HEALTH OF INDIGENOUS PEOPLES:
Improving Water and Sanitation in Indigenous Communities

PROGRESS REPORT 4
(July – December 2000)
## CONTEXT

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Project Objective</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Results, Indicators, and Main Assumptions</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>Status of Results and Products</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>Financial Aspects</td>
<td>14</td>
</tr>
<tr>
<td>5</td>
<td>Other Aspects</td>
<td>15</td>
</tr>
<tr>
<td>6</td>
<td>Need for Action</td>
<td>15</td>
</tr>
</tbody>
</table>
1. PROJECT OBJECTIVE

OBJECTIVE

The objective of the project “Health of Indigenous People: Improving Water and Sanitation in Indigenous Communities”, is to reduce the risk of transmission of diseases caused by environmental factors, particularly those associated with water access, water quality, inadequate sanitation, and poor hygiene habits in indigenous communities of Latin America.

IMMEDIATE OBJECTIVES

a) To strengthen the capacity of indigenous organizations, as well as national and local organizations responsible for indigenous population programs, to plan and carry out viable programs with community participation and appropriate technology approaches.

b) To train communities in order to mobilize resources and prepare projects according to their needs.

c) To achieve effective planning levels through demonstration projects, information dissemination, and promotion of appropriate methodologies and technologies for water and basic sanitation.

d) To promote the sharing of experiences among countries, indigenous communities, and organizations.

STRATEGY

In order to achieve the proposed objectives, activities will be carried out at the regional level as well as the national level of each participating country. Regional activities will promote the sharing of experiences and information, as well as mutual assistance between countries and institutions before beginning the process in each country. Moreover, the experiences gained during the process will be consolidated and disseminated.

To a large extent, Internet will be used to coordinate regional activities and to disseminate experiences, in addition to resources developed by the Pan American Center for Sanitary Engineering and Environmental Sciences, PAHO/CEPIS.

Projects will be geared toward strengthening the capacity of indigenous communities to identify environmental risk factors affecting their health and to adopt measures for controlling those risks based on local realities. It is expected that capacity building will gradually enable indigenous communities to solve other environmental health problems and even improve their income.
The search for sustainable solutions should be a permanent concern of all projects. Accordingly, every effort will be made to use appropriate technologies and management schemes that take into account the ability to pay and environmental practices of indigenous populations.

Demonstration projects should create the links and conditions necessary for national organizations to address the specific characteristics of environmental health problems that indigenous populations face. Resources and efforts should be incorporated into programs of larger scope to replicate the experiences of the demonstration projects.

**INDICATORS**

Indicators include project progress and final reports, demonstration projects, seminars, information dissemination, inter-agency and community agreements, as well as programs to replicate experiences.

**DESCRIPTION**

The Project seeks to reduce water-borne and other diseases associated with sanitation in indigenous communities. In recent years, indigenous groups have been affected by the cholera epidemic, resulting in high mortality rates due to precarious living and hygiene conditions. Studies of indigenous communities reveal a very high incidence of gastroenteritis. Water supply sources, such as open wells, are exposed to contamination increasing the risk of disease transmission. Inadequate excreta disposal also poses an increased risk of disease transmission since very few indigenous communities have appropriate sanitary facilities.

Most countries of the Region have developed national plans for cholera prevention and control. One component of those plans centers on education, emphasizing drinking water quality, safe excreta disposal, and house hygiene; aspects identified by epidemiological studies as key factors in the transmission of sanitation related diseases. The project will strengthen community organization and health education in indigenous populations as a means of disease prevention and control. Accordingly, the project will identify and disseminate information on positive experiences associated with effective interventions aimed at reducing the incidence of diarrheal diseases in these populations.

The project envisages preparatory and consolidation activities at the regional level, including Bolivia, Chile, Colombia, Ecuador, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama, Peru, and Venezuela; and will implement demonstration projects in Bolivia, Colombia, Ecuador, Guatemala, Peru, and Venezuela.

The project also envisages that national and regional processes will conclude with the establishment of links and commitments among countries and communities, thus leading to the proposal of programs of larger scope to replicate demonstration project experiences extensively.

