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Meeting of the Parties to the Protocol on
Water and Health to the Convention on
the Protection and Use of Transboundary
Watercourses and International Lakes

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Item 5 of the provisional agenda

**Review of past activities and discussion of future activities in
the different areas of work****Report on the implementation of the programme of work
for 2017–2019****Prepared by the joint secretariat***Summary*

The present document contains a report on the implementation of the programme of work for 2017–2019 of the Protocol on Water and Health to the Convention on the Protection and Use of Transboundary Watercourses and International Lakes (ECE/MP.WH/13/Add.1–EUPCR/1611921/2.1/2016/MOP-4/06/Add.1). The document was prepared by the joint secretariat provided by the United Nations Economic Commission for Europe (ECE) and the World Health Organization (WHO) Regional Office for Europe, with input from lead Parties. The report provides a general overview of implementation — highlighting the progress achieved, success factors and challenges encountered — and a summary of activities undertaken under each programme area.

The Meeting of the Parties may wish to:

- (a) Endorse the report on the implementation of the programme of work for 2017–2019;
- (b) Commend the members of the Working Group on Water and Health, the Bureau, the other subsidiary bodies, the lead Parties, other States and organizations and the joint secretariat for their valuable support in the implementation of various planned activities under the Protocol;
- (c) Express its gratitude to Parties and other cooperating States, especially to the lead countries and organizations that have provided human and financial resources to implement the programme of work for 2017–2019.



I. General overview

1. As of 10 September 2019, 26 countries¹ have ratified the Protocol on Water and Health to the Convention on the Protection and Use of Transboundary Rivers and International Lakes. Since the fourth session of the Meeting of the Parties (Geneva, 14–16 November 2016), there have been no new accessions to the Protocol. Montenegro, however, is very close to completing the accession process, having passed a law on accession to the Protocol in August 2019. Several other countries, such as Italy, Kazakhstan, North Macedonia and Uzbekistan, have stated their intention to accede to the Protocol and are currently at different stages of accession process.

2. In the period 2017–2019, Parties made significant progress in setting targets and target dates according to article 6 of the Protocol. The following Parties communicated their targets to the joint secretariat: Azerbaijan, Croatia, France, Luxembourg, Spain and Switzerland. Albania, Bosnia and Herzegovina, Portugal and Russian Federation reported that they were making progress in the target-setting process. Belarus, Finland, Hungary, the Netherlands, the Republic of Moldova, Serbia and Ukraine were in the process of revising their targets. The number of countries in the process of revising their original targets demonstrated the relevance of targets setting under the Protocol for the countries of the pan-European region, including European Union member States

3. Other States not yet Parties to the Protocol, such as Armenia, Kyrgyzstan and Tajikistan, also set national targets on water and health in the context of the Protocol.

4. All 26 Parties and seven other States took part in the fourth reporting exercise.² The information provided by countries is summarized in the regional report on the status of implementation of the Protocol (ECE/MP.WH/2019/4-EUPCR/1814149/1.2/2019/MOP-5/10).

5. Remarkable results were attained in most areas of work, thanks to the continuous leadership of lead countries, the commitment of Parties, other States and organizations working under the Protocol, and the joint secretariat's efforts. The Protocol continued to provide a successful regional platform for steering the regional agenda on water, sanitation and health by promoting action and exchange of experience between countries and across sectors and by facilitating cooperation and assistance. In the period 2017–2019, the secretariat supported 18 regional, subregional and expert group meetings across all programme areas, convening Parties, multiple other States and national and international partners.

6. The Protocol has also increasingly become a reference for knowledge and data on water, sanitation and health in the pan-European region. A number of analyses, scoping studies and assessments were undertaken to generate a solid evidence base for policy interventions.

7. The Protocol also played a leading role in supporting in-country activities across all programme areas, including by undertaking situation assessments, formulating national targets, strategies and action plans, building technical capacities, implementing field projects and applying guidance tools developed under the Protocol. The joint secretariat, in close cooperation with lead countries and partners, supported national activities and training sessions in nine Parties and in nine other States.

8. In the period 2017–2019, the following publications were produced under different thematic areas of the Protocol:

(a) *Protocol on Water and Health and the 2030 Agenda: A Practical Guide for Joint Implementation* (ECE/MP.WH/16);

¹ See www.unece.org/env/water/pwh_status/legal.html.

² All national summary reports are available at www.unece.org/env/water/protocol_fourth_reporting_cycle.html.

(b) *Strengthening surveillance and outbreak management of water-related infectious diseases associated with water supply systems* (Copenhagen, WHO Regional Office for Europe, forthcoming);

(c) *Strengthening drinking-water surveillance using risk-based approaches* (Copenhagen, WHO Regional Office for Europe, forthcoming);

(d) *Surveillance of water, sanitation and hygiene in schools: A practical tool* (Copenhagen, WHO Regional Office for Europe, forthcoming);

(e) *Improving health and learning through better water, sanitation and hygiene in schools: An information package for school staff* (Copenhagen, WHO Regional Office for Europe, forthcoming);

(f) *Costing and financing of small-scale water supply and sanitation* (Copenhagen, WHO Regional Office for Europe, forthcoming);

(g) *The Human Rights to Water and Sanitation in Practice: Findings and lessons learned from the work on equitable access to water and sanitation under the Protocol on Water and Health in the pan-European region* (ECE/MP.WH/17, forthcoming).

9. Subsidiary bodies under the Protocol on Water and Health continued to successfully implement their mandates. The Bureau of the Protocol held its eighteenth, nineteenth, twentieth, twenty-first and twenty-second meetings in Geneva, on 3 May 2017, 17 November 2017, 26 April 2018, 7 and 8 November 2018, and 5 April 2019, respectively. In accordance with its mandate to oversee the execution of the programme of work, the Bureau worked to facilitate implementation of the planned activities. Due to a lack of financial and human resources in the joint secretariat, the Bureau also had to undertake a prioritization exercise, resulting, for example, in the merging of meetings of the Working Group on Water and Health and the Task Force on Target Setting and Reporting that were planned for 2018–2019. Some activities were postponed to the programme of work for 2020–2022. These changes allowed resources to be saved for the implementation of the programme of work, while also increasing efficiency.

