

## REPORT

### ON THE SEMINAR FOR NORDIC AND BALTIC COUNTRIES

#### “DRINKING WATER AND SANITATION IN A NORDIC AND BALTIC PERSPECTIVE – COMMON CHALLENGES AND COLLABORATION”

(Oslo, 7-8 November 2012)

#### I. INTRODUCTION

1. The seminar for Nordic and Baltic countries "Drinking water and sanitation in a Nordic and Baltic perspective – common challenges and collaboration" was held on 7 and 8 November 2012 in Oslo, Norway. The seminar was organized by the Norwegian Ministry of Health and Care Services, in cooperation with the Nordic Council of Ministers.

2. The seminar was attended by twenty eight experts from the following countries: Belgium, Estonia, Hungary, Iceland, Latvia, Lithuania, Norway, and Sweden.

3. The seminar was linked to the programme of work of the United Nations Economic Commission for Europe (UNECE)/World Health Organization Regional Office Europe (WHO-Europe) Protocol on Water and Health, in particular in relation to the area of work “Setting targets and reporting”. Representatives of the joint UNECE/WHO-Europe secretariat also attended the meeting. All presentations delivered at the workshop are available at

[http://www.unece.org/env/water/meetings/nordic\\_baltic\\_subregional\\_seminar\\_oslo.html](http://www.unece.org/env/water/meetings/nordic_baltic_subregional_seminar_oslo.html)

#### II. OBJECTIVES

3. The purpose of the seminar was to discuss the following issues:

- Challenges in the area of drinking water and sanitation in the Nordic and Baltic countries;
- Role of UNECE/WHO-Europe Protocol on Water and Health in addressing these challenges;
- Opportunities for Nordic and Baltic countries to benefit from the Project Facilitation Mechanism developed under the Protocol on Water and Health in order to establish coordinated and better targeted aid and assistance policy in the water and sanitation sector;
- Possibilities for closer cooperation between Nordic and Baltic countries in the area of drinking water and sanitation as well as in the area of water management, both at national and transboundary levels.

#### III. SUMMARY OF DISCUSSIONS

##### Opening remarks

4. The seminar was opened by Ms. Nina Tangnæs Grønvold, Deputy Minister/State Secretary, Ministry of Health and Care Services of Norway. Ms. Grønvold welcomed the participants and described the event as a unique opportunity to discuss drinking water and sanitation management in the Nordic and Baltic countries in order to identify common challenges and the ways and means to address them. She emphasized that these countries share much of the same geography and population structure, with many small water and sanitation facilities and a few large ones. It was underlined that while in the Nordic and Baltic countries most people have access to improved water and sanitation, many challenges still remain. The aim of the seminar would be to discuss if such challenges could be addressed by establishing a Nordic/Baltic network on drinking water and sanitation.

5. The presenter noted that currently most Norwegian consumers have access to a good quality drinking water. These results were achieved with the contribution of the Protocol on Water and Health to which Norway is an active Party. Ms. Grønvold introduced the Protocol as a unique tool that offers a framework to analyze national situation and target its challenges. It also facilitates focusing the attention of decision makers on actions that are needed for improvement and creates a platform for bringing together different stakeholders.

#### **Session 1: Presentation of challenges in the area of drinking water and sanitation and experience sharing**

7. In the course of the first session, the representatives of Nordic and Baltic states shared information on the situation with water and health as well as its main challenges in their respective countries. It came out strongly from the presentations that all countries present at the seminar were facing similar problems such as a significant number of small scale water supply systems, complex distribution of responsibilities among multiple authorities, need for capacity-building and lack of financing. Climate change was repeatedly mentioned as a factor that will put more pressure on the sewage systems in future.

8. Representative of the Norwegian Department of Public Health explained that in a country like Norway, which is rich in water, the management of water resources is crucial to secure access of population to safe and clean drinking water and sanitation. Although the water quality is generally good, the country faces risks of local pollution due to the large amount of storm waters introduced in the sewage systems. Another very important concern is the aging of drinking water supply systems, slow renewal of the pipelines and the consequent leakages. In addition, public and private small scale supply systems receive inadequate treatment in some cases. Norway has taken steps towards addressing these challenges by adopting a new Act on Public Health and establishing a coordination group with members from all relevant ministries. Inspections of drinking water supply systems have also been intensified.

9. A participant from Estonia asked whether the Norwegian legislation provided for a special storm water tax. It was explained that no specific tax is foreseen in the legislation and that the storm waters fall under the general municipality tax for water and sanitation. It was underlined that the storm waters are increasingly attracting attention and the establishment of a specific body dealing with this issue is being considered.

