



PROJECT IDENTIFICATION FORM (PIF) ¹
PROJECT TYPE: MEDIUM-SIZED PROJECT
TYPE OF TRUST FUND: GEF Trust Fund

PART I: PROJECT IDENTIFICATION

Project Title:	Environmental Sound Life-Cycle Management of Mercury Containing Products and their Wastes		
Country(ies):	Uruguay	GEF Project ID: ²	4998
GEF Agency(ies):	UNDP (select) (select)	GEF Agency Project ID:	5084
Other Executing Partner(s):	National Environment Directorate (DINAMA)	Submission Date:	15 May 2012
		Re-submission date:	12 June 2012
GEF Focal Area (s):	Persistent Organic Pollutants	Project Duration(Months)	36
Name of parent program (if applicable): ➤ For SFM/REDD+ <input type="checkbox"/>		Agency Fee:	70,000

A. FOCAL AREA STRATEGY FRAMEWORK³:

Focal Area Objectives	Expected FA Outcomes	Expected FA Outputs	Indicative Financing from relevant TF (GEF/LDCF/SCCF) (\$)	Indicative Cofinancing (\$)
(select) CHEM-3	Outcome 3.1: Country capacity built to effectively manage mercury in priority sectors	Indicator 3.1.1: Countries implement pilot mercury management and reduction activities	635,000	2,399,000
(select) (select)				
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(select) (select)				
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(select) (select)				
(select) (select)				
(select) (select)				
(select) (select)				
(select) (select)	Others			
Project management cost ⁴			65,000	196,700
Total project costs			700,000	2,595,700

¹ It is very important to consult the PIF preparation guidelines when completing this template.

² Project ID number will be assigned by GEFSEC.

³ Refer to the reference attached on the Focal Area Results Framework when filling up the table in item A.

⁴ GEF will finance management cost that is solely linked to GEF financing of the project.

B. PROJECT FRAMEWORK

<p>Project Objective: Protect human health and the environment from Mercury releases originating from the intentional use of mercury in products and the unsound management and disposal of such products, by i) Strengthening the regulatory and policy framework for the sound LCM of mercury containing products and their wastes; ii) Phasing-out and phasing-down mercury containing devices and products by introducing mercury-free alternatives or products with a lower Mercury content, iii) Improving national capacity (technical, financial, private sector) to make LCM of Mercury containing products technically and economically feasible.</p>					
Project Component	Grant Type (TA/IN V)	Expected Outcomes	Expected Outputs	Indicative Financing from relevant TF (GEF/LDCF/SCCF) (\$)	Indicative Co-financing (\$)
1. Strengthen the regulatory and policy framework to allow for life-cycle management of mercury containing products and their wastes.	TA	<p>1.1 National Extended Producer Responsibility (EPR) policy and regulations for mercury containing products adopted and introduced.</p> <p>1.2 Strengthened policy and regulatory framework to enable the phase-out/down of mercury containing products and encourage Hg-free or lower level Hg products.</p> <p>1.3 Improved enforcement of and adherence to the sound collection, (temp.) storage, pre-treatment, decontamination and disposal of</p>	<p>1.1.1 National EPR policy and regulations for Hg-containing consumer products developed.</p> <p>1.2.1 National plans/strategies for LCM of Hg containing products and their wastes (for priority sectors) developed.</p> <p>1.2.2 National phase-out plans/strategies for priority Hg containing products developed.</p> <p>1.2.3 National (import) standards on max. Hg content in products and wastes (BC) developed.</p> <p>1.3.1. Development and implementation of guidelines and legal provisions with respect to the sound collection, (temp.) storage, decontamination and disposal of</p>	30,000	114,000

		products containing mercury.	products containing mercury.		
2. Development of environmentally sound schemes and business models for the collection, treatment and disposal of mercury wastes.	TA	<p>2.1 Mercury releases from priority sectors reduced and segregated Hg containing waste streams augmented.</p> <p>2.2 Business models and cost recovery arrangements (CRA) for the collection, transport, temporary storage and treatment of different types of Hg wastes operational and financially sustainable.</p>	<p>2.1.1 Capacity of 20model entities and the general public built on the LCM of Hg containing products and their wastes.</p> <p>2.1.2 Phase-out and phase-down of mercury containing products through introduction of best practices and Hg-free/low Hg alternatives.</p> <p>2.1.3 Provide training on the use of Mercury-free medical devices.</p> <p>2.2.1 CRAs for the collection, transport, temporary storage and treatment of different types of Hg wastes assessed and put in place.</p> <p>2.2.2 Private Sector capacity built for different Hg LCM stages.</p> <p>2.2.3 Business operations for LCM of Hg containing products launched.</p>	115,000	598,000
3. Strengthening technical capacity and infrastructure for the pre-treatment, decontamination and storage (medium – and long- term) of Mercury containing wastes.	TA	3.1 Pre-treatment and decontamination technology to treat collected Hg containing product waste established.	<p>3.1.1 Assessment of technology needs conform to national needs and Basel guidelines completed.</p> <p>3.1.2 Technology and site specifications determined.</p> <p>3.1.3 Technologies procured and made operational.</p> <p>3.1.4 Testing and</p>	350,000	1,362,000

		3.2 Intermediate Hg storage options established and long-term storage options identified.	<p>trials completed.</p> <p>3.1.5 Facility workers and operators trained.</p> <p>3.1.6 Scenarios for technology transfer analyzed and optimum scenario implemented.</p> <p>3.2.1 Intermediate and long-term storage and disposal options assessed.</p> <p>3.2.2. One medium term Hg storage facility to service the decontamination facility established/upgraded.</p> <p>3.2.3 Long-term storage options assessed.</p> <p>3.2.4 Environment monitoring (Hg analysis in lixiviate)</p>		
4. Strengthening national and regional awareness on the Sound Life-Cycle Management of Mercury containing products as well as associated health hazards resulting from mismanagement.	TA	<p>4.1. National capacity to monitor Mercury levels in populations strengthened.</p> <p>4.2 Awareness on LCM of Mercury containing products increased among project stakeholders, the general public and countries at regional and global level.</p>	<p>4.1.1 Capacity of health institutions, Hg treatment and storage facilities built to monitor Mercury levels in workers and population groups at risk.</p> <p>4.2.1 Lessons-learned (LL) and best practices disseminated at national, regional and global level in partnership with BCCC LAC.</p>	100,000	95,000
5. Monitoring, learning, adaptive feedback, and evaluation.	TA	5.1 Project results sustained and replicated.	5.1.1 M&E and adaptive management applied in response to needs,	40,000	230,000

		MTE findings and LL extracted.		
Project management Cost ⁵			65,000	196,700
Total project costs			700,000	2,595,700

