

UNECE

**World Health
Organization**
REGIONAL OFFICE FOR **Europe**

The Protocol on Water and Health

Driving action on water,
sanitation, hygiene and health



UNITED NATIONS

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The Protocol on Water and Health

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A UNIQUE AGREEMENT



The Protocol on Water and Health to the 1992 Convention on the Protection and Use of Transboundary Watercourses and International Lakes is an international legally binding agreement for countries in the pan-European region. Its objective is to protect human health and well-being through sustainable water management and by preventing and controlling water-related diseases.

The Protocol was adopted in 1999, when 36 states came together at the Third Ministerial Conference on Environment and Health in London, United Kingdom. The vision was then – as it is now – to develop an instrument that helps governments to improve water, sanitation, hygiene and health conditions across their countries, and to sustain their improved status in the long term (see Box 1).

The Protocol is a unique agreement in many ways.

- Globally, it is the first and only treaty that focuses on water, sanitation, hygiene and health.
- It combines environmental protection with promotion of human health, bringing together various sectors and professional communities such as environmentalists, public health professionals, hydrologists, epidemiologists and water, sanitation and hygiene professionals.
- It covers the entire water cycle, including water-resource protection, the drinking-water supply chain from catchment to consumption and the sanitation chain from collection and treatment of wastewater to its discharge and reuse, as well as water used for recreation.
- It was a precursor to the human rights to safe drinking-water and sanitation and to Sustainable Development Goal 6 on water and sanitation, and it promotes equitable access to safe water, sanitation and hygiene for all in all settings.
- It promotes effective responses to outbreaks of water-related diseases and management of risks arising from extreme weather events and other climate risks.



Box 1.

Water, sanitation and hygiene as priorities for action

Safe water and adequate sanitation and hygiene are basic conditions for **dignity, human health and well-being**, as well as for a **safe and clean environment**. Simple things like having access to safe drinking-water, to soap and safe water for hand-washing, to adequate toilet facilities that are well maintained and prevent environmental contamination can go a long way to preventing the spread of infectious diseases and ensuring sustainable development.

Clean water, safe sanitation and adequate hygiene are also crucial for:

- safeguarding the attainment of human rights and gender equality;
- providing high-quality health care in hospitals and other facilities;
- ensuring that schools and other learning environments are safe and inclusive for all children.

CORE PROVISIONS OF THE PROTOCOL

The Protocol requires Parties to take all appropriate measures to ensure:

- adequate supplies of safe drinking-water for everyone, including water for personal hygiene;
- adequate sanitation for everyone, of a standard that protects human health and the environment;
- protection of water resources used as sources of drinking-water and their related ecosystems;
- sufficient safeguards for human health against water-related diseases, including improving and maintaining effective surveillance systems for water quality and water-related diseases.

To achieve these objectives, the Protocol's core provisions address setting targets on water, sanitation, hygiene and health; surveillance and response to water-related diseases; public engagement and public information; and international cooperation.

A main obligation under the Protocol is to **set concrete and measurable targets on water, sanitation, hygiene and health** that provide a pathway for stepwise improvement, taking into account countries' needs, priorities and socioeconomic situations. Targets should be set following a baseline analysis of the prevailing situation in the country and should be accompanied by realistic action plans, outlining time-bound measures, responsible institutions and financial resources for implementation.

Every three years, **countries submit summary reports** providing comprehensive accounts of their progress in achieving the targets and an overview of the national situation with respect to water, sanitation and hygiene. The reporting cycle offers a rich data hub, providing an account of the situation in the region and information on existing environmental and health legislation and policies.

The Protocol requires Parties to establish, maintain and improve national and local systems for **surveillance and early warning of water-related diseases** (see further information in Box 2). Having functional surveillance systems in place is important to identify outbreaks or incidents of disease in a timely fashion, facilitating prompt responses by the authorities and disclosure of information to the public. Parties are also required to develop contingency plans and to ensure that authorities hold up the necessary **response capacity**.

The Protocol has dedicated provisions for strengthening **public awareness, education and training**, and to ensure the accessibility of **public information**.

The Protocol promotes **international cooperation** on water, sanitation, hygiene and health. It provides an institutional framework through which policy-makers and experts meet regularly, fostering mutual assistance and peer-to-peer support between countries.



Box 2.

Definition of a water-related disease

The Protocol defines a water-related disease as “Any significant adverse effects on human health (...) caused directly or indirectly by the condition, or changes in the quantity or quality, of any waters” (1).

Examples of water-related diseases include infectious diseases that can be transmitted through water, such as legionellosis, cryptosporidiosis, typhoid fever and viral hepatitis A, but also non-infectious diseases caused by exposure via drinking-water (such as cancer caused by arsenic, methemoglobinemia by nitrate, and neurodevelopmental effects by lead exposure).

