

Reaching the Sanitation Target Set at WSSD

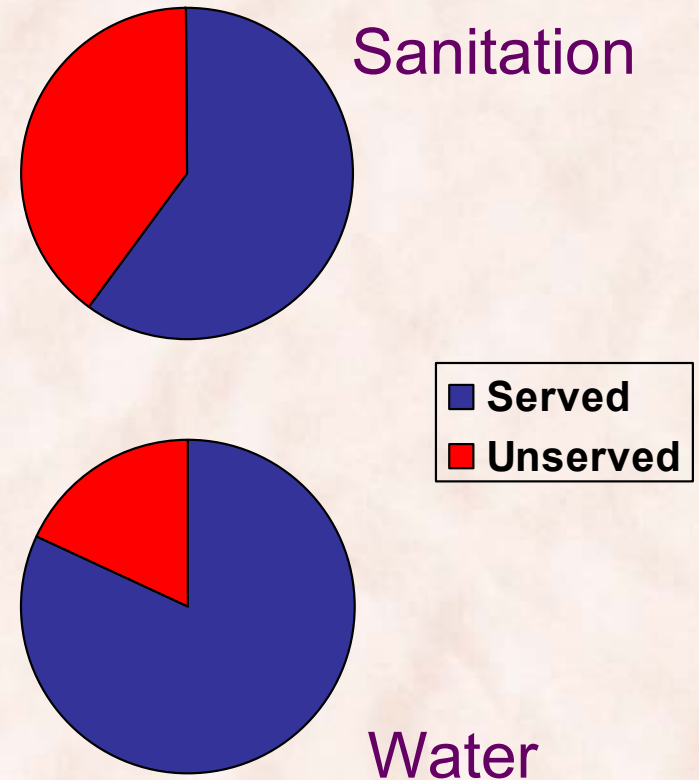
March 2003



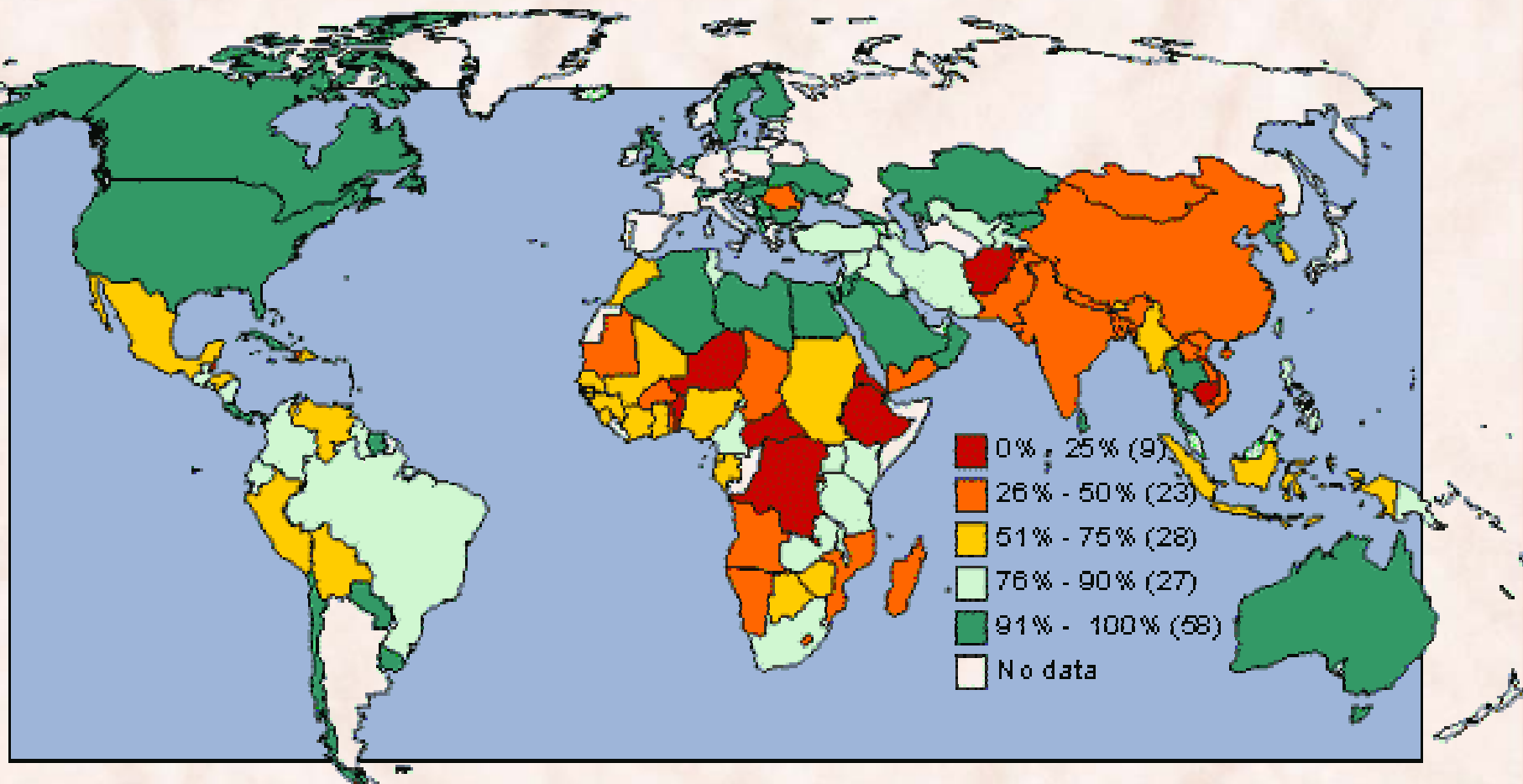
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The challenge

