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20 June 2008

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UNEP HPMP preparation cost details

	Activity	Per unit	Ве	elow 6	6 - 100		101 to 500		501 to 1200	
		cost	#	Cost	#	Cost	#	cost	#	cost
Policy	National expert (US\$ 2,000/w.m.)	2,000	2	4,000	4	8,000	7	14,000	10	20,000
	International expert (US\$15,000/w.m.), incl. international travel	15,000	1	15,000	1	15,000	2	30,000	2	30,000
	Stakeholder consultation workshops (US\$ 25,000/workshop)	25,000	1	25,000	1	25,000	2	50,000	3	75,000
	Sub-total			44,000		48,000		94,000		125,000
National, sectoral and enterprise	National experts undertaking national, sectoral and enterprise level consumption data (US\$ 2,000/w.m.)	2,000	5	10,000	10	20,000	18	36,000	24	48,000
level data	Local travel	5,000	2	10,000	3	15,000	4	20,000	6	30,000
collection	International experts to analyze the data collected (US\$ US\$15,000/w.m.), incl. international travel	15,000	1	15,000	1	15,000	1	15,000	2	30,000
	Sub-total			35,000		50,000		71,000		108,000
Strategy Development	National expert (sectoral) to investigate the availability of alternatives and assist in the development of phase out scenarios (US\$ 2,000/w.m.)	2,000	4	8,000	6	12,000	7	14,000	10	20,000
	International experts (sectoral) advise on the selection of alternatives and develop phase out scenarios (US\$ US\$15,000/w.m.), incl. international travel	15,000	1	15,000	1.00	15,000	2	30,000	3	45,000
	Stakeholder consultation workshops	25,000	1	25,000	1	25,000	2	50,000	3	75,000
	Sub-total			48,000		52,000		94,000		140,000
individual project preparation	National expert to collect all enterprise level baseline data required for project preparation (US\$ 2,000/w.m.)	2,000	2	4,000	4	8,000	12	22,000	14	28,000
	International expert to visit selected enterprises and prepare phase out projects (US\$ US\$15,000/w.m.), incl. international travel	15,000	1	15,000	1	15,000	3	45,000	6	90,000
	Sub-total			19,000		23,000		67,000		118,000
	Sub-total for all components	000/		156,000		173,000		326,000		491,000
Management, coordination monitoring of the HPMP preparation	Project coordinator, database creation, telecommunication, office costs, incidentals	20% of overall HPMP cost		31,000		34,600		65,200		98,200
TOTAL Cost of HPMP preparation				179,000		207,600		391,200		589,200

We confirm our analysis that at least below 6 t. HCFC consumption, it's neither possible nor appropriate to differentiate between subcategories of countries. Furthermore we confirm our analysis that without reliable HCFC consumption data for several countries and considering that every country is going to demonstrate positive HCFC consumption as a result of the national survey, the most appropriate categorization of countries at this stage is the previous LVC / medium / large categories.

Based on this analysis we suggest to create only one category of countries with consumption below 6 t.

In addition, needs for individual investment project preparation is difficult to assess upfront for countries with relatively low HCFC consumption before having started the national activities. Therefore, we suggest that instead of creating funding categories for countries with respectively without manufacturing activities, an optional window based on the following table be approved upfront for countries with HCFC consumption up to 100t., which could be used by IAs for individual investment project preparation in case manufacturing activities would be identified during the national survey and in case conversion of these enterprises would be considered the optimal approach for complying with freeze and first reduction step.

	Activity	Per unit cost	Ве	low 6	6	5 - 100
			#	Cost	#	Cost
individual investment project preparation	National expert to collect all enterprise level baseline data required for project preparation (US\$ 2,000/w.m.)	2,000	2	4,000	2	4,000
	International expert to visit selected enterprises and prepare phase out projects (US\$ US\$15,000/w.m.), incl. international travel	15,000	1	15,000	2	30,000
	Sub-total			19,000		34,000



AMENDMENT TO UNEP'S WORK PROGRAMME 2008

Presented to the 55th Meeting of the Executive Committee of the Multilateral Fund for the Implementation of the Montreal Protocol

20 June 2008

United Nations Environment Programme

A. INTRODUCTION

1. UNEP's Work Programme 2008 was approved at the 53^{rd} Meeting of the Executive Committee of the Multilateral Fund for the Implementation of the Montreal Protocol.

2. This document, as submitted for consideration to the 55th meeting of the Executive Committee represents an Amendment to that Work Programme.

B. SUMMARY OF THE WORK PROGRAMME AMENDMENT FOR 2008

- 3. Consistent with the Business Plan 2008-2010, this Amendment comprises funding requests for
- Implementation of Terminal Phase-out Management Plans (TPMPs) in 7 countries;
- Annual tranches of approved TPMPs in 3 countries;
- Verification report preparation in **1** country;
- Renewal of support for the implementation of Institutional Strengthening projects in 5 countries;
- Assistance in preparation of MDI strategies in 2 countries;
- Preparation of TPMP and CP/NPP in 2 countries;
- Preparation of national HCFC Phase-out Management Plans in 52 countries.
- 4. Details of the Work Programme Amendment and the total funding by project groups and the grand total funding requested are presented in Tables 1 and 2.

Table 1. Funding requests for new TPMPs, annual tranches for approved TPMPs, new ISPs, ISP renewals, MDI strategies, and TPMP preparations to be considered at the 55th meeting of the Executive Committee

Country	Project title	Amount, US\$	PSC, US\$	Total requested amount, US\$
TERMINAL	PHASE-OUT MANAGEMENT PLANS			
Benin	Terminal phase-out management plan (1 st tranche)	85,000	11,050	96,050
Burundi	Terminal phase-out management plan (1 st tranche)	74,000	9,620	83,620
Central	Terminal phase-out management plan (1 st tranche)	60,000	7,800	67,800
African				
Republic				
Guinea	Terminal phase-out management plan (1 st tranche)	74,000	9,620	83,620
Honduras	Terminal phase-out management plan (1 st tranche)	146,000	18,980	164,980
Peru	Terminal phase-out management plan (1 st tranche)	<mark>77,500</mark>	10,075	<mark>87,575</mark>
Yemen*	Terminal phase-out management plan (1 st tranche)	675,000	87,750	762,750
	Sub-total for new TPMPs	<mark>1,191,500</mark>	<mark>154,895</mark>	1,346,395
SECOND TE	RANCHES FOR APPROVED TPMPS			
Grenada	Terminal phase-out management plan (2 nd tranche)	48,000	6,240	54,240
Kyrgyz Republic	Terminal phase-out management plan (2 nd tranche)	65,100	8,463	73,563
Nepal	Terminal phase-out management plan (2 nd tranche)	35,000	4,550	39,550
	Sub-total for annual tranches of approved TPMPs	148,100	<u>19,253</u>	<u>167,353</u>
INSTITUTIO	ONAL STRENGTHENING PROJECT RENEWALS			
Jamaica	D 1 CI III I I I I I I I I I I I I I I I	50.000	371	60.000
Jamaica	Renewal of institutional strengthening project (Phase VI)	60,000	NA	60,000
Kenya	Renewal of institutional strengthening project (Phase VI) Renewal of institutional strengthening project (Phase VI Year 2)	75,833	NA NA	75,833
	Renewal of institutional strengthening project (Phase VI			

