1993. Efficacy of Chloroquine on Plasmodium-Falciparum Transmitted at Amani, Eastern Usambara Mountains, Northeast Tanzania - an Area Where Malaria Has Recently Become Endemic. J Trop Med Hyg 96(6):337-345.
[12] Marsh K. 1998. Malaria disaster in Africa. Lancet 352(9132):924, World Health Organization. 2003. Roll Back Malaria Program Fact Sheet #94 "Malaria in Africa". Available: http://www.rbm.who.int/cmc_upload/0/000/015/370/RBMInfosheet_3.htm.
[13] Talisuna AO, Bloland P, D'Alessandro U. 2004. History, dynamics, and public health importance of malaria parasite resistance. Clin Microbiol Rev 17(1):235-254.
[14] Murru M. 2004. Malaria and DDT: Myths and Facts. Health Policy and Development 2(2):112-121, WHO Regional Director Dr. Luis Sambo. Get your ACT together. In: Africa Malaria Day Event, April 24, 2006.
[15] Bos R. 2001. Identifying Opportunities to Avert Malaria Risk Across Sectors. In: Report of the 4th Global Partnership Meeting to Roll Back Malaria, 18-19 April 2001, Washington DC:The World Bank.
[16] Spielman A. 2003. Introduction. In: The behavioural and social aspects of malaria and its control: An introduction and annotated bibliography (Heggenhougen HK, Hackethal V, Vivek P, eds):Special Program for Research and Training in Tropical Diseases (TDR).

DDT for public health purposes that is endorsed by WHO is for IRS. DDT should be used under strict control measures and WHO guidelines be followed very closely.

Pesticides are transported through all media – especially persistent pesticides like DDT – and can thus affect organisms all over the world. The ban of a chemical in one jurisdiction will not prevent the pesticide from traveling across borders from and into other jurisdictions. In light of such concerns, the United States banned the use of DDT in 1973. Many other countries followed suit with respect to the agricultural use of DDT. However, in those malaria endemic countries where the local vector species remains susceptible to this insecticide, DDT often continues to be the cheapest option for control.[17] Under the Stockholm Convention on Persistent Organic Pollutants (POPs), countries are authorized to elect further use of DDT for malaria vector control only, and when locally safe, effective, and affordable alternatives are not available; countries are obliged to develop and implement action plans to reduce reliance on DDT and employ alternatives that pose "less risk to human health and the environment, be suitable for disease control based on conditions in the country and be supported with monitoring data."

It is important that countries, WHO and the Secretariat of the Stockholm Convention be able to measure the scale of applying DDT in order to adapt and improve their approaches in the dynamic setting of changing environmental, health, and social conditions, as well as to report back to the Parties to the convention about the continued need for DDT for disease vector control and alternative strategies to replace DDT.

This project will provide a direct path for improving reporting procedures and infrastructure by strengthening administrative capacity, including chemicals management administration within the central governments of the participating countries.

Global benefits

This project will provide significant global benefits. First, it will provide improved capacity of Parties for complete and timely reporting on the use of DDT and its alternatives.
Second, it will deliver –through improved reporting- increased availability of comprehensive and representative data sets on DDT for global evaluations by the Conference of the Parties. Improved reporting will allow the COP, in consultation with the WHO, to evaluate the continued need for DDT for disease vector control and as such it will directly contribute to the implementation of the Stockholm Convention.

Objectives, Expected Outcomes and Outputs

The development objective of this project is to protect human health and the environment by supporting the availability of data related to the use of DDT and its alternatives to enable proper evaluation of the continued need of DDT in malaria vector control. The project (immediate) objective is:

> *To develop the capacity of the selected Parties to enable the provision of complete information on the production and use of DDT for disease vector control.*

To accomplish this objective, the project's institutional components will address the systems, structures, rules, organizations, and incentives that are related to the reporting of DDT use and production.

[17] Biscoe ML, Mutero CM, Kramer RA. 2005. Current policy and status of DDT use for malaria control in Ethiopia, Uganda, Kenya and South Africa Working Paper #95. Colombo, Sri Lanka: International Water Management Institute.

The project would last for 36 months and would accomplish the outcomes as mentioned in the Logical Framework (Annex 1) through the components as provided below:

Component 1) Central institutions in project countries identified and strengthened to report DDT use, production etc. in an adequate way;

Component 2) Spray Team leaders and regional support teams trained;

Component 3) Training institutionalized as routine in-service training within national vector control programs;

Component 4) Countries enabled to monitor chemicals resistance of vector in an adequate way;

Component 5) Cross sectoral alliances established and guidelines implemented;

Component 6) Project Management operational.

To ensure that all partners are working together in close coordination, the World Health Organization's Head Quarter in Geneva, Switzerland will take the lead role in project coordination and management as the Executing Agency. WHO and UNEP will convene a Steering Group that will regularly meet to coordinate partner activities. The Steering Group will oversee monitoring and evaluation efforts to ensure that the project is achieving its desired results.

This project involves a diverse set of organizations whose respective strengths combine to create strong complementarities and synergies. The World Health Organization Regional Office for Africa (AFRO) will serve as an executing agency and thus provide critical coordinating functions for the project. In addition, WHO AFRO and WHO EMRO will provide advice and guidance on the international, national, and local institutional structures that play an important role in reporting the use and the production of DDT for vector control, as well as insights on consensus views on how best to deal with the respective partners in each of the participating countries. These contributions will deepen the information architecture that serves as the basis for the improved reporting procedures and data collection for the evaluation of the continued need of DDT for disease vector control. WHO AFRO and WHO EMRO will also assist with a regional trainings and will provide a platform for future extensions of the proposed activities to additional countries.

Local **in-country collaborators** will be identified in all project countries and they will serve as a critical link to the local habits of DDT use, production etc. and the operational context. These collaborators will be actively involved in the efforts designed to strengthen the institutional capacity in each country. As such, their knowledge of local stakeholders is invaluable. Ultimately, the in-country collaborators will serve as the local advocates for the adoption and use of improved data collection and reporting procedures.
In-country collaborators in the various project countries will be selected at the beginning of the project. These contacts will be in principle responsible for supporting the formal reporting to the Stockholm Convention Secretariat.

Primary responsibilities of these national collaborators will be, amongst others:
- Coordinate the work/project with partners at country level;
- Provide timely progress report to WHO through the respective Regional Offices;

- Ensure that data generated from the project is used for the strengthening of formal reporting at country level by all involved partners.

In addition, the project will benefit from the advice and guidance offered by a Steering Group composed of WHO AFRO, WHO EMRO, UNEP, and representatives from the fifteen in-country collaborating institutions. The Steering Group will provide clear guidance for coordinating the group of collaborators thus ensuring timely progress on project goals and benchmarks.
As a group, this set of collaborators will provide the human resources required to successfully strengthen the reporting capacity and ensure its adoption and use in the thirteen project countries. In addition, by incorporating the perspectives of multiple different kinds of collaborators, the project envisages improved data collection and reporting procedures to be replicated and adapted in malaria endemic areas throughout the world.

Indicator

Indicator of project success:

- Efficient and effective data collection and reporting procedures developed and applied in all fifteen project countries (by end of Year 3);
- Stockholm Convention Secretariat statement that all involved project countries report DDT use, production, etc. according to the requirements of the Stockholm Convention (by end of Year 3).

B. DESCRIBE THE CONSISTENCY OF THE PROJECT WITH NATIONAL AND/OR REGIONAL PRIORITIES/PLANS:

The status of National Implementation Plans (NIPs) in the project countries is as follows (see table below). In many if not all project countries, the management of POPs / DDT (including data collection, cross sectoral communication and data exchange, reporting requirements, etc.) has been specifically mentioned as not being adequate.

Project country	**NIP status**	**Project relevant (priority) issues as mentioned in NIP**	**national priorities on vector control, wishes / requirements to comply with Stockholm Convention, information about priorities/policies on DDT use from WHO, and currently known knowledge from WHO about the situation with regards to capacity needs in project countries specially where no NIP is available yet**
Eritrea	NIP not available	n.a.	-Vector control is the pillar of vector borne diseases control particularly malaria. -Application of IRS using DDT is complemented mainly by ITNs and in some places by larval control as well - Safe storage and transport system/capacity and reporting procedures

			need to be strengthened
Ethiopia	NIP available	- management of DDT not adequate; - no reliable records of DDT use, imports, etc.; - main concern about monitoring DDT production and use; - storage, use and handling of DDT is far from desirable; - strongly recommended to raise awareness and support capacity building in handling DDT in IRS; -alternatives to DDT should be introduced.	- The vector control with application IRS and LLINs within the context of IVM is a major malaria control strategy. - The most used insecticide is DDT. However malathion is applied in areas with reduced susceptibility of vectors to DDT - Capacity for vector resistance monitoring lacks in the NMCP. The National Research Institute for Health & Nutrition (NRIHN) supports the program to some extent but there a big gap to be filled - Overall sound management and disposal of DDT is far from being safe - support for proper reporting of DDT application according to the requirements is urgently needed.
Madagascar	NIP not available	n.a.	-Vector control is a major malaria control strategy here too. -Currently, DDT is not used in Madagascar, kept aside for resistance management strategy if resistance appears against pyrethroids. -The country is participates in the WHO-Gates project on capacity building for sound pesticide management, which is overseen by multi-sectoral committee. - Capacity strengthening for safe management of insecticide and reporting is needed
Mauritius	NIP available	- certain pesticides stores highly contaminated with DDT; - serious soil contamination due to DDT in neighborhood of Ministry of Health stores; - DDT is a major source of POP in Mauritius; - current stock of DDT is kept under highly questionable conditions; - unawareness of risks by sprayers of DDT; - “one major reason that would explain the frequent use of DDT is because the current stock was obtained at no cost”; -alternatives to DDT should be introduced; - need for proper management and disposal of DDT; - chemicals inventory for Mauritius should be done; - “The Dangerous Chemicals Control Board should upkeep a DDT register which should be made available to the public”.	-Mauritius has effectively control malaria through years of IRS along side with case management. -Currently, here is no routine vector program but, focal spraying is conducted when sporadic imported cases are detected to avoid the risk of re-establishment of local transmission. -To date, there some amount of DDT in store that may need to disposed safely if the insecticide is no longer usable for vector control (subject to another GEF assisted project already) -The country needs support in the registration and reporting procedures towards SC Secretariat.
Mozambique	No NIP available	n.a.	-Scaling up/expansion of vector control with IRS is the priority in Mozambique. The NMCP uses various insecticides but mainly DDT. -Assessment done on the overall management of DDFT revealed the gap

			that need to addressed. A national committed composed of MOH, MOG, MOE, USAID, WHO, FAO has been established to resolve the problem and follow up on implementation of actions recommended for capacity building for safe management of DDT -Mozambique also one of the beneficiaries of the WHO-gates project - support with regards to reporting and justification of applied DDT is urgently needed.
Morocco	NIP available	- Disproportional DDT stocks with regards to real needs; - Develop national capacity with regards to POPs management, - Exchange of POPs information with other countries (in the framework of South/South cooperation); - Elaborate and disseminate the reports as required by article 15 of the Stockholm Convention.	- Vector control in the framework of the integrated vector management (IVM) is one of the key strategies for disease vector control in Morocco - Although DDT is still one of the recommended insecticides for disease vector control, Morocco has made good progress in moving towards the use of DDT alternatives (under a separate GEF supported project as part of the global DSSA Programme) - MOH and partners (Agriculture and Environment) are currently working together to implement best practices of pesticides management which are line with identified needs from NIPs and which compliment the objectives of this project - Capacity strengthening in pesticide usage in general and for DDT in particular is critical, including proper and timely reporting according to the requirements of the SC.
Namibia	No NP available	n.a.	-Vector control with application of IRS is a major malaria control strategy in Namibia. DDT and pyrethriods are used. -Sound pesticide management particularly related storage, handling and disposal has including that of DDT has been a challenge. -Some inter-sectorial collaboration exists but needs to be strengthened. - Not sufficient knowledge and capacity for proper reporting of DDT use.
Senegal	NIP available	- Need for collection and processing of data on management of POPs; - Installation of mechanisms of exchanges of information for better life cycle management of POPs chemicals; - Reinforcement of human and logistical capacity vis a vis the requirements of the Convention; - Better control and document imports and distribution of DDT; - Develop a national, sous-regional and regional database on POPs; - Many gaps in POPs data bases and	-Vector control with application of IRS is a newly initiated strategy in Senegal. To date the country sprays DDT in a number of districts. The technical and programmatic capacity and system for safe and proper management of DDT needs a special attention. -Inter-sectorial collaboration between the relevant stakeholders should be promoted. - registration and reporting of used DDT needs to be strengthened.

		subsequently no proper management of POPs; - Promote alternatives to POPs (specially DDT); - Promote following WHO guidelines for DDT application in vector control.	
South Africa	No NIP available	n.a.	- Vector control with IRS has been the main stay vector control in South Africa for more than half a century. -DDT is on use almost through out same period. Pesticide management system and technical capacity good. There is good inter-sectoral collaboration with regards to this. - Registration and proper reporting to the SC Secretariat needs strengthening.
Swaziland	No NIP available	n.a.	- The situation in Swaziland is similar to that of South Africa.
Uganda	No NIP available	- Uganda emphasizes the need for alternatives to DDT in vector control; - need for resistance management; - capacity is lacking concerning assessing illegal import and use of DDT; - intersectoral linkages and international linkages should be strengthened; - lack of capacity to handle chemical management issues (including administrative and reporting issues); - Ministries and agencies should re-examine and redefine their roles and responsibilities in the management of chemicals, including DDT. Capacity needs assessment should be undertaken and gaps identified for addressing.[18]	-To date, vector control is a major component of the vector born disease, particularly malaria control strategy in Uganda. IRS using became a complementary intervention in the few years. -The application DDT has been a focus of debate for the sometimes. -Capacity for safe pesticide management is scarce as IRS is a newly introduced intervention. Technical capacity, system and knowledge for safe pesticide management has to be developed. -Establishment of inter-sectoral collaboration between stakeholders is highly desirable for sound management of pesticides but at the same time a challenge for proper reporting to the Secretariat of the SC.
Yemen	No NIP available	n.a.	- Although no NIPs assessment report is available to-date, vector control is a key strategy for disease vector control - DDT is not used currently for vector control but the country has requested the Secretariat for its exemption – especially its use during vector disease epidemics - The country through the MOH has established a strong multi-sectoral coordination in which pesticide management for both public health and agricultural use is critical - Yemen sees the current project as an opportunity to strengthen its capacity of pesticide reporting in general and for DDT in particular
Zambia	No NIP available	n.a.	-The vector control policy in Zambia encompasses the use of ITNs and IRS. Zambia is one of the countries where the use of vector control is on significant

[18] Source: Draft NIP Uganda

			increase. -Unlike many countries Zambia has put a significant effort to increase the capacity for safe management (including disposal) of pesticides. However, still some capacity building is needed to ensure sound pesticides management is sustained as the vector control program expands -The inter-collaboration though needs to be strengthened, including the reporting and justification of pesticides.
Gambia	No NIP available	n.a.	-Gambia is introducing IRS with the application of DDT as a vector control method alongside ITNs. -Gambia, needs capacity building (including reporting) in overall use, handling and management of pesticide including DDT. -As the IRS program is initialized as inter-sectoral collaboration but improvements are needed to establish better public health pesticides management including registration/reporting processes, quality control and so on.

C. DESCRIBE THE CONSISTENCY OF THE PROJECT WITH GEF STRATEGIES AND STRATEGIC PROGRAMS:

The GEF Operational Program 14 – Reducing and Eliminating Production, Use and Releases of Persistent Organic Pollutants into the Environment – places emphasis on three strategic programs for GEF-funded POPs projects.
This project most clearly responds to the first priority – Strengthening Capacities for NIP Implementation - by strengthening capacities of participating governmental institutions to adequately report according to the requirements of the Stockholm Convention to the Secretariat of the Stockholm convention.

D. JUSTIFY THE TYPE OF FINANCING SUPPORT PROVIDED WITH THE GEF RESOURCES:

Project interventions will support the project countries according to their specific data collection and reporting needs and institutional situation with regards to the obligations vis a vis the Stockholm Convention. On one hand, the existing administrative and enforcement framework for data collection and reporting in the participating countries needs support to fully comply with the obligations from the Stockholm Convention (and other chemcials related conventions...). On the other hand, there is no or very little capacity in the participating countries, and the measures to enhance capacity to collect data and report according to the guidelines to the Secretariat of the Stockholm Convention can best be addressed by a global project as the current one. Therefore, the financial support provided with the GEF resources for this project are targetting institutional strengthening and technical assistance to enable participating countries to provide *complete information on the production and use of DDT for disease vector control* as required by the Stockholm Convention.

E. OUTLINE THE COORDINATION WITH OTHER RELATED INITIATIVES:

There are a number of initiatives in WHO relevant to this project. WHO/HQ coordinates its activities at country level through the Regional Offices. This arrangement will ensure that, although the project is submitted through HQ, its activities at country level will be well coordinated through this mechanism. There are also specific projects/initiatives currently undertaken and coordinated by WHO/HQ which will compliment this project as follows: the GEF funded DDT projects in Africa and the Middle East; the Bill and Melinda Gates support in 12 countries globally – of which some are also recipient of this project; country-specific proposals to SAICM on strengthening capacity for management of obsolete pesticides; and the Global Fund-supported activities for malaria vector control of which a big portion of the support goes towards promoting DDT alternatives. It is also possible to establish link between focal persons and national steering committees for the various projects and initiatives.

There are currently five GEF-funded DDT projects executed or under development by WHO and UNEP (in the Middle East and North Africa, Mexico and Central America, Sub-Sahara Africa, and Southeast Asia and the Pacific, and Central Asia). Other projects are expected to be followed soon (for example for India). These projects focus primarily on vector management measures.
This project however will leverage the data on DDT application and related issues (like resistance monitoring) and support national institutions in fulfilling their reporting requirements to the Stockholm Convention Secretariat.
Although not directly linked with each other, a proper organized data registration environment, will improve effectiveness of operations as envisaged by the other projects. Vice versa, demonstration and promotion of alternatives to DDT (as envisaged in the above named projects) and vector resistance will ultimately reduce the application of DDT in vector control and as such contribute to the Project Purpose (:To contribute to the reduction of emission of POPs pesticides (DDT) into the global environment).

In addition, the other WHO/UNEP regional projects could assist in the dissemination of this project's findings.

F. DESCRIBE THE VALUE-ADDED OF GEF INVOLVEMENT IN THE PROJECT DEMONSTRATED THROUGH INCREMENTAL REASONING :

Governments are in principle interested in reducing malaria outbreaks and improving the health standards for their populations.
The involved Ministries of Health are principally interested in health aspects of the population.
Seen the above, there is no great effort to inform the Secretariat of the Stockholm Convention on DDT aspects because of 'global environmental concern'.
As such, the baseline cost of the project consists only of the time normally spent by government officials and experts preparing and participating in workshops and collecting and analyzing data on the amounts of DDT use, imported, reformulated etc. in the field of vector control in each country. Seen the current level of reporting, the baseline costs are very low or even zero (but could not be estimated as no data is available). The current project anticipates agency involvement in amongst other issues the development and outlining of reporting guidelines, identifying institutional barriers to collect as complete as possible reliable data, implement optimal data collection procedures, including training activities. These activities would not have taken place in the same way and scale as compared to the current project. Including Monitoring & Evaluation, the estimated and budgeted incremental costs are US $ 1,447,540.