- Almost **two-and-a-half billion** without sanitary means for excreta disposal
- More than **one billion** without access to safe water



Sanitation Coverage, 2000

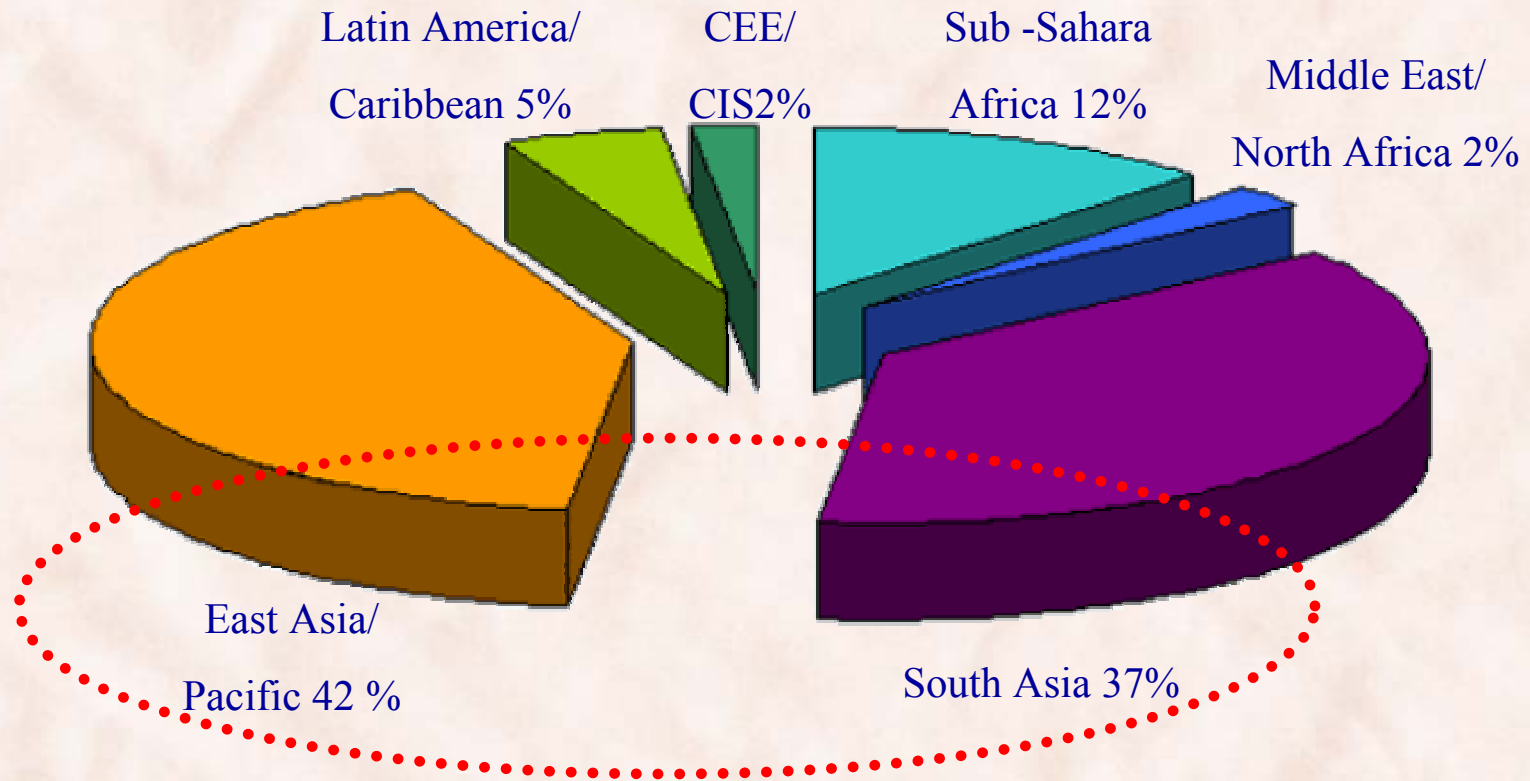


Source: UNICEF/WHO, 2000



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2.4 billion still without access to improved sanitation facilities



About 1.9 billion live in Asia

Source: UNICEF/WHO, 2000



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Vision 21 Targets and the MDGs

