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**ECONOMIC COMMISSION FOR EUROPE**

**WORLD HEALTH ORGANIZATION  
REGIONAL OFFICE FOR EUROPE**

**MEETING OF THE PARTIES TO THE CONVENTION  
ON THE PROTECTION AND USE OF TRANSBOUNDARY  
WATERCOURSES AND INTERNATIONAL LAKES and**

**MEETING OF THE SIGNATORIES TO THE PROTOCOL  
ON WATER AND HEALTH TO THE CONVENTION**

**Working Group on Water and Health**

**REPORT ON THE FOURTH MEETING  
held at the Palais des Nations, Geneva, on 9-10 December 2004**

### Introduction

1. Representatives of the following countries attended the fourth meeting of the Working Group: Armenia, Azerbaijan, Croatia, the Czech Republic, Estonia, Finland, France, Germany, Hungary, Italy, Latvia, the Netherlands, Norway, Portugal, Serbia and Montenegro, Slovakia, Spain, Switzerland and the United States of America.
2. Representatives of the World Health Organization (WHO) and of the United Nations Institute for Training and Research (UNITAR) also attended the meeting.
3. Representatives of two WHO collaborating centres participated: the WHO Collaborating Centre for Water and Health (Denmark) and the WHO Collaborating Centre for Health Promoting Water Management and Risk Communication (Germany).
4. Representatives of the following organizations attended the meeting: the non-governmental organization (NGO) Earthjustice, and the water companies Internationale Arbeitsgemeinschaft der Wasserwerke im Rheineinzugsgebiet (IAWR), Aquafin NV, Lyonnaise des Eaux and Veolia Water.

## **I. ORGANIZATIONAL AND PROCEDURAL MATTERS**

5. Mr. Mihály Kádár (Hungary) and Mr. Thomas Kistemann (Germany) acted as Chairman and Vice-Chairman, respectively, and were re-elected at the end of the meeting.
6. The Working Group adopted its agenda as contained in document MP.WAT/WG.4/2004/4 - EUR/5047016/2004/4. It also adopted the report of its third meeting (MP.WAT/WG.4/2004/3 - EUR/5047016/2004/3), held in Budapest on 11-12 March 2004.

## **II. PROGRESS IN THE RATIFICATION PROCESS**

7. The Working Group noted that as of December 2004 the following 14 countries had submitted their instruments of ratification: Albania, Azerbaijan, Belgium, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Luxembourg, Norway, Romania, Russian Federation, Slovakia and Ukraine.
8. Other delegations informed the Working Group about the progress in their ratifications as follows: Armenia and Croatia would most probably finalize the ratification process in spring 2005; France, Italy and Switzerland in summer/early autumn 2005; and Finland and Germany by the end of 2005. Portugal and Serbia and Montenegro also expected to ratify by the end of 2005 or 2006.
9. The Republic of Moldova, which did not participate in the meeting, had informed the secretariat about the finalization of its ratification procedure and its intention to deposit its instrument of ratification in early 2005.

### III. LEGAL AND ADMINISTRATIVE ASPECTS OF THE PROTOCOL'S IMPLEMENTATION

#### A. Draft compliance review mechanism under the Protocol

10. The Chairman of the Legal Board, Mr. Attila Tanzi (Italy), reported on its progress during its first and second meetings (see reports MP.WAT/AC.4/2004/2 and 6) in developing a revised draft compliance procedure under the Protocol on Water and Health. The Working Group was invited to provide its guidance on the issues on which the Legal Board could not reach an agreement in order to finalize the draft compliance procedure (MP.WAT/WG.4/2004/7 - EUR/5047016/2004/7).

11. Concerning the composition of the compliance committee, the Working Group agreed that NGOs should have the possibility of proposing up to two candidates for election. As these candidates might not be elected, the Working Group agreed that two NGOs should be entitled to participate in the meetings of the committee as observers. Therefore, the brackets in paragraph 7 of document MP.WAT/WG.4/2004/7 - EUR/5047016/2004/7 should be deleted.

12. The Working Group agreed to restrict referrals by the joint secretariat to issues relating to reporting requirements in order to respect the joint secretariat's functions, and consequently to delete "in particular" in paragraph 15.

13. The Working Group decided that communications from the public could be brought before the committee as specified in chapter VI, without the need for any mechanism to screen them as mentioned in MP.WAT/AC.4/2004/6 (para. 39). It therefore agreed to delete the brackets around that chapter.

14. In view of the above decision, the Working Group considered that the committee should not be required to consider any relevant information but should be given the autonomy to choose the information to be considered, without prejudice to the provisions for consideration of communications from the public. Consequently, in paragraph 23 (c) should read: "Consider any relevant information submitted to it without prejudice to paragraph 18; and".

15. The Working Group also agreed that in its reports to the Meeting of the Parties the committee should list the information that it had received and provide the reasoning for its recommendations and decisions. The brackets in paragraph 33 should be deleted accordingly.

#### B. Draft rules of procedure

16. Mr. Attila Tanzi also reported on the progress made in drafting rules of procedure for the Meeting of the Parties to the Protocol (MP.WAT/WG.4/2004/6 - EUR/5047016/2004/6).