2. **RESULTS, INDICATORS, AND MAIN ASSUMPTIONS**
RESULT 1
INDIGENOUS AND NATIONAL ORGANIZATIONS WILL HAVE BEEN TRAINED IN THE BEST PRACTICES AND MOST EFFECTIVE TECHNOLOGIES THAT FACILITATE INCREASED ACCESS AND QUALITY OF BASIC SANITATION.

Indicators
Trained indigenous planners apply the best practices and most effective technologies with respect to water supply and sanitation.

Assumption
Indigenous organizations have built the capacity to take advantage of the training program.

RESULT 2
INDIGENOUS MICROENTERPRISES WILL HAVE BEEN ESTABLISHED FOR DRILLING WELLS, AS WELL AS FOR THE OPERATION, MAINTENANCE AND MANAGEMENT OF ENVIRONMENTAL FACILITIES.

Indicators
Number of wells drilled in indigenous zones, number of water disinfection systems installed at the household level, or number of other solutions using appropriate technology.

Assumption
The viability of the solutions has been established through feasibility studies.

RESULT 3
INDIGENOUS ORGANIZATIONS AND COMMUNITIES WILL HAVE BEEN COOPERATING AT THE TECHNICAL LEVEL, SHARING EXPERIENCES RELATED TO WATER AND SANITATION.

Indicators
- Number of administered facilities.
- Number of indigenous organizations trained in community management of water services.
- Number of organizations and communities included in the network.

Assumptions
The political situation has facilitated the framework for this program.
PRODUCTS

PRODUCT 1  REGIONAL WORKSHOP TO SHARE INFORMATION AND EXPERIENCES AND TO TRAIN NATIONAL AUTHORITIES AND LEADERS OF INDIGENOUS GROUPS AND ORGANIZATIONS (all countries).

Indicators  Number of countries and indigenous groups that have participated in the regional workshop and have exchanged opinions.

Assumptions  Adequate participants have been selected to attend the workshop.

PRODUCT 2  TRAINING MANUAL AND MATERIALS AND INFORMATION DISSEMINATION (all countries).

Indicators  Number of guidelines used in planning and implementation of programs and projects for indigenous population.

Assumptions  Guidelines have been adequately disseminated in indigenous organizations.

PRODUCT 3  TWO SUBREGIONAL WORKSHOPS (two groups of countries)

Indicators  Number of instructors and organizations that have received training and are using the information provided.

Assumptions  Trained individuals are able to use the knowledge provided in an efficient manner.

PRODUCT 4  NATIONAL SEMINARS ORGANIZED IN EACH COUNTRY PARTICIPATING IN THE PROJECT (all countries).

Indicators  Number of national organizations that have received training.

Assumptions  Training has been provided to the pertinent organizations.
PRODUCT 5
TWENTY-FOUR (24) DEMONSTRATION PROJECTS IMPLEMENTED ON WATER SUPPLY AND SANITATION (6 COUNTRIES); NATIONAL WORKSHOPS ON PLANNING, TECHNOLOGIES, AND COMMUNITY MANAGEMENT OF ENVIRONMENTAL HEALTH SERVICES (6 COUNTRIES).

Indicators
- Number of positive experiences gained through demonstration projects applied in the planning of programs and projects.
- Number of technologies demonstrated and used in projects.

Assumptions
- Planning and implementation of demonstration projects has been made with community participation.
- National agencies and nongovernmental organizations have participated in project implementation.

PRODUCT 6
ESSENTIAL EQUIPMENT AND SUPPLIES FOR WATER SUPPLY AND SANITATION, AS WELL AS WATER QUALITY IMPROVEMENT TO REDUCE DIARRHEAL DISEASES IN SELECTED SCHOOLS AND COMMUNITIES (6 countries).

Indicators
Number of equipment and supplies for water supply, sanitation, and water quality in the demonstration projects.

Assumptions
The equipment provided have adequately met the specifications of the demonstration project.

PRODUCT 7
TECHNICAL COOPERATION PROJECTS AMONG COUNTRIES AND INDIGENOUS ORGANIZATIONS FOR WATER AND SANITATION IMPROVEMENT (all countries)

Indicators
Number of documented joint activities.

Assumptions
Coordination mechanisms have been established.

