Sanitation: a wise investment for health, dignity, and development

Key Messages for the International Year of Sanitation
2008 is the International Year of Sanitation

More than 2.6 billion people – roughly 40 percent of the world’s population – lack what most of us take for granted: a toilet. The Year’s purpose is to raise awareness about this crisis and galvanise action to address it.

The Millennium Development sanitation target is to reduce by half the proportion of people without a toilet between 1990 and 2015. Making the target a reality is critical to economic growth, to people’s health, to women’s empowerment, and to environmental sustainability. In fact, better sanitation will further all the Millennium Development Goals.

In addition, sanitation is one of the best investments a country can make: on average, every US$1 invested yields benefits that can be valued US$9.

Expanding sanitation coverage is not rocket-science. We know how to do it – by generating demand, mobilising communities, and appealing to people’s desires for convenience, cleanliness, safety, privacy, pride and prestige. Business-as-usual won’t work, but with political will, major progress on sanitation is possible – even for the poorest countries.

**Sanitation coverage in 2004**

![Map showing sanitation coverage around the world.](image)

Source: WHO/UNICEF, JMP 2006
Every day, diarrhoea caused by poor sanitation kills 5,000 infants and children. Access to hygienic toilets can reduce child diarrhoeal deaths by more than 30 percent, and hand-washing can reduce them by more than 40 percent.

Intestinal worms, which are transmitted when people ingest faecal matter or step in it barefooted, divert around one-third of the food a child consumes. Malnutrition, in turn, causes 50 percent of childhood illness. Infected children – and there are more than 100 million cases every year – are listless, sleepy and unable to concentrate in school.

Acute respiratory infections (ARIs) such as pneumonia are one of the leading cause of death in the world. But better hygiene practices – washing hands with soap after defecation and before eating – could halve the infection rate. There is also a link between roundworm infection and asthma. The combination of ARIs and diarrhoeal disease makes poor sanitation and hygiene the chief reason for childhood death.

“We used to not talk about AIDS, then people started dying from it. It’s the same thing with sanitation,” says Ugandan student Jennifer Akello, who dreams of becoming a surgeon and knows the importance of good sanitation: “I want to save people’s lives!”
Poor sanitation cripples national development: workers produce less, live shorter lives, save and invest less, and are less able to send their children to school. Inadequate water and sanitation services cost Sub-Saharan Africa 5 percent of its Gross Domestic Product each year.

Meeting the global sanitation goal would cost about US$10 billion per year, but yield nearly US$200 billion in yearly benefits. Hygienic, private toilets in homes and schools benefit families, communities, and nations in several ways:

By saving time
People, households and communities lose time to illness, caring for the sick and seeking somewhere private and safe to defecate. Researchers estimate that time savings associated with improved sanitation have an economic value well over US$100 billion per year.

By reducing health costs
- In Sub-Saharan Africa, treating diarrhoea consumes an estimated 12 percent of national health budgets, and half the hospital beds are occupied by people with sanitation-related diseases.
- If we meet the target, people and governments will save more than US$500 million in direct health treatment costs and get back more than 3 billion working days that are now lost to sanitation-related illness. Meeting the target would also slash the number of premature deaths, benefits that can be valued at a total of US$1.7 billion.

By increasing returns on investment in education
- By reducing diarrhoea, meeting the sanitation target would add nearly 200 million days of school attendance.
- Girls often leave school when there are no girl-friendly toilets; when women can read, they tend to have smaller, healthier, wealthier families.

“I feel happy. We have enough latrines, which has helped us girls especially. Now we are in a better position to learn our lessons and to pass our final exams. Our life is easier and our school is more girl-friendly.” Harriet, a 14-year-old girl in Sudan, discussing her school’s sanitation programme.
Improving sanitation fosters social development, or human progress, in several ways.

It fosters social inclusion and individual self-respect by offering an alternative to the stigmatising and marginalising need to defecate in the open and live surrounded by human and household waste. Community-led sanitation improvements can build community pride and cohesion.

Sanitation supports women’s empowerment by making it more likely that girls will stay in school, by freeing up women’s time, and by safeguarding women’s dignity and physical safety. Women and girls living in poverty in traditional societies are often “prisoners of the daylight”, unable to relieve themselves until darkness offers some privacy.

_In some villages in Maharashtra, the first Indian state to pilot an approach centred on ending open defecation, residents have painted signs that say: “Daughters from our village are not married into villages where open defecation is practised.”_

_“It’s such a relief. I no longer face embarrassing moments. I’ve realised the hygienic angle, too. Also, children don’t have to defecate outdoors, spoiling the environment,” says Manjula, a woman living in a rural village in Karnataka, India._
Toilets are a prerequisite for clean, healthy household and community living environments, particularly in dense settlements; they are also vital to safeguard environmental quality more broadly, especially the quality of water resources.

Each person produces about 150 grams of faeces per day, so open defecation around the world results in huge tonnages of human excreta deposited in and around communities. Living in a squalid environment harms physical and psychological health, is stigmatising, and deepens human poverty.

In the developing world, roughly 90 percent of sewage is discharged untreated into rivers, polluting waters and killing plants and fish. In Southeast Asia alone, 13 million tons of faeces are released to inland water sources each year. The resulting water pollution costs Southeast Asia more than US$2 billion per year, and in Indonesia and Vietnam, it creates environmental costs of over US$200 million annually, primarily from the loss of productive land.

“Our first idea was just to clean up all the rubbish in the streets. We went and cut brushwood and made brooms, and we started sweeping the whole town, street by street. And then we started going into people’s houses to see how they were getting rid of their waste. In the end, it was pride that made people move. If you start sweeping the street in front of another woman’s house, it won’t be long before she’s doing it herself. Once the idea got going, people started to keep their houses cleaner, and stopped dumping rubbish on the streets.”

Nelly Guapacha, a community organiser in El Hormiguero, Colombia.
Using proven approaches and available technologies, we can make huge progress towards the MDG sanitation target by 2015. If we sustain the effort for one or two decades more, everyone can have a toilet. With political will, national plans, vigorous action and strategic investment, we can do it.

Sanitation needs champions willing to break the taboos surrounding defecation and speak plainly about the high economic, social and environmental costs associated with the lack of sanitary toilets.

Establishing one national coordinating body, formulating a single, country-wide sanitation plan, and putting into place a transparent monitoring framework could spur and drive progress, as could increased investment delivered through a transparent budget line open to public scrutiny.

Generating demand for sanitation through marketing campaigns and community consensus-building is more likely to yield results than appeals to health.

Significant professional business development support for small-scale sanitation providers is required, as is greater training of sanitary engineers, to meet the demands of the massive scaling up of efforts necessary.

“Saira is my beloved granddaughter, and I want the best for her. I finally accepted to build a latrine four months ago. It cost me Rs.1,000 [approximately US$16]. Now the whole family uses the latrine.” Said Alam, Pakistan.
“Experience has shown that remarkable advances can be made very quickly, even in the poorest of countries. Improved sanitation is achievable!”

His Royal Highness Prince Willem-Alexander of The Netherlands