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Pipe Dreams

Why governments' failure to tackle the global water crisis is threatening goals to halve poverty

A report from Tearfund

Every day 6,000 children die from water-related diseases. The statistics show that governments are not ready or willing to stump up the extra \$15 billion needed every year to begin to tackle this tragedy, even though the world spends more than six times this amount on bottled water, which is little more than a fashion accessory. How can we go on living with such inequity?

Joanne Green, Tearfund Water Policy Advisor

Tearfund is one of the UK's leading relief and development agencies, working in partnership with Christian agencies and churches around the world to tackle the causes and effects of poverty. Tearfund works with partners in more than 60 countries in Africa, Asia, Latin America, Central America, the UK and Ireland.

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Executive summary

From the sprawling slums of Bangalore to the remote settlements of rural Sudan, millions of people on our planet are engaged in a silent fight for life and dignity. 1.1 billion people have no access to safe water and 2.6 billion people are without basic sanitation.

The UN underlined the urgency of the situation in the Millennium Development Goal (MDG) to 'halve by 2015 the proportion of people without access to safe drinking water and basic sanitation'. But this goal is in danger of becoming no more than a pipe dream. Governments are simply failing to tackle a crisis in which a child dies from dehydration caused by diarrhoea every 14 seconds. Half the world's hospital beds are taken up with people suffering water-borne diseases.

Over the past decade, aid for water and sanitation from EU member governments has been falling – despite the fact that 6,000 children die every day from diseases associated with lack of access to safe drinking water, and poor sanitation and hygiene. That's the equivalent of 20 jumbo jets crashing every day.

The failure of the international community to engage with this global crisis is shocking:

- Since the MDG was agreed, EU aid to water and sanitation has declined overall and a smaller percentage of it now goes to sub-Saharan Africa. In 1997, EU Member States gave an average of US\$126 million to address the global water crisis. Today, they give on average US\$94.
- The EU Water Initiative launched in 2002 to coordinate and improve the EU response to the crisis has not changed any policy or practice to help one single person have access to water and sanitation. Instead it has resulted only in an endless round of meetings.
- The amount of extra money needed to meet the water and sanitation MDG \$15bn is a small proportion of the \$100 billion that consumers spend each year on bottled water – mainly as a fashion accessory.
- The UK and other rich country governments have failed to prioritise aid for water and sanitation in the way they have for health and education — even though 443 million school days are lost each year due to diarrhoeal diseases. Between 2000 and 2004, the UK government gave an average of US\$327 million a year to health, compared to US\$86 million to water and sanitation.
- More aid for water and sanitation in poor countries is given as loans than as grants pushing heavily indebted countries deeper into debt.

The Millennium Development Goal to tackle the global water and sanitation crisis means nothing if it is not translated into action. It means nothing to the women of Africa and Asia who have to trek an average six kilometres to collect water weighing 20 kilos – the equivalent of our airport luggage allowance. Or the families of the 2.2 million people who die every year from diseases caused by lack of safe water and basic sanitation.

In 2002, governments at the World Summit on Sustainable Development recommitted to have plans for managing water resources in place by 2005. This date has now passed and only 12 per cent of countries have met this target. The global water and sanitation crisis will only get worse, if governments continue to ignore the need to properly manage water resources. Irrigation for agriculture continues to drain aquifers and river basins to dangerously low levels in a frantic bid to feed water-intensive western diets. Add climate change and global warming into the equation, and even developed countries start to feel the heat.

Last year, rich country governments took the welcome step of committing themselves to increase aid by another \$48 billion by 2010. It is now essential that the UK, EU and other developed country governments ensure that water and sanitation gets its fair share of this extra money.

This means:

- committing to doubling aid to water and sanitation by 2010
- focusing 70 per cent of this aid on the poorest countries
- giving particular emphasis to sanitation and hygiene promotion
- giving all aid for water and sanitation in the poorest countries as grants not loans
- scale up appropriate solutions and community-led approaches rather than largescale, high cost infrastructure
- making water and sanitation an equal priority with health and education
- recognising that wise water management based on the integration of human and ecosystem needs is the only way to achieve poverty reduction, and finance for water resource management plans in all countries must be urgently provided
- a radical overhaul of the EU Water Initiative, setting measurable targets for improved donor action and coordination.

Aid to water and sanitation for sub-Saharan Africa has plummeted, yet four out of ten people in that region do not have access to safe water. From 1990-1994, an average of 56 percent of EU aid to water and sanitation an average of 56 per cent went to sub-Saharan Africa. This dwindled to 29 percent during 1998-2003.

Bottling it

The world spends \$100 billion a year on bottled water – more than six times the estimated extra funds needed to reach the water and sanitation MDG. In many developed countries, bottled water is no better for us than tap water, according to environmental think-tank the Earth Policy Institute. And producing bottled water has a huge ecological impact: intense water extraction from particular sites, plastic waste and the many thousands of tonnes of greenhouse gas emissions produced by flying 22 million tonnes of bottled water around the globe each year.

