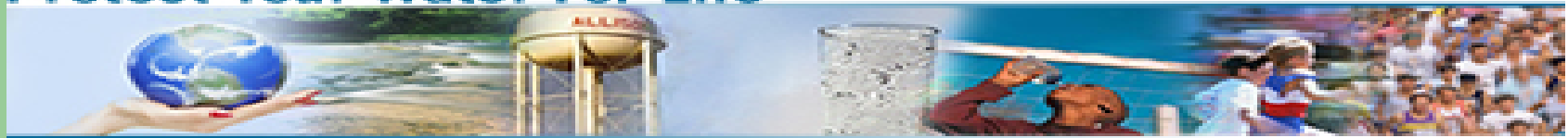


Access to Drinking Water in MDA

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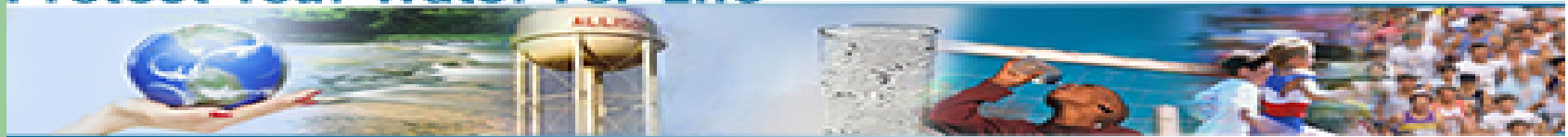




General notes

- Access to water – two meanings:
affordable access and capacity to pay;
access to safe Drinking Water.
- Access to information about water.
- Average water consumption in MDA per person - 1,5m³/month in rural areas and 3 m³/month in urban, per household – 5 and respectively 10 m³/month.
- Water tariffs are approved by local authorities and are different in different locations, but average tariff for domestic consumption generally is similar in urban and rural settlements – about 0,5-0,6€ per cubic meter, excepting capital city, Chisinau -0,2€. Tariff for industrial consumption – 1,5 € per cubic meter
- National authorities declared water supply as first national priority in social sphere.
- Right to water in national legislation – no clear mentions.
- Difficulties: The majority of the population are ready to pay, but 20 % of the population still consider that water is from the god and they should not pay for water services.

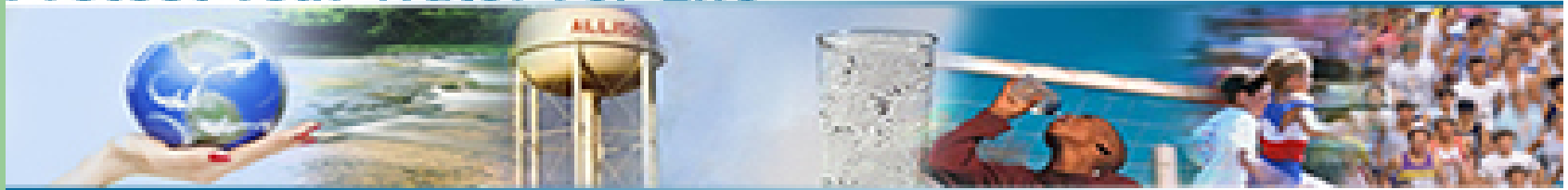
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Brief evaluation of water and health problems in MDA

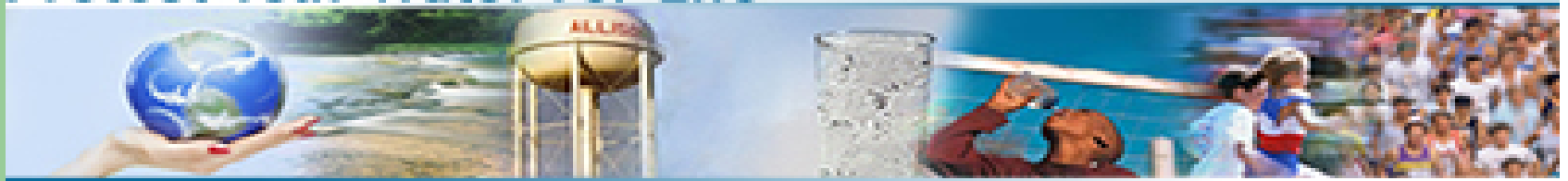
- Safe Drinking Water supply – one of the most acute social and public health problem in Moldova. The drinking water is a factor which causes up to 20% of infectious intestinal diseases and VAH cases, 70% of cases registered in rural areas, 15% of non-infectious diseases, in case of dental fluorosis– 100%, registered in about 200 locations. drinking water quality in the majority of sources doesn't meet the hygienic requirements: 2006-59% of samples from water intakes (2005-53%) and 86% from the local sources (shallow wells) because of high concentration of chemical parameters - (in artesian wells fluoride, H₂S, ammonia, boron, TDS, in shallow wells - nitrates, TDS), because of microbiological pollution – 30% of shallow wells.
- 55% of the population has connection to pipe systems: 85% urban, 25% rural;
- ❖ **only 45%** of the general population has access to safe water sources, rural population – 75% without access to safe sources; 51% use for drinking purposes water which contains more than 50mg/l of NO₃.
- ❖ Drinking water supply of schools and kindergartens face serious problems- 23,8% of samples didn't met guidelines on chemical parameters and 19% on microbiological parameters.

