## PROJECT CONCEPT NOTE

Project Title	Protocol on Water and Health
Project Manager	Francesca Bernardini and Nataliya Nikiforova
Subprogramme	Environment
Implementing Entity	UNECE
Start Date	2007
End Date	None
Budget	In accordance with the periodic decisions of the Meeting of the Parties to the Protocol on Water and Health
Beneficiary Countries	Parties to the Protocol and other UNECE member States
Cooperating Entities within the UN System	WHO/Europe, WHO, UNEP, UNESCO, UN- Habitat, UNDP, WORLD BANK, UNISDR, UNFCCC,
Other Implementing Partners	OSCE, OECD, GWP, regional environmental centres, EIB, EBRD, SIWI, IWA, Eureau, WECF

# **Background**

Nowadays, most Europeans take clean drinking water for granted. Yet, in the pan-European region alone, about 19 million people still do not have access to improved water sources and 67 million people lack access to improved sanitation facilities. About 100 million people do not have access to sanitation facilities at home, which makes them vulnerable to water-related diseases, such as cholera, bacillary dysentery, coli infections, viral hepatitis A and typhoid. Cleaner water and better sanitation could prevent up to 30 million cases of water-related disease each year in the region.

The main aim of the Protocol on Water and Health to the Convention on the Protection and Use of Transboundary Watercourses and International Lakes is to protect human health and well-being by better water management, including the protection of water ecosystems, and by preventing, controlling and reducing water-related diseases. The Protocol is the first international agreement of its kind adopted specifically to attain an adequate supply of safe drinking water and adequate sanitation for everyone, and effectively protect water used as a source of drinking water.

To meet these goals, its Parties are required to establish national and local targets for the quality of drinking water and the quality of discharges, as well as for the performance of water supply and wastewater treatment. They are also required to reduce outbreaks and the incidence of water-related diseases.

The Protocol was adopted in London on 17 June 1999 and entered into force on 4 August 2005.

The representatives of the Parties constitute the Meeting of the Parties to the Protocol and hold their meetings on a regular basis, according to article 16 of the Protocol.

According to article 16, paragraph 3, of the Protocol, the Meeting of the Parties, shall:

- (a) Review the policies for and methodological approaches to the prevention, control and reduction of water-related disease, promote their convergence, and strengthen transboundary and international cooperation in accordance with articles 11, 12, 13 and 14;
- (b) Evaluate progress in implementing this Protocol on the basis of information provided by the Parties in accordance with guidelines established by the Meeting of the Parties. Such guidelines shall avoid duplication of effort in reporting requirements;

[....]

- (h) Establish a programme of work, including projects to be carried out jointly under this Protocol and the Convention, and set up any bodies needed to implement this programme of work;
- (i) Consider and adopt guidelines and recommendations which promote the implementation of the provisions of this Protocol;

[...]

(l) Consider and undertake any additional action that may be required for the achievement of the purposes of this Protocol.

Article 17 set out legal obligations for the Executive Secretary of UNECE and the and the Regional Director of the Regional Office for Europe of the World Health to jointly carry out the secretariat functions for the Protocol. These obligations are permanent and have no end dates.

At its first session (Geneva, 17-19 January 2007, see ECE/MP.WH/2 and its addenda), and regularly at all its subsequent sessions, the Meeting of the Parties has adopted intersessional programmes of work to support the implementation of the Protocol. These programmes of work are costs and include a tentative budget of the different activities.

Moreover, also at its first session, recognizing the need for additional resources to implement the Protocol and its programme of work, the Meeting of the Parties, through Decision I/5, decided to establish two trust funds under the Protocol (one managed by UNECE and one managed by WHO/Europe) for voluntary contributions to support the promotion and effective implementation of the Protocol and its programme of work. The Decision entrusts the two sides of the joint secretariat to manage their respective trust fund in accordance with their established rules and regulations and to report to Parties on contributions to the trust fund and their use.

The programmes of work adopted by the Meeting of the Parties are based on the needs and requests of both Parties and non-Parties and are the product of extensive consultations processes, aiming to respond to the most important challenges for water, sanitation and health in the pan-European region.

The main beneficiaries are government representatives responsible for water, sanitation and health. Other stakeholders and beneficiaries include non-governmental organizations and academia engaged in these sectors.

