


Economic Commission for Europe
**World Health Organization
 Regional Office for Europe**

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

Working Group on Water and Health
Tenth meeting

Geneva, 15 and 16 November 2017

**Report of the tenth meeting of the Working Group on Water
 and Health**
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I. Introduction

1. The tenth meeting of the Working Group on Water and Health under the Protocol on Water and Health to the Convention on the Protection and Use of Transboundary Watercourses and International Lakes (Water Convention) was held on 15 and 16 November 2017, in Geneva.
2. The main objective of the meeting was to take stock of the progress in the implementation of the water, sanitation and health-related Sustainable Development Goals in the pan-European region and to discuss how to benefit from the Protocol's practical framework to facilitate their achievement. The Working Group also reviewed the implementation of the programme of work for the period 2017–2019 and provided guidance on its further development.
3. The meeting was held back-to-back with the fifteenth meeting of the Protocol's Compliance Committee (Geneva, 13 and 14 November 2017) and the nineteenth meeting of the Bureau of the Meeting of the Parties to the Protocol (Geneva, 17 November 2017).

A. Attendance

4. The meeting was attended by representatives of the following countries: Albania; Armenia; Azerbaijan; Belarus; Bosnia and Herzegovina; Finland; France; Georgia; Germany; Hungary; Italy; Kyrgyzstan; Lithuania; Luxembourg; Netherlands; North Macedonia; Norway; Portugal; Republic of Moldova; Romania; Russian Federation; Serbia; Slovakia; Switzerland; Tajikistan; Ukraine and Uzbekistan.
5. Representatives of the United Nations Human Settlements Programme, the United Nations Children's Fund (UNICEF), UN-Water and the World Health Organization (WHO) also attended the meeting.
6. Representatives of the following non-governmental organizations (NGOs) participated in the meeting: Armenian Women for Health and Healthy Environment; Earth Forever; European Environment and Health Youth Coalition; Journalists for Human Rights; MAMA-86; National Water Partnership of Georgia; Information Centre Volgograd-Ecopress; and WaterLex. A representative of the Steering Committee for implementing the Protocol on Water and Health in the Republic of Moldova and an independent expert on human rights to water and sanitation also attended the meeting.
7. Representatives of the following academic institutions attended the meeting: University of Geneva and the WHO Collaborating Centre for Health Promoting Water Management and Risk Communication, University of Bonn, Germany.
8. In addition, the Chair of the Protocol's Compliance Committee was present at the meeting.
9. The meeting was serviced by the joint secretariat provided by the United Nations Economic Commission for Europe (ECE) and the WHO Regional Office for Europe.

B. Organizational matters

10. The Chair of the Meeting of the Parties to the Protocol on Water and Health, Ms. Natasa Djurasinovic, opened the meeting and welcomed the participants.
11. The Chair of the Meeting of the Parties invited the Working Group to elect its Chair and Vice-Chairs. The Working Group elected Mr. Kjetil Tveitan (Norway) as Chair and Ms. Alena Drazdova (Belarus) and Ms. Ana Albuquerque (Portugal) as Vice-Chairs.
12. The Working Group adopted its agenda as set out in document ECE/MP.WH/WG.1/2017/1-EUPCR/1611921/2.1/2017/WGWH/03.¹

¹ Information about the meeting, including meeting documentation, is available on a dedicated web page of the United Nations Economic Commission for Europe (ECE) website. See www.unece.org/env/water/9th_wgwh_2016.html.

II. Role of the Protocol in achieving the 2030 Agenda for Sustainable Development

13. The Chair recalled that, at its fourth session (Geneva, 14–16 November 2016), the Meeting of the Parties to the Protocol on Water and Health had highlighted the role of the Protocol as a powerful tool for promoting and operationalizing the achievement of the 2030 Agenda for Sustainable Development (2030 Agenda) and its Sustainable Development Goals. The Chair therefore invited the Working Group to discuss how to benefit from and give prominence to the work under the Protocol with regard to the implementation, follow-up and review of the Sustainable Development Goals.

14. A representative of the ECE secretariat updated the Working Group on developments at the global and regional levels, in particular with regard to the 2018 United Nations High-level Political Forum on Sustainable Development, which was to conduct an in-depth review of Goal 6 on clean water and sanitation, and the 2018 Regional Forum on Sustainable Development for the ECE region.

15. Representatives of countries reported on developments in that regard in the following chronological order:

(a) **Romania:** the country intended to use the Protocol framework to report on the implementation of the Sustainable Development Goals and recommended that other countries use that approach;

(b) **Lithuania:** the national working group on the Protocol was ready to cooperate with the focal points responsible for implementing the relevant Sustainable Development Goals. The representative of Lithuania requested guidance from the Working Group on establishing communication channels in that regard;

(c) **Switzerland:** the implementation of the Sustainable Development Goals in the country was coordinated by the Federal Department of Foreign Affairs and covered all aspects of sustainable development, including water. In addition, the Swiss Agency for Development and Cooperation had a dedicated global water programme. The Protocol was known in the country as a tool for supporting global monitoring and implementation of the 2030 Agenda and was referred to in the Swiss concept on how to support global monitoring. However, the challenge at the national level was how to engage all the relevant authorities and stakeholders in the setting and monitoring of harmonized indicators. That task required the establishment of channels of communication between the technical experts concerned and the coordination body;

(d) **Ukraine:** in 2017, the country had published its national baseline report on the Sustainable Development Goals, with 86 national targets and 172 indicators. The coordination body in Ukraine was the Ministry of Economic Development and Trade and the targets had been developed by the High-level Interministerial Working Group, involving over 800 experts from different sectors, with a dedicated working subgroup for each Goal. The national targets under the Protocol were taken into account when developing the Ukrainian targets under the 2030 Agenda. The main challenges were the lack of methodology for monitoring certain indicators and the unavailability of statistical data;

(e) **Armenia:** the National Council for Sustainable Development, operating under the aegis of the Prime Minister, was the overall coordination body for the implementation of the 2030 Agenda and an inter-agency task force had been established to develop national targets and indicators, with four separate working groups. The national targets related to water, sanitation and health, that were awaiting approval, had been developed in accordance with the Protocol provisions and priority areas of work, such as water, sanitation and hygiene (WASH) in schools and safe management of drinking-water and sanitation systems. In line with Sustainable Development Goal 6, a new chapter on sanitation had been added to the Water Code as part of the revision process;

(f) **Netherlands:** an interministerial network of focal points led by the Ministry of Foreign Affairs was responsible for preparing the voluntary national review on the implementation of the Sustainable Development Goals. In November 2016, a report in that regard had been published, the next edition of which would be available in March 2018. According to the report, data was available for 37 per cent of the Sustainable Development Goal indicators. The country needed to gain more experience in the monitoring of the

indicators for safely managed services and Sustainable Development Goal targets 6.3–6.6. Work was ongoing to align national targets, monitoring and reporting, providing an opportunity to position work under the Protocol at the national level.

