Implementation of the Protocol on Water and Health and the target setting process in Hungary

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- Hungary was involved in the Protocol from the beginning
- Alán Pintér, former chief medical health officer was among the earliest propagators of the idea
- The Hungarian Government formally adopted the Protocol on Water and Health in October, 2005 (Government Decree 213/2005 (X. 5.)
- Implementation of the Protocol is the joint task of the ministries responsible for health and environment (two focal points)
- Implementation was started after the 1st Meeting of the Parties in January, 2007



- Official mandate from 2008
- Originally set up under the National Inter-ministerial Committee on Public Health
 - Chaired by the National Public Health Institute
 - National focal points (health and environment)
- Members (technical representation):
 - Ministry of Human Capacities (health)
 - Ministry of Interior (water resources)
 - Ministry of Agriculture
 - Cabinet of the Ministers (local governments)
 - Ministry of Technology and Innovation(water utilities)
 - Local public health services
 - NGOs (Water Utility Association, Pool and Spa Association, GWP)

Mandate of the Expert Committee

- Main task to coordinate the implementation of the Protocol in Hungary
 - Review and assess the progress of implementation
 - Report on the progess
 - Assist information exchange to facilitate implementation
 - Participate in the working groups and task forces of the Protocol (through national focal points)
 - Formulate short- and medium term task of the implementation
 - Propose an inter-ministerial framework to delegate tasks
- The Expert Committee formally meets at least once a year.
- First activity: drafting the targets and target dates



- Experts identified problem areas
- Expert Commitee drafted the targets (2008-2009)
- Meetings every 6 months
- Other stakeholders were also invited
- Targets were approved by the involved ministries and the Government
- Targets were submitted to the Secreteriat in January, 2009
- Targets and target dates were published on a dedicated website

🐔 Website – oki.antsz.hu



Kareas of target setting - 1

- a) Drinking water quality (2010, 2015) increase chemical compliance
- b) Reducing water-borne disease (continuous) **improve surveillance**
- c) Access to drinking water and sanitation (2008,2010,2015) baseline assessment, social tariffs
- d) Collective wastewater systems (2008, 2010, 2015) all communities over
 2000 inhabitants by 2015
- e) Public water supply and sewage performance **baseline analysis**
- f) Good management practices in water supply and sanitation introduction of water safety planning
- g) Reduction of untreated waste water (2015) **treatment to be introduced to all collective systems**, decrease the proportion of combined sewers

Areas of target setting - 2

j) Quality of water used as a drinking water source, (2009) – baseline analysis, action plan, indicators for bathing water quality

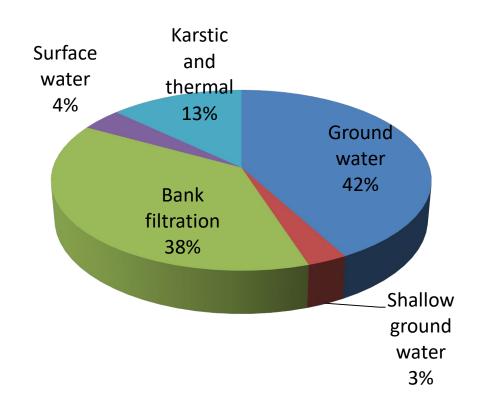
- Identification and remediation of especially contaminated sites
 (2008,2015) National Site Remediation Programme
- m) Effectiveness of systems for the management, development, protection and use of water resources (2007-2009, 2007-2012, 2015) drinking water source hazard analysis and indentification of protection zones
- n) **Information systems improvement** (drinking water quality, bathing water quality) (2008, continuous)
- o) **Climate adaptation** strategic planning

Implementation of the targets

- Level of implementation varies between targets
- Usually the progress is more defined on areas which overlap with the EU obligations (availability of finances)
 - Drinking water quality
 - Bathing water quality
 - Access to drinking water and sanitation
 - Water resource management
- Other areas with good progress:
 - Enclosed bathing waters
 - Information systems
 - Disease surveillance
 - Capacity building
 - Small scale waste-water treatment

