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More than seven out of ten people without improved sanitation live in rural areas.

Rural Poor Struggling up the Sanitation Ladder

If you are rich and living in a city in sub-Saharan Africa you are five times more likely to have access to safe sanitation than a poor person living in a rural area. This is one of the findings of the latest report of the World Health Organisation/UNICEF's Joint Monitoring Programme for Water & Sanitation.

The report, which has a special focus on sanitation, details global progress towards the UN Millennium Development Goals. It also introduces a new way of assessing global, regional and country progress using the 'ladder' concept for both sanitation and drinking water. The ladder concept shows sanitation practices in greater detail, enabling experts to highlight trends in using improved, shared and unimproved facilities and the trend in open defecation.

The report indicates that many countries are making rapid progress in improving households' access to safe sanitation despite formidable odds. Yet, only 62% of the world's population has access to improved sanitation – that is, uses a facility that ensures hygienic separation of human excreta from human contact (2006 figures). A further 8% shares an improved facility with one or more households, and another 12% uses an unimproved facility, such as an unimproved pit toilet or a bucket toilet. The remaining 18% of the world's population practices indiscriminate or open defecation.

"At current trends, the world will fall short of the MDGs sanitation target by more than 700 million people," said Ann Veneman, UNICEF Executive Director. "Without dramatic improvements, much will be lost." To meet the target, at least 173 million people on average per year will need to begin using improved sanitation facilities.

Most countries that are not on track to meet the MDG sanitation target are in sub-Saharan Africa and in Southern Asia. More than half a billion people in Africa lack improved sanitation facilities.

RICH VS POOR

The report reveals huge disparities between urban and rural sanitation coverage. The world's urban sanitation coverage has risen to 79%, while rural coverage has reached only 45%. The largest disparity between urban and rural sanitation coverage is found in Oceania, Latin America, the Caribbean and Southern Asia. In 2006, more than seven out of

ten people without improved sanitation were rural inhabitants.

That said, rapid population growth in urban areas pose a growing challenge. The number of urban dwellers using improved sanitation has risen by 779 million since 1990, but has not kept pace with urban population growth of 956 million.

The JMP report also notes that the use of improved sanitation facilities is substantially lower among the poor than the rich. An analysis across 38 developing countries shows that the poorest 20% of the population has only a third of the access to improved sanitation as the richest quintile. In sub-Saharan Africa, inequality is higher still: the richest 20% of the population is five times more likely to use an improved sanitation facility than the poorest 20%.

THE FIRST RUNG OF THE LADDER

Open defecation is the last recourse for those without any form of sanitation

Table 1: Regional and global progress towards the MDG sanitation target

Region	Sanitation coverage (%)		Coverage needed to be on track in 2006	MDG target coverage (%)	Progress
	1990	2006			
Western Asia	79	84	86	90	On track
Latin America & Caribbean	68	79	78	84	On track
Northern Africa	62	76	74	81	On track
South-eastern Asia	50	67	64	75	On track
Eastern Asia	48	65	65	74	On track
Developed regions	99	99	99	100	On track
Commonwealth of Independent States	90	89	93	95	Not on track
Oceania	52	52	69	76	Not on track
Southern Asia	21	33	46	61	Not on track
Sub-Saharan Africa	26	31	50	63	Not on track
Developing regions	41	53	60	71	Not on track
World	54	62	69	77	Not on track

Source: WHO/UNICEF Joint Monitoring Programme for Water Supply & Sanitation

– those at the bottom of the sanitation ladder who must endure the daily indignity of defecating in open, often publicly accessible, spaces. Open defecation is of fundamental importance to development because of the health hazard it poses to anyone living nearby. If some members of a community continue to defecate in the open, then the whole community is at greater risk of diarrhoeal diseases, worm infestations and hepatitis than people living in communities where open defecation is not practiced.

Statistics show that the proportion of people practicing open defecation has decreased in developing regions, dropping from 31% in 1990 to 23% in 2006. Around the world, 1.2 billion people still have no access to any form of sanitation facility – only 13% of them are in urban areas. In sub-Saharan Africa, 221 million

people are still defecating in the open, the second largest total for any region, 39% of them are in rural areas compared to 8% in urban areas.

The WHO and UNICEF both point out that poor sanitation threatens children's survival as a faecally-contaminated environment is linked directly to diarrhoeal disease, one of the biggest killers of children under the age of five. "We have today a full menu of low-cost technical options for the provision of sanitation in most settings," noted Dr Margaret Chan, WHO's Director-General. "More and more governments are determined to improve health by bringing water and sanitation to their poorest populations. If we want to break the stranglehold of poverty, and reap the benefits of health, we must address water and sanitation."

To access the report, visit www.wssinfo.org

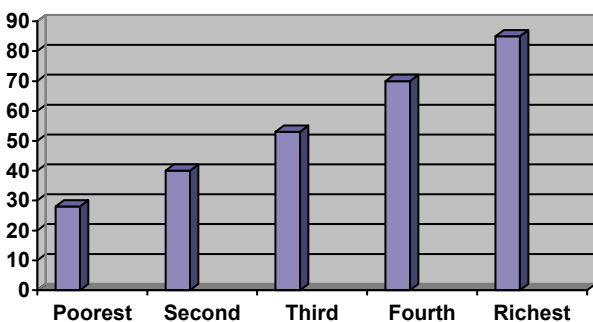
Table 2: Countries with the largest proportion of population that gained access to improved sanitation, 1990-2006

Countries making the most rapid progress	
Country	Proportion of the population that gained access to improved sanitation since 1990 (%)
Myanmar	68
Syrian Arab Republic	48
Vietnam	47
Guatemala	44
Philippines	43
Angola	42
Honduras	40
Pakistan	40
Mexico	39

Source: WHO/UNICEF Joint Monitoring Programme for Water Supply & Sanitation



In sub-Saharan Africa the richest 20% of the population is five times more likely to use an improved sanitation facility than the poorest 20%.



Improved sanitation coverage by wealth quintiles in 38 developing countries