BENEFITS OF THE PROTOCOL

When joining the Protocol community, countries inscribe their national efforts on water, sanitation and hygiene, environment and health into an international framework, deriving concrete benefits including:

- influence on international policy and decision-making on water, sanitation and hygiene, including identifying regional priorities to be reflected in the Protocol's activities;
- engagement in the development of the Protocol's technical resources, including evidence-based guidance materials and practical tools for both policy-makers and water, sanitation and hygiene professionals;
- targeted support and capacity-building through cross-country exchange, technical assistance and international projects;
- increased visibility for national activities and achievements on water, sanitation and hygiene.

Furthermore, implementing the Protocol means that countries set targets, review them regularly and report on progress, thereby **strengthening accountable water, sanitation, hygiene and health governance**. The targets can also provide a reliable framework to channel donor support.

The Protocol helps countries to **integrate water, sanitation and hygiene priorities under one coherent framework** across different sectors, including environment, public health, finance, agriculture, rural development, education, justice and home affairs. Typically implemented through the establishment or use of existing interministerial working groups, in some countries these also include representatives of civil society, professional associations and human rights institutions.

Countries are better able to **respond to epidemics and achieve an inclusive recovery**, alongside **strengthening preparedness against future epidemics**. The COVID-19 pandemic is a reminder of the crucial role of proper water, sanitation and hygiene services as a first line of defence in preventing and controlling the spread of infectious diseases. Investment in water, sanitation and hygiene is a central policy prescription for a healthy and green recovery,



and the Protocol can play a key role in “building forward better” and more fairly by promoting safe, resilient and equitable water, sanitation and hygiene services. In particular, countries can:

- set targets tailored to the needs and priorities of the pandemic response – these may also be linked to preparedness, response and recovery programmes, to secure appropriate investment and funding;
- benefit from tools to reach the most vulnerable and marginalized communities that were hardest hit by the pandemic;
- benefit from tools to strengthen water, sanitation and hygiene services in public settings, including schools and health-care facilities, which are key sites in preventing the spread of disease;
- build on the Protocol knowledge base on effective surveillance and response to infectious diseases and the safe management of water, sanitation and hygiene services to implement context-specific public health responses, which may respond to COVID-19 or build preparedness against future infectious diseases (such as waterborne diseases).

Three key benefits of accession to the Protocol

1. The Protocol is a driver to accelerate action on water, environment and health at the national level.
2. Being a Party to the Protocol gives the country access to a wealth of experience and ready-to-use instruments that can be applied at national level – the tools are very practical and easy to use.
3. The Protocol promotes action on several technical aspects that are relevant in the context of COVID-19 and for the prevention and control of infectious diseases.

(Interview with Ms Alena Drazdova, Deputy Director for Science, Republican Scientific Practical Centre of Hygiene under the Ministry of Health, Belarus)

THE PROTOCOL'S ALIGNMENT WITH INTERNATIONAL COMMITMENTS

The Protocol's provisions are flexible and strategically aligned with key international frameworks, so they can be implemented in synergy with countries' regional and international commitments.

The objectives of the Protocol and the **European Union (EU) directives** on water and sanitation are consistent and mutually supportive. In most areas, EU directives set specific requirements that support implementation of the Protocol. In turn, the Protocol can complement EU legislation in a number of technical areas, by:

- serving as an “integration framework” for different water, sanitation and hygiene domains;
- pooling specific technical support, guidance and tools, and capacity-building that facilitate the implementation of EU directives, such as the revised EU Drinking Water Directive (DWD), adopted in December 2020 (Box 3);
- strengthening intersectoral cooperation and integrated data collection on water, sanitation, hygiene and health, in line with EU monitoring and reporting frameworks;
- promoting international cooperation with Protocol Parties and other countries, including states that are in the process of acceding to the EU and other states that are not subject to EU law.

Box 3.

Technical areas where the Protocol can support implementation of EU directives

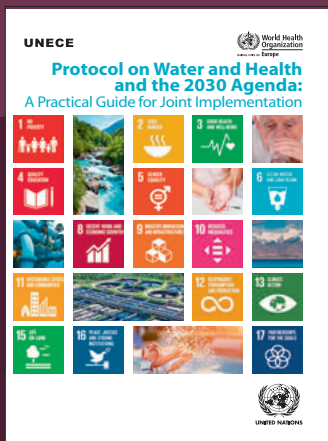
- The Protocol promotes **equitable access to water and sanitation for everyone**, including vulnerable and marginalized groups. It offers consolidated tools and methodologies that have been applied by many countries and that can help with implementation of the new requirements of the DWD in relation to access to water.
- The Protocol supports **risk-based approaches to management and monitoring of drinking-water**, such as WHO-recommended water safety plans (WSPs). These address all steps in the water supply from catchment to consumers; they are an effective approach to implement the new DWD and its requirements relating to risk assessment and risk management of the water supply.
- The Protocol aims to strengthen the **safety and sustainability of small-scale water supplies and sanitation systems**. Work in this area strives to reduce inequities between urban and rural populations, as the latter typically rely on small-scale systems. Effective regulation, management and monitoring of small and on-site sanitation systems also reduces environmental contamination – this strengthens the implementation of the EU Urban Waste Water Treatment Directive and contributes to maintenance of good status for surface water bodies and groundwater resources.