3. STATE OF RESULT AND PRODUCT ACHIEVEMENT

RESULT 1
In the national seminars carried out in the first semester of the year 2000 in most countries participating in the Project, the authorities and national leaders reviewed the environmental
conditions of indigenous populations, their main problems, ongoing programs, appropriate technologies and methodologies in use or available for the successful planning of drinking water and sanitation.

As a result of those seminars, the corresponding national work programs have been prepared, establishing the activities to be implemented in each country to attain the expected results.

In each country, a database will be set up to record the projects on water quality and sanitation improvement for indigenous populations. This mechanism will facilitate and promote this type of projects prepared by the indigenous communities that have been trained.

**ASSESSMENT:** B six-month delay.

**RESULT 2** The establishment of indigenous microenterprises for well drilling and operation, maintenance, and management of environmental facilities are part of the demonstration projects to be carried out starting March 2001.

**ASSESSMENT:** B six-month delay.

**RESULT 3** The sharing of experiences on environmental conditions, water, and sanitation in indigenous communities is being developed, since the first semester of the year 2000 through CEPIS website (http://www.cepis.ops-oms.org/eswww/poblaind/poblaind.html). The homepage on indigenous populations provides information about this project and records the experiences gained in every
country. It also includes a discussion list with 43 participants registered up to December 2000.

Likewise, the creation of a database on the situation of indigenous populations, including health and basic sanitation aspects, has been planned. It will facilitate that indigenous populations know each other so as to work together towards a healthy environment.

ASSESSMENT: A according to the plan.

PRODUCTS

PRODUCT 1 According to the project scheme, once the demonstration projects have been concluded, it is expected to hold a regional workshop at the end of the first semester of the year 2002, with the participation of all countries.

ASSESSMENT: B six-month delay.

PRODUCT 2 Once the national seminars will have been over, training materials and manuals should be developed for indigenous organizations of all participating countries.

ASSESSMENT: B six-month delay.

PRODUCT 3 Two subregional workshops have been conducted. The first one was carried out with the Andean countries and Chile on 10-12 November, 1999, in Lima, Peru. The second was held with
Central American countries and Mexico in Guatemala City, Guatemala, on 24-26 November, 1999.

Brazil was invited to the subregional workshop held in Lima, because of their experience and knowledge. As a result of their participation, Brazil has been incorporated into the project.

**ASSESSMENT:** A according to the plan.

**PRODUCT 4** National Seminars have been carried out in most countries participating in the project, according to the terms of reference provided, including Brazil.
Bolivia

A Working Group has been set up to manage the national component of the project. The Group considered that the National Seminar to present the Project and raise awareness on improving environmental conditions of indigenous populations would not be necessary since indigenous people needs are duly recognized in the country. The Group has also prepared the national work program and decided to focus on the American Chaco Region, territory of the Guarani Nation and of other groups, such as the Weeneyeck and the Tapietie who live in the banks of the rivers Pilcomayo, Paraná and others.

The work program proposes to improve the basic environmental and sanitation conditions of the communities of Bolivia and extend its benefits to the same ethnic groups in Argentina and Brazil. It is part of a comprehensive local health intervention according to the Guarani cosmic vision that considers health as the result of the relationship between man and nature. This Program would be the first phase of other more ambitious programs aimed at improving basic sanitation conditions of the American Chaco.

The direct result of the Program will be the risk reduction of environmental-borne diseases, particularly those related to water access and quality, inadequate household sanitation and inappropriate hygienic habits. The indirect result will be the generation of employment for people of the region.

Colombia

The Working Group is formed by several staff members of the Ministry of Economic Development, UNICEF, Ministry of
Health, PAHO, and GTZ in Colombia. This Group will be supported by national officers of the Secretariats of Indigenous Affairs, Education, and others working with communities.

The work program that will guide all the project process establishes that the demonstration projects will be carried out in the Comunidad Indígena Resguardo El Papayo and in the Comunidades Rancherías: Mayapo, Ishamana, and Maku. The program includes set up of a database on indigenous population, the preparation of training material on water, sanitation, and health education, the establishment of a monitoring system, the creation of a project databank for indigenous populations, and the sharing of experiences.

The expected results are changes in hygienic practices and habits, solution of water supply and sanitation problems through appropriate technologies, and community organization to achieve the sustainability of installed systems.