16. The Working Group:

(a) Acknowledged the benefits of the joint implementation of the Protocol and the 2030 Agenda;

(b) Encouraged Parties to the Protocol and other States to take into account work under the Protocol when preparing their voluntary national reviews for the 2018 High-level Political Forum on Sustainable Development;

(c) Encouraged all Parties to the Protocol and other States to contribute to the 2018 Regional Forum on Sustainable Development for the ECE region.

III. Progress in the ratification process

17. The Chair noted that there had been no new accessions to the Protocol since the fourth session of the Meeting of the Parties.

18. The representative of Georgia explained that the process of ratification of the Protocol had been delayed due to changes in the Government that had taken place in November 2017.

19. Water scarcity and groundwater pollution were reported to be key issues for Italy and the fact that the Protocol was a useful tool in addressing those challenges was a strong incentive for ratification. The representative of Italy reported that the ratification process would continue following the elections in March 2018. Key success factors in ensuring prompt ratification were public interest in water issues and the growing cooperation between the Ministry of Environment and the Ministry of Health.

20. The representative of North Macedonia reported that the national process of accession to the Protocol was led by the Ministry of Health, but that the cooperation of the Ministry of Agriculture was also necessary. NGOs played a crucial role in facilitating the accession process, including by requesting completion of the process by 2018 in a document entitled “Blueprint Developed by CSOs for Urgent Democratic Reforms”.² It was emphasized that, although not a Party to the Protocol, the country was implementing activities from the programme of work of the Protocol, in particular with regard to raising public awareness through the media, social networks and educational campaigns.

21. The representative of Serbia said that the country would continue its efforts to promote ratification among the countries of South-Eastern Europe.

22. The Chair noted that there were some similarities between the countries, such as the challenge of changes in government structures and the fact that, in many countries, the process had almost been completed but a political decision on official ratification was lacking. Having a partnership between Governments and civil society was highlighted as being a factor for success.

23. The Working Group:

(a) Welcomed the fact that Georgia, Italy and North Macedonia were in the process of acceding to or ratifying the Protocol and encouraged them to pursue their efforts in that regard;

(b) Encouraged other countries, in particular Signatories, to ratify or accede to the Protocol as soon as possible.

² See

www.epi.org.mk/docs/BLUEPRINT%20DEVELOPED%20BY%20CSOs%20FOR%20URGENT%20DEMOCRATIC%20REFORMS.pdf.

IV. Improving governance for water and health: Support for setting targets and implementing measures

A. Setting targets and implementing measures

24. The Chair of the Task Force on Target Setting and Reporting reported on the outcomes of the workshop on setting targets under the Protocol to support implementation of the Sustainable Development Goals (Geneva, 4 and 5 May 2017) and of the ninth meeting of the Task Force (Geneva, 5 May 2017).

25. Representatives of countries where substantial progress with regard to the target-setting processes had been achieved since the ninth meeting of the Task Force reported on developments, in the following chronological order:

(a) **Germany:** a target under the Protocol regarding sewage sludge had been achieved with the revision of the sewage sludge ordinance in 2017. The country was considering initiating a discussion on the revision of targets under the Protocol;

(b) **Netherlands:** the process of revision of the national targets and target dates was ongoing and was currently at the baseline analysis stage. The revised targets would reflect the interlinkages between the relevant Sustainable Development Goals and the target areas under the Protocol;

(c) **Luxembourg:** the newly set targets had been communicated to the secretariat through the Permanent Mission of Luxembourg to the United Nations Office and other international organizations in Geneva earlier in 2017. An effort had been made to avoid duplication and to align the targets and indicators set under the Sustainable Development Goals and the Protocol by using similar formulations to the extent possible;

(d) **Kyrgyzstan:** national targets in the context of the Protocol had been revised in 2016, taking into account the objectives of the 2030 Agenda. The main challenge to be addressed through the implementation of targets was the high disease burden related to access to water and sanitation;

(e) **Portugal:** the country had developed its draft targets covering all the target areas under the Protocol, building on national strategies and programmes, as well as on its obligations under the European Union (EU) *acquis communautaire*. The targets had also been harmonized with those under the Sustainable Development Goals by ensuring communication between the working groups responsible for both processes and by developing a harmonized set of indicators to the extent possible;

(f) **Norway:** the revision of targets in 2015 had been a useful exercise that had contributed to the improvement of the water, sanitation and health situation in the country;

(g) **France:** the country provided the secretariat with a compilation of its national objectives in the fields of water, sanitation and health that had been established under different national plans and that were in line with the water and health-related obligations arising from European Union legislation;

(h) **Ukraine:** the process of revision of national targets had been initiated with the support of the ECE-led National Policy Dialogues on Integrated Water Resources Management and Water Supply and Sanitation under the European Union Water Initiative (National Policy Dialogues). The revision process, in which key ministries and national experts were involved, was coordinated by the NGO MAMA-86;

(i) **Switzerland:** the request for information by the Compliance Committee of the Protocol had been a useful catalyst for the completion of the target-setting process. When setting targets, the country referred to the advice provided in the *Collection of Good Practices and Lessons Learned on Target Setting and Reporting under the Protocol on Water and Health*.³ The final targets were jointly signed by the Federal Office for the Environment and the Federal Food Safety and Veterinary Office. The challenge was to involve local authorities in the implementation of the targets.

³ See www.unecce.org/fileadmin/DAM/env/water/mop4/Informal_doc/1623256_E_FinalWeb_rev.pdf.