G. INDICATE RISKS, INCLUDING CLIMATE CHANGE RISKS, THAT MIGHT PREVENT THE PROJECT OBJECTIVE(S) FROM BEING ACHIEVED AND OUTLINE RISK MANAGEMENT MEASURES:

Main assumption for successful implementation of the project is that policy makers and stakeholders from multiple sectors will be willing to assist in the development and be willing to use the data

collection and reporting procedures. It is further assumed that policy makers will be willing to use the improved availability of data as basis for policy decisions.
Risks to the project are related to these assumptions. Risks and project provisions for the mitigation of risks are provided in the table below:

Risks and Project Provisions for the Mitigation of Risk	
Nature of Risks	**Mitigative Provisions of the Proposed Project**
Policy makers and stakeholders from multiple sectors unwilling to assist in development of procedures and guidelines	Countries were selected based on their stated commitment to and interest in the project. Prior meetings in all countries and project development workshops have identified an initial group of stakeholders representing various sectors, and these stakeholders have expressed willingness to participate in project development.
Decision makers unwilling to use procedures and guidelines to report to the Secretariat of the Stockholm Convention	Decision makers will be involved in the development at several stages to ensure that the reporting guidelines/procedures addresses their questions and needs and that it is user-friendly. Decision makers' involvement in the development stage will foster a feeling of ownership over the project that will lead to high levels of use in future.
Insufficient access to a variety of DDT-related information sources, including local users, storage sites, and other country-specific resources	Local users and staff responsible for storage, purchase, etc. will be identified and consulted throughout project development.
Lack of stakeholder participation in trainings	Previous experience during Consultation meetings has laid the groundwork for continued stakeholder participation. In future efforts, a well selected target audience will be invited to participate in activities. Awareness raising about the Stockholm Convention requirements and the importance of regular evaluations of the continued need for DDT in malaria vector control will be included.
Procedures and guidelines are not socially / culturally / institutionally acceptable	The extent of national and local involvement in the project in each of the participating countries will mitigate this risk.
Climate changes triggers increases number vector borne disease outbreaks followed by intensified malaria vector eradication campaigns with or without the use of IRS and/or use of DDT	The actual application of DDT (amounts, frequency, alternative chemicals, etc.) will not disturb the project as this project aims at assisting in proper registration and reporting. However, the change in DDT application pattern due to climate change might show the need for a more flexible registration/reporting system, including areas/institutions which might become effected in future by malaria outbreaks due to climate change. The project will take this into account.

H. EXPLAIN HOW COST-EFFECTIVENESS IS REFLECTED IN THE PROJECT DESIGN:

The project will mainly make use of existing structures, partners and networks, also to ensure sustainability over the post project period. The fact that existing institutional networks from both the Executing Agency and governments are used contribute to the cost-effectiveness of this project. The project will not set up duplicative structures, instead it will complement activities which are already

ongoing on a very limited (and un-satisfactorily) scale but need to expand in order to achieve larger (incremental) benefits.
Transboundary & international information exchange is seen as crucial in the project. This is currently only happening on a very limited scale. Lessons learnt in one of the project countries will be taken to other project countries and beyond. Possibilities for information exchange with other related initiatives are built in in the project.
UNEP/WHO have chosen the current approach with the opinion that nevertheless the large geographical distance between project countries in this global project, the current proposed setup is the most optimal in order to achieve the required outputs within the possibilities of the limited project budget. Other options (as for example setting up new institutional structures, launching different approaches for registering and reporting DDT use, etc,) are deemed to be unrealistic and/or more costly.

This GEF co-funded project is meant to achieve catalytic influences, including capacity building, policy and behavior changes, etc. which cannot be meaningfully quantified and related to a monetary amount. As such, the cost effectiveness of the selected approach is very difficult to quantify.

PART III: INSTITUTIONAL COORDINATION AND SUPPORT

A. PROJECT IMPLEMENTATION ARRANGEMENT:

WHO Global Headquarter, Geneva, will coordinate the execution of the project on the global level.

A dedicated Project Manager will be part time appointed to oversee these activities and to mainstream project activities into WHO global activities related to this project.

The Project Manager will be assisted by part time admin and financial staff. All these WHO staff are mentioned as 'International Consultants' in table F.

For its global management activities, WHO has agreed upon a maximum of 10 % Project Support Costs (Management costs), which is as well reflected in the budget of this project.

The WHO Regional Office in Brazzaville (with regards to WHO's project activities in the AFRO Region) and the WHO Regional Office in Cairo (with regards to the Eastern Mediterranean WHO's project activities) will provide technical support and coordination to the project, as well these offices will function as linkage between the project and the project countries.

All project countries have WHO country offices which will conduct day to day project coordination tasks in close collaboration with all relevant national stakeholders.

Relevant national stakeholders will be selected as part of this project during the starting up of the project in each country. An indication of expected relevant stakeholders is already provided in the table on page 12.

PART IV: EXPLAIN THE ALIGNMENT OF PROJECT DESIGN WITH THE ORIGINAL PIF:

The current project is as such fully aligned with the original project concept as described in the PIF.

PART V: AGENCY(IES) CERTIFICATION

Agency Coordinator, Agency name	Signature	Date	Project Contact Person	Telephone	Email Address
Maryam Niamir-Fuller Director, UNEP Division of GEF Coordination		July 06, 2009	Jan Betlem UNEP DGEF	Tel.: +254 20 762 4607	Jan.Betlem@UNEP.org

Annex 1: Project Logical Framework

Project Purpose: To contribute to the reduction of emission of POPs pesticides (DDT) into the global environment.			
Developmental objective	**Objectively Verifiable Indicators (OVIs)**	**Means of Verification (Monitoring focus)**	**Critical Assumptions and Risks**
To protect human health and the environment by supporting the availability of data related to the use of DDT and its alternatives to enable proper evaluation of the continued need of DDT in malaria vector control.			
Project Objective:			
To develop the capacity of the selected Parties to enable the provision of complete information on the production and use of DDT for disease vector control.			
Outcomes, Outputs and Activities	**Objectively Verifiable Indicators (OVIs)**	**Means of Verification (Monitoring focus)**	**Critical Assumptions and Risks**
Outcome 1. Central institutions in project countries identified and strengthened **Output 1.** - Names and contact details of responsible institutions in project countries - Letter of Commitment from each institution to register and report according to the requirements. - 14 institutions received equipment, materials, other support as deemed relevant and training as part of strengthening.			Central Institutions and National governments are willing to collaborate.

- Institutional infrastructure for reporting in each country developed and operational - Guidelines for reporting developed and provided to identified institutions **Activities**			
1.1. Identify Central Institutions in each project country.	Names of identified Central Institutions in each project country (at end of Year 1).	Reports on specific technical support activities.	Institutions willing to participate.
1.2. Awareness raising amongst Central Institutions related to the need of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.	Number of awareness raising happenings, workshops, meetings, etc. (at end of project).	Technical, management and financial progress reports. Reports on specific technical support activities. Final technical and financial reports.	Selected staff willing to participate and to apply learnt approaches and methodologies.
1.3. Provide commitment by each selected Central Institution to register and report according to the requirements.	Number of correctly filled in registers and reports as required (at end of project).	Project reports; Annual Reports of the selected Central Institution; Completed national reportings to the Secretariat of the Stockholm Convention.	Involved institutions willing to collaborate and exchange information between sectors.
1.4.Provide general strengthening (materials and other essential support) to each selected Central Institution.	Lists with provided means of strengthening to each selected Central Institution (at Mid Term))	Reports on specific technical support activities. Reports from identified institutions.	Required means of strengthening timely delivered and operation in relevant Institutions.
1.5. Develop and make operational institutional infrastructure for reporting in each country.	Operational institutional infrastructure available (at Mid Term).	Reporting is done according to the relevant guidelines.	Cross sector collaboration successful. Relevant data available. Governments not willing to support cross sectoral information exchange.
1.6. Develop guidelines for reporting and provide guidelines to identified institutions.	Guidelines available within each identified institution (at Mid Term).		Involved institutions do not apply the guidelines for reporting.
Outcome 2: Training of spray team leaders and regional support teams on field data collection and			

reporting (Regional cascade training to develop critical mass **Output 2.**: Spray Team leaders and regional support teams trained. **Activities** 2.1. Regional cascade trainings developed and successfully held 2.2. Participants attend training sessions and receive training materials.	Number of trainings developed (by end of Year 1); Number of trainings held (at Mid Term). Number of participants attending trainings. Number of training sets issued to participants (at Mid Term).	Reports on specific technical support activities. Reports on specific technical support activities. Reports on specific technical support activities. Reports on specific technical support activities. Project Progress and Financial Reports.	WHO willing and able to develop and organize trainings. Institutions and staff willing and able to participate. Institutions and staff willing and able to participate. Training materials available on time.
Outcome 3. : Follow up activities to institutionalize training activity as routine in-service training within national vector control programmes. **Output 3.**: Training institutionalized as routine in-service training within national vector control programs. **Activities** 3.1. Produce training materials and hand these over to national vector control programs in project countries. 3.2. –Adapt National training curriculum for vector control programs ..	Number of relevant and suitable training materials produced (at end of Year 1). Training curriculums in each involved institution include relevant training programs (at Mid Term). Number of National training curriculums including vector control issues with regards to	Training curriculums of each institution. Reports on specific technical support activities. Project Progress and financial Reports. Project Progress Reports. Training files of responsible national vector control programs.	Institutions have training curriculums. Training programs accepted by institutions. Training materials available on time. Training materials handed over on time.

	reporting (at Mid Term).		
Outcome 4: Countries able to monitor chemicals resistance of vector in an adequate way. **Output 4.:** - Regional trainings on resistance monitoring developed and held - Participants attend training sessions and receive training materials - Country monitoring infrastructure developed and operational in each project country **Activities:**			
4.1. Develop regional training on resistance monitoring.	Regional Training on resistance monitoring available (by end of Year 1).	Training modules. Project Progress Report.	Training modules not available on time.
4.2. Hold regional training on resistance monitoring.	Regional Training on resistance monitoring held (by Mid Term).	Project Progress Report.	Participants not able to attend training sessions.
4.3. Develop and make operational a country monitoring infrastructure in each country.	Country monitoring infrastructure available (by Mid Term).	Correspondence with countries. Project Progress Reports.	Governments not willing to adapt institutional infrastructure.
Outcome 5: Cross sectoral alliances established and guidelines implemented. **Outputs 5.:** Support to inter sectoral working groups is provided in all project countries in order to allow data sharing and implementation of guidelines **Activities:**			

5.1. Identify relevant stakeholders and hold intersectoral working groups	Relevant stakeholders identified, intersectoral working groups held.	Report concerning selection stakeholders, minutes of intersectoral working groups	Relevant stakeholders are not available and not willing to participate.
5.2. Share data	Data shared	Stakeholders have access to data by website and other means of information	Stakeholders are not willing to share data.
5.3. Implement guidelines	Guidelines implemented (by end of yr. 2)	Accurate reporting using guidelines by stakeholders	Stakeholders are not willing and not able to implement guidelines.
Outcome 6. : Project Management operational and effective. **Output 6. :** - WHO Project Manager appointed and mobilized. - Project Steering Committee established and mobilized. **Activities:**			
6.1. Appoint and facilitate operations of WHO Project Manager.	Letter of appointment (by end of month 2 of year 1).	Project Progress report. Correspondence between WHO and UNEP.	Appropriate Project Manager available within WHO.
6.2. Establish, mobilize and facilitate a Project Steering Group.	Minutes of Steering Committee meetings (within 2 weeks after each meeting).	Project Progress reports.	Countries willing to appoint representatives of cross sectoral institutions. Sufficient (co-) funding mobilized to have meetings.
6.3. Conduct Mid-Term and End Evaluations	Evaluations conducted.	Mid Term and End Evaluation Reports (at mid term and end of project)	No specific risks.

Annex 2: Project countries
List including *Project Countries*

		Country has officially reported DDT **use** in IRS to WHO	Country intending to use DDT for IRS	Country that have notified SSC of their intension to **use** and/or **produce** and/or **import** DDT	Ratification of Stockholm Convention (as per 10 September 2007)
1	***Eritrea***	X			10/03/2005
2	***Ethiopia***	X		X	09/01/2003
3	India[19]			X	13/01/2006
4	***Madagascar***		X	X	27/08/2007
5	Marshall Islands[20]			X	27/01/2003
6	***Mauritius***	X		X	13/07/2004
7	***Mozambique***	X		X	31/10/2005
8	***Morocco***			X	15/06/2004
9	Myanmar[21]			X	19/04/2004
10	***Namibia***	X			24/06/2005
11	***Senegal***			X	08/10/2003
12	***South Africa***	X		X	04/09/2002
13	***Swaziland***	X		X	13/01/2006
14	***Uganda***		X	X	20/07/2004
15	***Yemen***			X	09/01/2004
16	***Zambia***	X			07/07/2006
17	DPR Korea[22]	?	X	?	26/08/2002
18	***Gambia***		X	?	28/04/2006
19	Zimbabwe[23]	X		?	23/05/2001 (signature only)

14 countries (***bold***) in the WHO AFRO and WHO EMRO Region are considered for this project.

[19] Concerning reporting DDT related issues, India will be supported through a separate UNEP/WHO project to be submitted to GEF ("Reduction in the use of DDT by Enhancing Capabilities for the Implementation of Vector Management")
[20] Marshall Islands : According to draft NIP (May 2007, during the last years no current DDT use and no intention to use, except when climate change might bring back malaria to Marshall Islands)
[21] Myanmar : All malaria vectors in Myanmar are resistant to DDT. As such, no DDT is used in malaria vector control in this country but seen the seriousness of malaria in the country, Myanmar has registered its possibility to apply DDT.
[22] DPR Korea: special situation as described in the full text document.
[23] Zimbabwe: country has not ratified the Stockholm Convention and is not GEF eligible.

Annex 3: Responses to Project Reviews (from GEF Secretariat and GEF Agencies, and Responses to Comments from Council at work program inclusion and the Convention Secretariat and STAP at PIF)

January 2008: No comments received from GEF Agencies, Convention Secretariat, STAP.

PIF approved on 13 December 2007.

Comments received from GEF Secretariat (dated December 19, 2007) and response from Project Team:

A. Eligibility

1. Is the Participating country eligible ?

Yes, all proposed project countries have ratified the Stockholm Convention.

2. Has the operational focal points endorsed the project ?

No endorsements are provided. Implicitly UNEP is suggesting that they are not required since this is a "global project".

Response from Project Team: Indeed, this project including 14 different countries divided over two geographical areas is true a global project.

3. Which GEF Strategic Objective/Program does the project fit into ?

SP1 – Strengthening capacities for NIP implementation.

4. Does the Agency have a comparative advantage for the project ?

Yes, together the two agencies possess the right mix of mandate and country contacts to implement this project.

B. Resource Availability

5. Is the proposed GEF Grant (including the agency fee) within the resources for (if appropriate):

- the RAF allocation ?

n/a

- the focal areas ?

Yes, the project is envisaged in UNEP's 2007 list.

- Strategic Objectives ?

n/a

Strategic Program ?

n/a

C. Project Design

6. Will the project deliver tangible global environmental benefits ?

This project will help develop the capacity of the participating countries to enable the provision of complete information on the production and use of DDT for disease vector control. The adoption and implementation of the reporting tool by countries still using DDT will provide information on quantities in use at global level – crucial information which is missing at present.

7. Is the global environmental benefit measurable ?

Not applicable at PIF/Work Program Inclusion.

8. Is the project design sound, its framework consistent sufficiently clear ?

It seems to me that components 1 and 5 should be merged: What is the difference between "Central institutions strengthened" and "countries able to report" ? The designation of a central institution responsible for proper registration and regular reporting of data related to import/export/local formulation of DDT is very critical for this project. In most cases, Ministries of environment are the Focal Points of the Stockholm convention, then assuming the tasks of reporting while ministries of Health possesses the information and manage DDT issues (import/export, use, exemption etc.....).
A transparent and flexible coordination mechanism should be established between these Institutions to make sure that relevant information is obtained in due time and that adequate reporting is done regularly.

Response from Project Team: Cross sectoral information exchange and collaboration have been stressed in the current document.
The Project Team agreed with the suggestion to merge (old PIF) components 1 and 5 into one component (the current component 1).

9. Is the project consistent with the recipient country's priorities and policies ?

(At CEO approval:) Countries national priorities and policies with regard to DDT use will have to be clearly described in the project proposal.

Response from Project Team: countries national priorities and policies with regard to DDT use have been explained in Part II, B, based on the available NIP information and based on the information obtained from WHO.

10. Is the project consistent and properly coordinated with other related initiatives in the country or in the region ?

This project will be linked with other UNEP/WHO related regional projects aiming at promoting alternatives to DDT use for vector control. (Mexico & Central America, Africa, North Africa and Middle East, South East Asia and Pacific).

(at CEO approval:) Need in particular to demonstrate additionallity and relevance of this project to the countries already participating in a "DDT project".

Response from Project Team: The mentioned "DDT projects" in general aim at promoting alternative approaches to DDT use. However, the use of DDT can –at this moment of time- not be excluded as it is formally allowed and suggested as part of IRS in vector control.
As such, whenever countries embark on or continue with the use of DDT in vector control, proper reporting should be done according to the requirements of the Stockholm Convention.
As such, countries already participating in "DDT projects" can benefit from the outcomes of this project in case they decide to continue using DDT in vector control.

11. Is the proposed project likely to be cost-effective ?

Cost-effectiveness is difficult to asses for such a project. Not applicable at CEO Approval (MSP).

Response from Project Team: This GEF co-funded project is meant to achieve catalytic influences, including capacity building, policy and behavior changes, etc. which cannot be meaningfully quantified and related to a monetary amount. As correctly mentioned by the GEFSEC reviewer , the cost effectiveness of the selected approach is very difficult to quantify.

12. Has the cost-effectiveness sufficiently been demonstrated in project design ?

Not applicable at PIF/Work Program Inclusion.

13. Is the project structure sufficiently close to what was presented at PIF ?

Not applicable at PIF/Work Program Inclusion.

14. does the project take into account potential major risks, including the consequences of climate change ?

In general yes. The provided information could be presented in a table (see GEF Template for PIF document).

Response from Project Team: Part 2, Section F contains the table showing potential risks and proposed risk mitigation measures.

D. Justification for GEF Grant

15. Is the value added of GEF involvement in the project clearly demonstrated through incremental reasoning?

In principle, GEFs involvement will facilitate and increase in-country communication, and therefore strengthen the quality of reporting to the Convention.
(At CEO approval MSP:) Incremental reasoning will have to be demonstrated in the project proposal.

I find it difficult to believe that $20-50K to strengthen reporting capacity will make a difference in all the proposed participating countries, for example in South Africa.