A Drinking water in Hungary

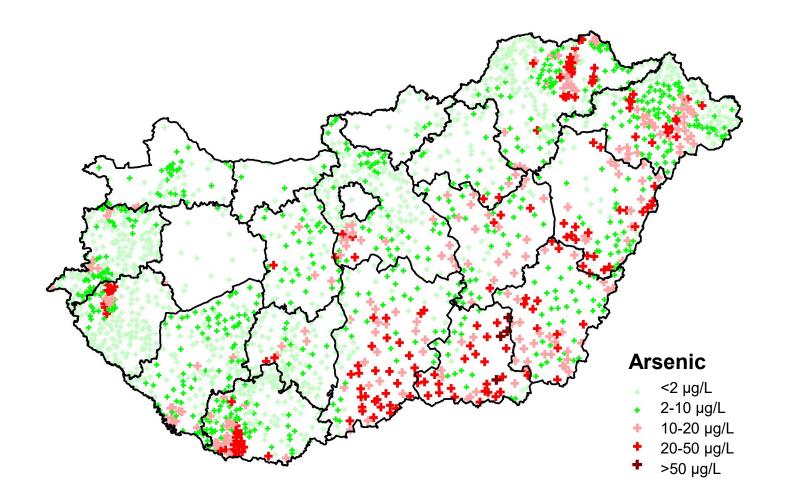
- Public water utilities serve every municipality, approximately 95 % of the population
- 1770 water supply zones
- Mainly groundwater sources
- Future sources: 2/3 bank filtration
- Large geographic disparities, expected to increase with climate change and user demand
- Water consumption: 110
 I/capita/day (60-180 I/day)



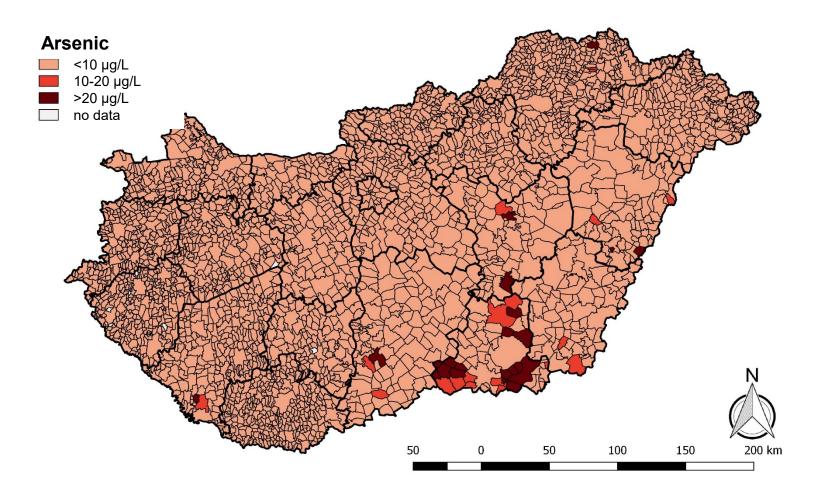
Target area: Drinking water quality

- Access to safe drinking water is limited by quality rather than quantity
- Chemical contaminants of geological origin: As, B, F (+ammonium – nitrite formation potential)
- Target: 96 % of the population to have access to safe DW by 2015
- Legal environment
- National Drinking Water Improvement Programme
- EU derogation