In many poor countries, the only hope of safe water is the bottled variety. PPSSP, a Tearfund partner in the Democratic Republic of Congo, reports that a 500ml bottle of water there costs 50 US cents – in a country where 80 per cent of the population live on less than 20 US cents a day.

Sources: Earth Policy Institute, PPSSP, World Wildlife Fund.

Recommendations

Recommendations for the EU and other donors

Last year, rich country governments took the welcome step of committing themselves to increase aid by another \$48 billion by 2010. It is now essential that the UK, EU and other developed country governments ensure that water and sanitation gets its fair share of this extra money.

• Donor governments should immediately commit to doubling their ODA (official development assistance) to water and sanitation by 2010.

• EU member states should radically overhaul the EU Water Initiative, setting measurable targets for improved donor action and coordination.

• Donor governments should make sure that 70 per cent of aid to water and sanitation is directed to least-developed and low-income countries.

• UK and other donor governments should make water and sanitation an equal priority with health and education.

 Donor governments should give all aid for water and sanitation in the poorest countries as grants not loans.

Donor governments should give particular emphasis to sanitation and hygiene promotion.

• Donor governments should focus on scaling up appropriate solutions and community-led approaches rather than large-scale, high cost infrastructure.

 Donor governments should recognise that wise water management based on the integration of human and ecosystem needs is the only way to achieve poverty reduction, and finance for water resource management plans in all countries must be urgently provided.

'International agencies should devote more funds to support water provision services in both urban and rural areas.' Mwakamubaya Nasekwa, Coordinator, PPSSP (Tearfund partner in the Democratic Republic of Congo).

Recommendations for UK government

• The UK government should work within the EU's Council of Ministers to call the EU Water Initiative to account and demand that it produces progress reports every six months.

• The UK government should recognise that access to water and sanitation is an essential basic service and should promote it among partner governments as being equally important as health and education. The UK government should also publish a commitment-to-action position and action plan paper on water and sanitation, to sit alongside similar health and education papers.

Running on empty: the water and sanitation crisis

Water is the world's most precious commodity. We have created a vast infrastructure of pipelines, dams, canals and irrigation systems to harness the one natural resource which sustains all life forms.

Yet, warning bells are starting to ring in every continent in the globe: renewable freshwater supplies are running low. Aquifers have been drained, fisheries depleted, and an entire sea has disappeared.¹ And all the while, our water consumption continues to rise. During the 20th century, global freshwater consumption rose sixfold, more than twice the rate of population growth.² This soaring demand on depleted resources is not evenly spread worldwide: it is high-and middle-income countries which are guzzling more and more water, to feed rising living standards and meat-rich diets.³

Meanwhile, developing countries – whose economies depend largely on food production and therefore on irrigation – are experiencing increasing water stress and water scarcity. ⁴ The crisis is most acute in south and west Asia and Africa, but it is spreading fast:

- 14 African countries are already living with water stress or scarcity.
- Lack of water is hindering industrial and socio-economic growth in many other areas, including China, India and Indonesia.⁵
- Lack of sufficient water is a daily reality for more than 40 per cent of the global population.⁶
- Two out of every three people on earth (63 per cent) will live with water stress by 2025.7

Climate change is also taking its toll on a dry and thirsty world. The estimate of two in three people living with water shortages in 2025 is based on only a moderate projection of climate change.⁸ Unless greenhouse gas emissions are checked, this figure could be even higher.⁹ Yet again, it is poor subsistence communities who will be worst affected and who are least able to adapt to changing rainfall patterns and increasing drought.

Protecting ecosystems is fundamental to water security and human livelihoods. Past experiences of deforestation, over abstraction and wetland drainage have led to environmental collapse and failure of supply for human needs (e.g. Azraq basin in Jordan). In order to make sensible integrated water management decisions, it is vitally important that the functions provided by ecosystems, as well as the cost of their destruction, are valued.

In 2002, governments at the World Summit on Sustainable Development recommitted to have plans for managing water resources in place by 2005. This date has now passed and only 12 per cent of countries have met this target.¹⁰

¹ Irrigation is seen as the primary cause of the drying of the Aral Sea in Central Asia.

² Global Environment Outlook, UNEP, 2000.

³ The UN World Water Development Report 2003 estimates that it takes 1,500 litres of water to produce 1kg of cereals and 15,000 litres for 1kg of bovine meat.

⁴ Water scarcity is defined by UNEP as occurring where consumption is more than 10 per cent of the renewable freshwater supply.

⁵ Role of Governments in Regulating Industrial Water Activities, Roger, P. Background Paper No 16, Commission on Sustainable Development, Sixth Session, 20 April-1 May, 1998.

⁶ World Resources Institute.

⁷ Comprehensive Assessment of the Freshwater Resources of the World, WMO, Geneva, Switzerland, 1997.

⁸ Up in smoke? A report of The Working Group on Climate Change and Development, 2004.

⁹ http://www.metoffice.com/research/hadleycentre/pubs/brochures/B1999/imp_water_res.html

¹⁰ World Water Development Report, 2006. UNESCO.