Response from Project Team:

This is not the only support project countries are receiving related to capacity strengthening in pesticides management. It should be noted that project countries do also have resources from other sources such as national as well as external e.g. WHOPES (BMGF); other GEF DDT projects (AFRO.1 and MENA); ASP; bilateral support; SAICM, etc. Therefore, funding from this project will complement the other initiatives in the area of capacity building in DDT reporting. Consequently, coordination of activities with the above projects and initiatives is critical to ensure that they are working complimentarily ***(see as well Part 2, Section E)***

16. How would the proposed project outcomes and global environmental benefits be affected if GEF does not invest ?

Not applicable at PIF/work Program Inclusion.

17. Is the GEF funding level of project management budget appropriate ?

Management costs inclusive of WHO executing agency costs (8%) should not exceed 10 %. At present when including WHO's overhead costs it is approximately 15 %. (We offer as suggestions the possibility of UNEP sharing the GEF Agency fee, and/or WHO to count its overhead costs as co-financing).

Response from Project Team: The budget for this budget line has been adapted and is now in accordance with GEFSEC's requirement.
Independent Project Evaluation (budgeted at $ 20,000) is not part of Management costs (according to GEF guidelines) and is as such budgeted for separate.

18. Is the GEF funding level of other cost items (consultant etc.) appropriate ?

Not applicable at PIF/work Program Inclusion

Response from Project Team: Details concerning the planned consultants for the project are provided in Annex 4.

19. Is the indicative co-financing adequate for the project ?

Co-financing is expected in-kind from WHO ($335,000) and from participating countries (estimated at $ 320,000). The GEF's expectation is that all GEF resources will be directed to capacity strengthening in the participating countries, and that any WHO activity will be supported through WHO's in-kind contribution.

Response from Project Team: The expected and estimated co-funding amounts are mentioned in Part A. All project resources are directed towards capacity strengthening in the participating countries. WHO activities are as well directed towards strengthening the capacities in the countries.

20. Are the confirmed co-financing amounts adequate for each project component ?

Not applicable at PIF/work Program Inclusion

21. Does the proposal include a budgeted ME Plan that monitors and measures results with indicators and targets?

Not applicable at PIF/Work Program Inclusion.

Response from Project Team: The proposal includes a detailed and budgeted ME Plan. Expected Outputs and anticipated activities can be measured with targets and indicators which are provided in the Logical Framework (Annex 1).

E. Secretariat's Response to various comments from:

- STAP

none received

- Convention Secretariat

none received

- Agencies' response to GEFSEC comments

Not applicable at PIF/Work Program Inclusion

F. Secretariat Decisions

22. Is PIF clearance being recommended ?

Yes.

Response from Project Team: PIF approval dated 13 December 2007 received by Implementing Agency.

23. Items to consider at time of CEO Endorsement.

See a number of points raised in this review which will have to be reflected in the final project document for CEO endorsement, including management costs, incremental reasoning, and choice of participating countries.

Response from Project Team: All mentioned issues have been clarified above and are take into account in the document.

Annex 4: Consultants to be hired for the project

Position Titles	*$/ person week*	*Estimated person weeks*	*Total estimated amount*	*Tasks to be performed*
For Project Management				
Local				
Local consultants	800	39	31,140	Provide National Project Management services as support to the National Project Coordinator (who will deal only with technical issues) and provide feed-back to and linkage with the International Project Manager
International				
Project manager	3,000	21	63,000 US $	Project management, coordination, reporting
Admin & fin. Support staff	2,500	18	45,000 US $	Facilitate release of funds and timely delivery of materials and supplies, compile financial report
For Technical Assistance				
Local				
Training on DDT reporting	890	28	25,000 US $	Organize training, teach and report
Training on monitoring of insecticide resistance	890	28	25,000 US $	Organize training, teach and report
National project coordinators (each country 1)	525	60	31,500 US $	Providing national input to the various national stakeholders to improve the reporting of DDT use etc.
International				
Consultant(s) for training on DDT reporting, monitoring resistance, improving reporting channels & cross sectoral collaboration	2666	37,5	100,000 $	Training on DDT reporting requirements, obligations vis a vis SC, monitoring resistance, improving reporting channels & cross sectoral collaboration.

Annex 5: status of implementation of project preparation activities and the use of funds

Not applicable: No PPG funds have been used for the development of the proposal.

UNITED NATIONS ENVIRONMENT PROGRAMME

Programme des Nations Unies pour l'environnement | Programa de las Naciones Unidas para el Medio Ambiente
Программа Организации Объединенных Наций по окружающей среде | برنامج الأمم المتحدة للبيئة
联合国环境规划署

UNEP

PROJECT DOCUMENT

SECTION 1: PROJECT IDENTIFICATION

1.1	**Project title:**	Establishment of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.
1.2	**Project number:**	GFL/3349 PMS:
1.3	**Project type:**	MSP
1.4	**Trust Fund:**	GEF
1.5	**Strategic objectives:**	
	GEF strategic long-term objective:	SP1
	Strategic programme for GEF IV:	POPs
1.6	**UNEP priority:**	Hazardous Chemicals
1.7	**Geographical scope:**	Global
1.8	**Mode of execution:**	External
1.9	**Project executing organization:**	World Health Organization - WHO
1.10	**Duration of project:**	36 months Commencing: January 2010 Completion: December 2012

1.11	**Cost of project**	**US$**	**%**
	Cost to the GEF Trust Fund	**837,540**	**55**
	Co-financing		
	Cash		
	Sub-total		
	In-kind		
	WHO in-kind	**335,000**	
	Countries in-kind	**351,140**	
	Sub-total	**686,140**	**45**
	Total	**1,523,680**	**100**

1.12 Project summary

Given the uncertainties associated with the use of DDT, there is urgent need to monitor its production and use to establish its continued need for disease vector control. Paragraph 4, Part II of Annex B of the Stockholm Convention on persistent organic pollutants states that 'every three years, each Party that uses DDT shall provide to the Secretariat and the World Health Organization information on the amount used, the conditions of such use and its relevance to that Party's disease management strategy, in a format to be decided by the Conference of Parties (COP) in consultation with the World Health Organization (WHO)'. Concomitantly, paragraph 6, Part II of Annex B requires that 'the Conference of the Parties shall, in consultation with the WHO, evaluate the continued need for DDT for disease vector control on the basis of available scientific, technical, environmental and economic information…'

The GEF is now the interim principal financial mechanism of the Convention to which capacity building and efforts to reduce the need for DDT are priority areas to be addressed for funding.

The COP further requested the Secretariat in collaboration with the WHO to undertake, subject to the availability of funds, activities for strengthening the capacity of Parties as referred to in paragraph 8 (b) of the note by the Secretariat (UNEP/POPS/COP.2/4) on evaluation of the continued need for DDT for disease vector control and alternative strategies to replace DDT. These activities are to be in accordance with Section 3.2 of document UNEP/POPS/COP.2/INF/3 concerning a proposal for reporting on and evaluating the use of DDT and its alternatives for disease vector control which was prepared by the WHO in cooperation with the UNEP and the Secretariat of the Stockholm Convention based on a request made in decision SC-1/25.

This project aims at providing support to activities in order to build and strengthen such data collection and reporting capacity.

TABLE OF CONTENTS

ACRONYMS AND ABBREVIATIONS

AFRO	Africa Region of the World Health Organization
COP	Conference of Parties
DDT	1,1,1-trichloro-2,2-bis (4-chrophenyl) ethane, a persistent organic pollutant
DGEF	UNEP Division of GEF Coordination
EA	Executing Agency
EMRO	North Africa & Eastern Mediterranean Region of the World Health Organization
EOU	UNEP Evaluation and Oversight Unit
FAO	Food and Agriculture Organization (of the United Nations)
GEF	Global Environment Facility
HQ	Head Quarter
IA	Implementing Agency
IRS	Indoor Residual Spraying
ITN	Insecticide Treated Net
IVM	Integrated Vector Management
M&E	Monitoring and Evaluation
MoE	Ministry of Environment
MoH	Ministry of Health
NIP	National Implementation Plan
POP	Persistent Organic Pollutant
SC	Steering Committee
SCC	Stockholm Convention Secretariat
SP	Strategic Program
TOR	Terms of Reference
UN	United Nations
UNEP	United Nations Environment Program (of the United Nations)
USAID	United States Agency for International Development
WHO	World Health Organization (of the United Nations)

SECTION 2: BACKGROUND AND SITUATION ANALYSIS (BASELINE COURSE OF ACTION)

2.1. Background and context

1. Given the uncertainties associated with the use of DDT, there is urgent need to monitor its production and use to establish its continued need for disease vector control. Paragraph 4, Part II of Annex B of the Stockholm Convention on persistent organic pollutants states that 'every three years, each Party that uses DDT shall provide to the Secretariat and the World Health Organization information on the amount used, the conditions of such use and its relevance to that Party's disease management strategy, in a format to be decided by the Conference of Parties (COP) in consultation with the World Health Organization (WHO)'. Concomitantly, paragraph 6, Part II of Annex B requires that 'the Conference of the Parties shall, in consultation with the WHO, evaluate the continued need for DDT for disease vector control on the basis of available scientific, technical, environmental and economic information…'

   In paragraph 4 of its decision SC-1/25 made at its first meeting in 2005, the COP adopted the format and questionnaire contained in annex III to the decision by which Parties that produce, use, export, import or maintain stocks of DDT are to inform the Secretariat of the Stockholm Convention (SSC) in order to assist the COP in its evaluation in the continued need for DDT in disease vector control. This questionnaire was revised and simplified by the Secretariat and the COP, at its third meeting in 2007, adopted the new format.

   Further, in paragraph 7 of decision SC-1/25, based on the recommendations from the first meeting of the Expert Group that assessed the global information collated on DDT, the COP concluded that 'sufficient capacity at the national and sub-national levels is necessary for effective implementation, monitoring and impact evaluation (including associated data management) of the use of DDT and its alternatives for disease vector control, and recommends that the financial mechanism of the Convention support activities to build and strengthen such capacity as well as measures to strengthen relevant public health systems.' The GEF is now the interim principal financial mechanism of the Convention to which capacity building and efforts to reduce the need for DDT are priority areas to be addressed for funding.

   This project aims at providing support to activities in order to build and strengthen such capacity.

   The COP further requested the Secretariat in collaboration with the WHO to undertake, subject to the availability of funds, activities for strengthening the capacity of Parties as referred to in paragraph 8 (b) of the note by the Secretariat (UNEP/POPS/COP.2/4) on evaluation of the continued need for DDT for disease vector control and alternative strategies to replace DDT.

   These activities are to be in accordance with Section 3.2 of document UNEP/POPS/COP.2/INF/3 concerning a proposal for reporting on and evaluating the use of DDT and its alternatives for disease vector control which was prepared by the WHO in cooperation with the UNEP and the Secretariat of the Stockholm Convention based on a request made in decision SC-1/25. The WHO currently works closely with Ministries of Health in malaria endemic countries by providing technical support for establishing regimes for controlling the malaria disease and by extension the malaria vector. The training activities will be undertaken by the technical team of the WHO working in collaboration with the central and regional health teams in the targeted countries. The Secretariat of the Convention and UNEP will provide support during these training activities by improving the

understanding of the process, the critical role being played by the trainees in satisfying the obligations of the Convention and how the information being collected can impact positively on vector control in the future.

During the initial data collection and evaluation on DDT use that was completed at the first COP in 2005, the response by Parties to the request for information was poor and even the completed questionnaires received had major gaps in information. The poor response and paucity of information received during the first evaluation of DDT use continued during the second evaluation undertaken for the third COP in May 2007. The initial objective of this set of activities would be to improve the reporting performance for the third evaluation of DDT use to be undertaken at the fourth COP in 2009. To maximize the effect of the exercise, 14 countries from the countries known to (intend to) produce or use DDT, all of them in the WHO AFRO Region and WHO EMRO Regions, are selected based on known or intended DDT use for health purposes, poor current reporting procedures and infrastructure and supported by their endorsement of participation in the exercise[1].
China (a well known producer of DDT) is not using DDT in the Health Sector and is as such not included in the list.
Other countries which have reported intended use of DDT include Marshall Islands and Myanmar.
Marshall Islands is already for a long period of time not using DDT but has registered its intended use of DDT in case climate change might cause a return of malaria to this country in future[2].
All malaria vectors in Myanmar are resistant to DDT[3]. However, seen the seriousness of malaria in the country, Myanmar has registered its possibility to apply DDT.
India is one of the main producers and users of DDT in the Health Sector globally. Seen its specific status, India will be included in a specific project("India: Reduction in the use of DDT by Enhancing Capabilities for the Implementation of Vector Management"), part of the global UNEP/WHO programme on demonstration of feasible alternatives to DDT in malaria vector control (Program outline soon to be submitted to GEF Council for approval).
DPR Korea is reportedly producing DDT and using DDT in agriculture. Seen the specific nature of this issue in this country, it is preferred to leave DPR Korea outside the project.

It is envisaged that given the success achieved in improving the flow of information on DDT production and use, further activities will be carried out subsequent to the third evaluation in 2009 to inform **all** relevant Parties globally to ensure that comprehensive and comparable data sets are achieved to make periodic informed decisions on the continued need of DDT for disease vector control.

All proposed project countries have ratified the Stockholm Convention and are listed in Appendix 14.

2.2. Global significance

[1] This project should be considered as a Global Project and as such and in line with the GEF regulations there are no Endorsement Letters attached to this proposal. However, several countries of this project have endorsed the project in writing. A full set of endorsement Letters can be obtained after the first 6 months of project implementation.
[2] Source: Draft NIP, May 2007.
[3] Source: http://www.rbm.who.int/wmr2005/profiles/myanmar.pdf

2. This project will provide significant global benefits. First, it will provide improved capacity of Parties for complete and timely reporting on the use of DDT and its alternatives. Second, it will deliver –through improved reporting- increased availability of comprehensive and representative data sets on DDT for global evaluations by the Conference of the Parties. Improved reporting will allow the COP, in consultation with the WHO, to evaluate the continued need for DDT for disease vector control and as such it will directly contribute to the implementation of the Stockholm Convention.

2.3. Threats, root causes and barrier analysis

3. Consistent with the commitment reflected in the World Health Assembly Resolution 50.13, which urges the WHO Member States to initiate sustainable actions to reduce the use of pesticides, this project supports amongst others the decision taking process in each country whether to use or not to use DDT in malaria vector control operations also based on *vector resistance.* This is normal practice according to WHO guidelines however, due to *financial and technical constraints* and the *lack of administrative capacity* in most if not all of the project countries, vector resistance is rarely included in the decision taking process in country level. Proper reporting and data collection is crucial for the decision taking process whether to use DDT or not in a certain situation. However, this proper data collection is not done. Even for the countries in this project that have communicated to WHO the intention to revert to DDT, there is a palpable indication that these decisions could be reversed if there is a concerted international support to assist them in the decision taking process of what approach to be applied in malaria vector control (including sustaining and improving the availability, affordability and effectiveness of the alternatives as is done in related projects of the Global DSSA Program[4]). Date required in that case is the amount related to DDT production and use as part of the information gathering process to feed the decision taking process. Such needs were confirmed at the two joint WHO-UNEP regional workshops related to the Stockholm Convention, which were organized to gather information from the countries in the region with respect to the current status of POPs and the use of DDT (Meetings held in Tunis in October 2003, and in Amman, in December 2003).
Last but not least, countries have to report to the Secretariat of the Stockholm Convention as part of their obligation as Party. However, s*uitable institutional infrastructure including cross-sectoral information exchange in order to collect reliable data, is absent* in most if not all countries of this project.

2.4 Institutional, sectoral and policy context

4. Part II of Annex B of the Stockholm Convention provides in its paragraph 4:

> "Every three years, each Party that uses DDT shall provide to the Secretariat and the World Health Organization information on the amount used, the conditions of such use and its relevance to that Party's disease management strategy, in a format to be decided by the conference of the Parties in consultation with the World Health Organization."

This project will support the development of a sound institutional infrastructure in each project country to collect and submit obligatory data as required by the Stockholm Convention of most countries in the world using DDT.

[4] DSSA=Demonstrating and Scaling up of Sustainable Alternatives to DDT in Vector Management Global Program

2.5. Stakeholder mapping and analysis

5. Stakeholders to this project are the United Nations Environment Programme (UNEP) having 'the environment' and as such polluting chemicals in its global mandate. The World Health Organization (WHO) is the UN organization with 'health' in its global mandate. Both UN Organizations are involved as the chemical DDT used for malaria vector control is of concern for human health and the environment.

   The project will work with national offices of the WHO and with representatives of involved countries and selected institutions mainly in the health sector (in all countries the Ministry responsible for Health will be involved but the final project partners will be selected during the implementation of the project).

   The capacity of the national representatives to collect data with regards to DDT production and use and with regards to the registration of DDT production and use to the Secretariat of the Stockholm convention is very weak.

2.6. Baseline analysis and gaps (2.6)

6. No detailed base-line analysis has been conducted. However, the WHO, based on a request by the COP in its decision SC-1/25 section 8 (c), conducted a study of the data collection and reporting procedures for DDT from five countries. This study concluded that the following priority areas required attention:

   1. Lack of or inadequate insectaries and associated capacities for entomological evaluations
   2. Ineffective capacities for spray team supervision
   3. Inadequate capacities for stock management of DDT and other pesticides
   4. Weak capacity for data management
   5. Weak inter-sectoral collaboration

   In addressing these issues, at its second meeting, in paragraph 5 of its decision SC-2/2, the COP re-affirmed that 'capacity strengthening' is necessary for Parties adequately to collect data and report on DDT production and use.
   Based on local knowledge of the participating countries to the project, WHO has confirmed that national structures do not invest in capacity strengthening with regards to reporting requirements according to the obligations of the Stockholm Convention.

2.7. Linkages with other GEF and non-GEF interventions (2.7)

7. Many of the collaborating countries have finalized or are in the last stages of finalization of the National Implementation Plans (NIPs). In many if not all project countries, the management of POPs / DDT (including data collection, cross sectoral communication and data exchange, reporting requirements, etc.) seem to be sub-standard and many times it has been specifically mentioned as not being adequate.

   As such, this project can be seen as a logic follow-up to the NIP to enhance the capacity of relevant countries to up-grade their capacity to implement the Stockholm Convention.

   There are a number of initiatives in WHO relevant to this project. WHO/HQ coordinates its activities at country level through the Regional Offices. This arrangement will ensure that, although the project is submitted through HQ, its activities at country level will be well

coordinated through this mechanism. There are also specific projects/initiatives currently undertaken and coordinated by WHO/HQ which will compliment this project as follows: the GEF funded DDT projects in Africa and the Middle East; the Bill and Melinda Gates support in 12 countries globally – of which some are also recipient of this project; country-specific proposals to SAICM on strengthening capacity for management of obsolete pesticides; and the Global Fund-supported activities for malaria vector control of which a big portion of the support goes towards promoting DDT alternatives. It is also possible to establish link between focal persons and national steering committees for the various projects and initiatives.

There are currently five GEF-funded DDT projects executed or under development by WHO and UNEP (in the Middle East and North Africa, Mexico and Central America, Sub-Sahara Africa, and Southeast Asia and the Pacific, and Central Asia). Other projects are expected to be followed soon (for example for India). These projects focus primarily on vector management measures.
This project however will leverage the data on DDT application and related issues (like resistance monitoring) and support national institutions in fulfilling their reporting requirements to the Stockholm Convention Secretariat.
Although not directly linked with each other, a proper organized data registration environment, will improve effectiveness of operations as envisaged by the other projects. Vice versa, demonstration and promotion of alternatives to DDT (as envisaged in the above named projects) and vector resistance will ultimately reduce the application of DDT in vector control and as such contribute to the Project Purpose (:To contribute to the reduction of emission of POPs pesticides (DDT) into the global environment).