Saint Lucia	Renewal of institutional strengthening project (Phase VI)	60,000	NA	60,000	
	Sub-total for Institutional Strengthening Project renewals	<u>371,663</u>	N.A.	<u>371,663</u>	
MDI STRAT	TEGIES				
Pakistan	Transitional MDI strategy	20,000	2,600	22,600	
Sri Lanka	Transitional MDI strategy	30,000	3,900	33,900	
	Sub-total for MDI Strategies	50,000	6,500	56,500	
TERMINAL	PHASEOUT MANAGEMENT PLAN PREPARATION, N.	ATIONAL PH	ASEOUT		
MANAGEM	ENT PLANS PREPRATION AND COUNTRY PROGRAM	ME PREPRA	TION		
Iraq	Country Programme and National Phase-out Plan preparation	100,000	13,000	113,000	
Myanmar	Terminal Phase-out Management Plan preparation	0	0	0	
	Sub-total for CP/NPP and TPMP preparations	100,000	13,000	113,000	
VERIFICAT	VERIFICATION REPORT				
Kyrgyz Republic	TPMP verification report	20,000	2,600	22,600	
	Sub-total for Verification reports	20,000	2,600	22,600	
	Total	1,881,263	<mark>22,100</mark>	2,077,511	

^{*}The values indicated are still pending.

Table 2. Funding requests for HPMPs to be considered at the 55th meeting of the Executive Committee

Country	Project title	Amount, US\$	PSC, US\$	Total requested amount, US\$
HCFC PHASE-OUT	MANAGEMENT PLANS (HPMPs)			
Afghanistan	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Antigua and Barbuda	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Bahamas	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Bahrain	HCFC Phase-out management plan preparation	103,000	13,390	116,390
Barbados	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Belize	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Bhutan	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Brunei Darussalam	HCFC Phase-out management plan preparation	80,000	10,400	90,400
Burkina Faso	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Burundi	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Cambodia	HCFC Phase-out management plan preparation	180,000	23,400	203,400
Central African	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Republic				
Chad	HCFC Phase-out management plan preparation	200,000	26,000	226,000
China	HCFC Phase-out management plan preparation	700,000	91,000	791,000
Comoros	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Congo	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Democratic Republic	HCFC Phase-out management plan preparation	270,000	35,100	305,100
of the Congo				
Djibouti	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Eritrea	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Gabon	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Grenada	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Guyana	HCFC Phase-out management plan preparation	200,000	26,000	226,000
India	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Iran	HCFC Phase-out management plan preparation	80,000	10,400	90,400
Iraq	HCFC Phase-out management plan preparation	453,500	58,955	512,455
Honduras	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Korea, DPR	HCFC Phase-out management plan preparation	80,000	10,400	90,400

Kuwait	HCFC Phase-out management plan preparation	210,000	27,300	237,300
Lao People's	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Democratic Republic				
Madagascar	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Malawi	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Maldives	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Mali	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Mauritania	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Mongolia	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Mozambique	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Nepal	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Niger	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Oman	HCFC Phase-out management plan preparation	38,500	5,005	43,505
Pakistan	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Paraguay	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Qatar	HCFC Phase-out management plan preparation	43,500	5,655	49,155
Rwanda	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Saint Lucia	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Saint Vincent and the Grenadines	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Sao Tome and Principe	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Saudi Arabia	HCFC Phase-out management plan preparation	190,000	24,700	214,700
Sri Lanka	HCFC Phase-out management plan preparation	120,000	15,600	135,600
Suriname	HCFC Phase-out management plan preparation	200,000	26,000	226,000
Yemen	HCFC Phase-out management plan preparation	210,000	27,300	237,300
Sub-total for HCFC Ph	ase-out management plans	9,158,500	1,190,605	10,349,105

Grand total (Tables 1 and 2) 11,039,763 1,21	426,616
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C. PROJECT CONCEPTS for items to be submitted by UNEP

1 Title:	Implementation of the terminal phase-out management plan in Benin				
Background:	The Republic of Benin ratified the Vienna Convention on the protection of the ozone layer and the Montreal Protocol related to substances that deplete the ozone layer in July 1993. The London and Copenhagen Amendments were ratified in June 2000. The Montreal and Beijing Amendments have been ratified in September 2007. The ratification instrument expected to be deposited in NY by July 2008.				
	UNEP will be the lead implementing agency. UNIDO	is the cooperating agency.			
	This project has been included in UNEP's Business Pla	an for 2008-2010.			
Objectives:	The overall objective is to achieve zero CFC consumption by phasing out the remaining 15 $\%$ by 2010.				
Activities:	The following activities are planned under the TPMP component:				
	 Training complement for customs officers; Training and/or complement for refrigeration Technical assistance component (UNIDO); Monitoring and reporting assistance for imple 				
Description:	 Additional customs training: to train about 250 custom Additional technicians training: to train about 500 technicians training: to train about 500 technicians training: the training: the training and tooling; Reporting and monitoring: this project will fund the results. 	chnicians on alternatives including HC,			
Time Frame:	TPMP: 36 months (2008 - 2010)				
Cost:	Requested amount (Excluding project support costs)	First tranche: US\$ 85,000 Second tranche: US\$ 65,000			
		Total: US\$: 150,000			

2 Title:	Implementation of the terminal phase-out management plan in Burundi
Background:	The Republic of Burundi ratified the Vienna Convention and the Montreal Protocol in January 1997. The Amendments to the Montreal Protocol were ratified in October 2001.
	The Executive Committee of the Multilateral Fund approved the Country Program of Burundi in November 1998 at its 26 th Meeting. The Refrigerant Management Plan (RMP) was approved at the same time as the Country Program.
	The actual Terminal Phase-out Management Plan (TPMP) for CFCs in Burundi s built upon the progress made to date to reduce CFC consumption in order to ensure complete phase-out by 2010, at the latest. The TPMP includes the following components: (1) Training complement for customs officers; (2) Training for refrigeration technicians on alternatives including HCs, (3) Technical assistance Programme for Retrofitting of Refrigeration and air conditioning (AC) equipment, (4) MDI component, and (5) Monitoring and reporting.
	The TPMP will be implemented jointly by UNEP and UNIDO. This project has been included in UNEP's 2008-2010 Business Plan

Objectives: The overall objective is to achieve zero CFC consumption by phasing out the remaining 15 %

by 2010.

Activities: The following activities are planned under the TPMP component:

- Training complement for customs officers;

-Training and/or complement for refrigeration technicians on alternatives including HCs;

- Technical assistance Programme for Retrofitting of Refrigeration and AC equipment;

- MDI component;

- Monitoring and reporting.

Description:

- Additional customs training: enable more effective control of the consumption of ODS and will help the country to face the illegal trade of ODS. The trainers trained under the RMP will be helped by UNEP in order to do the training of about 160 customs officers and other

enforcement officers over 24 months (about 80 persons per annum).

- Additional technicians training in good servicing practices will cover remaining servicing

technicians (approximately 600 persons);

- Technical assistance programme for retrofitting of refrigeration and AC equipment foresees procurement of spare parts for recovery machines, enabling recovery and re-use of refrigerants during the maintenance on refrigeration and air conditioning equipment. Acquiring spare parts to assist owners of commercial and industrial equipment to retrofit their

equipment to alternative refrigerants.

