**REPORT ON THE INTERACTIVE DIALOGUE FOR WATER FOR HEALTH**

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**Title of session**: Interactive Dialogue for Water for Health

**Number of attendees**: Approx. 150 people, and 60% of appointed countries

**Date and Location:** March 22nd, Conference Room 4, UN HQ

1. **Objective(s) of session**:

The session aimed to formulate and propose innovative and transformative solutions to be applied with celerity and solve current and future difficulties and future. The dialogue was co-chaired by Miguel Ceara Hatton, Minister of Environment and Natural Resources, Dominican Republic, and Zac Goldsmith, Minister for Overseas Territories, Commonwealth, Energy, Climate and Environment, UK. It was moderated by Catherine Russell, UNICEF Executive Director.

1. **Key point(s):**

This dialogue starts in the middle of the term of the decade for water and sanitation, however, we arrive in the cohort with a lack of success due to covid, fiscal issues, with underdeveloped infrastructure, especially in developing countries, due to unknown growth and non-assertive decisions.

The consequences of poor WASH disproportionately affect the most vulnerable, marginalised, and disadvantaged, particularly women, people living with disabilities and Indigenous peoples. Political conflicts and climate change hazards were identified, by Filippo Grandi, UN High Commissioner for Refugees, as causes for displacement, exposing women and girls. Moreover, illnesses related to untreated wastewater affect children up to 5 years old.

The upstream risks from human, animal and industrial activities threaten water quantity and quality, as well as downstream risks, for instance to food safety and sensitive aquatic environments, from inadequately treated wastewater and sludge. The COVID-19 pandemic has brought to light the urgency of action to prevent diseases that have complex human, animal and environmental transmission pathways.

1. **Key Challenges:**

As highlighted by Jagan Chapagain, Secretary-General, International Federation of Red-cross and Red Crescent Societies, ‘Today's problems were because of yesterday's solutions’. The challenge lies in looking for long-sided solutions.

Maria Neira, World Health Organization (WHO) expressed her concern to increase WASH investments, and interactive dialogue, versus providing “a diagnosis of the situation, and all the scary statistics”.

According to CEPAL, we need to accelerate the action by 4 times to reach the goals of the decade. If we don't get SDG 6 (access to WASH) sub-goals, the health of people cannot be guaranteed.

1. **Key recommendations/solutions presented (key actions to address the problem):**

Abida Sidik Mia, Minister for Water and Sanitation in Malawi, highlighted the importance of investing in WASH structures to overcome waterborne diseases such as cholera, emerging from climate disasters such as cyclone Freddy. She also urged the need for multistakeholder collaboration and financial resources.

Vikas Sheel, Department of Drinking Water & Sanitation, Ministry of Jalshakti, India, spoke about his commitment to India in achieving SDG6 by becoming Open-Defecation Free in 2019. He emphasized direct investments in service delivery, sustainability and water quality rather than just infrastructure. He also mentioned the need for better and more transparent monitoring to measure the outputs. Finally, he reflected on the importance of empowering local communities by promoting a water and sanitation committee with women at the centre of operation.

Community participation was also highlighted by co-chair, Miguel Ceara Hatton. He called for a long-term policy to guarantee water for the population.

Boluwatito Awe, the Nigerian Youth Parliament for Water, discussed the meaningful participation and innovation of the youth.

From the interactive debate, member states delegates called for a change in:

* Juridical and institutional level (Senegal)
* A paradigm shift for including women in managerial roles, beyond just protecting them and the inclusion of migrants in decision-making (OIM)
* Promoting menstrual health (UNFPA)
* Inclusion of people with disabilities in WASH services (Congo)
* Remote sensing and mapping for data collection and monitoring (Russia)
* Proper management of data and fact-based decision-making (Lebanon)

The role of Indigenous peoples as rightsholders and private sector was underscored by Andrea Carmen, International Indian Treaty Council and Eva Muhia, Private African Sanitation Actors, respectively.

1. **Quotes from speakers:**

***‘The empowered are not a business case for anyone!’*** – Pedro Arrojo- Agudo, Special Rapporteur on the human rights to safe drinking water and sanitation.

***‘upscaling water and climate action to increase the resilience of communities.*’** – Mr Jagan Chapagain, Secretary-General, International Federation of Red-cross and Red Crescent Societies.

***‘If you have a health care facility without sanitation services, don't call it a health care facility’*** *–*Maria Neira from WHO

1. **Notes from the speakers’ talk:**

Refer to Section 4

1. **Relevant stakeholders and organizations present or mentioned:**

Besides the previously mentioned countries, delegates participated in the interactive debate from *Senegal, Mozambique, Colombia, Thailand, Poland, Russia, Argentina, Ethiopia, Benin, Lebanon, Mauritania, Togo, Solomon Islands, Tunisia, Uganda, Zimbabwe, and Perú.*

Different Organizations such as *OIM, UNFPA, Congo Handicap, Private African Sanitation Actors, International Indian Treaty Council, PAM (World Food Programme), Unilever*

1. **Innovative ideas and/or approaches from the session**

The most proactive approach was the conventional route proposed by Co-chair, Zac Goldsmith, which mentioned that the UK is launching three main axes: 1. Built political commitments (e.g. UK government working with UNICEF and other agencies); 2. Support individual projects are done by professionals in the field; and 3. Enhancement of the WASH services by direct investment.

1. **How do the session outcomes impact the Water Action Agenda? How to translate the discussion into commitments and actions?**

The Co-chair, Zac Goldsmith announced a new initiative focused on WASH systems for health, with GBP 18,5 million in funding. This is the only clear and financial commitment made out of the session.

1. **How does this session relate water to other SDGs?**

The link between climate, water, menstrual health, and leaving no one behind was highlighted during the multiple sessions. SDG 1, 5, 6, 10, 13

1. **Short personal analysis of the session.**

**Hadi:** I strongly agree with Maria Neira from WHO, who pointed out the lack of interaction during the dialogue, and the tendency of stakeholders to make a diagnosis rather than commitments. I believe that the deliverables of the session were not clearly understood by the delegates, who most likely came prepared with their interventions and were not willing to adapt and make commitments as encouraged during the dialogue.

**Pabel:** There were very few concrete actions and commitments done by the state members to be implemented by the local governments. Considering the need for WASH in low and middle-income countries, more promotion and impulse are required at the local (municipalities, town) scale. In addition, there were a few points for capacity development, which is essential to build good foundations for effective governance, financing, service delivery, innovation, and data management, for sustainable water, sanitation and hygiene services.