

**Independent Expert on the issue of human rights obligations
related to access to safe drinking water and sanitation**

**‘GOOD PRACTICES’ RELATED TO ACCESS TO
SAFE DRINKING WATER AND SANITATION**



Questionnaire

**February, 2010
Geneva**

Introduction

The Independent Expert on the issue of human rights obligations related to access to safe drinking water and sanitation, Ms. Catarina de Albuquerque, has been mandated by the Human Rights Council in 2008 to:

- Further clarify the content of human rights obligations related to access to safe drinking water and sanitation;
- Make recommendations that could help the realization of the Millennium Development Goals (MDG), and particularly of the Goal 7;
- Prepare a compendium of good practices related to access to safe drinking water and sanitation.

While the work of human rights bodies has often focused on the violations of human rights, the Independent Expert welcomes the opportunity to identify good practices that address the question of how human rights obligations related to sanitation and water can be implemented.

Methodology of the Good Practices consultation process

In a first step, the Independent Expert undertook to determine criteria for identifying ‘good practices’. As ‘good’ is a subjective notion, it seemed critical to first elaborate criteria against which to judge a practice from a human rights perspective, and then apply the same criteria to all practices under consideration. Such criteria for the identification of good practices were discussed with various stakeholders at a workshop convened by the Independent Expert in Lisbon in October 2009. The outcome was the definition of 10 criteria, 5 of which are normative criteria (*availability, accessibility, quality/safety, affordability, acceptability*), and 5 are cross-cutting ones (*non-discrimination, participation, accountability, impact, sustainability*). The Independent Expert and the stakeholders started testing the criteria, but believe that the process of criteria testing is an ongoing one: the criteria should prove their relevance as stakeholders suggest examples of good practices.

After this consultation and the consolidation of the criteria, the Independent Expert wants to use these to identify good practices across all levels and sectors of society. To that end, she will organize stakeholder consultations with governments, civil society organisations, national human rights institutions, development cooperation agencies, the private sector, UN agencies, and perhaps others. By bringing people from the same sector together to talk about good practices related to human rights, water and sanitation, she hopes to facilitate exchange of these good practices. In order to prepare the consultations through the identification of potential good practices, the present questionnaire has been elaborated. The consultations will be held in 2010 and 2011. Based on the answers to this questionnaire, and the stakeholder consultations, the Independent Expert will prepare a report on good practices, to be presented to the Human Rights Council in 2011.

The Good Practices Questionnaire

The questionnaire is structured following the normative and cross-cutting criteria, mentioned above; hence the Independent Expert is looking for good practices in the fields of sanitation and water **from a human rights perspective**. Therefore, the proposed practices do not only have to be judged ‘good’ in light of at least one normative criterion depending on their relevance to the practice in question (*availability, accessibility, quality/safety, affordability, acceptability*), but also in view of all the cross-cutting criteria (*non-discrimination,*

participation, accountability, impact, sustainability). At a minimum, the practice should not undermine or contradict any of the criteria.

Explanatory note: Criteria

Criteria 1-5: Normative criteria (availability, accessibility, quality/safety, affordability, acceptability). All these criteria have to be met for the full realization of the human rights to sanitation and water, but a good practice can be a specific measure focussing on one of the normative criterion, and not necessarily a comprehensive approach aiming at the full realization of the human rights. Hence, not all the criteria are always important for a given practice. E.g., a pro-poor tariff structure can be judged very good in terms of the affordability criterion, whilst the quality-criterion would be less relevant in the context of determining whether that measure should be considered a good practice.

Criteria 6-10: Cross-cutting criteria (non-discrimination, participation, accountability, impact, sustainability). In order to be a good practice from a human rights perspective, all of these five criteria have to be met to some degree, and at the very least, the practice must not undermine or contradict these criteria. E.g., a substantial effort to extend access to water to an entire population, but which perpetuates prohibited forms of discrimination by providing separate taps for the majority population and for a marginalized or excluded group, could not be considered a good practice from a human rights perspective.