C. INDICATIVE CO-FINANCING FOR THE PROJECT BY SOURCE AND BY NAME IF AVAILABLE, (\$)

Sources of Cofinancing for baseline project	Name of Cofinancier	Type of Cofinancing	Amount (\$)
National Government	Ministry of Housing, Land Use Planning and Environment (MVOTMA)	In-Kind	357,200
National Government	Ministry of Public Health (MSP)	In-Kind	480,000
GEF Agency	UNDP	In-Kind	175,000
Others	Scientific and Technological Park of Pando (Faculty of Chemistry, State University)	Grant (250,000) In-kind (690,000)	940,000
Others	Basel Convention Coordination Center for LAC (BCCC)	Grant (150,000) In-kind (105,000)	255,000
National Government	Administration of the State Health Services (ASSE)	In-kind	180,000
Medicine Faculty (State University)	University Hospital, Poison Center.	Grant (200,000) In-kind (8,500)	208,500
Total Co-financing			2,595,700

GEF/LDCF/SCCF RESOURCES REQUESTED BY AGENCY, FOCAL AREA AND COUNTRY¹

GEF Agency	Type of Trust Fund	Focal area	Country name/Global	Project amount (a)	Agency Fee (b) ²	Total c=a+b
(select)	(select)	(select)				0
(select)	(select)	(select)				0
(select)	(select)	(select)				0
(select)	(select)	(select)				0
(select)	(select)	(select)				0
(select)	(select)	(select)				0
(select)	(select)	(select)				0
(select)	(select)	(select)				0
(select)	(select)	(select)				0
(select)	(select)	(select)				0
Total Grant Resources				0	0	0

¹ In case of a single focal area, single country, single GEF Agency project, and single trust fund project, no need to provide information for this table

² Please indicate fees related to this project.

⁵ Same as footnote #3.

* Tax levied on consumer products based on the Mercury content in the wastes, indirectly creating a price advantage for low-mercury content products, thus creating a competitive advantage.

PART II: PROJECT JUSTIFICATION

A. DESCRIPTION OF THE CONSISTENCY OF THE PROJECT WITH:

A. 1.1. THE GEF FOCAL AREA STRATEGIES

The project is fully consistent with the GEF-5 Chemicals focal area strategy, Objective 3: *Pilot sound chemicals management and mercury reduction*. The project will contribute to the achievement of GEF's main indicator as follows:

Relevant GEF-5 Strategy Indicator	Project's contribution
Objective 3: Pilot sound chemicals management and mercury reduction	
<i>Outcome 3.1: Country capacity built to effectively manage mercury in priority sectors</i>	
Indicator 3.1 Countries implement pilot mercury management and reduction activities	<p>The objective of the proposed project is to improve the management of wastes containing mercury and reduce the use of mercury in a number of priority sectors. In particular the project will: <i>Strengthen the regulatory and policy framework⁶ to allow for life-cycle management of mercury containing products and their wastes (Component 1), Develop environmentally sound schemes and business models for the collection, treatment and disposal of mercury wastes (Component 2), Strengthen technical capacity and infrastructure for the pre-treatment, decontamination and storage (medium- and long-term) of Mercury containing wastes (Component 3), Strengthen national and regional awareness on the Sound Life-Cycle Management of Mercury containing products as well as associated health hazards resulting from mismanagement (Component 4) and Provide monitoring, learning opportunities, adaptive feedback and evaluation (Component 5).</i> Through implementation of these components, the project expects to reduce mercury releases from products groups targeted with up to 30 %. These releases would otherwise have been added to the "global pool" of mercury, putting environmental and human health at risk everywhere. Importantly, setting-up the sound and sustainable mercury management scheme for targeted product groups will ensure sound and sustainable management and phase-out of mercury.</p> <p>The proposed project is consistent with the GEF-V Strategy for Mercury programming as it will support assessment and pilot activities that will advance the development of the global mercury instrument and Uruguay's abilities to implement its provisions when the instrument enters into force. In particular the project will support activities consistent with the issue areas as included in GEF-V Strategy for Mercury Programming: Reducing Mercury Use in Products; Enhancing Capacity for Mercury Storage; Reducing Atmospheric Emissions of Mercury; Improved Data and Scientific Information at the National Level; and, Enhancing Capacity to Address Waste and Contaminated Sites.</p>

A.1.2. FOR PROJECTS FUNDED FROM LDCF/SCCF: THE LDCF/SCCF ELIGIBILITY CRITERIA AND PRIORITIES: N/A

A.2. NATIONAL STRATEGIES AND PLANS OR REPORTS AND ASSESSMENTS UNDER RELEVANT CONVENTIONS, IF APPLICABLE, I.E. NAPAS, NAPs, NBSAPs, NATIONAL COMMUNICATIONS, TNAS, NIPS, PRSPs, NPFE, ETC.:

Considering the UN Negotiations towards the Minamata Convention on Mercury have not yet reached a conclusion, the national strategies, reports and assessments prepared by Uruguay that have a bearing on the Sound Management of Mercury have been purely undertaken from a national point of interest and were spurred because of pressing national issues in this area.

However, the Government of Uruguay is a strong advocate for a global, legally-binding mercury instrument and is chairing all the International Negotiation Committees for its elaboration. The Government of Uruguay will also be hosting the fourth session of the Intergovernmental Negotiating Committee - INC4 (27 June to 2 July, 2012).

⁶ Ensuring consistency with the General National Waste Law (expected to be approved end of 2012) and the WEEE and Hazardous Waste (HW) legislative framework (under development).

To date, several initiatives and activities with the objective to assess and improve the management of Mercury and Mercury containing wastes have been undertaken, of which the most relevant to the proposed project are the following:

National Inventory on Mercury Releases (October 2011): Based on the methodology as set-out in the UNEP “*Toolkit for Identification and Quantification of Mercury Releases – 2010*”, and building upon sector specific inventories (see below), the inventory indicated that national maximum total Mercury releases were estimated at 3,616 kg Hg/year and minimum total Mercury releases at 2,201 kg Hg/year.

The main categories responsible for these releases are:

1. Products with Intentional Use of Mercury – 36% (max. 1334 kg Hg/yr and min. 254 kg Hg/yr) this category includes thermometers, blood pressure gauges; batteries; light sources; switches, contacts and relays; polyurethanes with Mercury catalyst; pharmaceuticals, see also Table 1).
2. Intentional Use of Mercury in Industrial Processes – 31% (1140 kg Hg/yr (max = min), predominantly the chlor-alkali industry).
3. Other products with intentional use of mercury – 19% (max. 700 kg Hg/yr and min. 686 kg Hg/yr) predominantly dental amalgam, see also Table 1).

Findings from the National Inventory on Mercury Releases (October, 2011) were confirmed and informed by a number of sector specific inventories:

- Inventory of Mercury Waste in the Industrial Sector (June 2011).
- Inventory of Mercury Releases from its Intentional Use in Consumer Products (2011)
- Pilot Inventory of Mercury Waste in the Health Care Sector (September 2011)

The contribution to mercury releases from products containing mercury amounts to 2,033 Hg kg/yr (56%) and can thus be considered significant. A breakdown for these categories has been provided in Table 1.

