WaterAid Bangladesh contribution to submission on Urbanisation and water

1. Background

1.1 Rapid urbanization has implications for Bangladesh in achieving the Millennium Development Goal (MDG) and National water and sanitation targets: In numerical terms, Bangladesh needs to serve:

- An additional **41,073** households every month to meet the urban MDG water target, taking 71% as the present urban water coverage[i]. An additional **24,218** households every month to meet the same, if urban water coverage is 99%[ii]. This will require increase of coverage for slum households given that 35% population of the six major cities live in slums without public service provision;
- An additional **13,392** households every month to meet the urban MDG sanitation target. If we want to achieve 100% sanitation coverage by 2010 as per the government declaration, we need to cover an additional 51,674 households per month. Again this requires a considerable increase of performance as the annual urban sanitation progress rate is only 8.63% and 16.43% in rural areas,

1.2 The principal challenges for delivery are:

- For urban areas the MD sanitation target has already been met. However, with the urban population growing twice as fast as the national population overall, significant resources and attention are required in order to sustain this rate of access;
- The proportion of urban water supply and sanitation (WSS) funding must be increased from 50% to at least 75% and priority should be given to small towns/urban centers;
- A legal/policy framework must be in place to cover the provision of water supply and sanitation in informal urban settlements ;
- WSS services delivery should be provided in a coordinated way following partnership amongst and between sector actors to improve sector performance.

2. Introduction

2.1 **WaterAid Bangladesh**: WaterAid Bangladesh has been working through partner NGOs since 1989 both in rural and urban areas in order to facilitate access to safe water and sanitation for all. The rural programme currently serves over 4268 villages of 6,611,049 people across different districts and the urban programme serves over 702 different slum communities of 646456 people in the cities of Dhaka, Chittagong and Khulna.

2.2 **Urbanization**: According to the 2001 census, Bangladesh has a population of 132 million, of which approximately 23% (or 31 million) live in urban areas that comprise of six major cities (city corporations) and at least 300 municipalities. The urban population is increasing by 3%- 6% per annum from three contributing factors i.e. (i) rural to urban migration; (ii) geographical increase of urban territory including sub-district headquarters being declared municipalities; and (iii) natural growth of population in urban centers . By 2010, the urban population is expected to be a third of the total population and is set to rise to 50 million by 2030. By 2015, Dhaka is expected to be the fourth largest city in the world, just behind Tokyo, Mumbai and Lagos.

2.3 **Definition of urban centers**: The definition of urban area is not uniform in all the censuses conducted in the country. As per census of 2001 and general perception, the urban areas have been classified into five categories according to their functions and sizes i.e. (i) Mega Cities, (ii) Statistical

Metropolitan Areas, (iii) Municipalities, (iv) Upazila (Police Station)/Sub-district Head Quarters, and (v) Other Urban Areas. There are six City Corporations and around 300 Paurashavas as of 2005. Both are urban local government bodies (LGBs) located in Headquarters of the six Divisional and District (64)/some of the Upazilas/Sub-district (463) respectively.

Here, we have only considered the Six City Corporations and Municipalities which are covered by our urban WSS institutional arrangement set-up. Other urban areas are covered by rural WSS institutional arrangement.s

3. Existing Water Supply and Sanitation (WSS) Situation

3.1 **WSS Delivery System**: Urban WSS services are carried out by Water Supply and Sewerage Authority (WASA), City Corporations (CCs) and Paurashava Water Sections, under the policy directions of Local Government Division, Ministry of Local Government, Rural Development and Cooperatives (MoLGRD&C) Government of Bangladesh. In Dhaka and Chittagong, the responsibility for WSS is given to semi-autonomous WASAs, which were created in 1963 for the implementation of new WSS projects due to greater complexity of mega cities while Department of Public Health Engineering (DPHE)1 has that role to assist the City Corporations (CCs) and the Paurashavas in the other urban areas.

3.2 **WSS Delivery System for Urban Poor**: The delivery process in the urban water supply sector falls in general within two main sections: i) the core areas of the towns/cities with established piped water supply system and ii) the fringe and slum areas of towns/cities. WaterAid Bangladesh experiences show that the fringes and slum areas are mostly neglected by the public sector; however, there are some NGO activities largely in big cities to improve access to safe water supply and sanitation for the poor.