Benefits of using the Protocol to implement EU law

“One of the key added values of the Protocol is that it provides a framework for incremental improvement that can be used for the implementation of EU directives, but also to go beyond them.

For example, Hungary used the Protocol’s target-setting framework to implement the 1998 EU DWD. The final target was in full compliance with the Directive, supported by interim targets under the Protocol. Furthermore, a target going beyond EU legislation was set on risk-based approaches to drinking-water, also covering small-scale supplies.”

(Interview with Ms Marta Vargha, Head of Laboratory, National Institute of Environmental Health, Hungary)



A practical guide for joint implementation of the Protocol and the SDGs was developed under the Task Force on Target Setting and Reporting (3). This provides step-by-step guidance on how to identify, establish and operationalize the links between the Protocol and the 2030 Agenda.

It includes a conceptual overview of the synergies between the Protocol and the 2030 Agenda and practical guidance, including a checklist for joint implementation.

The Protocol’s objectives align strategically with the **2030 Agenda for Sustainable Development and regional political commitments**, including the Sustainable Development Goals (SDGs) and targets related to water, sanitation and hygiene. They are also consistent with the **Ostrava Declaration on Environment and Health**, with a focus on universal access and equity, safely managed services and strengthening of adaptive capacity to climate change.

Therefore, countries can use the Protocol platforms and mechanisms to:

- set joint and/or coordinated national SDG and Protocol targets;
- rely on common indicators under both the Protocol and the SDGs to promote integrated data collection;
- make use of the Protocol’s mandatory reporting mechanisms to track progress with implementation of the 2030 Agenda;
- align the development and implementation of national portfolios of actions on environment and health under the Ostrava Declaration with the objectives and priorities of the Protocol, and use the Protocol as an implementation mechanism for these.

Using the Protocol to support achievement of the SDGs

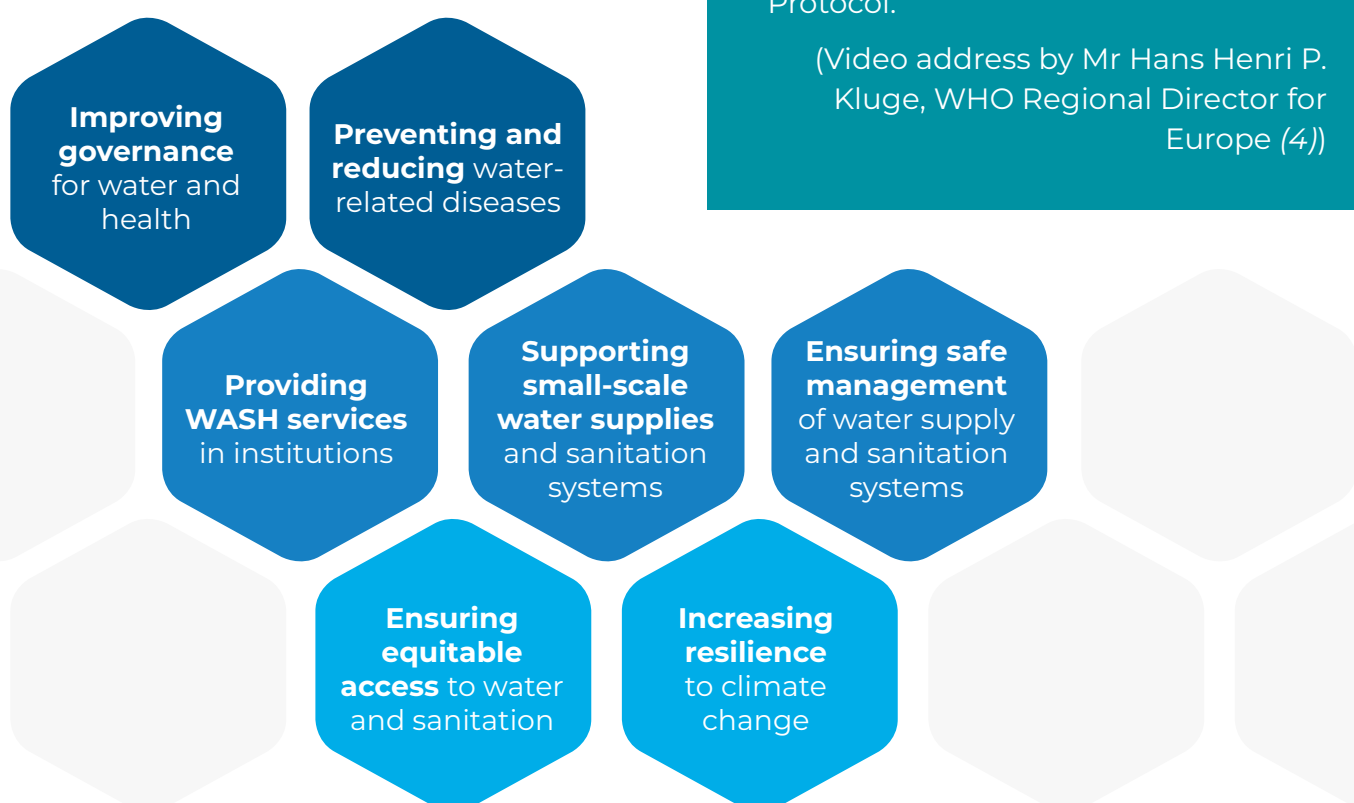
“The Protocol on Water and Health [...] is assisting countries in their efforts to achieve the Sustainable Development Goals. As we enter the decade of action to deliver on the SDGs, I urge all countries to ratify the Protocol and strive for its full implementation.”