Table 1: *Mercury emissions resulting from the intentional use of Mercury in products*

Category	Max kg Hg/yr	Min kg Hg/yr
<i>Consumer products – intentional use of Mercury</i>		
Thermometers with Mercury	185	57.5
Switches, contacts and relays with Mercury	836.2	66.9
Light sources with Mercury	59.2	9.80
Batteries with Mercury	70.9	70.9
Polyurethanes with Mercury catalyst	167.2	33.4
Pharmaceuticals (human and animal)	15.1	15.1
SUBTOTAL	1,333.6	253.6
<i>Intentional other uses of Mercury in products or processes</i>		
Dental amalgam	550.0	550.0
Gauges and meters with Mercury	137.8	123.6
Chemicals and laboratory equipment	11.9	11.9
SUBTOTAL	699.7	685.5
TOTAL	2,033.3	939.1

It should be noted that data reliability for the “*switches, contacts and relays*” and “*polyurethane*” categories is low due to uncertainties in qualities imported as well as their specific Mercury content. These categories would require further research to improve the reliability of data.

Mercury releases from categories such as “*dental amalgam*” and “*lighting*” are increasing, as a result of improved healthcare systems and implementation of national programme on energy efficiency

respectively. The “*thermometers*” category is experiencing a downward trend as a result of voluntary pilot initiatives at a few hospitals.

The inventory concludes that one of the main national priorities related to mercury releases is the fact that at national level, the number of suitable controlled final disposal sites for Mercury wastes are too limited and that no treatment for mercury waste exists.

National Policies and Plans related to Mercury (Waste) Management: National strategies and plans related to the sound management of mercury containing wastes fall within the framework of the General Law on Environment Protection (17.283/2000). Currently, the Government of Uruguay is formulating a General National Waste Law which is anticipated to be approved by the end of 2012. The Hazardous waste law in place (law 17.220/1999) has already transposed the Annexes of the Basel Convention and refers in specific to hazardous waste streams including waste containing mercury.

The National Energy Efficiency Programme in Uruguay is promoting the use of energy efficient light sources, which in addition to many environmental advantages is resulting in an increase in the generation of Mercury containing discarded light sources. A technical proposal for a decree that restricts the importation of mercury lamps based on mercury content to encourage low Mercury content light sources, has been presented to DINAMA for review. In addition the Government is also currently formulating policies and regulations with respect to Electronic and Electrical Equipment Waste (EEE). Certain mercury containing products and their wastes (e.g. compact fluorescent lamps) will be considered as EEE waste under this law.

The substitution of Mercury containing medical devices with Mercury-free alternatives in the healthcare sector has been spurred by a pilot initiative in 2006. In 2011, as part of a pilot initiative on the inventory of mercury waste in the health sector, a guideline was developed on the management of mercury waste at hospital level.

As such, the proposed project addresses national priorities related to the management of mercury wastes as identified by several initiatives and assessments/inventories outlined above. The Government of Uruguay anticipates ratifying the Minamata Convention as soon as a global treaty on Mercury is reached and as such activities under the proposed project will support the Government towards meeting its obligations under the anticipated treaty but also provide valuable experiences and lesson learned for the implementation of the Convention, particularly in the region.

B. PROJECT OVERVIEW:

B.1. DESCRIBE THE BASELINE PROJECT AND THE PROBLEM THAT IT SEEKS TO ADDRESS:

When Mercury containing products break or enter the waste stream, so does the Mercury they contain. Without the proper management, storage and disposal practices in place, Mercury is being released to the environment posing serious threats to human health because of its toxicity to the nervous system, and causing serious damage to ecosystems, both at national and global level.

As indicated by the Uruguay National Inventory on Mercury Releases (2011), the main “*categories*” from which mercury releases originate in Uruguay are 1. Products with Intentional Use of Mercury (37%); 2. Intentional Use of Mercury in Industrial Processes (32%, predominantly the chlor-alkali industry); and, 3. Other products with intentional use of mercury (19%, mostly dental amalgam). The contribution to mercury releases from products containing mercury (such as thermostats, thermometers, blood pressure gauges; batteries; switches, relays and other electronic equipment; fluorescent lamps; and dental amalgam) amounts to 2,033 Hg kg/yr (56%) and can thus be considered significant.

Reducing mercury in products has been put forward as the most effective means to decrease atmospheric emissions of mercury from waste streams. For most mercury containing products, cost-effective mercury-free or low content mercury alternatives do exist⁷. Further emission reductions can be achieved with

⁷ Commercially cost-effective alternatives for mercury in batteries and lamps are still needed, while many developing countries state that alternatives to dental amalgam are not yet cost-effective to meet the needs of their expanding healthcare systems.

appropriate waste handling and recycling practices, in order to retain mercury before it is released into the environment. Considering mercury use in products can result in releases to the environment at various stages of the products life cycle, it is important to ensure a life cycle management approach to mercury containing products.

In Uruguay, several challenges at national level prevent a life-cycle management approach to mercury containing products:

- **Limited Availability of low Mercury alternatives:** As Uruguay does not manufacture or produce Mercury containing products, it relies on imports of such products - A proposal for import restrictions for max. Hg content light sources has been tabled, however such import standards would also need to be developed and implemented for other mercury containing products to ensure that products with (a high) Hg content face import restrictions, encouraging manufacturers, distributors and users to make the much needed shift to cost-effective alternatives.
- **Lack of legislation mandating the use of mercury-free or low-content Hg products** – A number of voluntarily initiatives have aimed in the past to substitute mercury products with mercury-free alternatives (e.g. pilot healthcare facilities). However legislation urging the phase-out of mercury containing products or the use of low-level mercury products have not yet been developed or implemented to ensure a holistic and phased reduction at national level.
- **Absence of national plans/strategies on waste management of products containing Mercury** - In 2011 guidelines were developed on the management of mercury waste at hospital level. As part of a different initiative Life-Cycle Assessments were undertaken for CFLs. However, the development and adoption of national plans/strategies on the improved management of certain Mercury containing products and their wastes (medical devices, dental amalgam, batteries, mercury lamps, etc.) is urgently needed to ensure improved waste management of Mercury containing products for priority sectors.
- **Low level of awareness on the Sound Life-Cycle Management of Mercury containing products** as well as associated health hazards resulting from mismanagement among the general population and anyone coming in close contact with Mercury products in their profession – Resulting in a low level of Hg waste segregation and serious health risks being faced by anyone in close contact with mercury containing products and their wastes.
- **Absence of financially sustainable business models** that allow for cost-effective and environmentally sound collection, storage, transportation, treatment and disposal of mercury wastes – Unavailability of financial incentives (based on rebates, extended producer responsibility (EPR), Polluter Pays principles, etc.) result in limited financial resources to cover costs for the sound management, collection and treatment of mercury wastes. In addition, the absence of regulations (and their enforcement) mandating the sound management and disposal of wastes influences the quantities of mercury containing wastes being collected and in turn impacts the scale of activities and thus cost-effectiveness. Finally, the small size of the country limits opportunities for economies of scale raising costs for the handling and treatment of Mercury wastes.
- **Lack of Storage, Pre-treatment and Decontamination of Mercury containing products** - Currently there are no solutions for the temporary-, intermediate- or long- term storage and the pre-treatment and decontamination of Mercury containing wastes⁸. As a direct consequence the majority of mercury containing products is being discarded along with regular municipal waste and ends up in landfills and disposal sites that are not fit to store Mercury wastes, or is discarded through the sewerage system (e.g. dental amalgam) resulting in releases to air, water and soil.