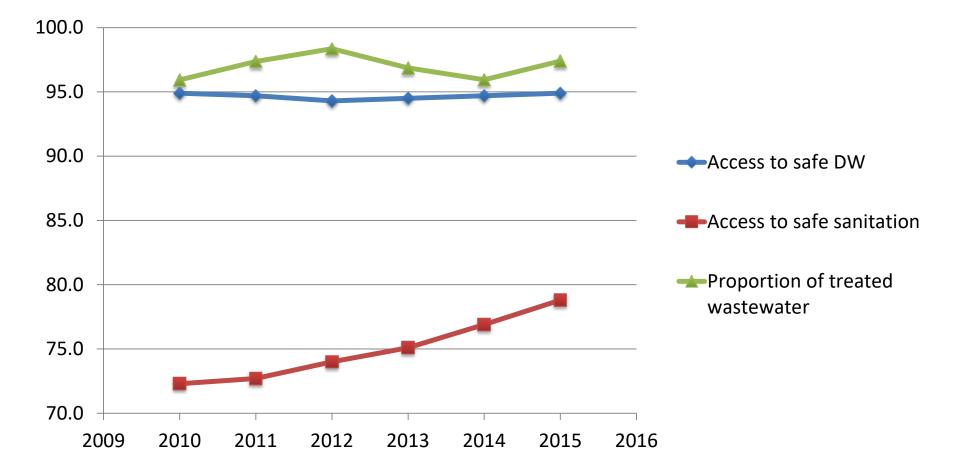




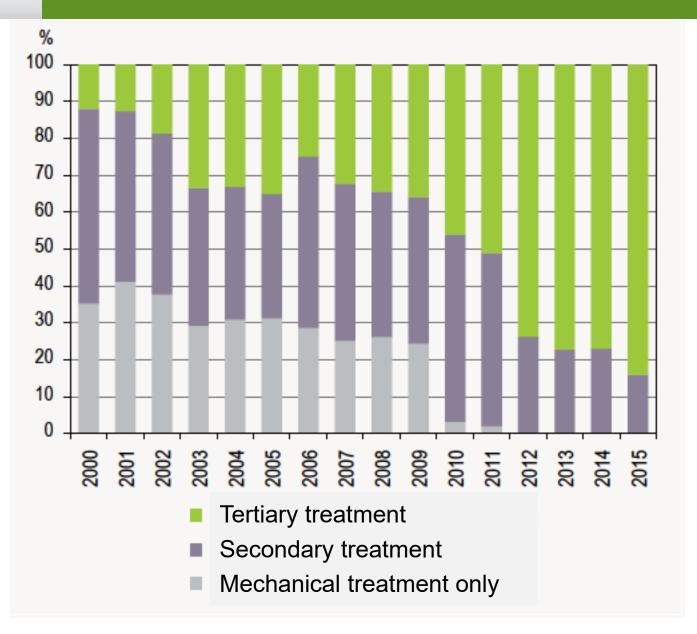








Waste-water treatment



Equitable Access Scorecard 2015/2016

- Lead organization(s): National Public Health Centre
- Support by: Commissioner for Fundamental Rights, WHO, UNECE
- Partners:
 - Ministries: Interior, National Economy, National Development, Human Capacities
 - Hungarian Central Statistical Office
 - NGO-s: organisations working for disadvantageous groups, Red Cross
- Scale of the project: national

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Egyenlő esély értékelőlap
a vízhez és szanitációhoz való emberi jog megvalósulását célzó szakpolitikai folyamatok támogatására
Víz és Egészség Jegyzőkönyv az országhatárokat átlépő vízfolyások és nemzetközi tavak védelméről és használatáról szóló egyezményhez
UNITED NATIONS

Outcomes of the assessment



- The favorable overall situation was confirmed
- Infrastructural development
- Government programme to reduce household costs



- Data gaps (disconnected users, private wells)
- Limited access for marginalized groups
- No social tariff system

Recommendations

Legal framework

- Strengthening the right for equitable access to water and sanitation in the legal environment
- Adaptation of the Building Code to reflect the minimum requirements for water and sanitation

Infrastructure

- Policy and financial support for decentralized services where public supply is unavailable
- Maintain public taps to support the access of the unserved population

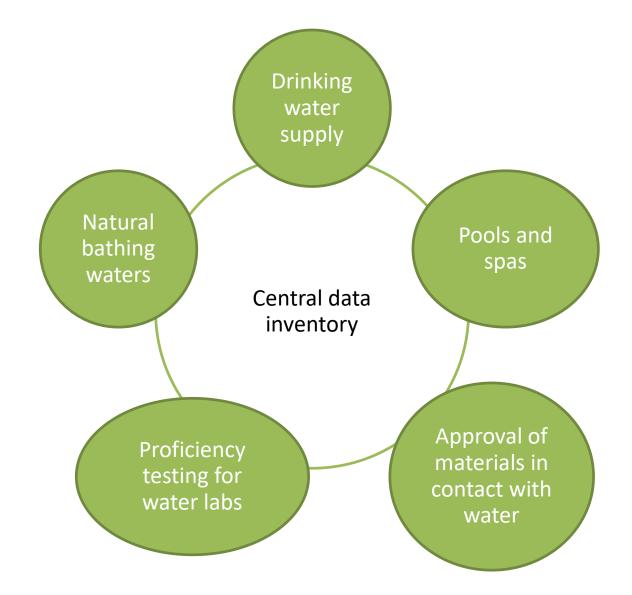
Closing the data gap

- Initiate research to identify number and geographic distribution of groups living without access, and the reasons behind it.
- Establish regular data collection on access which is currently outside of the statistical reports.
- Repeat the equitable access assessment in 5 years to track progress