10. The Working Group on Water and Health continued to provide an important forum for discussions on a wide range of issues related to water, sanitation, hygiene and health and the Protocol's implementation and promotion. At its tenth and eleventh meetings (Geneva, 15 and 16 November 2017, and 3 and 4 April 2019, respectively), the Working Group reviewed progress achieved and challenges encountered in implementing the programme of work for 2017–2019 and advised on the priorities for development of the draft programme of work for 2020–2022. Due to financial challenges, only two meetings of the Working Group were organized in the period 2017–2019.

11. The Compliance Committee actively supported the Protocol's implementation by boosting Parties' compliance with the obligation to set targets, engaging in consultations with Estonia, Latvia and Lithuania and raising awareness of the compliance procedure. The lack of resources, however, constrained the scope and ambition of the activities carried out, particularly regarding the Consultation Process.

II. Success factors, challenges and opportunities for future work under the Protocol

12. The progress made and achievements in the implementation of the Protocol's programme of work for 2017–2019 were possible thanks to a number of success factors, including:

(a) The fact that the Protocol has matured as a powerful instrument that supports countries in translating and operationalizing key global and regional policy commitments in the pan-European region. In particular, the Protocol was increasingly recognized and referred to as an engine for implementing the 2030 Agenda for Sustainable Development – specifically Sustainable Development Goals 6 and 3, but also Goals 1, 2, 4, 11 and 13 – by providing a framework for setting targets, reviewing progress and providing tools for realization;

(b) The strengthening, by the Declaration of the Sixth Ministerial Conference on Environment and Health (Ostrava, Czechia, 13–15 June 2017) (Ostrava Declaration), of the Protocol as the primary regional instrument for addressing the Declaration's commitments related to water, sanitation, hygiene and health and calls to advance its implementation. Annex 1 of the Declaration proposes ratification of or accession to the Protocol to strengthen national action towards progressively meeting regional and global commitments for water, sanitation, hygiene and health. The Compendium of possible actions to advance the implementation of the Ostrava Declaration, in the field of water, sanitation, hygiene and health is fully aligned with the Protocol's priorities.³

(c) The thematic expansion of work under the Protocol, particularly regarding regional priority issues such as increasing resilience to climate change and water, sanitation and hygiene (WASH) in schools and health-care facilities, and the continued relevance of other topics covered by the Protocol programme of work, which attracted the interest and attention of key stakeholders. Several donor countries (for example, Finland, with its Programme for Finland's Water Sector Support to Kyrgyzstan and Tajikistan (FinWaterWEI II), and the Swiss Agency for Development and Cooperation) and partner organizations within and outside the United Nations system (for example, the European Union, the Office of the United Nations High Commissioner for Human Rights, the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Children's Fund (UNICEF), and WHO headquarters) established partnerships with the Protocol, either regarding cooperation on technical and policy issues or implementation of field projects;

(d) The alignment of work under the Protocol with water-, sanitation- and health-related matters of relevance across the entire pan-European region, which prompted strategic engagement with key partners such as the European Union. In particular, the Protocol was referenced as a tool for progressive realization of the human rights to water and sanitation in the ongoing discussions on the recast of the Drinking Water Directive,⁴ as well as on the draft European Union Human Rights Guidelines on Safe Drinking Water and Sanitation;⁵

(e) The work of the Protocol also provides a strong pillar for regional implementation of World Health Assembly resolutions 64.24 on drinking water, sanitation and health, and 72.7 on water, sanitation and hygiene in health-care facilities, the WHO *Guidelines for Drinking-water Quality*⁶ and the WHO *Guidelines on Sanitation and Health*,⁷ as well as the WHO global strategy on health, environment and climate change;⁸

(f) The ownership and substantive and financial support provided by the Protocol Bureau, the lead countries – represented by focal points and experts – and relevant partner organizations, was key in achieving progress under the different thematic areas and in increasing the Protocol's political weight and visibility;

(g) The commitment and engagement of the joint United Nations Economic Commission for Europe (ECE)/WHO Regional Office for Europe secretariat staff who had supported Parties, other States and partner organizations in the implementation of the programme of work for 2017–2019, both through substantive contributions, a significant number of subregional and in-country activities, servicing intergovernmental meetings and mobilizing financial resources;

(h) Capitalizing on existing instruments and platforms, such as the National Policy Dialogues on Integrated Water Resources Management operating under the European Union Water Initiative, the Biennial Collaborative Agreements between WHO Regional Office for Europe and Governments, the WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP), the UN-Water Global Analysis and Assessment of Sanitation and Drinking-water (GLAAS) and the WHO small countries initiative,

³ See www.euro.who.int/__data/assets/pdf_file/0008/341945/Annex1_13June.pdf?ua=1.

⁴ Council Directive 98/83/EC of 3 November 1998 on the quality of water intended for human consumption, *Official Journal of the European Communities*, L 330 (1998), pp. 32–54.

⁵ See www.consilium.europa.eu/media/39776/st10145-en19.pdf.

⁶ World Health Organization (WHO) (Geneva, 2017).

⁷ WHO (Geneva, 2018).

⁸ See www.who.int/phe/publications/global-strategy/en/.

strengthened implementation of the Protocol in terms of support for accession, assistance projects, scaling up programmatic activities, tracking progress and providing policy advice on water-, sanitation-, hygiene- and health-related matters.

13. Several persisting challenges, however, hindered further expansion of the work under the Protocol and affected implementation of some activities. These included:

(a) Insufficient financial resources for ensuring implementation of activities and securing an adequate level of secretariat support. Despite financial and in-kind contributions by Parties, other States and organizations, such as the European Union, as well as significant support provided by the United Nations and the WHO regular budget and the efforts of the joint secretariat in mobilizing additional resources, the lack of sustainable, predictable and unearmarked funding continued to be of significant concern and needs to be urgently addressed by the Protocol constituencies;

(b) The fact that available human resources in the joint secretariat did not always match the aspirations of Parties and other States in terms of the scope and amount of activities, which continued to expand in the reporting period. This made it extremely difficult for secretariat staff to cope with the existing workload and meet growing expectations;

(c) Relatively slow progress regarding accession to the Protocol, resulting in no new accessions to the Protocol since the fourth session of the Meeting of the Parties (Geneva, 14–16 November 2016). Nevertheless, important progress was achieved in Montenegro, which is expected to complete its accession process by the end of 2019. Further support from the Bureau and the joint secretariat is crucial in supporting accession by countries mentioned in paragraph 1 above and other States;

(d) Limited leadership and a lack of proactive engagement of some lead Parties and countries had an adverse impact on the implementation of some programme areas, which were however of priority for achieving progress on water, sanitation and health in the pan-European region.