26. The Chair of the Task Force on Target Setting and Reporting reported on progress made in preparing a document entitled *Protocol on Water and Health and the 2030 Agenda: A Practical Guide for Joint Implementation*. He called for the establishment of a small drafting group to further develop the document. The following countries expressed an interest in joining the drafting group: Germany; Hungary; Netherlands; Norway; Portugal; Republic of Moldova; and Romania. The NGOs Earth Forever and MAMA-86 also expressed an interest in that regard.

27. The Working Group was asked to comment on the concept, outline, main messages, format and structure of the above-mentioned document and to suggest case studies for inclusion therein. A representative of Germany highlighted the importance of featuring the baseline analysis prominently in the document. A representative of the Republic of Moldova noted that the document provided synergy between target setting under the Protocol and target setting under the 2030 Agenda, thus encouraging countries to set targets in a harmonized way.

28. A representative of Lithuania presented the objectives and scope of the session on target setting under the Protocol that was to be organized at the sixth meeting of the Nordic and Baltic Drinking Water and Health Network (Vilnius, 23 and 24 November 2017).

29. The Working Group:

(a) Expressed its appreciation to Switzerland and Romania for their leadership of this programme area and to Switzerland for its continued financial support;

(b) Recognized the role of the Task Force on Target Setting and Reporting in promoting the joint implementation of the Protocol and the 2030 Agenda;

(c) Congratulated countries that had reported that they had set their national targets under the Protocol and acknowledged the efforts of those countries that had made significant progress in setting or revising their targets;

(d) Invited comments and suggestions, to be submitted to the ECE secretariat by 20 December 2017, on the document entitled *Protocol on Water and Health and the 2030 Agenda: A Practical Guide for Joint Implementation*, including regarding the outline of, and messages, content and possible good practices to be included in, the document;

(e) Required the Task Force to further develop the above-mentioned document for submission to the Working Group at its eleventh meeting (Geneva, 14 and 15 November 2018);⁴

(f) Highlighted the usefulness of subregional workshops in supporting the implementation of the Protocol.

B. Strengthening reporting capacity

30. A representative of UN-Water presented the preliminary results of a data-gathering exercise to establish the baseline for the indicators of Sustainable Development Goal 6.

31. A representative of WHO reported on the key highlights of the report entitled *Progress on Drinking Water, Sanitation and Hygiene: 2017 Update and SDG Baselines*.⁵ The representative focused on the results contained therein for the pan-European region and the main data gaps related to hygiene and safely managed sanitation and drinking water services, disaggregated by urban and rural areas.

32. A representative of the WHO Regional Office for Europe secretariat informed the Working Group about the outcomes of the fourth reporting cycle of the UN-Water Global Analysis and Assessment of Sanitation and Drinking-Water (GLAAS), in particular the main findings of the GLAAS 2017 report and the status of development of the GLAAS highlights for the participating European countries.

⁴ The eleventh meeting of the Working Group on Water and Health was rescheduled to be held in Geneva, on 3 and 4 April 2019.

⁵ See <http://www.unwater.org/publications/whounicef-joint-monitoring-program-water-supply-sanitation-hygiene-jmp-2017-update-sdg-baselines>.

33. Participants made the following comments on GLAAS in the country context (in chronological order):

(a) **Azerbaijan:** the country had participated in three GLAAS reporting cycles, which had not only supported the global monitoring process, but had also helped to improve existing national procedures. Data obtained through GLAAS had been used in the preparation of the national report in accordance with the Protocol requirements, the formulation of priority targets regarding the achievement of Sustainable Development Goal targets 6.1 and 6.2 and the implementation of the Ostrava Declaration on Environment and Health.

(b) **Albania:** GLAAS data helped to identify problems in implementation of different national plans and revealed a number of shortcomings, including poor WASH conditions in both schools and health-care facilities; the absence of universal access targets for drinking water and sanitation services; insufficient surveillance and monitoring; the lack of a human resource strategy; a gap between the WASH budget and the actual allocation; and the lack of specific plans targeting poor and vulnerable people;

(c) **Ukraine:** participation in GLAAS enabled: the improvement of intersectoral collaboration; the assessment of current conditions; and the identification of obstacles and data gaps, including limited access to information on financing. A national workshop had been held to disseminate GLAAS data and the results had been used in a situation analysis and review of the national targets under the Protocol;

(d) **Serbia:** the country had taken part in the past two GLAAS. Participation in the GLAAS 2014/15 country survey had: constituted a first joint WASH sector review; contributed to the baseline analysis and setting of targets under the Protocol; and improved cross-sectoral collaboration. Through participation in the GLAAS 2016/17 survey, detailed data on WASH financing had been obtained that would inform the revision of the national targets under the Protocol;

(e) **Uzbekistan:** the GLAAS process had made it possible to reach out to new stakeholders, obtain more information and identify data gaps. GLAAS data informed further actions designed to improve WASH, in particular in preschools and schools, thus promoting universal access;

(f) **Georgia:** the GLAAS survey had helped in identifying existing data and data gaps. The outcomes of the survey had been used in the development of the National Environmental Health Action Plan, especially in preparing short- and long-term WASH-related objectives.

34. The Working Group:

(a) Took note of the developments regarding the global framework for monitoring the indicators under Sustainable Development Goal 6;

(b) Took note of the information provided by WHO on the Sustainable Development Goal baseline for water, sanitation and hygiene and GLAAS country highlights and acknowledged the complementary value of GLAAS regarding baseline analysis, target setting and reporting under the Protocol.

V. Compliance procedure

35. The Chair of the Compliance Committee under the Protocol reported on the decisions of the Committee at its fourteenth and fifteenth meetings (Geneva, 13 and 14 March 2017 and 13 and 14 November 2017, respectively).

36. In particular, the Chair highlighted the fact that the Committee had received replies from all those Parties that had not previously communicated their targets and that had been requested to either provide information about progress regarding their target-setting processes or to communicate the targets that had been formally established. The Committee therefore aimed to have a clear picture of the status of target setting in Parties to the Protocol by the end of 2018.

37. With regard to the Consultation process, the Committee invited Estonia, Latvia and Lithuania to engage in consultations covering the issues of intersectoral coordination, public

participation and interaction between the requirements under the Protocol and European Union legislation in the field of water, sanitation and health, among others.