Missing the mark: the water and sanitation MDG

Abstract figures for the global water crisis obscure a human tragedy. More than a billion people lack access to water and 2.6 billion people lack access to sanitation.¹¹ It is all the more tragic for being preventable. While villages in Africa are often decimated by drought, the world marvels at the engineering which makes it possible to create a golf course in Dubai where once there was only desert.

World governments have recognised that something can and should be done. In 2000, all governments agreed to the UN Millennium Development Goal (MDG) to 'halve by 2015 the proportion of people without access to safe drinking water and basic sanitation'.

It was always an ambitious goal. To meet the water supply MDG target, an additional 260,000 people a day would have to gain access to improved water sources.¹² To reach the sanitation goal, an additional 370,000 people a day would need improved sanitation.¹³



Slow progress to date indicates that the goal may be just a pipe dream:

- In Africa, the picture is bleak: the water target will not be met until 2050 and it will be 2100 at the earliest before the sanitation target is met.¹⁴ Four in 10 people in sub-Saharan Africa still do not have access to clean water.¹⁵ 82 per cent of households in Africa's major cities are not connected to sewers.¹⁶
- Based on current trends, the world in terms of global averages is on track to meet the MDG for water – but it is way off track to meet the sanitation goal. Without a dramatic improvement in provision, nearly 2.4 billion people will still be without adequate sanitation in 2015 – almost as many as today.¹⁷

One of the key recommendations made by the UN Millennium Project Task Force on Water and Sanitation was that 'governments and donor agencies must simultaneously pursue investment and reforms'.

It is estimated that the MDG for water and sanitation will only be met in all regions if donors and developing countries double spending from US\$14 billion to US\$30 billion per year immediately, with priority given to Africa, South Asia and sanitation.

¹¹ UNICEF and WHO, 2000.

¹² The year of reference for the MDGs was 1990.

¹³ WHÓ, 2004.

¹⁴ *Human Development Report*, United Nations Development Program, 2003.

¹⁵ The Millennium Development Goals Report 2005, UN, 2005.

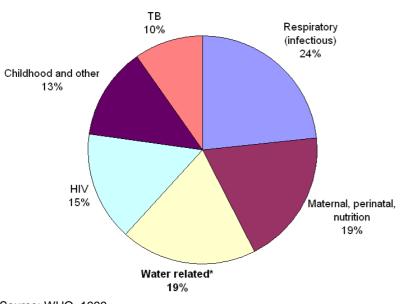
¹⁶ http://www.unesco.org/water/wwap/facts_figures/water_cities.shtml

¹⁷ The Millennium Development Goals Report, 2005.

The human waste: water, sanitation and health

Ironically, the cost of *not* providing safe water and adequate sanitation in developing countries is arguably higher than the cost of piping in water and building latrines. This cost is measured in the incidence of largely preventable disease – and deaths. An estimated 133 million African children will die if the water and sanitation target is not met in their continent – lives which otherwise could have been saved.¹⁸

More than half the hospital beds in the world are filled with people suffering from water-borne diseases.¹⁹ Water-related diseases kill more than five million people every year.²⁰ Half of all people in the developing world are suffering from one or more of the main diseases associated with poor water and sanitation: diarrhoea, ascaris, dracunculiasis (guinea worm), hookworm, schistosomiasis (bilharzias, or snail fever), and trachoma.



Deaths Due to Infectious Diseases (1999)

Source: WHO, 1999.

The statistics for diarrhoea are shocking:

- Every year there are four billion cases of diarrhoea worldwide and 2.2 million deaths, most of them children.²¹
- Diarrhoea is the third-biggest child killer in Africa, and accounts for 701,000 child deaths out of 4.4 million on the continent every year.²²
- In the past 10 years diarrhoea has killed more children than all the people lost to armed conflict since World War II.
- A baby born in sub-Saharan Africa is 500 times more likely to die from diarrhoeal disease than one born in the developed world.
- Improving people's access to water reduces cases of diarrhoea by 25 per cent. Hygiene education and promoting hand-washing reduces cases by 45 per cent.²³

¹⁸ Dying for the Toilet, WaterAid, 2004.

¹⁹ http://www.wsscc.org/dataweb.cfm?edit_id=292&CFID=833812&CFTOKEN=75709411

²⁰ GEO 3. UNEP, 2002.

²¹ http://rehydrate.org/about/index.html

²²Unicef, 2005.

²³ Water, sanitation, and hygiene interventions to reduce diarrhoea in less developed countries: a systematic review and meta-analysis, Fewtrell L et al, Lancet Infectious Diseases, 2005, 5(1):42-52.

PPSSP, one of Tearfund's partner organisations in Democratic Republic of Congo, carried out a study in three health districts in North-Kivu province in 2005. It shows that, in 2004, only 11 per cent of people had access to potable water in Mutwanga district, 23 per cent in Beni, and 22 per cent in Oicha. Only 139 of the 1,202 water springs identified in the three districts were protected. The study also revealed that areas with low water coverage were most affected by water-borne and water-related diseases.