Actors

In order to compile the most critical and interesting examples of good practices in the field of sanitation and water from a human rights perspective, the Independent Expert would like to take into consideration practices carried out by a **wide field of actors**, such as *States, regional and municipal authorities, public and private providers, regulators, civil society organisations, the private sector, national human rights institutions, bilateral development agencies, and international organisations.*

Practices

The Independent Expert has a broad understanding of the term “practice”, encompassing both policy and implementation: Good practice can thus cover **diverse practices** as, e.g., *legislation (international, regional, national and sub-national), policies, objectives, strategies, institutional frameworks, projects, programmes, campaigns, planning and coordination procedures, forms of cooperation, subsidies, financing mechanisms, tariff structures, regulation, operators’ contracts, etc.* Any activity that enhances people’s enjoyment of human rights in the fields of sanitation and water or understanding of the rights and obligations (without compromising the basic human rights principles) can be considered a good practice.

The Independent Expert is interested to learn about practices which advance the realization of human rights as they relate to safe drinking water and sanitation. She has explicitly decided to focus on “good” practices rather than “best” practices, in order to appreciate the fact that ensuring full enjoyment of human rights can be a process of taking steps, always in a positive direction. The practices submitted in response to this questionnaire may not yet have reached their ideal goal of universal access to safe, affordable and acceptable sanitation and drinking water, but sharing the steps in the process towards various aspects of that goal is an important contribution to the Independent Expert’s work.

Please describe a good practice **from a human rights perspective** that you know well in the field of

- drinking water; and/or
- sanitation

Please relate the described practice to the ten defined criteria. An explanatory note is provided for each of the criteria.

Description of the practice:

Name of the practice:

Productive Sanitation Practises

Aim of the practice:

Productive Sanitation emphasizes on the strong link between Sanitation/ Public Health and Food Security and Agriculture

Target group(s):

Subsistence farmers in rural communities in Burkina Faso in 30 villages and in Niger

Partners involved:

CREPA, IFAD, PPILDA , INEA, Ministries of Agriculture in Niger and Burkina. and Stockholm Environment Institute : EcoSanRes program.

Duration of practice:

The research and development of productive sanitation initiated 2001 in Burkina Faso and has been ongoing since then in 13 West African countries. In 2008 the sanitation activities were closely linked to Agricultural activities and the Ministry of Agriculture and extensions worker started to implement productive sanitation practices.

Financing (short/medium/long term):

Short term project in Niger 200 000USD and the ECOSAN_UE2 project 1.5 million Euro 2008-2011

Brief outline of the practice:

Productive sanitation is used to increase health and food security based on the fact that urine and faeces from a family of 10 contain nutrients equivalent to approx. 100kg of chemical fertilizer – locally worth 80 USD . Urine contains the main part of these nutrient and is relatively easy to collect and use in agriculture feces has qualities for soil improvement.

1. How does the practice meet the criterion of availability?

Explanatory note: Availability

Availability refers to sufficient quantities, reliability and the continuity of supply. Water must be continuously available in a sufficient quantity for meeting personal and domestic requirements of drinking and personal hygiene as well as further personal and domestic uses such as cooking and food preparation, dish and laundry washing and cleaning. Individual requirements for water consumption vary, for instance due to level of activity, personal and health conditions or climatic and geographic conditions. There must also exist sufficient number of sanitation facilities (with associated services) within, or in the immediate vicinity, of each household, health or educational institution, public institution and place, and the workplace. There must be a sufficient number of sanitation facilities to ensure that waiting times are not unreasonably long.

Answer:

The development of toilets with the urin separating devices have been developed to reduce the cost thus minimizing subsidies to enable farmers to get organized to invest in sanitation beyond project duration. With the economical value of the fertilizer agricultures can in a short time recover investment cost by boosting agricultural production.. The subsidy of 180 US for urine separating facilities in Burkina and 50 USD in Niger can help the family to potentially collect 80 US worth in of fertilizer / year in hygienic and safe way. These two program have so far covered 30 villages in Burkina Faso and in 10 villages Niger. Due to the low cost and the possibility of fast cost recovery the plan is now to extend the approach to the entire intervention zon of 260 villages. In both countries there is a connection with the ministry of rural development Niger and the ministry of agriculture in Burkina .Due to the isolation of the villages the villagers are trained to construct and perform the maintenance of their infrastructures. The project covers most households in the area.

