

Total sanitation in South Asia

the challenges ahead

This paper has been prepared for the second South Asian Conference on Sanitation (SACOSAN).

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Headlines

- Government sanitation services are not reaching the poorest and most vulnerable people and are not addressing the specific needs of women, children and disabled people
- There is a looming urban sanitation crisis in South Asia and governments are not tackling this with the sense of urgency required
- Current levels of investment in sanitation are not sufficient to meet national and international sanitation targets
- The rush to meet national and international sanitation targets is resulting in construction of latrines only, so called “latrinisation”, and not in “total sanitation”
- National monitoring systems continue only to count latrines and do not provide information on the number of totally sanitised communities and on the sustainability of sanitation facilities

WaterAid - water for life

The international NGO dedicated exclusively to the provision of safe domestic water, sanitation and hygiene education to the world's poorest people.

Introduction

The majority of people in South Asia still lack access to adequate sanitation. The latest UN Millennium Development Goals (MDG) report indicates that in South Asia in rural areas 76% of the population do not use

improved sanitation, and in urban areas the figure is 34% (United Nations, 2005). The clear links between access to adequate sanitation and poverty reduction have been repeatedly demonstrated.

The South Asian Conference on Sanitation (SACOSAN) held in Dhaka in 2003 was a landmark event in meeting the challenge of ensuring access to adequate sanitation for all South Asians. The conference resulted in the first ever regional, ministerial level Declaration on sanitation in which governments committed to accelerate progress in sanitation and hygiene through a people-centred, community-led, gender-sensitive and demand-driven approach.

SACOSAN gave new momentum to the sanitation sector and many countries have made exemplary efforts to meet the commitments made in the Declaration. Governments in India and Bangladesh have launched national level sanitation programmes and increased budget allocations to sanitation; in Nepal the Government has drafted national sanitation and hygiene guidelines; in Bangladesh a national sanitation strategy has been approved; and in all three countries innovative approaches are being adopted by governments, for example awards for sanitised communities.¹

Yet if the vision of a South Asia free of open defecation and with people living in dignity is to



WaterAid/ Caroline Penn

¹ Examples for this paper are taken only from Bangladesh, India and Nepal.

become a reality, governments need to take a number of actions in response to key emerging issues:

1. National sanitation programmes must be refocused to reach the poorest and most vulnerable people and address the needs of women, children and disabled people. These programmes should be implemented by local governments and NGOs and citizens should be made aware of their entitlements from the programmes.

2. Policies must be formulated and programmes and investment plans initiated through multi-stakeholder processes, to tackle the looming urban sanitation crisis, recognising the right of all people to sanitation. These programmes should include mapping of all slum areas and appropriate technologies, such as community managed toilet blocks.

3. The level and quality of financing for sanitation must be further increased.

4. Sanitation monitoring must be strengthened to focus on all aspects of total sanitation and go beyond counting latrines. Monitoring and declaration of totally sanitised areas should be done by joint government,



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community, NGO teams. Governments need to publish annual performance reports on sanitation.

SACOSAN 2 provides governments with an opportunity to demonstrate their commitment to act on these issues through the Islamabad Declaration. Our recommendations on how these issues can be tackled are given in this paper. With only another four SACOSANs prior to 2015 it is critical that ministers begin to act with a sense of urgency. The failure to deliver the required

increases in access to sanitation will, on present trends, result in the deaths of an extra 10 million children globally by the time the MDG target is finally reached in 2026 (WaterAid, 2005:1).

We also urge governments to reaffirm the commitments they made in the Dhaka Declaration. In particular governments must reaffirm the need for gender-sensitive sanitation programmes and the commitment to establish an inter-country working group on SACOSAN.

Key issues in moving forward on the SACOSAN 1 agenda

Since the first SACOSAN in 2003 there have been a number of initiatives by governments to accelerate sanitation coverage. In Bangladesh, India and Nepal, WaterAid and partners have been supporting these. However, based on knowledge and insights from our work with communities, and our experiences, research and analysis of these government initiatives, we are concerned that a number of key emerging issues are yet to be satisfactorily addressed by governments across the region. These issues, our modest attempts to address them and our recommendations to governments are outlined below.