Some six million people worldwide have lost their sight to trachoma – the primary cause of preventable blindness. Trachoma is closely linked to overcrowding and a lack of safe water for washing hands. Yet, improving people's access to safe water and better hygiene can cut the incidence of trachoma by more than 25 per cent.

A bitter pill: water, sanitation and women

The World Bank's Participatory Poverty Assessments reveal that access to water is a top priority for poor people – and for none more than women. Lack of water and sanitation is both a cause and effect of gender inequality, condemning women and girls to the backbreaking drudgery of collecting water.



The average distance that women in Africa and Asia cover to collect water is 6km and they carry about 20 kilos of water.²⁴ It is exhausting and often dangerous work that robs them of the chance to work and learn.²⁵

As it is, women in rural areas are responsible for half the world's food production, and produce between 60 and 80 per cent of food in most developing countries.²⁶ Their contribution to agriculture is growing as men migrate to urban areas for work. Yet, having to

collect water drastically reduces the time they can spend on income-generating activities such as agriculture.

Without proper sanitation at home, women and girls in rural areas or overcrowded city slums often wait until dark before they can go out and relieve themselves in the open, risking their dignity and safety.

Aregash Tirkaso, an elderly woman interviewed by Kale Heywet Church, a Tearfund partner in Ethiopia, draws water from an unprotected spring: 'Since the yield is meagre I cannot wash clothes and bath regularly. As the queue stays for long hours, I am unable to return back on time. Some people fight over [the water] and the strong ones manage to collect. Life has become bitter for me. I can buy basic items from the market place, but what can I do with the water problem?'

²⁴ http://www.wsscc.org/dataweb.cfm?edit_id=292&CFID=833812&CFTOKEN=75709411

²⁵ http://www.unicef.org/media/media_28260.html

²⁶ http://www.fao.org/documents/show_cdr.asp?url_file=/DOCREP/005/Y4308E/y4308e05.htm

Filthy lucre: water, sanitation and economics

If water-carrying duties limit women's input to a developing nation's GDP, ill health caused by poor water and sanitation can have a devastating effect on the national economy:

• Water-borne diseases cost India an estimated 73 million working days a year.

• A cholera outbreak in Peru in the early 1990s cost the economy US\$1 billion in lost tourism and agricultural exports in just 10 weeks.²⁷

The World Health Organisation (WHO) calculated recently that failure to invest in water and sanitation and so work towards the MDG target is costing developing countries \$84 billion per year.²⁸ Conversely, the time saved by having more convenient drinking water and sanitation services would amount to 20 billion working days a year, with a productivity payback of about US\$63 billion a year.²⁹

Clouded prospects: water, sanitation and education

Exaggerated as it may sound, the simple lack of a village water pump or proper toilet can deprive children of an education and rob them of their full potential to contribute to their country's social and economic development.

The WHO estimates that 443 million school days are lost annually worldwide due to diarrhoeal disease.³⁰ Ironically, many schools contribute to children's poor health by providing appalling sanitary conditions.³¹

There are also less obvious impacts than ill health. Many girls do not attend school because they are too busy helping their mothers with collecting water. Of the 120 million school-age children not in school, most are girls. Access to safe drinking water drastically reduces girls' drop-out rates. When water points were installed in four communities in India, girls' school attendance and women's literacy levels both rose.³²

Girls' need for privacy combined with a lack of adequate latrines (or any latrines at all) is given as a chief reason for girls dropping out of primary school.

In rural Pakistan, more than half of schoolgirls drop out in grade two to three because schools don't have latrines.

²⁷ http://www.wsscc.org/dataweb.cfm?edit_id=292&CFID=833812&CFTOKEN=75709411

 ²⁸ Evaluation of the costs and benefits of water and sanitation at the global level, WHO, 2004.
 ²⁹ Ibid.

³⁰ Ibid.

³¹ For Her It's The Big Issue, WASH evidence report, WSSCC, February 2006.

³² Ibid.

Closet revolutionaries: water and sanitation in the UK

Today the UK boasts a relatively well-run water and sewerage system. Yet, even 100 years ago, diarrhoea, cholera, tuberculosis and even so-called 'tropical diseases' killed Britons in vast numbers. Modern plumbing and sewerage systems have not only vastly improved the nation's medical record but also paved the way for rapid social and economic development.

In the 19th century, living conditions for Britain's inner-city working classes were dire. A surge of rural workers into bustling new manufacturing towns had led to sprawling slums and huge overcrowding: whole families squeezed into single rooms with no sanitation, similar to the situation today in many developing country cities following rapid urbanisation. There was a price to pay for this economic boom. In the 1830s alone cholera killed more than 31,000 people; further outbreaks occurred in the 1840s, 1850s and 1860s. The number of people living in poverty was rising – and their life expectancy was nose-diving.³³

The high incidence of death and disease prompted researchers to look for possible links between illness and unclean water. In 1854, Dr John Snow demonstrated that the source of a cholera outbreak in London's Soho that year could be traced to single contaminated well.

It was not, however, primarily a concern for the welfare of poor people that prompted investment in public health and sanitary reform. The main driver was purely economic:

- The cost of losing productive workers in a booming economy was far higher than the cost of installing plumbing and sewers.³⁴
- Improving the nation's health would also cut welfare spending.