17. The Working Group agreed that the Bureau should invite two representatives of NGOs to participate in its meetings without the right to vote, as set down in rule 20, paragraph 3, and that the brackets around that paragraph should be deleted.

18. The Working Group expressed its appreciation to the Legal Board for its work and invited it to finalize the draft compliance procedure and the draft rules of procedures according to the indications provided for submission to the Meeting of the Parties.

C. Focal points for activities under the Protocol

19. The secretariat informed the Working Group about the functions of national focal points for activities under the Convention, usually staff members of the Environment Ministries. As there was a need under the Protocol to establish closer links to other ministries, most notably the Ministries of Health, the Regional Office for Europe of the World Health Organization (WHO/EURO) had requested nominations of focal points specifically responsible for the health aspects under the Protocol. At the time of the meeting, the following countries had identified such focal points: Andorra, Armenia, Azerbaijan, Croatia, Czech Republic, Estonia, Finland, Georgia, Hungary, Kazakhstan, Latvia, Lithuania, Malta, Norway, Romania, Russian Federation, Serbia and Montenegro, Slovakia, and Switzerland. The Working Group invited countries which had not already done so to nominate representatives from the other ministries concerned, particularly the Ministries of Health, to assist the already nominated focal points on matters related to the Protocol.

20. Some delegations also referred to cooperation with NGOs on water-and-health-related issues, such as the Global Water Partnership, and requested the secretariat to add to the list of focal points also the contact addresses of relevant NGOs, collaborating centres, and other competent organizations/institutions in order to keep them informed about developments under the Protocol. The secretariat invited the Working Group to provide specific indications on organizations to be included in the Protocol's list of contacts.

#### IV. COORDINATION OF RESOURCE MOBILIZATION

A. Oslo Roundtable on Water and Health in Europe

21. The delegation of Norway reported on the Roundtable on Water and Health in Europe, which had been held at the invitation of the Norwegian Government on 28-29 September 2004 at the Soria Moria Conference Centre near Oslo (see MP.WAT/WG.4/2004/8 - EUR/5047016/2004/8).<sup>1</sup>

22. The Working Group expressed its appreciation to the Government of Norway for hosting the Roundtable. It agreed: (a) to continue discussions on cooperation to strengthen the capacity of the public health sector in surveying and reducing water-related diseases; and (b) to further examine the possibility of establishing a structure through which partner countries, organizations and financial institutions could continue an effective dialogue with countries in Eastern Europe, the Caucasus and Central Asia (EECCA) and countries in South-East Europe (SEE) on reducing the burden of disease in the context of the Protocol on Water and Health.

23. The Working Group also agreed to continue work, initiated during the Roundtable, to identify priority areas of non-infrastructure intervention in water resources management, safe drinking-water supply and sanitation, reduction of childhood morbidity and mortality, meeting the

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<sup>1</sup> The report of the Oslo Roundtable will be issued by WHO/EURO.

water needs of vulnerable groups, and gender issues related to water supply and sanitation. The Working Group will further elaborate, as suggested at the Roundtable, a mechanism to respond effectively to these needs through a country-driven process, including local interventions.

24. The Working Group noted with appreciation the willingness of Norway to take shared responsibility for financing the follow-up mechanism and invited other countries to join Norway in providing the necessary financial means for the urgent recruitment of a facilitator.

25. The Working Group agreed in principle with the two draft decisions to be submitted for adoption at the first meeting of the Parties (annexes I and II) and invited countries to submit their comments to the secretariat by 31 March 2005.

#### B. Trust fund under the Protocol

26. The secretariat informed the Working Group of decision III/2 of the Meeting of the Parties to the Convention on the establishment of a trust fund under the Convention (see ECE/MP.WAT/15/Add.1, annex II) and activities that can be supported through this trust fund. Alternative financing mechanisms, such as a trust fund under the Protocol, could also be established or earmarked contributions could be made to the Water Convention's trust fund to support activities under the work plan of the Protocol.

27. The Working Group recognized that there were no earmarked contributions yet to the Convention's trust fund to support the Protocol's activities in 2005 and invited countries to make such contributions. The Working Group also agreed to consider the establishment of a trust fund for the Protocol in the preparatory process for the first meeting of the Parties.

### V. TECHNICAL MEETINGS UNDER THE PROTOCOL

#### A. Preparations for the Conference on Health and Water Quality Aspects of the Man-made Recreational Water Environment

28. The Working Group examined the progress made in the preparations for the Conference on Health and Water Quality Aspects of the Man-made Recreational Water Environment (Budapest, 10-11 March 2005). The Conference would address: (a) standards, guidelines and regulations; (b) water treatment and distribution; (c) microbiological risks, in particular legionella; (d) chemical risks in water and air; (e) monitoring and assessment; and (f) "natural" pools. In addition to a leaflet, further information will be made available on the Conference's web site <http://efrirk.antsz.hu/oki/pool-and-spa/eng03.html>.

29. The Working Group invited countries to disseminate information about the Conference widely and to submit national contributions and expert papers.

#### B. Conference on cyanobacteria

30. The Working Group took note of the outcome of a literature study, prepared by the WHO European Centre for Environment and Health with the support from the German Federal Environment Agency, which confirmed the regional relevance and the acute nature of

cyanobacteria. The Working Group stressed the need for further action and welcomed the steps taken by Portugal to prepare a conference on cyanobacteria and their implication for drinking water.