In addition, the other WHO/UNEP regional projects could assist in the dissemination of this project's findings.

SECTION 3: INTERVENTION STRATEGY (ALTERNATIVE)

3.1. Project rationale, policy conformity and expected global environmental benefits

8. This project will provide significant global benefits. First, it will provide improved capacity of Parties for complete and timely reporting on the use of DDT and its alternatives. Second, it will deliver –through improved reporting- increased availability of comprehensive and representative data sets on DDT for global evaluations by the Conference of the Parties. Improved reporting will allow the COP, in consultation with the WHO, to evaluate the continued need for DDT for disease vector control and as such it will directly contribute to the implementation of the Stockholm Convention.

3.2. Project goal and objective

9. The development objective or project **goal** of this project is to protect human health and the environment by supporting the availability of data related to the use of DDT and its alternatives to enable proper evaluation of the continued need of DDT in malaria vector control. The project (immediate) **objective** is:

   To develop the capacity of the selected Parties to enable the provision of complete information on the production and use of DDT for disease vector control.

   To accomplish this objective, the project's institutional components will address the systems, structures, rules, organizations, and incentives that are related to the reporting of DDT use and production.

The project would last for 36 months and would accomplish the outcomes as mentioned in the Logical Framework (Appendix 4) through the components as provided in the next paragraph.

3.3. Project components and expected results

10. **Component 1)** Central institutions in project countries identified and strengthened to report DDT use, production etc. in an adequate way;

Component 2) Spray Team leaders and regional support teams trained;

Component 3) Training institutionalized as routine in-service training within national vector control programs;
Component 4) Countries enabled to monitor chemicals resistance of vector in an adequate way;
Component 5) Cross sectoral alliances established and guidelines implemented;

Component 6) Project Management operational.

See Appendix 4 for a full Logical Framework.

3.4. Intervention logic and key assumptions

11. Main assumption for successful implementation of the project is that policy makers and stakeholders from multiple sectors will be willing to assist in the development and be willing to use the data collection and reporting procedures. It is further assumed that policy makers will be willing to use the improved availability of data as basis for policy decisions.

3.5. Risk analysis and risk management measures

12. Risks to the project are related to these assumptions. Risks and project provisions for the mitigation of risks are provided in the table below:

Risks and Project Provisions for the Mitigation of Risk	
Nature of Risks	**Mitigative Provisions of the Proposed Project**
Policy makers and stakeholders from multiple sectors unwilling to assist in development of procedures and guidelines	Countries were selected based on their stated commitment to and interest in the project. Prior meetings in all countries and project development workshops have identified an initial group of stakeholders representing various sectors, and these stakeholders have expressed willingness to participate in project development.
Decision makers unwilling to use procedures and guidelines to report to the Secretariat of the Stockholm Convention	Decision makers will be involved in the development at several stages to ensure that the reporting guidelines/procedures addresses their questions and needs and that it is user-friendly. Decision makers' involvement in the development stage will foster a feeling of ownership over the project that will lead to high levels of use in future.
Insufficient access to a variety of DDT-related information sources, including local users,	Local users and staff responsible for storage, purchase, etc. will be identified and consulted throughout project development.

storage sites, and other country-specific resources	
Lack of stakeholder participation in trainings	Previous experience during Consultation meetings has laid the groundwork for continued stakeholder participation. In future efforts, a well selected target audience will be invited to participate in activities. Awareness raising about the Stockholm Convention requirements and the importance of regular evaluations of the continued need for DDT in malaria vector control will be included.
Procedures and guidelines are not socially / culturally / institutionally acceptable	The extent of national and local involvement in the project in each of the participating countries will mitigate this risk.
Climate changes triggers increases number vector borne disease outbreaks followed by intensified malaria vector eradication campaigns with or without the use of IRS and/or use of DDT	The actual application of DDT (amounts, frequency, alternative chemicals, etc.) will not disturb the project as this project aims at assisting in proper registration and reporting. However, the change in DDT application pattern due to climate change might show the need for a more flexible registration/reporting system, including areas/institutions which might become effected in future by malaria outbreaks due to climate change. The project will take this into account.

3.6. Consistency with national priorities or plans

13. The status of National Implementation Plans (NIPs) in the project countries is as follows (see table below). In many if not all project countries, the management of POPs / DDT (including data collection, cross sectoral communication and data exchange, reporting requirements, etc.) has been specifically mentioned as not being adequate.

Project country	**NIP status**	**Project relevant (priority) issues as mentioned in NIP**	**national priorities on vector control, wishes / requirements to comply with Stockholm Convention, information about priorities/policies on DDT use from WHO, and currently known knowledge from WHO about the situation with regards to capacity needs in project countries specially where no NIP is available yet**
Eritrea	NIP not available	n.a.	-Vector control is the pillar of vector borne diseases control particularly malaria. -Application of IRS using DDT is complemented mainly by ITNs and in some places by larval control as well - Safe storage and transport system/capacity and reporting procedures need to be strengthened
Ethiopia	NIP available	- management of DDT not adequate; - no reliable records of DDT use, imports, etc.; - main concern about	- The vector control with application IRS and LLINs within the context of IVM is a major malaria control strategy. - The most used insecticide is DDT. However malathion is applied in areas with reduced

		monitoring DDT production and use; - storage, use and handling of DDT is far from desirable; - strongly recommended to raise awareness and support capacity building in handling DDT in IRS; -alternatives to DDT should be introduced.	susceptibility of vectors to DDT - Capacity for vector resistance monitoring lacks in the NMCP. The National Research Institute for Health & Nutrition (NRIHN) supports the program to some extent but there a big gap to be filled - Overall sound management and disposal of DDT is far from being safe - support for proper reporting of DDT application according to the requirements is urgently needed.
Madagascar	NIP not available	n.a.	-Vector control is a major malaria control strategy here too. -Currently, DDT is not used in Madagascar, kept aside for resistance management strategy if resistance appears against pyrethroids. -The country is participates in the WHO-Gates project on capacity building for sound pesticide management, which is overseen by multi-sectoral committee. - Capacity strengthening for safe management of insecticide and reporting is needed
Mauritius	NIP available	- certain pesticides stores highly contaminated with DDT; - serious soil contamination due to DDT in neighborhood of Ministry of Health stores; - DDT is a major source of POP in Mauritius; - current stock of DDT is kept under highly questionable conditions; - unawareness of risks by sprayers of DDT; - “one major reason that would explain the frequent use of DDT is because the current stock was obtained at no cost”; -alternatives to DDT should be introduced; - need for proper management and disposal of DDT; - chemicals inventory for Mauritius should be done; - “The Dangerous Chemicals Control	-Mauritius has effectively control malaria through years of IRS along side with case management. - Currently, here is no routine vector program but, focal spraying is conducted when sporadic imported cases are detected to avoid the risk of re-establishment of local transmission. -To date, there some amount of DDT in store that may need to disposed safely if the insecticide is no longer usable for vector control (subject to another GEF assisted project already) -The country needs support in the registration and reporting procedures towards SC Secretaeriat.

		Board should upkeep a DDT register which should be made available to the public".	
Mozambique	No NIP available	n.a.	-Scaling up/expansion of vector control with IRS is the priority in Mozambique. The NMCP uses various insecticides but mainly DDT. -Assessment done on the overall management of DDT revealed the gap that need to addressed. A national committed composed of MOH, MOE, USAID, WHO, FAO has been established to resolve the problem and follow up on implementation of actions recommended for capacity building for safe management of DDT -Mozambique also one of the beneficiaries of the WHO-gates project - support with regards to reporting and justification of applied DDT is urgently needed.
Morocco	NIP available	- Disproportional DDT stocks with regards to real needs; - Develop national capacity with regards to POPs management, - Exchange of POPs information with other countries (in the framework of South/South cooperation); - Elaborate and disseminate the reports as required by article 15 of the Stockholm Convention.	- Vector control in the framework of the integrated vector management (IVM) is one of the key strategies for disease vector control in Morocco - Although DDT is still one of the recommended insecticides for disease vector control, Morocco has made good progress in moving towards the use of DDT alternatives (under a separate GEF supported project as part of the global DSSA Programme) - MOH and partners (Agriculture and Environment) are currently working together to implement best practices of pesticides management which are line with identified needs from NIPs and which compliment the objectives of this project - Capacity strengthening in pesticide usage in general and for DDT in particular is critical, including proper and timely reporting according to the requirements of the SC.
Namibia	No NP available	n.a.	-Vector control with application of IRS is a major malaria control strategy in Namibia. DDT and pyrethriods are used. -Sound pesticide management particularly related storage, handling and disposal has including that of DDT has been a challenge. -Some inter-sectorial collaboration exists but needs to be strengthened. - Not sufficient knowledge and capacity for proper reporting of DDT use.
Senegal	NIP available	- Need for collection and processing of data on management of POPs; - Installation of mechanisms of exchanges of information for better life cycle management	-Vector control with application of IRS is a newly initiated strategy in Senegal. To date the country sprays DDT in a number of districts. The technical and programmatic capacity and system for safe and proper management of DDT needs a special attention. -Inter-sectorial collaboration between the relevant stakeholders should be promoted. - registration and reporting of used DDT needs to

		of POPs chemicals; - Reinforcement of human and logistical capacity vis a vis the requirements of the Convention; - Better control and document imports and distribution of DDT; - Develop a national, sous-regional and regional database on POPs; - Many gaps in POPs data bases and subsequently no proper management of POPs; - Promote alternatives to POPs (specially DDT); - Promote following WHO guidelines for DDT application in vector control.	be strengthened.
South Africa	No NIP available	n.a.	- Vector control with IRS has been the main stay vector control in South Africa for more than half a century. -DDT is on use almost through out same period. Pesticide management system and technical capacity good. There is good inter-sectoral collaboration with regards to this. - Registration and proper reporting to the SC Secretariat needs strengthening.
Swaziland	No NIP available	n.a.	- The situation in Swaziland is similar to that of South Africa.
Uganda	No NIP available	- Uganda emphasizes the need for alternatives to DDT in vector control; - need for resistance management; - capacity is lacking concerning assessing illegal import and use of DDT; - intersectoral linkages and international linkages should be strengthened; - lack of capacity to handle chemical management issues (including administrative and	-To date, vector control is a major component of the vector born disease, particularly malaria control strategy in Uganda. IRS using became a complementary intervention in the few years. -The application DDT has been a focus of debate for the sometimes. -Capacity for safe pesticide management is scarce as IRS is a newly introduced intervention. Technical capacity, system and knowledge for safe pesticide management has to be developed. -Establishment of inter-sectoral collaboration between stakeholders is highly desirable for sound management of pesticides but at the same time a challenge for proper reporting to the Secretariat of the SC.

[5] Source: Draft NIP Uganda

		reporting issues); - Ministries and agencies should re-examine and redefine their roles and responsibilities in the management of chemicals, including DDT. Capacity needs assessment should be undertaken and gaps identified for addressing.[5]	
Yemen	No NIP available	n.a.	- Although no NIPs assessment report is available to-date, vector control is a key strategy for disease vector control - DDT is not used currently for vector control but the country has requested the Secretariat for its exemption – especially its use during vector disease epidemics - The country through the MOH has established a strong multi-sectoral coordination in which pesticide management for both public health and agricultural use is critical - Yemen sees the current project as an opportunity to strengthen its capacity of pesticide reporting in general and for DDT in particular
Zambia	No NIP available	n.a.	-The vector control policy in Zambia encompasses the use of ITNs and IRS. Zambia is one of the countries where the use of vector control is on significant increase. -Unlike many countries Zambia has put a significant effort to increase the capacity for safe management (including disposal) of pesticides. However, still some capacity building is needed to ensure sound pesticides management is sustained as the vector control program expands -The inter-collaboration though needs to be strengthened, including the reporting and justification of pesticides.
Gambia	No NIP available	n.a.	-Gambia is introducing IRS with the application of DDT as a vector control method alongside ITNs. -Gambia, needs capacity building (including reporting) in overall use, handling and management of pesticide including DDT. -As the IRS program is initialized as inter-sectoral collaboration but improvements are needed to establish better public health pesticides management including registration/reporting processes, quality control and so on.

3.7. Incremental cost reasoning

14. Governments are in principle interested in reducing malaria outbreaks and improving the health standards for their populations. The involved Ministries of Health are principally interested in health aspects of the population.

    Seen the above, there is no great effort to inform the Secretariat of the Stockholm Convention on DDT aspects because of 'global environmental concern'.
    As such, the baseline cost of the project consists only of the time normally spent by government officials and experts preparing and participating in workshops and collecting and analyzing data on the amounts of DDT use, imported, reformulated etc. in the field of vector control in each country. Seen the current level of reporting, the baseline costs are very low or even zero (but could not be estimated as no data is available). The current project anticipates agency involvement in amongst other issues the development and outlining of reporting guidelines, identifying institutional barriers to collect as complete as possible reliable data, implement optimal data collection procedures, including training activities. These activities would not have taken place in the same way and scale (or even at all...) as compared to the current project. Including Monitoring & Evaluation, the estimated and budgeted incremental costs are US $ 1,447,540.

3.8. Sustainability

15. The success of the project is subject to several potential risks, which are summarized in chapter 3.5 above. Along with the measures included in the proposal to mitigate these risks. Most of these measures involve ensuring an adequate level of stakeholder involvement throughout the project so that the end product will be useful and appropriate for addressing both the local and global requirements. Ultimately, the sustainability of the project will depend on the acceptability of the procedures and guidelines and training developed, as well as ongoing support from relevant government agencies and stakeholders. Additional measures to address sustainability are the following.

    - The project will work directly with and strengthen identified Central Institutions in charge of DDT use and reporting, ensuring that project benefits will continue to exist beyond the life of the project.

    - The project will facilitate active stakeholder engagement and work plan inclusion across sectors including relevant agencies in Ministries of Health, Environment, and Agriculture. The resulting dialogue and ownership of the procedural and reporting framework and associated guidelines will foster continued collaboration and coordination in health and environmental policy.

    - Although all relevant DDT using/producing countries are involved in the project, the project will feature the direct involvement of WHO and UNEP who will incorporate the achievements into their ongoing programs on DDT and malaria control in other countries. Countries specifically not included in this project (like India) can as such make use of the achievements as well.[6]

[6] Based on a request of the Government of India, UNEP/WHO are currently discussing the development of a project "Reduction in the use of DDT by enhancing capabilities for the implementation of Integrated Vector Management", a project including a component "Capacity building within relevant institutions to enable the provision and reporting of complete information on the production and use of DDT and its alternatives for disease vector control as required by the Secretariat of the Stockholm Convention".

3.9. Replication

16. Based on the expected outcomes of the project, it is anticipated that project Parties (all being Parties which use/produce or intend to use DDT for malaria vector control) will report according to standard and agreed formats and procedures to the Secretariat of the Stockholm Convention.

    Through the UNEP/WHO global partnership, outcomes will be communicated directly with the very few other relevant Parties which are not included in this project.
    Further replication is not needed.
    Information about the project outcomes will be disseminated through the global DDT Expert Group meetings and the Stockholm Convention website.
    Procedures and guidelines developed by the project will be incorporated in WHO's global monitoring and evaluation system for DDT use in malaria control.

3.10. Public awareness, communications and mainstreaming strategy

17. National Implementation Plans in participating countries have been developed through a multi-stakeholder processes, where representatives from key ministries participated and endorsed the final NIP. In those NIPs the development of an information exchange, monitoring and reporting system has been identified as national priorities. There is a direct interest and commitment of the countries to follow-up on the project activities on a longer term to serve the national efforts to comply with the Stockholm Convention.

3.11. Environmental and social safeguards

18. Collection of data (for example data about production and use of DDT, DDT storage, operation of equipment, disposal of waste) will be carried out according to predefined guidelines as prepared by WHO and discussed with partners in the countries during various training sessions.

    Treatment of data and reporting of results will in general follow the guidelines provided by the Stockholm Convention Secretariat.

SECTION 4: INSTITUTIONAL FRAMEWORK AND IMPLEMENTATION ARRANGEMENTS

19. WHO Global Headquarter, Geneva, will coordinate the execution of the project on the global level.

    A dedicated Project Manager will be part time appointed to oversee these activities and to mainstream project activities into WHO global activities related to this project.

    The Project Manager will be assisted by part time admin and financial staff. For its global management activities, WHO has agreed upon a maximum of 10 % Project Support Costs (Management costs), which is as well reflected in the budget of this project.

    The WHO Regional Office in Brazzaville (with regards to WHO's project activities in the AFRO Region) and the WHO Regional Office in Cairo (with regards to the Eastern Mediterranean WHO's project activities) will provide technical support and coordination to the project, as well these offices will function as linkage between the project and the project countries.

All project countries have WHO country offices which will conduct day to day project coordination tasks in close collaboration with all relevant national stakeholders.

To ensure that all partners are working together in close coordination, the World Health Organization's African Regional Office will take the lead role in project coordination and management as the executing agency. WHO and UNEP will convene a Steering Group that will regularly meet to coordinate partner activities. The Steering Group will oversee monitoring and evaluation efforts to ensure that the project is achieving its desired results.

This project involves a diverse set of organizations whose respective strengths combine to create strong complementarities and synergies. The World Health Organization Regional Office for Africa (AFRO) will serve as a delegated executing agency and thus provide critical coordinating functions for the project. In addition, WHO AFRO will provide advice and guidance on the international, national, and local institutional structures that play an important role in reporting the use and the production of DDT for vector control, as well as insights on consensus views on how best to deal with the respective partners in each of the participating countries. These contributions will deepen the information architecture that serves as the basis for the improved reporting procedures and data collection for the evaluation of the continued need of DDT for disease vector control. WHO AFRO will also assist with a regional trainings and will provide a platform for future extensions of the proposed activities to additional countries.

Local **in-country collaborators** have to be identified in all project countries and they will serve as a critical link to the local habits of DDT use, production etc. and the operational context. These collaborators will be actively involved in the efforts designed to strengthen the institutional capacity in each country. As such, their knowledge of local stakeholders is invaluable. Ultimately, the in-country collaborators will serve as the local advocates for the adoption and use of improved data collection and reporting procedures.

In addition, the project will benefit from the advice and guidance offered by a Steering Group composed of WHO AFRO, UNEP, and representatives from the fourteen in-country collaborating institutions.

As a group, this set of, provide the human resources required to successfully strengthen the reporting capacity and ensure its adoption and use in the thirteen project countries. In addition, by incorporating the perspectives of multiple different kinds of collaborators, the project envisaged improved data collection and reporting procedures will be a valid tool for replication and adaptation in malaria endemic areas throughout the world. The Steering Group provides a clear mechanism for coordinating the group of collaborators thus ensuring timely progress on project goals and benchmarks.
Appendix 10 shows the Project Organizational Chart.