(Video message by Mr António Guterres, United Nations Secretary-General (2))

THE PROTOCOL IN ACTION

Parties to the Protocol adopt a new programme of work every three years that guides the activities of the Protocol community and promotes implementation of the Protocol's provisions. The programme responds to **regional priorities, persisting gaps** and **emerging challenges**, and maps activities in a number of technical areas to help countries take action on water, sanitation, hygiene, environment and health (Fig. 1).

Fig. 1. Technical areas under the Protocol's programme of work



The water, sanitation and hygiene agenda today

Much has been achieved in the pan-European region and worldwide, but **there is still so much to do.**

“The Protocol is the prime [pan-] European platform to organize our joint response to close the persistent gaps in [water, sanitation and hygiene] in the region. This will also help to tackle the growing threats like climate change and antimicrobial resistance. I strongly encourage all countries to join and ratify the Protocol.”

(Video address by Mr Hans Henri P. Kluge, WHO Regional Director for Europe (4))

IMPROVING GOVERNANCE FOR WATER AND HEALTH

To promote sustainable, long-term improvements in the water, environment and health sectors, it is vital to strengthen governance frameworks. To achieve this, a one-off legislative change is not sufficient: a continuous process of review and adjustment of policies and regulations, monitoring of in-country conditions and follow-up is needed, to enforce existing efforts and adapt to new circumstances.

The Protocol offers support to countries to translate their political aspirations into tangible national or local targets, accompanied by implementing measures to achieve them. Box 4 gives an example of country practice.

Box 4.

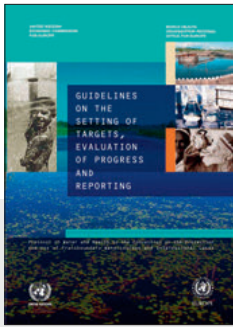
Norwegian experience: setting targets under the Protocol

Having become a Party to the Protocol in 2004, Norway set 50 specific targets on water, sanitation and hygiene, together with detailed measures to achieve them. The targets respond to national challenges and are aimed at improving compliance with existing regulations.

For example, Norway's water distribution and sewerage networks are deteriorating, causing leakage problems, and the renewal rate is very slow. To address this, the country set the following targets:

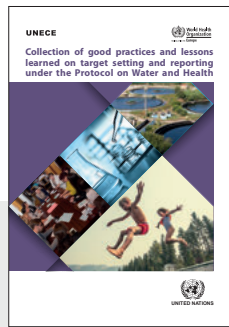
- unplanned interruptions in the water supply should be less than 0.5 hours on average per inhabitant per year;
- the security of supply should be better than 99.95%;
- annual replacement/renovation of the water distribution networks should on average be 2% at the national level until 2035;
- leaks from the individual pipeline network should be less than 25% by 2020.



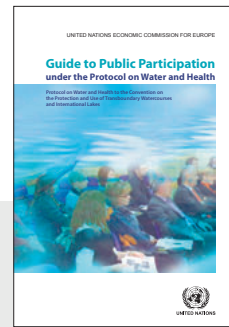


These guidelines on target-setting are based on existing good practices and provide a source of information and assistance for Protocol Parties and other states (5). They provide step-by-step guidance on how to:

- develop targets under the Protocol;
- identify implementing measures to achieve them;
- track and report on progress.



The guidelines are complemented by a compilation of success stories, challenges and diverse approaches undertaken by countries in the areas of target-setting and reporting (6).



A further guide supports countries in ensuring public participation and access to information under the Protocol, including when setting targets and target dates (7).



