



PERMANENT MISSION OF THE REPUBLIC OF ZAMBIA  
GENEVA

OHCHR REGISTRY

22 JUL 2010

Recipients: SPD

Note No.167/10

*The Permanent Mission of the Republic of Zambia to the United Nations Office and other International Organizations presents its compliments to the Office of the High Commissioner for Human Rights and has the honour to refer to the questionnaire on good practices related to access to safe drinking water and sanitation.*

*The Government of the Republic of Zambia and the National Water Supply and Sanitation Council wishes to submit the following response:*

*The National Water Policy of 1994, the 1994 National Environmental Support Programme and the Water Resources Master Plan 1995 to 2015 have outlined strategies and comprehensive plans of action to develop the water sector in order to enhance access to safe drinking water and sanitation. In addition, Government is developing a new legal and institutional framework that is self sustaining and which takes into consideration the decentralization policy. The legal framework for water supply and sanitation is currently anchored in two main pieces of legislation, namely, the Local Government Act No.22 of 1991 and the Water Supply and Sanitation Act (WSA) No.28 of 1997.*

*The WSA establishes the National Water Supply and Sanitation Council and define its functions. In addition, the Act provides for the establishment, by local authorities, of water supply and sanitation utilities. Further, it provides for the efficient and sustainable supply of water and sanitation services under the general regulation of the National Water Supply and Sanitation Council.*

*Other Legislation which has impact on the provision of clean water includes the Environmental Protection and Pollution Act 1990, whose purpose is protection of the environment and control of pollution, and the Public Health Act of 1995, which has provisions for the management of sanitation and prevention of pollution to water supplies. Government has also put in place strategies to provide adequate, safe and cost effective water supply and sanitation services. The strategies are being implemented by key water sector institutions such as the Ministry of Energy and Water Dvelopment,*

*Environmental Council of Zambia, Ministry of Health, the Water Development Board and Support Services, etc.*

*The Permanent Mission of the Republic of Zambia to the United Nations Office and other International Organizations avails itself of this opportunity to renew to the Office of the High Commissioner for Human Rights the assurances of its highest consideration.*

*Geneva, 21<sup>st</sup> July 2010*

*Independent Expert on the issue of Human Rights Obligation related to Access to Safe Drinking Water and Sanitation*

*ESCR Section*

*Human Rights Council and Special Procedures Division*

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Independent Expert on the issue of human rights obligations related to access to safe drinking water and sanitation  
 Good Practices Questionnaire - [iewater@ohchr.org](mailto:iewater@ohchr.org)

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:

REVOLUTION TRUST FUND (ZAMBIA)

Aim of the practice:

TO IMPROVE ACCESS TO WATER SUPPLY & SANITATION (WSS) FOR THE URBAN POOR

Target group(s):

PERI URBAN & LOW COST AREAS (URBAN POOR)

Partners involved:

UNICEF, KFW, DANIDA, EU & GOVT OF ZAMBIA

Duration of practice:

SINCE 2003 TO INDEFINITE

Financing (short/medium/long term):

SHORT TERM / € 14M

Brief outline of the practice:

THE REVOLUTION TRUST FUND (RTF) PROVIDES GRANT FUNDING TO UTILITIES SO THAT THEY CAN EXTEND WSS SYSTEMS TO THE URBAN POOR AREAS

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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:

A STANDARD of 25 litres/capita/day is taken as basic water supply. The utilities ensure that the designed system are connected to the main water supply system thus ensuring reliability & continuity of supply. Supply in most cases is through water kiosks and line of water kiosk is restricted to a limited number of customers.

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:

AT PLANNING STAGE COMMUNITIES ARE INVOLVED IN THE LOCATION OF THE KIOSKS & DISTANCE IS A FACTOR. SO A MAXIMUM DISTANCE OF 200M IS NORMALLY CONSIDERED DEPENDING ON POPULATION DENSITY. THE NUMBER OF USERS PER FACILITY IS ALSO RESTRICTED. THIS ALSO THE CASE FOR SANITATION.

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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: Tariffs for kiosks are regulated by the regulatory NUTSCO. Hence the tariff for kiosks is set at the lowest band. For sanitation, this is applied as a % of the water used, which is normally low.

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) 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: Sanitation facilities are designed to be used by a single family & sharing between families is not encouraged as over-usage may reduce this also makes it safe for children to use. Water is supplied from the utility plants which treat the water as per ~~water~~ standards engineering practice. Regular water testing is also done.

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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:**

THE COMMUNITY IS INVOLVED IN THE SELECTION OF THE TECHNOLOGY. AS SUCH TECHNOLOGIES THAT ARE DEEMED 'TABOO' ARE NOT ADOPTED. SINCE USERS ARE CONNECTED TO THE UTILITIES SUPPLY WATER IS OF THE SAME QUALITY AS FOR THE FORMAL AREAS

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:**

THE DTF'S FOCUS IS THE URBAN POOR & MOSTLY WOMEN & CHILDREN WHO ARE RESPONSIBLE FOR FETCHING WATER. THE INTERVENTIONS ARE NEUTRAL AS FAR AS POLITICS, RELIGION OR OTHER CONCERNS ARE CONCERNED.

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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:** BOTH FOR WATER & SANITATION, INVOLVEMENT OF BENEFICIARY COMMUNITY IS CENTRAL. THIS STARTS FROM THE PLANNING STAGE UP TO COMMISSIONING & OPERATION. THERE IS ALWAYS IN THE PROJECT TASK TEAM MEMBERS FROM THE COMMUNITY

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:** ACCOUNTABILITY AT ALL LEVELS IS ENSURED THROUGH TRANSPARENT STRUCTURES. RESIDENT COMMITTEES OVERSEE DEVELOPMENT IN THE AREA & HAVE UNFETTERED ACCESS TO OPERATIONS IN THE AREA. WATER WATCH GROUPS ALSO PROVIDE ANOTHER AVENUE FOR ACCOUNTABILITY

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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:

MORE PEOPLE HAVE ACCESS TO SAFE WATER SUPPLY - 610,000 MORE PEOPLE IN 3 YEARS SINCE 2002. THE INCLUSION OF PERI-URBAN AREAS (URBAN POOR) MAKES IT POSSIBLE TO HAVE CROSS SUBSIDIES & IN THE END THE POOR PAY A LIFE-LINE TARIFF.

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 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:

THIS IS ACHIEVED THROUGH WORKING WITH FORMAL SERVICE PROVIDERS, THE UTILITIES. IT IS PLANNED THAT ONCE UTILITIES ATTAIN FULL COST RECOVERY LEVELS, FUNDING FROM OUTSIDE MAY GRADUALLY BE PHASED OUT

Final remarks, challenges, lessons learnt

MUST HUMAN RIGHTS AND WPS ARE VERY IMPORTANT TO ENSURE IMPROVED LIFE FOR ALL UTILITIES IN LDCs MAY NOT BE ABLE TO ACHIEVE WITHOUT EXTERNAL GOVERNMENT ASSISTANCE IN THE FORMATIVE STAGE ON CORE INFRASTRUCTURE.

HENCE THIS SUPPORTS MUST BE STEPPED UP IN THE MEDIUM TERM & THEREAFTER MONITOR 10 PROGRESS TOWARDS SELF SUFFICIENCY.

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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 30<sup>th</sup> of June 2010.

Questionnaires can be transmitted electronically to [jewater@ohchr.org](mailto:jewater@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.

Your contact details

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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>

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