- Reporting and monitoring: this project will fund the monitoring activities of the NOU.

Time Frame: TPMP: 36 months (2008 - 2010)

Cost: Requested amount (Excluding project support costs) First tranche: US\$ 74,000

Second tranche: US\$ 41,000

Total: US\$: 115,000

3 Title:	Implementation of the terminal phase-out management plan in Central African Republic
Background:	The Central African Republic has ratified the Vienna Convention and the Montreal Protocol

in March 1993; The ratification of the Montreal Protocol Amendments was signed in January 2008. The ratification document should be deposited in NY by July 2008.

The Country Program of the Central African republic was approved in November 1995. The projects proposed in the TPMP are based on the results of the data collection and consultations involving the National Ozone Unit, refrigeration technicians, enforcement officers, end-users and CFC distributors as well as an analysis of the completed projects.

The TPMP will be implemented jointly by UNEP (lead) and France (cooperating).

The project has been included in the UNEP's 2008-2010 Business Plan.

Objectives: The overall objective is to achieve zero CFC consumption by phasing out the remaining 15 %

by 2010.

Activities: The project includes the following components: (1) Training for refrigeration technicians on

good practices, (2) Training complement for customs officers, (3) Technical assistance for

end-users component, and (4) Monitoring and reporting.

Description: - Training for refrigeration technicians on good practices will cover all remaining servicing

technicians (about 300 persons):

- Training complement for customs officers will target both customs and commerce and enable customs officers and other enforcement officers to follow-up the import/export license delivery and identify the ODS and ODS based equipment;

- Technical assistance end-users programme will provide the country with the opportunity to develop centres facilitating access to alternative technologies, parts and tools; for training of future generations of technicians; and to provide them with the most up to date information on current best practices and alternatives and demonstration equipment on which to practice.

- Monitoring and reporting: This project will fund the monitoring activities of the NOU.

Time Frame: TPMP: 36 months (2008 - 2010)

First tranche: US\$ 60,000 Cost: Requested amount (Excluding project support costs)

Second tranche: US\$ 45,000

Total: US\$: 105,000

4 Title:	Implementation of the terminal phase-out management plan in the Republic of Guinea
Background:	The Republic of Guinea has ratified the Vienna Convention, the Montreal Protocol and the London Amendment in 1992; and the Copenhagen, Montreal and Beijing Amendments in 2008. The Country Program was approved in January 1995.
	The projects proposed in the TPMP are based on the results of the data collection and consultations involving the National Ozone Unit, refrigeration technicians, enforcement officers, end-users and CFC distributors as well as an analysis of the completed projects.
	The TPMP will be implemented jointly by UNEP and UNIDO.

The project has been included in the UNEP's 2008-2010 Business Plan.

The overall objective is to achieve zero CFC consumption by phasing out the remaining 15 % by 2010.

Objectives:

Activities:

Description:

The project includes the following components: (1) Training for refrigeration technicians on good practices related to alternatives and starter tool kits (2) Training complement for customs officers and identifiers; (3) Strengthening of a centre of excellence and an incentives

program for retrofit and conversion; (4) Monitoring and reporting.

- Training for refrigeration technicians on good practices related to alternatives and starter tool kits: to train about 500 refrigeration technicians and engineers in good practices in refrigeration and techniques of retrofitting to non-ODS refrigerants.

- Training complement for customs officers and identifiers: it will target 250 officers both (customs and commerce) and enable customs officers and other enforcement officers to follow-up the import/export license delivery and identify the ODS and ODS based equipment;
- Strengthening of a centre of excellence and incentives programme for retrofit and conversion: The purpose of the project is to provide the country with the opportunity to develop excellence centres facilitating access to alternative technologies, parts and tools; for training of future generations of technicians; and to provide them with the most up to date information on current best practices and alternatives and demonstration equipment on which to practice. - Monitoring and reporting: This project will fund the monitoring activities of the NOU.

Time Frame: TPMP: 36 months (2008 - 2010)

Cost: Requested amount (Excluding project support costs) First tranche: US\$ 74,000

Second tranche: US\$ 58,000

Total: US\$: 132,000

5 Title:

Implementation of the terminal phase-out management plan for Honduras

Background:

Honduras ratified the Vienna Convention and the Montreal Protocol in May 1993. It subsequently ratified the London and Copenhagen Amendments in 2000, and the Montreal and Beijing Amendments in 2006.

The projects proposed in the TPMP are based on the results of the data collection and consultations involving the National Ozone Unit, refrigeration technicians, enforcement officers, end-users and CFC distributors as well as an analysis of the completed projects.

UNEP and UNIDO will be the implementing agencies.

This project has been included in UNEP's Business Plan for 2008-2010.

Objectives:

The project includes the following components: (1) Training for refrigeration technicians on good practices related to alternatives and starter tool kits (2) Training complement for customs officers and identifiers; (3) Strengthening of a centre of excellence and an incentives program for retrofit and conversion; (4) Monitoring and reporting.

Activities:

The following activities are planned under the UNEP's component:

- Strengthening the enforcement and compliance framework through training, review of training curricula and strengthening of training schools
- Establishment of an association of refrigeration technicians
- Training of technicians and strengthening of training schools
- Monitoring, evaluation and reporting mechanism

Description:

Training for refrigeration technicians on good practices related to alternatives and starter tool kits: to train about 2,000 refrigeration technicians and engineers in good practices in refrigeration and techniques of retrofitting to non-ODS refrigerants.

- Training complement for customs officers and identifiers: It will enable customs officers and other enforcement officers to follow-up the import/export license delivery and identify the ODS and ODS based equipment;
- Strengthening of a centre of excellence and incentives programme for retrofit and conversion: The purpose of the project is to provide the country with the opportunity to develop excellence centres facilitating access to alternative technologies, parts and tools; for training of future generations of technicians; and to provide them with the most up to date information on current best practices and alternatives and demonstration equipment on which to practice. Monitoring and reporting: This project will fund the monitoring activities of the NOU.

Time Frame:

TPMP: 36 months (2008 - 2010)

Cost:

Requested amount (Excluding project support costs) First tranche: US\$ 146,000

Second tranche: US\$ 52,000

Total: US\$ 198,000

6 Title:

Implementation of the terminal phase-out management plan in Peru

Background:

Peru ratified the Vienna Convention in 1989, the Montreal Protocol and the London Amendment in 1993. It subsequently ratified the Copenhagen Amendment in 1999, the Montreal Amendment in 2007 and Beijing Amendment is being approved. The Country Program was approved in 1995.

The Terminal Phase-out Management Plan (TPMP) for CFCs in Peru is based on the the following:

To achieve these objectives Peru needs to apply various projects for helping decrease CFC consumption until its complete phase out in the next years; these projects are:

- 1. "Technical assistance to the refrigeration sector for conversion to mixtures alternatives available in the market":
- 2. "Incentive programme and Retrofit Centers Installation for conversion in key cities where larger CFC consumptions have been identified";
- 3. "Technical assistance to Customs offices for the prevention of CFC illegal trade and importations of CFC-containing equipment";
- 4. "Proposal to replace high energy consumption equipment working with CFC";
- 5. Monitoring of Application, Follow Up and Control of TPMP.