There followed a flurry of legislation requiring homes to be connected to water and sewerage systems:

- 1848: Parliament passed the Public Health Act, creating a Central Board of Health to tackle drainage, water supply, ventilation, slaughter-houses and overcrowded graveyards.³⁵ Every new house in London had to have a water closet or privy. Cesspools were gradually replaced with sewers.
- 1875: a new Public Health Act compelled local authorities to provide adequate drainage, sewage and clean water for all.

Slowly a governance structure was erected. The benefits for the nation's health were not immediate. Even up to the outbreak of World War I, diarrhoeal disease accounted for a third of infant deaths nationally. But by 1900, most towns had efficient sewer and water systems, and death rates had fallen dramatically.

Today, Britain has 354,066km of sewers - enough to stretch to the moon and back. Our drinking water is the purest it has ever been. We are world leaders in plumbing and sewerage systems. We are enjoying the benefits that safe water and basic sanitation can bring – so why do we lack the enthusiasm for promoting them in countries which sorely need them?

³³ Delivery of water and sanitation services to the poor in nineteenth century Britain, Briefing note, Water, Engineering and Development Centre, Loughborough University, 2005.

³⁴ Ibid.

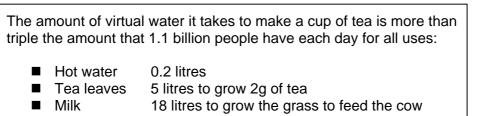
³⁵ Bogs, Baths and Basins: The Story of Domestic Sanitation, David J. Everleigh, 2002.

'The UK has faced and overcome disease and death linked to poor sanitation. We have reaped the social and economic benefits that access to safe water and improved sanitation bring. We are now ideally placed to take a lead helping the poorest countries in the world to do the same in a technologically appropriate way.'

Joanne Green, Water Policy Officer, Tearfund

Lapping up the benefits: water and sanitation in the UK

Since 1950, domestic water consumption in the UK has almost tripled to nearly 150 litres per person per day.³⁶ The UK figure for 'all uses' is 500 litres per person per day – and this is set to rise with increasing use of washing machines and dishwashers. The statistics spiral if we consider the amount of 'virtual water' used to produce the foodstuffs and services which support our lifestyle.



■ Sugar 9.2 litres to grow the cane

Source: Water for Food presentation, Tim Hess, Cranfield University.

It is sobering to compare these figures with those for people in developing countries:

- All developing countries: 60-150 litres per person per day for all uses.³⁷
- Developing countries in Asia, Africa and Latin America: 50-100 litres.
- Regions of water scarcity: 20-60 litres.³⁸
- One flush of our modern toilet uses as much water as the average person in the developing world uses daily for washing, cleaning, cooking and drinking.³⁹

³⁶ Friends of the Earth.

³⁷ UNESCO, 2000.

³⁸ Ibid.

³⁹ http://www.wsscc.org/dataweb.cfm?edit_id=292&CFID=833812&CFTOKEN=75709411

Bogged down: declining aid for water and sanitation

The importance of water and sanitation (watsan) in helping developing countries lift themselves out of poverty is beyond question. And yet today, six years on in the countdown to the Millennium Development Goals deadline, the world's response to the watsan crisis has been pitiful. As politicians become mired in fruitless discussions about how to tackle the situation, aid levels to the sector are actually falling.

The cost of *not* increasing aid to water and sanitation will continue to be counted in lost working days, poor productivity, environmental degradation and in lives lost through disease and poverty.

All talk and no action: the EU

EU member states: declining aid for watsan

The amount of aid which individual EU member states have given to watsan has fallen over the past decade. The picture has improved slightly since 2002, but today's average contribution of US\$94 million is well below the figure for 1997, which was US\$126 million. Last year, the UK and France have pledged to give more but the increase is relatively modest.

The EU budget for general overseas development aid is in fact growing. But EU donor governments tend to provide more of their aid as General Budget Support (GBS), channelling funds directly into finance ministries rather than into individual projects. Watsan's share of general aid is falling, from 5.4 per cent in 2000 to 4.2 per cent in 2003.

Even more alarming, the share of total watsan aid being targeted at sub-Saharan Africa has dropped, as the chart overleaf shows. From 1990 to 1994, an average of 56 per cent of European donors' watsan aid went to the region: this had dwindled to only 29 per cent over the period from 1998 to 2003.

Each EU member state and the European Commission have different application and reporting procedures for southern governments receiving aid. This is a huge and unnecessary burden on developing country governments who should be able to spend this time implementing water and sanitation programmes.

The EUWI: a wasted opportunity

The EUWI has failed to tackle any of these issues. It was to be the EU's 'main contribution' towards reaching the MDG target. But, one enthusiastic launch event and four years of meetings later, the EUWI has proved little more than a talking shop: it has failed to change any policy that would deliver improved water and sanitation to a single person in a developing country.