The decisions on the programme of work and any other decisions taken by the Meeting of the Parties in accordance with Article 16 form a continuum without interruption in time in supporting implementation of the Protocol. This "project" therefore has no end date. It is therefore not appropriate to restrict the use of financial contributions to specific years, unless specifically requested by the donors.

The implementation of the Protocol contributes to the attainment of the 2030 Agenda for Sustainable Development, including the Sustainable Development Goals (see below).

The equity dimension (including gender equity) is an important dimension of the Protocol. A dedicated area of work on equitable access to water and sanitation has been included in the Protocol's programme of work since the first session of the Meeting of the Parties in 2007.

Strategic partnerships are a key priorities for the Meeting of the Parties and for each activities in the programme of work, potential partners are identified by the Meeting of the Parties.

#### Relationship to the Strategic Framework and the Sustainable Development Goals

The proposed project directly contributes to the implementation of the UNECE Strategic framework for the period 2016-2017 and the proposed Strategic framework for the period 2018-2019, as it will advance the objective of the Environment subprogramme to improve environmental governance and performance throughout the region for safeguarding the environment and health. Specifically, the project contributes to the Expected Accomplishments (a) and (b) of both ECE strategic documents: (a) Improved response to environmental challenges by ECE constituencies, and (b) Strengthened implementation and increased geographical coverage of ECE multilateral environmental agreements.

The project supports target countries in their achievement of the Agenda 2030 and the Sustainable Development Goals (SDGs). Most notably, the Protocol supports implementation of SDG 6 on clean water and sanitation.. Implementation of the Protocol also supports the achievement of the following SDGs:

- 1. No poverty Ensures access to water and sanitation services to the poor and the vulnerable
- 2. Zero hunger –Avoids malnutrition from water-related disease.
- 3. Good health and well-being Reduces deaths and illness from water-related disease, particularly diarrhoea, and from hazardous chemicals in water.
- 4. Quality education improves access to water, sanitation and hygiene in educational facilities, thereby promoting safe and effective learning environments for all
- 11. Sustainable cities and communities Reduces the economic and social impacts of water related disasters.

## **Objective**

The objective of the project is to support the implementation and application of the Protocol on Water and Health

## **Expected accomplishments**

The expected accomplishments (EAs ) may be determined and revised by the Meetings of the Parties. At this point, the secretariat suggests:

EA1: Implementation of the long-term vision and programme of work under the Protocol

EA2: Improved implementation of the Protocol by Parties and their application by non-Parties

#### **Indicators of achievement**

Indicators of achievement (IAs) may be determined and revised by the Meeting of the Parties. At this point, the secretariat suggests:

IA1: Number of Parties to the Protocol

IA2: Number of national implementation reports submitted in latest cycle

#### Main activities

Not applicable. The main activities are determined periodically by the Meeting of the Parties within the Protocol's programmes of work.

The past programme of work of the Protocol for 2014-2016 (ECE/MP.WH/11/Add.1–EUDCE/1206123/3.1/2013/MOP-3/06/Add.1) had seven areas of work, namely improving governance for water and health; prevention and reduction of water-related diseases, small-scale water supplies and sanitation, safe and efficient management of water supply and sanitation systems, equitable access to water and sanitation, assistance to support implementation at the national level and compliance procedure.

The new programme of work for 2017-2019 (ECE/MP.WH/13/Add.2–EUPCR/1611921/2.1/2016/MOP-4/06/Add.2, forthcoming) has nine areas of work: improving governance for water and health; prevention and reduction of water-related diseases, institutional water, sanitation and hygiene, small-scale water supplies and sanitation, safe and efficient management of water supply and sanitation systems, equitable access to water and sanitation, increasing resilience to climate change, assistance to support implementation at the national level and compliance procedure.

## **Assumptions and Risks**

Assumptions—the factors or conditions that must exist for the project to succeed, but are beyond the control of project management—include: (a) member State Governments remain committed to implementation of the Protocol.

Risks for the delivery of activities and for the achievement of expected accomplishments include:

(a) Weakened country interest in and commitment to engage in the activities in the Protocol's programme of work. The secretariat will work with the Bureau to maintain interest in and commitment to the implementation of the Protocol and activities set out in the Protocol programmes of work;

(b) Financial contributions decline. The secretariat will work with the Bureau to ensure adequate financial and in-kind resources are made available to support the implementation of the Protocol programmes of work.