**Ecuador**

A Working Group has been integrated by the Consejo de Nacionalidades y Pueblos (CODENPE), the Subsecretaría de Saneamiento Ambiental, Ministry of Health, Ministry of Education, NGOs, and representatives of other projects such as PRAGUAS.

The work program includes the proposals of the delegates of all nations and towns, who jointly with the delegates of the institutions, selected the communities to carry out demonstration projects: Centro Chachi – Corriente Grande (Coast); Comunidad Los Óvalos Alto y Pueblo Salasaca (Sierra); Nacionalidad Siona and Nacionalidad Secoya (Eastern region).
The expected results are changes in hygienic practices and habits, solution of water supply and sanitation problems through appropriate technologies, and community organization to achieve the sustainability of installed systems.

**Guatemala**

The Working Group is composed of representatives of institutions involved in the development of water and sanitation programs and projects in indigenous communities and by indigenous community associations. This group is integrated by delegates of the Departamento de Regulación de los Programas de Salud y Ambiente/MSPAS, the Executive Directorate of INFOM-UNEPAR, the association of indigenous groups "Por Nosotros, Ixmucané", the Instituto de Fomento Municipal (INFOM), the PRODEQ project, GTZ and the Health and Environment Division of PAHO/WHO.

The work program plans to carry out demonstration projects in the Communities of Chilil I and II, Santa Bárbara and Esperanzita del Río.

The expected results are reduction of morbidity and mortality due to water-borne diseases and inadequate basic sanitation.

The operational and advisory group is being formed at the national, departmental and local levels. Furthermore, commitments and work agreements are being signed to participate in the pilot project of each area, starting March 2001.

**Peru**
The Working Group is being coordinated by the PAHO Health and Environment adviser and is integrated by the Asociación Inter-Étnica de Desarrollo de la Selva Peruana (AIDESEP), Unión Nacional de Comunidades Aymaras (UNCA), Consejo Nacional de la Amazonía Peruana (CONAP), Ministry of Health, Ministry of the Presidency, and FONCODES.

The work program has defined the following activities to be developed during the project execution: identification and implementation of demonstration projects, preparation of training material on health education, set up of a database on indigenous communities, among others.

The expected results for indigenous organizations are increased knowledge on the relationship between environment and health, training on methods and techniques to carry out situational analyses, sharing of experiences, creation of databases, among others.

**Venezuela**

The Working Group is formed by the Ministry of the Environment, HIDROVEN, Ministry of Infrastructure, ICLAM, universities, Ministry of Health and Social Development, Investment Fund, rural communities, GTZ, and PAHO/WHO.
Countries that will not implement demonstration projects

Brazil

Brazil has been invited to participate in the Project due to its experience on indigenous topics which will be an input for the other countries.

The National Health Foundation – FUNASA, federal organ of the Ministry of Health, is developing a National Sanitation System for Indigenous Populations, to implement, operate and maintain sanitation actions for indigenous groups.

The National Seminar was held in August 2000 and they are currently in the process of preparing their work program.

Chile

Different divisions of the Ministry of Health (MINSAL) have established a Working Group which has several agreements with NGOs. One of them is the Seminar "Non-Traditional Alternatives for Rural Basic Sanitation" held in Temuco, on July 13, 2000. It was supported by PAHO that financed the visit of an expert from Bolivia.

The National Seminar on Environmental Health and Indigenous Peoples was programmed jointly with the Ministry of Health and the Region IX, for November 2000 in Temuco, with the participation of all health services of Chile.

To be acquainted with the experience of Bolivia on water and sanitation at the rural and indigenous level, representatives of the
All actions described are executed with local resources and the support of local authorities.

**El Salvador**

A Working Group has been established through the Consejo Coordinador Nacional Indígena Salvadoreño (CCNIS) that represents indigenous populations. Last year, it conducted a research on health and living conditions of such populations, supported by PAHO. This has been taken as the starting point for the preparation of the work program.

The Working Group held the national seminar on March 2-3, 2000. Forty representatives of indigenous communities, the Ministry of Health, governmental and international agencies, and NGOs attended the meeting.