10. Representatives of Swedish National Food Agency informed about the fragmentation of responsibilities for drinking water issues among different authorities in Sweden. In order to improve coordination, since 2009, the National Food Agency, which is the central supervisory authority in Sweden for matters relating to food, including drinking water has been tasked by the Government with coordinating the drinking water sector. Coordination must focus on adaptation to climate change and crisis preparedness among other issues. The Swedish National Network for Drinking Water<sup>1</sup> has been established as a tool to support coordination efforts.

11. The presentation then focused on describing the Swedish drinking water supply system and its main challenges, including waterborne outbreaks, pollution of surface and ground waters due to the sewage and storm water overflow as well as challenges in treatment and distribution. Moreover, climate change is an issue that would have to be addressed in the nearest future since the country is already experiencing the dual challenge of increased flows in winter and droughts in summer.

12. Representatives of Sweden emphasized the country's strong interest in creating the network for drinking water and sanitation which could include Nordic and ideally also the Baltic countries. Cooperation could be established in the field of education, risk assessment, development and application of research programmes as well as information sharing between the Nordic and Baltic authorities regarding transboundary risks and threats. This initiative was well received by the participants.

13. Representative of the Estonian Ministry of Environment outlined the main water issues in his country, including improving wastewater treatment, drinking water quality and past contaminated sites. The specificity is that the country is entirely located in the catchment area of the Baltic Sea with groundwater as a main drinking water source. The speaker provided an overview of Estonian legislation which closely follows the EU water-related Directives. Major investments are currently being made in order to meet ambitious targets and deadlines set by the EU Directives. The presenter also referred to the environmental charges which proved to be an effective instrument for the protection of the environment and led to significant increase in the State environmental investments. The presenter also touched upon the issue of the price for water services which according to the Estonian 1995 Act on Water Supply and Sewage must guarantee the sustainability of water infrastructure. In order to make the price setting procedure more transparent, the Water Price Control Mechanism was established in 2011. In this regard, Mr. Roger Aertgeerts, an independent expert, underlined that full cost recovery will be essential to ensure sustainability of water services.

14. Representative of the Estonian Health Board – institution in charge of providing leadership in the degree specified in the legislation governing health care matters and in performing surveillance and enforcement functions to assure compliance with legal requirements – informed about the drinking water quality requirements, organization of drinking water supply and Public Health Services duties such as regular control and information to the public. The presenter highlighted importance of ensuring drinking water quality in hospitals, children's establishments and food enterprises.

15. Lithuania has a large amount of fresh water and groundwater resources of relatively good quality of which only a small percentage is used for drinking water needs (mainly groundwater). The

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<sup>1</sup> <http://www.slv.se/en-gb/Group1/Drinking-Water/Swedish-Network-for-Drinking-Water/>

main challenges come from the small scale and individual water supply systems which are a traditional deeply rooted practice in the country. Decreasing fluoride and arsenic content in the endemic areas is also issue of concern. Representative of the Lithuanian National Food and Veterinary Risk Assessment Institute also briefed the participants about distribution of responsibilities between different authorities and the on-going water reform led by the Ministry of Environment with the aim of concentrating management and financial resources. The presenter informed that the objective in the field of drinking water supply is to enlarge the operators' network to one per municipality with the target of connecting up to 95% of population to the public supply network by 2015. The presenter also informed about the need for mitigation measures for fluoride and arsenic levels in the endemic areas. Water safety plan (WSP) approach is appreciated, however there is no legal application.

16. Representatives of Latvia from different ministries and institutions dealing with water and health issues provided a detailed overview of the situation in their country, including institutional setup, policy planning and legislation, drinking water supply systems, monitoring, quality and access to water and sanitation. As in its neighbouring countries, the biggest share of the drinking water supply in Lithuania comes from groundwater. The country also faces the challenge of small scale or individual water supply systems which is typical for all Nordic and Baltic states. It was underlined that the situation with water quality recently improved as a result of the allocation of EU funds to the municipalities. The presenters mentioned a number of challenges to be addressed in the near future: improvement of access to drinking water and sanitation in small agglomerations, decreasing of iron level in groundwater sources and renovation of old water supply and wastewater collection systems.