38. The Chair also reported that the executive summary of the note entitled “Interpretation of the provisions of the Protocol on Water and Health related to transboundary waters” had been incorporated into the report of the Compliance Committee on its fifteenth meeting.⁶ Similarly, a new summary guide for the submission of communications from the public to the Compliance Committee had been annexed to the report of that meeting.⁷

39. Finally, the Chair stressed the importance of strengthening collaboration with the relevant treaty bodies, including the Implementation Committee under the Water Convention, the Compliance Committee of the Convention on Access to Information, Public Participation in Decision-making and Access to Justice in Environmental Matters (Aarhus Convention), the human rights treaty bodies and the special procedures of the Human Rights Council.

40. The Working Group took note of the information provided by the Compliance Committee Chair about the main decisions taken by the Committee at its fourteenth and fifteenth meetings and thanked the Committee for its work in supporting the implementation of, and compliance with, the Protocol.

VI. Prevention and reduction of water-related diseases

A. Water-related disease surveillance

41. The representative of Norway, co-lead Party of the programme area, updated the Working Group about the progress of work, particularly presenting the outcomes of the national workshop on water-related disease surveillance held in Kyrgyzstan (Bishkek, 23–25 May 2017) and the results of the lead Parties meeting (Bonn, Germany, 3 November 2017), which defined the scope and structure of, as well as the process for developing, a technical guidance document on water-related disease surveillance and outbreak management, with the aim of assisting Parties and other States in improving their surveillance and response systems in accordance with article 8 of the Protocol.

42. The representative of Kyrgyzstan briefed the Working Group on follow-up activities in response to the above-mentioned national workshop in order to implement the workshop’s recommendations, including the introduction of Epi Info software tools as a part of national outbreak investigations. The representative of North Macedonia noted that the national workshop on water-related disease surveillance held in 2016 had been useful in improving experts’ knowledge of effective surveillance systems and outbreak management and that there was a further need to enhance human resource capacities, including regarding risk communication and real time online communication during outbreaks.

43. Representatives of countries reported on activities to strengthen water-related disease surveillance and outbreak response systems in accordance with article 8 of the Protocol in the following chronological order:

(a) **Norway:** the country had upgraded its web-based national outbreak surveillance system and had integrated it into the national crisis system, so that all outbreaks were reported and registered under one system. The system could be accessed by local, regional and national health authorities, food safety authorities and hospitals. The national waterworks crisis support system had been set up in 2017. The system was administered by the Norwegian Institute of Public Health and provided a 24-hour advisory service for waterworks that required advice and support in the event of acute incidents that might have an impact on water supply and might give rise to health-related problems. In addition, a national survey to identify links between water quality and gastro-intestinal illnesses and a review of the use of boiled water advisories were under way;

(b) **Azerbaijan:** targets had been developed under the Protocol, including regarding water-related diseases. The representative of Azerbaijan highlighted the need for

⁶ ECE/MP.WH/C.1/2017/4–EUPCR/1611921/2.1/2017/CC2/06, annex I.

⁷ Ibid, annex II.

capacity-building regarding surveillance of water-related diseases, including emerging diseases, and effective outbreak response;

(c) **Republic of Moldova:** training had been provided with the support of the European Centre for Disease Prevention and Control, and the national guidance on waterborne and foodborne diseases was under revision;

(d) **Armenia:** the representative of Armenia expressed an interest in technical support and the provision, at the national level, of training on strengthening water-related disease surveillance and outbreak management.

44. The representative of Norway introduced planned activities in the programme area in question, including the finalization of the technical guidance document on water-related disease surveillance and outbreak management and the organization of further national capacity-building activities. The representative of the WHO Collaborating Centre for Health Promoting Water Management and Risk Communication, University of Bonn, Germany, undertook to provide support for the development of the new technical guidance document.

B. Drinking-water quality surveillance

45. The representative of Belarus, co-lead Party of the programme area, updated the Working Group on the main achievements of the first meeting of the Expert group on risk-based water quality surveillance (Minsk, 13 and 14 February 2017), which had provided conceptual inputs on the structure, target audience and key elements of a technical guidance document in support of the long-term uptake of risk-based drinking-water quality surveillance approaches. The representative introduced the scope of the draft document and requested the Working Group to provide feedback on the formulation of the key principles and suitable case studies for relevant principles.

46. Delegates from Serbia and the Republic of Moldova noted the need for and usefulness of such a document regarding risk-based surveillance and better protection of public health. Serbia was currently revising national targets and uptake of the risk-based surveillance approach would be stimulated through a corresponding target.

47. The representative of Belarus informed the Working Group about proposed future activities under the programme area, which would focus on capacity-building and finalization of the technical guidance document on risk-based surveillance of drinking-water quality.

48. The Working Group:

(a) Expressed its appreciation to Norway and Belarus for their leadership and technical support in advancing the work under the programme area, and to Norway for its continued financial support;

(b) Appreciated the usefulness of national capacity-building workshops on water-related disease surveillance and outbreak management;

(c) Took note of country activities on surveillance of water-related disease and encouraged further strengthening of national surveillance and response systems in accordance with article 8 of the Protocol;

(d) Entrusted the lead Parties of the programme area and the WHO Regional Office for Europe secretariat with the task of developing a practical guidance document on water-related disease surveillance and outbreak management and reporting on progress in that regard to the eleventh meeting of the Working Group on Water and Health;

(e) Invited the Working Group delegates to review the draft document on risk-based approaches to strengthening drinking-water quality surveillance and to provide feedback to the WHO Regional Office for Europe secretariat by 20 December 2017;

(f) Endorsed the proposed plans for future work on water-related disease surveillance and drinking-water quality surveillance.

VII. Institutional water, sanitation and hygiene

A. Water, sanitation and hygiene in schools

49. A representative of the Republic of Moldova, speaking on behalf of the three co-leading countries of the programme area, reported on the progress of work on WASH in schools, with particular focus on the dissemination of recent publications and the status of development of tools to support effective surveillance and management of WASH in schools.

50. The WHO Regional Office for Europe secretariat briefed the Working Group on the outcomes of a side event on WASH in schools organized at the High-level Conference on Promoting intersectoral and interagency action for health and well-being in the WHO European Region (Paris, 7 and 8 December 2016). The side event had been organized in collaboration with Hungary, the United Kingdom of Great Britain and Northern Ireland, the UNICEF Country Office in Kyrgyzstan and the European Environment and Health Youth Coalition. The High-level Conference had provided a good opportunity to promote and advocate Protocol activities and initiate new networks and partnerships. As an integral part of a holistic settings approach to health and well-being, the promotion of WASH in all schools and preschools was explicitly included in the outcome document of the High-level Conference.