According to the agreements adopted in the seminar, the national work plan was prepared and is being implemented with local resources. As a result, the study "*Saneamiento básico desde la perspectiva indígena de Cuisnahuat, Izalco, and Nahuizalco, Departamento de Sonsonate*", will be presented to the national community.

El Salvador has a rich experience on indigenous populations. The Central American integration and the union of indigenous people serves as the framework of the Consejo Indígena Centroamericano (CICA) that extends its action to all the subregional area.
In addition to promoting the preparation of national work programs for furthering the initiative (similar to El Salvador), the most specific product of the event will be the signing of a commitment letter to improve environmental conditions (water and sanitation) in the Central American indigenous communities. CEPIS could be considered as the center of technical excellence to provide advisory on appropriate technologies to be developed in this context to reduce water and sanitation inequities.

**Honduras**

The Working Group has been set up with representatives of the Departamento de Atención a Etnias and the Unit of Human Resources of the Health Secretariat, of the Project on Access to Health Services, ASDI/PAHO, of the Confederación Nacional de Pueblos Autóctonos de Honduras, CONPAH, and PAHO. This is a permanent group and has a participative decision making process. A mechanism of permanent advisory and national convergence with indigenous peoples of Honduras has been developed. The work varies from opening new health services in indigenous communities, developing human resources up to executing sanitation actions, particularly the construction of water supply systems and sanitary latrines. The environmental health component has also been included as a priority.

The first forum on health and cultural diversity with the participation of all indigenous peoples of Honduras and national authorities was carried out.

The Health Secretariat has approved the national seminar to prepare the work program.

**Mexico**
The Comisión Nacional del Agua (CNA), jointly with the state governments, are undertaking the Programa para la Sostenibilidad de los Servicios de Agua Potable y Saneamiento en Comunidades Rurales, financed partially by the IDB. Rural and marginal communities with less than 2,500 people population have been considered eligible for this plan.

As part of the strategies to achieve the active and organized participation of the potential beneficiaries of the program, the Social Services and Community Participation component was included. In the first phase, community interaction will be promoted to define the work project that better meets their needs, their capacities will be analyzed and community commitments for sustainable services will be established. In the second phase, during public work construction, advisory and support will be given to consolidate community organization and training on hygiene, sanitation, and environmental care. Training will also be provided on system management, operation, and maintenance. In the third phase, after the system delivery, the municipalities in charge of the water supply and sanitation services will help institutionalize community organization.

Nicaragua

The Working Group is composed of the Empresa Nicaragüense de Acueductos y Alcantarillados (ENACAL), Ministry of Health and the Movimiento Indígena Nicaragüense (MIN).

The group prepared a draft of the national work program to be presented to the National Seminar. Different activities have been carried out in preparation for the seminar, such as the territorial meetings of indigenous associations and the collection of
information regarding water and sanitation conditions of indigenous communities and the projects they are developing.

**Panama**

The Working Group has been set up and the National Seminar to prepare its work program was held in August 2000. They are finishing the report of their work program.

**ASSESSMENT:** B six-month delay.

**PRODUCT 5**

The national planning workshops will define the 24 demonstration projects on water supply and sanitation that will be carried out in Bolivia, Colombia, Ecuador, Guatemala, Peru, and Venezuela, and those that will be conducted in other countries within their own programs.

CEPIS, through its Regional Program for the Promotion of Appropriate Basic Sanitation Technologies, will provide information on appropriate technologies for indigenous populations. In addition, it will collect the experiences gained in the demonstration projects that are using those technologies. The program is considering the creation of a network of institutions, including indigenous communities, that are using and promoting appropriate technologies. As well, CEPIS, through its website, disseminates appropriate technologies in the homepage specialized on this topic.

**ASSESSMENT:** B six-month delay.
PRODUCT 6  
Basic equipment and supplies for water supply, sanitation, and water quality improvement to reduce diarrheal diseases in schools and selected communities will be provided to the six countries that will develop demonstration projects.