PREVENTING AND REDUCING WATER-RELATED DISEASES

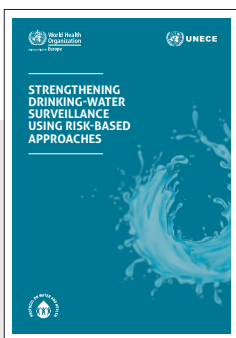
Nearly one fifth of all investigated outbreaks of infectious diseases in the pan-European region are attributable to water. In 2016, more than seven people died every day as a result of water, sanitation and hygiene-related diarrhoea. New threats are also emerging, including antimicrobial resistance and increasing occurrence of Legionnaires' disease.

The Protocol assists countries in controlling and reducing the burden of water-related diseases by:

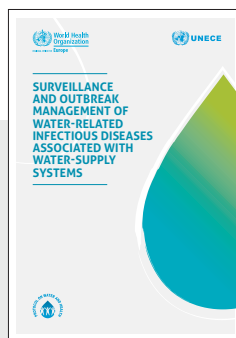
- strengthening national and local capacities for public health surveillance and early warning systems;
- enhancing preparedness, outbreak investigation and response capacities;

- building effective drinking-water quality surveillance systems, including through the uptake of risk-based approaches.

Overall, work in this area helps countries with implementing the global framework on public health response to the international spread of disease: the WHO International Health Regulations.



This publication outlines a rationale for decision-makers, regulators and public health professionals for the promotion and uptake of risk-based approaches to surveillance of drinking-water (8). It contains key messages underlying the concept of risk-based drinking-water surveillance and practical examples to illustrate them.



A further publication supports countries in strengthening the capacity of existing surveillance and management systems for water-related infectious diseases (9). It focuses on diseases associated with the drinking-water supply systems and contains technical information on specific activities and methodologies related to surveillance and outbreak management for these diseases.

PROVIDING WATER, SANITATION AND HYGIENE SERVICES IN INSTITUTIONS

To protect human health and dignity, water, sanitation and hygiene services need to be operational in public settings where people work, play, learn and seek care. Some institutions are of strategic importance because of the social role they fulfil: health-care facilities are at the forefront of curing diseases, while schools are the central place where children learn and shape their futures through education.

Millions of patients and pupils lack access to safe, accessible and acceptable water, sanitation and hygiene facilities, jeopardizing high-quality health care and inclusive learning environments for all children. Adequate water, sanitation and hygiene services in institutions foster positive hygiene behaviours that are necessary to stop the spread of disease, such as COVID-19, and promote the rights and needs of girls and women in managing menstruation with dignity.

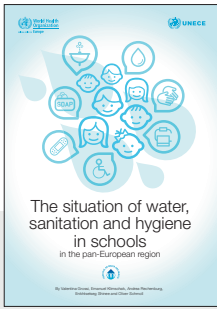
The Protocol supports countries in strengthening water, sanitation and hygiene services in schools and health-care facilities by promoting policy attention; supporting systematic assessments of the water, sanitation and hygiene conditions in institutional settings; and adopting improved standards to ensure enabling governance frameworks and adoption of good water, sanitation and hygiene practices on the ground. Box 5 gives an example of country practice.

Box 5.

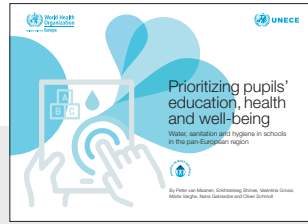
Serbian experience: water, sanitation and hygiene assessment in health care facilities

In 2019, Serbia carried out a national water, sanitation and hygiene survey in 320 health-care facilities and an analysis of the enabling environment through a policy review and expert interviews. The results showed that basic water, sanitation and hygiene services such as sanitation and environmental cleaning were not universally available. Water, sanitation and hygiene conditions were also not acknowledged as a risk factor for disease transmission, including hospital-acquired infections.

The findings had a concrete policy impact: Serbia revised its national regulations on infection prevention and control to integrate critical elements related to water, sanitation and hygiene, such as hygiene plans and monitoring. Furthermore, the assessment informed the definition of “advanced” water, sanitation and hygiene services, which were aligned with international definitions and incorporated into the national surveillance programme.



This publication summarizes the status of water, sanitation and hygiene in schools in the pan-European region, providing comprehensive insight into the progress made and the challenges involved (10).



An advocacy tool was developed to support policy-makers in intensifying their efforts on water, sanitation and hygiene in schools within the context of the Protocol (11).



Evidence-based and ready-to-use surveillance instruments are included in this practical tool to support education and public health authorities in assessing and monitoring water, sanitation and hygiene conditions in schools (12).



This information package outlines the role of staff, pupils and communities in improving water, sanitation and hygiene conditions, providing practical solutions, tips and ready-to-use templates (13).