It also contains a CFC Metered Dosed Inhalers Transition Strategy.

The TPMP will be implemented jointly by UNEP and UNDP. This project has been included in UNEP's 2008-2010 Business Plan

Objectives:

The main objective of the TPMP is to arrive at zero consumption of CFCs at the end of 2009.

Activities:

The following activities are planned under the UNEP's component:

- additional training of refrigeration technicians
- additional training of customs officers
- technical assistance for retrofit programme
- Reporting and monitoring.

Description:

Training for refrigeration technicians: the project will strengthen the capacity of refrigeration technicians by improving their skills in retrofitting existing ODS equipment to hydrocarbon technology.

Training for customs officers: the plan is to train about 250 customs and law enforcement officers on ozone issues and regulations for the control of ODS.

Technical assistance programme: The project foresees reduction in the number of domestic refrigeration and MAC units.

Reporting and Monitoring: to ensure effective monitoring of all planned activities under the TPMP.

The TPMP will be implemented in two phases; with funding for the second phase being requested at submission of the Implementation Report on the first phase.

Time Frame:

TPMP: 36 months (2008 - 2010)

Cost:

Requested amount (Excluding project support costs) First tranche **US\$ 77,500**

Second tranche: US\$77,500

Total: US\$ 155,000

7 Title: Implementation of the terminal phase-out management plan in Yemen

Background:

Yemen ratified the Vienna Convention in 1996 as well as the Montreal Protocol. It ratified the London and Copenhagen Amendments in 2001. The Beijing Amendment is not ratified yet. The country program was approved in 1999. Yemen is classified as an Article 5 country.

The Terminal Phase-out Management Plan (TPMP) of Yemen is based on the results achieved to date in reducing CFC consumption to bring it below the required 15% limit. The project includes the following components: (1) Additional training for customs officers, (2) Training of refrigeration technicians in good practices related to alternatives; (3) Technical assistance for the strengthening of an "excellence and referral centre"; Incentives programme for access to spare parts, tooling and, alternative fluids, and storage; (4) Monitoring and reporting. A strategy for MDI is included.

The TPMP will be implemented jointly by UNEP and UNIDO. This project has been included in UNEP's 2008-2010 Business Plan.

Objectives:

The overall objective is to achieve zero CFC consumption by phasing out the remaining 15 % by 2010.

Activities:

The following activities are planned under the TPMP component: : (1) Additional training for customs officers, (2) Training of refrigeration technicians in good practices related to alternatives; (3) Technical assistance for the strengthening of an "excellence and referral centre"; Incentives programme for access to spare parts, tooling and, alternative fluids, and storage; (4) Monitoring and reporting.

Description:

- Additional training for customs officers: The training will allow the custom officer to identify, codify and classify ODS and all systems and products that contain them, and supply reliable statistics for notification of data to the National Institute of Statistics. Accordingly there will be an enhanced surveillance of import of ODS and ODS -containing equipment as well as illegal trade. Finally, the country will have more qualified staff to enforce the new regulatory requirements for the control of ODS.
- Training of refrigeration technicians in good practices related to alternatives: The purpose of the project is to train about 1,500 refrigeration technicians in good practices in refrigeration and techniques of retrofitting to non-ODS refrigerants..
- Technical assistance for the strengthening of an "excellence and referral centre"; Incentives programme for access to spare parts, tooling and, alternative fluids, and storage:
- Monitoring and reporting: The TPMP monitoring program will ensure the effectiveness of all the projects proposed within the TPMP through constant monitoring of the performance of individual projects. This project will contribute to the country meeting its phase out schedule by ensuring that the projects are executed on time and the impacts are realized.

Time Frame:

TPMP: 36 months (2008 - 2010)

Cost:

Requested amount (Excluding project support costs) First tranche: US\$ 675,000 Second tranche: US\$ 65,000

Total: US\$: 740,000

8 Title:	Requests for renewal of institutional strengther Republic, Mongolia, and Saint Lucia	ning projects for Jamaica, Kenya, Kyrgyz	
Background:	Renewals of institutional strengthening projects (ISP) for the above-listed six countries are being requested in line with relevant decisions and guidelines of the Executive Committee.		
	These projects have been included in the UNEP 200	08-2010 Business Plan.	
Objectives:	To assist the Governments of these Article 5 countries in building and strengthening their capacity for the implementation of the Montreal Protocol and its Amendments.		
Description:	Individual documents for these projects – the terminal reports and the action plans - have been submitted to the Multilateral Fund Secretariat separately.		
Time Frame:	24 months		
Per country cost:	Total requested amount	US\$ 371,663	
	Jamaica (Phase VI)	US\$ 60,000	
	Kenya (Phase VI Year 2)	US\$ 75,833	
	Kyrgyz Republic (Phase III)	US\$ 115,830	
	Mongolia (Phase V)	US\$ 60,000	
	Saint Lucia (Phase VI)	US\$ 60,000	

9 Title:	Request for funding for preparation of non-investment component of CFC MDI transition strategy for Pakistan	
	In the 54 th Meeting of the Executive Committee, funding was approved for UNDP for preparation of CFC MDI phaseout project for Pakistan.	
Background:	For this, UNDP and UNEP had submitted data required as per decision 51/34 (c) for countries manufacturing CFC MDIs. Justification of the need for CFC MDI phaseout project have been provided during the consultations held prior to and during the 54 th Executive Committee Meeting.	
	✓ Develop non-investment component project activities for implementing CFC MDI phaseout. This would include awareness activities and regulations implementation for CFC MDI phaseout.	
Objectives:	✓ Hold stakeholder consultations in Pakistan for discussing the proposed activities for CFC MDI phaseout and updating the transition strategy for CFC MDI phaseout based on inputs received during consultation.	
	✓ Finalise and submit the non-investment component of transition strategy together with the investment component for the consideration of the Executive Committee meeting.	
Expected outputs	CFC MDI phaseout – non-investment component activities are identified and submitted for the consideration of the 56 th Executive Committee along with the investment component submitted by UNDP.	
Planned activities	The activities that would be undertaken for this would include the following:	
	1. Define information needs in close consultation with NOU, Pakistan and UNDP on	