Sanitation services are not reaching the poorest people

National sanitation coverage is increasing yet sanitation services are not reaching the poorest and most vulnerable people (WaterAid, 2005:2). In the Dhaka Declaration (2003) countries noted that “it is the vulnerable and marginalised population in urban and rural areas that suffer most from minimal access to sanitation facilities”. However, new programmes are still not reaching these people. In Nepal two-thirds of districts have sanitation coverage below the national average and these are the poorest and most inaccessible districts (WaterAid Nepal, 2004). In India the Government’s Total Sanitation Campaign provides subsidised latrines to poor households. Yet due to limited participation of communities in decisions over which households should receive subsidised latrines, and lack of information about the campaign in remote villages, many poor and vulnerable households are not covered by the campaign. In Bangladesh, drawing experiences from other public subsidy programmes, there is concern that subsidies provided by national programmes through local government institutions are not always reaching the poorest.



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There are various reasons why this is happening. Some are related to geography: latrine components are expensive in remote areas and there remains a lack of technical sanitation options for the poor and vulnerable living in difficult geographical locations, such as flood-prone areas. Other reasons are legal: governments are reluctant to provide services to people living on non-tenured land, where most of the urban poor reside. And others are institutional: local government institutions are inexperienced at managing large scale, pro-poor sanitation programmes. Yet the outcome is the same everywhere, everyday: the poor face the indignity of open defecation.



WaterAid and partners have been researching and highlighting this issue by publishing comparisons of district sanitation coverage and raising concerns of subsidy leakage with governments. We are working with the private sector to establish sanitation production centres in remote areas, making materials available at affordable prices. We are following gender and poverty-sensitive approaches in our projects and we promote child friendly latrine designs. We are also piloting disabled friendly technology options.

We have also initiated a series of Citizens' Action projects across the region, working with communities to achieve accountability in the provision of water and sanitation services. In these projects people learn about their rights, entitlements and responsibilities under various government water and sanitation programmes, research and map their current access to sanitation and then engage with service providers in a dialogue to secure improved service provision.



Governments need to conduct reviews, in consultation with all stakeholders, to find out whether national sanitation programmes are actually reaching the poorest. Then governments need to establish, implement and evaluate improved mechanisms for reaching the poorest. Where possible these programmes should be implemented by local governments, strengthening their capacity in the process. Government funding should also be provided for NGOs to support local government in delivering sanitation services. All citizens need to be made aware of their entitlements under these programmes.

Governments are not ready to address the looming urban sanitation crisis

Rapid urbanisation across South Asia is putting a strain on urban sanitation systems. In many towns and cities piped sewerage systems do not even exist. Where they do exist connectivity is generally low and the poor and vulnerable are not connected. One in three city dwellers lives in slum areas and the number of slum dwellers in South Asia has increased by a quarter over the last decade (United Nations, 2005). Slums are very rarely connected to city sanitation infrastructure and the sanitation situation is deplorable. Official data on sanitation is generally insufficient and unreliable, and that for urban areas is worse. This means that the actual status of sanitation in towns and cities in the region is not known. Where some data are available, analysis shows that progress towards the MDGs in urban areas is slower than in rural areas.

Governments do not seem to be prepared to tackle this looming crisis. Bangladesh, India and Nepal still lack comprehensive policies on urban water supply



WaterAid/ Liba Taylor

and sanitation and plans on how services will be provided to people living in slums. New national sanitation programmes launched after SACOSAN 1 are focused on rural areas only. Many larger urban centres have access to infrastructure projects funded by donors. However, research shows that many of these projects do not result in improved services for the poor (WaterAid, 2006). Smaller urban centres can neither

generate adequate funds themselves, nor access financing, to address their sanitation needs.

One of the main reasons for this crisis is the indifference by the urban middle classes who cocoon themselves from the effects of poor sanitation, either by availing themselves of the minimal networked sewerage that does exist or by moving to self-contained colonies with



independent sanitation provision. There is also a lack of data on sanitation in urban areas and this is compounded by confusion over what sanitation actually means in an urban context and by a lack of an accepted definition. Institutional responsibility for urban sanitation remains unclear. It is often split across a number of departments, resulting in lack of coordination. In many countries local urban bodies are mandated to provide sanitation services yet lack the financial resources and the technical know-how to do so.

→ **Governments need to** urgently review the sanitation situation in urban areas and develop, adequately resource and implement urban sanitation policies and programmes, through multi-stakeholder review processes, recognising the right of all people to sanitation. These programmes should include mapping of all slum areas and appropriate technologies, such as community managed toilet blocks.