51. Representatives of Parties, other States and partners also informed the Working Group about activities in the area of work in question, in the following chronological order:

(a) **Georgia:** the country had finalized the development of the National Environmental Health Action Plan, which included activities to improve WASH in schools and health-care facilities. The Ministry of Health worked closely with the Ministry of Education and the UNICEF Country Office;

(b) **Armenia:** WASH in kindergartens and schools were among the priorities regarding the implementation of Sustainable Development Goals 4 and 6 in the country;

(c) **Serbia:** a baseline analysis of WASH had been conducted in rural schools in 2016, with the support of the Italian Ministry of Health and the Serbian regional development agency. WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene service ladders had been used in the assessment of the level of WASH services. The outcomes of that assessment had informed the revision of national targets and had led to the integration of such service ladders into national monitoring practice;

(d) **Republic of Moldova:** a survey focusing on school sanitation had been carried out and national practical guidance on school sanitation and hygiene had been developed for school administrators. That experience had been shared at a side event during the Sixth Ministerial Conference on Environment and Health;

(e) **European Environment and Health Youth Coalition:** the Coalition had contributed to a brochure on WASH in schools and co-organized a side event on the topic at the High-level Conference on Promoting intersectoral and inter-agency action for health and well-being in the WHO European Region in Paris and the Sixth Ministerial Conference on Environment and Health. The Coalition reaffirmed its commitment to, and involvement in, the activities of the Expert Group, in particular regarding the development of tools to promote effective surveillance and management of WASH in schools;

(f) **UNICEF Country Office in Georgia:** the Country Office supported the Government in ensuring the rights of children and implementing relevant Sustainable Development Goal targets. Further support would be provided in improving the surveillance and management of water, sanitation and hygiene in schools and promoting the Protocol;

(g) **UNICEF Country Office in Kyrgyzstan:** the Country Office had supported national partners in conducting the first research project on menstrual hygiene management to be carried out in Kyrgyzstan. The initiative had raised awareness of menstrual hygiene management and had served as an evidence base for the development of a set of materials for different target groups (i.e. adolescent girls, mothers) and of guidance for teachers on how to work with children and parents. UNICEF was working towards mainstreaming menstrual hygiene management into WASH in school activities and remained eager to contribute to work under the Protocol.

52. The representative of the Republic of Moldova informed the Working Group about planned activities on WASH in schools to be implemented during the programme period, mainly focusing on the development of practical tools to support effective surveillance and management of WASH in schools.

B. Water, sanitation and hygiene in health-care facilities

53. A representative of Hungary, speaking on behalf of the three co-leading countries of the programme area, highlighted the main outcomes and strategic recommendations of a meeting on WASH in health-care facilities organized by the WHO Regional Office for Europe (Bonn, Germany, 27 and 28 September 2017), the initial results of an evidence review of WASH conditions in health-care facilities in the pan-European region and the preliminary findings of a pilot survey on WASH in health-care facilities in Kazakhstan.

54. Representatives of Parties, other States and partners reported on national activities on WASH in health-care facilities, including the setting and implementation of targets under the Protocol, in the following chronological order:

(a) **Republic of Moldova:** a rapid evaluation of drinking water supplies in health-care facilities had been conducted in October 2017. A comprehensive national survey would be undertaken in 2018, with the support of Switzerland. The survey questionnaire would be developed on the basis of WHO tools, and a new element on antimicrobial resistance (AMR) would also be included therein;

(b) **Serbia:** there were a number of challenges related to monitoring and surveillance of health-care facilities, including the lack of a monitoring methodology, poor data quality and organizational and managerial challenges. Serbia planned to undertake a series of activities, such as: a situation analysis of WASH in health-care facilities; the revision of national targets set in the context of the Protocol; and the raising of awareness of antimicrobial resistance. The methodology employed as a part of the situation analysis had been prepared by integrating the WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene service ladders and core questions and by introducing microbiological indicators for water quality. Survey findings would enable the identification of priority targets and actions towards reaching higher levels of WASH services in health-care facilities;

(c) **Hungary:** a pilot survey on the environmental health status of health-care facilities had been conducted, which had included components on drinking water and health-care waste management;

(d) **Georgia:** support had been requested regarding undertaking a national assessment of WASH in health care facilities, especially focusing on rural areas. The findings of such a survey would inform the future update of policies and development of practical tools.

(e) **Italy:** noted the importance of multi-stakeholder collaboration and application of a risk-based approach in managing the risks in water supply systems was highlighted. It was stressed that safe management of WASH services in health care was the responsibility of the health service provider;

(f) **North Macedonia:** it was highlighted that WASH in health-care facilities had been defined as an integral part of the national action plan on antimicrobial resistance;

(g) **Russian Federation:** the Russian Federation supported efforts to review evidence on WASH in health-care facilities in the pan-European region by screening the relevant Russian-language literature. In 2017, the Strategy to Prevent the Spread of Antimicrobial Resistance in the Russian Federation to 2030 had been approved and relevant activities would be carried out, including regarding WASH in health-care facilities;

(h) **Netherlands:** the country welcomed the increased focus on antimicrobial resistance and the environmental impact of pharmaceuticals;

(i) **Armenia:** monitoring of WASH in health-care facilities in the country had been initiated using the information and knowledge obtained from the meeting on water, sanitation and hygiene in health-care facilities organized by the WHO Regional Office for Europe (Bonn, Germany, 27 and 28 September 2017).

55. WHO headquarters had introduced the Global Action Plan on Water, Sanitation and Hygiene in Health-care Facilities, in addition to carrying out ongoing work and ensuring collaboration in the pan-European region, in particular with regard to plans for the implementation of the Water and Sanitation for Health Facility Improvement Tool (WASH FIT). Tajikistan welcomed those initiatives and activities and expressed an interest in a pilot scheme involving the implementation of the Tool.

56. The representative of Hungary informed the Working Group about planned activities on WASH in health-care facilities during the programme period.