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SECTION 5: STAKEHOLDER PARTICIPATION

20. Relevant national stakeholders will be selected as part of this project during the starting up of the project in each country. This project responds to the obligation of Parties to the Stockholm Convention to inform the Secretariat of the Convention in order to assist the COP in its evaluation in the continued need for DDT in disease vector control. As such, the current project supports Parties in their obligation through capacity building and institutional strengthening.

    As Parties have all ratified the Stockholm Convention and are in various stages of formulation and/or completion of the National Implementation Plan (NIP).
    In NIPs of several of these countries, DDT is mentioned as an issue of concern or countries have identified DDT as a priority in their (draft) NIPs, calling for improved capacity in the management of DDT and improved understanding of alternatives to DDT (draft NIP Mozambique). In certain countries (like Uganda) there is an ongoing political debate about the use of DDT and its alternatives. This project could help inform these debates and influence the evaluation of continuous need of DDT in malaria vector control.
    Morocco uses relatively small amounts of DDT in malaria vector control but maintains a disproportional quantity of DDT as stock. According to its NIP it has identified the further development of its capacity for POPs management as one of the national priorities.
    Ethiopia is an active DDT importer, formulator and user of DDT however the reporting obligations cannot be met due to lack of sufficient capacity and cross sectoral coordination.

    In the context of IVM strategy for the control of disease vectors a regional Consultation to prepare African countries for reduced reliance on DDT for malaria control was held 8-10 February, 2000, in Harare, Zimbabwe. This consultation was attended by policy makers and programme managers from countries that use or intend to use DDT for house spraying. Most

African countries included in this project have participated in this regional consultation. The Regional Consultation formulated recommendations that include:

- Countries currently using DDT for malaria vector control must establish and maintain a regulatory basis to ensure that DDT is used for public health purposes only;
- Alternatives to DDT should be introduced gradually into the national malaria control programmes (NMCP) after investigation of insecticide resistance, status and prospects; and
- Insecticide policy, legislation and inter-sectoral collaboration should enforce human health protection in the context of the use of alternative insecticides.

Since the initiation of the IVM process by WHO in 2001, countries are willing to implement IVM when the necessary advocacy has been done. One of the proofs is the re-establishment of vector control units in many countries. Project countries have all mentioned to be included in these reforms.

During project preparation, discussions about the project were conducted in each country with individuals involved in national malaria control programs and those involved in preparing National Implementation Plans. Input was solicited on ways to improve the project concept and maximize stakeholder involvement. Strong support was expressed for the project concept as a means to facilitate improved malaria policy making, better cross-sectoral coordination, and improved availability of relevant data in order to evaluate the continuous need of DDT for malaria vector control.

While resource constraints limited the countries to improve their procedural and reporting obligations, discussions with experts and stakeholders revealed that interest in improved data collection is widespread for national cost/benefit analysis. However, to enable the COP to judge the global necessity for continuation of DDT application in malaria vector control, a global and coordinated effort is needed.
This project will enhance urgently needed national capacity exclusively focusing on DDT using/producing Parties and at the same time result in the possibility for a more realistic and global evaluation of the need for continuous use of DDT for malaria vector control.

SECTION 6: MONITORING AND EVALUATION PLAN

21. The project will follow UNEP standard monitoring, reporting and evaluation processes and procedures. Substantive and financial project reporting requirements are summarized in Appendix 8. Reporting requirements and templates are an integral part of the UNEP legal instrument to be signed by the executing agency and UNEP.
22. The project M&E plan is consistent with the GEF Monitoring and Evaluation policy. The Project Results Framework presented in Appendix 4 includes SMART indicators for each expected outcome as well as mid-term and end-of-project targets. These indicators along with the key deliverables and benchmarks included in Appendix 6 will be the main tools for assessing project implementation progress and whether project results are being achieved. The means of verification and the costs associated with obtaining the information to track the indicators are summarized in Appendix 7. Other M&E related costs are also presented in the Costed M&E Plan and are fully integrated in the overall project budget.
23. The M&E plan will be reviewed and revised as necessary during the project inception workshop to ensure project stakeholders understand their roles and responsibilities vis-à-vis

project monitoring and evaluation. Indicators and their means of verification may also be fine-tuned at the inception workshop. Day-to-day project monitoring is the responsibility of the project management team but other project partners will have responsibilities to collect specific information to track the indicators. It is the responsibility of the Project Manager to inform UNEP of any delays or difficulties faced during implementation so that the appropriate support or corrective measures can be adopted in a timely fashion.

24. The project Steering Committee will receive periodic reports on progress and will make recommendations to UNEP concerning the need to revise any aspects of the Results Framework or the M&E plan. Project oversight to ensure that the project meets UNEP and GEF policies and procedures is the responsibility to the Task Manager in UNEP-GEF. The Task Manager will also review the quality of draft project outputs, provide feedback to the project partners, and establish peer review procedures to ensure adequate quality of scientific and technical outputs and publications.

25. At the time of project approval an estimated 90 percent of baseline data is available. Baseline data gaps (needs assessments with regards to institutional strengthening and making operational institutional infrastructure for reporting in each country) will be addressed during the first year of project implementation as part of strengthening Central Institutions in each country.

26. Project supervision will take an adaptive management approach. The UNEP Task Manager will develop a project supervision plan at the inception of the project which will be communicated to the project partners during the inception workshop. The emphasis of the Task Manager supervision will be on outcome monitoring but without neglecting project financial management and implementation monitoring. Progress vis-à-vis delivering the agreed project global environmental benefits will be assessed with the Steering Committee at agreed intervals. Project risks and assumptions will be regularly monitored both by project partners and UNEP. Risk assessment and rating is an integral part of the Project Implementation Review (PIR). The quality of project monitoring and evaluation will also be reviewed and rated as part of the PIR. Key financial parameters will be monitored quarterly to ensure cost-effective use of financial resources.

27. A mid-term management review or evaluation will take place 18 months after the start of the project as indicated in the project milestones. The review will include all parameters recommended by the GEF Evaluation Office for terminal evaluations and will verify information gathered through the GEF tracking tools, as relevant. The review will be carried out using a participatory approach whereby parties that may benefit or be affected by the project will be consulted. Such parties were identified during the stakeholder analysis (see section 2.5 of the project document). The project Steering Committee will participate in the mid-term review and develop a management response to the evaluation recommendations along with an implementation plan. It is the responsibility of the UNEP Task Manager to monitor whether the agreed recommendations are being implemented.

28. An independent terminal evaluation will take place at the end of project implementation. The Evaluation and Oversight Unit (EOU) of UNEP will manage the terminal evaluation process. A review of the quality of the evaluation report will be done by EOU and submitted along with the report to the GEF Evaluation Office not later than 6 months after the completion of the evaluation. The standard terms of reference for the terminal evaluation are included in Appendix 9. These will be adjusted to the special needs of the project.

29. The GEF tracking tools are not available for the POPs Focal Area.. These will be updated at mid-term and at the end of the project and will be made available to the GEF Secretariat along

with the project PIR report. As mentioned above the mid-term and terminal evaluation will verify the information of the tracking tool.

SECTION 7: PROJECT FINANCING AND BUDGET

30. **Overall project budget**
See appendix 1.

31. **Project co-financing**
See appendix 2.

32. **Project cost-effectiveness.**

The project will mainly make use of existing structures, partners and networks, also to ensure sustainability over the post project period. The fact that existing institutional networks from both the Executing Agency and governments are used contribute to the cost-effectiveness of this project. The project will not set up duplicative structures, instead it will complement activities which are already ongoing on a very limited (and un-satisfactorily) scale but need to expand in order to achieve larger (incremental) benefits.
Transboundary & international information exchange is seen as crucial in the project. This is currently only happening on a very limited scale. Lessons learnt in one of the project countries will be taken to other project countries and beyond. Possibilities for information exchange with other related initiatives are built in in the project.
UNEP/WHO have chosen the current approach with the opinion that nevertheless the large geographical distance between project countries in this global project, the current proposed setup is the most optimal in order to achieve the required outputs within the possibilities of the limited project budget. Other options (as for example setting up new institutional structures, launching different approaches for registering and reporting DDT use, etc,) are deemed to be unrealistic and/or more costly.

This GEF co-funded project is meant to achieve catalytic influences, including capacity building, policy and behavior changes, etc. which cannot be meaningfully quantified and related to a monetary amount. As such, the cost effectiveness of the selected approach is very difficult to quantify.

APPENDICES

Appendix 1: Budget by project components and by UNEP budget lines

Project Objective: To develop the capacity of the selected Parties to enable the provision of complete information on the production and use of DDT for disease vector control.

Project Components	Indicate whether Investment, TA, or STA**	**Expected Outcomes**	Expected Outputs	Indicative GEF Financing*		**Indicative Co-financing***		**Total ($)**
				($) a	**%**	**($) b**	**%**	c=a+b
1. Identification and strengthening through the development of institutional infrastructure of a central institution responsible for proper registration and regular reporting of data related to import/export/local formulation of DDT, the local application, areas of application, details of the field campaigns, impacts, etc.	STA	Identified central institutions in project countries strengthened and able to report DDT use, production etc. in an adequate way	- Names and contact details of responsible institutions in project countries - letter of commitment from each institution to register and report according to the requirements - at least 14 institutions received equipment, materials, other support as deemed relevant and training as part of strengthening - Institutional infrastructure for reporting in each country developed and operational - Guidelines for reporting developed and provided to identified institutions	250,000	50	250,000	50	500,000
2. Training of spray team leaders and regional support teams on field data collection and reporting (Regional cascade training to develop critical mass for	STA	Spray Team leaders and regional support teams trained	-Regional cascade trainings developed and successfully held -Participants attend training sessions and receive training	150,000	75	50,000	25	200,000

Parties).			materials					
3. Follow up activities to institutionalize training activity as routine in-service training within national vector control programmes	STA	Training institutionalized as routine in-service training within national vector control programs	-Training materials produced and handed over to national vector control programs in project countries -National training curriculum for vector control programs adapted	30,000	60	20,000	40	50,000
4. Training in resistance monitoring activities and establishing / strengthening vector resistance monitoring infrastructure in 12 countries	STA	Countries able to monitor chemicals resistance of vector in an adequate way	- Regional trainings on resistance monitoring developed and held - Participants attend training sessions and receive training materials - Country monitoring infrastructure developed and operational in each project country	200,000	50	200,000	50	400,000
5. Establishment of cross-sectoral alliances and implementation of guidelines for data collection and sharing between relevant government and non-government agencies	STA	Cross sectoral alliances established and guidelines implemented	- support to inter sectoral working groups is provided in all project countries in order to allow data sharing and implementation of guidelines	45,260	36	80,000	64	125,260
6. Project coordination and management				76,140	50	76,140	50	152,280
Independent Mid Term Review and Terminal Evaluation				10,000	50	10,000	50	20,000
Total project costs				761,400	53	686,140	47	1,447,540

GEF Expenditure per UNEP budget line

GEF Project No: 3349
Project Name: Establishment of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT in disease vector control.
Ex.Agency: WHO

			ALLOCATION BY CALENDAR YEAR **			
			Year 1	Year 2	Year 3	Total
		UNEP BUDGET LINE/OBJECT OF EXPENDITURE	US$	US$	US$	US$
10	**PROJECT PERSONNEL COMPONENT**					
	1100	**Project Personnel w/m (Show title/grade)**				
	1101	Project Coordinator	25,000	15,000	23,000	63,000
	1102	Assistant Administrator				0
	1103					0
	1199	Sub-Total	25,000	15,000	23,000	63,000
	1200	**Consultants w/m (Give description of activity/service)**				
	1201	Consultant DDT reporting	20,000	5,000		25,000
	1202	Consultant DDT Resistance measuring / interpretation	20,000	5,000		25,000
	1203	Int. Consultant(s) DDT reporting				0
	1204					0
	1299	Sub-Total	40,000	10,000	0	50,000
	1300	**Administrative support w/m (Show title/grade)**				
	1301					0
	1399	Sub-Total	0	0	0	0
	1400	**Volunteers w/m**				
	1401					0
	1499	Sub-Total	0	0	0	0
	1600	**Travel on official business (above staff)**				
	1601					0
	1699	Sub-Total	0	0	0	0
	1999	**Component Total**	65,000	25,000	23,000	113,000
20	**SUB-CONTRACT COMPONENT**					
	2100	**Sub-contracts (MoU's/LA's for UN cooperating agencies)**				
	2101	Support National Project Coordinators	10,000	10,000	11,500	31,500
	2102	Independent MT and End Evaluations		5,000	5,000	10,000
	2103					0
	2199	Sub-Total	10,000	15,000	16,500	41,500
	2200	**Sub-contracts (MoU's/LA's for non-**				

		profit supporting organizations)				
	2201					0
	2299	Sub-Total	0	0	0	0
	2300	**Sub-contracts (commercial purposes)**				
	2301					0
	2399	Sub-Total	0	0	0	0
	2999	**Component Total**	10,000	15,000	16,500	41,500
30	**TRAINING COMPONENT**					
	3100	**Fellowships (total stipend/fees, travel costs, etc)**				
	3101					0
	3199	Sub-Total	0	0	0	0
	3200	**Group training (study tours, field trips, workshops, seminars, etc) (give title)**				
	3201	Support multi sectoral institutional capacity building	10,000	20,000	5,000	35,000
	3202	Conduct training on DDT reporting	43,000			43,000
	3203	Conduct training courses on vector resistance	60,000	70,000	15,000	145,000
	3204	Trainings spray team leaders	50,000	50,000	25,000	125,000
	3205	Production of training curriculum for selected institutions	40,000	10,000		50,000
	3206	Production of reporting guidelines	20,000	5,000		25,000
	3207	Production of other training materials		25,000		25,000
	3299	Sub-Total	223,000	180,000	45,000	448,000
	3300	**Meetings/conferences (give title)**				
	3301	National w/shops to harmonize national multi sectoral measures/approaches	8,000	8,000	7,760	23,760
	3302	Support Project Steering Committee				0
	3303					0
	3399	Sub-Total	8,000	8,000	7,760	23,760
	3999	**Component Total**	231,000	188,000	52,760	471,760
40	**EQUIPMENT & PREMISES COMPONENT**					
	4100	**Expendable equipment (items under ($1,500 each, for example)**				
	4101	Office supplies and equipment	5,000	5,000	3,140	13,140
	4102					0
	4199	Total	5,000	5,000	3,140	13,140
	4200	**Non-expendable equipment (computers, office equip, etc)**				
	4201	Institutional support for 14 selected institutions	32,000	33,000	32,000	97,000
	4202					0
	4299	Sub-Total	32,000	33,000	32,000	97,000
	4300	**Premises (office rent, maintenance of premises, etc)**				
	4301					0
	4399	Sub-Total	0	0	0	0
	4999	**Component Total**	37,000	38,000	35,140	110,140
50	**MISCELLANEOUS COMPONENT**					
	5100	**Operation and maintenance of equip. (example shown below)**				
	5101	Rental & maint. of computer equip.				0
	5199	Sub-Total	0	0	0	0

5200	**Reporting costs (publications, maps, newsletters, printing, etc)**				
5201					0
5299	Sub-Total	0	0	0	0
5300	**Sundry (communications, postage, freight, clearance charges, etc)**				
5301	communication, postage, etc.	1,000	1,000	1,000	3,000
5302					0
5399	Sub-Total	1,000	1,000	1,000	3,000
5400	**Hospitality and entertainment**				
5401	various hospitality costs for 3 years / 14 countries	2,300	2,300	2,400	7,000
5402					0
5499	Sub-Total	2,300	2,300	2,400	7,000
5500	**Evaluation (consultants fees/travel/ DSA, admin support, etc. internal projects)**				
5501	Monitor and evaluate project activities		7,500	7,500	15,000
5502					0
5599	Sub-Total	0	7,500	7,500	15,000
5999	**Component Total**	3,300	10,800	10,900	25,000
TOTAL COSTS		346,300	276,800	138,300	761,400

Appendix 2: Co-financing by source

Name of co-financier (source)	Classification	Type	Amount ($)	%*
Project Government contribution	Nat'l Gov't	In-kind	351,140	51
WHO	Multilat. Agency	In-kind	335,000	49
Total Co-financing			686,140	100%

Appendix 3: Incremental cost analysis

Component	Baseline (a)	Alternative (b)	Total Increment (this proposal) (b-a)
1. Identification and strengthening through the development of institutional infrastructure of a central institution responsible for proper registration and regular reporting of data related to import/export/local formulation of DDT, the local application, areas of application, details of the field campaigns, impacts, etc.	0	500,000	500,000
2. Training of spray team leaders and regional support teams on field data collection and reporting (Regional cascade training to develop critical mass for Parties).	14,000	214,000	200,000
3. Follow up activities to institutionalize training activity as routine in-service training within national vector control programmes	0	50,000	50,000
4. Training in resistance monitoring activities and establishing / strengthening vector resistance monitoring infrastructure in 12 countries	28,000	428,000	400,000
5. Establishment of cross-sectoral alliances and implementation of guidelines for data collection and sharing between relevant government and non-government agencies	0	125,260	125,260
6. Project coordination and management Independent Mid Term Review and Terminal Evaluation	0	152,280 20,000	152,280 20,000
Total Project Costs			1,447,540

Appendix 4: Results Framework

Project Purpose: To contribute to the reduction of emission of POPs pesticides (DDT) into the global environment.

Developmental objective	Objectively Verifiable Indicators (OVIs)	Means of Verification (Monitoring focus)	Critical Assumptions and Risks
To protect human health and the environment by supporting the availability of data related to the use of DDT and its alternatives to enable proper evaluation of the continued need of DDT in malaria vector control.			
Project Objective:			
To develop the capacity of the selected Parties to enable the provision of complete information on the production and use of DDT for disease vector control.			

Outcomes, Outputs and Activities	Objectively Verifiable Indicators (OVIs)	Means of Verification (Monitoring focus)	Critical Assumptions and Risks
Outcome 1. Central institutions in project countries identified and strengthened			Central Institutions and National governments are willing to collaborate.
Output 1.			
- Names and contact details of responsible institutions in project countries			
- Letter of Commitment from each institution to register and report according to the requirements.			
- 14 institutions received equipment, materials, other support as deemed relevant and training as part of strengthening.			