awareness/capacity building and regulations components for non-investment activities for CFC MDI phaseout in Pakistan. Significant portion of this has been developed by UNEP based on our experiences with other countries in the region (e.g., Bangladesh, Iran, and India) and inputs from consultations during the thematic meetings on CFC MDI phaseout. This would be augmented at this stage. 2. Undertake a limited field survey with key target audience on collection of information identified above. This would include (but not limited to) contacting limited number of health centres dealing with asthma and COPD, CFC MDI manufacturing industry and medical practitioners. Inputs from UNDP and industry manufacturing & selling MDIs would also be taken during this survey. 3. Identify possible national institutions which could work in cooperation with the Government of Pakistan on implementation of CFC MDI phaseout project – non-investment components. They would work in close consultation with the project management set-up of UNDP implementing CFC MDI phaseout investment project. 4. Develop a national action plan with projects relating to non-investment component for CFC MDI phaseout. This would be developed in consultation with UNDP and NOU to ensure effective integration with the overall national CFC MDI transition strategy. 5. Incorporate this component into the overall CFC MDI transition plan for Pakistan for which the investment component is under preparation by UNDP. Through consultations at various stages as explained in points 1 to 4, the non-investment project activities will be effectively integrated with the investment activities for CFC MDI phaseout. 6. Hold national stakeholders' consultation for discussing the CFC MDI phaseout plan (both investment and non-investment) and obtaining inputs on the components of projects proposed in the plan. While investment component related inputs would be addressed by UNDP, noninvestment component related inputs would be addressed by UNEP. 7. Finalise and submit the document after due consultation with NOU for consideration of the Executive Committee. Awareness and capacity building activities relating to CFC MDI phaseout (a) Awareness workshops at sub-regional level with medical practitioners, nurses and other key stake holders on CFC MDI phaseout and adoption of alternatives. This would be undertaken in cooperation with pharma industry. Awareness materials development and distribution including phamplets, education videos on use of CFC free alternatives, posters that can be used in point of sales etc. The focus would be on availability of CFC free technologies and safe use of these alternative technologies. Elements of transition strategy Education programs and materials that could be integrated into the regular training curriculum for medical practitioners and nurses for use of CFC free alternatives to CFC MDIs. Periodic information sharing during the next 16-18 months on CFC MDI phaseout with assistance from industry manufacturing CFC MDIs. Implementation of regulations for phasingout CFC based MDIs and adoption of CFC **(b)** free alternatives. Production and imports of CFC MDIs

	 Regulatory controls on CFCs imported, stored and used for CFC MDIs Regulations on cessation of manufacturing CFC based MDIs Regulations relating to ban on imports of CFC based MDIs 		
	Registration of MDIs		
	 Deregistration of CFC based MDIs by formulation Registration (fast-track) of CFC free alternatives to CFC based MDIs by formulation 		
	Sales of MDIs		
	 Ban on storage and sale of CFC based MDIs – Public Health, Pharmacies etc. Fiscal incentives, wherever feasible, on adoption of CFC free alternatives. 		
	These regulations need to be developed in close consultations with health regulatory authorities, pharma industry and other institutions associated with asthma and COPD.		
Other non- investment elements	Periodic updates on status of implementation of CFC MDI phaseout project activities should be provided to the health regulatory authorities and implementation partner for awareness activities by the National Ozone Unit so that necessary actions can be taken by them for ensuring smooth transition. Coordination between NOU, health / drug regulatory authorities and awareness implementation agencies is key to achieve smooth transition to CFC MDI phaseout in Pakistan.		
Cost:	US\$ 20,000		

10 Title:	Request for funding for preparation of CFC MDI transition strategy for Sri Lanka		
Background:	Sri Lanka has significant use of CFC based MDIs. This use is also seeing high growth like other countries in the region. Sri Lanka is import dependent for MDIs. The country has identified need for assistance for managing transition to CFC free alternatives to CFC MDIs in a cost effective manner so that patient's health is not adversely affected.		
Objectives:	 ✓ Develop transition strategy for Sri Lanka for seamless CFC MDI phase-out. This would include awareness activities and regulations implementation for CFC MDI phase-out. ✓ Hold stakeholder consultations in Sri Lanka for discussing the proposed activities for CFC MDI phase-out and updating the transition strategy for CFC MDI phase-out based on inputs received during consultation. ✓ Finalise and submit the transition strategy for the consideration of the Executive Committee meeting. 		
Activities:	The activities that would be undertaken for this would include the following. It must be noted that the activities covered under the project will cover preparation of the CFC MDI transition strategy and submission of the same to the Executive Committee for additional resource support. 1. Define information needs in close consultation with NOU, Sri Lanka and Health Authorities on awareness/capacity building and regulations components for CFC MDI phase-out in Sri Lanka. 2. Undertake a limited field survey with key target audience on collection of information identified above. This would include (but not limited to) contacting limited number of		

	health centres dealing with asthma and COPD, CFC MDI traders/importers and medical practitioners.
	3. Identify possible national institutions which could work in cooperation with the Government of Sri Lanka on implementation of CFC MDI phase-out activities.
	4. Develop a National transition strategy for CFC MDI phase-out keeping in mind the local market situation and expected evolution.
	5. Hold national stakeholders' consultation for discussing the CFC MDI phase-out transition strategy and obtaining inputs on the components of the strategy.
	 Finalise and submit the transition strategy document after due consultation with NOU for consideration of the Executive Committee for additional resource support for implementation.
Description:	Annex 1 to this document presents the details of the justification for preparation of CFC MDI transition strategy for Sri Lanka. The details of the information needs as per decision 51/34 d (applicable for MDI importing countries) is attached separately.
Time Frame:	Activities to be completed – July – December 2008
Cost:	USD 30,000

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11 Title:	Iraq: Preparation of Country Programme and Na	tional Phase-out Plan	
Background:	Iraq government recently decided to ratify the Vienna Convention, Montreal Protocol and its amendments and is about to deposit the ratification documents to the Legal Office of the United Nations Secretariat.		
	The preparation of the CP.NPP will be carried out in country needs to comply with the 2010 control meast due to the political and security consideration within agency or international expert to work inside the couquickly build national capacities through training seven consequently they will be able to assess the consuminafterwards. Therefore, the funding requested for the phigher than the level usually approved for such projections.	ures, which is 18 months from now, and the country which will not enable any ntry directly. There will be a need to veral national experts outside Iraq, ng sectors and compile required data preparation of the CP.NPP of Iraq is	
Objectives:	This situation will generate exceptionally high preparation costs, even if all efforts hqâve been made for reducing them as much as possible. The preparation of CP.NPP of Iraq aims at enabling Iraq to catch with the international efforts to phase out ODS listed in Annexes A & B within the control measures set by the Montreal Protocol.		
Implementing Agency(s):	UNEP in cooperation with UNIDO		
Time Frame:	2008-2009		
Cost:	US\$ 100,000 (Excluding Agency support costs)		
Project Milestones:	Task	Number of months after project	

	approval
Training national expert	3-4
Conducting surveys	4-6
Compiling information and first draft of the	1-2
project document	
Review the project document	1-2

14 Title:	Preparation of a terminal phase-out management plan (TPMP) in Myanmar		
	Myanmar Refrigerant Management Plan was submitted to the 45 th meeting of the Executive Committee in April 2005. Three of the nine components of the RMP were approved as follows:		
	1. Preparation of Ozone Regulations for Control of Ozone Depleting Substances (MYA/REF/45/TAS/05) US\$ 13,000		
	2. Monitoring Implementation of the RMP (MYA/REF/45/TAS/06) US\$22,000		
Background:	3. Establishing conversion practice of domestic refrigerators (MYA/REF/45/TAS/07) US\$80,000		
	The remaining components were deferred as the Executive Committee would like Myanmar to set-up a legislative and enforcement system prior to the implementation of RMP to ensure sustainability. Myanmar has recently signed the MOU to start the process of establishing the licensing system within 2008 (prior target before Cyclone Nargis hit Myanmar).		
Objectives:	To develop a terminal phase-out management plan for Myanmar		
Activities:	The activities would include the following: Establishment of SSA/ MOU Mission(s) Drafting proposals Monitoring Submission of TPMPs		
Time Frame:	Activities to be completed – July 2008 – December 2008		
Cost:	No additional funding will be requested from the Multilateral Fund. Left over funds from the project preparation funds for RMP would be used here.		