57. The Working Group:

(a) Conveyed its appreciation to Georgia, Hungary and the Republic of Moldova for their leadership and for making significant progress in implementing the activities under the programme area in question;

(b) Took note of the draft report on the status of water, sanitation and hygiene in health-care facilities in the WHO European Region, and invited all delegates to provide feedback and comments to the WHO secretariat by 20 December 2017;

(c) Welcomed the collaboration with key partners in the programme area, specifically UNICEF and the European Environment and Health Youth Coalition;

(d) Endorsed the proposed plans for future work on institutional water, sanitation and hygiene.

VIII. Small-scale water supplies and sanitation

58. The representative of Serbia, co-lead Party for the programme area, informed the Working Group of the achievements and the progress made in the area, in particular the outcomes of two subregional workshops on small-scale water supply and sanitation (Minsk, 15–17 March 2017 and Belgrade, 10–12 October 2017).

59. A delegate of Uzbekistan reported on the outcomes of a capacity-building workshop on small-scale water supply for national decision makers and local authorities (Tashkent, 7 and 8 September 2017). As a part of the workshop, the main challenges and gaps in the management of small systems had been identified, and it had been recommended that: assessments of rural small systems be undertaken; specific targets regarding small systems be set; and a road map for the safe management of water supply and sanitation systems be developed.

60. Delegates reported on national activities to improve small-scale water supplies and sanitation, especially actions taken following recent subregional and national workshops organized under the Protocol:

(a) Setting targets, developing national guidelines and standards: The Republic of Moldova had developed two technical standards for ecological sanitation and wetlands and had adopted a new regulation on small-scale water supply systems, which included a definition of such systems and requirements for their registration. Kyrgyzstan had conducted follow-up workshops at the subnational level involving all relevant stakeholders and had revised the national targets for scaling up water safety plan implementation in small systems;

(b) Qualification of small system operators, improving management and financing: To address small-scale water supplies that were not managed by organized entities, Armenia was taking specific measures related to the provision of services by professional operators, including the development of minimum requirements for such operators. In Albania, a training programme for small system operators was under development and work was ongoing to establish a list of private wells. North Macedonia had allocated funds to the improvement of small-scale systems, carried out the registration and geographic information system mapping of small systems, and prepared a local action plan for Skopje;

(c) Uptake of the water safety plan approach and risk-based surveillance in small-scale systems: Germany was promoting the use of a practical guide for small-scale systems and preparing water safety plan training materials. In Luxembourg, local governments been given greater responsibility for ensuring the provision of safe drinking water services. An online water safety plan tool was under development and would be piloted. The tool would

be accessible for all supplies serving small communities. France called for the same level of service provision for small and large supplies and the promotion of water safety plan and sanitation safety plan approaches. In accordance with legislation on territorial administration, steps had been taken to provide vital services by pooling resources. Belarus was implementing a project to pilot risk assessment of small systems in a large province. North Macedonia had updated sanitary inspection forms, in line with WHO recommendations and use in practice.

61. A representative of Finland briefed the Working Group on a water safety project being implemented in rural Tajikistan, which supported water safety plan implementation in small villages. The preliminary outcomes of the project had informed the uptake of that approach in legislation (the draft law on water and sanitation).

62. A representative of Germany, co-lead Party for the programme area, informed the Working Group about the future work in that area, which would focus on: the promotion of good practices and support for the formulation of national policies and their implementation; the organization of subregional meetings for Nordic/Baltic countries and European Union member States on small-scale water supplies; and the development of a guidance document on sustainable financing of small-scale water supply and sanitation. A representative of Lithuania reported on the status of preparation of a subregional workshop on small-scale water supplies to be held in Vilnius, on 23 November 2017, back-to-back with the sixth meeting of the Nordic and Baltic Drinking Water and Health Network.

63. The Working Group:

(a) Conveyed its appreciation to Germany and Serbia for their leadership and continued support in implementing activities under the programme area;

(b) Acknowledged the significant progress made in building capacity towards improving small-scale water supply and sanitation services through a series of subregional and national training activities;

(c) Encouraged the further dissemination and application of the guidance documents on small-scale water supply and sanitation published under the Protocol;

(d) Endorsed the proposed plans for future work on small-scale water supplies and sanitation.

IX. Safe and efficient management of water supply and sanitation systems

64. A representative of the Netherlands, also speaking on behalf of Bosnia and Herzegovina and the International Water Association, informed the Working Group about progress made and ongoing activities under the programme area. In particular, the Working Group was informed of the conclusions of the Pan-European Symposium on Water and Sanitation Safety Planning and Extreme Weather Events (Bilthoven, Netherlands, 6 and 7 April 2017), which had been organized in cooperation with programme area 7 on increasing resilience to climate change.

65. Representatives of Parties, other States and partners informed the Working Group about national activities on water safety plan uptake in the following chronological order:

(a) **Kyrgyzstan** reported that a road map for the adoption of a national water safety plan had been prepared and that a working group had been established to ensure its implementation;

(b) **Romania** reported that provision had been made for a water safety plan in national law, that its application would be mandatory for large providers as of 2021, and that national capacity-building activities for operators, auditors and regulators were already taking place;

(c) **Republic of Moldova and Serbia** reported that the uptake of water safety plans was included in their national targets set under the Protocol;

(d) **Albania** reported on the development of the draft national guidelines and road map on water safety plans, which were currently under review by relevant stakeholders, and on plans to pilot water safety plans for small drinking water supply systems;

(e) **Italy** reported that water safety plans had been mandatory in the country since July 2016 and that the first two years of implementation mainly focused on building capacity.

66. In relation to plans for preparing a scoping study on sanitation in the pan-European region, a representative of the Netherlands National Institute for Public Health and the Environment briefed the Working Group, introducing the scientific approach and the methodology employed as a part of the study, as well as initial insights and the next steps. The joint secretariat complemented that information by explaining that, in addition to regional scoping, sixteen countries of the pan-European region had been selected for in-depth review, namely: Bosnia and Herzegovina, Finland, France, Georgia, Italy, Kyrgyzstan, Lithuania, Malta, Netherlands, Republic of Moldova, Romania, Serbia, Slovenia, Spain, Tajikistan and Ukraine. The Chair then invited the Working Group to comment on the concept note of the scoping study and to contribute to its preparation.