- Institutional infrastructure for reporting in each country developed and operational - Guidelines for reporting developed and provided to identified institutions			
Activities			
1.1. Identify Central Institutions in each project country.	Names of identified Central Institutions in each project country (at end of Year 1).	Reports on specific technical support activities.	Institutions willing to participate.
1.2. Awareness raising amongst Central Institutions related to the need of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.	Number of awareness raising happenings, workshops, meetings, etc. (at end of project).	Technical, management and financial progress reports. Reports on specific technical support activities. Final technical and financial reports.	Selected staff willing to participate and to apply learnt approaches and methodologies.
1.3. Provide commitment by each selected Central Institution to register and report according to the requirements.	Number of correctly filled in registers and reports as required (at end of project).	Project reports; Annual Reports of the selected Central Institution; Completed national reportings to the Secretariat of the Stockholm Convention. Reports on specific technical support activities.	Involved institutions willing to collaborate and exchange information between sectors.
1.4.Provide general strengthening (materials and other essential support) to each selected Central Institution.	Lists with provided means of strengthening to each selected Central Institution (at Mid Term))	Reports from identified institutions.	Required means of strengthening timely delivered and operation in relevant Institutions.
1.5. Develop and make operational institutional infrastructure for reporting in each country.	Operational institutional infrastructure available (at Mid Term).	Reporting is done according to the relevant guidelines.	Cross sector collaboration successful. Relevant data available. Governments not willing to support cross sectoral information exchange.
1.6. Develop guidelines for reporting and provide guidelines to identified institutions.	Guidelines available within each identified institution (at Mid Term).		Involved institutions do not apply the guidelines for reporting.
Outcome 2: Training of spray team leaders and regional support teams on			

field data collection and reporting (Regional cascade training to develop critical mass			
Output 2.: Spray Team leaders and regional support teams trained.			
Activities			
2.1. Regional cascade trainings developed and successfully held	Number of trainings developed (by end of Year 1); Number of trainings held (at Mid Term).	Reports on specific technical support activities. Reports on specific technical support activities.	WHO willing and able to develop and organize trainings. Institutions and staff willing and able to participate.
2.2. Participants attend training sessions and receive training materials.	Number of participants attending trainings. Number of training sets issued to participants (at Mid Term).	Reports on specific technical support activities. Reports on specific technical support activities. Project Progress and Financial Reports.	Institutions and staff willing and able to participate. Training materials available on time.
Outcome 3. : Follow up activities to institutionalize training activity as routine in-service training within national vector control programmes.			
Output 3.: Training institutionalized as routine in-service training within national vector control programs.			
Activities			
3.1. Produce training materials and hand these over to national vector control programs in project countries.	Number of relevant and suitable training materials produced (at end of Year 1). Training curriculums in each involved institution include relevant training programs (at Mid Term).	Training curriculums of each institution. Reports on specific technical support activities. Project Progress and financial Reports.	Institutions have training curriculums. Training programs accepted by institutions.
3.2. –Adapt National training curriculum for vector control programs ..	Number of National training curriculums including vector control issues with regards to reporting (at Mid Term).	Project Progress Reports. Training files of responsible national vector control programs.	Training materials available on time. Training materials handed over on time.

Outcome 4: Countries able to monitor chemicals resistance of vector in an adequate way.			
Output 4.: - Regional trainings on resistance monitoring developed and held - Participants attend training sessions and receive training materials - Country monitoring infrastructure developed and operational in each project country			
Activities:			
4.1. Develop regional training on resistance monitoring.	Regional Training on resistance monitoring available (by end of Year 1).	Training modules. Project Progress Report.	Training modules not available on time.
4.2. Hold regional training on resistance monitoring.	Regional Training on resistance monitoring held (by Mid Term).	Project Progress Report.	Participants not able to attend training sessions.
4.3. Develop and make operational a country monitoring infrastructure in each country.	Country monitoring infrastructure available (by Mid Term).	Correspondence with countries. Project Progress Reports.	Governments not willing to adapt institutional infrastructure.
Outcome 5: Cross sectoral alliances established and guidelines implemented.			
Outputs 5.: Support to inter sectoral working groups is provided in all project countries in order to allow data sharing and implementation of guidelines			
Activities:			
5.1.			

Identify relevant stakeholders and hold intersectoral working groups	Relevant stakeholders identified, intersectoral working groups held.	Report concerning selection stakeholders, minutes of intersectoral working groups	Relevant stakeholders are not available and not willing to participate.
5.2. Share data	Data shared	Stakeholders have access to data by website and other means of information	Stakeholders are not willing to share data.
5.3. Implement guidelines	Guidelines implemented (by end of yr. 2)	Accurate reporting using guidelines by stakeholders	Stakeholders are not willing and not able to implement guidelines.
Outcome 6. : Project Management operational and effective.			
Output 6. : - WHO Project Manager appointed and mobilized. - Project Steering Committee established and mobilized.			
Activities:			
6.1. Appoint and facilitate operations of WHO Project Manager.	Letter of appointment (by end of month 2 of year 1).	Project Progress report. Correspondence between WHO and UNEP.	Appropriate Project Manager available within WHO.
6.2. Establish, mobilize and facilitate a Project Steering Group.	Minutes of Steering Committee meetings (within 2 weeks after each meeting).	Project Progress reports.	Countries willing to appoint representatives of cross sectoral institutions. Sufficient (co-) funding mobilized to have meetings.
6.3. Conduct Mid-Term and End Evaluations	Evaluations conducted.	Mid Term and End Evaluation Reports (at mid term and end of project)	No specific risks.

Appendix 5: Workplan and timetable

Activities \ months after project start	1 – 6	7 – 12	13 – 18	19 – 24	25 – 30	31 – 36
Outcome 1. Central institutions in project countries identified and strengthened						
1.1. Identify Central Institutions in each project country.						
1.2. Awareness raising amongst Central Institutions related to the need of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.						
1.3. Provide commitment by each selected Central Institution to register and report according to the requirements.						
1.4.Provide general strengthening (materials and other essential support) to each selected Central Institution.						
1.5. Develop and make operational institutional infrastructure for reporting in each country.						
1.6. Develop guidelines for reporting and provide guidelines to identified institutions.						
Outcome 2: Training of spray team leaders and regional support teams on field data collection and reporting (Regional cascade						

training to develop critical mass						
2.1. Regional cascade trainings developed and successfully held						
2.2. Participants attend training sessions and receive training materials.						
Outcome 3. : Follow up activities to institutionalize training activity as routine in-service training within national vector control programmes.						
3.1. Produce training materials and hand these over to national vector control programs in project countries.						
3.2. –Adapt National training curriculum for vector control programs ..						
Outcome 4: Countries able to monitor chemicals resistance of vector in an adequate way.						
4.1. Develop regional training on resistance monitoring.						
4.2. Hold regional training on resistance monitoring.						
4.3. Develop and make operational a country monitoring infrastructure in each country.						
Outcome 5: Cross sectoral alliances established and guidelines implemented.						

5.1. Identify relevant stakeholders and hold intersectoral working groups						
5.2. Share data						
5.3. Implement guidelines						
Outcome 6. : Project Management operational and effective.						
6.1. Appoint and facilitate operations of WHO Project Manager.						
6.2. Establish, mobilize and facilitate a Project Steering Group.						
6.3. Conduct Mid-Term and End Evaluations						

Appendix 6: Key deliverables and benchmarks

Key Deliverables	**Time line (months after project start)**
Identify and appoint global Project Manager	1-3
Identify central institutions in each project country The central institutions will be identified by WHO It is anticipated to identify institutions which have a clear role and relevant relation with regards to the registration of pesticides, DDT, in the country	1-6
Provide institutional strengthening to selected institutions and develop guidelines for reporting; Institutions will get support to enable them to collect data and report according to the guidelines Agree on guidelines for data collection and reporting;	7-18
Provide training to the spray team leaders and regional support teams: Trainings will be developed at the end of year 1; All participants have been trained at Mid TermThe same checklist – already used in the UNEP/GEF POPs Laboratory project - will be applied; it allows a horizontal analysis and to target the training;	6-18
Institutionalize trainings as routine service in national vector control programs; Training materials produced; Adoption of training curriculum in national programs.	6-18
Regional trainings on resistance monitoring developed and held Develop training on resistance monitoring; Conduct regional training; Develop and make operational country monitoring infrastructure in each country.	6-18
Cross sectoral alliances established and guidelines implemented: Intersectoral working groups share data effectively and implement guidelines	6-36
Mid Term and End Evaluations will be conducted.	18 + 36
Deliver Terminal Report and other required documents for formal project closure.	30-36

The following technical reports and publications will be produced:

Technical Reports: Technical Reports are documents of technical scientific nature covering specific areas within the overall project. It is envisaged to prepare technical reports on key areas of activity during the course of the project such as on guidelines for reporting, training protocols, etc. The Technical reports will be made publicly available and made available to the stakeholders, *i.e.,* the

Steering Committee and the Secretariat of the Stockholm Convention. The technical reports will feed into the Terminal Report.

Awareness Raising materials: It is envisaged that awareness raising materials will form a key method of crystallizing and disseminating the results and achievements of the project. These publications will not be scientific but will be informational texts on the activities and achievements of the project, in the form of journal articles, multimedia publications, etc. These publications can be based on Technical Reports, depending upon the relevance, reporting work, etc. of these Reports, or may be summaries or compilations of a series of Technical Reports and/or other analyses. The project team will determine if any of the Technical Reports merit formal publication, and will also, in consultation with UNEP and other relevant stakeholder groups, plan and produce these Publications in a consistent and recognizable format. Any publications need prior clearance from UNEP and the participating countries. Project resources will need to be defined and allocated for these activities as appropriate and in a manner commensurate with the project's budget.

Project Terminal Report: During the last three months of the project, the global team under the leadership of the project manager will prepare the final global technical report as part of the Project Terminal Report. The Project Terminal Report will summarize all activities, achievements, and outputs of the project, lessons learned, objectives met or not achieved, structures and systems implemented, *etc.* and will be the definitive statement of the project's activities during its lifetime. It will also lay out recommendations for any further steps that may need to be taken to ensure sustainability and replicability of the project's activities.

Appendix 7: Costed M&E plan

Monitoring and evaluation efforts are a fundamental part of this project. On one level, it is clearly necessary to monitor and evaluate the activities and outcomes that are directly related to this project in order to ensure that the project is carried out as planned and that it achieves its desired results. Thus, achieving the primary project objective of promoting improved reporting procedures and practices in the 14 project countries relies heavily on the project's ability to promote consistent and reliable M&E within and even beyond the scope of this particular project. Activities and results related to improving procedures and guidelines for better reporting about the use, import etc. of DDT use in malaria vector control are described elsewhere in this proposal. This section focuses directly on monitoring and evaluating activities within the scope of this project.

The Steering Group will be responsible for M&E. The logical framework describes the rationale underlying the project and provides the basis for a results-based monitoring and evaluation strategy, which is presented in detail for M&E in Appendix 4. Monitoring and evaluation activities are intended to assess the impact of the development and implementation process on a number of key objectives and outcomes. These activities will take place at several stages throughout the project cycle. The project team will be responsible for several M&E activities, with WHO taking a lead role in these efforts. In addition, a Mid-Term Evaluation by an internal evaluator and a Terminal Evaluation (by an external, independent evaluator) will be undertaken. A detailed budget for these M&E activities is presented at the end of this section in the table below.

Internal evaluation: Surveys and Interviews

WHO will have primary responsibility for carrying out evaluation activities that will measure the impact of the development and implementation on key outcomes. These evaluation activities focus on tracking stakeholders' use of and satisfaction with the procedures and guidelines provided and the capacity strengthening in general, using a series of surveys and interviews conducted at various stages of the project's development. In particular, the selected central entity in charge of registration DDT use, production, import etc. will be surveyed in each country at the initiation of project activities (baseline), mid-way through Mid-Term Evaluation, and following complete project implementation (Terminal Evaluation). These **surveys** will assess the following outcomes:

- Are DDT reporting procedures and guidelines informed by evidence from a variety of cross sectoral sources?
- Are sustainable reporting links established with both WHO and the Secretariat of the Stockholm Convention?
- What is the level of collaboration between the various sectors in generating, collecting, and reporting relevant data within the framework of this project?

WHO will also conduct **interviews** with the NIPs Coordinating Committee in each country following project completion in order to assess the effects of the project on NIPs formulation and implementation activities.

WHO will during the project implementation and after the first reportings have taken place, asses as well the level of satisfaction with the end-user of the data (Secretariat of the Stockholm Convention) in order to identify as early as possible eventual modifications in the reporting procedures and guidelines as well as to tackle practical inefficiencies.

Mid-Term Evaluation

The key role of the (internally executed) Mid-Term Evaluation will be to verify that the project has been successfully started up in **all** project countries according to the Work Plan and whether the project is on schedule. It will as well identify potential problems and areas for improvement as the project enters its next phase.

External M&E: Terminal Evaluation

In addition to the internal evaluation activities, an independent evaluator will conduct Terminal Evaluations to assess the progress and impact of the project team's efforts. The **Terminal Evaluation** will occur at 36 months. The Terminal Evaluation will have to confirm whether the capacity building efforts have resulted in a proper and complete multi sectoral provision of data related to DDT use, application, etc. for malaria vector control in all project countries and that collected data is properly and timely channeled to the Secretariat of the Stockholm Convention for further assessment. The Terminal Evaluation will as well provide a more general review of the success of the completed project and assessing the potential and need for replication in relevant countries.

ACTIVITY	COMPONENTS	COST	
1. Interviews with NIPs Coordinators and SC National Focal Points	(Incremental) **Staff Time** to develop M&E questions and conduct interviews, report	30 days @ $500/day=	$15,000
Total budget for Interviews			**$ 15,000**
2. Mid-Term Report (Independent Evaluator)	**Consultant fee** for external evaluator	10 days @ $500/day=	$5,000
	Travel for external evaluator to a selection of project countries		$3,000
Total budget for Mid-Term Report			**$8,000**
3. Terminal Evaluation (Independent Evaluator)	**Consultant fee** for external evaluator	14 days @ $500/day=	$7,000
	Travel for external evaluator to a selection of project countries		$5,000
Total budget for Terminal Evaluation			**$12,000**
TOTAL COSTS:			**$35,000**

Appendix 8: Summary of reporting requirements and responsibilities

Half Yearly Progress Reports

Every six months after the start of the project, WHO through its Headquarter in Geneva shall submit half yearly Progress Reports (as at 30 June, and 31 December), to the UNEP/GEF Division Director, with copies to the Chief, BFMS, on the progress in project execution as per Appendix 5 (Work Plan and Timetable) of the project document.

Terminal report

Within 60 days of the completion of the project, WHO through its Headquarter in Geneva shall submit a Terminal Report in the UNEP format to the Director, Division of GEF Co-ordination with copies to the Chief, Budget and Financial Management Service and the Chief, Programme Co-ordination and Management Unit. The report should indicate the principal factors, which have determined the success or failure of the project in meeting the objectives set forth in the project document. This report will serve as a source of initial lessons for the country's experience and can recommend follow up activities.

Financial Reports

WHO through its Headquarter in Geneva shall submit to UNEP 3 months project expenditure accounts and final accounts, showing amount budgeted for the year, amount expended since the beginning of the year, and separately the unliquidated obligations as follows:

(i) Details of the project expenditures reported in line with Project budget codes, as set out in the project document as at 30 September, 31 December, 31 March, 30 June each year, providing details of unliquidated obligations separately. The expenditure accounts will be dispatched to UNEP within 30 days after the end of the quarter to which they refer;

(ii) The expenditure account as at 31st December is to be received by UNEP by 15 February each year;

(iii) A final statement of account, in line with UNEP project budget codes, reflecting actual final expenditures under the project, when all obligations have been liquidated.

Cash Advance Requirements

A statement of advances of cash provided by UNEP will be submitted quarterly at 31 March, 30 June, 30 September, and 31 December.

Other Terms and Conditions

Inventory of Non-expendable equipment purchased against UNEP projects

In the event of a purchase of non-expendable equipment, WHO through its Headquarter in Geneva will maintain records of these equipments (items costing US$1,500 or more as well as items of attraction such as pocket calculators, cameras, computers printers etc. costing US$500 or more) purchased with UNEP funds (or with Trust funds or Counterpart funds administered by UNEP), and submit an inventory of such equipment to UNEP twice a year, attached to the quarterly progress

report, indicating description, serial number, date of purchase, original cost, present condition, location of each item. The purchase of equipment must be accompanied with quotations from at least three licensed companies with clear clarification for selecting a particular vendor.

Non-expendable equipment purchased with funds administered by UNEP remains the property of UNEP until its disposal is authorized by UNEP, in consultation with WHO Headquarter in Geneva.

WHO through its Headquarter in Geneva shall attach to the terminal report mentioned in paragraph 105 above a final inventory of all non-expendable equipment purchased under this project indicating description, serial number, original cost, present condition, location and a proposal for the disposal of the said equipment.

Appendix 9: Standard Terminal Evaluation TOR

TERMS OF REFERENCE

Terminal Evaluation of the UNEP GEF project …

Project Number GF/…

PROJECT BACKGROUND AND OVERVIEW

Project rationale from the project document

Relevance to GEF Programmes

Executing Arrangements

Project Activities

Budget

TERMS OF REFERENCE FOR THE EVALUATION

1. Objective and Scope of the Evaluation

The objective of this terminal evaluation is to examine the extent and magnitude of any project impacts to date and determine the likelihood of future impacts. The evaluation will also assess project performance and the implementation of planned project activities and planned outputs against actual results.

The evaluation will focus on the following main questions: …

2. Methods

This terminal evaluation will be conducted as an in-depth evaluation using a participatory approach whereby the UNEP/DGEF Task Manager, key representatives of the executing agencies and other relevant staff are kept informed and regularly consulted throughout the evaluation. The consultant will liaise with the UNEP/EOU and the UNEP/DGEF Task Manager on any logistic and/or methodological issues to properly conduct the review in as independent a way as possible, given the circumstances and resources offered. The draft report will be circulated to UNEP/DGEF Task Manager, key representatives of the executing agencies and the UNEP/EOU. Any comments or responses to the draft report will be sent to UNEP / EOU for collation and the consultant will be advised of any necessary revisions.

The findings of the evaluation will be based on the following:

1. A desk review of project documents including, but not limited to:
   (a) The project documents, outputs, monitoring reports (such as progress and financial reports to UNEP and GEF annual Project Implementation Review reports) and relevant correspondence.
   (b) Review of specific products including the final reports from country executing agencies, workshop proceedings, etc
   (c) Notes from the Steering Group meetings.
   (d) Other project-related material produced by the project staff or partners.

2. Interviews with project management and technical support staff.

3. Interviews with intended users for the project outputs and other stakeholders involved with this project, including in the participating countries and international bodies. As appropriate, these interviews could be combined with an email questionnaire.

4. The Consultant shall seek additional information and opinions by e-mail, through telephone communication, or by actual meetings.

5. Interviews with the UNEP/DGEF project task manager and Fund Management Officer, and other relevant staff in UNEP dealing with POPs related activities as necessary. The Consultant shall also gain broader perspectives from discussions with relevant GEF Secretariat staff.

Key Evaluation principles.

In attempting to evaluate any outcomes and impacts that the project may have achieved, evaluators should remember that the project's performance should be assessed by considering the difference between the answers to two simple questions ***"what happened?***" and ***"what would have happened anyway?"***. These questions imply that there should be consideration of the baseline conditions and trends in relation to the intended project outcomes and impacts. In addition it implies that there should be plausible evidence to attribute such outcomes and impacts to the actions of the project.

Sometimes, adequate information on baseline conditions and trends is lacking. In such cases this should be clearly highlighted by the evaluator, along with any simplifying assumptions that were taken to enable the evaluator to make informed judgements about project performance.