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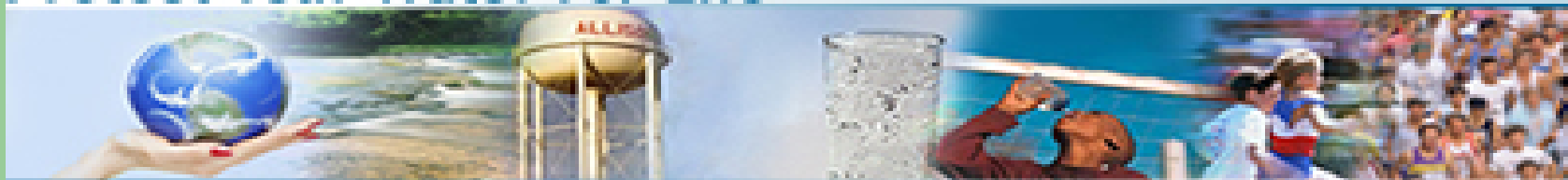
Basis for actions

- After ratification of Water and Health Protocol by the Parliament on 29 July 2005 and entering into force of the Protocol, Republic of Moldova became officially a Party on 15 of December 2005. This gave more arguments for actions to Ministry of Health and other relevant authorities.
- Art.6-target and target dates – before 15.12.2007. The revised National Environmental Health Action Plan contains a special chapter with targets and actions to achieve Protocol objectives.
- Normative support for acting: Strategy on DWSS, National Programs for Water and Sanitation and “Moldavian Village”, NEHAP and CEHAPE.
- National norms on Drinking Water quality, harmonized with WHO Guidelines 2004 and EU Directive 98/EC/83, approved by the Government on 25 April, will enter into force after publishing.



Water Security Condition

- Since September 2005 till present National Scientific and Applied Center for Preventive Medicine, with EC support implement Water Security Condition for the rural population as a part of Food Security Program in MDA.
- Main condition: 100% of tested water sources in rural areas according to WHO recommendations and EU Directive to have published information about water quality.
- General access to information in 224 villages (26%) from 18 selected districts – on each investigated well has posted information about drinking water quality and recommendations for use and about health risk. Generalized information was posted in all public places of the settlement.
- Identified safe water sources in each settlement and increased access to safe drinking water in selected areas.



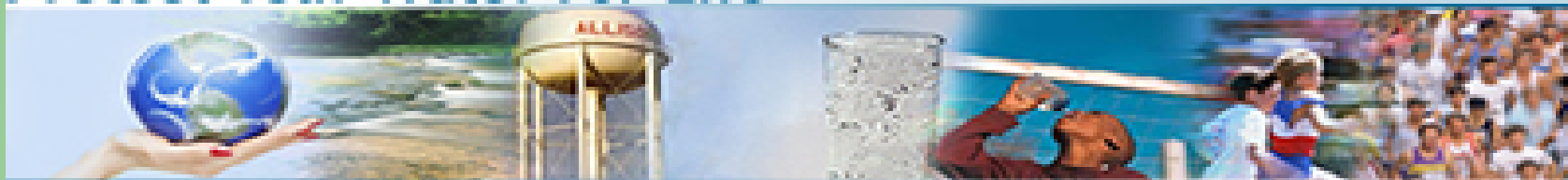
Water Security Condition

- Increased level of education of LPA and population different meetings on water and related issues. Improved Drinking Water resources management - full inventory of existing water sources in 224 locations and designed maps, creation of electronic registers.
- Electronic data base on drinking water quality created at 18 territorial public health authorities.
- Strengthened monitoring capacities of public health authorities.
- Implementation water and sanitation projects with EU support in 16 locations, with drinking water treatment in schools were necessary.

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Importance of public information campaign

- Population realized that exist serious problems with drinking water quality and bad water quality can affect health – a part renounce to generalized opinion in many places that from some sources many generations consume water and nothing happens.
- Better informed population pushed pressure on LPA to intervene and to improve situation.
- Free access to information for a large part of a population.
- Project implemented with contribution and participation of the population.
- Benefits of public participation – people saw the results of their involvement at each stage: selection, evaluation, information, participation, implementation, monitoring and maintenance.
- for water.



Planned activities for 2007-2012

- To finalize and to approve revised NEHAP before the end of 2007.
- To develop with and to approve, before the end of 2007: 2 normative acts – norms for very small drinking water supply and sanitation and norms for drinking water quality monitoring;
- To develop water safety plans for the most important water suppliers.
- To continue implementation of Water Security Condition for the rural population and cover all mayoralities.