Some progress has been made in establishing 'country dialogues' between individual African governments and individual EU member states acting as 'lead donor' on behalf of the EU. The aim of these dialogues is to devise financial and political strategies for reaching the watsan MDGs. Yet, some of the 11 dialogues planned have not even started because of delays in EU states volunteering to act as lead donor.⁴⁰

The EU quickly realised that the EUWI was not making any progress on increasing finance for watsan. So the EU Water Facility (EUWF) was set up, with a budget of €500 million, but this has only served to distract attention from the underlying problems of EU aid.

⁴⁰ An empty glass, A WaterAid and Tearfund report, December 2005.

The reasons for these spectacular failures include:

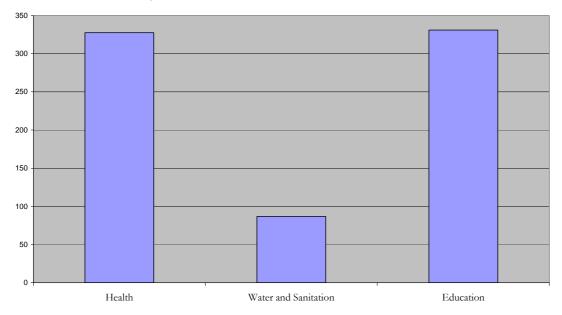
- Most EU states are not sufficiently committed to EUWI.
- There are no robust mechanisms in place to ensure EU states contribute to the EUWI or to monitor EUWI progress.
- The EUWI has been pursuing private finance which has not been forthcoming, instead of encouraging donor governments to increase watsan's share of aid.

British blind spot: the UK

The UK has fared little better. Its total ODA to watsan has charted a steady decline since 2000, when it stood at US\$151.4 million. By 2004, it had declined to US\$44.9 million.

The UK government also gives a higher priority to health and education than to water and sanitation. It has produced commitment-to-action papers on health and education, but failed to do the same for watsan – and its funding continues to reflect this bias. Between 2000 and 2004, it gave an average of US\$327 million a year to health, compared with US\$86.68 million to watsan.⁴¹

Given the high profile of Africa and poverty on the UK government's agenda over the last year, it is astounding that Gordon Brown and Tony Blair rarely mention the water and sanitation crisis. The UK government appears to be transposing UK policy imperatives – health and education – into the international policy arena, regardless of poor countries' priorities.



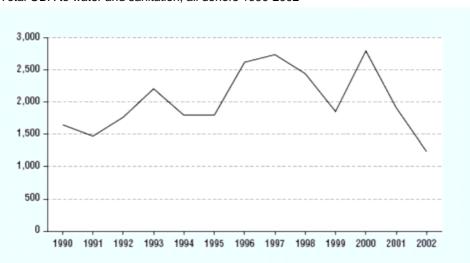
Average UK aid values (US\$ millions) for different sectors from 2000 - 2004

⁴¹ Based on data from the OECD CRS database, February 2006.

Global slump: falling aid for watsan worldwide

This trend of declining EU and UK aid for watsan is reflected at the global level too. Instead of digging deeper, international donors and national governments alike are in fact reining in their spending on watsan.

The sharp downturn in official development assistance (ODA) to watsan since 2000 is clearly shown in the graph below.



Total ODA to water and sanitation, all donors 1990-2002

The need for more spending on sanitation is particularly pressing. The WHO recently estimated that meeting the MDG for sanitation will absorb 84 per cent of the total additional funding needed to hit both water and sanitation targets. In Africa, more than twice as many people lack access to basic sanitation as lack access to safe water – but sanitation attracts only one-eighth of the funding that water gets.

Last among equals: inequitable aid priorities

Improvements in any nation's health and education record are inextricably linked to improved water and sanitation.

Tearfund believes that all donors should therefore give equal priority to watsan as they do to health and education. An analysis of the ODA given to each sector, however, shows that this is not the case.⁴²

Our findings show clearly that aid to health and education is much better targeted at helping poor people in developing countries than aid to watsan:

• **Donors give much more aid to education than to watsan in poor countries.** They give roughly equal amounts of ODA (in grants and loans) to watsan and health – but considerably more to education. In 2004, spending on education in all countries amounted to 9.66 per cent of overall aid, compared with 4.90 per cent on health and 4.95 per cent on watsan.⁴³

Source: Making Every Drop Count. Tearfund, 2004.

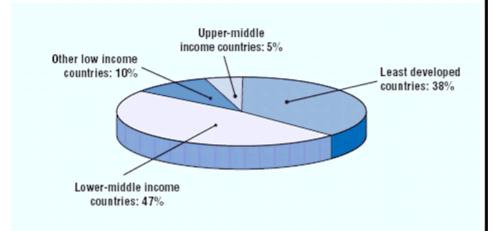
⁴² Based on an analysis of the OECD CRS database February, 2006.

⁴³ The term 'poor countries' as used in this sub-section is defined as Least Developed Countries and Other Low-Income Countries by the OECD from which these figures are taken.

• Donors are helping poor countries give their people access to drinking water – by pushing them deeper into debt. Donors give more loans than grants to watsan in poor countries. Between 2000 and 2004, the average annual total of grants to watsan in poor countries was US\$0.76 billion, compared with loans of US\$1.12 billion.