As indicated by the National Inventory on Mercury Releases (2011), the contribution to national mercury releases originating from products containing mercury is significant. As such the project proposes to concentrate its efforts on reducing Mercury releases from categories 1 and 3 (see above). Considering

⁸ Some exceptional cases for temporary storage do exist in the healthcare sector as a result of pilot initiatives while Mercury containing solid waste from the chlor-alkali industry is temporarily stored on its premises.

efforts will focus on the temporary, medium and long-term storage and decontamination options for Mercury wastes the proposed project might be able to contribute lessons-learned from the project to benefit the identification of long term solutions to Mercury waste from the chlor-alkali industry (cat. 2.)

Proposed activities:

- 1. Strengthening the regulatory and policy framework⁹ to allow for life-cycle management of mercury containing products and their wastes** (incl. import, phase-out, collection, temporary storage, decontamination and final disposal of Mercury), including:
 - a. Introduction of Extended Producer Responsibility (EPR) for mercury containing products.
 - b. Development and adoption of national plans/strategies on the improved management of Mercury containing products and their wastes - in specific sectors, such as medical devices, mercury containing lamps, etc¹⁰.
 - c. Development and implementation of national phase-out plans/strategies for certain Hg-containing products (e.g. medical devices).
 - d. Development of import standards on max. Hg content in products (e.g. light sources, batteries, etc.) in combination with the development of more stringent regulatory controls regarding imports of used Mercury containing products and waste (Basel Convention).
 - e. Improving enforcement (incl. development and implementation of guidelines and legal provisions) and adherence to national requirements with respect to the sound collection, (temp.) storage, pre-treatment, decontamination and disposal of products containing mercury.

Project component 1 will build upon the following baseline activities supported by the National Government: Formulation and adoption of a General National Waste Law including provisions on hazardous- and Mercury- containing wastes; Formulation and adoption of policies and regulations with respect to Electronic and Electrical Equipment Waste (EEE) applying to mercury containing products such as CFLs; and, further development of draft import regulations on CFLs (max. Hg content).

- 2. Development of environmentally sound schemes and business models for the collection, treatment and disposal of mercury wastes:**
 - a. Reducing Mercury releases from priority sectors and increasing segregated Hg containing waste streams by i) creating capacity of 2011 model entities and the general public on LCM of Hg containing products and their wastes; ii) phasing-out and phasing-down the use of mercury containing products through introduction of cost-effective best practices and Hg-free/low Hg alternatives; and, providing training on the use of Mercury-free medical devices.
 - b. Implementing financially sustainable business models and cost recovery arrangements (CRA) for the collection, transport, temporary storage and treatment of different types of Hg wastes by i) assessing and implementing optimal CRAs (based on rebate, Polluter Pays and EPR principles) to cover costs related to the collection, transport, temporary storage and treatment of different types of Hg wastes; ii) assisting the Private Sector in soundly managing different stages of Mercury Life-Cycle Management; and, iii) launching business operations for the LCM of Mercury containing products.
- 3. Strengthening technical capacity and infrastructure for the pre-treatment, decontamination and storage (medium- and long- term) of Mercury containing wastes:**

⁹ Ensuring consistency with the General National Waste Law (expected to be approved end of 2012) and the WEEE and Hazardous Waste (HW) legislative framework (under development).

¹⁰ Keeping in mind the small size of Uruguay, the project envisages implementing LCM approaches for all Mercury containing products, rather than exclusively focusing on one or two particular products.

¹¹ The type and number of these model entities will be determined during the PPG phase, but the group of model entities is expected to include: healthcare facilities, dentists, large consumers, laboratories, etc.

- a. Establishing pre-treatment and decontamination technology to treat collected Hg containing consumer waste, including: i) conducting an assessment of technology needs (pre-treatment and decontamination) conform national needs and Basel Convention Guidelines; ii) preparing technology and site specifications; iii) procurement of technologies and making technologies operational (including but not limited to ensuring EIA requirements of the intermediate storage facility's location are met; conducting international bidding processes); iv) undertake technology testing and trials; v) train facility workers and operators; and, vi) analyze scenarios for technology transfer and implement optimum scenario.
- b. Establishing an intermediate storage facility to serve the pre-treatment and decontamination facility as well as identify options for long-term storage, including i) undertaking a needs assessment for intermediate and long-term storage and disposal options; ii) establishing/upgrading one intermediate Hg storage facility following assessment of site(s) suitability for intermediate term storage; and iii) documenting options for long-term storage.

Project component 3 will build upon the following baseline activities supported by the National Government: Technical feasibility study for the management of discarded Mercury containing light sources; Identification of potential temporary and intermediate storage sites; and, an assessment of waste management options and available technologies. In addition, the Faculty of Chemistry (State University) will provide through its Pando Scientific and Technology Park, the space to install, test and adapt the decontamination technology.

4. Strengthening national and regional awareness on the Sound Life-Cycle Management of Mercury containing products as well as associated health hazards resulting from mismanagement:

- a. Strengthening of the national capacity to monitor Mercury levels in populations by building the State University (Toxicology Department of the Faculty of Medicine) in monitoring the Mercury levels of workers involved in management of Hg (storage, health workers, maintenance, equipment, treatment, etc.) and in population groups at risk.
- b. Creating awareness among project stakeholders and the general public on best practices to the life-cycle management of products containing mercury.
- c. Dissemination of key-experiences, lessons-learned and best practices at national, regional and global level (through the development of replication tools to disseminate project results, guidance materials, knowledge products and best practices at national and regional level) in partnership with the Basel Convention Coordination Center for Latin America and the Caribbean (BCCC LAC).

5. Monitoring, learning, adaptive feedback, outreach, and evaluation:

This component is intended to provide necessary means for the monitoring and evaluation of project results in order to inform adaptive management of the programme. It will also enable consolidation of lessons learned throughout the course of project implementation.

The proposed project will go a long way in consolidating earlier efforts undertaken by the Government of Uruguay to significantly advance the sound management of mercury wastes. Concluded Mercury related activities and projects as well as those currently being finalized will provide the baseline upon which the proposed project is founded (for a general overview of these activities, please refer to section A.2 and B.6). As such the proposed project can be regarded as a natural continuation of previous activities and as the "implementation phase" of the recommendations coming out of previous activities.