# Results-based work plan

Not applicable. The workplan is determined periodically by the Meeting of the Parties (see programme of work of the Protocol for 2014-2016 (ECE/MP.WH/11/Add.1-EUDCE/1206123/3.1/2013/MOP-3/06/Add.1) and the programme of work for 2017-2019 (ECE/MP.WH/13/Add.2-EUPCR/1611921/2.1/2016/MOP-4/06/Add.2, forthcoming).

## **Budget**

Not applicable. The budget is determined periodically by the Meeting of the Parties.

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Annex<sup>1</sup>

# Overview of resource requirements for 2017–2019

(in United States dollars)

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No.	Programme area or activity	Lead country/body or organization	Fraction of staff time <sup>a</sup>	Item	Estimated costs
	Bodies to implement the programme of work	Working Group on Water and Health and Bureau		Travel of eligible experts to meetings of the Working Group on Water and Health (three meetings, 18 experts per meeting)	108 000
				Travel of eligible Bureau members to meetings of the Bureau (six meetings, two members per meeting)	12 000
				Travel of WHO staff	10 800
			0.30	ECE P-3 staff time per year for three years	166 300
			0.20	ECE G-4 staff time per year for three years	85 700
			0.12	WHO/Europe P-5 staff time per year for three years	87 300
			0.13	WHO/Europe P-4 staff time per year for three years	79 800
			0.06	WHO/Europe G-5 staff time per year for three years	16 000
	Subtotal: Implementing bodies				565 900
1	Improving governance for water and health: support for setting targets and implementing measures	Task Force on Target Setting and Reporting; co-led by Romania and Switzerland		Organization of up to three thematic Task Force meetings (travel of up to 18 eligible experts)	108 000
				Organization of up to three national and/or subregional workshops to support the setting of targets and the implementation of measures	60 000
				Support to twinning activities (e.g. travel of national experts)	12 000
				Development of analysis of the benefits, outcomes and concrete results achieved through the implementation of the Protocol at both the national and regional levels	15 000
				Development and publication of a guidance booklet on how to translate the 2030 Agenda into national targets set under the Protocol	20 000

<sup>&</sup>lt;sup>1</sup> See ECE/MP.WH/13/Add.2-EUPCR/1611921/2.1/2016/MOP-4/06/Add.2, forthcoming.

No.	Programme area or activity	Lead country/body or organization	Fraction of staff time <sup>a</sup>	Item	Estimated costs
				Other costs (consultants, including costs for the preparation of the regional implementation report, translation of summary reports, exploring possibilities to develop an electronic tool for reporting, etc.)	60 000
				Travel of WHO staff	10 800
			0.40	ECE P-3 staff time per year for three years	221 800
			0.20	ECE G-4 staff time per year for three years	85 700
			0.03	WHO/Europe P-5 staff time per year for three years	21 800
			0.04	WHO/Europe P-4 staff time per year for three years	24 500
			0.01	WHO/Europe G-5 staff time per year for three years	2 700
	Subtotal: Programme area 1				642 300
2	Prevention and reduction of water- related diseases	Co-led by Belarus and Norway		Development of annotated training modules on water-related disease surveillance	12 000
				Organization of three national capacity-building activities on water- related disease surveillance and outbreak management	45 000
				Review and revision of technical guidance document on water- related disease surveillance, including two expert group meetings	55 000
				Development of advocacy document for decision makers on risk-based surveillance of drinking water quality	37 000
				Organization of two subregional and two national advocacy and capacity-building workshops on risk-based surveillance of drinking water quality	90 000
			0.07	WHO/Europe P-5 staff time per year for three years	51 000
			0.15	WHO/Europe P-4 staff time per year for three years	92 000
			0.06	WHO/Europe G-5 staff time per year for three years	16 000
	Subtotal: Programme area 2				398 000
3	Institutional water, sanitation and hygiene	Co-led by Georgia, Hungary and the Republic of Moldova		Organization of one regional and two subregional workshops on WASH in schools	135 000
				Development of a practical tool for public health authorities to improve surveillance of WASH in schools	20 000
				Development of a "WASH toolkit" for school administration	20 000

No.	Programme area or activity	Lead country/body or organization	Fraction of staff time <sup>a</sup>	Item	Estimated costs
				Organization of one expert group meeting on WASH in schools	25 000
				Support baseline analysis of the situation of WASH in health-care	40 000
				facilities in two countries	