→ **WaterAid and partners have** been raising these issues with governments, highlighting the need for more realistic urban sanitation coverage figures. We have been encouraging governments to formulate sanitation policies for urban areas. WaterAid has recently conducted research on the effectiveness of Asian Development Bank projects in serving the poorest with sanitation (WaterAid, 2006). At the same time we are striving to develop and popularise effective urban sanitation technologies such as community managed sanitation blocks. These technologies are designed to meet the specific needs of women and children, who are particularly vulnerable to the impact of poor sanitation.



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Inadequate and inefficient financing for sanitation

Current levels of investment in sanitation are not sufficient to meet national and international sanitation targets. Where financing is available disbursements are slow and the absorption of funds is low. Sector financing calculations for Nepal estimate that only 8% of sector expenditure goes to sanitation. This is happening despite the fact that sanitation coverage lags behind that of water (25% versus 71%) and there is an annual financing gap of US\$6million for household sanitation alone if the Millennium Development Target for sanitation is to be met (WaterAid Nepal, 2004). In India it is calculated that there is a shortfall of \$6.4 billion in financing needed to be bridged between 2002 and 2015 to reach the MDG sanitation target in rural areas. However allocations and annual increases continue to be skewed towards rural water supply where coverage is relatively higher (WaterAid India, 2005).



WaterAid/ Anita Pradhan



WaterAid/ Abir Abdullah

Ultimately this stems from the low priority given by governments to sanitation. This results in minimal funding for sanitation when limited development resources are allocated across sectors. In most countries national budgets do not provide a separate allocation for sanitation. This means most funding for sanitation is lumped with that for water and most is spent on water supply projects. Actual allocations and expenditure

on sanitation are often not known. Furthermore, financial transfers from central to local government through multiple layers result in delays in fund disbursement and low utilisation of allocated funds. The decision by the Government of Bangladesh to allocate 20% of the local government annual development programme to sanitation is a positive example of how this can be addressed by governments.

→ WaterAid has been calculating the financing gaps in meeting sanitation targets in all the countries where we work. We have been using these calculations to demonstrate to governments and donors the need for more and better financing.

→ **Governments need to** publish estimates of financing required to meet national sanitation targets, current expenditure and available resources. On the basis of these estimates, increased priority needs to be given to sanitation in national budgets. Governments must review the financing flows of national sanitation programmes and make these as effective as possible to ensure full utilisation of allocated resources. The recent statements on sanitation in the South Asian Association for Regional Cooperation (SAARC) Dhaka Declaration, 2005, show that this forum is beginning to recognise the sanitation crisis. Governments need to explore the possibility of the using the SAARC Development Fund for forwarding the SACOSAN agenda at the regional level.

Monitoring of sanitation is still limited to counting latrines

After SACOSAN 1 many governments increased efforts to accelerate sanitation coverage and this is to be commended. Yet the rush to meet targets is resulting in construction of latrines only, so called “latrinisation”, and not in “total sanitation”. In the Dhaka Declaration (2003) countries demonstrated their understanding of the broader nature of total sanitation. The Declaration highlighted that the thrust of sanitation programmes “should be on the elimination of open defecation and other unhygienic practices, as well as the promotion of good hygiene practices”. There is evidence however that countries are falling short of this principle.

Across the region communities are being declared as “totally sanitised” on the basis of latrine construction

only. Use of household latrines, hand washing and other hygiene practices and provision of latrines in schools and public places are not being monitored. Monitoring systems continue to count latrines only and do not provide information on the number of totally sanitised communities and most importantly on sustainability. Furthermore there are questions over the validity and accuracy of monitoring data for sanitation.

This is caused by pressure to demonstrate results, created by national and international targets. When in a hurry to deliver, building and counting latrines is far easier than promoting hygiene and measuring behaviour change. In most countries there are no coherent management information systems for the sector and no third party validation of coverage figures.



WaterAid and partners are raising these concerns with governments and undertaking research in “officially sanitised communities” to highlight the extra work that needs to be done to achieve actual total sanitation. We are also collating all data on sanitation coverage, highlighting inconsistencies and weaknesses of various surveys, and pushing for agreement on definitions and use of agreed questions in all national surveys. In Nepal, WaterAid is supporting a government task force which aims to produce reliable data at the local level. In all the projects WaterAid supports it promotes use of community monitoring mechanisms where communities themselves measure behaviour change.



