

Sanitation and Social Protection

A HUMAN RIGHTS-BASED APPROACH

This Issue Brief introduces readers to the human rights-based approach to sanitation. Access to sanitation may reduce vulnerability, a key focus of social protection. This briefing paper makes the case for an increased focus on sanitation as a human right, explores current approaches to address this right, and provides ideas on the key directions needed to turn the tide on this critical issue.

Inadequate sanitation and unclean water result in the deaths of 1,400 children every day from preventable diseases like diarrhoea. Poor sanitation is also closely linked with issues of malnutrition and stunting in children. Consequently, events like World Toilet Day, which takes place annually on 19 November, are important to raise global awareness about the people who do not have access to improved sanitation, and why this is a global development priority.

And it is more than that as well: sanitation is a human right, formally recognized since 2010. However, according to the World Health Organization and UNICEF Joint Monitoring Programme for Water Supply and Sanitation, some 2.5 billion people (36 percent of the world's population) do not have access to adequate facilities. A recent Human Rights Council resolution reports that even this figure underestimates the scale of the problem, as current monitoring practices do not reflect human rights challenges such as inequalities (including those between individuals and households as well as those between formal and informal areas within cities), safety and affordability of services. In addition, there is an unequal distribution of mortality and morbidity associated with poor sanitation and unsafe water, with disproportionately high levels among the poorest populations and the majority of deaths from diarrhoea occurring among children.

The economy is also significantly impacted. Poor sanitation and water supply result in USD 260 billion in annual economic losses due to ill health and loss of productive time. On the other hand, the global economic return on sanitation spending is USD 5.5 for every dollar invested. In addition to the economic benefits, interventions that address these issues have the potential to reduce the global disease burden by 9.1 percent.

Current investment in sanitation, however, is far from sufficient. Global reporting shows that in 2012, only 27 percent of funds allocated to water and sanitation were spent on sanitation. The world failed to meet the Millennium Development Goal (MDG) for sanitation of halving the number of people without adequate access.

Sanitation and the SDGs

The 2030 Agenda for Sustainable Development and the Sustainable Development Goals (SDGs) cover sanitation services more holistically than the Millennium Development Goals (MDGs) did, which is an important and positive step. The MDGs focused on access to toilets and did not include monitoring what happened to waste beyond this point. They also did not address the multiple pathways by which pathogens from this waste can pose health risks, through leaking underground tanks and overflows into drains and surface water. Both of these are common occurrences, particularly in urban settlements in the Global South, where 90 percent of domestic wastewater is untreated. By contrast, the SDGs explicitly call for "[Ensured] availability and sustainable management of water and sanitation for all" (SDG 6) by 2030. Target 6.2 in particular calls for "[achieving] access to adequate and equitable sanitation and hygiene for all and ending open defecation, paying special attention to the needs of women and girls and those in vulnerable situations". The change in global targets with the SDGs is crucial, because recent research confirms the harmful effect that contamination has on drinking water quality, and estimates that some 1.8 million people globally use drinking water that is faecally contaminated, posing a major risk to their health.

socialprotection-humanrights.org

This Issue Brief has been produced by UNRISD for Social Protection and Human Rights, a web-based platform designed to provide expert legal and development resources on how to better align social protection and human rights. The platform is made for policy makers, development practitioners and human rights advocates with the intention of strengthening a growing social protection community that cuts across disciplines.

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Social Protection
Human Rights



Resources

Two expert commentaries on human rights and sanitation have been written for socialprotection-humanrights.org.

- **Mutual Reinforcement of the Human Right to Social Protection and the Human Right to Water and Sanitation.**

Expert commentaries
Date: 16 October 2015
Author: Juliet Willetts

- **Poor Access to WASH: A Barrier for Women in the Workplace.**

Expert commentaries
Date: 16 November 2016
Author: Rockaya Aidara

The platform also includes a wealth of resources, including:

- **Realising the Human Right to Water and Sanitation: A Handbook.**

Resources
Author: Catarina de Albuquerque
Year: 2014

Multimedia



UNRISD has produced several videos as part of Social Protection and Human Rights. **"Just building toilets is not enough": The need for an integrated approach to WASH and Human Rights.** is a video featuring PB Anand, a Reader in Environmental Economics and Public Policy at the University of Bradford, which explains the links between social protection, human rights and access to sanitation and water.

The Role of Social Protection

In integrating sustainable social protection solutions to address the right to sanitation, policy makers and practitioners must consider the particularities of sanitation facilities and the related behaviour changes. Often, people without a toilet do not necessarily want one, and it cannot be assumed that removing financial barriers to sanitation through social protection measures such as cash transfers will be sufficient. Better integration of rights-based social protection policies with policies developed in the sanitation sector, however, is likely to be beneficial. Further ideas on how to link the right to sanitation with social protection are presented below.