3.3 **Policy Framework**: Although National Policy for WSS'1998 and the National Sector Development Progamme'2005 set WSS coverage for all, no legal acts or by-laws deal with houses without holding numbers, which apparently excludes all slums and squatters from WSS services. Recently, Dhaka WASA has developed guidelines which state the rights to WSS services for urban poor irrespective of their land tenure-ship or holding numbers in Dhaka City. However, these guidelines have yet to be implemented.

3.4 **WSS Coverage**: Considering the coverage of the Paurashavas and the two WASAs, the weighted average coverage of the country's urban areas is about 72% of which 39% is piped water supply and 33% by hand pump tubewells. The average coverage in the urban areas is low but varies enormously from town to town, from almost nil to as high as 95%. The piped water supply system in the Paurashavas provide water to a limited population, about one third, living in the centre of the towns. By December 2005, coverage with sanitary latrines in both Paurashavas and City Corporations was 79%.

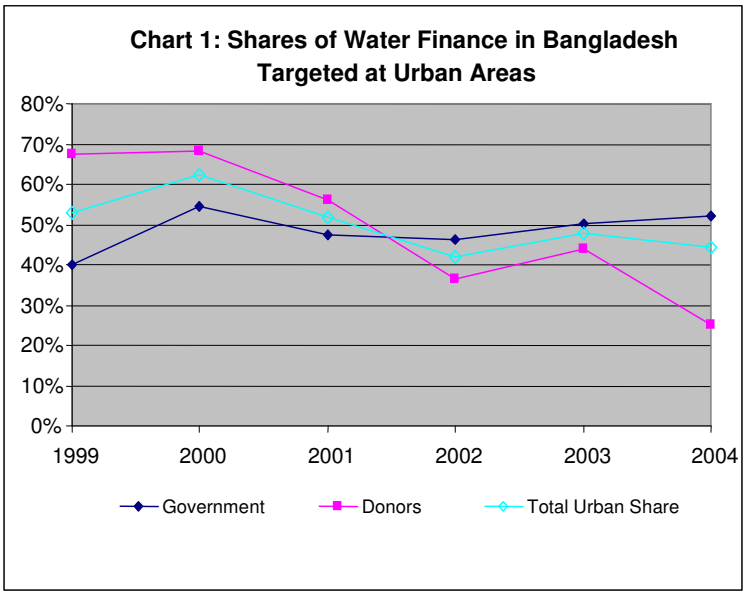
3.5 **Performance of WSS Delivery System**: Water supply in the Pourashavas is limited between 2 to 12 hours per day due to insufficient funds for electricity, lack of storage to cater for the peak and the low hours and lack of production capacity. Unaccounted for water in Paurashava is estimated at 33%. Observation shows that Dhaka is no exception of in this regard. Un-accounted for water stands currently at 50% in Dhaka and 30% in Chittagong.

3.6 **Coordination**: Experiences show that interaction/coordination is a major issue due to lack of clear mandates especially between WASA and CCs in Dhaka and Chittagong. In addition, lack of coordination between and amongst Paurashavas and Utilities and NGOs are observed in WaterAid Project areas.

1 Department of Public Health Engineering (DPHE) created in 1935 by the government to promote public health through ensuring provision of drinking water and , since 1954, sanitation

3.7 **Investment**: Chart 1 shows that the urban WSS sector allocation from government as well as from donors is declining. The national sector development plan shows that ¾ of total water finance must be targeted at urban areas in order to achieve 100% basic WSS coverage. However, data from the last 5 years shows that urban areas have received only a 50% share. It is also clear that the donor funding is decreasing dramatically. There are further inequities in resource allocation between the big cities and secondary/small cities. Data and observation shows that the largest 6 big cities are getting a larger share of total WSS allocation while secondary and small towns are getting only 11.8% of total urban WSS finance in the current fiscal year (2006 - 2007).