SUPPORTING SMALL-SCALE WATER SUPPLIES AND SANITATION SYSTEMS

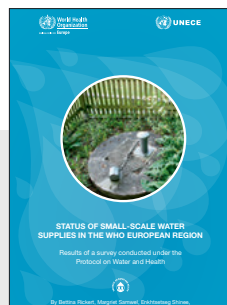
Small-scale water supplies and sanitation systems are the backbone of water, sanitation and hygiene services in rural areas of the pan-European region. A survey under the Protocol showed that nearly one quarter of the population of the region receives drinking-water from small-scale systems, including private wells. Experience shows, however, that these systems face many challenges, which jeopardize the health and well-being of individuals and communities relying on them and pose threats to the environment.

The Protocol places special focus on this issue and aims to:

- improve the evidence base for better policy development for small-scale systems;
- focus the attention of policy-makers on the evidence and challenges relating to small systems, highlighting the need to improve such services in rural areas, small towns and periurban areas;
- support countries in establishing effective regulations, management approaches and surveillance systems at the national and local levels that consider the specifics of small systems;
- strengthen sustainable financing and affordability of small-scale water supply and sanitation services.



An awareness-raising brochure was developed, outlining evidence relating to the status of small-scale water supplies, challenges, costs and benefits of related interventions (14).



This overview of the regional situation summarizes the findings of a survey conducted under the Protocol, which showed that about 23% of the population in the pan-European region receives drinking-water from small-scale systems (15).



The field guide for WSPs provides a step-by-step introduction to the approach in small communities and offering hands-on advice and ready-to-use templates to assist communities and local institutions in developing and implementing WSPs (16).



A set of tools was made available to policy-makers, promoting effective policy interventions to improve the situation of small-scale systems and explaining how these tools can be tailored to the specific circumstances of small systems, with illustrative case studies (17).



This publication offers guidance for policy-makers on defining strategies for the sustainable financing of small-scale water supplies and sanitation systems (18).

ENSURING SAFE MANAGEMENT OF WATER SUPPLY AND SANITATION SYSTEMS

Availability and accessibility of infrastructure and services are important, but their quality and safety are also vital. Safe management of water and sanitation, in accordance with the relevant WHO guidelines, protects human health and the environment.

WHO-recommended WSPs and sanitation safety plans are the international points of reference for safe management of water and sanitation services. The Protocol supports countries with the adoption of these risk-based approaches through hands-on capacity-building and advice for regulatory uptake.

Work under the Protocol also seeks to contribute to closing the sanitation gap in the pan-European region. Several million people still lack basic sanitation, and yet insufficient attention continues to be paid to this topic. Box 6 provides further information on the situation, as well as on the need to invest in sanitation services.

The Protocol's activities focus on taking stock and assessing the sanitation situation; strengthening policy attention on sanitation; and supporting countries in developing effective regulations, interventions and financial approaches.

Box 6.

The need to invest in sanitation

The number of people lacking access to basic sanitation in the pan-European region is almost twice the number of those lacking basic drinking-water services. Public investment is needed to close this gap, and investing in sanitation is cost-effective: US\$ 1 spent on improving sanitation brings a return of US\$ 5 by keeping people healthy and productive, with additional significant benefits for the environment (19).



ENSURING EQUITABLE ACCESS TO WATER AND SANITATION

Water and sanitation are basic human rights: they are essential for life, good health and enjoyment of an adequate standard of living. Despite this, they are not a reality for all. Some vulnerable and marginalized groups – such as homeless people, prisoners, refugees and migrants – face special challenges in accessing water, sanitation and hygiene services.

Governments need to take targeted action to ensure that no one is left behind. In many cases, however, a lack of adequate information makes it difficult to improve the situation and can create a vicious cycle of interrelated equity challenges.

The Protocol places particular focus on equity and offers step-by-step methodology, helping countries to improve the situation by:

- mapping out inequities at the national or local level through a self-assessment process. The process focuses on three key dimensions: reducing geographical disparities, addressing the needs of vulnerable and marginalized groups and ensuring affordability of services (dedicated guidance on affordability is being produced under the Protocol);
- identifying “equity gaps” and defining concrete actions;
- building equity-sensitive policies and governance frameworks for durable results.

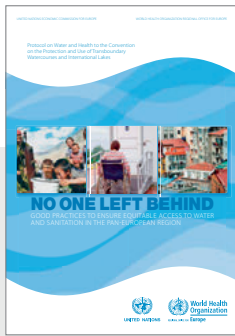
By applying the Protocol’s tools on equity, countries can realize the human rights to safe drinking-water and sanitation. Box 7 gives an example of country practice. Ensuring that everyone has access to water, sanitation and hygiene services is also crucial for an inclusive recovery from the COVID-19 pandemic and to build resilience against future diseases and other shocks.

Box 7.