67. The Working Group:

(a) Conveyed its appreciation to the Netherlands, Bosnia and Herzegovina and the International Water Association for their leadership and support in strengthening implementation of the programme area, including the provision of financial support;

(b) Acknowledged the efforts made by several countries to adopt and scale up the water safety plan approach in policy and in practice, and encouraged other countries to intensify activities to accelerate the uptake of water and sanitation safety plans;

(c) Entrusted the lead Parties and the joint secretariat to advance the implementation of the sanitation scoping study and invited all delegates to provide feedback and comments to the secretariat by 20 December 2017;

(d) Endorsed the proposed plans for future work on the safe and efficient management of water supply and sanitation systems.

X. Equitable access to water and sanitation

68. The representative of France, co-lead Party for the programme area on equitable access to water and sanitation, presented progress achieved in 2017, in particular the on-going application, in Azerbaijan and Serbia, of the *Equitable Access Score-card* for carrying out self-assessment of equity of access, the use of the *Guidance Note on the Development of Action Plans to Ensure Equitable Access to Water and Sanitation* in Armenia and North Macedonia, as well as concrete actions taken in Hungary and Portugal to improve the situation regarding equitable access. He also shared the main outcomes of the fourth meeting of the Expert Group on Equitable Access to Water and Sanitation (Budapest, 13 and 14 September 2017).

69. The Working Group was informed of the proposal of the Expert group on Equitable Access to Water and Sanitation under the Working Group for the development of a new publication entitled *Capitalizing findings and lessons learned from the work on equitable access to water and sanitation under the Protocol on Water and Health*, and was invited to comment on the proposed draft outline of the publication and the road map for its development.

70. Subsequently, representatives of Azerbaijan, Serbia and the Bulgarian NGO Earth Forever reported on the progress made in assessing the equity of access to water and sanitation in their countries. Representatives of Armenia and North Macedonia shared an update on progress made in the development of equitable access action plans, respectively at the national and local levels, to address access gaps. A representative of Georgia asked for support to engage in a self-assessment of equitable access. Representatives of Serbia and Azerbaijan requested further support to develop equitable access action plans.

71. The joint secretariat provided information on the outcomes of a side event entitled “Water, sanitation, hygiene and health: closing the equity gap”, organized at the Sixth Ministerial Conference on Environment and Health (Ostrava, Czechia, 13–15 June 2017).

72. A representative of WaterLex stressed the need to involve national human right institutions in work on equitable access to water and sanitation. A representative of WHO highlighted the important role of water operators in addressing equity challenges and invited the Working Group to provide comments on the draft publication *Equity in water safety planning*, which was available for public review.

73. A representative of France then presented the activities on equitable access to water and sanitation to be implemented in 2018.

74. The Working Group:

(a) Welcomed the continued remarkable progress of activities under this programme area;

(b) Conveyed its appreciation to Hungary and France for their leadership of that work and to France for the continued provision of financial support;

(c) Invited comments to the draft outline of the publication entitled *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*, to be submitted to the ECE secretariat by 20 December 2017, as well as contributions, to be submitted by the end of January 2018;

(d) Entrusted the lead Parties, in cooperation with the joint secretariat, to further develop the draft publication *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* and to finalize, publish and print it in English, French and Russian for the fifth session of the Meeting of the Parties;

(e) Took note of the side event on equitable access organized at the Sixth Ministerial Conference on Environment and Health.

XI. Increasing resilience to climate change

75. The ECE secretariat introduced the objectives, scope and status of preparations of the International Workshop on Water Scarcity: Taking action in transboundary basins and reducing health impacts, which was scheduled to be held in Geneva, on 11 and 12 December 2017. The workshop aimed to accelerate actions to address water scarcity and thereby reduce the related health, social, economic and environmental risks, by sharing practical solutions, in particular from the perspective of transboundary water cooperation and health impacts. The workshop provided a unique opportunity to bring together expertise and experience under the Water Convention and the Protocol on Water and Health.

76. Delegates then reported on planned activities in the area of climate change resilience. A representative of Romania said that information on increasing resilience to climate change would be reflected in the national summary report in 2019. The Republic of Moldova reported on the recent adoption of a sectorial strategy on climate change adaptation, as a part of which the impacts of seasonal heat-waves on water quality and quantity would be analysed.

77. The representative of Italy reported on the promotion of the work under the Protocol at the Group of Seven Ministerial Meeting on Health (Milan, Italy, 5 and 6 November 2017) under the Italian Group of Seven Presidency, which had specifically focused on the impact of climate and environmental factors on health.

78. The Working Group:

(a) Conveyed its appreciation to the lead Parties, Italy and Spain, for their leadership and support in strengthening implementation of this programme area;

(b) Took note of the objectives, scope and status of preparations of the International Workshop on Water Scarcity;

(c) Welcomed collaboration with the Water Convention in this programme area;

(d) Endorsed the proposed plans for future work on increasing resilience to climate change.

XII. Assistance to support implementation at the national level

79. The ECE secretariat briefed the Working Group on the support for implementation of the Protocol at the national level provided by the National Policy Dialogues in Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, the Republic of Moldova, Tajikistan and Ukraine. A representative of Romania, which was currently chairing the European Union Water Initiative Eastern Europe, the Caucasus and Central Asia Working Group, thanked ECE for supporting activities on the ground in the above-mentioned countries. The representative of the Republic of Moldova also expressed gratitude for the support provided to ensure progress in the field of water and health in the country.

80. The ECE secretariat and representatives of Kyrgyzstan and Tajikistan also updated the Working Group on progress in the implementation of assistance activities in the two countries, supported by the Programme for Finland's Water Sector Support in Kyrgyzstan and Tajikistan (FinWaterWEI II). In both countries, national working groups had been established and had started the process of revising targets. The WHO secretariat briefed the Working Group on the progress made with FinWaterWEI II regarding the scaling up of water safety plans in policy and in practice and the strengthening of national capacities concerning drinking water quality surveillance.

81. The WHO secretariat briefed the Working Group on assistance provided to seven countries through the framework of biennial cooperative agreements between the WHO Regional Office for Europe and the ministries of health in the region. Those activities were fully aligned with the thematic priorities under the Protocol's programme of work and had been designed to support its implementation and to build national capacities for strategic longer-term actions.

82. The representative of Uzbekistan informed the Working Group about a briefing on obligations under the Protocol (Tashkent, 6 September 2017) that aimed at clarifying the legal provisions of the Protocol and explaining the benefits of accession thereto to the relevant ministries and agencies. Following the briefing, the country initiated interministerial consultations on accession to, and the setting of national targets under, the Protocol. The country requested support from the secretariat in preparing a baseline analysis of the situation regarding water and health.