14. The above challenges remained of concern and would be important to address under the programme of work for 2020–2022.

15. In terms of opportunities for future work, the Bureau of the Protocol, with support of the joint secretariat, will intensify efforts to increase the number of Parties in the pan-European region, including regarding accession by the European Union, and further align its work with key global and regional priorities, in order to benefit from synergies and partnerships with main actors in the area of water, sanitation, hygiene and health.

16. Support to Parties and other States in the implementation of the 2030 Agenda and the Ostrava Declaration will remain of utmost relevance in future work under the Protocol.

III. Programme area 1: Improving governance for water and health: support for setting targets and implementing measures

Lead Parties: Romania and Switzerland

A. Setting targets and implementing measures

Main achievements

17. As mentioned in paragraph 2 above, significant progress with target setting was achieved in the period 2017–2019, with several Parties communicating their targets to the joint secretariat and others advancing their target-setting processes. A number of other States also set their targets in the context of the Protocol and submitted them for official adoption at the national level. The Task Force on Target Setting and Reporting, chaired by Switzerland and serviced by ECE, continued to guide and support countries in their efforts, particularly in relation to setting targets in support of implementation of the 2030 Agenda.

18. The Task Force on Target Setting and Reporting's main achievement was the development of the publication *Protocol on Water and Health and the 2030 Agenda: A Practical Guide for Joint Implementation*.⁹ The main objective of the document is to provide step-by-step guidance on how to identify, establish and operationalize the links between the Protocol and the 2030 Agenda. The document highlights the sound approach to, valuable experience in and successful regional platform for implementing the relevant Sustainable Development Goals provided by the Protocol and refers to the tools and methodologies developed in its framework that can be used by all countries dealing with implementation of the 2030 Agenda, irrespective of whether they are Parties to the Protocol or not. The preparation of the publication relied on a broad consultative process, involving a wide range of stakeholders and multiple review stages. A drafting group was established, extensive discussions were held at the level of the Task Force and the Working Group on Water and Health, and a dedicated workshop on setting targets under the Protocol to support implementation of the Sustainable Development Goals (Geneva, 4 and 5 May 2017) was organized.

Overview of activities

19. The Task Force on Target Setting and Reporting held two meetings in the reporting period (Geneva, 5 May 2017, and 24 and 25 April 2018), at which it: reviewed the progress of Parties and other States in implementing and applying articles 6 and 7 of the Protocol in connection with the relevant Sustainable Development Goals; and continued to provide a forum for exchanging experience and sharing good practices and lessons learned on target setting and reporting.

B. Strengthening reporting capacity

20. The participation rate for the fourth reporting exercise held in 2018–2019 continued to be exemplary. All 26 Parties to the Protocol submitted reports within the fourth reporting cycle in accordance with article 7 (5) of the Protocol. Seven other States also voluntarily submitted national reports under the Protocol, some for the first time. The regional report on the status of implementation of the Protocol (ECE/MP.WH/2019/4-EUPCR/1814149/1.2/2019/MOP-5/09), prepared by the joint secretariat with the assistance of the German Environment Agency, contains a comprehensive overview and analysis of the 32 reports submitted by countries in 2019.¹⁰

21. The participation of Parties and other States in the JMP¹¹ and GLAAS for monitoring progress of implementation of the Sustainable Development Goal 6 increased in the reporting period. Fifteen countries participated in the 2018–2019 GLAAS reporting cycle,¹² with dedicated GLAAS country profiles highlighting key findings and priorities for improvement.¹³ The participating countries recognized the added value of the information obtained through JMP and GLAAS for identifying strengths and weaknesses of national

⁹ United Nations publication, Sales No. E.19.II.E.15.

¹⁰ The report of Andorra was submitted on 6 August 2019 and therefore could not be considered in the analysis.

¹¹ *Drinking Water, Sanitation and Hygiene in Schools: Global Baseline Report* (New York, UNICEF/WHO, 2018). Available at <https://washdata.org/sites/default/files/documents/reports/2018-11/JMP%20WASH%20in%20Schools%20WEB%20final.pdf>; *WASH in health-care facilities: global baseline report* (Geneva: WHO and UNICEF, 2019). Available at <https://washdata.org/sites/default/files/documents/reports/2019-04/JMP-2019-wash-in-hcf.pdf>; and *Progress on household drinking water, sanitation and hygiene: 2000–2017. Special focus on inequalities* (New York, UNICEF/WHO, 2019). Available at <https://washdata.org/sites/default/files/documents/reports/2019-07/jmp-2019-wash-households.pdf>.

¹² *National systems to support drinking-water, sanitation and hygiene: Global status report 2019. UN-Water global analysis and assessment of sanitation and drinking water. GLASS 2019 report* (Geneva, WHO/UN-Water, 2019). Available at www.who.int/water_sanitation_health/publications/glaas-report-2019/en.

¹³ Albania, Austria, Azerbaijan, Belarus, Bosnia and Herzegovina, Georgia, Hungary, Kyrgyzstan, Lithuania, Montenegro, the Netherlands, Serbia, Tajikistan, Ukraine and Uzbekistan.

monitoring and surveillance and for policy development and resource allocation needs, and for establishing a baseline and setting national targets under the Protocol.

IV. Programme area 2: Prevention and reduction of water-related diseases

Lead Parties: Belarus and Norway.

A. Water-related disease surveillance

Main achievements

22. Activities on the prevention and reduction of water-related diseases were instrumental in reinforcing implementation of article 8 of the Protocol, particularly regarding strengthening national capacities for water-related disease surveillance, early warning and outbreak response systems, and in advancing implementation of article 6 in terms of setting targets towards reducing water-related diseases and improving surveillance systems.