15 Title:	Development of HCFC Phase-out Management Plans for 52 countries**
Background:	These proposed HCFC Phase-out Management Plans development follow the recent decision (XIX/6) taken at the 19 th Meeting of the Parties to the Montreal Protocol in September 2007 on the accelerated phase-out of HCFCs, and the decisions taken by the Multilateral Fund's Executive Committee at its 53 rd and 54 th meetings.
	The development of these plans are to assist 52 Article 5 Parties in preparing their phase-out management plans for an accelerated HCFC phase-out, including the priority of conducting surveys to improve reliability in establishing their baseline data on HCFCs.
	In 27 LVC countries UNEP will be only Implementing Agency, while in other 25 cases, UNEP will be collaborating with either UNIDO or UNDP as the lead or cooperating agency.
	These projects have been included in UNEP's and in the respective cooperating agencies'

2008-2010 Business Plans. UNEP continues to believe that at HPMP preparation level the categories of LVCs and non LVCs is the most appropriate for calculating the costs. However, after consultation with other Implementing Agencies, we have applied the categories used by TEAP in their report. Though we have applied the same cost for every countries with less than 6 tonnes consumption. We have applied the following funding levels: Countries with up to 6 t. consumption (UNEP only): US\$ 200,000 Countries with up to 6 t. consumption (UNEP as lead agency): US\$ 120,000 Countries with up to 6 t. consumption (UNEP as cooperating agency): US\$ 80,000 Countries with 6 to 100 t. consumption (UNEP lead agency) US\$ 180,000 Countries with 6 to 100 t. consumption (UNEP as cooperating agency): US\$90,000 India (UNEP as cooperating agency): US\$ 200,000 China (UNEP as cooperating agency) US\$700,000 For the coutries in the West Asia region individual cost distribution have been agreed upon with the second Agency. For China and India similarly specific cost distribution has been agreed with the other Agencies. This funding would cover activities described in the corresponding section here below. Objectives: The management plans will: Provide practical guidance to countries Maximize local ownership of the process and outcome Reflect inputs of the NOUs and other national HCFC stakeholders Reflect prior experience with CFC methodology Identify HCFC consumption in the different sectors to prepare for the technical and financial assistance required Provide technical and economic information to facilitate environmentally sound and cost effective HCFC phase out to ensure that the best available and environmentallysafe substitutes and related technologies are adopted The following activities will be considered within the development of HCFC Management Activities: Plans: Kick-off stakeholder workshop Venue Travel and DSA Policy/legislative/regulatory and institutional framework ➤ National legal adviser Public awareness > Design and follow up activities Data collection and surveys (consumption sector) National expert Local travel and DSA > International expert Mission Strategy and plan for the implementation of HPMPs > International expert Mission Economic simulation > International expert Project coordination and management > Analysis of information and establishing database

	 National team leader Local travel and DSA Communication, printing, translation, etc HPMP finalization workshop Venue Travel and DSA The difference of costs between lead and cooperating IA is justified by the specific activities as follows: Draw up the modality, organizational structure and time schedule of the preparation of
	 HPMP. Assist the Country in developing a consistent long-term strategy that provides an overall direction and includes a list of critical actions and performance indicators to achieve the HCFC phase-out targets. Provide assistance in formulation of policy, capacity building and management issues. Support and advise the country in collection, compilation and analysis of data related to
	 national level HCFC consumption; Assist in the selection of alternative substances, technologies and modalities of technology transfer as required. Coordinate and facilitate the enterprise and sectoral level data collection, Assist the country in designing a comprehensive monitoring system controlling the functioning of the licensing system.
	 Organize stakeholder consultation meetings and ensure the participation of all stakeholders Carry out required supervision missions Based on the inputs from the cooperating agencies and the national stakeholders prepare and discuss and agree upon with the stakeholders on the draft and the final versions of
	 the HPMP to be submitted to the Executive Committee Submit the HPMP to the ExCom, lead the discussions with the Secretariat and ExCom, provide clarification, undertake modifications etc.
Time Frame:	12 months
Cost:	Total requested amount: (Excluding project support costs) US\$ 9,318,500

^{*}The requested amounts have been coordinated with other Implementing Agencies and represent only UNEP's share in the HPMP development costs.

^{**} All corresponding request letters have been transmitted to the Fund Secretariat.

Summary sheet for Pakistan CFC MDI phaseout – non-investment component

Title:	Request for funding for preparation of non-investment component of CFC MDI transition strategy for Pakistan		
	In the 54 th Meeting of the Executive Committee, funding was approved for UNDP for preparation of CFC MDI phaseout project for Pakistan.		
Background:	For this, UNDP and UNEP had submitted data required as per decision 51/34 (c) for countries manufacturing CFC MDIs. Justification of the need for CFC MDI phaseout project have been provided during the consultations held prior to and during the 54 th Executive Committee Meeting.		
	✓ Develop non-investment component project activities for implementing CFC MDI phaseout. This would include awareness activities and regulations implementation for CFC MDI phaseout.		
Objectives:	✓ Hold stakeholder consultations in Pakistan for discussing the proposed activities for CFC MDI phaseout and updating the transition strategy for CFC MDI phaseout based on inputs received during consultation.		
	✓ Finalise and submit the non-investment component of transition strategy together with the investment component for the consideration of the Executive Committee meeting.		
Expected outputs	CFC MDI phaseout – non-investment component activities are identified and submitted for the consideration of the 56 th Executive Committee along with the investment component submitted by UNDP.		
	The activities that would be undertaken for this would include the following:		
Planned activities	1. Define information needs in close consultation with NOU, Pakistan and UNDP on awareness/capacity building and regulations components for non-investment activities for CFC MDI phaseout in Pakistan. Significant portion of this has been developed by UNEP based on our experiences with other countries in the region (e.g., Bangladesh, Iran, and India) and inputs from consultations during the thematic meetings on CFC MDI phaseout. This would be augmented at this stage.		
	2. Undertake a limited field survey with key target audience on collection of information identified above. This would include (but not limited to) contacting limited number of health centres dealing with asthma and COPD, CFC MDI manufacturing industry and medical practitioners. Inputs from UNDP and industry manufacturing & selling MDIs would also be taken during this survey.		

3. Identify possible national institutions which could work in cooperation with the Government of Pakistan on implementation of CFC MDI phaseout project – non-investment components. They would work in close consultation with the project management set-up of UNDP implementing CFC MDI phaseout investment project. 4. Develop a national action plan with projects relating to non-investment component for CFC MDI phaseout. This would be developed in consultation with UNDP and NOU to ensure effective integration with the overall national CFC MDI transition strategy. 5. Incorporate this component into the overall CFC MDI transition plan for Pakistan for which the investment component is under preparation by UNDP. Through consultations at various stages as explained in points 1 to 4, the non-investment project activities will be effectively integrated with the investment activities for CFC MDI phaseout. 6. Hold national stakeholders' consultation for discussing the CFC MDI phaseout plan (both investment and non-investment) and obtaining inputs on the components of projects proposed in the plan. While investment component related inputs would be addressed by UNDP, non-investment component related inputs would be addressed by UNEP. 7. Finalise and submit the document after due consultation with NOU for consideration of the Executive Committee. Awareness and capacity building activities relating to CFC MDI (a) phaseout Awareness workshops at sub-regional level with medical practitioners, nurses and other key stake holders on CFC MDI phaseout and adoption of alternatives. This would be undertaken in cooperation with pharma industry. Elements of Awareness materials development and distribution including phamplets, education videos on use of CFC free alternatives, transition posters that can be used in point of sales etc. The focus would be strategy on availability of CFC free technologies and safe use of these alternative technologies. Education programs and materials that could be integrated into the regular training curriculum for medical practitioners and nurses for use of CFC free alternatives to CFC MDIs. Periodic information sharing during the next 16-18 months on CFC