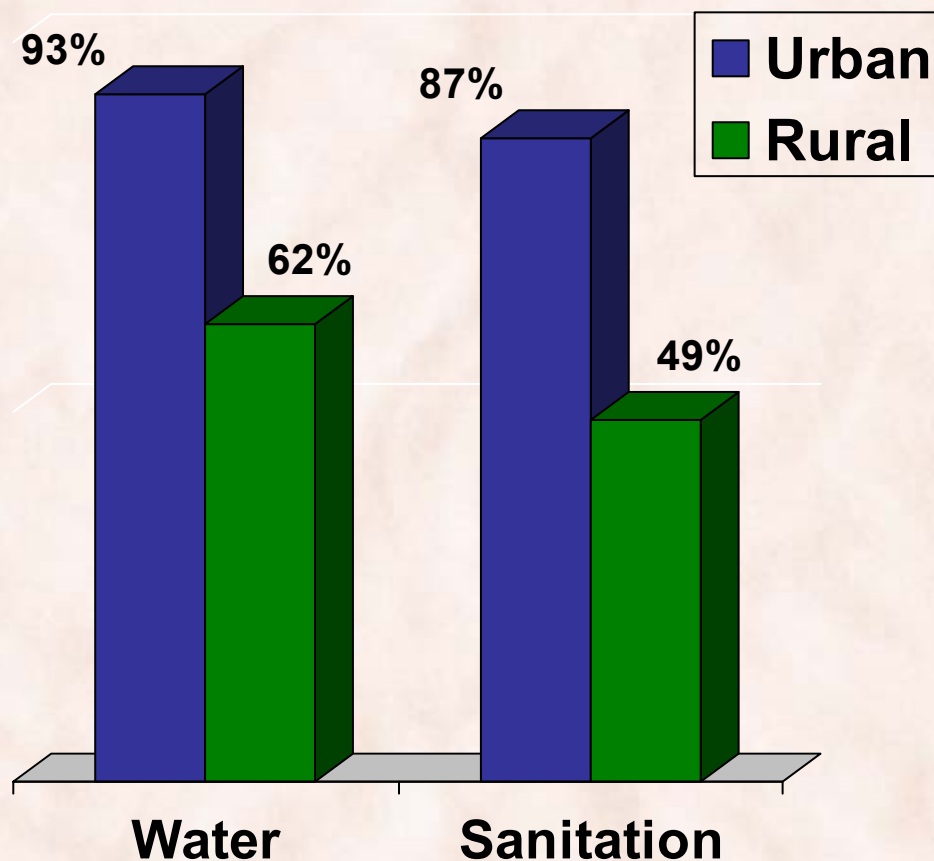


Beyond coverage

- deteriorating water quality – are ‘served’ people drinking safe water?
- additional disparities – without better data disaggregation we don’t know the whole story -urban low income areas
- what about hygiene statistics?
- Focus shifted to improving health and quality of life of children

Coverage: regions

- Latin America and the Caribbean: good coverage but **high disparities** between rural and urban

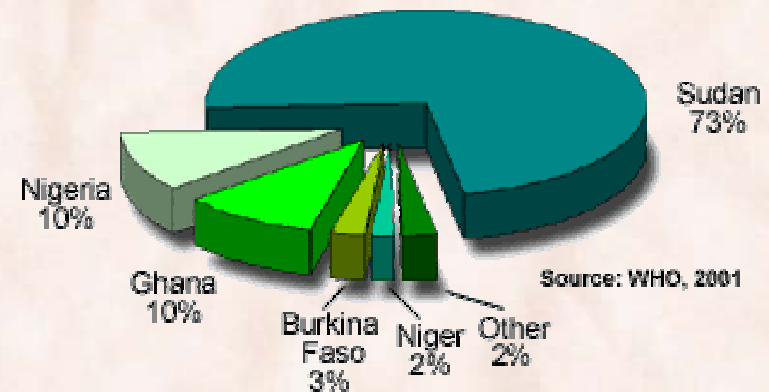


Disease & disability

- **4 billion cases** of diarrhoea each year
- **10%** of the developing world suffer from intestinal worm infections
- **6 million** people are blind from trachoma
- **200 million** people in the world are infected with schistosomiasis

Disease & disability

- Fluoride, Arsenic and other water quality problems affect **tens of millions**
- In 2000, **more than 75,000** people still suffer from guinea worm disease