2. How does the practice meet the criterion of accessibility?

Explanatory note: Accessibility

Sanitation and water facilities must be physically accessible for everyone within, or in the immediate vicinity, of each household, health or educational institution, public institution and the workplace. The distance to the water source has been found to have a strong impact on the quantity of water collected. The amount of water collected will vary depending on the terrain, the capacity of the person collecting the water (children, older people, and persons with disabilities may take longer), and other factors. There must be a sufficient number of sanitation and water facilities with associated services to ensure that collection and waiting times are not unreasonably long. Physical accessibility to sanitation facilities must be reliable at day and night, ideally within the home, including for people with special needs. The location of public sanitation and water facilities must ensure minimal risks to the physical security of users.

Answer:

The program has worked with Phast/SARAR methods to establish and acceptance for the infrastructure and acceptance so that the infrastructure can be used by all members in the families. Families with difficulties like female headed households has been encouraged to get a toilet to improve their food production. Special facilities are being developed for disabled people. The infrastructure have been installed in the homesteads in this programme enabling all families to get access to safe sanitation facility.

3. How does the practice meet the criterion of affordability?

Explanatory note: Affordability

Access to sanitation and water facilities and services must be accessible at a price that is affordable for all people. Paying for services, including construction, cleaning, emptying and maintenance of facilities, as well as treatment and disposal of faecal matter, must not limit people's capacity to acquire other basic goods and services, including food, housing, health and education guaranteed by other human rights. Accordingly, affordability can be estimated by considering the financial means that have to be reserved for the fulfilment of other basic needs and purposes and the means that are available to pay for water and sanitation services. Charges for services can vary according to type of connection and household income as long as they are affordable. Only for those who are genuinely unable to pay for sanitation and water through their own means, the State is obliged to ensure the provision of services free of charge (e.g. through social tariffs or cross-subsidies). When water disconnections due to inability to pay are carried out, it must be ensured that individuals still have at least access to minimum essential levels of water. Likewise, when water-borne sanitation is used, water disconnections must not result in denying access to sanitation.

Answer:

The development of toilets with the urine separating devices have been developed to reduce the cost to enable farmers to get organized to invest in their own sanitation facility . The economical value of the fertilizer boost agricultural production for the farmers and improve the livelihood of the families. The subsidy of 180 US for facilities in Burkina and 50 USD in Niger can help the family to potentially collect 80 US worth in of fertilizer / year in hygienic and safe way. With provision of small credit for productive sanitation the investment pays for itself in the first 1-3 years. Due to the success of these programs a technical advisory note will produced at IFAD and this will open up possibilities to provide small micro-credits at a global scale to small holder farmers interested in investing in infrastructures enabling reuse of nutrients from sanitation.

4. How does the practice meet the criterion of quality/safety?

Explanatory note: Quality/Safety

Sanitation facilities must be hygienically safe to use, which means that they must effectively prevent human, animal and insect contact with human excreta. They must also be technically safe and take into account the safety needs of peoples with disabilities, as well as of children. Sanitation facilities must further ensure access to safe water and soap for hand-washing. They must allow for anal and genital cleansing as well as menstrual hygiene, and provide mechanisms for the hygienic disposal of sanitary towels, tampons and other menstrual products. Regular maintenance and cleaning (such as emptying of pits or other places that collect human excreta) are essential for ensuring the sustainability of sanitation facilities and continued access. Manual emptying of pit latrines is considered to be unsafe and should be avoided.

Water must be of such a quality that it does not pose a threat to human health. Transmission of water-borne diseases via contaminated water must be avoided.

Answer:

Since the fertilizer has such a value for the farmers the infrastructures are well kept to ensure safe capturing of the nutrients. The introduction , the construction and good use require good skills and knowledge. In rural areas where the food production is the main occupation, boosting agricultural production with nutrients from urine has been an effective door to create interest and demand for sanitation among both men and women. The women have always shown a greater interest in the comfort and hygiene- however men has shown little interest in hygiene and sanitation. With this program this behavior has changed. Since the excreta is regularly managed in a safe way according to WHO guideline there is no unsafe handling of excreta. The closing of the loop in sanitation provide for safe excreta management as well environmental protection. With urinal the odor from the former toilets (showers) has disappeared in the living environment .

Introduction of sanitation goes hand in hand with an efficient training program focusing on both hygiene and the use of the nutrients.

