

Sanitation

Kate Medicott, WHO HQ

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Protocol on Water and Health

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Rationale for sanitation

What is the problem and emerging trends in the pan-European region?

Sanitation related disease

- * Diarrhea (600k global deaths attributable to sanitation and hygiene)
- * Neglected Tropical Disease (Mass Drug Administration for Soil-transmitted helminths in Armenia, Azerbaijan, Georgia, Kyrgyzstan, Tajikistan, Uzbekistan)
- * Unsafe reuse and recreational use are major exposure routes
- * Poor sanitation and hygiene is a driver for anti-microbial resistance

Status of sanitation access in the European Region

- * Open defecation is largely eliminated <1%
(1.7m people mostly in Azerbaijan, Croatia, Georgia, Russian Federation and the FYR Macedonia)
- * Small but significant unimproved 3%
(30 million mostly rural in predominantly rural in Armenia, Azerbaijan, Bosnia and Herzegovina, Georgia, Latvia, Lithuania, Republic of Moldova, Romania, Russian Federation)
- * Next challenge is to move to higher levels of service

Investing in sanitation

- * Creating healthy environments and resilient communities
- * Greater health impact from higher levels of service (64% higher)
(Sewerage and faecal sludge management and drainage)
- * Sanitation has a high health return on investment (USD 4.50 : 1)

What is already happening?

A new global ambition in the SDGs (Targets 6.2 and 6.3)

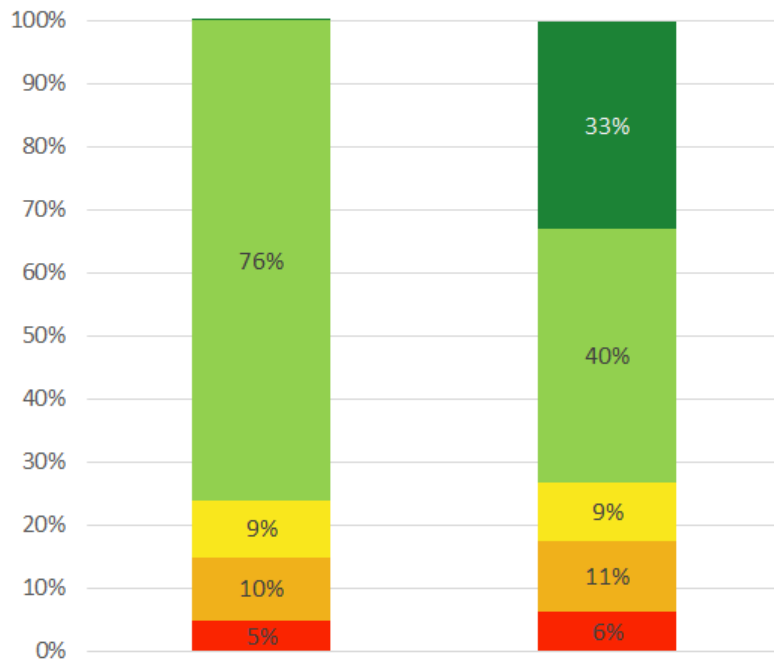
- * “Sanitation for all” – leaving no one behind
- * Higher service levels – indicators for “safely managed sanitation” and “safely treated wastewater”
- * Safe reuse of wastewater (6.3) and water scarcity (6.4)