B. 2. INCREMENTAL ADDITIONAL COST REASONING: DESCRIBE THE INCREMENTAL (GEF TRUST FUND) OR ADDITIONAL (LDCF/SCCF) ACTIVITIES REQUESTED FOR GEF/LDCF/SCCF FINANCING AND THE ASSOCIATED GLOBAL ENVIRONMENTAL BENEFITS (GEF TRUST FUND) OR ASSOCIATED ADAPTATION BENEFITS (LDCF/SCCF) TO BE DELIVERED BY THE PROJECT:

- Why the incremental /additional activities are appropriate/necessary to address the identified causes, issues;

To date, Uruguay has undertaken important efforts to complete Mercury release inventories from main sources (industry, consumer products, healthcare, etc); identified and assessed possible temporary, medium and long-term storage sites as well as treatment options; completed a review of its regulatory framework and developed guidelines for the management of Mercury wastes in certain sectors (healthcare, chlor-alkali industry, etc.). However, because options for the sound management, collection, transport, storage and treatment of mercury wastes at national level are currently lacking, the activities undertaken so far have only resulted in a fraction of the mercury release reductions that could be achieved. It is for this reason that funding from the Global Environment Facility (GEF) is critical in functioning as an “agent of change” to assist Uruguay in achieving a tipping point where the phase-out and sound management of mercury wastes becomes technically and economically feasible. Funding provided by the GEF will enable Uruguay to transition away from current practices and provide tangible experiences and lessons-learned to countries facing similar challenges – especially those in the region, providing positive inputs for the implementation stage of the Minamata Convention. GEF funding will also result in significant Mercury release reductions at national level, releases which otherwise would have been added to the “global pool” of mercury, putting environmental and human health at risk at national and global level.

- Why the activities are complementary (incremental /additional reasoning)

As can be observed from Section B.1 and B.6, Uruguay has undertaken a number of important efforts to map the country’s situation with respect to Mercury releases. It has described the challenges it faces with respect to the management of different types of Mercury wastes and has proposed policy and legislative drafts and national management plans for certain products. These efforts clearly show Uruguay’s continuous commitment to address the challenges it faces with respect to Mercury management. However, the interventions as outlined in section B.1 are necessary to create a tipping point for large scale introduction of Mercury-free alternatives (where feasible) or low Mercury content products and the sound management, transport, storage and decontamination of mercury wastes through the implementation of sustainable business models. The proposed project is regarded as a natural continuation of previous initiatives, and activities proposed as part of this project supported with GEF funding can be considered entirely complementary.

- How the activities of the GEF/LDCF/SCCF projects will be replicated and catalized in the future; how the positive effects of the project will be maximized;

With respect to mercury containing products addressed within the scope of the proposed project, an enabling environment to ensure replication and sustainability of project results will be achieved by developing, adopting and implementing a policy and regulatory framework building upon the Polluter Pays as well as Extended Producer Responsibility principles for such products (*Component 1*). In addition, the creation of financially feasible business models and economic incentives for the collection, temporary storage, transport and treatment/disposal of Mercury containing consumer wastes will ensure that the management of such wastes becomes and remains economically attractive for waste handling entities (*Component 2*). Finally, under *Component 4*, replication tools will be developed to disseminate project results, guidance materials, knowledge products and best practices at national and regional level. This is critical as entities/facilities that are not directly receiving or benefitting from technical assistance provided by the project, will be required in the immediate future to adhere to the new policy and regulatory framework put in place by the proposed project.

- Why the funding level of each activity is considered to be appropriate.

The funding level for the proposed project activities (as taken up in this PIF) with respect to the phase-out of Mercury containing medical devices are comparable and proportional to the funding level of activities undertaken in countries with similar economic circumstances such as mercury phase-out activities undertaken as part of the UNDP/WHO GEF global healthcare waste project. In addition, proposed funding levels for such activities has been verified against the costs incurred during the implementation of the Mercury phase-out pilot project with the University Hospital and the School of Medicine (CIAT). Project components related to the sound management and disposal of light sources (e.g. CFLs) have been costed based on recommendations and conclusions from the UNIDO/BCCC LAC/SAICM project on “*Sound Management for Mercury Products*”. Finally, cost estimates related to the implementation of Best Management Practices for Amalgam preparation and waste handling have been based on research undertaken by countries such as India, Pakistan, Palestine, Thailand and Turkey (among else) as well as WHO and HCWH. The level of funding of each proposed activity is comparative to the above mentioned initiatives and its funding level is proportional to the level of operation considering local conditions.

- Estimation of the global environmental/adaptation benefits of the project, including applied assumptions and methodologies

An accurate baseline will be established during the PPG phase of the proposed project to determine more precisely the Mercury release reductions which the proposed project will be able to achieve directly and indirectly through replication across the country. However, for the purposes of the PIF a rough estimate can be made. It is assumed that reductions in mercury emissions will be accomplished by i) advancing the phase out of *medical thermometers* and *sphygmomanometers* and improving the management of mercury containing wastes in a number of model healthcare facilities (resulting in a ~20%¹² Hg release reduction), ii) reducing mercury releases from dental practices by implementing best management practices (BMP) for amalgam preparation and waste handling (resulting in a ~30%¹³ release reduction), iii) reducing mercury releases from light sources by improving segregation practices supported by the general public and a number of large model consumers in combination with import regulations to push for the purchase of light sources with low Mercury content (resulting in a ~30%¹⁴ release reduction). Based on estimated release reductions and mercury releases as listed in the 2011 National Inventory on Mercury Releases, the project would be able to reduce mercury releases from products with intentional use of Mercury by 10%. It is important to note that the project will also reduce emissions from other mercury containing products, however for other categories than those mentioned above, Mercury content levels vary widely (e.g. for contacts, relays and switches) and for that particular reason it was decided to postpone reduction calculations for these categories until the PPG phase. Therefore shown estimations might be on the low side.

B.3. DESCRIBE THE SOCIOECONOMIC BENEFITS TO BE DELIVERED BY THE PROJECT AT THE NATIONAL AND LOCAL LEVELS, INCLUDING CONSIDERATION OF GENDER DIMENSIONS, AND HOW THESE WILL SUPPORT THE ACHIEVEMENT OF GLOBAL ENVIRONMENT BENEFITS (GEF

¹² These estimates are of the same magnitude (20%) as the Mercury release reductions envisaged under the UNDP/WHO/GEF “Global Medical Waste” Project which supported the phase-out of mercury containing medical devices at model healthcare facilities in Argentina, India, Latvia, Lebanon, Philippines, Senegal and Viet Nam).

¹³ HCWH (2007) <http://isfusa.org/publications/Mercury%20Free%20Health%20Care.pdf> states that a variety of inexpensive pollution prevention opportunities exist, a 10% reduction in mercury releases can be achieved by using prepackaged dental amalgam capsules rather than mixing amalgam by dental staff. Another 60% release reduction could be achieved by applying simple inexpensive “traps” incorporated in dentist chairs. Finally a 30% release reduction can be achieved with an amalgam separation device. Considering that the number of model facilities will be determined during the PPG phase, during which Mercury releases reductions will be calculated in more detail, for the purpose of the PIF it is estimated that the proposed project will be able to reduce Hg releases from dental amalgam by approximately 30%.