31. The Working Group endorsed the preliminary programme, focusing on: (a) occurrence of cyanobacteria; (b) ecology of cyanobacteria; (c) conditions favouring the occurrence of potentially toxic cyanobacteria and cyanotoxins; (d) analysis of cyanotoxins; (e) strategies for surveillance and monitoring of reservoirs; (f) management of reservoirs with cyanobacterial populations; (g) control of cyanobacterial biomass; (h) treatment.

32. To further prepare the conference, the Working Group decided to establish a steering group and invited countries to participate in its first meeting to be held at the WHO European Centre for Environmental Health in Rome on 25-26 January 2005.

33. A web site had been created to gather information on the current problems ([https://extranet.who.int/datacol/survey.asp?survey\\_id=40](https://extranet.who.int/datacol/survey.asp?survey_id=40)); (for access, please contact [watsan@ecr.euro.who.int](mailto:watsan@ecr.euro.who.int)). Participants were invited to encourage their national water companies to access the web site and participate in the assessment. They were also invited to communicate to the secretariat information on published findings and non-English literature on the occurrence of, and problems posed by, cyanobacteria to water resources and drinking-water supply in their countries. This would facilitate in-depth discussions at the steering group's meeting on the conference programme and on future action.

#### C. ECWATECH-2004 and Conference "Clean Water in Russia"

34. The Working Group took note of the information by the secretariat about the outcome of the second workshop on sustainable water management and health, which had been held on the occasion of the Trade Fair and Conference "Water, Ecology and Technology: ECWATECH-2004" on 1-2 June 2004 in Moscow. The workshop, which had been attended by some 80 participants from EECCA, provided an insight into the implementation of the Protocol on Water and Health in Azerbaijan, Belarus, Republic of Moldova, the Russian Federation and Tajikistan as well as activities of the Ukrainian NGO MAMA-86 in the Protocol's implementation.

35. The Working Group also noted that the conference "Clean Water in Russia" (Yekaterinburg, Russian Federation, April 2005) was part of the 2004-2006 work plan. It invited countries to inform the secretariat by 31 January 2005 about possible thematic contributions and requested the secretariat to prepare together with the organizer a specific session on water and health. The secretariat invited countries to consider providing travel support for representatives from EECCA.

## VI. BURDEN OF WATER-RELATED DISEASES AND SURVEILLANCE

36. Referring to articles 6 and 7 of the Protocol, the Working Group examined ways to establish and publish national and/or local targets for the standards and levels of performance that need to be achieved or maintained for a high level of protection against water-related diseases.

37. The Working Group, following its previous recommendation, stressed that priority should be given to the monitoring of the prevalence of cholera, bacillary dysentery (shigellosis), EHEC (Enterohaemorrhagic Escherichia coli, usually of the serotype 0157:H7), viral hepatitis A, and

typhoid fever. Surveillance data were also deemed necessary for diseases of secondary importance, particularly campylobacteriosis, cryptosporidiosis, giardiasis, and infections with the calici virus.

38. The Working Group also took note of European Union legislation leading to a comprehensive surveillance programme as stated in decision 2119/98/EC of the European Parliament and of the Council of 24 December 1998 setting up a network for the epidemiological surveillance and control of communicable diseases in the Community.<sup>2</sup> It noted the Commission decision of 17 July 2003 amending decision 2000/96/EC as regards the operation of dedicated surveillance networks,<sup>3</sup> which required that epidemiological surveillance within the Community network be performed by the standardized collection and analysis of data in a way to be determined for each communicable disease and special health issue, when specific dedicated surveillance networks were put in place. Diseases covered by this decision of interest to the Protocol included: viral hepatitis A, campylobacteriosis, cryptosporidiosis, giardiasis, shigellosis, salmonellosis, typhoid/paratyphoid, legionellosis, cholera and malaria. With the establishment of the European Centre for Disease Prevention and Control, there would be a possibility for even closer collaboration on innovative action, particularly in strengthening countries' capacity for surveillance, not only in EU member States but also elsewhere in the in the region.

39. The Working Group noted that the following information of relevance to the Protocol was currently available in the WHO Health for All Database: diarrhoeal diseases (population under 5 years; per 100,000 inhabitants); viral hepatitis incidence per 100,000 inhabitants; viral hepatitis A per 100,000 population, malaria incidence per 100,000 population; per cent of population whose homes are connected to a water supply system; and per cent of population having access to sewage system, septic tank or other hygienic sewage disposal.

40. The Working Group noted that the European Health for All (HFA) Database was being restructured and, in particular, that new indicators could be included provided that they met a number of criteria, such as:

- (a) Indicators should be of relevance to health, be of interest to potential users and not too specific/technical, i.e. understandable to an "average" user;
- (b) Data should cover all or at least a great majority of WHO/EURO member States and be collected over several years to allow trend analysis;
- (c) Data should be representative of the entire population of respective countries, and of acceptable international comparability; and
- (d) Regular data collection and validation should be ensured by the respective technical programmes or jointly with the HFA database team.