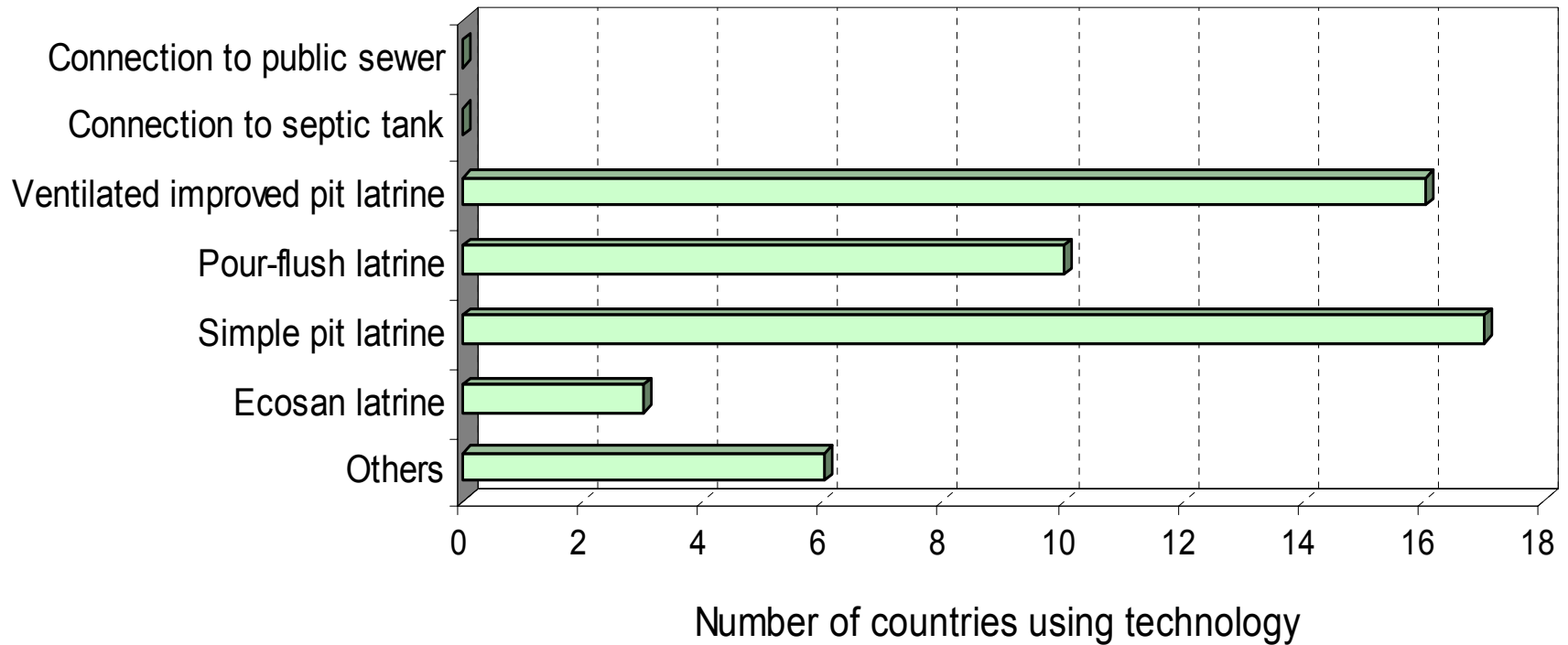
Health Improvements in Industrialised Countries can be largely attributed to:

- Water quality and access
- Sanitation - safe disposal of excreta and waste