3. Project Evaluation Parameters

A. Attainment of objectives and planned results:

The assessment of project results seeks to determine the extent to which the project objectives were achieved, or are expected to be achieved, and assess if the project has led to any other positive or negative consequences. While assessing a project's outcomes the evaluation will seek to determine the extent of achievement and shortcomings in reaching the project's objectives as stated in the project document and also indicate if there were any changes and whether those changes were approved. As the project did not establish an elaborate baseline (initial conditions), the evaluator should seek to estimate the baseline condition so that achievements and results can be properly established (or simplifying assumptions used). Since most GEF projects can be expected to achieve the anticipated outcomes by project closing, assessment of project outcomes should be a priority. Outcomes are the likely or achieved short-term and medium-term effects of an intervention's outputs. Examples of outcomes could include but are not restricted to stronger institutional capacities, higher public awareness (when leading to changes of behaviour), and transformed policy frameworks or markets. The evaluation should assess the extent to which the project's major relevant objectives were effectively and efficiently achieved or are expected to be achieved and their relevance.

- *Effectiveness:* Evaluate how, and to what extent, the stated project objectives have been met, taking into account the "achievement indicators" specified in the project document and logical framework[7].
- *Relevance:* In retrospect, were the project's outcomes consistent with the focal areas/operational program strategies and country priorities? The evaluation should also assess the whether outcomes specified in the project document and or logical framework are actually outcomes and not outputs or inputs.
- *Efficiency:* Cost-effectiveness assesses the achievement of the environmental and developmental objectives as well as the project's outputs in relation to the inputs, costs, and implementing time. Include an assessment of outcomes in relation to inputs, costs, and implementation times based on the following questions: Was the project cost-effective? Was the project the least cost option?

[7] In case in the original or modified expected outcomes are merely outputs/inputs then the evaluators should assess if there were any real outcomes of the project and if yes then whether these are commensurate with the realistic expectations from such projects.

Was the project implementation delayed and if it was then did that affect cost-effectiveness? The evaluation should assess the contribution of cash and in-kind co-financing to project implementation and to what extent the project leveraged additional resources. Comparisons of the cost-time vs. outcomes relationship of the project with that of other similar projects should be made if feasible.

B. Assessment of Sustainability of project outcomes:

Sustainability is understood as the probability of continued long-term project-derived outcomes and impacts after the GEF project funding ends. The evaluation will identify and assess the key conditions or factors that are likely to contribute or undermine the persistence of benefits after the project ends. Some of these factors might be outcomes of the project, e.g. stronger institutional capacities or better informed decision-making. Other factors will include contextual circumstances or developments that are not outcomes of the project but that are relevant to the sustainability of outcomes. The evaluation should ascertain to what extent follow-up work has been initiated and how project outcomes will be sustained and enhanced over time. In this case, sustainability will be linked to the continued use and influence of scientific models and scientific findings, produced by the project.

Four aspects of sustainability should be addressed: financial, socio-political, institutional frameworks and governance, and ecological (if applicable). The following questions provide guidance on the assessment of these aspects:

- *Financial resources.* To what extent are the outcomes of the project dependent on continued financial support? What is the likelihood that any required financial resources will be available to sustain the project outcomes/benefits once the GEF assistance ends (resources can be from multiple sources, such as the public and private sectors, income generating activities, and market trends that support the project's objectives)? Was the project was successful in identifying and leveraging co-financing?
- *Socio-political:* To what extent are the outcomes of the project dependent on socio-political factors? What is the likelihood that the level of stakeholder ownership will allow for the project outcomes/benefits to be sustained? Is there sufficient public / stakeholder awareness in support of the long term objectives of the project?
- *Institutional framework and governance.* To what extent are the outcomes of the project dependent on issues relating to institutional frameworks and governance? What is the likelihood that institutional and technical achievements, legal frameworks, policies and governance structures and processes will allow for, the project outcomes/benefits to be sustained? While responding to these questions consider if the required systems for accountability and transparency and the required technical know-how are in place.
- *Ecological.* Are there any environmental risks that can undermine the future flow of project environmental benefits? The TE should assess whether

certain activities in the project area will pose a threat to the sustainability of the project outcomes.[8]

As far as possible, also assess the potential longer-term impacts considering that the evaluation is taking place upon completion of the project and that longer term impact is expected to be seen in a few years time. Frame any recommendations to enhance future project impact in this context. Which will be the major 'channels' for longer term impact from the project at the national and international scales? The evaluation should formulate recommendations that outline possible approaches and necessary actions to facilitate an impact assessment study in a few years time.

C. Catalytic role

The terminal evaluation will also describe any catalytic or replication effect of the project. What examples are there of replication and catalytic outcomes that suggest increased likelihood of sustainability? Replication approach, in the context of GEF projects, is defined as lessons and experiences coming out of the project that are replicated or scaled up in the design and implementation of other projects. Replication can have two aspects, replication proper (lessons and experiences are replicated in different geographic area) or scaling up (lessons and experiences are replicated within the same geographic area but funded by other sources). If no effects are identified, the evaluation will describe the catalytic or replication actions that the project carried out. No ratings are requested for the catalytic role.

D. Achievement of outputs and activities:

- Delivered outputs: Assessment of the project's success in producing each of the programmed outputs, both in quantity and quality as well as usefulness and timeliness.
- Assess the soundness and effectiveness of the methods and approached used by the project.

E. Assessment of Monitoring and Evaluation Systems:

- **M&E design.** Did the project have a sound M&E plan to monitor results and track progress towards achieving project objectives? The Terminal Evaluation will assess whether the project met the minimum requirements for project design of M&E and the application of the Project M&E plan (Minimum requirements are specified in Annex 4). The evaluation shall include an assessment of the quality, application and effectiveness of project monitoring and evaluation plans and tools, including an assessment of risk management based on the assumptions and risks identified in the project document. The M&E plan should include a baseline (including data, methodology, etc.), SMART (see Annex 4) indicators and data analysis systems, and evaluation studies at specific times to assess results. The time frame for various M&E activities and standards for outputs should have been specified.
- **M&E plan implementation.** Was an M&E system in place and did it facilitate tracking of results and progress towards projects objectives throughout the project implementation period. Were Annual project reports complete, accurate and with well justified ratings? Was the information provided by the M&E

[8] For example, construction of dam in a protected area could inundate a sizable area and thereby neutralizing the biodiversity related gains made by the project or, a newly established pulp mill might jeopardise the viability of nearby protected forest areas by increasing logging pressures.

system used during the project to improve project performance and to adapt to changing needs? Did the Projects have an M&E system in place with proper training for parties responsible for M&E activities to ensure data will continue to be collected and used after project closure?

- **Budgeting and Funding for M&E activities.** Were adequate budget provisions made for M&E made and were such resources made available in a timely fashion during implementation?
- **Long-term Monitoring.** Is long-term monitoring envisaged as an outcome of the project? If so, comment specifically on the relevance of such monitoring systems to sustaining project outcomes and how the monitoring effort will be sustained.

F. Assessment of processes that affected attainment of project results.

The evaluation will consider, but need not be limited to, consideration of the following issues that may have affected project implementation and attainment of project results:

i. **Preparation and readiness.** Were the project's objectives and components clear, practicable and feasible within its timeframe? Were capacities of the executing institutions and counterparts properly considered when the project was designed? Were lessons from other relevant projects properly incorporated in design? Were the partnership arrangements properly identified and the roles and responsibilities negotiated prior to implementation? Was availability of counterpart resources (funding, staff, and facilities), passage of enabling legislation, and adequate project management arrangements in place at project entry?
   - Ascertain to what extent the project implementation mechanisms outlined in the project document have been closely followed. In particular, assess the role of the various committees established and whether the project document was clear and realistic to enable effective and efficient implementation, whether the project was executed according to the plan and how well the management was able to adapt to changes during the life of the project to enable the implementation of the project.
   - Evaluate the effectiveness and efficiency and adaptability of project management and the supervision of project activities / project execution arrangements at all levels (1) policy decisions: Steering Group; (2) day to day project management: (3) GEF guidance: UNEP DGEF.

ii. **Country ownership/Drivenness.** This is the relevance of the project to national development and environmental agendas, recipient country commitment, and regional and international agreements. Examples of possible evaluative questions include: Was the project design in-line with the national sectoral and development priorities and plans? Are project outcomes contributing to national development priorities and plans? Were the relevant country representatives, from government and civil society, involved in the project? Did the recipient government maintain its financial commitment to the project? Have the government approved policies or regulatory frameworks been in-line with the project's objectives?

iii. **Stakeholder involvement.** Did the project involve the relevant stakeholders through information sharing, consultation and by seeking their participation in project's design, implementation, and monitoring and evaluation? For example, did the project

implement appropriate outreach and public awareness campaigns? Did the project consult and make use of the skills, experience and knowledge of the appropriate government entities, NGOs, community groups, private sector, local governments and academic institutions in the design, implementation and evaluation of project activities? Were perspectives of those that would be affected by decisions, those that could affect the outcomes and those that could contribute information or other resources to the process taken into account while taking decisions? Were the relevant vulnerable groups and the powerful, the supporters and the opponents, of the processes properly involved? Specifically the evaluation will:

- Assess the mechanisms put in place by the project for identification and engagement of stakeholders in each participating country and establish, in consultation with the stakeholders, whether this mechanism was successful, and identify its strengths and weaknesses.
- Assess the degree and effectiveness of collaboration/interactions between the various project partners and institutions during the course of implementation of the project.
- Assess the degree and effectiveness of any various public awareness activities that were undertaken during the course of implementation of the project.

iv. **Financial planning.** Did the project have the appropriate financial controls, including reporting and planning, that allowed management to make informed decisions regarding the budget and allowed for timely flow of funds. Specifically, the evaluation should:

- Assess the strength and utility of financial controls, including reporting, and planning to allow the project management to make informed decisions regarding the budget and allow for a proper and timely flow of funds for the payment of satisfactory project deliverables throughout the project's lifetime.
- Present the major findings from the financial audit if one has been conducted.
- Did promised co-financing materialize? Identify and verify the sources of co- financing as well as leveraged and associated financing (in co-operation with the IA and EA).
- Assess whether the project has applied appropriate standards of due diligence in the management of funds and financial audits.
- The evaluation should also include a breakdown of final actual project costs by activities compared to budget (variances), financial management (including disbursement issues), and co- financing. This information will be prepared by the relevant DGEF Fund Management Officer of the project for scrutiny by the evaluator (table attached in Annex 1 Co-financing and leveraged resources).

v. **UNEP Supervision and backstopping.** Did UNEP Agency staff identify problems in a timely fashion and accurately estimate its seriousness? Did UNEP staff provide quality support and advice to the project, approved modifications in time and restructure the project when needed? Did UNEP and Executing Agencies provide the right staffing levels, continuity, skill mix, frequency of field visits?

vi. **Co-financing and Project Outcomes & Sustainability.** If there was a difference in the level of expected co-financing and actual co-financing, then what were the reasons for this? Did the extent of materialization of co-financing affect the project's outcomes

and/or sustainability, and if it did affect outcomes and sustainability then in what ways and through what causal linkages?

vii. **Delays and Project Outcomes & Sustainability.** If there were delays in project implementation and completion, the evaluation will summarize the reasons for them. Did delays affect the project's outcomes and/or sustainability, and if so in what ways and through what causal linkages?

The ***ratings will be presented in the form of a table*** with each of the categories rated separately and with **brief justifications for the rating** based on the findings of the main analysis. An overall rating for the project should also be given. The rating system to be applied is specified in Annex 1:

4. Evaluation report format and review procedures

The report should be brief, to the point and easy to understand. It must explain; the purpose of the evaluation, exactly what was evaluated and the methods used. The report must highlight any methodological limitations, identify key concerns and present evidence-based findings, consequent conclusions, recommendations and lessons. The report should provide information on when the evaluation took place, the places visited, who was involved and be presented in a way that makes the information accessible and comprehensible. The report should include an executive summary that encapsulates the essence of the information contained in the report to facilitate dissemination and distillation of lessons.

Evidence, findings, conclusions and recommendations should be presented in a complete and balanced manner. The evaluation report shall be written in English, be of no more than 50 pages (excluding annexes), use numbered paragraphs and include:

i) An **executive summary** (no more than 3 pages) providing a brief overview of the main conclusions and recommendations of the evaluation;
ii) **Introduction and background** giving a brief overview of the evaluated project, for example, the objective and status of activities;
iii) **Scope, objective and methods** presenting the evaluation's purpose, the evaluation criteria used and questions to be addressed;
iv) **Project Performance and Impact** providing factual evidence relevant to the questions asked by the evaluator and interpretations of such evidence. This is the main substantive section of the report and should provide a commentary on all evaluation aspects (A − F above).
v) **Conclusions and rating** of project implementation success giving the evaluator's concluding assessments and ratings of the project against given evaluation criteria and standards of performance. The conclusions should provide answers to questions about whether the project is considered good or bad, and whether the results are considered positive or negative;
vi) **Lessons learned** presenting general conclusions, based on established good practices that have the potential for wider application and use. Lessons may also be derived from problems and mistakes. The context in which lessons may be applied should be clearly specified, and lessons should always state or imply some prescriptive action. A lesson should be written such that experiences derived from the project could be applied in other projects or at portfolio level;
vii) **Recommendations** suggesting *actionable* proposals for stakeholders to rectify poor existing situations as well as recommendations concerning projects of similar

nature.. In general, Terminal Evaluations are likely to have very few (only two or three) actionable recommendations;

viii) **Annexes** include Terms of Reference, list of interviewees, documents reviewed, brief summary of the expertise of the evaluator / evaluation team, a summary of co-finance information etc. Dissident views or management responses to the evaluation findings may later be appended in an annex.

Examples of UNEP GEF Terminal Evaluation Reports are available at www.unep.org/eou

Review of the Draft Evaluation Report

Draft reports submitted to UNEP EOU are shared with the corresponding Programme or Project Officer and his or her supervisor for initial review and consultation. The DGEF staff and senior Executing Agency staff are allowed to comment on the draft evaluation report. They may provide feedback on any errors of fact and may highlight the significance of such errors in any conclusions. The consultation also seeks agreement on the findings and recommendations. UNEP EOU collates the review comments and provides them to the evaluators for their consideration in preparing the final version of the report.

All UNEP GEF Evaluation Reports are subject to quality assessments by UNEP EOU. These incorporate GEF Office of Evaluation quality assessment criteria and are used as a tool for providing structured feedback to the evaluator (see Annex 3).

5. Submission of Final Terminal Evaluation Reports.

The final report shall be submitted in electronic form in MS Word format and should be sent to the following persons:

…

With a copy to:

…

The final evaluation report will be printed in hard copy and published on the Evaluation and Oversight Unit's web-site www.unep.org/eou. Subsequently, the report will be sent to the GEF Office of Evaluation for their review, appraisal and inclusion on the GEF website.

6. Resources and schedule of the evaluation

This final evaluation will be undertaken by an international evaluator contracted by the Evaluation and Oversight Unit, UNEP. The contract for the evaluator will begin on… The evaluator will submit a draft report on … to UNEP/EOU, the UNEP/DGEF Task Manager, and key representatives of the executing agencies. Any comments or responses to the draft report will be sent to UNEP / EOU for collation and the consultant will be advised of any necessary revisions. Comments to the final draft report will be sent to the consultant by … after which, the consultant will submit the final report no later than ...

In accordance with UNEP/GEF policy, all GEF projects are evaluated by independent evaluators contracted as consultants by the EOU. The evaluators should have the following qualifications:
The evaluator should not have been associated with the design and implementation of the project. The evaluator will work under the overall supervision of the Chief, Evaluation and Oversight Unit,

UNEP. Knowledge of UNEP programmes and GEF activities is desirable. Fluency in oral and written English is a must.

Annex 1. OVERALL RATINGS TABLE

Criterion	Evaluator's Summary Comments	Evaluator's Rating
Attainment of project objectives and results (overall rating) **Sub criteria (below)**		
Effectiveness		
Relevance		
Efficiency		
Sustainability of Project outcomes (overall rating) **Sub criteria (below)**		
Financial		
Socio Political		
Institutional framework and governance		
Ecological		
Achievement of outputs and activities		
Monitoring and Evaluation (overall rating) **Sub criteria (below)**		
M&E Design		
M&E Plan Implementation (use for adaptive management)		
Budgeting and Funding for M&E activities		
Catalytic Role		
Preparation and readiness		
Country ownership / driveness		
Stakeholders involvement		
Financial planning		
UNEP Supervision and backstopping		
Overall Rating		

RATING OF PROJECT OBJECTIVES AND RESULTS

Highly Satisfactory (HS): The project had no shortcomings in the achievement of its objectives, in terms of relevance, effectiveness or efficiency.

Satisfactory (S): The project had minor shortcomings in the achievement of its objectives, in terms of relevance, effectiveness or efficiency.

Moderately Satisfactory (MS): The project had moderate shortcomings in the achievement of its objectives, in terms of relevance, effectiveness or efficiency.

Moderately Unsatisfactory (MU): The project had significant shortcomings in the achievement of its objectives, in terms of relevance, effectiveness or efficiency.

Unsatisfactory (U) The project had major shortcomings in the achievement of its objectives, in terms of relevance, effectiveness or efficiency.

Highly Unsatisfactory (HU): The project had severe shortcomings in the achievement of its objectives, in terms of relevance, effectiveness or efficiency.

Please note: Relevance and effectiveness will be considered as critical criteria. The overall rating of the project for achievement of objectives and results **may not be higher** than the lowest rating on either of these two criteria. Thus, to have an overall satisfactory rating for outcomes a project must have at least satisfactory ratings on both relevance and effectiveness.

RATINGS ON SUSTAINABILITY

A. Sustainability will be understood as the probability of continued long-term outcomes and impacts after the GEF project funding ends. The Terminal evaluation will identify and assess the key conditions or factors that are likely to contribute or undermine the persistence of benefits after the project ends. Some of these factors might be outcomes of the project, i.e. stronger institutional capacities, legal frameworks, socio-economic incentives /or public awareness. Other factors will include contextual circumstances or developments that are not outcomes of the project but that are relevant to the sustainability of outcomes..

<u>Rating system for sustainability sub-criteria</u>

On each of the dimensions of sustainability of the project outcomes will be rated as follows.

Likely (L): There are no risks affecting this dimension of sustainability.

Moderately Likely (ML). There are moderate risks that affect this dimension of sustainability.

Moderately Unlikely (MU): There are significant risks that affect this dimension of sustainability

Unlikely (U): There are severe risks that affect this dimension of sustainability.

All the risk dimensions of sustainability are critical. Therefore, overall rating for sustainability will not be higher than the rating of the dimension with lowest ratings. For example, if a project has an Unlikely rating in either of the dimensions then its overall rating cannot be higher than Unlikely, regardless of whether higher ratings in other dimensions of sustainability produce a higher average.

RATINGS OF PROJECT M&E

Monitoring is a continuing function that uses systematic collection of data on specified indicators to provide management and the main stakeholders of an ongoing project with indications of the extent of progress and achievement of objectives and progress in the use of allocated funds. Evaluation is the systematic and objective assessment of an on-going or completed project, its design, implementation and results. Project evaluation may involve the definition of appropriate standards, the examination of performance against those standards, and an assessment of actual and expected results.

The Project monitoring and evaluation system will be rated on 'M&E Design', 'M&E Plan Implementation' and 'Budgeting and Funding for M&E activities' as follows:

Highly Satisfactory (HS): There were no shortcomings in the project M&E system.

Satisfactory(S): There were minor shortcomings in the project M&E system.

Moderately Satisfactory (MS): There were moderate shortcomings in the project M&E system.

Moderately Unsatisfactory (MU): There were significant shortcomings in the project M&E system.