41. Priority diseases identified above would be reported to the European Centre for Disease Prevention and Control in Stockholm. For other countries, WHO/EURO would still rely on data captured through the yearly joint reporting form. WHO was building a complete data set of all EU mandatory disease reports starting with the year 1990. By the end of 2005, WHO/EURO would be

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<sup>2</sup> Official Journal L 268, 03/10/1998 P. 0001 – 0007.

<sup>3</sup> Official Journal L 185, 24/07/2003 P. 0055 – 0058.

able to capture and manage data of all the diseases required under the Protocol for all its 52 member States. This information would be stored in the WHO Computerized Information System for Infectious Diseases and could be easily made available to anyone interested.

42. A draft recommendation on the monitoring of priority water-related diseases was prepared (annex III), which would be further elaborated with inputs from the Working Group's members. It would be reconsidered at the next meeting of the Working Group and submitted for endorsement to the Parties to the Protocol at their first meeting.

## VII. PERFORMANCE OF COLLECTIVE SYSTEMS

43. The Working Group, referring to article 6 of the Protocol, agreed to consider ways to establish a baseline, set criteria for the determination of targets, and adopt indicators through which progress could be measured.

### A. Quality of drinking water supplied

44. The Working Group reviewed current drinking-water quality criteria, noting the requirements of article 6 of the Protocol that targets concerning the quality of the drinking water supplied should take into account the WHO Guidelines for drinking-water quality. The Working Group also noted the relevance of Council Directive 98/83/EC of 3 November 1998 on the quality of water intended for human consumption,<sup>4</sup> the recommended surveillance and monitoring mechanisms, and the associated reporting systems. The Working Group also took note of the current efforts to establish a European environment and health information system and the indicators proposed for the assessment of drinking-water quality.

45. The Working Group recommended that the Meeting of the Parties, when establishing a reporting mechanism and deciding on the periodicity of reporting, should consider the need for yearly reporting on:

(a) The number of samples exceeding an accepted level. Priority should be given to reporting microbial quality indicators (0/100 ml of the two microbial indicators, i.e. E. coli and Enterococci, reported at least yearly if not monthly); where possible and appropriate, chemical parameters should be included;

(b) Current use of water safety plans (yes/no).

### B. The area or territory or the population sizes or proportions which should be served by collective water-supply systems

46. A representative of the WHO Water, Sanitation and Health unit introduced the current reporting system applied under the United Nations Children's Fund (UNICEF)/WHO Joint Monitoring Programme (JMP), which formed the basis for reporting progress towards meeting the Millennium Development Goals. A report applying the JMP methodology in the assessment of progress in water supply and sanitation could be downloaded from [http://www.who.int/water\\_sanitation\\_health/monitoring/jmp2004/en/](http://www.who.int/water_sanitation_health/monitoring/jmp2004/en/).

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<sup>4</sup> Official Journal L 330, 05/12/1998 P. 0032 – 0054.



47. The Working Group noted with appreciation the importance of consumer-supplied data, as opposed to provider-based data, especially in order to capture information on decentralized systems of water supply and sanitation reliably.

48. The Working Group recommended that reporting schemes under the Protocol should be closely harmonized with efforts undertaken by the UNICEF/WHO JMP, but recognized that in many cases, provider-based data would be the only form of data available to the Protocol's focal points. For countries in which consumer-based data, for example through household surveys, could not be collected, it was suggested that the Meeting of the Parties to the Protocol should accept data from other sources as long as they were from reliable official bodies and properly identified in the reporting.

#### C. Performance of water-supply systems

49. The Working Group noted the Protocol's requirements to establish targets on the "levels of performance" for collective systems and other means of water supply. As the term "performance" was not defined in the Protocol, the Working Group considered possible types of performance of such systems.

50. The Working Group examined a working paper presented by a WHO temporary adviser, who recommended distinguishing three types of performance: (a) environmental performance, where water suppliers would report on the implementation of environmental management systems such as those formalized in the European Environmental Management System (EMAS), the certification to ISO 14000 series of standards, or similar local standards; (b) service performance; and (c) financial performance.

51. Participants commended the author on the thought-provoking nature of the paper, and generally accepted the proposed reporting on environmental performance.

52. A number of concerns were voiced on the proposed service and financial reporting mechanisms. Participants felt that any reporting on service performance should: (a) avoid duplication with existing mandatory reporting mechanisms; (b) be consistent with national and international legislation; and (c) take into account national and subnational characteristics, local problems needs and knowledge in line with article 5, paragraph (n), of the Protocol.

53. The Working Group recognized the importance of financial service reporting to assess the sustainability of the service, but stressed the need to respect the confidentiality of commercial or industrial information, where such confidentiality was protected by law in order to protect a legitimate economic interest in line with article 10, paragraph 5 (d).

#### D. Performance of waste-water treatment systems

54. The Working Group recalled its discussion on monitoring the performance of waste-water treatment plants and the proposal to use the methodology developed under the Mediterranean Action Plan for this purpose. The Working Group agreed that a draft recommendation should be prepared for submission to the Parties at their first meeting.