17. In Iceland, which is very rich in water resources, the density of population is quite low which makes the rate of availability of freshwater very high. Surface waters are the main source of drinking water supply. The representative of the Ministry of Welfare of Iceland informed that in the capital area, where two thirds of the population live, the quality of water supplied to the population is very good. Challenges remain, however, in the field of sanitation in other parts of the country and in particular along the coastal lines where the sewer system needs significant investment. The speaker also briefly outlined the distribution of responsibilities among Ministry for Welfare, Ministry for the Environment, the Environmental Agency and the local authorities. It was underlined that good communication was established among all the stakeholders involved, especially in the field of water quality monitoring between the environment and the health sides. The country is also quite advanced regarding the implementation of the EU Water Framework Directive<sup>2</sup>.

## **Session 2: How the Protocol on Water and Health might assist in working to remedy the challenges in the area of drinking water and sanitation**

18. Mr. Roger Aertgeerts introduced the Protocol to the participants of the seminar. He emphasized that the implementation of the main obligations of the Protocol, namely the ones related to setting targets and target dates and surveillance of water-related disease, can assist in addressing the main challenges of the region such as small-scale water supply, equitable access to water and sanitation and climate change. Based on the information provided by country representatives, the speaker identified the following key challenges in the Nordic and Baltic region which seem to be currently less addressed: need to improve access to sanitation, need to strengthen

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<sup>2</sup> Directive 2000/60/EC of the European Parliament and of the Council establishing a framework for the Community action in the field of water policy

national surveillance systems by paying more attention to under-reported diseases and reducing vaccine-preventable diseases, need to strengthen social support for low-income groups in the Baltic countries, and development and implementation of Water Safety Plans. The speaker highlighted the usefulness of the Protocol as a flexible and versatile tool to respond to these challenges and to channel development assistance to the drinking water and sanitation sector. He also highlighted the main features of the Protocol and its operational structure. It was stressed that the Protocol is a soft law instrument with beneficial legal implications.

19. The speaker also presented some ideas regarding the possible establishment of a Nordic/Baltic network on drinking water and sanitation. In his view, the group could focus its activities on water supply and sanitation and form the basis for concerted action in this field. It could play a role of an intersectoral platform that would channel activities of international organizations in the Nordic and Baltic region as well as financial cooperation programmes. The network could also be integrated in the Protocol's structure as a task force. The Chair of the seminar clarified in this regard that the network would be open not only to the Parties to the Protocol but also to all countries interested in benefiting from the synergies established under the Protocol.

20. Mr. Mihaly Kadar, Adviser at the National Institute of Environmental Health, Hungary, and member of the Bureau of the Protocol, presented the differences and similarities of the Protocol and the EU legislation highlighting that out of 25 Parties to the Protocol, 15 are EU member states. He emphasized that creating synergies between the Protocol and the EU *acquis communautaire* could contribute to reaching their common aims since the two instruments are complementary to each other. Moreover, the speaker underlined that implementation of the Protocol facilitates coming in compliance with the EU requirements. The added value of the Protocol was also stressed: it focuses on the health side and could be the main driver in areas such as equitable access to water and sanitation, access to sanitation in remote/sparsely populated areas, enclosed bathing waters, and water related diseases – issues that are vaguely or not at all addressed by the EU law and policy.

21. Ms. Enkhsetseg Shinee, Technical Officer, WHO-Europe, Germany, focused her presentation on the key areas of work under the programme of work of the Protocol with more focus on setting targets and reporting, water related disease surveillance, small scale water supply and sanitation and facilitation of the international assistance to support implementation of the Protocol. The presenter also noted the corresponding guidance materials that were produced to support implementation of the Protocol. These include policy and technical guidance on water-related disease surveillance, the cross-cutting issues such as small scale water supply and sanitation and water supply and sanitation under extreme weather events. Other areas addressed by the Protocol include capacity building (by providing targeted assistance in Protocol's accession and implementation at a country level) and experience sharing activities as well as raising public awareness and improving access to information and public participation in environmental decision making.

22. Ms. Carola Beatrice Bjørklund, Coordinator for Council of Europe/Ambassador, Norwegian Ministry of Foreign Affairs, introduced the Protocol on Water and Health as a political tool in foreign aid policies. She referred to the Norwegian experience where the Ministry for Foreign Affairs was aware of the challenging situation with water and sanitation at the international level but needed good partners and good projects to engage in assistance projects. All this was provided by the Protocol which proved to be a particularly convenient tool to reach out to the countries of Eastern

Europe, Caucasus and Central Asia where the Nordic countries are scarcely represented. An attractive feature of the Protocol for the Norwegian Ministry for Foreign Affairs was the commitment and the ownership of the countries that set the targets themselves. Being aware of the costs of the target setting and achieving the targets set, the Norwegian Ministry for Foreign Affairs took the initiative to start running the assistance programme in the framework of the articles 11 and 12 of the Protocol which led to the creation of the Project Facilitation Mechanism. Projects were initiated in Ukraine, Kyrgyzstan and Tajikistan. The donor community also appreciated the Project Facilitation Mechanism since through this type of mechanism it was easy to control financing and avoid duplication and isolated projects. Switzerland was involved at a later stage. It was stressed that not only Parties but also countries intending to become a Party to the Protocol can take advantage of the Project Facilitation Mechanism.

