

**Opening statement during the high-level segment of the
3rd session of the Meeting of the Parties to the Protocol on Water and Health
Monday, 25 November 2013
Oslo, Norway**

Honourable Ministers, Excellencies, Ladies and Gentlemen,

It is a great pleasure to address this Meeting, which draws together such a broad level of representation and expertise from throughout the WHO European Region.

I join our colleagues from UNECE in expressing also our great gratitude to the Government of Norway for hosting this Meeting. But we are equally grateful for your leadership and political support to the Protocol over the past years. It is very clear: Without the Norwegian stewardship and the leadership of Mr Kjetil Tveitan as the Chair of the Meeting, the Protocol would surely not stand where it stands today.

Ladies and Gentleman,

Access to safe sanitation and drinking-water is fundamental to health and well-being. Having easy access to clean water and living in environments free of human waste should be a given as the prerequisite for a decent life in the 21st

century. It enhances opportunities for sustainable livelihoods, reduction of poverty and economic development and is thereby one of the foundations for creating resilient communities.

With a good reason, the UN General Assembly has recognised access to safe and clean water and sanitation as a human right. Water, sanitation and hygiene are – as you will be aware of – at the core of the ongoing debate shaping the post-2015 sustainable development agenda.

Water-related diseases still represent a significant health burden. We estimate that diarrhoeal diseases are the fifth leading cause of death in low and middle income countries. Children under the age of five are particularly vulnerable to diarrhoea as a leading cause of malnutrition and death.

The bad news is that 88% of cases of diarrhoea can be attributed to unsafe water, inadequate sanitation and poor hygiene. The good news is: 88% of this disease is preventable!

Several years ago, more than 11,000 readers of the British Medical Journal chose “the sanitary revolution”, which means the introduction of clean water and sewage disposal, as the most important public health milestone since 1840.

It appears that in many parts of the European region this “revolution” has worked well and lead to remarkable progress. However, there are still great gaps: 67 million people lack access to adequate sanitation, and the region is indeed off-track to meet the Millennium Development Goal on sanitation. Even 100 million people lack access to piped drinking-water on premises. Rural dwellers and the poor are the most disadvantaged. In some parts of the region, we observe stalled progress and even setbacks in access.

These figures tell only a half of the truth. They do not tell a story about water, sanitation and hygiene beyond households, namely in schools, workplaces and health centres where most people spend much of their time outside the home. Providing children with safe water and sanitation in child care settings is a must. Failing would be a major embarrassment for mankind and leads to missed learning opportunities of future generations. Imagine – in the 21st century, in Europe, there are schools without safe, running water or soap and functional and clean toilets.

Effective strategies towards prevention and control of water-related diseases also need to look beyond access. Having a water tap or a toilet at premises is great, but does that does not guarantee safe, sufficient and reliable water or environmentally sound disposal of human waste. In order to sustain safe service provision, scaling-up the adoption of

water and sanitation safety planning approaches is therefore at the core. Small systems in rural areas require particular attention as they commonly face a range of resource challenges hampering the delivery of safe and sustainable services.

Ladies and gentlemen,

At the European level, the Protocol is the “policy home” for advancing health through better water, sanitation and hygiene management and improved surveillance. The new programme of work takes up most of topical issues. Safe management, small systems, schools and equity are most relevant to all states across the region, regardless of their socioeconomic status.

Successful strategies towards prevention and control of water-related diseases require integrated governance. The new WHO health policy, “Health 2020”, recognises the need to make governance for health and wellbeing a priority for more than just the health sector alone. The health sector can launch campaigns to promote hygiene, treat the sick and support through effective surveillance systems. To tackle the true root causes of water-related diseases at scale, various sectors such as water, environment, agriculture, rural development, education and financing

need to join forces. This approach holds true especially for addressing emerging challenges such as climate change.

The Protocol can play a vital role in further advancing integrated governance approaches. Through its architecture, it provides an important platform for establishing cross-sectoral partnerships and bringing together diverse players in establishing nationally adapted and integrated targets.

The Protocol is a child of the European Environment and Health Process. It was born in 1999, attaining full age in 2004 and has now grown up. It is a key instrument for the attainment of the Parma Declaration on Environment and Health. The Regional Priority Goal 1 aims at providing each child with access to safe water and sanitation by 2020. The Protocol is referred to as the implementing mechanism for incrementally realising this commitment, adapted to the countries' needs, priorities and available resources.

The European Environment and Health Ministerial Board as the political face of the Process has called upon states to consider strengthening their participation and advancing implementation of the Protocol in order to accelerate progress towards achievement of the Parma commitments. For the Protocol, it means that we have to close the gap between the current number of Parties to the Protocol and

the full number of Member States in the WHO European Region.

Dear Director Keiner, I am glad you flagged the recently signed Memorandum of Understanding between UNECE and WHO. We are confident that it provides a solid basis for assuring high quality secretariat services to the Protocol and further strengthening of our collaboration in the spirit of mutual consultation and trust as in the past years.

Ladies and gentlemen,

let me reassure you that the WHO Regional Office for Europe remains fully committed to continue its support to the Protocol accordant to your aspirations.

Thanks to your dedications we have seen major achievements and success stories under the elapsing programme of work. The incoming programme is topical, ambitious and forward looking with a view on responding to the Parties' needs.

Its implementation, however, is not a fast selling item. Aspirations need to meet reality. To reach tangible results, to maintain the Protocol as the regional hub for partnership and cooperation and – last not least – to ensure high quality secretariat services, it is essential that Parties make

available sufficient, stable and projectable financial resources.

In order to make the Protocol a joint success, I fully trust that Parties, non-Parties and organisations will commit to continue their leadership and provide the necessary financial means.

I believe it is worth the effort as we are talking about nothing less than bettering health and wellbeing of our fellow human being.

Distinguished delegates, I wish you a most fruitful meeting.

Thank you.