55. The Working Group noted with appreciation the information from Aquafin on a methodology for the implementation of sanitation programmes in Flanders (Belgium), which included planning, implementation and financing as well as ecological and social components. Relevant information on investment projects and assets as well as on operational results of programmes was stored in a centralized database; the use of geographic information systems made it possible to represent the information visually. The Working Group particularly noted that the sanitation manager was also made responsible for monitoring environmental effects.

#### E. Follow-up

56. The Working Group decided to set up an ad hoc expert group to draw up a draft guidance document on reporting following the relevant provisions of the Protocol, particularly articles 6 and 7. This would also include a coherent set of indicators. The draft guidance document would be examined at the fifth meeting of the Working Group and submitted thereafter to the Meeting of the Parties.

57. The first meeting of the ad hoc expert group was tentatively scheduled for 9-10 May 2005 at the WHO Regional Office for Europe in Copenhagen.

### VIII. REVIEW AND ASSESSMENT OF PROGRESS

58. Following the review of the implications of article 7 of the Protocol on review and assessment of progress by the Working Group at its second meeting, WHO/EURO and its partners had developed a frame work plan for a pan-European environment health information system, published under <http://www.euro.who.int/EHindicators>. Pilot studies had been undertaken in selected countries, and the calculation mechanism had been tested using data collected from six European countries with a total population of about 92 million (see <http://www.euro.who.int/Document/E81285.pdf>). Indicators related to water and health included: waste-water treatment, compliance with recreational water guidelines, compliance with drinking-water guidelines, access to a piped, regulated water supply, and outbreak of water-related diseases.

59. The Working Group invited countries to share their experience in the use of the different progress-review programmes, provide information on current reporting programmes, and evaluate the applicability of the above indicators for the purposes of article 7 of the Protocol. Based on the information provided, the Working Group would consider ways of establishing the reporting scheme to assess progress.

### IX. MONITORING AND ASSESSMENT OF TRANSBOUNDARY WATERCOURSES AND INTERNATIONAL LAKES

60. The secretariat reported on the Working Group on Monitoring and Assessment's activities which had close links with water and health, i.e. the preparation of guidelines on monitoring and assessment of transboundary waters as well as the drawing-up of a report on the status of transboundary waters in the UNECE region (see ECE/MP.WAT/15/Add.2, activities 3.1 and 3.3).

61. The Working Group recognized the need for cooperation with the Working Group on Monitoring and Assessment and invited its members, in particular representatives of WHO collaborating centres as well as its Chairman and Vice-Chairman to participate in these activities.

## **X. EDUCATION AND TRAINING**

62. At their second meeting, the Signatories to the Protocol on Water and Health had reviewed the challenges of education and recommended the development of distance learning programmes for public health professionals. While several distance learning programmes existed on either public health or environmental sciences, there was no integrated programme dealing with all aspects of water and health. Responding to this need, the WHO Collaborating Centre for Water Quality and Human Health in collaboration with the University of Staffordshire (United Kingdom) and the University of Athens proposed to develop a postgraduate course in water management and health. It was the intention to have the course validated by the University of Surrey by 2005.

63. The Working Group invited its participants to provide advice for the development of such a postgraduate distance learning programme.

64. A representative of UNITAR reported on its training activities on water management in the Balkans in cooperation with the Organization for Security and Co-operation in Europe (OSCE), and the opportunity for cooperation with the Water Convention, its working groups and the secretariat in this undertaking.

## **XI. ACTIVITIES OF THE UNITED NATIONS ON WATER AND SANITATION**

65. The secretariat reported on the regional activities to prepare for the 13<sup>th</sup> session of the Commission on Sustainable Development (CSD). The Working Group noted that the Water Convention's secretariat, assisted by the Bureau of the Meeting of the Parties, had contributed to the document "Sustainable development in the UNECE region" (E/ECE/1421) for the 60<sup>th</sup> annual session of UNECE in February 2005, which contained policies, strategies and actions on water and sanitation, based on the European experience and the deliberations at the 12<sup>th</sup> session of CSD.

66. The Working Group welcomed the secretariat's initiative and invited countries to draw the attention of their national delegations, attending the annual session, to the relevance of this document to the further implementation of the Convention and its Protocols as well as national and international action on water and sanitation.

67. The Working Group also took note of the report by the secretariat about progress in the drafting of the second edition of the World Water Development Report under the leadership of UN-WATER and activities of UNECE to guide the work of the United Nations system organizations on indicators for the water sector. The Working Group noted that the proposed set of indicators was also highly relevant to the activities under the Protocol on Water and Health and could be further used to implement the provisions of its article 7 on review and assessment of progress.

## **XII. FOURTH MINISTERIAL CONFERENCE ON ENVIRONMENT AND HEALTH**

68. The secretariat reported on the fourth Ministerial Conference on Environment and Health (Budapest, 23-25 June 2004) and, in particular, on regional priority goal 1, which aimed to ensure the availability of safe water and adequate sanitation to all children in Europe.

69. The Working Group took note of the activities currently being undertaken by WHO to compile an action programme for reaching this regional priority goal, and called upon all countries to support the activity by providing relevant information to the secretariat.

