

Water, Sanitation, and Hygiene Sector Update

OCTOBER 2013

SECTOR OVERVIEW

Water, sanitation, and hygiene (WASH) programs often represent vital components of USAID Office of U.S. Foreign Disaster Assistance (USAID/OFDA) responses to rapid-onset disasters and complex emergencies, as disaster-affected populations are more susceptible to illness and death from waterborne and communicable diseases. WASH interventions in emergencies often include promotion of good hygienic practices, construction or repair of latrines, removal of solid waste, and provision of safe, treated water. In Fiscal Year (FY) 2013, USAID/OFDA provided nearly \$124.6 million for WASH programs in 28 countries. USAID/OFDA also links emergency WASH activities with transition and development programs funded by other USAID offices and incorporates institutional partners—such as local governments—in program planning and implementation to promote the sustainability of water and hygiene-focused projects.

IMPROVING SANITATION FOR DISPLACED FAMILIES IN BURMA



Children in Rakhine State, Burma, learn about hand-washing and other hygiene practices. (Photo by Brian Heidell/USAID)

Inadequate sanitation perpetuates the cycle of disease and health problems that affect the world's poorest people—a pattern exacerbated during humanitarian emergencies. Throughout 2013, hundreds of thousands of individuals have remained displaced in Burma's Rakhine State following violence between June and October 2012. Spread across 70 camps and more than 110 isolated host communities, many internally displaced persons (IDPs) in Rakhine State lacked adequate access to safe drinking water and sanitation services, contributing to an increase in diarrheal diseases and skin infections. Makeshift camps formed wherever land was available, sometimes in paddy fields and other low-lying areas prone to flooding. Conditions worsened during the rainy season, with floods causing stagnant pools of water to form, impeding waste removal, and elevating water levels that spread feces and other contaminants throughout the camps.

In FY 2013, USAID/OFDA supported three humanitarian organizations to provide WASH assistance to IDPs in Rakhine State. In partnership with Solidarités, USAID/OFDA improved drainage networks in Rakhine's largest host community to ease the removal of rain and waste water. The rehabilitation of existing latrines and construction of new latrines in towns accommodating displaced families helped reduce the spread of diarrheal disease and communicable diseases. Combined with hygiene promotion activities, these USAID/OFDA activities reached nearly 70,000 IDPs and host families in four townships hosting IDPs. Despite the remoteness of many displacement sites and ongoing security concerns in surrounding areas, USAID/OFDA and its partners were able to overcome logistical challenges to deliver humanitarian services to vulnerable families in Rakhine State.

REACHING ZIMBABWE'S LOW-INCOME URBAN COMMUNITIES

More than two decades of neglect led Zimbabwe's once-sophisticated water and sanitation infrastructure into a state of disrepair, creating unsanitary living conditions for many low-income urban neighborhoods. Frequent municipal water shortages resulted in the shutdown of sanitation facilities, leading many to develop poor hygiene practices, such as open defecation, which contaminates available water used for drinking, bathing, and cooking. Given increased pollution and the high prevalence of diarrheal diseases in Zimbabwe's cities, USAID/OFDA provided more than \$1.7 million to a non-governmental organization (NGO) Joint Initiative (JI) consortium—comprising Mercy Corps, Africare, CARE, Catholic Relief Services (CRS), and Oxfam/Great Britain—to reach more than 12,000 households, or more than 55,000 people, in six urban centers with improved sanitation services and hygiene messaging in FY 2013. Since 2006, USAID/OFDA has supported integrated assistance to at-risk populations living in these communities through the JI consortium.



Women take part in a community clean-up campaign in Bulawayo, Zimbabwe. (Courtesy of CRS)

With USAID/OFDA support, JI teams rehabilitated public toilets, installed waste receptacles, and distributed more than 13,500 vouchers enabling low-income families to purchase water purification products. To help establish reliable water supplies in affected areas, participating NGOs installed 29 rainwater harvesting tanks at schools, clinics, and households in populous areas where the delivery of communal water is often disrupted. Beyond physical construction, USAID/OFDA partners sought to engage the public in fostering appropriate sanitary habits through community clean-up campaigns, recycling lessons for youth, and hygiene-promotion trainings. Through word-of-mouth and observed positive practices, individuals volunteered to join approximately 120 newly formed community- and school-based health clubs to learn more about common health and hygiene issues and spread information on ways to improve sanitation in their cities.

RESPONDING EFFECTIVELY TO SANITATION IN EMERGENCIES

Approximately 2.6 billion people worldwide lack access to improved sanitation facilities, such as flush toilets and hand-washing stations. When responding to sanitation needs in emergencies, building latrines and establishing waste removal systems can be challenging, particularly in areas with high water tables, hard rock sites, and dense populations.

Since 2009, an increasing number of emergencies in urban areas have faced amplified excreta disposal challenges. Following the 2009 floods in greater Manila, Philippines, and the 2010 earthquake in Port-au-Prince, Haiti, the humanitarian community faced many obstacles, including space constraints and heavy population concentrations, while constructing sanitation facilities and developing systems to ensure regular safe sludge disposal and treatment in dense and crowded cities.

USAID/OFDA understands the urgent need to boost dialogue and cooperation among various stakeholders involved to strengthen sanitation assistance to ensure an effective response when emergencies arise in these settings. In FY 2013, USAID/OFDA continued working with the International Federation of the Red Cross and Red Crescent Societies to develop and design immediate response excreta disposal facilities that can better serve disaster-affected residential areas, communal buildings, schools, and markets. The Emergency Sanitation Project has launched a prototype facility design contests for suppliers and students. The winners' designs will be field tested to gain the perspective of host communities, host government institutions, and other WASH actors, and work with the private sector to construct the disposal facilities that provide a safer and more reliable means of disposing waste and improving sanitation in the most challenging emergency settings.

USAID/OFDA continues providing effective water and sanitation activities in emergencies around the world, as well as working with other humanitarian actors to find innovative solutions to water, sanitation, and hygiene challenges.

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