3.8 **Cost-sharing / Subsidies**: The government has so far not developed any comprehensive cost-sharing strategy, and as a result, all population irrespective of income or economic class is paying more or less the same tariff for water consumption. In 2004, the Government of Bangladesh declared that 20% of funds from the Annual Development Programme (ADP) would be allocated for sanitation promotion particularly for the hardcore poor in both urban and rural areas. These 20% funds have not been disbursed in a timely way for the urban poor.



3.9 **Capacity Development**: Since the public sector is primarily dealing with core peoples of urban centers, they need to develop their capacity to serve the urban fringe and slum areas. Study[iii] shows that they lack autonomy, for example the Paurashavas need to take prior permission from central government to create posts or to appoint staff in their set up. They also need permission to revise tariffs.

4. The Impact and Implication of Urbanization on Water Supply and Sanitation

4.1 **Rapid Growth of Slums and Squatters**: A recent study shows[iv] that 35.2% of the total City Corporation population (15,447,046) are living in the slums of these six CCs. A study[v] in six selected Paurashavas shows that the total population of the Paurashava is 332,694, which is 1.45 times the population in 1981 census indicating a huge population increasing trend. On an average, more than 18% populations of the Paurashavas live in slums and squatter settlements. There are a total of 9308 households with a population of 60,151 in these slums and squatter settlements. The average household size counts 6.46 people.

4.2 **Water Coverage in the 6 CC Slums and Squatters**: Apart from Dhaka, the study also shows that the slum residents typically relied on tube well i.e.66% while 28% relied on municipality tap in the rest of the five City Corporations. In nearly one third (31.6%) of slum clusters where tube wells were available, a single one was shared by 11 to 20 households while in 28.6% the figure was 6-10 households. Another study[vi] shows that the major sources of drinking water in Dhaka slum areas are municipal taps (81.7%) and tube wells (15.6%). It also shows that 30% of the slum households depended on unofficial WASA-based water sources which are mostly illegally operated.

4.3 **Sanitation Coverage at Slum and Squatters in 6 CCs**: Only 28.8% of slum households have access to sanitary latrines i.e. latrines linked with sewerage/septic tank and latrines with water seal. Amongst all slums, 47.5% latrines were usually shared by 2-5 Households (HHs) while 36.5% were used by 6-10 HHs. In 13.4% of the slums, each latrine was shared by 11 or more families.

4.4 **WSS Coverage in Slums in Selected Six Secondary/Municipalities**: Sanitation and water supply coverage in the slum and squatter settlements is poor. These areas have neither any waste bin nor drains not to mention of programs to improve the situation. Between, 10-46 households share one Hand Tubewell (HTW) while 2-15 households share one latrine.

4.5 **Policy Impact and Implication**: The urban poor living in slums and infringe areas are deprived of public services and have to buy or arrange WSS services privately at double the cost of those charged by the public sector. For example, slum dwellers have to buy drinking water from vendors at Tk. 5/- (1 US$ = BDT 68) per 4.5 liters while a legal consumer of Dhaka buys 1000 liters of drinking water at Tk. 5/-. In addition almost 50% of the monthly income of a slum dweller is spent on health costs related to water-borne diseases.

4.6 **Performance of WSS Service Delivery System**: In the face of rapid urbanization, performance of the service delivery system has to be improved by 53% for achieving MDG targetss for urban water supply. To achieve 100% basic water supply and sanitation coverage by 2010, we need to increase performance of the service delivery system by 71% and 143% given that present water supply and sanitation coverage 99% and 78% respectively.

Table: 1 - Coordination: What Works: WATSAN Forums at the Paurashava level

Paurashavas are the local government institutions in urban areas responsible for providing water supply, drainage and sanitation services within their jurisdictions. At the local level, coordination of projects has been problematic for many years. Different donors, NGOs, local government and other government agencies simultaneously implement water supply and sanitation projects in the same urban area following different implementation strategies and approaches. This leads to duplication, overlapping and misuse of limited resources and above all confusion amongst beneficiaries. Therefore, coordination has to take place the level of local government. However the role and responsibility of local government institutions in project planning and implementation remains minimal.