## **XIII. FURTHER PREPARATIONS FOR THE FIRST MEETING OF THE PARTIES TO THE PROTOCOL**

70. Given the increasing number of ratifications and the likelihood that the Protocol would enter into force in autumn 2005 (see chap. II), delegations evaluated the opportunity of organizing the first meeting of its Parties in late 2005 or early 2006. A number of delegations suggested that the Parties should meet shortly after the entry into force of the Protocol, whereas others preferred holding the first meeting of the Parties in 2006.

71. The secretariat referred to possible meeting venues, including Geneva or Copenhagen, and the need for financial resources to support the participation of Parties from EECCA and SEE. The delegation of Hungary offered to examine the possibilities of hosting the meeting, provided that it would take place in 2005.

72. In order to prepare for the first meeting of the Parties, the Working Group requested the secretariat to publish the Protocol in English, French, German and Russian.

## **XIV. WORK PLAN**

### **A. Updates of the existing work plan**

73. The Working Group recalled its discussions and decisions on the previous agenda items and requested the secretariat to update the work plan for 2004-2006 accordingly (see annex IV). The Working Group noted that any amendments and additions to the work plan would require the approval of the Bureau of the Meeting of the Parties.

### **B. New activities under the work plan related to the transmission of antibiotic resistance through the water cycle**

74. At its third meeting, the Working Group had decided to include the topic of the presence of pharmaceuticals, especially antibiotics, and the role of the water cycle, including drinking water, in the work programme of the Protocol (see MP.WAT/WG.4/2004/3, paras. 50-56). To draw up a specific programme element, the Working Group took note of a literature study on this issue, finalized by IAWR, which had reviewed the findings on antibacterial resistance in: (a) clinical samples; (b) natural and man-made environments, including surface water and groundwater, and

bio-films inside water-supply networks; and (c) other potential sources, such as foodstuffs and the effluent from waste-water treatment plants.

75. The study had shed more light on the flux of antibiotics and had also revealed serious information needs on, for example, the transmission of antibacterial resistance between drinking water, surface water and groundwater, and its importance for humans. Antibiotic-resistant micro-organisms were present worldwide as a consequence of the use of antibiotics. There was also a need for educational programmes on the proper use of antibiotics and the development of intensive treatment methods for waste water with high loads of antibiotic resistance. Further investigations were required on the fate of resistant bacteria in soil, groundwater and surface water and their genetic information.

76. To further prepare an activity under the Protocol, the Working Group's participants were invited to inform the secretariat of their interest and willingness to cooperate in the development of a regional research programme along the lines indicated above. The representative of IAWR was invited to provide access to the study to interested members of the Working Group.

#### **XV. DATE AND VENUE OF FIFTH MEETING OF THE WORKING GROUP**

77. The Working Group agreed to convene a fifth meeting to finalize the preparations for the first meeting of the Parties, which should take place at least four months before the meeting of the Parties to the Protocol (see chap. XIII). The Working Group entrusted the secretariat to set the dates for its fifth meeting in consultation with the Chairman.

Annex I

**ELEMENTS FOR A DRAFT DECISION ON THE OSLO  
ROUNDTABLE FOLLOW-UP**

The Meeting of the Parties to the Protocol on Water and Health may wish to:

1. Decide to establish a roundtable follow-up working group;
2. Decide that the terms of reference of the roundtable follow-up working group should include:
  - (a) Assessments of priority needs: review the priority needs of EECCA and SEE countries, recommend key activities that are relevant and effective to address those needs, and evaluate progress, based on indicators, towards the achievement of the aims of the Oslo Roundtable;
  - (b) Advice for the development of implementation projects: provide advice to the EECCA and SEE countries to improve the formulation of projects in order to facilitate access to source of finance as stipulated in article 14 (b) of the Protocol on Water and Health;
  - (c) Networking to establish, facilitate and develop cooperation and facilitate access to sources of finance: promote collaboration between national ministries/partner groups and the different international/regional networks of expertise and finance (e.g. Global Water Partnership, regional environment centres, river basin organizations, donor countries, financial institutions); establish links with the Partners that make up the Partnership on Water for Sustainable Development.
3. Agree that its Bureau may adapt these terms of reference to changing circumstances and needs to avoid, to the extent possible, duplication of efforts with water-and-health-related activities of other United Nations bodies and other international organizations and programmes;
4. Invite the Meeting of the Parties to the Convention and its working groups, the International Water Assessment Centre and relevant collaborating centres of WHO to participate in the activities of the roundtable follow-up working group;
5. Invite lead donor countries, other countries and international organizations with cooperation programmes of recognized importance to water and health, financial institutions as well as international foundations with recognized activities in water and health to participate in the roundtable follow-up working group;
6. Also invite competent international NGOs to participate in the activities of the roundtable follow-up working group;
7. Express its appreciation to the Government of Norway for having convened the Oslo Roundtable on Water and Health in Europe and for its offer to support the activities of the roundtable follow-up working group.