Unsatisfactory (U): There were major shortcomings in the project M&E system.

Highly Unsatisfactory (HU): The Project had no M&E system.

"M&E plan implementation" will be considered a critical parameter for the overall assessment of the M&E system. The overall rating for the M&E systems will not be higher than the rating on "M&E plan implementation."

All other ratings will be on the GEF six point scale.

GEF Performance Description		Alternative description on the same scale
HS	= Highly Satisfactory	Excellent
S	= Satisfactory	Well above average
MS	= Moderately Satisfactory	Average
MU	= Moderately Unsatisfactory	Below Average
U	= Unsatisfactory	Poor
HU	= Highly Unsatisfactory	Very poor (Appalling)

Annex 2. Co-financing and Leveraged Resources

Co-financing (basic data to be supplied to the consultant for verification)

Co financing (Type/Source)	IA own Financing (mill US$)		Government (mill US$)		Other* (mill US$)		Total (mill US$)		Total Disbursement (mill US$)	
	Plan-ned	Actual	Planned	Actual	Planned	Actual	Plan-ned	Actual	Planned	Actual
– Grants										
– Loans/Concessional (compared to market rate)										
– Credits										
– Equity investments										
– In-kind support										
– Other (*) - - - - -										

Totals										

* Other is referred to contributions mobilized for the project from other multilateral agencies, bilateral development cooperation agencies, NGOs, the private sector and beneficiaries.

Leveraged Resources

Leveraged resources are additional resources—beyond those committed to the project itself at the time of approval—that are mobilized later as a direct result of the project. Leveraged resources can be financial or in-kind and they may be from other donors, NGO's, foundations, governments, communities or the private sector. Please briefly describe the resources the project has leveraged since inception and indicate how these resources are contributing to the project's ultimate objective.

Table showing final actual project expenditure by activity to be supplied by the UNEP Fund management Officer. (insert here)

Annex 3

Review of the Draft Report

Draft reports submitted to UNEP EOU are shared with the corresponding Programme or Project Officer and his or her supervisor for initial review and consultation. The DGEF staff and senior Executing Agency staff provide comments on the draft evaluation report. They may provide feedback on any errors of fact and may highlight the significance of such errors in any conclusions. The consultation also seeks agreement on the findings and recommendations. UNEP EOU collates the review comments and provides them to the evaluators for their consideration in preparing the final version of the report. General comments on the draft report with respect to compliance with these TOR are shared with the reviewer.

Quality Assessment of the Evaluation Report

All UNEP GEF Mid Term Reports are subject to quality assessments by UNEP EOU. These apply GEF Office of Evaluation quality assessment and are used as a tool for providing structured feedback to the evaluator.

The quality of the draft evaluation report is assessed and rated against the following criteria:

GEF Report Quality Criteria	**UNEP EOU Assessment**	**Rating**
A. Did the report present an assessment of relevant outcomes and achievement of project objectives in the context of the focal area program indicators if applicable?		
B. Was the report consistent and the evidence complete and convincing and were the ratings substantiated when used?		
C. Did the report present a sound assessment of sustainability of outcomes?		
D. Were the lessons and recommendations supported by the evidence presented?		
E. Did the report include the actual project costs (total and per activity) and actual co-financing used?		
F. Did the report include an assessment of the quality of the project M&E system and its use for project management?		
UNEP EOU additional Report Quality Criteria	**UNEP EOU Assessment**	**Rating**
G. Quality of the lessons: Were lessons readily applicable in other contexts? Did they suggest prescriptive action?		
H. Quality of the recommendations: Did recommendations specify the actions necessary to correct existing conditions or improve operations ('who?' 'what?' 'where?' 'when?)'. Can they be implemented? Did the recommendations specify a goal and an associated performance indicator?		
I. Was the report well written? (clear English language and grammar)		
J. Did the report structure follow EOU guidelines, were all requested Annexes included?		
K. Were all evaluation aspects specified in the TORs adequately addressed?		
L. Was the report delivered in a timely manner		

GEF Quality of the MTE report = 0.3*(A + B) + 0.1*(C+D+E+F)
EOU assessment of MTE report = 0.3*(G + H) + 0.1*(I+J+K+L) **Combined quality Rating = (2* 'GEF EO' rating + EOU rating)/3** The Totals are rounded and converted to the scale of HS to HU

Rating system for quality of terminal evaluation reports

A number rating 1-6 is used for each criterion: Highly Satisfactory = 6, Satisfactory = 5, Moderately Satisfactory = 4, Moderately Unsatisfactory = 3, Unsatisfactory = 2, Highly Unsatisfactory = 1, and unable to assess = 0.

Annex 4 GEF Minimum requirements for M&E

Minimum Requirement 1: Project Design of M&E[9]

All projects must include a concrete and fully budgeted monitoring and evaluation plan by the time of Work Program entry (full-sized projects) or CEO approval (medium-sized projects). This plan must contain at a minimum:

- SMART (see below) indicators for project implementation, or, if no indicators are identified, an alternative plan for monitoring that will deliver reliable and valid information to management
- SMART indicators for results (outcomes and, if applicable, impacts), and, where appropriate, corporate-level indicators
- A project baseline, with:
  - a description of the problem to address
  - indicator data
  - or, if major baseline indicators are not identified, an alternative plan for addressing this within one year of implementation
- An M&E Plan with identification of reviews and evaluations which will be undertaken, such as mid-term reviews or evaluations of activities
- An organizational setup and budgets for monitoring and evaluation.

[9] http://gefweb.org/MonitoringandEvaluation/MEPoliciesProcedures/MEPTools/meptstandards.html

Minimum Requirement 2: Application of Project M&E

- Project monitoring and supervision will include implementation of the M&E plan, comprising:
- Use of SMART indicators for implementation (or provision of a reasonable explanation if not used)
- Use of SMART indicators for results (or provision of a reasonable explanation if not used)
- Fully established baseline for the project and data compiled to review progress
- Evaluations are undertaken as planned
- Operational organizational setup for M&E and budgets spent as planned.

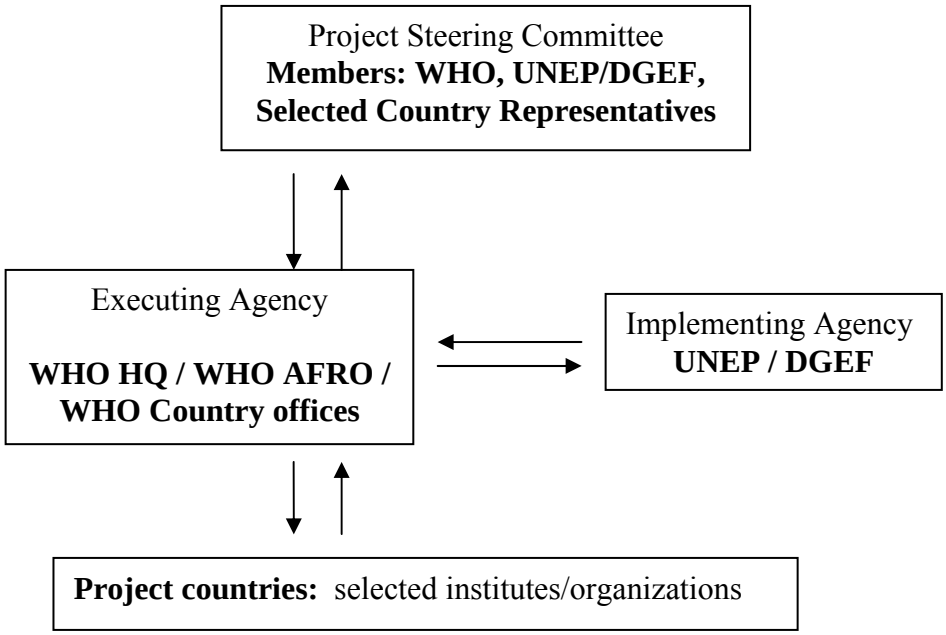
SMART INDICATORS GEF projects and programs should monitor using relevant performance indicators. The monitoring system should be "SMART":

1. **Specific**: The system captures the essence of the desired result by clearly and directly relating to achieving an objective, and only that objective.
2. **Measurable:** The monitoring system and its indicators are unambiguously specified so that all parties agree on what the system covers and there are practical ways to measure the indicators and results.
3. **Achievable and Attributable:** The system identifies what changes are anticipated as a result of the intervention and whether the result(s) are realistic. Attribution requires that changes in the targeted developmental issue can be linked to the intervention.
4. **Relevant and Realistic:** The system establishes levels of performance that are likely to be achieved in a practical manner, and that reflect the expectations of stakeholders.
5. **Time-bound, Timely, Trackable, and Targeted:** The system allows progress to be tracked in a cost-effective manner at desired frequency for a set period, with clear identification of the particular stakeholder group to be impacted by the project or program.

Annex 5 List of intended additional recipients for the Terminal Evaluation

Name	Affiliation	Email
Government Officials		
GEF Focal Point(s)		
Executing Agency		

Appendix 10: Project organizational chart



Appendix 11: Preliminary Terms of Reference

Preliminary TERMS OF REFERENCE
FOR
PROJECT STEERING COMMITTEE

Establishment of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.

In accordance with the provisions of the Project Document, a **Project Steering Committee** will be established with the following Terms of Reference:

1. To review the overall work plan under the project as approved by GEF and the stakeholders and the specific national work plans from participating project countries;
2. To provide overall technical guidance and make specific recommendations to enhance the implementation of the various activities;
3. To review national reports of the selected institutes and other stakeholders from project countries;
4. To identify programmatic, technical, financial and other requirements to improve overall effectiveness of project execution in the project countries;
5. To facilitate, guide and support the sustainability of determined interventions supported by the project for the post-project period.

Membership:

The Committee will be composed of representatives from WHO (AFRO, HQ), UNEP/DGEF, as well as selected stakeholders from participating countries.

Draft Terms of Reference

DRAFT TERMS OF REFERENCE FOR SUBCONTRACT WITH THE WORLD HEALTH ORGANIZATION

Establishment of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.

Position: **Project Manager**

Duration: **As indicated in the budget**

Background:

This project will improve the reporting of Parties to the Stockholm Convention through various ways. Institutional strengthening and training of relevant stakeholders are key intervention areas in order to boost the capacity of multi-sectoral reporting according to the obligations for the Parties to the Stockholm Convention.

Duties and Responsibilities:

The contracted agency, World Health Organization, will be tasked with the execution of the project. They will have responsibility for the following activities:

- Appoint of a project steering committee
- Appoint of a regional steering committee
- Oversight of the project
- Coordinate the project with other GEF funded projects on malaria control
- Develop a strategy for sharing the project tools with other countries and incorporating the tools into WHO's global monitoring and evaluation system for malaria control

The contracted Project Manager will assist mainly in the following activities:

- Engage stakeholders through structured approaches and according to the projects Work Plan.
- Conduct inception workshop to gather feedback on preliminary framework and create country-specific Work Plans with clear and SMART output related indicators of progress.
- Assist with the preparations of training workshops involving representatives of all project countries to share experience and generate lessons for future use.
- Identify barriers to collect and submit data as required by the Stockholm Convention and suggest ways forward to achieve the project outcomes and outputs in a harmonious and sustainable way, and provide specific suggestions for incentives to address these barriers.
- Identify barriers and incentives for policy implementers to monitor and evaluate policy results.
- Document progress in all project countries as required by WHO, UNEP, and GEF following provided templates with regards to technical and administrative/financial reporting.
- Identify common challenges and methods for adapting project approach in order to achieve the objectives.

- Based on country experiences, generate guidelines for sustaining obtained results for the post-project period in project countries.
- Suggest interventions for scale enlarging to other relevant countries if needed.

DRAFT TERMS OF REFERENCE FOR SUBCONTRACT WITH WHO

Establishment of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.

Position: Consultant on DDT Reporting

Duration: As indicated in the budget.

Background:

This project will improve the reporting of Parties to the Stockholm Convention through various ways. Institutional strengthening and training of relevant stakeholders are key intervention areas in order to boost the capacity of multi-sectoral reporting according to the obligations for the Parties to the Stockholm Convention.

Duties and Responsibilities:
The contracted consultant will be responsible for mainly the following activities:

- Review recent requirements for DDT reporting as set out by the Stockholm Convention Secretariat.
- Develop a training methodology.
- Engage in extensive training(s) to selected key stakeholders of project countries to develop institutional capacity with regards to the reporting of DDT use and production to the Stockholm convention Secretariat.
- Develop and implement monitoring instruments to monitor progress of required reporting through the project.
- Identify barriers to properly adopting preferred reporting at different scales (e.g., national, district-level, inter sectoral), and incentives to address these barriers.
- Identify barriers and incentives for policy implementers to monitor and evaluate policy results.
- Document the progress in all project countries.
- Generate guidelines for adapting achievements for the post-project period and to other relevant countries.

The contracted consultant will also assist the Project Manager in the following activities:

- Consultation with experts in malaria-related fields, stakeholders, and policy makers.
- Engage stakeholders through structured approaches.
- Conduct meetings/correspondence/communications to improve feedback on interventions and contribute to country-specific Work Plans.
- In selected (groups) of project country(ies), conduct a workshop with the following purposes: to engage stakeholders in proper reporting of DDT use and production through user-friendly approaches and to train technical support entities on use and modification of the guidelines for proper reporting.
- Share experiences and generate lessons for future use.
- Identify common challenges and methods for adapting achievements to other relevant countries.

DRAFT TERMS OF REFERENCE FOR SUBCONTRACT WITH THE WHO

Establishment of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control.

Position: **Consultant on DDT Resistance**

Duration: **As indicated in the budget.**

Background:

This project will improve the reporting of Parties to the Stockholm Convention through various ways. Institutional strengthening and training of relevant stakeholders are key intervention areas in order to boost the capacity of multi-sectoral reporting according to the obligations for the Parties to the Stockholm Convention. One of the key intervention areas is DDT resistance measuring and interpretation.

Duties and Responsibilities:
The contracted consultant, will be responsible for the following activities:

- Consultation with experts in malaria-related fields and stakeholders in the project countries with regards to resistance of DDT.
- Engage stakeholders through structured approaches.
- Engage in extensive training(s) to selected key stakeholders of project countries to develop institutional capacity with regards to the measurement of resistance to DDT as a partial requirement for reporting to the Stockholm Convention Secretariat as well as a justification for the continuous use of DDT in vector control.
- Develop and implement monitoring instruments to monitor progress of required resistance measurement capacity building through the project.
- Identify barriers to properly adopting preferred resistance measurement to DDT at different scales (e.g., national, district-level, inter sectoral), and incentives to address these barriers.
- Document the progress in all project countries.
- Generate guidelines for adapting achievements for the post-project period and to other relevant countries.

The contracted consultant will also assist the Project Manager in the following activities:

- Consultation with experts in related malaria-related fields, stakeholders, and policy makers.
- Engage stakeholders through structured approaches.
- Conduct meetings/correspondence/communications to improve feedback on interventions and contribute to country-specific Work Plans need assessments.
- In selected (groups) of project country(ies), conduct a workshop with the following purposes: to engage and train stakeholders in proper DDT resistance and interpretation through user-friendly approaches and to train technical support entities on use and modification of the guidelines for proper DDT resistance measuring and interpretation.
- Share experiences and generate lessons for future use.
- Identify common challenges and methods for adapting achievements to other relevant countries.

Appendix 12: Co-financing commitment letters from project partner WHO

World Health Organization

20, AVENUE APPIA – CH-1211 GENEVA 27 – SWITZERLAND – TEL CENTRAL +41 22 791 2111 – FAX CENTRAL +41 22 791 3111 – WWW.WHO.INT

Tel. direct: +41 22 791 1088
Fax direct: +41 22 791 4824
E-mail : guillaneuxs@who.int

In reply please refer to: M50/370/23

Your reference:

Mr Shafqat Kakakhel
Deputy Executive Director
United Nations Environment Programme
OIC Division of GEF Coordination
P.O. Box 30552
Nairobi
Kenya

Fax: +254-20 762 4041/4042

13 September 2007

Dear Mr Kakakhel,

Endorsement of the project "Establishment of efficient and effective data collection and reporting procedures for evaluating the continued need of DDT for disease vector control".

The above-mentioned project has been developed and formulated in close collaboration with the Secretariat of the Stockholm Convention (SSC) and the World Health Organization (WHO).

We used various data sources and country contacts for the formulation of the first documents leading to a Medium Sized Project (MSP) of three years and we are happy to present to you the Project Identification Format (PIF) to be submitted to GEF for GEF approval at your earliest convenience.

In line with the respective budget part of the PIF, WHO is pleased to endorse the PIF and is committed to contribute to the initiative with an amount of at least US$ 335,000.- as in-kind contribution. This contribution is based on staff time of the relevant WHO staff to be involved in this project.

This project will be executed by the WHO Global Malaria Programme. It is the understanding of WHO that if the project is approved by GEF, WHO will receive an amount of US$ 761 400 for the three years of the project execution.

We would highly appreciate it if you could take the necessary action and communicate this letter to the Global Environment Facility in order to obtain GEF approval.

Yours sincerely,

Dr Arata Kochi
Director
Global Malaria Programme

Appendix 13: Endorsement letters of GEF National Focal Points

Not applicable (Global Project)

Appendix 14: List of *Project Countries*

		Country has officially reported DDT **use** in IRS to WHO	Country intending to use DDT for IRS	Country that have notified SSC of their intension to **use** and/or **produce** and/or **import** DDT	Ratification of Stockholm Convention (as per 10 September 2007)
1	***Eritrea***	X			10/03/2005
2	***Ethiopia***	X		X	09/01/2003
3	India[10]			X	13/01/2006
4	***Madagascar***		X	X	27/08/2007
5	Marshall Islands[11]			X	27/01/2003
6	***Mauritius***	X		X	13/07/2004
7	***Mozambique***	X		X	31/10/2005
8	***Morocco***			X	15/06/2004
9	Myanmar[12]			X	19/04/2004
10	***Namibia***	X			24/06/2005
11	***Senegal***			X	08/10/2003
12	***South Africa***	X		X	04/09/2002
13	***Swaziland***	X		X	13/01/2006
14	***Uganda***		X	X	20/07/2004
15	***Yemen***			X	09/01/2004
16	***Zambia***	X			07/07/2006
17	DPR Korea[13]	?	X	?	26/08/2002
18	***Gambia***		X	?	28/04/2006
19	Zimbabwe[14]	X		?	23/05/2001 (signature only)

14 countries (***bold***) in the WHO AFRO and WHO EMRO Region are considered for this project.

[10] Concerning reporting DDT related issues, India will be supported through a separate UNEP/WHO project to be submitted to GEF ("Reduction in the use of DDT by Enhancing Capabilities for the Implementation of Vector Management")

[11] Marshall Islands : According to draft NIP (May 2007, during the last years no current DDT use and no intention to use, except when climate change might bring back malaria to Marshall Islands)

[12] Myanmar : All malaria vectors in Myanmar are resistant to DDT. As such, no DDT is used in malaria vector control in this country but seen the seriousness of malaria in the country, Myanmar has registered its possibility to apply DDT.

[13] DPR Korea: special situation as described in the full text document.

[14] Zimbabwe: country has not ratified the Stockholm Convention and is not GEF eligible.