- Soap use became widespread
- Food-quality regulation and enforcement
- Housing, ventilation, stoves, and fuels

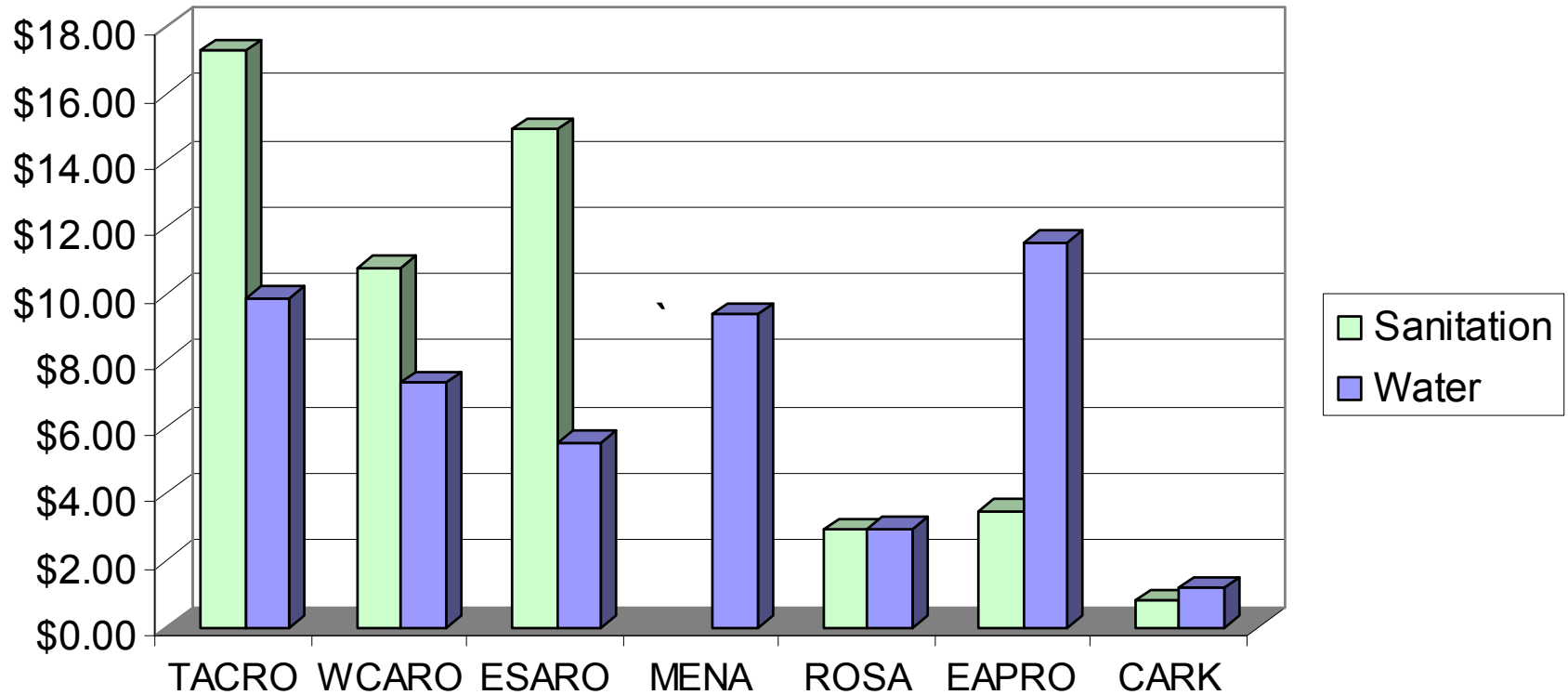
The Effect of Interventions to Prevent Diarrhea