¹⁴ The introduction of low level Mercury CFLs (e.g. CFLs with 13-25% less mercury levels than most CFLs have been introduced) in combination with improved collection and decontamination of spent CFLs is expected to result in a 30 percent release reduction – this estimate will be verified and confirmed during the PPG phase.

TRUST FUND) OR ADAPTATION BENEFITS (LDCF/SCCF). AS A BACKGROUND INFORMATION, READ [MAINSTREAMING GENDER AT THE GEF.](#)":

Human and Environmental Health Benefits: The three most common forms of mercury (elemental, inorganic and methyl mercury) are all detrimental to human health because of its toxicity to nervous systems (brain and spinal cord), especially in fetuses and young children. In addition, mercury can also cause serious damage to the ecosystem and biodiversity. Mercury can be remitted into the atmosphere several times after being deposited from the atmosphere and it can also be transported long distances by air and water, thus making it a significant global pollutant.

The proposed project will benefit healthcare and dental workers (such as doctors, dentists, nurses and hospital cleaning staff) as well as their patients (by phasing out mercury containing devices and improving Mercury waste handling practices), protect waste handlers, collectors and recyclers who face hazardous working conditions when in contact with waste containing Mercury. Communities living close to waste disposal sites (municipal waste dumps and landfills) will also benefit as the projects aims to divert Mercury containing wastes from unsanitary landfills and dumpsites to appropriate storage and treatment locations. As Mercury is a global pollutant, human and environmental health will be protected at national as well as global level.

Gender considerations: The PPG phase of the project will assess the gender aspects of Mercury waste management, ensure the participation, representation and buy-in of vulnerable worker and community populations in the project's formulation and mainstream gender into all activities to be undertaken as part of the full-size project as per the "*UNDP Technical Guide on mainstreaming SMC*" and the UNDP guidance note on "*The why and how of mainstreaming gender in chemicals management*".

In this regard, the particular vulnerability of women who are in the childbearing age or pregnant to mercury exposure. Reduction of mercury use in healthcare sector and premises where workers are predominantly women and are frequented by pregnant women are important gender risk reduction considerations.

Economic benefits: A key aspect of the project will be the creation of financially feasible business models and economic incentives (building upon the Polluter Pays as well as EPR principles) for the collection, intermediate storage, transport and treatment of Mercury containing consumer products and their wastes. The creation of such business models will ensure that the sound disposal of mercury containing products and their wastes will remain economically feasible and attractive even after the project has come to an end. It will encourage private sector waste collection, storage and treatment entities to continue operating in the field of Hg waste management, while at the same time incentives will encourage producers and distributors to supply consumer products with lower Mercury contents or preferably Mercury free products. For waste collection, storage and treatment originated by different sectors (health-care, households, commerce, industry) the project will review options for revenue generation such as a fixed fee or a fee based on Mercury waste generation; subsidies through an annual government budget allocation; partial coverage of expenses through a portion of the health insurance fund, etc.

It is also important to note that proposed activities will reduce mercury releases and thus exposure of humans, resulting in reduced costs associated with the treatment of pathologies, physical- and psychological- disabilities resulting from mercury exposure.

B.4 INDICATE RISKS, INCLUDING CLIMATE CHANGE RISKS THAT MIGHT PREVENT THE PROJECT OBJECTIVES FROM BEING ACHIEVED, AND IF POSSIBLE, PROPOSE MEASURES THAT ADDRESS THESE RISKS TO BE FURTHER DEVELOPED DURING THE PROJECT DESIGN:

Risk		Risk Mitigation Measure
The roles and responsibilities of the two key ministries (Ministry of Housing, Land and Environment – MVOTMA and the Ministry of Public Health - MSP), with respect to Hg waste management - in particular the management of Mercury containing Healthcare Waste - might prove to require further clarification. Possibly resulting in limited guidance, conflicting decisions, duplication, or slower than expected implementation of certain project components.	L	All project stakeholders will be involved in the project’s proposal planning phase during which their roles and responsibilities will be clarified and agreed upon.
Slower than expected enhancement, adoption and implementation of national policies, plans and strategies as well as the enforcement of regulations, that either have an impact on activities implemented under the project and/or are being developed/drafted as part of the project and are key in creating an enabling environment for replication across the country.	L	The project will support project stakeholders in further strengthening the national policy and regulatory framework with respect to the management of mercury in consumer products and healthcare by building upon efforts undertaken to date while actively promoting their adoption and implementation to create the necessary enabling environment. Technical support and capacity building will be provided to environment and health authorities to improve enforcement, awareness will be created among target sectors to ensure stakeholder buy-in.
Slower than expected implementation of best practices at project model facilities, collection points for Mercury containing consumer products, temporary storage and treatment sites, and other related infrastructures/sites.	L	As per one of the best practices under the UNDP/WHO/GEF GMW project, MoUs with model facilities, as well PPP agreements with private sector partners for the collection, storage and treatment of Mercury containing wastes will be developed and signed. Such agreements will outline responsibilities, timelines as well as rights and commitments. The <i>Component 5</i> evaluation will identify problems and recommend improvements half way through the project, while continuous monitoring of project activities will aim to address any delays in implementation based on needs as they arise.
Little confidence of healthcare facilities in mercury-free devices, resulting in continued use of mercury containing devices.	L	The project will share technical specifications, standards, test results, and experiences from the current UNDP/WHO/GEF global HCWM project. In addition, it will undertake a comparative analysis of mercury-free equipment available at national level to select mercury free alternatives based on staff preferences, accuracy and cost. “Model facilities” will provide decision-makers at HCFs, national and regional level with information on mercury-free technologies. Training on the use of mercury-free products supplied by the project will be provided. Finally, the MSP is already a strong advocate for Mercury-free devices.
No interest from the private sector to participate in collection, storage and/or treatment schemes due to uneconomic conditions (low volume of wastes)	L	Environmentally sound schemes, financially feasible business models and economic incentives (building upon the Polluter Pays as well as Extended Producer Responsibility principles) for the collection, temporary storage, transport and ultimate treatment/disposal will be fully explored and put in place to ensure that the sound disposal of mercury containing consumer products remains economically feasible and attractive even after the project has come to an end. Based on previous assessments it has been proposed to locate the decontamination facility at PCTP which already has all technical, legal and administrative warranties for a controlled and environmental sound operation in place. In addition, regulatory instruments developed under the project will also help towards creating sustainable collection, storage and treatment systems.
Overall Risk Rating	L	

B.5. IDENTIFY KEY STAKEHOLDERS INVOLVED IN THE PROJECT INCLUDING THE PRIVATE SECTOR, CIVIL SOCIETY ORGANIZATIONS, LOCAL AND INDIGENOUS COMMUNITIES, AND THEIR RESPECTIVE ROLES, AS APPLICABLE:

A full assessment of all relevant stakeholders will be undertaken during the PPG phase. However at this preliminary stage the key stakeholders are assumed to be:

Key Stakeholders	Role in the proposed project
DINAMA (Ministry of Housing, Land Use Planning and Environment - MVOTMA)	Project executing agency. National environmental authority with competence in waste management.
Ministry of Public Health (MSP)	Responsible for regulations and governance related to public health.
Administration of the State Health Services (ASSE)	In charge of public health centers. Responsible authority for mercury waste management in health centers.
PCTP (Scientific and Technological Park of Pando), Faculty of Chemistry (National University), MIEM (Ministry of Industry, Energy and Mining), Canelones Municipality, CIU (Uruguayan Industry Chamber)	Decontamination treatment technology host. The PCTP business incubator will provide technical advice to help analyze several scenarios for technology transfer and implement the most optimum scenario.
Basel Convention Coordination Center (BCCC) for Latin America and the Caribbean (LAC)	Dissemination of project information and results at national, regional and international level. Extensively involved in awareness raising on risks related to mercury exposure and mercury waste segregation and storage campaigns.
Center of Advising and Information on Toxicology (CIAT)	The National Poisson Centre (Faculty of Medicine, University Hospital) is a WHO reference centre and supported the pilot phase-out of mercury containing devices at the University Hospital.
NGOs	Important social actors for awareness raising and social inclusion of vulnerable groups.
En.lighten Initiative (GEF/UNEP/OSRAM/Philips/NLTC)	Global energy efficient lighting initiative, including efforts on the sustainable treatment of discarded mercury lamps, as such important technology advisors for this project.
Private Sector	Involved in various important aspects of the proposed project: Large mercury waste producers; Services providers involved in waste collection, disposal and treatment; Distributors and retailers of Mercury containing consumer products and Mercury-free devices; Laboratories for testing and certification, among else.

The following initiatives are expected to provide useful information, lessons learned, or a good policy/regulatory foundation for the components to be carried out under the proposed project. Coordination with the executing agencies/entities will be ensured. As part of the PPG phase, a detailed description of relevant ongoing and planned activities at national level will be elaborated:

International/regional level:

- UNDP/WHO/GEF: *Demonstrating and Promoting Best Techniques and Practices for Reducing Health-Care Waste to Avoid Environmental Releases of Dioxins and Mercury in Argentina, India, Latvia, Lebanon, Philippines, Senegal, Tanzania and Viet Nam* (GEF Grant: 10,326,455 US\$)
- AAMMA: *Integrated regional (Argentina, Bolivia, Chile, Paraguay, Peru and Uruguay) campaign on minimization of mercury domestic sources with actions of intervention in the community to protect children and women's health* (SAICM QSP TF: 240,625 US\$)
- IBRD: *Demonstrating and Promoting Best Techniques and Practices for Managing Healthcare Waste and PCBs in Tunisia* (GEF Grant: 5,500,000 US\$)
- Sustain Labour: *Enabling workers and workplaces for SAICM implementation* (SAICM QSP TF: 227,224 US\$)

- UNEP: *Global Mercury Partnership* (Uruguay is co-leads of the supply and storage partnership area)
- UNEP/BCCC LAC/Norway “*Mercury storage project for the Latin American and Caribbean Region*”
- UNEP/BCCC LAC “*Bi-national project on storage and final disposal of Mercury.*” (Uruguay and Argentina)
- UNIDO: *Environmentally Sustainable Management of Medical Waste in China* (GEF Grant: 11,650,000 US\$)
- UNIDO: *Environmentally Sound Management of Medical Wastes in India* (GEF Grant: 10,000,000 US\$)
- USEPA/Norway/BCCC LAC “*Minimization and environmentally sound management of mercury containing waste within the context of the implementation of the Basel Convention*” (Argentina, Costa Rica and Uruguay)
- WHO-HCWH: *Global Initiative to Substitute Mercury-Based Medical Devices in Health Care*

National level:

- UNDP: *Development of the National Capacities for the Environmental Sound Management of PCBs in Uruguay* (GEF Grant: 954,550 US\$)
- UNEP (Administered by UNDP): *Enabling Activities for the Stockholm Convention on Persistent Organic Pollutants: National Implementation Plan for Uruguay* (GEF Grant 499,000 US\$)
- UNIDO/BCCC LAC: *Sound Management for Mercury Products* (SAICM QSP TF: 249,800 US\$)
- UNEP/BCCC LAC: “*Guidance on Best Industrial Practice in the Chloralkali sector*”: Assessment of management practices and dissemination of the Guidance on Best Practices.

C. DESCRIBE THE GEF AGENCY’S COMPARATIVE ADVANTAGE TO IMPLEMENT THIS PROJECT:

As noted in Annex L of the document “*Comparative advantages of the GEF agencies*”, UNDP has a comparative advantage in Capacity Building and provision of Technical Assistance, as such the proposed project will benefit from UNDP’s experience in integrated policy development, human resources development, institutional strengthening, and non-governmental and community participation.

UNDP’s comparative experience in phasing-out Mercury containing devices from the healthcare sector. In its capacity as GEF implementing agency for the UNDP/WHO/HCW project “*Demonstrating and Promoting Best Techniques and Practices for Reducing Health-Care Waste to Avoid Environmental Releases of Dioxins and Mercury,*” UNDP is particularly well placed to demonstrate best approaches to the phase-out of Mercury containing medical devices from the healthcare sector as applied, tested and improved under this global project in seven countries (Argentina, India, Latvia, Lebanon, Philippines, Senegal, and Viet Nam).

The proposed project will build upon and take full advantage of the outcomes of the UNDP/WHO/GEF global healthcare waste project, which includes tools for rapid and baseline assessments of healthcare facilities and the costing of healthcare waste management scenarios; templates for facility-level Mercury policies; guidance on Mercury sequestration, Mercury waste management plans, monitoring and evaluation plans; selection criteria and technical specifications for Mercury-free devices; core competencies, curricula, training modules, and training techniques related to Mercury; informational materials on Mercury, etc.

UNDP’s comparative experience with respect to the collection, storage and disposal of wastes Through funds mainly leveraged from the GEF, UNDP’s hazardous waste portfolio is valued at approximately US\$80 million, and includes projects on the management, temporary storage, transportation and treatment/disposal of PCB containing waste, municipal waste, healthcare waste, electrical and electronic equipment (EEE) waste, and obsolete pesticides. With funding from the Multilateral Fund (MLF), UNDP is assisting Brazil, Cuba, Colombia, Georgia, Ghana and India in the reduction of greenhouse gas (GHG) and ozone depleting substance (ODS) emissions by managing obsolete ODS stocks.

Worldwide, in 2009 alone, 22 UNDP Country Offices were engaged in projects and initiatives related to Municipal Solid Waste Management (MSWM). The most significant initiative among these is the 160 million US\$ “*Recycle Argentina*” project supported by UNDP/UNOPS which over a 4-year timespan will benefit more than 4,000,000 people; construct nine solid waste treatment plants; strengthen institutional capacities on solid waste management and recycling in more than 40 municipalities; develop educational and communication components; develop the legal framework; undertake technology acquisition, etc.