23. Mr. Harsha Ratnaweera, Professor on Water and Wastewater Technology, Norwegian University of Life Sciences, presented the main water and health challenges in Ukraine, Kyrgyzstan and Tajikistan – three countries setting targets with the assistance of Norway through the Project Facilitation Mechanism. He also referred to the particularities of the implementation of the projects in the three countries. In Ukraine, good collaboration has been established among all the stakeholders involved but the constant change of key actors delayed the target setting process. Targets were finally approved by the Cabinet of Ministers and signed by the Vice-President in 2011. In Kyrgyzstan and Tajikistan, which are not Parties to the Protocol, targets are being set in the context of the Protocol. Political instability and lack of involvement in the two countries made the implementation of the project quite difficult and the launch of the National Policy Dialogue processes was seen as a great relief. Currently the target setting process in the three countries is well on track. Once the targets are set and approved, the next step would be to incorporate them to national and ministerial strategic development plans and to seek financing opportunities for achieving them. Creation of a new webpage to be possibly used as a reporting tool is also envisaged.

24. Mr. Roger Aertgeerts focused his second presentation on the issue of small scale water supplies emphasizing its particular importance for the Nordic and Baltic countries where a relatively high percentage of the population relies on such systems. He provided an overview on how the work and the products developed under the Protocol can assist countries in better dealing with the challenges of small scale water supply and sanitation facilities that are in many cases outside of the scope of the EU Directives. The presenter also underlined the advantages of the development and implementation of the Water Safety Plans and referred to the publication *Water safety planning for small community water supplies*<sup>3</sup> (WHO, 2012) which provides step-by-step risk management guidance for drinking-water supplies in small communities. Mr. Aertgeerts also touched upon the specific challenges of small scale water supply and sanitation in schools. He suggested that a Nordic/Baltic network on drinking water and sanitation, once established, engages, *inter alia*, in the assessment of current performance of the small scale water supplies and sanitation, including their health impacts, and subsequently addresses the challenges by introducing appropriate water safety plans. It was also deemed advisable to initiate monitoring and assessment of the water, sanitation and hygiene (WASH) systems and services in schools.

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<sup>3</sup> [http://www.who.int/water\\_sanitation\\_health/publications/2012/water\\_supplies/en/index.html](http://www.who.int/water_sanitation_health/publications/2012/water_supplies/en/index.html)

25. Short presentation was then given by Mr. Kjetil Tveitan, Ministry of Health and Care Services, Norway, on the status of implementation of the Protocol in his country, in particular vis-à-vis target setting. In Norway, first steps were taken in 2008 but targets were not agreed on by the relevant stakeholders, including non-governmental organizations, before 2011. In 2012 draft targets were considered by the Ministry of Health and then sent for clearance to other ministries involved. It is expected that after finalization of the draft by the National Food and Safety Authority in 2013 the targets will be disseminated to the broader public with the subsequent approval of targets set by the Government. Information about the final targets will be then sent out to waterworks, municipalities and other relevant parties. The presenter explained that Norway opted for setting ambitious targets which was possible also due to the involvement of the Protocol that helped in bringing political attention to the existing challenges. The targets set address directly the key water and health challenges in Norway such as old water pipes, insufficient treatment of small scale water supplies and lack of information regarding private water supplies which cover about 10% of population. Mr. Tveitan underlined that targets were not self-fulfilling and that designing appropriate measures would be crucial for their achievement.