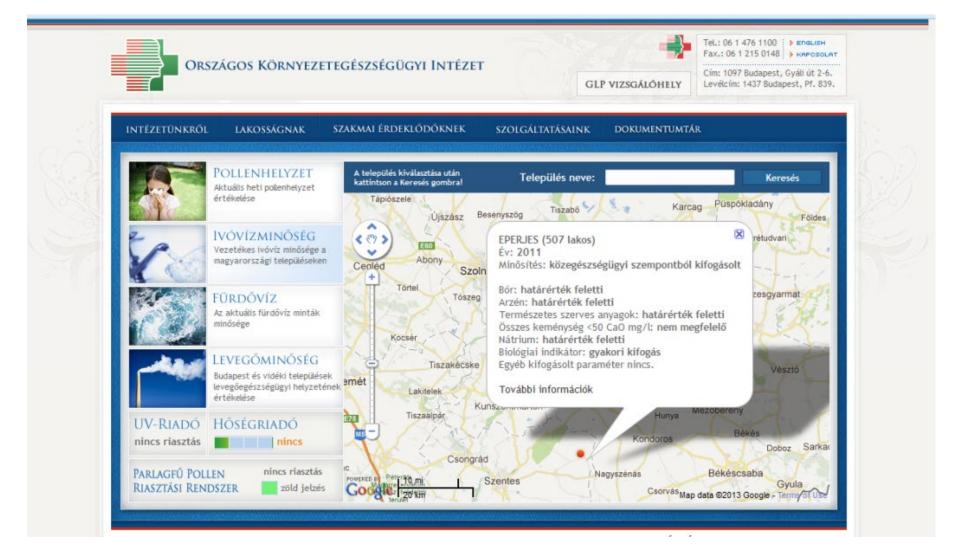


- Information to the public and to other expert groups is essential for the implementation of all target areas
- Links in with other targets
- Some link in with EU requirements (DW quality, bathing water quality)
- Other databases:
 - Pool registry
 - Registry of contaminated sites
 - Water source database
 - Communicable disease surveillance database
 - System of interconnected water databases is under development

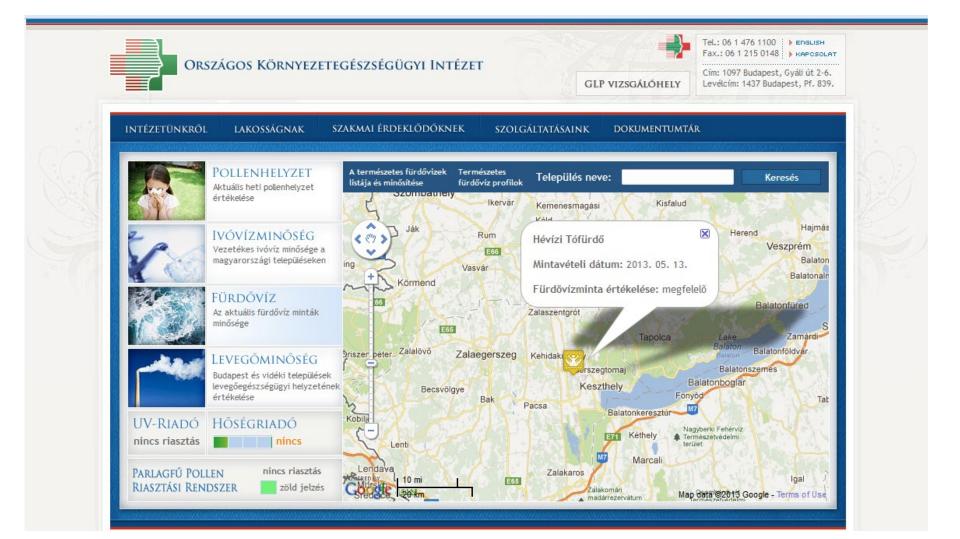
< 'Water for human use'' database



Information to the public on drinking water quality



Bathing water





- Most target dates "expired" in 2015
- Revision of targets and target dates is in progress (the Expert Committee met in June)
 - Taking into account outcomes of the recent reporting
 - Formulate indicators of progress more clearly
 - Use national targets towards meeting SDGs
- Planned target areas
 - Drinking water quality in buildings
 - Action plan to improve equitable access
 - Reduce water loss in the distribution system

Thank you for your attention!