5. How does the practice meet the criterion of acceptability?

Explanatory note: Acceptability

Water and sanitation facilities and services must be culturally and socially acceptable. Depending on the culture, acceptability can often require privacy, as well as separate facilities for women and men in public places, and for girls and boys in schools. Facilities will need to accommodate common hygiene practices in specific cultures, such as for anal and genital cleansing. And women's toilets need to accommodate menstruation needs.

In regard to water, apart from safety, water should also be of an acceptable colour, odour and taste. These features indirectly link to water safety as they encourage the consumption from safe sources instead of sources that might provide water that is of a more acceptable taste or colour, but of unsafe quality.

Answer:

For all kind of safe recycling of excreta it is necessary to work with social acceptance.

In Muslim societies urine is considered impure and something that one should never get in contact with. On the other hand importance of cleanliness in Islam provides a good argument for collection and taking away urine from the compound.

The farmers need to see to believe. Thus it is necessary to initiate quickly with the urine collection.

The yields closest to the village has always been given best yields since and animals and people relieve themselves there and no one ever hesitated to eat what was produced from these fields .The new way of recycling excreta is an improvement of old practices-A very appreciated activity to enable participation was the blind taste of vegetables fertilized with urine and urea. The results shows higher sweeter taste for urine fertilized vegetables and in higher buying preferences for the urine fertilized vegetables both based on taste and appearance.

The toilet are built to guarantee privacy, and to accommodate anal / genital cleansing.

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6. How does the practice ensure non-discrimination?

Explanatory note: Non-discrimination

Non-discrimination is central to human rights. Discrimination on prohibited grounds including race, colour, sex, age, language, religion, political or other opinion, national or social origin, property, birth, physical or mental disability, health status or any other civil, political, social or other status must be avoided, both in law and in practice.

In order to address existing discrimination, positive targeted measures may have to be adopted. In this regard, human rights require a focus on the most marginalized and vulnerable to exclusion and discrimination. Individuals and groups that have been identified as potentially vulnerable or marginalized include: women, children, inhabitants of (remote) rural and deprived urban areas as well as other people living in poverty, refugees and IDPs, minority groups, indigenous groups, nomadic and traveller communities, elderly people, persons living with disabilities, persons living with HIV/AIDS or affected by other health conditions, people living in water scarce-regions and sanitation workers amongst others.

Answer:

These two specific projects are inclusive for all community member in very poor rural communities in Burkina Faso and Niger in West Africa where the communities are depending on their own food production. Sensitization in the villages using SARAR / PHAST to enhance understanding of the dangers and resources in human excreta and how good use of urinals and latrines can help eliminate dangers and capture valuable resources for improving the agricultural production. All community members were involved and special support was given to vulnerable groups such as widow and families with a very low agricultural production /year. The extension workers made vulnerability screening in each village and in community meetings it was agreed upon that the vulnerable families would be fully supported..

7. How does the practice ensure active, free and meaningful participation?

Explanatory note: Participation

Processes related to planning, design, construction, maintenance and monitoring of sanitation and water services should be participatory. This requires a genuine opportunity to freely express demands and concerns and

influence decisions. Also, it is crucial to include representatives of all concerned individuals, groups and communities in participatory processes.

To allow for participation in that sense, transparency and access to information is essential. To reach people and actually provide accessible information, multiple channels of information have to be used. Moreover, capacity development and training may be required – because only when existing legislation and policies are understood, can they be utilised, challenged or transformed.

Answer:

Introducing productive sanitation practices is based on participatory methods. Sensitization in the villages using SARAR / PHAST to enhance understanding of the dangers and resources in human excreta and how good use of urinals and latrines can help eliminate dangers and capture valuable resources for improving the agricultural production. All community members were involved and special support was given to vulnerable groups- Construction and good use also requires skill development, certain monitoring and follow up. Extension workers and Watsan professionals who knew the communities were trained to supervise the construction of simple urine harvesting facilities and compost toilets.

There are in general much more extension workers than WatSan living close to the communities. The Extension workers are also interested in the correct use of latrines and urinals since they know the value of the fertilizer.

8. How does the practice ensure accountability?

Explanatory note: Accountability

The realization of human rights requires responsive and accountable institutions, a clear designation of responsibilities and coordination between different entities involved. As for the participation of rights-holders, capacity development and training is essential for institutions. Furthermore, while the State has the primary obligation to guarantee human rights, the numerous other actors in the water and sanitation sector also should have accountability mechanisms. In addition to participation and access to information mentioned above, communities should be able to participate in monitoring and evaluation as part of ensuring accountability.

