Protocol on Water and Health

The Protocol on Water and Health specifies that in pursuing the aims of access to drinking water and provision of sanitation for everyone, special consideration should be paid to ensure equitable access for all members of the population.

Three critical factors for ensuring equitable access to water and sanitation are identified in the publication *No one left behind: good practices to ensure equitable access to water and sanitation:*

1. Reducing geographical disparities in service provision.
2. Overcoming barriers to access faced by vulnerable and marginalized groups.
3. Ensuring financial affordability for users.

It also recognizes that the realization of the right to water and sanitation requires a political commitment and that governance frameworks should be steered applying an “equitable access lens”.

A major difficulty in addressing these inequities is the lack of both a detailed picture of the level of access for all population groups and a clear understanding of the main factors at the origin of the inequities.

A NEW TOOL TO ASSESS THE SITUATION OF EQUITABLE ACCESS TO WATER AND SANITATION

The Equitable Access Score-card is a self-assessment tool designed to help Governments and other stakeholders establish a baseline measure of the equity of access to water and sanitation, identify related priorities and discuss further targets to be set and actions to be taken to improve access and monitor progress over time.

The Score-card focuses on selected issues (or possible areas of actions) and indicators that provide a solid overview of the situation on access to water and sanitation in terms of equity. It lists policy options that can be adopted at a country, region or city level to improve equitable access to water and sanitation services. The user is expected to provide and justify a score for each policy option, reflecting the availability of specific data, the existence of a focused public policy, dedicated public funding and corresponding measures. The Score-card is a flexible tool and the objectives of the self-assessment should be tailored to needs for informing an existing or planned policy process.
AN INTERSECTORAL PROCESS TO DEVELOP AN AGREED SITUATION ANALYSIS AND COMMONLY DEFINE STRATEGIC PRIORITIES

The use of the Score-card brings together representatives of the health, environment, social, finance and other sectors, from ministries or other public authorities, as well as water and sanitation service providers and civil society organizations, to gather and evaluate existing information on equity of access to water and sanitation.

It helps introduce an evidence-based and structured approach to the discussions among stakeholders to enable an objective debate on priorities to be set to fill information and policy gaps related to equitable access to water and sanitation services. The time frame for the self-assessment exercise is about a year.

USING THE SCORE-CARD HAS ALREADY INFLUENCED POLICY PROCESSES IN DIFFERENT COUNTRIES

The Score-card has already been used in various settings and proven useful as an input to policy processes.

UKRAINE – The assessment carried out in Ukraine showed that national public policies include a number of strategic orientations that contribute to providing equitable access to water and sanitation. However, sectoral approaches are not coordinated and funds are often not available to turn these strategies into action. Many inequities remain, with large geographical disparities: in urban areas, 88 per cent of the population have access to centralized water supply and 61 per cent have access to centralized sanitation, while only 23 per cent of rural inhabitants have access to centralized water supply and only 2.6 per cent to centralized sanitation. In the city of Sevastopol, the exercise revealed that the homes of users who could not pay their bills would be disconnected from the sewerage system. This led to the organization of a wide public consultation to find a solution.

FRANCE (Greater Paris urban area) – The exercise in Paris showed that specific measures have been taken to address the needs of vulnerable and marginalized groups. Some 400 public toilets, 30 public baths and 1,000 fountains are available free of charge in Paris for people without a fixed residence to access water and sanitation. Specific funds, maintained by water and wastewater operators, are available to support those with low incomes to pay their water bill through the Housing Solidarity Fund and other municipal funds. In addition, as a matter of policy, those who cannot afford to pay their water and sanitation bill cannot be disconnected for that reason. In recognition of the benefits of the assessment in the greater Paris urban area, the future national health and environment plan might include a recommendation that regional health agencies use the Score-card to identify inequities and develop a strategy to reduce them.

More information at:
www.unece.org/env/water/pwh_work/equitable_access.html

The Equitable Access Score-card: supporting policy processes to achieve the human right to water and sanitation available at: www.unece.org/index.php?id=34032