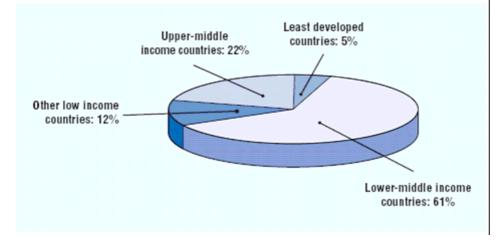
• Donors give more than twice as many grants to health as to watsan in poor countries. For 2000-2004, the average total of grants each year to health in poor countries was US\$1.54 billion, compared with US\$0.76 billion to watsan.

• Donors give more than twice as many loans to watsan as to health in poor countries. Between 2000 and 2004, the average total of loans to watsan in poor countries was US\$1.12 billion, compared with US\$0.58 billion to health.



Income breakdown of grants to water and sanitation, all donors 1990-1992

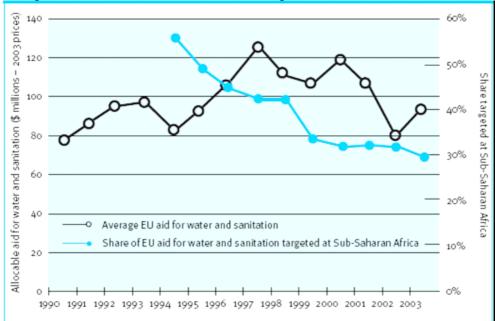
Income breakdown of loans to water and sanitation, all donors 1990-1992

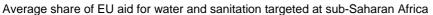


Source: Making Every Drop Count. Tearfund, 2004.

Bull's eye: better targeting of aid

Aid also needs to be better targeted, with a focal shift towards poor countries. Nearly 90 per cent of all people without access to safe water live in just 30 countries, yet less than 40 per cent of ODA for watsan goes to these nations at present.⁴⁴ The vast majority of countries which receive most ODA for water and sanitation are middle-income countries. They receive on average US\$446 of aid per un-served person, while the countries in most need receive only US\$162.⁴⁵





Source: An Empty Glass. Tearfund and WaterAid, 2005.

Size matters: small projects versus large

Donors have consistently given greater priority to large-scale water systems that favour top down, high-tech engineering approaches rather than supporting the scaling up of community-based programmes. Pipeline infrastructure is perhaps seen as a more 'bankable option' than a small-scale project such as latrine-emptying services. Yet, small-scale systems are more likely to deliver services bringing long-term benefit to poor communities, who often live away from piped networks. An analysis using 1999–2000 data shows that 75 of a total 1,400 aid commitments to water projects were worth more than US\$10 million. This means that five per cent of projects absorbed 60 per cent of the total funds.⁴⁶

Water supply and sanitation is not always effectively provided through large engineered projects. Small-scale local solutions such as rainwater harvesting and compost toilets are often appropriate in rural areas. Successful community management approaches, though enshrined in many national water policies, need better support for scaling up from both developed and developing countries. This bias towards big projects is in fact becoming more pronounced: investment in large-scale infrastructure is increasingly in vogue.

⁴⁴ A scorecard assessment of developing country and donor progress. INGO Water Consortium, 2004.

⁴⁵ *Making every drop count*, Foxwood and Green, Tearfund, 2004.

⁴⁶ Ibid

Bottom of the heap: why aid for watsan is falling

Investment in water and sanitation can have a huge impact on reducing poverty and sustaining development. Yet water and sanitation remains at the bottom of the heap in spending priorities for international donors and national governments alike. If developing countries are to have any hope of reaching the MDG for watsan in all developing regions, funding must come thick and fast from a wide range of sources.

For now, developing country governments still cover most of the cost of new investment in water and sanitation, but amounts are pitifully low. For example, in Ethiopia, investment in water and sanitation from national budgets and international aid each year is currently US\$ 65 million less than US\$1 per person.47

The reasons why finance for water and sanitation has not been forthcoming are many and complex:

1. There is no political will to take action on the water and sanitation crisis.

Water and sanitation is a matter of life and death to poor people, and particularly women - but is not a concern of rich people.

Policy-makers in the developed and developing world simply do not understand the dramatic effect that unsafe water and a lack of adequate sanitation have on poor people in terms of their health, economic development, education and daily schedule.

National governments and international aid have focused on tackling the symptoms of poor health, rather than its causes.

So the problem of diarrhoea is tackled with oral rehydration salts – a rapid and low-cost solution. While medical interventions may solve the presenting problem, they do not tackle wider economic repercussions such as lost working days, and they do nothing to prevent diarrhoea reoccurring.48

Western aid and rhetoric seems to focus too much on curative responses to such preventable diseases. Aid from rich countries needs a more preventative approach.

The difficulty of coordinating water issues in developing countries means there is not a sector-wide approach to water and sanitation.

Water and sanitation is a cross-cutting issue and responsibility for it is often shared across many different government departments, eq: environment, local government, education, health and water. In the Democratic Republic of Congo, responsibility for sanitation alone is shared between four departments.