Governments need to adopt minimum standards in declaring areas as totally sanitised. These must include:

- No open defecation.
- Hygienic latrines available to and used by all.
- Proper maintenance of latrines for continual use.
- Improved hygienic practice.
- Proper management of solid waste, household wastewater and storm water.

Governments need to ensure that their national sanitation programmes include all the components required to achieve totally sanitised communities according to this definition. Monitoring and declaration of totally sanitised communities should be done by joint government, community and NGO teams. Governments need then to publish regular annual updates on sanitation coverage using both hardware (ie latrine construction) and software (ie latrine use and hand washing) indicators. In these reports all data should be disaggregated on the basis of gender and poverty so it is clear who is benefiting from improvements. Coupled with publishing of financial information recommended above, this will provide a picture of the status of the sanitation sector and a basis for realistic delivery plans.



WE CALL ON THE GOVERNMENTS OF THE REGION TO EXPRESS THEIR COMMITMENT TO TACKLING THESE KEY ISSUES IN THE ISLAMABAD DECLARATION AND BY IMMEDIATE ACTION.

WaterAid and partners' commitment to sanitation

WaterAid and its partner organisations are committed to work with all stakeholders and make their contribution to improving sanitation in the region for the poorest and most vulnerable. WaterAid aims to scale up its work in sanitation. By 2010 WaterAid will be helping 1.5 million people gain access to sanitation every year through its projects and partners.

The calls in this paper have been endorsed by WaterAid country programmes and partners across the region.

WaterAid Bangladesh Partners



Dushtha Shasthya Kendra (DSK)



Green Hill (GH)



মহিদেব যুব সমাজ কল্যাণ সমিতি
MAHIDEB JUBO SOMAJ KALLAYAN SOMITY
Mahideb Jubo Somaj Kallayan Somity (MJSKS)



Association for Realisation of Basic Needs (ARBAN)



Assistance for Slum Dwellers (ASD)



Dhaka Ahsania Mission (DAM)



NABOLOK



NGO Forum For Drinking Water Supply & Sanitation



PHULKI



PRODIPON



Population Services & Training Centre (PSTC)



Rural Health and Development Society (RHDS)



SHUSHILAN



Unnayan Shahojog Team (UST)



Village Education Resource Center (VERC)

WaterAid India Partners



Gram Swarajya Samiti Ghoshi (GSSG)



Integrated Development Foundation (IDF)



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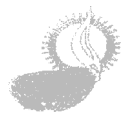
ABHIYAN



Modern Architects of Rural India (MARI)



Research in Environment, Education And Development Society (REEDS)



GRAMJYOTI



GRAMALAYA

Association for Women's Education and Development (AWED)



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ADITHI

Bhartiya Jan Utthan Parishad (BJUP)

WaterAid Nepal Partners



Federation of Drinking Water and Sanitation Users Nepal (FEDWASUN)



Non Governmental Organisation Forum for Urban Water and Sanitation (NGOFUWS)



Nepal Water for Health (NEWAH)



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Summary of main recommendations to governments

To ensure that the poorest and most vulnerable benefit from national sanitation programmes

- Conduct reviews, in consultation with all stakeholders, to find out whether national sanitation programmes are actually reaching the poorest.
- Establish, implement and evaluate improved mechanisms for reaching the poorest and addressing the needs of women, children and disabled people.
- Implement sanitation programmes through local government, strengthening their capacity in the process.
- Provide funding for NGOs to support local government in delivering sanitation services.
- Make citizens aware of their entitlements under these programmes.

To tackle the looming urban sanitation crisis

- Urgently review the sanitation situation in urban areas.
- Develop, adequately resource and implement urban sanitation policies and programmes, through multi-stakeholder review processes, recognising the right of all people to sanitation.
- Map all slum areas and support provision of community managed toilet blocks in slums.

To increase the quantity and quality of financing for sanitation

- Publish estimates of financing required to meet national sanitation targets, current expenditure and available resources.
- Increase financing to sanitation and review the financing flows of national sanitation programmes and make these as effective as possible to ensure full utilisation of allocated resources.
- Use the SAARC Development Fund for forwarding the SACOSAN agenda at the regional level.

To strengthen monitoring of total sanitation

- Adopt minimum standards in declaring areas totally sanitised.
- Form joint government, community and NGO teams to monitor and declare totally sanitised communities.
- Publish annual updates on sanitation coverage including information on hygiene practices

To increase regional learning and collaboration on the SACOSAN agenda

- Activate the inter-country working group on SACOSAN.