23. Activities under this programme area supported country actions towards achieving national and global health targets and implementing the requirements of the International Health Regulations related to strengthening national core capacities for surveillance and response, thereby contributing to advancing global health security and achieving targets 3.3 and 3.9 of the Sustainable Development Goals.

24. Institutional capacities regarding effective approaches to the surveillance and management of outbreaks of water-related diseases were strengthened through the establishment of a comprehensive training programme addressing country-specific needs. A range of national capacity-building activities resulted in policy interventions and practical application of improved surveillance and outbreak management methodologies in beneficiary countries.

25. In the period 2017–2019, a practical tool *Strengthening surveillance and outbreak management of water-related infectious diseases associated with water supply systems* was developed. This tool provides evidence-based guidance for health professionals on the specific features, activities and methodologies for water-related infectious disease surveillance and outbreak management and aims to support countries in meeting their obligations under articles 8 and 13 of the Protocol. Two meetings of lead Parties and experts (Bonn, Germany, 3 November 2017; Oslo, 11 and 12 March 2019) supported the development of the document.

Overview of activities

26. A series of three national training workshops on water-related disease surveillance and outbreak response enhanced knowledge and practical skills of health professionals and triggered policy improvement actions in Kyrgyzstan, Armenia and Azerbaijan (Bishkek, 23–25 May 2017; Yerevan, 4–6 June 2018; Baku, 8–10 October 2018). As a result, Armenia, for example, plans to update its national outbreak investigation guidelines by addressing specific aspects related to water-borne outbreaks. Following the recommendations of a capacity-building event (Prague, 30 and 31 May 2016), Czechia has been developing national guidelines on epidemiological and environmental investigation of water-related disease outbreaks.

27. A multi-country workshop on prevention and control of soil-transmitted helminthiasis (Chisinau, 21 and 22 June 2018) reviewed achievements and obstacles in national implementation of the 2015–2020 regional framework for control and prevention of soil-transmitted helminthiasis infections and recommended integrating WASH aspects into national prevention strategies and action planning.

B. Drinking water quality surveillance

Main achievements

28. Activities under the thematic area on drinking-water quality surveillance provided significant support for implementation of article 6 (5) (c) of the Protocol to establish and maintain a legal and institutional framework for monitoring and enforcing standards for the quality of drinking water.

29. The main accomplishment was the development of an advocacy publication *Strengthening drinking-water surveillance using risk-based approaches*, which supports countries in translating the provisions of the WHO *Guidelines for drinking-water quality*¹⁴ and provides a rationale for national and local level decision makers to promote long-term uptake of risk-based approaches in regulations, standard setting and surveillance programming. Thereby, the publication also substantiates implementation of the Sustainable Development Goals and targets focused on ensuring access to safely managed drinking-water services. An expert group meeting (Minsk, 13 and 14 February 2017) supported the development of the advocacy document.

30. Complementary in-country training activities, linked with other thematic areas (for example, water-related disease surveillance and small-scale water supplies and sanitation), supported building of institutional capacities to adopt risk-based surveillance approaches at the national level.

Overview of activities

31. A national workshop on effective approaches to surveillance of water-related disease and drinking-water quality in Azerbaijan (Baku, 8–10 October 2018) was a successful example of inter-thematic work. The workshop defined priority actions, such as updating the national drinking-water quality standard taking into consideration the recommendations of the WHO *Guidelines for drinking-water quality*¹⁵ and establishing a systematic training programme on risk assessment and risk management of water supplies.

32. The above-mentioned activities triggered progress regarding drinking-water quality surveillance in several countries. For example, Belarus and Serbia, which are currently revising their national targets under the Protocol, included specific targets related to the uptake of risk-based approaches in drinking-water surveillance. After the 2015 amendment of the European Union Drinking Water Directive¹⁶ – which introduced risk-based principles for identifying and prioritizing monitoring parameters and frequencies – several Parties and other States amended their national drinking water regulations accordingly.

V. Programme area 3: Institutional water, sanitation and hygiene

Lead Parties and country: Hungary, the Republic of Moldova and Georgia.

A. Strengthening water, sanitation and hygiene in schools

Main achievements

33. Activities in the past triennium expanded and substantially contributed to advancing implementation of article 6 of the Protocol, particularly by promoting setting of specific targets and actions towards providing universal, equitable and sustained water, sanitation and hygiene services in schools in accordance with target 4.A of the Sustainable Development Goals.

¹⁴ World Health Organization (WHO) (Geneva, 2017).

¹⁵ Ibid.

¹⁶ Council Directive 98/83/EC.

34. The Protocol has been providing a unique platform in the pan-European region to address WASH in schools in a multisectoral fashion. It convened collaboration across health, education and environment sectors and across different health domains (such as health promotion and child and adolescent health). Cooperation was established with other relevant United Nations agencies working on children's health and education (such as UNESCO and UNICEF) and with youth organizations. Activities also contributed to strengthening national level cross-sectoral dialogue (for example, in Georgia, the Republic of Moldova and Serbia).

35. The activities contributed to strengthening national surveillance systems to monitor progress with WASH in schools, in accordance with the established JMP indicators. In particular, the new publication *Surveillance of water, sanitation and hygiene in schools: a practical tool* supports countries in improving national surveillance frameworks and developing country-specific targets and service levels for WASH in schools.

36. Another important milestone achieved was the development of the publication *Improving health and learning through better water, sanitation and hygiene in schools: An information package for school staff*, which guides school staff and authorities in taking practical action towards improving health, well-being and learning at school through safe WASH services.

37. Activities in the reporting period also strongly emphasized promotion of policy attention and improvement action to create better conditions for menstrual hygiene management as an integral part of WASH in schools.

Overview of activities

38. A planning meeting of lead Parties (Budapest, 8 and 9 March 2018) reviewed the status of work on WASH in schools under the Protocol and defined the scope, structure and process for developing the two above-mentioned publications on WASH in schools. Six countries, namely Croatia, Georgia, Hungary, Lithuania, the Republic of Moldova and Serbia, piloted the application of the draft tools, providing feedback in support to their finalization.