The Gender Dimension

Sanitation is also a gender issue. Social protection policy should reflect the different needs between women and girls and men and boys in its design, implementation and monitoring.

For women and girls, privacy, dignity, vulnerability and physical insecurity are important concerns. In both urban and rural areas, women and girls regularly face harassment and assault when going to the toilet, including gender-based violence. Women and girls may delay drinking and eating in order to wait until nightfall to relieve themselves, resulting in dehydration. Recent studies discuss the major psycho-social stresses placed on women and girls due to the hazards, risks and shame associated with the need to enter into dangerous spaces (such as railway lines, sides of waterways and canals, and areas with shrubs) for the purpose of defecation.

In addition, silence concerning the needs of women and girls due to taboos around menstruation is an issue which affects their enjoyment of the right to sanitation. This issue has been brought to light in recent years, with major global efforts being directed to address it.

Key Questions

There are different paths that researchers, policy makers and practitioners can take in addressing sanitation. Attention to three key questions can ensure that the issue is advanced in the context of a human rights-based approach to social protection.

1. Do current approaches to increase access to sanitation recognize its status as a right in the context of a human rights-based approach to social protection?
2. How can policy makers and international actors work collectively to increase the political prioritization and public sector finance needed to ensure access to

sanitation for all with a human rights-based social protection framework?

3. How can rights-based social protection and related mechanisms be mobilized to enable all people to experience the safety and dignity that comes with an adequate sanitation facility?

Acting on Sanitation as a Human Right

Recognizing sanitation as a human right is new for many governments and development agencies, and will require a shift in perspective given that to date, significant responsibility has been placed directly on citizens themselves to address their own sanitation needs. Acknowledging sanitation as a right puts responsibility on the state to facilitate access, and may require modification of some commonly applied approaches to ensure non-discrimination. One example is the community-led total sanitation (CLTS) approach used in rural areas.

Over the last decade, the dominant approach to shift sanitation behaviours from open defecation towards use of toilet facilities has moved towards CLTS. This approach, arising from a participatory development perspective, involves empowering and motivating communities to address their own sanitation needs. It uses disgust as a key behaviour change communication tool, which has been found in many contexts to be more effective than health-related messages.

Two key concerns regarding access to sanitation have been raised from a human rights perspective. The first is that households, including poor households, are expected to pay for constructing their toilet facilities. Although this can be done very cheaply using local materials, the result may be an unhygienic toilet which is unable to withstand the rainy season. Research has shown that such "slippage" is common, and that efforts to assist households to build more durable latrines (which consequently are likely to have a higher cost) are needed. Hence, mechanisms to avoid discrimination and facilitate affordable access remain necessary, as do stronger mechanisms to ensure that more inclusive participatory processes are used.

Assuming such mechanisms are put in place, particularly to ensure access to affordable services (discussed below), there is significant evidence to support CLTS as an appropriate and effective investment of public funds to facilitate access to sanitation. There is an equally significant evidence base that suggests that provision of toilets through full hardware subsidies (a common approach in the past) has failed to change sanitation behaviour (in that the toilets were not used), resulting in wasted public resources.

Social protection mechanisms to ensure access to affordable sanitation services¹

Social protection and related mechanisms	What does it involve?	Advantages	Disadvantages	Example of use
Direct subsidy (cash or vouchers)	Cash or vouchers given directly to targeted households to be spent on specified sanitation products or services	<ul style="list-style-type: none"> Empowers targeted households Stimulates market development 	<ul style="list-style-type: none"> Expensive and complex to administer Potentially issues for scalability Potentially only viable when bundled with other social services 	Vouchers have reportedly been used within a programme at scale by BRAC in Bangladesh; results evaluation not yet available
Hardware subsidy	Public sector (or NGO) provision of sanitation hardware to targeted households, usually with some input (cash/labour) from households	<ul style="list-style-type: none"> Enables targeted poor households access to sanitation 	<ul style="list-style-type: none"> Often expensive with limited reach, not financially sustainable Stifles market development Can skew or fix technical design at "high-cost" end 	<u>Bangladesh DISHARI</u> : up-front in-kind hardware subsidy targeted to poor (covers 42% of hardware costs)
Subsidy to small-scale suppliers / services	Funding for training and product development; business development services (for artisans and/or suppliers); providing credit, moulds or transport subsidies; could reward sales to the poor	<ul style="list-style-type: none"> Potential to support affordable products for all (not just targeted households) Supports broader market approach 	<ul style="list-style-type: none"> Relies on interest and capacity of small-scale providers May have a slow effect where private sector development is limited Risk of lost investments due to failure on the part of the providers 	Mozambique Improved Latrines Program: software support to suppliers and output-based subsidy for each toilet or slab sold (40-60% of hardware costs)
Cross subsidies	Cash or labour transfer from richer to targeted poor households	<ul style="list-style-type: none"> May be efficient at targeting and allocating resources 	<ul style="list-style-type: none"> May still result in exclusion of some poor and vulnerable 	-
Output-based subsidy	Subsidies paid after an outcome is achieved (open defecation-free, toilet use, etc.)	<ul style="list-style-type: none"> Prevents wastage of public money Encourages efficiency and accountability 	<ul style="list-style-type: none"> Investments must be pre-financed, which may exclude the poor Complex to administer 	Maharashtra, India Total Sanitation Campaign: outcome-based hardware subsidy for poor households (covered 22% of hardware costs)
Subsidized credit	Bank guarantees low-interest loans to poor households	<ul style="list-style-type: none"> Supports market development 	<ul style="list-style-type: none"> Requires competent micro-finance providers Can be complex to administer 	Viet Nam Sanitation Revolving Fund; access to credit at subsidized interest rates on loans for hardware (accounted for 3 percent hardware costs) <u>Viet Nam Social Policy Bank</u> provides low-interest loans for sanitation and for water