Annex II

**ELEMENTS FOR A DRAFT DECISION ON THE TERMS OF REFERENCE  
FOR A FACILITATOR**

The Meeting of the Parties to the Protocol on Water and Health may wish to:

1. Agree that the facilitator shall:

(a) Critically analyse existing bilateral donor programmes in order to be aware of current and future shifts in donor policy, procedures and criteria, including relevant programmes operated by non-European countries/agencies/organizations active in the European region (United States, Canada, Japan and others);

(b) Keep abreast of the possibilities for international support to non-EU member States through activities of the European Commission's directorates on health, environment and research and their relevant assistance programmes, including the Partnership on Water for Sustainable Development;

(c) Keep abreast of the possibilities for international support through grants from international foundations and, in particular, through the Global Environment Facility and the French Global Environment Facility;

(d) Liaise with international financial institutions, particularly the European Bank for Reconstruction and Development, the European Investment Bank, the Nordic Investment Bank and the Asian Development Bank, to explore how health is currently integrated and could be made more prominent in major investment projects;

(e) Review programmes and activities of the United Nations, particularly under the Commission on Sustainable Development and UNEP and its specialized agencies, particularly the United Nations Educational, Scientific and Cultural Organization and the World Meteorological Organization, and review programmes under relevant multilateral environmental agreements (MEAs) to identify in a timely manner areas of possible synergy with the Protocol;

(f) Liaise with other organizations susceptible of operating grant programmes or having the capacity to facilitate access to funding, in particular river basin organizations or professional groupings;

(g) Prepare an annual review of the evolution of donor policy and country needs in water and health, and prepare a submission on the subject to the Meeting of the Parties and the Working Group on Water and Health;

(h) Assist, upon request, with the formulation of country needs in line with the requirements of donor organizations;

(i) Organize, at regular intervals, conferences between donors and priority countries so that exchanges can take place on perceived needs and current possibilities for assistance;

(j) Participate in meetings of potentially interested parties and promote water and health as an important component of any environmental or health-focused cooperation policy.

2. Entrust its Bureau in consultation with the secretariat to adapt these terms of reference to changing circumstances and needs to avoid, to the extent possible, duplication of efforts with water-

and-health-related activities of other United Nations bodies and other international organizations and programmes.

3. Note with appreciation the willingness of Norway to share responsibility for financing the mechanism and invite other Parties to the Protocol to join Norway in providing the necessary financial means for the urgent recruitment of a facilitator.



Annex III

**ELEMENTS FOR A DRAFT DECISION ON WATERBORNE DISEASE  
SURVEILLANCE**

The Meeting of the Parties to the Protocol on Water and Health may wish to:

1. Decide that the reporting mechanism for the Protocol on Water and Health should be based on data concerning the yearly prevalence of water-related diseases, followed where appropriate by reports on the incidence of water-related disease outbreaks.
2. Agree that the Health for All Database of the WHO Regional Office for Europe (WHO/EURO) should be used as the central reporting mechanism for the Protocol.
3. Request therefore WHO/EURO to include in the Health for All Database, as soon as possible, all water-related diseases recognized as being of priority importance to the Protocol. These comprise viral hepatitis A, campylobacteriosis, cryptosporidiosis, giardiasis, shigellosis, typhoid/paratyphoid, legionellosis, cholera and malaria.
4. Advise that the Health for All Database should remain sufficiently flexible to include at a later stage data on enterohemorrhagic *Escherichia coli* and calici virus infections, as well as the health impacts of chemical contamination.
5. Entrust the joint secretariat with the yearly collection of prevalence data on these water-related diseases.
6. Request the Parties to provide such data in a standardized and quality-controlled manner no later than one month after receiving a request from the secretariat to do so.
7. Entrust WHO/EURO with basic data verification and data management services, including the publication of the final data set and preparation of the report for submission to the Meeting of the Parties.

Annex IV

**WORK PLAN FOR THE PERIOD 2004-2006**

The Parties to the Convention adopted their work plan for the period 2004-2006 on 28 November 2003. Activities under this work plan are open to Parties and non-Parties to the Convention. Countries and/or organizations listed under "Participating Parties and non-Parties" have stated their interest in joining the related activity. The list serves as an indication for the lead Party and does not exclude any other interested country/organization from participation.

The amendments and additions made to the work plan at the fourth meeting of the Working Group on Water and Health are in italics.

**PROGRAMME AREA IV: WATER AND HUMAN HEALTH**

Responsible body: Working Group on Water and Health, with Hungary as lead Party.

Rationale: The focus of programme area IV is on the interim implementation of the Protocol on Water and Health pending its entry into force. The activities will promote sustainable water supply and management in cities and rural areas, the rehabilitation of defective water-supply and sewage systems, and the minimization of the adverse impact of human activities (e.g. waste-water discharges, water resources development projects) on human health and safety. The programme area also aims at reducing health problems and diseases due to poor water quality. Soft-law instruments and methodologies will be developed. Human resources development and institutional capacity-building, for example through workshops, training courses and pilot programmes or projects, are also foreseen. Following the outcome of the second meeting of the Signatories to the Protocol (Geneva, 2-4 July 2003), the Working Group, in the further preparatory process for the first meeting of the Parties to the Protocol, will update the work-plan elements included in this programme area.

Main partners: UNECE Committee on Environmental Policy, WHO/EURO, UNEP, UNDP, European Commission, OECD, European Environment and Health Committee (EEHC) and relevant NGOs.

Work accomplished: See document MP.WAT/AC.2/2003/3 - EUR/03/5041120/3 describing the achievements in the interim implementation of the Protocol.