Intervention	Median reduction (range)	
Hardware:		
Sanitation	36%	
Water Quantity	20%	
Water Quality and Quantity	17%	
Water Quality	15%	
Hygiene:		
Handwashing	35%	(30 – 89)
Several Behaviors	26%	(11 – 40)

Rural Sanitation: Technologies Used



Costs per Capita by Region



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Key Priority Areas

- **Focus on household water security-
sufficient water for each person of safe
quality-rural sector**
- **Focus on emergencies-35 % WES budget**
- **Focus on water, hygiene and sanitation at
schools**
- **Adopting a hygiene improvement
framework for improved health benefits**

Focus on Low Coverage Countries

- UNICEF has prioritised 30 countries for assistance based on low coverage rates and high under five mortality-17 are in Africa



School Sanitation: often a neglected issue!





Water and Sanitation at Schools

- ◆ Installation of child friendly water and sanitation facilities
- ◆ Life skills training on sanitation and hygiene
- ◆ Development of participatory teaching aids
- ◆ Evaluation and documentation of country level experiences and best practices
- ◆ Global access to information on school sanitation and hygiene education (newsletter, advocacy materials, CD-rom, WEB Site, etc.)



**Access to
Services**

**Hygiene
Promotion**

Hygiene Improvement



**Diarrheal Disease
Reduction**

Enabling Environments

Hygiene Awareness and Promotion

- Behavioural Change & Skills
- Family Mobilisation
- Social Marketing
- Community Participation in Problem Detection & Solutions (TripleA)

Hygiene Improvement Framework



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Access to WES Facilities

- Community/ Family
 - Water Systems
 - Sanitation Facilities
- Simple Household WES technologies

Hygiene Improvement Framework



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Enabling Environments

- Facilitating and Conducive Policies
- Community Capacity for Sustainability
- Affordable Financing and Cost Recovery
- Supportive Partnerships and Alliances
- Supportive Institutional Arrangements & Capacities

Hygiene Improvement Framework



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Partnerships and Alliances

- WASH-WSSCC
- Healthy Environments for Children-
WHO-UNEP-UNICEF
- WAWI-West Africa Water Initiative



Partnerships in Sanitation

- Focus on increasing sanitation coverage to meet MDGs
- Advocating for hygiene improvement framework-combined approach
- Water and Sanitation and Hygiene for Primary Schools