83. The Working Group:

(a) Expressed appreciation for the significant support provided by the ECE-led National Policy Dialogues for the implementation and application of the Protocol at the national level in countries in Eastern Europe, the Caucasus and Central Asia;

(b) Acknowledged the significant support provided through the WHO biennial cooperative agreements for the implementation of the programme of work and activities of the Protocol at the national level;

(c) Welcomed the progress made under the projects supported by FinWaterWEI II regarding support for the implementation of national targets in Tajikistan and Kyrgyzstan, as well as the scaling up of water safety plans and effective water quality monitoring in Tajikistan, and commended Finland for the support provided;

(d) Took note of the request for support in developing a baseline analysis of the situation regarding water and health in Uzbekistan.

XIII. Outcomes of the Sixth Ministerial Conference on Environment and Health

84. The WHO secretariat informed the Working Group of the main outcomes of the Sixth Ministerial Conference on Environment and Health (Ostrava, Czechia, 13–15 June 2017), in particular the high-level commitments made by Member States to take action in seven key areas related to the environment and health, including water, sanitation and health, through the development, by the end of 2018, of national portfolios of action, which would reflect respective country priorities regarding environment and health. The Ostrava Declaration made strong reference to the Protocol on Water and Health as the prime regional instrument to translate the Ostrava commitments related to water, sanitation and health into action.

85. Delegates exchanged their views and country actions towards implementation of the Ostrava commitments. The representative of Ukraine noted that the Ostrava Declaration was an important political instrument and that a focal point had been designated to facilitate its implementation. A delegate of Serbia said that the Protocol was important for a number of reasons, including its links with the European Environment and Health Process and Sustainable Development Goal implementation at the country level, as well as its reporting mechanism, which supported the monitoring of progress regarding the WASH-related Ostrava commitments. France reiterated that the Ostrava Declaration was a pan-European commitment and called for intersectoral participation and public participation in its realization.

86. The Chair concluded the session by acknowledging the strong links between the Protocol on Water and Health, the 2030 Agenda and the Ostrava Declaration, and by encouraging the delegates to reach out to the respective focal points to ensure harmonized action.

87. The Working Group:

(a) Acknowledged the instrumental role of the Protocol in fulfilling the water, sanitation and health-related commitments of the Ostrava Declaration on Environment and Health;

(b) Encouraged all Parties and other States to consider the compendium of possible actions related to water and sanitation listed in annex 1 of the Ostrava Declaration as areas for target setting and implementation under the Protocol.

XIV. Implementation of the programme of work for 2017–2019

88. The joint secretariat summarized the progress made in the implementation of the programme of work for 2017–2019 and emphasized that significant results had been attained for most of the activities in all programme areas during the first year of the triennium. Such progress had been possible thanks to the outstanding growing commitment of countries working within the framework of the Protocol. The joint secretariat particularly thanked the lead Parties, countries and organizations for their support in strengthening implementation of the programme of work. The role of the Compliance Committee in triggering progress regarding the setting of targets under the Protocol was also highlighted.

89. The Working Group welcomed the increasing integration of activities implemented by ECE and the WHO Regional Office for Europe, which was key to the efficient use of human and financial resources.

90. The Working Group was also encouraged to further align the work under the Protocol with the activities undertaken to implement global and regional commitments, such as the 2030 Agenda, the United Nations High-level Political Forum on Sustainable Development and the Ostrava Declaration on Environment and Health.

91. The Working Group:

(a) Welcomed the progress report on the implementation of the programme of work for 2017–2019 since the fourth session of the Meeting of the Parties;

(b) Commended Parties, other cooperating States and partners, in particular the lead countries and organizations, for their work and support to date for the implementation of the programme of work for 2017–2019.

XV. Financial resources to support the implementation of the Protocol

92. The Working Group was informed of the financial status of the ECE Technical Cooperation Trust Fund and the WHO Regional Office for Europe Voluntary Fund, including

the contributions received, the funds used and the resources required for the implementation of the programme of work for 2017–2019.⁸

93. The joint secretariat highlighted that, despite its efforts to identify co-funding opportunities for financing underfunded activities and covering staff costs from funds not earmarked for the Protocol, the annual amounts received in the Protocol funds were neither sufficient to cover the costs of the secretariat staff nor to implement all the activities foreseen in the programme of work for 2017–2019. The financial situation under the Protocol was therefore unsustainable in the long-term and could also affect implementation of activities in the short-term.

94. The joint secretariat further stressed that, with the increasing number of activities under the Protocol, it needed a stable and predictable flow of financial resources to implement the planned activities and to maintain the expected level of secretariat services.

95. Representatives of the following countries made a commitment to supporting the implementation of the programme of work:

(a) Norway indicated its plans to continue to make financial contributions similarly to previous years;

(b) Switzerland confirmed the continuation of its contribution to the work of the Task Force on Target Setting and Reporting;

(c) France made a commitment to contribute to financing the work on equitable access to water and sanitation.

96. The Chair thanked the Parties for the funds contributed or pledged and the countries and organizations for their in-kind contributions. He also encouraged the Working Group to proactively approach the national authorities responsible for funding, in order to promote the work under the Protocol and request funding for its activities.

97. The Working Group:

(a) Took note of the reports on contributions, expenditures and funding gaps;

(b) Expressed its gratitude to Parties and other cooperating States and especially to the lead countries and organizations that had provided financial and in-kind contributions to the implementation of the programme of work for 2017–2019;

(c) Called on Parties, other States and relevant organizations to actively contribute to the activities contained in the programme of work, including through financial and in-kind contributions, to ensure predictable and stable funding allowing for reliable secretariat services and support for the implementation of activities.

XVI. Date and venue of the eleventh meeting

98. The secretariat announced that the eleventh meeting of the Working Group on Water and Health had been tentatively scheduled to be held in Geneva, on 7 and 8 November 2018.⁹

⁸ See www.unece.org/fileadmin/DAM/env/documents/2017/WAT/11Nov_15-16_10thWGWH/Inf_doc/INF10_Item16_ENG_contributions_expenditures_2017_rev.pdf.

⁹ See footnote 4 above.