Stubborn challenges

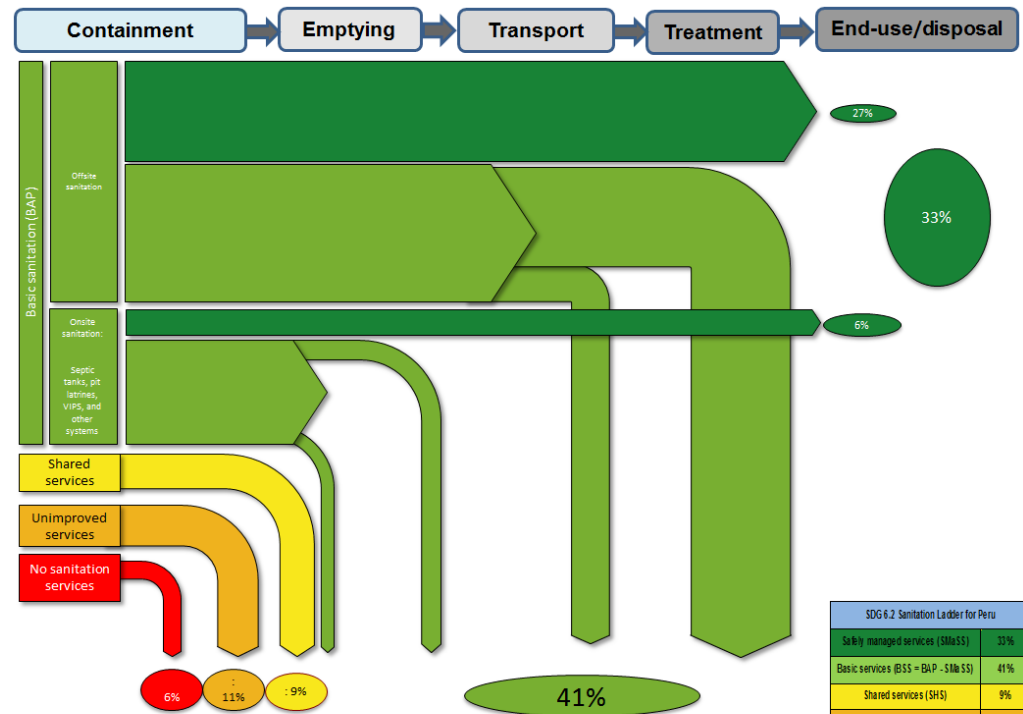
- * Fragmented responsibilities along the sanitation chain
- * Missing or unhelpful policies and standards (especially for reuse)
- * Poor dysfunctional wastewater treatment plants and high O&M
- * Low investment
- * Competition between wastewater and sanitation actors

Safely managed sanitation / wastewater

Comparing MDG & SDG 6.2 Framework



- Safely managed services (SMaSS)
- Basic services (BSS = MDGs improved)
- Shared services (SHS)
- Unimproved services (USS)
- No sanitation services (NSS)



SDG 6.2 Sanitation Ladder for Peru	
Safely managed services (SMaSS)	33%
Basic services (BSS = BAP + SHS)	41%
Shared services (SHS)	9%
Unimproved services (USS)	11%
No sanitation services (NSS)	6%

Possible Protocol's contribution

Policy environment and standards

- * Advocate for policy attention
- * Support to national target setting (for SDGs 6.2 and 6.3) and action planning
- * Co-ordination mechanism for policy dialogue between sectors and actors involved on the sanitation chain
- * Inequalities – focus on hard to reach populations
- * Policy and standards to support safe reuse
- * Evidence review

Implementation and capacity building

- * Support uptake of “Sanitation Safety Planning”
- * Support integrated water and sanitation safety planning in local contexts
- * Strengthening WASH as a response to neglected tropical diseases (NTDs)
- * Implementation of WASH aspects of Global Action Plan on AMR
- * Sanitation and hygiene in health facilities

Documents available at www.who.int



Burden of Disease



Global Monitoring



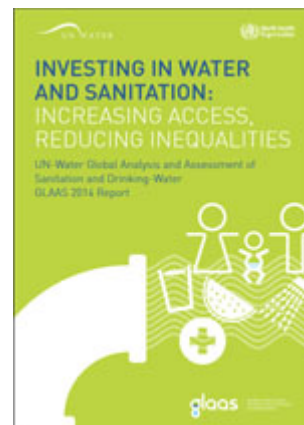
Sanitation Safety Planning



Wastewater Reuse - Policy



Anti-microbial Resistance



Neglected Tropical Diseases