Since 2009, UNDP has also been implementing a global initiative on pro-poor Public Private Partnerships in Integrated Sustainable Waste Management (PPP-ISWM). The programme is being implemented in 6 countries of which two in Latin-America: Peru (Arequipa) and Nicaragua (Managua). One of the initiative’s objective is to form and operationalize enterprise-municipal cooperation in solid waste management and recycling systems.

UNDP’s comparative experience at country level

In Uruguay, UNDP has been implementing a vast portfolio of projects and programmes related to environmental sustainability in partnership with public and private actors. Of particular relevance to the proposed project are the UNDP/GEF project “*Development of the National Capacities for the Environmental Sound Management of PCBs in Uruguay*” which has implemented a comprehensive management strategy for PCBs, developed legislation, completed technical studies and inter-institutional cooperation schemes, and worked with public and private entities in the establishment of temporary and final disposal solutions for PCBs; the “*UNDP/UNEP Poverty and Environment Initiative*” through which UNDP has been working with the informal sector and local and national authorities to improve solid waste management practices as well as solutions that address both social and environmental aspects in this area; a joint IDB/UNDP project focussing on institutional strengthening of MVOTMA, the creation of a National Environmental System and tools for environmental management; and a “*Pilot Programme on Reducing Pollution from Tanneries*”, an important release source of Mercury into the environment, as part of the UNDP/GEF project “*Reducing and Preventing Land-based Pollution in the Río de la Plata*”.

C.1 INDICATE THE CO-FINANCING AMOUNT THE GEF AGENCY IS BRINGING TO THE PROJECT:

The United Nations Development Programme (UNDP) has contributed with in-kind technical support and assistance for initial scoping meetings with Government counterparts and project stakeholders in preparation for the formulation of this PIF. This contribution is estimated to approximately US\$ 25,000 provided by the Uruguay UNDP Country Office and UNDP-HQ. In addition, projects being implemented with the support of the UNDP Country Office, in particular those in the solid waste management sector (including waste recovery and supporting the informal sector in improved handling of waste and hazardous substances) as well as activities related to institutional strengthening of environmental entities (e.g. UNDP/UNEP Poverty and Environment Initiative – PEI) will be coordinated with the proposed project. Funding allocated to activities under implementation that will directly contribute to the results of the proposed project have been estimated to amount to US\$ 150,000. Identification of further in-house contributions towards the proposed project will be undertaken during the PPG stage of the project.

Considering the scope of the project, UNDP’s in-house expert resources involved in health programs, at country, regional and headquarters level will be mobilized to contribute towards project implementation. UNDP’s Capacity Development Group is providing advisory services on waste management in several countries and will be harnessed to support the proposed project during implementation. The level of involvement and corresponding monetary contribution can be assessed during PPG stage and mid-term/final evaluation of the project. In addition to this, the Resident Representative functions, human resources and facilities provided by the UNDP Country Office will be made available beyond strict cost recovery basis for successful project implementation.

The value of all of the above can be expected to exceed US\$ 175,000 during the life of the project.

C.2 HOW DOES THE PROJECT FIT INTO THE GEF AGENCY’S PROGRAM (REFLECTED IN DOCUMENTS SUCH AS UNDAF, CAS, ETC.) AND STAFF CAPACITY IN THE COUNTRY TO FOLLOW UP PROJECT IMPLEMENTATION:

The United Nations Development Assistance Framework (UNDAF) in Uruguay (2011-2015) identifies outcomes concentrated in four (4) priority areas, which will be achieved through the joint work of the Government of Uruguay and the United Nations. These outcomes are:

- (1) Diversification of production and participation in the global economy
- (2) Environmental sustainability**
- (3) Equitable social development
- (4) Democratic governance

The UNDAF identifies four priority areas for cooperation. The proposed project fits well within **priority no. 2:**

“Move towards the implementation of sustainable development models that will foster conservation of natural resources and ecosystems, climate change mitigation and adaptation, and use of renewable sources of energy”.

Note: Environmental sustainability is considered a cross-cutting principle for all four priority areas.

In particular, **Outcome 2.1:**

The Government, with the participation of civil society, will have designed, implemented and/or strengthened policies programmes and plans for the sustainable management of natural resources and conservation of biodiversity, and will have reduced social and environmental vulnerabilities and intergenerational inequities.

Indicator: Quantity of programmes for integral management of urban solid waste, incorporating social inclusion.

Baseline: One (1) national programme operational, one (1) department in place.

Target: At least four (4) by 2015.

Assumptions: The deepening of the institutional framework makes it possible to resolve satisfactorily the tension between environmental conservation and productive development.

Risks: The expansion of production processes and the prioritization of economic growth take priority over the adoption of environmental safeguards. The linkages between environmental degradation and increased vulnerability are not recognized.

Relevant MDGs: MDG 1: Eradicate extreme poverty and hunger; MDG 3: Promote gender equality and empower women; MDG 7: Ensure environmental sustainability and MDG 8: Develop a global partnership for development.


UNDP's Country Office in Uruguay, in particular its cluster “*Environment and Vulnerability Reduction*” consisting of two experienced environmental management experts as well as professionals in environmental economics and project administration, has extensive experience in the implementation of GEF funded projects, such as those related to IW, CC, Biodiversity, POPs and multi-focal areas projects. In addition, the “*Environment and Vulnerability Reduction*” unit has experience in the implementation of projects and activities in the area of waste management and pollution prevention (see sections B.5 and C.). As such UNDP Uruguay is very well placed to follow-up on project implementation.

PART III: APPROVAL/ENDORSEMENT BY GEF OPERATIONAL FOCAL POINT(S) AND GEF AGENCY(IES)

A. RECORD OF ENDORSEMENT OF GEF OPERATIONAL FOCAL POINT (S) ON BEHALF OF THE GOVERNMENT(S): (Please attach the [Operational Focal Point endorsement letter\(s\)](#) with this template. For SGP, use this [OFP endorsement letter](#)).

NAME	POSITION	MINISTRY	DATE (MM/dd/yyyy)
María Valeria Perez Güida	GEF Operational Focal Point	MINISTRY OF HOUSING, LAND USE PLANNING AND ENVIRONMENT (MVOTMA)	05/11/2012

B. GEF AGENCY(IES) CERTIFICATION

This request has been prepared in accordance with GEF/LDCF/SCCF policies and procedures and meets the GEF/LDCF/SCCF criteria for project identification and preparation.					
Agency Coordinator, Agency name	Signature	DATE (MM/dd/yyyy)	Project Contact Person	Telephone	Email Address
Adriana Dinu, Deputy Executive Coordinator UNDP-GEF		05/15/2012	Dr. Suely Carvalho GEF Principal Technical Advisor for POPs/Ozone UNDP/MPU/Chemicals	212-906-6687	suely.carvalho@undp.org