No.	Programme area or activity	Lead country/body or organization	Fraction of staff time <sup>a</sup>	Item	Estimated costs
				Organization of a regional workshop on WASH in health-care facilities	55 000
				Support a pilot project on WASH in HCFs: application of WHO risk-based tool and development of improvement plans as a basis for further scale-up in the region	20 000
			0.06	WHO/Europe P-5 staff time per year for three years	43 700
			0.11	WHO/Europe P-4 staff time per year for three years	67 500
			0.05	WHO/Europe G-5 staff time per year for three years	13 300
	Subtotal: Programme area 3				439 500
4	Small-scale water supplies and sanitation	Co-led by Germany and Serbia		Organization of two subregional workshops and two national consultations/workshops on small-scale water supplies and sanitation	125 000
				Development of a guidance document on sustainable financing of small-scale water supplies and sanitation in English and Russian	30 000
				Support situation analysis (e.g., rapid assessments) of small-scale water supplies and sanitation in a selected country as a basis for target setting and developing improvement strategies	35 000
				Support a field project on integrated water safety and sanitation safety plans in rural areas	30 000
				Support regional networking and intercountry collaboration through study visits	15 000
			0.05	WHO/Europe P-5 staff time per year for three years	36 400
			0.08	WHO/Europe P-4 staff time per year for three years	49 100
			0.05	WHO/Europe G-5 staff time per year for three years	13 300
	Subtotal: Programme area 4				333 800
5	Safe and efficient management of water supply and sanitation systems	Co-led by Bosnia and Herzegovina, the Netherlands and IWA		Organization of up to five subregional/national capacity-building consultations/workshops on water and sanitation safety plan approaches to support policy uptake and development of national road maps	90 000
				Organization of a regional symposium on extreme weather events and safe water supply and sanitation, specifically focusing on WSP and SSP approaches	70 000

No.	Programme area or activity	Lead country/body or organization	Fraction of staff time <sup>a</sup>	Item	Estimated costs
				Undertake a scoping study on sanitation management (including reuse) in the pan-European region	20 000
				Organization of a regional workshop on safe and efficient management of sanitation, including reuse	70 000
				Expert group meeting on sanitation management for development of policy/technical guidance tools	40 000
			0.30	ECE P-3 staff time per year for three years	166 300
			0.10	ECE G-4 staff time per year for three years	42 800
			0.05	WHO/Europe P-5 staff time per year for three years	36 400
			0.06	WHO/Europe P-4 staff time per year for three years	36 800
			0.02	WHO/Europe G-5 staff time per year for three years	5 300
	Subtotal: Programme area 5				577 600
6	Equitable access to water and sanitation: translating the human right to water and sanitation into practice	Co-led by France and Hungary		Equitable access self-assessment exercises in up to three countries (national and international consultancy, local costs for two local workshops, trips by two national experts for exchange of experience)	90 000
				Definition of equitable access action plans in up to three countries (international and national consultancy, local costs for local workshop, translation)	60 000
				Up to two meetings of the expert group on equitable access to water and sanitation	30 000
				One regional workshop on good practices for the development of equitable access action plans	50 000
				Consultancy costs, translation, interpretation, printing	25 000
			0.40	ECE P-3 staff time per year for three years	221 800
			0.10	ECE G-4 staff time per year for three years	42 800
			0.01	WHO/Europe P-4 staff time per year for three years	6 100
	Subtotal: Programme area 6				525 700

No.	Programme area or activity	Lead country/body or organization	Fraction of staff time <sup>a</sup>	Item	Estimated costs
	Of which staff costs:				
	Subtotal ECE staff (2 P-3 and 0.8 G-4 per year for three years, including programme support costs)				1 765 399
Subtotal WHO/Europe staff (0.45 P-5, 0.60 P-4 and 0.25 G-5 per year for three years, including programme support costs)				861 399	

<sup>&</sup>lt;sup>a</sup> Figures for Professional (P) and General Service (G) staff time represent the fraction of the total work time of a full-time staff member. ECE staff time is calculated at the P-3 level at the average cost of US\$ 184,800 per person-year and at the G-4 level at the average cost of US\$ 142,800 per person-year. WHO/Europe staff time is calculated at the average cost of US\$ 242,500 for P-5 staff, US\$ 204,500 for P-4 staff and US\$ 88,500 for G-5 staff, per person-year.