Consequently, most developing countries do not have a sector-wide plan on water and sanitation and there is little co-ordination between ministries.

⁴⁷ Making Every Drop Count: financing water, sanitation and hygiene in Ethiopia. Tearfund and WSSCC, 2005. ⁴⁸ Ibid.

Responsibility for water and sanitation has, in most cases, been decentralised to local government.

While decentralisation is, in theory, a good move, local government does not have the capacity to deliver water and sanitation on the necessary scale or with the required efficiency.

In addition, a central government which has decentralised responsibility for water and sanitation does not always decentralise the financial resources to go with it.⁴⁹

Water and sanitation are often considered to be an issue of infrastructure, rather than a social and health concern.

Because governments class watsan as infrastructure and pigeonhole it separately from sectors such as health and education, they tend to expect the private sector to deliver watsan services.

In Ethiopia's budget for 2001-2002, education received 4.5 per cent of GDP, while water supply received just 0.9 per cent.

Water and sanitation are not prioritised in Poverty Reduction Strategy Papers (PRSPs).

The water and sanitation crisis has not been reflected in the way PRSPs are drawn up or implemented. This is largely because the poorest communities for whom watsan is a matter of life and death – and particularly women – are least likely to be consulted on what PRSPs should prioritise.

Once again, education and health have a higher profile in PRSPs and so receive more funding. Lack of coordination between different lobby groups within the water sector (eg: rural versus urban lobbies) has deprived watsan of political clout.⁵⁰

Poverty reduction is not a specific focus of aid to water and sanitation, whereas it is for aid to other social sectors.

An analysis of aid to different sectors has led the OECD to conclude that water projects are 'less targeted on poverty and gender concerns than are projects in other sectors'. Spending on watsan in rural areas is one-third of spending in cities, even though the rural population is six times larger and the proportion of people in need much greater.⁵¹

The bias in ODA towards large-scale projects rather than small ones has already been noted. Small-scale local operators and community-based projects are much more likely to reach the poorest people, particularly with sanitation (through, for example, latrine-emptying services). Yet, they do not receive recognition or funding from central government either.

Only 22 per cent of the population of Sierra Leone have access to safe water: the two biggest bilateral donors to the country do not fund this sector at all.

Making every drop count, Tearfund and WSSCC, 2005.

⁴⁹ *Making Every Drop Count.* Summary document. Tearfund and WSSCC, 2005.

⁵⁰ Implementation of Water Supply & Sanitation Programme under PRSPs, WaterAid and ODI, 2004.

⁵¹ *Making every drop count,* Tearfund, 2004.

2. Hopes that the private sector would plug the financing gap have proved misplaced.

International donors have been keen to encourage private sector involvement in watsan delivery, but the private sector has generally not heeded the call. In any event, relying too heavily on the private sector can be problematic:

- Governments which lack the capacity to provide watsan systems via the public sector also lack the capacity to regulate private providers.⁵²
- The poorest areas are often least attractive to private investors.
- Poor communities are often not involved in deciding how and where the private sector delivers water and sanitation. Involving local communities is seen as time-consuming and burdensome.⁵³ But lack of consultation can mean lack of ownership by the local community.
- Private sector involvement and privatisation in general can sometimes add fuel to the fire
 of existing political conflict surrounding watsan provision. The 'water wars' of
 Cochabamba are a salutary tale: water privatisation in 1999 led to huge price rises for
 Bolivia's poorest people and a popular uprising.

⁵² Does PSP benefit the poor? Tearfund and WaterAid, 2003.

⁵³ Ibid.

Recommendations

Recommendations for the EU and other donors

Last year, rich country governments took the welcome step of committing themselves to increase aid by another \$48 billion by 2010. It is now essential that the UK, EU and other developed country governments ensure that water and sanitation gets its fair share of this extra money.

- Donor governments should immediately commit to doubling their ODA (official development assistance) to water and sanitation by 2010.
- Donor governments should make sure that 70 per cent of aid to water and sanitation is directed to least-developed and low-income countries.
- EU member states should radically overhaul the EU Water Initiative, setting measurable targets for improved donor action and coordination.
- Donor governments should give particular emphasis to sanitation and hygiene promotion.
- Donor governments should give all aid for water and sanitation in the poorest countries as grants not loans.
- Donor governments should focus on scaling up appropriate solutions and community-led approaches rather than large-scale, high cost infrastructure.
- All donor government should make water and sanitation an equal priority with health and education.
- Donor governments should recognise that wise water management based on the integration
 of human and ecosystem needs is the only way to achieve poverty reduction, and finance for
 water resource management plans in all countries must be urgently provided.

Recommendations for UK government

• The UK government should work within the EU's Council of Ministers to call the EU Water Initiative to account and demand that it produces progress reports every six months.

• The UK government should recognise that access to water and sanitation is an essential basic service and should promote it among partner governments as being equally important as health and education. The UK government should also publish a commitment-to-action position and action plan paper on water and sanitation, to sit alongside similar health and education papers.