¹ Table adapted from WSSCC (2009) Public funding for sanitation, the many faces of sanitation subsidies. Prepared by Barbara Evans, Carolien van der Voorden and Andy Peal; p7 and Trémolet, S., Kolsky, P. and Perez, E. (2010) Financing On-Site Sanitation for the Poor: A Six Country Comparative Review and Analysis. WSP Sanitation Global Practice Team.

A second concern raised in the literature is that communities may be forced or pressured to adopt new behaviours, including through use of “shame”. This is a challenging issue to resolve, since private sanitation behaviour has a collective public health impact, and developing new social norms around sanitation behaviour is imperative for ensuring a healthier living environment for all. It is clear, however, that it is not possible to justify infringements on individual human rights even if the potential benefits to the community are significant, and CLTS practitioners will need to pay keen attention to this.

On the positive side, CLTS’s core focus on participation and empowerment is aligned with key human rights principles.

Raising Political Priority and Securing Public Finance

Arguing for greater investment is relatively straightforward, since evidence suggests that investment in sanitation gives a high economic return. For instance in East Asia, the estimated return on investment is USD 8 for each USD 1 invested in sanitation. However, studies of the political economy of sanitation reveal that it is rarely a priority issue for leaders, and that only in extreme sanitation crises does sanitation receive attention and investment. Widespread work to conduct advocacy at international and national levels is under way to address this challenge and stimulate greater commitment to prioritization and investment.

Recent debate has evolved around the critical role of domestic public finance. Academic and policy experts have reacted against assumptions and expectations that market-driven solutions and user contributions through tariffs will solve sanitation issues or assist marginalized or disadvantaged groups in gaining access to services. Indeed, evidence from developed country contexts confirms that building and maintaining sanitation services, including in countries such as the United States, has required major investments from the state. What has followed is a call (in line with the 2030 Agenda for Sustainable Development) to increase

Mobilizing Social Protection and Related Mechanisms to Reach All

The SDGs set out a target of universal and equitable access to sanitation. It is widely recognized that investment in services themselves is insufficient for the design and implementation of a human rights-based approach, and does not replace the need for additional support to specific disadvantaged groups. A range of subsidies can help address these groups’ access, each with its own advantages and disadvantages (see table).

One key issue in implementing such measures is avoiding the inefficiencies of parallel structures. These can arise either in terms of sector-focused approaches that create new systems in parallel with existing social protection mechanisms, or in terms of social protection mechanisms that do not account for approaches being undertaken through the sanitation sector. For example, a social protection programme that provides poor households with cash transfers for toilets is unlikely to be effective in the absence of behaviour change communication activities; hence the need for strong communication and engagement between the relevant ministries to promote coordinated action between those designing social protection measures and those designing sectoral programmes.

Conclusion

While progress has been made in providing universal access to sanitation, greater efforts are needed: a staggering 2.5 billion people—one third of the world’s population—still live without access to adequate sanitation facilities. Progressive realization of sanitation as a human right can be achieved through closer attention to inclusive approaches and appropriate use of social protection and related mechanisms to ensure the marginalized and disadvantaged do not miss out. Sanitation deserves greater attention than it currently receives, based on the major public health and gender issues it raises. Only through higher political priority and greater (and more effective) public investment will goals for universal access to sanitation be achieved.

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Through our work, we aim to ensure that social equity, inclusion and justice are central to development thinking, policy and practice.

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