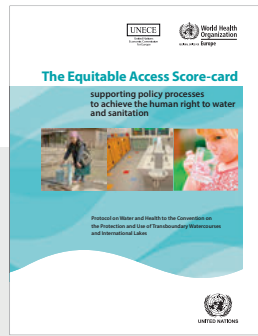
Hungarian experience: self-assessment of equitable access

Between 2014 and 2016, Hungary applied the Equitable Access Score-card and underwent a self-assessment process at the national level. The results showed a critical data gap and lack of national information on access to water, sanitation and hygiene services for vulnerable and marginalized groups, making it difficult to assess their needs. The findings also highlighted that although affordability was addressed by reducing water tariffs in 2013, and tariffs have not increased since then, the system is uniform and lacks mechanisms to address inequities, such as social and progressive tariffs.

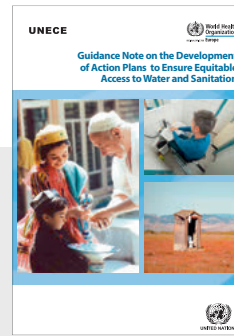
These findings informed a set of subsequent actions by the country. The 2017 National Water Strategy identified as a priority development of a tariff policy and a financial assistance system, as well as differentiated contributions to ensure the affordability of services. Further, the situation of vulnerable and marginalized groups was addressed by specific national strategies and programmes, including the National Social Inclusion Strategy.



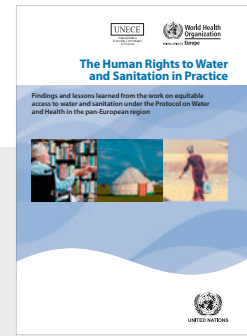
In the absence of a common understanding, equity can be a difficult concept to work with. This publication aims to define equitable access, using good practice examples (20).



To develop informed interventions, it is essential to know what the situation is. The Protocol's Equitable Access Score-card helps countries to establish a baseline measure of their situation through a self-assessment process. This helps to identify "equity gaps" and areas where the information is unreliable (21).



Building on the results of self-assessment, countries can define concrete policies. The Protocol's Guidance Note supports development of equitable access action plans (22).



This publication capitalizes on the findings and lessons learned from the work on equitable access and presents the experience of eleven countries that have applied the Protocol's tools on equity (23).



INCREASING RESILIENCE TO CLIMATE CHANGE

Climate change is one of the greatest challenges that humanity faces today. Its impacts on water and sanitation are visible and will intensify in the coming years: climate change alters hydrological cycles, affects precipitation and temperatures, and causes extreme weather events to become more intense and frequent. Water and sanitation services need to adapt to these changing realities.

The Protocol provides a clear framework for climate action. Activities support policy-makers in mainstreaming the effects of climate change into water and sanitation policies and in strategic planning; they also help water and wastewater service operators to address climate risks. Work under the Protocol aims to strengthen the knowledge base to make communities resilient to climate-related natural disasters. It also emphasizes:

- setting of climate-sensitive targets – for instance, in relation to stormwater management and reuse of wastewater in agriculture (see examples of country practice in Box 8);
- establishment of systems for surveillance and response to water-related diseases triggered by a changing climate;
- establishment of WSPs and sanitation safety plans that explicitly address climate risks.

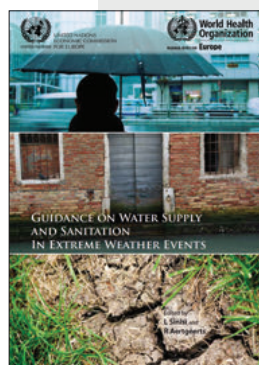
Box 8.

Examples of climate-sensitive targets set under the Protocol

Norway set a target on all water and wastewater plants serving more than 50 people having an adequate environmental management system that includes a risk analysis in which climate impacts are considered.

Luxembourg set a target on building rainwater retention basins and storm water basins.

Ukraine set a target on developing a national strategy for the reuse of wastewater in conditions of climate change until 2030, along with the relevant regulatory acts.



This publication offers guidance for policy-makers and environment, health and water-resource professionals on how to identify vulnerabilities to extreme weather events and how to tackle related risks in climate adaptation policies (24).

ACCESSION TO THE PROTOCOL: FREQUENTLY ASKED QUESTIONS

QUESTION 1. HOW DOES A COUNTRY JOIN THE PROTOCOL?

Countries and regional organizations can become Parties to the treaty by means of accession, ratification, acceptance or approval. The difference between these processes is formal and typically depends on national law.

While each country has its own administrative organization and procedures that correspond to its domestic legal order, some steps that may be undertaken are:

- preliminary discussion and expression of interest by the ministry responsible for water and the environment and/or the ministry of health;
- broader consultation involving other relevant ministries and actors, in either an informal or formal setting (such as an interministerial working group);
- a national workshop on the Protocol to mobilize all stakeholders who would be engaged in the treaty's implementation, as well as technical and financial partners;
- the official accession process in accordance with national legislation on the ratification of treaties, which may include preparation of a cabinet memorandum, preparation and discussion of a draft ratification law,

plenary discussion in parliament by relevant committees, signature of the ratification instrument by the head of state of the country (ending the process at the national level) and publication in the country's official journal.