MDI phaseout with assistance from industry manufacturing CFC MDIs. Implementation of regulations for phasingout CFC based MDIs and adoption of CFC free alternatives. Production and imports of CFC MDIs Regulatory controls on CFCs imported, stored and used for CFC **MDIs** ➤ Regulations on cessation of manufacturing CFC based MDIs Regulations relating to ban on imports of CFC based MDIs Registration of MDIs ➤ Deregistration of CFC based MDIs by formulation > Registration (fast-track) of CFC free alternatives to CFC based MDIs by formulation Sales of MDIs ➤ Ban on storage and sale of CFC based MDIs – Public Health, Pharmacies etc. Fiscal incentives, wherever feasible, on adoption of CFC free alternatives. These regulations need to be developed in close consultations with health regulatory authorities, pharma industry and other institutions associated with asthma and COPD. Periodic updates on status of implementation of CFC MDI phaseout project activities should be provided to the health regulatory authorities and Other nonimplementation partner for awareness activities by the National Ozone Unit so that necessary actions can be taken by them for ensuring smooth investment transition. Coordination between NOU, health / drug regulatory authorities elements and awareness implementation agencies is key to achieve smooth transition to CFC MDI phaseout in Pakistan.

Budget break-down

Activities	Costs in USD
National consultant for non-investment component preparation and	13,000
submission	
Travel and organisation support	2,000
National consultation workshop	5,000
Total	20,000

Justification note – need for CFC MDI phaseout non-investment activities

- 1. Pakistan is one of the five countries with CFC MDI manufacturing industries in South Asia region. Their CFC consumption in MDI manufacturing is about 85 tons. In Pakistan, there are two manufacturing enterprises producing CFC MDIs namely Glaxo Smithkline and Mector. Besides domestic production, CFC MDIs are also imported into Pakistan from China and other countries.
- 2. Funding for project preparation for phasingout manufacturing CFC MDIs in Pakistan was approved in the 54th Excom with UNDP as the implementing agency. The Executive Committee decided that UNEP should maitain the activities relating to MDIs in light of decision 54/5(d).
- 3. Survey reports indicate that about 6.5% (aboug 10 million people) of the population is affected by asthma in Pakistan. The country is also experiencing significant increase in consumption of MDIs. The primary reason for this is high incidence of respiratory diseases and greater effectiveness of MDIs in providing relief to patients. With the need for fast-track adoption of this technology change to CFC free alternatives, there is a need for the Government to prepare a plan for regulations related and awareness related interventions to facilitate CFC MDI phaseout and adoption of CFC free alternatives.
- 4. Regulations need to be designed to control and phaseout CFC MDI use and adopt CFC free alternatives in a fast track manner. As Pakistan is a producer of CFC MDIs, regulations should also cover procurement, storage and disposal (if required) of CFCs for MDI manufacturing also. During consultations held with Drug Controller office in Pakistan, this point was emphasised. These regulations need to be finalised in consultation with stakeholders and timed so that the phaseout of domestic industry is implemented in a cost effective manner and the industry is compliant with the relevant regulatory aspects prescribed for CFC MDI phaseout.
- 5. Awareness activities are essential for ensuring smooth transition to CFC free alternatives from CFC MDIs (which are in very high use in the country) and ensuring that CFC free alternatives are used in an effective manner. Government participation is imperative to ensure that the credibility of messages sent to the general public and target respondents (e.g., medical practitioners, respiratory disease treatment centres etc.) on phaseout is high. This will also enable better outreach of the message from the Government to different parts of the geographically distributed country. This was also highlighted during our consultations held during the thematic meeting on CFC MDI phaseout, in Langkawi, Malaysia in May 2008, with the Pakistan delegation. Preparation of awareness activities related plan would need field consultations with key stakeholders and data collection on prevalent situation in Pakistan both from primary and secondary research. Some of the actions to be implemented include sub-regional/zonal level awareness activities¹, education

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¹ There are six provinces / territories in Pakistan. Programs need to be designed for outreach to all these locations.

- programs targeted at doctors (who prescribed medicines), nurses in hospitals etc., and electronic media based awareness tools on effective use of non-CFC based alternatives.²
- 6. These two elements have to be strongly linked with the investment project activities so that the timing and activities are supportive in nature with CFC MDI manufacturing phaseout. Design of this non-investment activities will also identify industry role in the non-investment activities and facilitate their participation in the awareness and regulations implementation related activities.
- 7. Currently, the national phaseout activities and the funds approved in the 54th Excom for CFC MDI phaseout project implementation are not adequately addressing these non-investment components highlighted above. The latter focuses on project preparation for CFC MDI manufacturing industries and related project management issues. Therefore, assistance is necessary for Government of Pakistan to prepare non-investment strategy for CFC MDI phaseout. Similar assistance provided for Government of Bangladesh (funds were approved in the 50th Excom) helped in preparation of non-investment activities strongly linked CFC MDI phaseout investment activities.

² Similar activities have been designed and are being implemented in Bangladesh and Iran.

ANNEX ... MDI TRANSITION STRATEGY SRI LANKA PROJECT COVER SHEET

COUNTRY: SRI LANKA IMPLEMENTING AGENCY: UNEP

PROJECT NAME MDI Transition Strategy

PROJECT IN CURRENT BUSINESS PLAN YES – IMPLEMENTATION ACTIVITIES

SECTOR COVERED MDI

PROJECT IMPACT

PROJECT DURATION

16 months

TOTAL PROJECT COST

LOCAL OWNERSHIP

EXPORT COMPONENT

0.0 ODP tons

16 months

US\$ 30,000

N/A

REQUESTED GRANT US\$ 30,000

COST-EFFECTIVENESS Not Applicable – TAS

AGENCY SUPPORT COSTS 3,900 STATUS OF COUNTERPART FUNDING N/A

NAT. COORDINATING AGENCY National Ozone Unit, Sri Lanka

PROJECT MONITORING MILESTONES Included in Document

INCLUDED

BENEFICIARY ENTERPRISE Not Applicable

PROJECT SUMMARY

Through this Technical Assistance approved by the Multilateral Fund for the Implementation of the Montreal Protocol, UNEP aims to assist the Government of Sri Lanka to implement this project in MDI sector in order to develop a sound MDI transition strategy.

Submission background

Sri Lanka has been implementing ODS phaseout activities under Montreal Protocol for the last 15 years. To achieve complete CFC consumption phaseout, a National Compliance Action Plan (NCAP) of Sri Lanka was approved in the 42nd Meeting of the Executive Committee. NCAP does not cover CFC MDI phaseout as there is no CFC consumption in Sri Lanka for MDI manufacturing.