In Narayanganj Paurashava a WATSAN Forum is working to address these issues, leading to effective planning, implementation, monitoring and maximizing benefits of WSS projects, particularly for the poor. The Chief Executive Officer and the Chairman of the Paurashavas were selected as convener and chief adviser of the Forum and all Ward Commissioners local government agencies, NGOs and CS representatives are members.

Major activities of the Forum include:

- Measures to avoid duplication of activities amongst and between the development partners such as regular sharing meetings, situation analysis, agreements and dialogue.
- Development of coordinated plans for achieving 100% sanitation in the town
- Capacity building for local government representatives on participatory programme planning and implementation

Experiences show that the Forum can be a model for coherent implementation of development programmes at the Paurashava level, with increased transparency and

5. Solutions from WaterAid Bangladesh viewpoints

- WSS Service Delivery at Slums and Fringes: Persuading Dhaka WASA to install water points and sanitary latrines in slums/squatter neighborhoods was an important breakthrough. It demanded many years and efforts, negotiation and work with stakeholders to build their confidence and show them that solutions exist for informal communities to access formal utility services with a win-win outcome. WaterAid Bangladesh and our partner DSK, have learnt that by effectively mobilizing communities, WSS services can be established in fringes and slums using decentralized community options like tube wells where the network is not extended or absent.

- Policy Framework: Dhaka WASA has mainstreamed WaterAid and partner approaches into their newly developed water supply guidelines. These can be replicated in other urban areas for water supply and sanitation provision for urban poor.
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- Coordination: WaterAid Bangladesh's partner PRODIPAN has developed a coordination mechanism for effective implementation of urban WSS programme in Narayanganj Paurashava (see-Table: 1) This mechanism can be scaled up as a solution for effective coordination.

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- Financing: Given that the lion's share is required for urban WSS sector while its funding is decreasing, a policy framework is needed to govern the investments of all players. Donor commitment to financing urban WSS is essential.
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- Cost-sharing/Subsidy: Under the WaterAid Bangladesh Advancing Sustainable Environmental Health (ASEH) Project in Bangladesh, a strategy has been devised that gives priority to the poorest and is based on people's ability to pay for urban poor. An effective government mechanism and monitoring system needs to be developed in order to ensure proper implementation of subsidy money.

Recommendation on the Role of Different Actors

ROLE OF DIFFERENT ACTORS	
International Level	Government and international agencies must work in order to adopt legal acts/by-laws or guidelines for the provision of WSS services for informal settlements in urban areas; Donors' funds for urban WSS sector must increase in aligning with government investment plan; Donors must help national government in building capacity of national staff in order to effectively deliver WSS services in urban areas particularly for urban poor
National level	Government needs to set a policy framework and legal acts for the provision of WSS services for informal settlements in urban areas Provide appropriate trainings to the government as well as LGB's staff to scale up best practices in areas of WSS services particularly for urban poor; Assist LGBs to establish local coordination forum for maximum use of scarce resources; Allocate and disburse more government funds for urban WSS sector and also ensure effective and timely implementation of sector funds with transparent and accountable manner; Government to develop effective pro-poor cost-sharing strategies and technologies for urban WSS
Community level	Communities particularly poor need to be involved in the urban WSS project; Government and NGOs need to provide information particularly hygiene education, WSS related rights etc. so that they can influence LGBs for effective and pro-poor WSS programme implementation. Local resource mobilization at local level

i Sector Development Programme (SDP), Unit for Policy Implementation (UPI), Local Government Division, Government of People's Republic of Bangladesh, December, 2005.
ii Government of Bangladesh and UN Country Team, The First Bangladesh MDG Progress Report, 2004.
iii Situation Analysis of Selected Six Pourashavas, Participatory Management Initiative for Development (PMID), Dhaka, Bangladesh, December, 2004.
iv Slums in Urban Bangladesh- Mapping and Census, 2005. Centre for Urban Studies, National Institute of Population Research Dhaka Bangladesh and Training (NIPORT) and Measure Evaluation, 2006. Dhaka- Bangladesh and Chapell Hill, USA.

v Situation Analysis of Selected Six Pourashavas, Participatory Management Initiative for Development (PMID), Dhaka, Bangladesh, December, 2004.
vi Dhaka Water Services Survey, Asian Development Bank, Draft Report, September, 2005.