ASSESSMENT:  
B six-month delay.
PRODUCT 7

a. The Consejo Indígena Centroamericano (CICA) and CCNIS, that will be the host, together with CEPIS and GTZ are preparing for March 2001, the subregional Central American meeting in El Salvador, with representatives of indigenous populations

The meeting will set the basis for a subregional technical cooperation project among the countries and indigenous organizations to improve the environmental conditions of the Central American indigenous communities.

b. A meeting with representatives of the working groups of the countries that are developing demonstration projects will be held in Lima in April 2001. The objective is to examine the planning methods, share experiences, and systematize those methods to be used by other countries.

c. The national work program of Bolivia is considering the expansion of the Bolivian experience in managing water and sanitation problems in indigenous communities to Argentina and Paraguay so as to develop a cooperative project covering all the American Chaco.

ASSESSMENT: B six-month delay.

4. FINANCIAL ASPECTS

4.1 Resources received

The project “Health of Indigenous Peoples: Improving Water and Sanitation in Indigenous Communities” has received up to December 31, 2000, a disbursement of US$ 229,431.00 from the GTZ. The subregional workshops held in Lima and Guatemala, the national seminars and the formulation of the demonstration projects of
Bolivia, Colombia, and Peru have been financed with part of this fund. Such amount was disbursed in the following way:

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>October/99</td>
<td>US$ 157,890</td>
</tr>
<tr>
<td>December/00</td>
<td>71,541</td>
</tr>
</tbody>
</table>

Up to December 31, 2000, there is a remaining of US$ 88,459.00 from the disbursement received on the last month of the year.

4.2 Expenditure programming for the first semester of 2001

Financial resources required for the first semester of 2001 in accordance with the work program amount to (in German marks (DM)):

<table>
<thead>
<tr>
<th>Category</th>
<th>GTZ</th>
<th>PAHO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. National Seminars</td>
<td>20,000</td>
<td>-</td>
</tr>
<tr>
<td>2. Demonstration projects (partial)</td>
<td>496,000</td>
<td>87,873</td>
</tr>
<tr>
<td>3. Subregional and regional workshops</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>4. Preparation of manuals and training material</td>
<td>4,000</td>
<td>32,952</td>
</tr>
<tr>
<td>5. Technical support and supervision (partial)</td>
<td>12,000</td>
<td>58,580</td>
</tr>
<tr>
<td>6. Program support cost</td>
<td>68,000</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>600,000</strong></td>
<td><strong>179,405</strong></td>
</tr>
</tbody>
</table>

5. OTHER ASPECTS

5.1 Project evaluation

The project “Health of Indigenous People: Improving Water and Sanitation in Indigenous Communities” has six-month delay according to the work program provided to GTZ.

The delay is due mainly to:
- Deadlines at the national level are longer than expected, due to the negotiation processes required to incorporate water and sanitation agencies and representatives of indigenous populations in the working groups, to conduct national seminars, and to prepare national work programs.

- Negotiation processes to define and select communities where demonstration projects will be carried out.

- Negotiation processes to disseminate and promote the project at the local level.

- Delay of the National Seminars due to changes of national governmental authorities in the participating countries.

- Delay in disbursements.

On the other hand, the Project is expanding to countries not considered in the initial project, as Brazil, Argentina, and Paraguay. Those countries are interested in this regional initiative and are using their own resources. It is important to highlight that those countries that the Project considered in this phase to be just as receptive of the experience carried out in the countries with demonstration projects, have started their national work programs by their own, applying their own resources to improve the environmental conditions of indigenous populations.

A project evaluation meeting was held on December 4 in Porto Alegre, Brazil, with PAHO health and environment advisers and staff members responsible for the Project in HEP, since they were attending the Inter-American Congress for Sanitary Engineering. That meeting was coordinated by CEPIS and a special report was prepared. The results of that evaluation have been included in this report.

Due to delays in the negotiations and disbursements, PAHO has requested GTZ, through fax (49-6196) 797-244, dated November 22, 2000, to reprogram the Project activities until August 30, 2002.

6. NEED FOR ACTION

6.1 PAHO
Send to GTZ the financial reports up to December 31, 2000.

Request PAHO Representative Offices in the participating countries to send their work program as soon as possible.

Request GTZ the new disbursement to meet country needs, according to the established timetable.

Transfer funds requested by the countries for the execution of demonstration projects as GTZ disbursements are received.

6.2 GTZ

Disburse the financial resources necessary to carry out the activities programmed for the second semester of 2001, totaling DM 600,000, to ensure the satisfactory development of the project avoiding further delays.