39. The third meeting of the Expert Group on WASH in schools (Bonn, Germany, 23 and 24 October 2018) brought together experts from different sectors and organizations to: exchange experiences on challenges and solutions related to WASH in schools in the pan-European region; and, appraise new data on menstrual poverty and showcase good practices on menstrual hygiene management (for example, from Kyrgyzstan, North Macedonia and the United Kingdom of Great Britain and Ireland (Scotland)).

B. Strengthening water, sanitation and hygiene in health-care facilities

Main achievements

40. Activities in the reporting period substantially raised the profile of and attention to WASH in health-care facilities at the regional and national levels. The work under the Protocol supported the global policy development process. At the seventy-second session of the World Health Assembly (Geneva, 20–28 May 2019), several Parties to the Protocol expressed strong support for and commitment to adopting and implementing the resolution on WASH in health-care facilities. This resolution calls upon countries to prioritize WASH in health-care facilities as a fundamental prerequisite for ensuring quality health-care services and patient safety, and for tackling antimicrobial resistance.

41. The work supported the setting of targets in accordance with article 6 of the Protocol. It fostered the integration of Sustainable Development Goal 6 indicators for WASH in health-care facilities into national monitoring frameworks and supported national and subnational baseline analyses. These assessments provided a solid evidence base for developing national targets, defining advanced service levels and identifying policy interventions and sustainable improvements at the national and local levels.

42. The most recent example of policy impact was in Tajikistan, where WASH aspects were integrated into the national action plan for antimicrobial resistance (adopted by the

Government in May 2018) and WASH in health-care facilities is an integral part of the national health strategy for 2020–2030 (under revision).

Overview of activities

43. The first regional meeting on WASH in health-care facilities (Bonn, Germany, 27 and 28 September 2017)¹⁷ served as an important platform for: reviewing the situation in the pan-European region; identifying good practices in this domain; and raising policy attention towards scaling up efforts to implement the Ostrava Declaration and the targets of the Sustainable Development Goals related to ensuring universal and equitable access to adequate WASH services in health-care facilities.

44. In-depth national assessments of WASH in health-care facilities were facilitated in Hungary and Serbia to assess the strengths and gaps with respect to the enabling policy environment and WASH-service provision in health-care facilities and to identify context-appropriate follow-up actions for improvement.

45. Extensive work on WASH in health-care facilities took place in Tajikistan. It focused on: reviewing existing policies and standards to recognize current gaps; organizing a national-level round table to identify short- and long-term policy actions; and providing in-depth training for trainers on the application of the WHO Water and Sanitation for Health Facility Improvement (WASH FIT) tool, including its application in selected pilot facilities as a basis for scaling-up.

VI. Programme area 4: Small-scale water supplies and sanitation

Lead Parties: Germany and Serbia.

Main achievements

46. Small-scale water supplies and sanitation is one of the long-standing areas of work under the Protocol that has led to increased political attention and actions at the national and local levels towards improving such systems. By focusing attention on small and remote rural systems, activities significantly contributed to reducing rural-urban disparities, and thereby to the progressive realization of the human rights to water and sanitation and the achievement of safe, universal and equitable drinking-water and sanitation services stipulated by regional and global policy commitments.

47. Key attainments include: closing data gaps related to rural systems; and scaling-up dissemination and use of a wide range of tools, experiences and good practices across the pan-European region. Subregional capacity-building events, which covered almost the entire region, contributed to the identification of ways and means to improve the situation of small-scale systems. As a result, an increasing number of countries developed, or are currently updating, national targets and/or regulations addressing the specific requirements related to management and surveillance of such systems.

48. Expansion of cross-programmatic linkages, in particular with the programme areas on safe and efficient management of water supply and sanitation systems and drinking-water quality surveillance, contributes to the integration of activities under the Protocol, resulting in an effective use of available resources and a streamlined impact in the country context.

Overview of activities

49. Subregional workshops on small-scale water supplies and sanitation were organized for countries of Eastern Europe (Minsk, 15–17 March 2017),¹⁸ South-Eastern Europe

¹⁷ Meeting report available at www.euro.who.int/en/health-topics/environment-and-health/water-and-sanitation/publications/2019/improving-water,-sanitation-and-hygiene-in-health-care-facilities-2019.

¹⁸ Meeting report available at www.euro.who.int/en/health-topics/environment-and-health/water-and-sanitation/publications/2017/subregional-workshop-on-improving-small-scale-water-supply-and-sanitation-for-better-health-meeting-report-2017.

(Belgrade, 10–12 October 2017),¹⁹ Nordic and Baltic countries (Vilnius, 22 November 2017) and the European Union member States (Dessau, Germany, 18–20 June 2018).²⁰ These events provided an opportunity to review the situation at the national and subregional levels, identify common and country-specific challenges, exchange experiences and good practices related to safe and sustainable small-scale water supply and sanitation services in rural areas and inspire relevant policy actions and programmes.

50. A national capacity-building workshop on small-scale water supply for decision makers and local authorities in Uzbekistan (Tashkent, 7 and 8 September 2017) identified the main challenges and gaps in the management of small systems and recommended undertaking assessments of rural small systems, setting specific targets on small systems and developing a road map for the safe management of water supply and sanitation systems.

51. Subregional and national events triggered concrete follow up actions and progress in setting targets and developing national guidelines and standards (for example, Albania, Azerbaijan, Germany, the Republic of Moldova, Romania and Serbia), improving qualification of small system operators (for example, Armenia and North Macedonia), scaling-up uptake of the water safety plan approach and risk-based surveillance in small-scale systems (for example, Belarus, France, Germany, Hungary, Luxembourg, Romania and Tajikistan).

52. Addressing one of the key challenges faced in the management of small-scale systems, a publication on *Costing and financing of small-scale water supply and sanitation* was developed. The document targets national and subnational policymakers and aims to raise awareness and provide guidance on defining strategies and key principles for the financing of costs related to the provision of small-scale water supply and sanitation services.