**4.1 Protocol on Water and Health: interim implementation**

Objectives: The Parties to the Convention and the Signatories to the Protocol on Water and Health will implement relevant provisions of the Protocol pending its entry into force. The International Water Assessment Centre (IWAC) established under the Convention will assist, as appropriate, in the implementation of the programme element.

#### **4.1.1 Surveillance, early-warning and notification systems**

Work to be undertaken: Based on the outcome of the discussion of the Signatories at their first and second meetings, the Working Group on Water and Health will draw up draft guidelines on good practices in national and international surveillance, early-warning and notification systems for consideration by the Parties to the Protocol at their first meeting. The Working Group will also prepare training programmes for the public health sector to support the establishment of surveillance, early-warning and notification systems.

Lead country: Hungary.

#### **4.1.2 Facilitating access to sources of finance, through improving the formulation of programmes and projects**

Work to be undertaken: *Pending decisions by the Parties to the Protocol on Water and Health at their first meeting, the Working Group on Water and Health will follow up the decisions and recommendations of the Oslo Roundtable on Water and Health in Europe as laid down in document MP.WAT/WG.4/2004/8-EUR/5047016/2004/8.*

Lead country: *None. To be implemented by the joint secretariat with the assistance of Norway.*

#### **4.1.3 Workshops on sustainable water management and health**

Work to be undertaken: Preparation and development of international workshops and other events, including workshops to be held on the occasion of ECWATECH-2004, ECWATECH-2006 and the 2005 Conference CLEAN WATER - RUSSIA, and preparation of follow-up activities for consideration by the Bureau.

Lead country: Russian Federation in cooperation with the joint secretariat and IWAC.

#### **4.1.4 Conference on health risks in enclosed recreational water environments**

Objectives: Investigation of health risks in enclosed recreational water environments and the options for their management.

Work to be undertaken: Preparation of the Conference to be held on 11-12 March 2005 in Hungary. The Conference will examine the health risks of different enclosed recreational water facilities, the regulations and control practices used in different countries and the best ways of managing these risks without interfering with the requirements of the free market but with due consideration to the precautionary principle and health safety requirements.

Lead country: Hungary.

#### **4.1.5 Conference on cyanobacteria and drinking water**

Objectives: *The objective of the Conference is to assess the threat posed by cyanobacteria and their toxins to the production and distribution of safe drinking water, including the specific risks to immunocompromised sections of the population.*

Work to be undertaken: *Preparation of the Conference to be held in Portugal in the second half of 2005. A steering group, led by Portugal, will prepare the Conference, arrange for the publication of the proceedings and draft proposals for the implementation of the Conference's outcome for submission to the Meeting of the Parties.*

Lead country: *Portugal.*

#### **4.2 Preparations for the first meeting of the Parties to the Protocol**

Objectives: The Parties to the Convention and the Signatories to the Protocol on Water and Health will prepare the first meeting of the Parties to the Protocol.

##### **4.2.1 *Strategy and framework for compliance with the Protocol on Water and Health and draft rules of procedure for the Meeting of the Parties to the Protocol***

Objectives: Guidance will be provided to the Meeting of the Signatories to the Protocol on Water and Health to draw up multilateral arrangements of a non-confrontational, non-judicial and consultative nature for reviewing compliance, which should allow for appropriate public involvement. *Guidance will also be provided on drawing up rules of procedure.*

Work to be undertaken: *The Legal Board will assist the Working Group to prepare for submission to the Parties to the Protocol on Water and Health for adoption at their first meeting: (a) a draft compliance procedure; and (b) draft rules of procedure.*

Lead Party: Italy.

Participating Parties and non-Parties: Belgium, Bulgaria, Croatia, Finland, Germany, Greece, Hungary, Italy, Netherlands, Norway, Serbia and Montenegro, Slovakia, Switzerland, Ukraine and United Kingdom.

Main partners: United Nations Environment Programme, the Aarhus Convention on Access to Information, Public Participation in Decision-making and Access to Justice in Environmental Matters, Earthjustice, European ECO Forum, International Council of Environmental Law, Regional Environmental Center for Central Asia (CAREC) and the University of Milan.

##### **4.2.2 Arrangements for the preparation of meeting documents on reporting**

Work to be undertaken: Article 16, paragraph 3 (b), of the Protocol requests the Parties to evaluate progress in implementing the 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. *With the assistance of the joint secretariat, an ad hoc expert group, set up under the auspices of the Working Group on Water and Health, will draw up a draft guidance document on reporting following the relevant provisions of the Protocol, particularly articles 6 and 7.*

*Lead country: None. The secretariat will service the ad hoc expert group.*

#### **4.2.3 Arrangements for the preparation of other meeting documents**

*Work to be undertaken: On the basis of drafts to be prepared by the joint secretariat, the Working Group on Water and Health will finalize the following documents for consideration by the Parties to the Protocol at their first meeting: (a) draft guidance document on the priorities under the Protocol; and (b) a draft declaration of the Meeting of the Parties to the Protocol. Other meeting documents will be drawn up, if need be.*

*Lead country: None. To be implemented by the joint secretariat with the assistance of the Chairman and Vice-Chairman of the Working Group on Water and Health.*