In cases of violations – be it by States or non-State actors –, States have to provide accessible and effective judicial or other appropriate remedies at both national and international levels. Victims of violations should be entitled to adequate reparation, including restitution, compensation, satisfaction and/or guarantees of non-repetition.

Human rights also serve as a valuable advocacy tool in using more informal accountability mechanisms, be it lobbying, advocacy, public campaigns and political mobilization, also by using the press and other media.

Answer:

There are various institutions/ organizations involved with an interest to increase food security and the sanitation coverage. The principles of productive sanitation are already part of the national guidelines for water and sanitation in Burkina Faso. A suitable framework to bring the experiences further in Niger would be through the Rural Development Strategy. The decision of scaling up the experience to a Zone with 260 villages in Niger is an indicator of the understanding at ministerial level of the importance of the productive sanitation not only in terms of improved hygiene but also improved food security.

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9. What is the impact of the practice?

Explanatory note: Impact

Good practices – e.g. laws, policies, programmes, campaigns and/or subsidies - should demonstrate a positive and tangible impact. It is therefore relevant to examine the degree to which practices result in better enjoyment of human rights, empowerment of rights-holders and accountability of duty bearers. This criterion aims at capturing the impact of practices and the progress achieved in the fulfilment of human rights obligations related to sanitation and water.

Answer:

The principles of productive sanitation is already part of the national guidelines for water and sanitation in Burkina Faso. A suitable framework to bring the experiences further in Niger would be through the Rural Development Strategy. This intervention does not only address the human rights related to sanitation but also food security.

With better nutrition and better health the users of the infrastructures will be able to address their civil rights and participate in awareness raising activities thus get empowered.

10. Is the practice sustainable?

Explanatory note: Sustainability

The human rights obligations related to water and sanitation have to be met in a sustainable manner. This means good practices have to be economically, environmentally and socially sustainable. The achieved impact must be continuous and long-lasting. For instance, accessibility has to be ensured on a continuous basis by adequate maintenance of facilities. Likewise, financing has to be sustainable. In particular, when third parties such as NGOs or development agencies provide funding for initial investments, ongoing financing needs for operation and maintenance have to be met for instance by communities or local governments. Furthermore, it is important to take into account the impact of interventions on the enjoyment of other human rights. Moreover, water quality and availability have to be ensured in a sustainable manner by avoiding water contamination and over-abstraction of water resources. Adaptability may be key to ensure that policies, legislation and implementation withstand the impacts of climate change and changing water availability.

Answer:

The introduction of productive sanitation with urine harvesting facilities shows that it is possible to pay back the microcredit through improved agricultural production in less than three years. The International Fund for Agricultural Development is after the successful implementation prepared to roll out the program in more program countries and establish a microcredit scheme for investment in productive sanitation. This already in progress in Orissa in India as well.

Final remarks, challenges, lessons learnt

With productive sanitation, urine and faeces are now looked upon as potential liquid and solid fertilizers. An important reason has been the methodology of participative tests with urine. In rural areas food production is the main occupation and an effective entry door to create interest for sanitation. Already a simple urinal makes a difference as the urine odour in the shower disappears with the collection. At global scale with the absence of political awareness and will the incentive to recycle human excreta will come with increasing fertilizer prices. IN Burkina and Niger where commercial fertilizer are beyond the purchase power of most farmers there is already a strong incentive for safe recycling . The importance of sanitation and safe and productive excreta management is now not only something for WATSAN professionals but also for agricultural extension officer. The combination of raising the awareness not only in regards to hygiene but also improved food production will improve the livelihood for millions of small farmers.

Submissions

In order to enable the Independent Expert to consider submissions for discussion in the stakeholder consultations foreseen in 2010 and 2011, all stakeholders are encouraged to submit the answers to the questionnaire at their earliest convenience and no later than 30th of June 2010.

Questionnaires can be transmitted electronically to iewater@ohchr.org (encouraged) or be addressed to

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Please include in your submissions the name of the organization submitting the practice, as well as contact details in case follow up information is sought.

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The Independent Expert would like to thank you for your efforts!

For more information on the mandate of the Independent Expert, please visit
<http://www2.ohchr.org/english/issues/water/lexpert/index.htm>