VII. Programme area 5: Safe and efficient management of water supply and sanitation systems

Lead Parties and organization: Bosnia and Herzegovina, the Netherlands and the International Water Association.

Main achievements

53. The programme area served as a technical hub for supporting countries in implementing key recommendations of the WHO *Guidelines for Drinking-water Quality*²¹ and the WHO *Guidelines on sanitation and health*,²² in particular, risk-based approaches to managing drinking-water supply and sanitation systems. Activities therefore contributed to ensuring the provision of safely managed water and sanitation for everyone in the pan-European region and supporting achievement of Sustainable Development Goal 6 and the relevant commitments of the Ostrava Declaration. This programme area was implemented in synergy with programme area 7 on increasing resilience to climate change.

54. Achievements included broad uptake of risk-based management approaches in national policies, regulations and practical application. The Protocol supported broad and comprehensive policy advocacy and capacity-building activities on water safety plan and sanitation safety plan approaches. This led to increasing number of countries setting specific targets (for example, Croatia, the Republic of Moldova, Serbia and Tajikistan) and developing national road maps and/or guidelines towards long-term implementation of water safety plans (for example, Albania, Hungary, the Republic of Moldova, Romania, Serbia and

¹⁹ Meeting report available at www.euro.who.int/en/health-topics/environment-and-health/water-and-sanitation/publications/2018/subregional-workshop-on-improving-small-scale-water-supply-and-sanitation-for-better-health.-meeting-report-2017.

²⁰ Meeting report available at www.euro.who.int/en/health-topics/environment-and-health/water-and-sanitation/publications/2018/subregional-workshop-on-improving-small-scale-water-supplies-for-better-health-in-european-union-countries.-meeting-report-2018.

²¹ WHO (Geneva, 2017).

²² WHO (Geneva, 2018).

Tajikistan). Through collaboration with WHO Regional Office for Europe and the European Commission, the ongoing recast of the European Union Drinking Water Directive²³ is expected to align with water safety plans principles.

55. The increased attention to sanitation-related matters in the pan-European region is a further accomplishment. In particular, a scoping study aimed at reviewing sanitation policies, wastewater collection, treatment, disposal and reuse practices, as well as the impacts on health and the environment, led to an improved evidence base on the situation in the pan-European region.

56. The organization of the first workshop on sanitation in the pan-European region (Bonn, Germany, 12 and 13 February 2019) led to the establishment of the rationale for advocating for adequate and safely managed sanitation services and, thereby, an increased awareness and commitment of national policymakers in improving the situation and identification of future needs under the Protocol in this area of work.

Overview of activities

57. The Pan-European Symposium on Water and Sanitation Safety Plans and Extreme Weather Events (Bilthoven, Netherlands, 6 and 7 April 2017)²⁴ provided an opportunity to share country experiences and challenges in the light of the increased risk of extreme weather events for drinking water and sanitation services. It also promoted water safety plans and sanitation safety plans as important tools for ensuring climate resilience and recommended climate vulnerability assessments.

58. In the period 2017–2019, capacity-building workshops on water safety plans were conducted in Bosnia and Herzegovina, Croatia, Hungary, Italy, Lithuania, Serbia and Tajikistan, with the aim of building institutional and technical capacities in water safety plan implementation and auditing and triggering policy developments towards their long-term uptake in regulations and practice. A regional capacity-building workshop on sanitation safety plans (Bonn, Germany, 14 February 2019) raised awareness of sanitation safety plan principles and promoted their application at the national level.

VIII. Programme area 6: Equitable access to water and sanitation: translating the human rights to water and sanitation into practice

Lead Parties: France and Hungary.

Main achievements

59. The work supporting the implementation of the Protocol's requirement to ensure access to water and sanitation for all, including those suffering a disadvantage or social exclusion (art. 5 (l) of the Protocol), continued to be a flagship activity under the Protocol and prompted significant progress towards the progressive realization of the human rights to water and sanitation in the pan-European region. In-country activities and regional exchange of experience resulted in increased consideration of equity aspects in policymaking processes. Several countries, such as Armenia, Belarus, Bulgaria, France, Hungary, Serbia and Ukraine, had applied the equity lens when setting or revising targets under the Protocol and in the relevant legislation and policy reforms. A number of countries, such as Azerbaijan, France, North Macedonia, Portugal, the Republic of Moldova and Spain, implemented concrete measures to improve the equity of access at national level.

²³ Council Directive 98/83/EC.

²⁴ Meeting report available at www.rivm.nl/bibliotheek/rapporten/2018-0169.pdf.

Overview of activities

60. Several in-country activities were undertaken to support the assessment of the situation of equity of access to water and sanitation based on the *Equitable Access Score-card: Supporting policy processes to achieve the human right to water and sanitation*.²⁵ Dedicated national events were organized in Serbia (Belgrade, 27 July 2017 and Kragujevac, 6 and 7 December 2017), Bulgaria (Sofia, 18 and 19 January 2018 and 7 and 8 June 2018) and Azerbaijan (Baku, 5 July 2018). During the triennium, national assessments of equitable access to water and sanitation were finalized and the relevant country analysis reports were produced in Azerbaijan, Bulgaria and Serbia, contributing to the identification of needs and priorities for the improvement of equity of access.²⁶ Belarus is currently in the process of carrying out such an assessment. Partnerships between governmental institutions, non-governmental organizations (NGOs), regional development agencies and national human rights institutions proved to be effective in collecting information, raising awareness of the equity challenges faced in the countries and defining and implementing priority measures.

61. Armenia, North Macedonia and Serbia developed national and/or local equitable access action plans²⁷ on the basis of the *Guidance Note on the Development of Action Plans to Ensure Equitable Access to Water and Sanitation*,²⁸ based on the outcomes of the previous self-assessments of equitable access. The following consultations and workshops supported the above-mentioned developments: Yerevan, 7 April and 12 May 2017, Skopje, 4 and 5 December 2017, and Belgrade, 15 August 2018 and 21 December 2018. The equitable access action plans developed in Armenia and Serbia were officially endorsed by the respective Governments in August 2017 and February 2019, respectively. In Armenia, progress in implementing the action plan was monitored under the Steering Committee of the National Policy Dialogue.