26. Ms. Nataliya Nikiforova, joint secretariat of the Protocol on Water and Health, UNECE, introduced the second reporting exercise under the Protocol to the participants of the meeting. She particularly referred to the article 7 of the Protocol that sets the requirement to evaluate progress towards the targets set and to submit summary reports and outlined the objectives and structure of the reports. It was underlined that the aim of reporting is not to compare Parties but to exchange experience and share the lessons learned. Carrying out a self-assessment also reinforces commitment to the targets set and improves cooperation within the country. The speaker noted that, based on the experience of the first reporting exercise (2009–2010), countries tend to report less information on the measures implemented to achieve the targets and on the achievement and challenges while focusing more on the legislation and institutional arrangements. In order to make the reports more interesting, the speaker recommended to follow the *Guidelines on the setting of targets, evaluation of progress and reporting under the Protocol on Water and Health*<sup>4</sup> when preparing their reports and invited all participants to attend the workshop on reporting under the Protocol to be held in Geneva on 12–13 February 2013.

27. It was clarified that interested countries that are not Parties to the Protocol are welcome to submit their summary reports. Among the Nordic and Baltic countries, Finland was highlighted as the country that has already set targets and submitted a high quality report under the first exercise.

28. Participants were then divided into groups with participants from different countries in order to discuss the challenges in the field of water and sanitation in their respective countries and the ways and means to address them. Discussion also focused on how to make a better use of the Protocol in order to further strengthen action on water and sanitation issues as well as on the potential benefits in creating a Nordic/Baltic network on drinking water and sanitation.

29. A series of common issues were identified during the discussions. Small scale water supplies and sanitation, water related disease control and surveillance, improving legal basis and/or enforcement were repeatedly mentioned as key challenges. Strengthening political engagement was seen as a necessary step to improve situation with water and health. In this context, it was

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<sup>4</sup> [http://www.unece.org/fileadmin/DAM/env/water/publications/documents/guidelines\\_target\\_setting.pdf](http://www.unece.org/fileadmin/DAM/env/water/publications/documents/guidelines_target_setting.pdf)

underlined that the Protocol proved to be a vehicle for Norway to raise political awareness. Many participants felt the need for a better distribution of responsibilities – even in the countries where the responsibilities were clearly allocated, the decision making process was sometimes difficult due to a high number of stakeholders involved. Participants also discussed establishing cooperation among Baltic and Nordic countries – an initiative that was initially put forward by Sweden and supported by Norway – and agreed on the need and usefulness of such network.

#### **IV. CONCLUSIONS**

30. The Chair of the seminar, Mr. Kjetil Tveitan, concluded that a general agreement was reached on the usefulness of the Protocol in assisting with identifying problems, setting priorities and reviewing the progress achieved. Participants appreciated the holistic approach that the Protocol promotes and the fact that it allows looking at different aspects of water and health issues which in a long term fosters better coordination and policy integration. It was emphasized once again that the Protocol and the EU legislation are complementary to each other – the Protocol could help in setting up the path to implement EU directives as a bottom tool to set targets and assess the progress. Special session on the Protocol on Water and Health highlighted the role that the Protocol could play in improving situation with water and health through setting targets and surveillance and reduction of water-related disease as well as in better dealing with the challenges of small scale water supply. The need for coordination was mentioned as especially important in view of the upcoming second reporting exercise under the Protocol.

35. With regard to establishing cooperation between the Nordic and Baltic countries – one of the main focuses of the seminar – all participants were in favour of creating a Nordic/Baltic network on drinking water and sanitation. Such a network would serve to exchange experience and share knowledge at different levels, including among authorities, operators, inspectors, engineers, etc. Cooperation could be operated via meetings of different groups of specialists on a specific subject.

36. It was decided to explore the possibility of integrating the network into the programme of work of the UNECE/WHO-Europe Protocol on Water and Health which would give it a meaningful support from the secretariat. When it comes to financing, it was decided to seek support also from the Nordic Council of Ministers. It was stressed that the self-financing element and getting input from the EU system for the northern countries should not be disregarded.

37. The following steps were agreed on as a follow up to the meeting:

- Lead countries would approach the Nordic Council of Ministers at its forthcoming meetings in order to request financial support for a follow up meeting in the second half of 2013 in Sweden.
- In parallel, lead countries would start work on the creation of a Nordic/Baltic network on drinking water and sanitation by proposing its future mandate and structure in order to approach the Council to advocate for support,
- Cooperation within the network would start gradually, from creating an email group to regular face-to-face meetings (possibly, yearly) in future;
- The possibility of creating an online platform for the network would be explored;



- A series of exchange missions could be organized to the Nordic and Baltic countries in order to clarify their roles within the network. It was decided to invite Denmark and Finland to participate in and support the network;
- Sweden would host a meeting where the final decision on the establishment of the network could possibly be taken. Such a meeting was tentatively scheduled for the second half of 2013;
- The present meeting report would serve as a basis for further action in establishing the Nordic/Baltic network on drinking water and sanitation.