Evolution of Interventions: *from Pumps to Prevention*

-
- Hardware focus - engineering approach
 - Sustainability focus - institutions, policies, cost recovery, community participation, private-sector involvement
 - Health impact focus - Address improving hygiene behaviors as the key to health improvement

Influencing policy

- the importance of structuring programmes of support to specifically use both UNICEF's influence and pilot examples from the field
- need to systematise the process of using successful/innovative experiences from sub-national/area-based programmes to advocate for change and influence policy

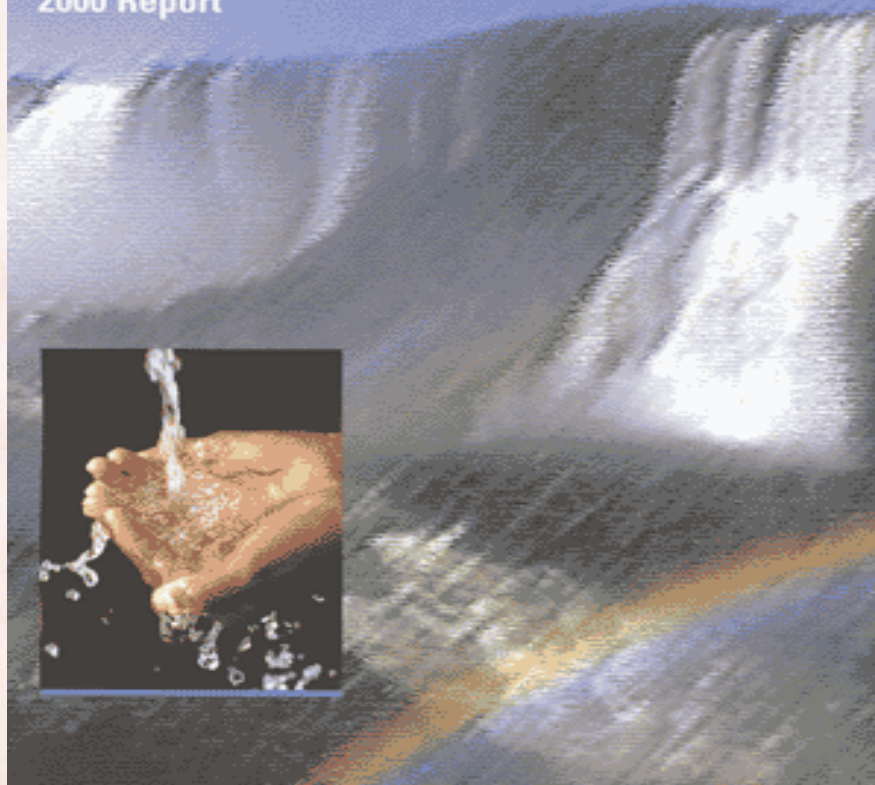
WHO-UNICEF JMP



- since 1990
- building national capacities
- monitoring sector status
- informing policy makers



**Global Water Supply and
Sanitation Assessment
2000 Report**



<http://www.unicef.org/programme/wes/pubs/global/global.htm>



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Improved Sanitation

- Connection to public sewer or septic tank
- Pour-flush latrine
- Simple pit latrine
- Ventilated improved pit latrine

- But not: Service or bucket latrine (manual removal), public or shared latrines, open pit latrines

Methodology Shift

Provider/utility data
(eg. MOH, Water Depts)



Consumer/household surveys
(eg. MICS, DHS, census)

Survey Limitations

- no info on quantities or adequacy
- water quality not verified
- reliability, time or distance not measured
- sanitation facility often not visited
- no info on use of facilities



Millennium Development Goals

Goal 7: Ensure environmental sustainability

- *Target 10*: Halve, by 2015, the proportion of people without sustainable access to safe drinking water

(measuring from 1990)

- *Target 11*: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers



World Summit on Sustainable Development

- Halve, by 2015, the proportion of people who do not have access to basic sanitation

Future Directions

- consistent, comparable indicators
- effective use
- school sanitation
- hygiene behaviours
- broader partnerships