62. Experiences in carrying out assessments, developing action plans, as well as identifying, financing and implementing concrete solutions to improve equitable access, were shared during the fourth and fifth meetings of the Expert Group on Equitable Access to Water and Sanitation (Budapest, 13 and 14 September 2017, and Paris, 26 and 27 June 2018, respectively). The Expert Group, with support from the lead Parties and co-secretariat, developed the publication *The human rights to water and sanitation in practice: Findings and lessons learned from the work on equitable access to water and sanitation under the Protocol on Water and Health in the pan-European region* (forthcoming), capitalizing on the experience and lessons learned from the work on equitable access under the Protocol since 2010.

63. The work on equitable access to water and sanitation under the Protocol was also promoted at several international forums by organizing dedicated events such as: the side event “Water, sanitation, hygiene and health: Closing the equity gap” at the Sixth Ministerial Conference on Environment and Health (Ostrava, Czechia, 13–15 June 2017); a special session “International Mechanisms and Procedures to Realize the Human Rights to Water and Sanitation” at the Eighth World Water Forum (Brasília, 18–23 March 2018); and the events “Mobilizing national and local governments for the human rights to water and sanitation” and “How to increase the impact of WASH sector diagnosis tools?” at the 2019 World Water Week (Stockholm, 25–30 August 2019).

IX. Programme area 7: Increasing resilience to climate change

Lead Party and country: Spain and Italy.

²⁵ United Nations publication, ECE/MP.WH/8.

²⁶ Country reports on the situation of equitable access to water and sanitation are available at www.unece.org/env/water/pwh_work/equitable_access.html

²⁷ Action plans for equitable access to water and sanitation for Armenia, North Macedonia and Serbia are available at www.unece.org/env/water/pwh_work/equitable_access.html.

²⁸ United Nations publication, ECE/MP.WH/15.

Main achievements

64. The area of work on increasing resilience to climate change was new in the programme of work for 2017–2019. Nevertheless, important achievements were made in terms of starting the dialogue on and promoting the need for consideration of climate change aspects in the area of water, sanitation and health, focusing on the issue of extreme weather events and, in particular, water scarcity. The work was implemented in synergy with the programme area 5 on safe and efficient management of water supply and sanitation systems and in cooperation with the global climate programme of the Water Convention.

Overview of activities

65. The International Workshop on Water Scarcity: Taking action in transboundary basins and reducing health impacts (Geneva, 11 and 12 Geneva 2017),²⁹ organized under the leadership of the Governments of Italy, the Netherlands and Switzerland in cooperation with the Water Convention and a number of other international partners, led to increased capacity for addressing water scarcity, thereby reducing the related health, social, economic and environmental risks by sharing practical solutions, tools and approaches, in particular from the perspective of transboundary water cooperation and health impacts.

66. The above-mentioned Pan-European Symposium on Water and Sanitation Safety Plans and Extreme Weather Events was a joint activity under programme areas 5 and 7.

67. Italy, as the lead country, also made significant efforts to promote increased resilience to climate change at the national and international levels. Under the Italian Group of 7 Presidency 2017, the Protocol approaches in relation to water and sanitation aimed at adapting to climate change impacts were reflected in the communiqué of the Group of 7 Milan Health Ministers' Meeting (Milan, 5 and 6 November 2017).³⁰ The Government of Italy also organized the First Scientific Symposium on "Health and Climate Change" (Rome, 3–5 December 2018), at which the Protocol was presented and discussed.

68. Due to financial limitations, the workshop on building resilience to climate change in urban areas foreseen to be implemented in the period 2017–2019 was postponed to the programme of work for 2020–2022.

X. Programme area 8: Assistance to support implementation at the national level

Responsible bodies: Bureau and the joint secretariat.

69. The National Policy Dialogues on Integrated Water Resources Management and Water Supply and Sanitation, supported by the European Union Water Initiative Plus for the Eastern Partnership programme, financed by the European Union, and co-serviced by the ECE secretariat, provided a political and technical platform and financial and expert support in setting targets and capacity development in Armenia, Azerbaijan, Belarus, Georgia, the Republic of Moldova and Ukraine. The National Policy Dialogues also promoted accession to the Protocol in Armenia, Georgia, Kyrgyzstan and Tajikistan.³¹

70. A major achievement under the National Policy Dialogues was the official adoption of the national targets under the Protocol in Azerbaijan in 2018. In Ukraine, the final draft of the new revised national targets is currently under consideration for adoption at the appropriate government level. Furthermore, in both countries, ECE also provided logistical and methodological expert support in developing the national summary reports within the fourth reporting cycle. In Belarus and the Republic of Moldova, the revision of national targets previously set under the Protocol was expected to be completed in 2019. In the

²⁹ See www.unece.org/index.php?id=43633.

³⁰ See www.g7italy.it/en/news/g7-ministerial-meeting-on-health-discussion-will-focus-on-the-crucial-topics-of-global-health/.

³¹ Detailed information on activities and events under the National Policy Dialogues in the context of the Protocol is available at www.unece.org/env/water/npd/countrydialogues.html.

Republic of Moldova, the revision was also being carried out along with the implementation of the target related to equitable access.

71. The revision of targets developed in the context of the Protocol was also completed in Armenia, and the revised targets were submitted to the Ministry of Environment for adoption.

72. In addition to in-country activities, a subregional workshop on synergies and joint implementation of the Protocol on Water and Health, the relevant European Union Directives, particularly the Urban Wastewater Treatment Directive³² and the Drinking Water Directive³³ recast, as well as the relevant Sustainable Development Goals, was organized by ECE for the above-mentioned countries back-to-back with the eleventh meeting of the Working Group on Water and Health (Geneva, 2 April 2019).³⁴

73. An important achievement under the Protocol's programme of work for 2017–2019 was the finalization of the project "Implementation of national water and health targets in Kyrgyzstan and Tajikistan through National Policy Dialogues", funded by FinWaterWEI II and implemented by ECE in partnership with the national authorities. The three-year project culminated in revised targets set in the context of the Protocol and comprehensive action plans with specific activities, analysis of synergies with the Sustainable Development Goals and a strategy to mobilize financial resources by the government and donor community developed in both countries. In Tajikistan, the Government of Tajikistan entrusted the Steering Committee of the National Policy Dialogue with the official adoption of the targets and the action plan in November 2018. In Kyrgyzstan, the action plan was endorsed by the Steering Committee of the National Policy Dialogue in July 2017 and then submitted to the Government of Kyrgyzstan in January 2018. The Steering Committee suggested that the proposed targets and measures should be integrated into the implementation programme for the Kyrgyz Sustainable Development Strategy that was under development. This approach of promoting integration of project results into national legislation has proved successful for the sustainability of project results and can be replicated in future assistance activities under the Protocol.