The procedure culminates with the depositing of the instrument of accession, ratification, acceptance or approval with the Treaty Section of the United Nations Secretariat in New York.

Note: on demand, the joint secretariat can support countries with accession to the Protocol by assisting them in understanding its benefits, assessing their needs and providing advice on the accession procedure.



QUESTION 2. WHICH ENTITIES CAN BECOME PARTIES TO THE PROTOCOL?

Currently, only the following entities can become Parties to the Protocol (1):

- States members of the Economic Commission for Europe and States members of the Regional Committee for Europe of the World Health Organization;
- regional economic integration organizations constituted by the above-mentioned sovereign States, with competence over matters governed by the Protocol.

Nevertheless, the Protocol tools and guidance material can be used by all countries around the world, whether they are Parties or not.

QUESTION 3. WILL A COUNTRY RECEIVE ASSISTANCE IF IT BECOMES A PARTY TO THE PROTOCOL?

The main responsibility for implementing the Protocol lies with countries. Nevertheless, a dedicated area of work under the Protocol is on technical assistance to support implementation at the national level. Countries are supported in setting targets and implementing measures to achieve them, as well as in other capacity-building activities in the Protocol's technical areas of work.

Tailor-made assistance is provided through:

- National Policy Dialogues on water supply and sanitation, facilitated by the UNECE in cooperation with partners and supported by the EU;
- biennial collaborative agreements or country cooperation strategies between ministries of health and the WHO Regional Office for Europe;

- other specific projects funded by international donors under the framework of the Protocol;
- the Consultation Process provided by the Compliance Committee, for which only Protocol Parties are eligible.

In addition, countries can benefit from the general capacity-development and knowledge-sharing activities undertaken under the Protocol, including using the practical tools and guidance material developed.

QUESTION 4. HOW IS THE PROTOCOL IMPLEMENTED AT THE NATIONAL LEVEL?

The Protocol's work is supported at the country level by national focal points designated by Parties from their ministries responsible for health and environment/water, in line with the intersectoral nature of the Protocol. Focal points play a key role in furthering implementation at the national level, including by:

- actively promoting the objectives of the Protocol, its tools and the programme of work;
- coordinating technical work and capacity-building activities;
- participating, or identifying relevant experts and policy-makers to participate, in meetings and workshops;
- generally acting as a communication channel between the joint secretariat and national, regional and local stakeholders.

QUESTION 5. DOES A COUNTRY HAVE TO BE A PARTY TO THE WATER CONVENTION TO BECOME A PARTY TO THE PROTOCOL?

No, this is not a requirement: a country does not need to be a Party to the Water Convention to become a Party to the Protocol.

QUESTION 6. HOW DOES THE PROTOCOL RELATE TO TRANSBOUNDARY BASINS? IS IT RELEVANT IF A COUNTRY DOES NOT SHARE ANY?

Most of the Protocol's provisions are national obligations, including those to establish intersectoral targets, submit regular reports and establish and maintain systems for surveillance and response to water-related diseases. Therefore, the Protocol is a very relevant instrument for countries that do not share transboundary basins.

Most of the obligations stemming from articles 11–14 outlining the transboundary dimension of the Protocol are met, in principle, if Parties cooperate in good faith within the institutional framework provided by the treaty. For aspects that go beyond the institutional mechanism, the Protocol's obligations largely correspond to those of the Water Convention for Parties to this treaty and to those arising from customary international law for all countries.

QUESTION 7. WHAT IS THE COMPLIANCE COMMITTEE?

The Compliance Committee was established in 2007 to review compliance with the obligations of the Protocol and to support implementation. It is a transparent, nonconfrontational and nonjudicial body constituted by nine elected international experts, both legal and technical.

The following functions are exercised by the Committee:

- considering submissions by Parties, referrals from the joint secretariat, or communications from the public relating to specific issues of compliance;
- preparing, at the request of the Meeting of the Parties, a report on implementation of the Protocol;
- monitoring, assessing and facilitating implementation of the Protocol's reporting requirements;
- organizing consultation processes with Parties to provide targeted advice and assistance.



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UNECE and the WHO Regional Office for Europe: **a common purpose**

UNECE and the WHO Regional Office for Europe work together as a joint secretariat to fulfil the Protocol's goals of improving human health and protecting water resources. Contact either member of the joint secretariat for further information about the Protocol:

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The Protocol on Water and Health

Driving action on water, sanitation, hygiene and health

The UNECE-WHO/Europe Protocol on Water and Health is an international legally binding agreement for countries in the pan-European region. Its objective is to protect human health and well-being through sustainable water management and by preventing and controlling water-related diseases.

This publication provides an introduction to the Protocol on Water and Health, presenting its core provisions, highlighting the benefits of being a Party to the Protocol and providing an insight into the Protocol's technical areas of work on water, sanitation, hygiene and health. It also includes frequently asked questions for countries considering accession to the Protocol.

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