Government of Sri Lanka has identified provision of cost-effective health services to its citizens as one of its national priorities. Availability of affordable MDIs, thus, forms one of the key aspects that need to be addressed by the Government for providing cost-effective health services.

The MDI transition strategy for Sri Lanka is also prepared taking into account the MTOC Assessment Report 2006 (published in March 2007) which emphasizes the following:

"There is an urgent need for all Article 5(1) countries that have not already done so to develop effective national transition strategies in accordance with Decision XII/2. MTOC strongly recommends that these activities be made a priority to ensure a smooth transition to CFC-free alternatives by about 2010. Countries will need to set an end-date for transition that accounts for the Montreal Protocol phase-out schedule."

The following are the main reasons to have the MDI transition strategy for Sri Lanka:

- Ensure systematic transition to CFC free alternatives from CFC MDIs keeping in mind affordability and availability of such products. Sustainable availability and use of these alternatives to CFC MDIs is critical for undisturbed treatment for respiratory disease patients in the country.
- Facilitate the transition to new products by providing adequate support for awareness and capacity building of local stakeholders (e.g., medical practitioners, nurses etc.). This would ensure acceptance of the alternative products (in some cases they will be HFA MDI and in others DPI) by the patients and by the doctors.
- Strengthen regulations in Sri Lanka for achieving CFC MDI phaseout and adoption of CFC free alternatives.

Part I. Situation analysis

1. Asthma statistics and economic situation

In general, the trends of both CFC MDIs and CFC free alternatives to CFC MDIs are increasing over time. Currently available data indicates that the consumption of these products has increased from about 1 million units in 2005 to about 1.5 million units in 2007.

Respiratory health care in Sri Lanka is addressed by both Government and private sector hospitals which have separate units to cater to patients suffering from respiratory diseases. According to research studies on health sector conducted in Sri Lanka and Asthma Council of Sri Lanka:

- ✓ 5-6% of the total population of Sri Lanka is affected by Asthma and Respiratory diseases. This translates to about 1.2 million patients.
- ✓ 60% of the patients who visit clinics are suffering from asthma. In addition to these clinics, chest physicians visit rural hospitals regularly to treat asthma patients. The patients are issued drugs prescribed by physicians from the hospital itself.

Conclusions:

- Number of asthma and other respiratory disease cases is steadily growing.
- Geographic distribution of asthma and COPD needs to be ascertained along with the distribution of treatment support available.

2. National legislation

Sri Lanka does not produce ODS and ODS-containing products in MDI sector. All these products are imported.

Imports of all pharmaceutical products to the country are controlled by the Act passed in parliament and the relevant regulations were gazetted in 1986. Cosmetic Devices and Drug Authority (CDDA) has been established to implement those regulations and they control registration and importation of pharmaceutical products. Under these regulations it is essential the importer to register with CDDA and obtain import license for importation.

The CDDA has taken a decision as a principle to prohibit new registration of CFC based MDIs but so far no such a regulation put in place on this matter.

These regulations do not have provisions to remove CFC MDI supply and use in the market. Further, incentives for adopting CFC free alternatives to CFC MDIs are also not available in the country.

Conclusions:

- Specific regulations which would control the use of CFC MDI coupled with incentives for adopting CFC free alternatives to CFC MDIs need to be incorporated in the regulations.

3. Supply of anti-asthma/COPD inhalers and other medical products

CFC based MDIs as well as CFC free alternatives are being imported into Sri Lanka. They are being imported from countries like India, China, Bangladesh, UK, France and Australia. The importers work through local agents for distribution of their products.

The situation on the supply of MDIs and their CFC free equivalents are given below:

- CFC MDIs, HFA MDIs and DPIs are present on the market;
- Market share for CFC free alternatives to CFC MDIs and DPIs is about 17% and 58%, respectively.
- CFC MDIs are still seeing high growth of more than 20% per annum and hence, their relative market share is increasing;
- CFC free MDIs and DPIs are also sold in the market and are experiencing high growth (more than 20%).

Imports from India constitute more than 80% of the total CFC MDI imports. Imports of alternatives are mainly from Europe – mainly France and Netherlands.

Conclusions:

- Imports of CFC MDIs are still high in the market. No import controls exist for CFC MDIs.
- Significant quantities of CFC free alternatives are imported from European market. High prices of these MDIs
- No steps have been taken for reducing supply and use of CFC MDIs.

3. Price dynamics for anti-asthma medical products

Price of CFC free MDIs is about 33% higher than CFC MDIs. In general the prices of the CFC free alternatives are relatively high compared to CFC based products. For instance, salbutamol (CFC based) price is about 1.5 times the price of non-CFC based formulation. The average price of non-CFC based MDIs and DPIs is also higher than their respective CFC based formulations.

Further, in Sri Lanka, the consumers look for low price products most of the time, except when doctors prescribe and instruct to take a particular medicine. Patients also use to take drugs where they familiar and reluctant to buy new products.

Conclusions:

- Prescriptive practices would be a key driver to encourage customers in adopting CFC free alternatives and improving their confidence in effectiveness of usage of CFC free alternatives.
- If possible, opportunities of favorable price structure for CFC free alternatives will be examined.

4. Institutional capacity to control the transition

National Ozone Unit of Sri Lanka is responsible for implementing Montreal Protocol activities in the country. They play a facilitative role in project implementation including CFC MDI phaseout.

Drug regulatory authorities control registration and use of drugs including MDIs. They are the nodal agency for approving drugs that are used for treating various diseases in the country. Deregistration of CFC MDIs and registration of CFC free alternatives to CFC MDIs are undertaken and monitored by these authorities.

Local medical centres and community hospitals provide treatment to patients. They need to be aware of the technology transition from CFC MDIs and effective use of CFC free alternatives to CFC MDIs.

Conclusions:

- Health authorities and National Ozone Unit need to work together to ensure timely implementation of regulations banning use of CFC MDIs (through deregistration of CFC MDIs etc.) and promoting CFC free alternatives.
- Outreach and capacity building programs to local medical centres and community hospitals are necessary to promote and expeditiously adopt CFC free alternatives.

Part II. MDI transition strategy

The national strategy on replacement of CFC-based MDI with alternatives should include the following:

- Analysis of current MDI market consumption, supply sources and future trends including geographic distribution;
- Consultations with the importers, medical practitioners and other stakeholders on key issues to be addressed for CFC MDI phaseout and fast track adoption of alternatives;
- Development of awareness and education program for fast track adoption of alternatives to CFC MDIs;
- Development and implementation of regulatory interventions for ban on imports and sale of CFC MDIs and fast track adoption of CFC free alternatives;
- Development of an implementation plan for smooth shift towards alternatives to CFC MDIs;

These actions would be firmed up through a national consultation process and would be implemented in close coordination with pharma industry involved in MDI sales.

Budget for actions

Table: Planned expenditures

Description	US\$
National Consultant in MDIs (regulations development and project implementation support)	5,000
Awareness and capacity building activities including printing, distribution etc.	15,000
Workshop and consultations with importers of MDIs / alternatives	10,000
Total	30,000

Monitoring Milestones

TASK	MONTH
(a) Project agreements signed	1
(b) Strategy implementation consultations	2
(c) Consultant contracts and national implementation partner contracts awarded	4
(d) Awareness and capacity building activities implemented	10
(e) Regulatory interventions implemented	14
(f) Project implementation report completed	16