74. In addition to the preparation of the action plans, the project supported the development of rules for exploitation and control of wastewater treatment facilities and wastewater discharge and rules for industrial wastewater collection in the centralized sanitation systems to be officially adopted by the Government of Kyrgyzstan, a methodology for collecting and managing statistical data on drinking water for the Tajik State Statistics Office and draft chapters of the National Water Strategy of Tajikistan.

75. In Tajikistan, the three-year advisory project "Small and safe: Scaling-up water safety planning and effective water quality monitoring in rural Tajikistan", implemented by WHO Regional Office for Europe and financially supported by FinWaterWEI II, has led to major policy achievements, in particular, integration of water and sanitation safety planning approaches in the new law on drinking water and sanitation. It has also supported practical implementation of the water safety plan approach in rural areas across the country and strengthening of government capacities for effective drinking-water quality surveillance.

76. WHO Regional Office for Europe provided technical support through its Biennial Collaborative Agreements to twelve countries (Bosnia and Herzegovina, Croatia, Hungary, Kazakhstan, Kyrgyzstan, Lithuania, Montenegro, the Republic of Moldova, Serbia, Tajikistan, Turkmenistan and Uzbekistan). Activities included policy advice, support for national target-setting processes and capacity-building on all thematic priorities under the Protocol, including on: implementing the water safety plan approach; improving surveillance of drinking-water quality and water-related diseases; improving small-scale water supply and sanitation systems; and assessing WASH conditions in health-care facilities.

77. In terms of support for accession to the Protocol, the Iceland Statement. Ensuring safe and climate-resilient water and sanitation, adopted at the fifth high-level meeting of the WHO

³² Council Directive 91/271/EEC of 21 May 1991 concerning urban wastewater treatment, *Official Journal of the European Communities*, L 135 (1991), pp. 40–52.

³³ Council Directive 98/83/EC.

³⁴ See www.unece.org/index.php?id=51497 for more information about the workshop.

small countries initiative (Reykjavik, 26 and 27 June 2018), according to which countries committed to ratify or accede to the Protocol by 2022, has facilitated the accession progress in countries such as Montenegro.

78. The joint secretariat also promoted accession to the Protocol by organizing a briefing on the Protocol obligations in Uzbekistan (Tashkent, 6 September 2017), a dedicated meeting with a broad group of national stakeholders in Montenegro (Podgorica, 6 December 2018) and participated in two consultations with the national authorities in Italy (Rome, 3 December 2018, and 25 June 2019).

79. The Protocol was also promoted during the High-level Action Panel on Drinking Water and Sanitation at the High-level International Conference on the International Decade for Action, “Water for Sustainable Development, 2018–2028” (Dushanbe, 20 and 21 June 2018).

XI. Programme area 9: Compliance procedure

Responsible body: Compliance Committee.

80. The Committee reviewed compliance with the obligation to set targets and target dates under the Protocol with the aim of having a clear understanding of the status of target setting by Parties. It therefore requested the secretariat to contact Parties that had not communicated their targets to ask them to provide information about their target-setting process or to submit the formally established targets. The above-mentioned request triggered communication of targets by several Parties and advancement of the target-setting processes in a number of countries.

81. The Committee also engaged in a Consultation Process with Estonia, Latvia and Lithuania. Consultations took place in 2017–2018 and had the following components: a stock-taking exercise to understand the situation regarding water, sanitation and health in each country; provision of specific advice covering specific challenges faced by each country and a number of cross-cutting priorities, namely the target-setting process under the Protocol and its relationship with the implementation of European Union legislation, small-scale water supply and sanitation systems, the organizational structure at the domestic level and financing; and an interpretive note “The provisions of the Protocol on Water and Health and their relationship with the European Union law governing water and health” (ECE/MP.WH/2019/5/Add.1-EUPCR/1814149/1.2/2019/MOP-5/11/Add.1).

82. The three Parties highlighted the fact that the Consultation Process had been useful in triggering action and advancing implementation of the Protocol at national level and that it had furthered intersectoral and inter-State cooperation on water, sanitation and health.

83. The Committee did not receive any submissions, referrals or communications during the intersessional period. It therefore worked on raising awareness of the compliance procedure, including by developing a summary guide for the submission of communications from the public, reaching out to relevant NGOs, and establishing cooperation with the Special Rapporteur on the human rights to safe drinking water and sanitation and the relevant human rights treaty bodies.

84. Lastly, the Committee analysed the summary reports submitted by Parties to the Protocol and other States within the fourth reporting cycle, with the aim of having a clear picture of overall implementation of the Protocol in each reporting country, focusing on the completeness, quality and accuracy of reports.

85. In the reporting period, the Compliance Committee, serviced by ECE, held its fourteenth, fifteenth, sixteenth, seventeenth and eighteenth meetings (Geneva, 13 and 14 March 2017, 13 and 14 November 2017, 6 and 7 March 2018, 5 and 6 November 2018, and 1 and 2 July 2019, respectively). The reports of these meetings are available on the Committee’s website.³⁵

³⁵ See www.unece.org/env/water/pwh_bodies/cc.html.

86. A detailed account of the activities of the Committee, including the considerations of the Committee on the fourth reporting exercise, is contained in its report to the fifth session of the Meeting of the Parties (ECE/MP.WH/2019/5-EUPCR/1814149/1.2/2019/MOP-5/11). The report also contains a draft decision on general issues of compliance for adoption by the Meeting of the Parties and is accompanied by the above-mentioned interpretive note.
