



Submission No 112

**Review of Australia's Relationship with the
Countries of Africa**

Organisation: Water Aid Australia

Contact: Peter Dwan
Head of International Programs

Parliamentary Delegation to South Africa, Ghana, Zimbabwe and Ethiopia: Briefing Paper from the Australian WASH Reference Group

March 2011

This briefing paper has been prepared by the Australian WASH Reference Group¹. The paper seeks to provide a snap shot on the status of water, sanitation and hygiene (WASH) in each of the four countries that the delegation will visit.

The Status of WASH in Africa

A recent study of the causes of child mortality published in the Lancet found that diarrhoea was the biggest killer of children in Africa, killing more children than malaria, measles and AIDS combined². Some 90% of diarrhoeal deaths are caused by inadequate sanitation, unsafe water and poor hygiene. Access to water and sanitation coupled with the habitual practice of good hygiene underpins all forms of development, and the achievement of all MDG's. In Africa WASH leads as the most 'off-track' MDG target; at current rates, the projected achievement date of the Millennium Development Goal for sanitation in sub-Saharan Africa (MDG 7), which seeks to halve by 2015 the proportion of people without sustainable access to safe drinking water and basic sanitation, is in the 23rd century³.

The Australian aid program through AusAID currently supports WASH projects in Africa through the AusAID Water and Sanitation Initiative (WSI), and the Australian Africa Community Engagement Scheme (AACES). With the ending of the WSI in June 2011, the amount of Australian government funds to be spent on WASH in Africa in future years is unclear. WASH Statistics for Ethiopia, Ghana, Zimbabwe, and South Africa

The statistics on the next page are sourced from the UNICEF / WHO Joint Monitoring Program for Water Supply and Sanitation⁴. An improved sanitation facility is defined as one that hygienically separates human excreta from human contact. An improved drinking water source is one that, by nature of its construction or through active intervention, is protected from outside contamination.

The statistics illustrate that the number of people without access to sanitation is much greater than those without access to water, as well as the greater level of need in rural areas rather than urban areas (noting however that national statistics can mask local pockets of urban poverty).

¹ The WASH Reference Group comprises 25 NGOs, the Australian Red Cross, academic institutions and representatives of the Australian water industry.

² Black R et al. (2010) "Global, regional, and national causes of child mortality in 2008: a systematic analysis", *The Lancet* 2010; 375: 1969 - 87

³ United Nations (2010), MDG report 2010

⁴ The WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation is the official United Nations mechanism tasked with monitoring progress towards the Millennium Development Goal (MDG) relating to drinking-water and sanitation (MDG 7, Target 7c).

Estimated coverage 2008	Ethiopia	Ghana	Zimbabwe	South Africa
% use of improved sanitation facilities (urban)	29	18	56	84
% use of improved sanitation facilities (rural)	8	7	37	65
% use of improved drinking water sources (urban)	98	90	99	99
% use of improved drinking water sources (rural)	26	74	72	78

Child Mortality Statistics South Africa, Ghana, Zimbabwe, and Ethiopia

The statistics below are sourced from a 2010 Lancet Study into the causes of child mortality⁵. The sheer numbers bring to light the gravity of the WASH problem, particularly in Ethiopia where rural water and sanitation coverage is extremely low.

Country	Total Number of Diarrhoea deaths in children aged 1-59 months in 2008	Notes
Ethiopia	70,944	WASH is leading cause of child mortality by a long way. Pneumonia second largest at 39,493
Ghana	4,868	WASH is second leading cause of child mortality after malaria
Zimbabwe	3,158	WASH is leading cause of child mortality
South Africa	6,187	WASH is second leading cause of child mortality after pneumonia

Future Australian government support for WASH

In its submission to the aid effectiveness review, the WASH Reference Group made the following key recommendations:

- The next strategic framework for Australia's aid program should recognise sanitation, hygiene and water as essential basic services and central to improving health, education, gender equality, to reducing poverty and to supporting sound economic growth.
- Increase the level of aid allocated to sanitation, hygiene and water to meet Australia's fair share of AUD 500 million / year. (Spending in 2009/10 estimated to be approximately \$180 million)
- Ensure that at least 50% of funding for WASH is allocated to sanitation.
- Focus on the poorest countries and the most off-track to meet the MDG's.

⁵ Black R et al. (2010) "Global, regional, and national causes of child mortality in 2008: a systematic analysis", *The Lancet* 2010; 375: 1969 - 87

The WASH Reference Group recommends that the Parliamentary delegation consider WASH during their visit; and consider how the Australian aid program can continue to support an improvement in WASH in Africa and to raise the important issue of WASH with government counterparts at opportune times.

Building Aid Effectiveness with WASH (Water, Sanitation and Hygiene)

Continue and expand the Water and Sanitation Initiative

- Put aid effectiveness into practice
- Build on a successful AusAID programme
- Help get the UN's Millennium Development Goals back on track
- Be supported by the water industry, faith-based organisations, research institutes and NGOs

WASH Reference Group

The 26 organisations that make up the WASH Reference Group represent hundreds of thousands of Australian households, health and research institutes, NGOs and industry:

- WaterAid
- Plan
- Care
- Engineers Without Borders
- International Water Centre
- Baptist World Aid
- World Vision
- Institute for Sustainable Futures
- Oxfam
- Red Cross
- AFAP
- Nossal Institute of Global Health
- International Women's Development Agency
- ChildFund
- Anglicord
- Anglican Board of Mission
- Australian Water Industry
- Caritas
- CBM
- ICAT Centre for Appropriate Technology
- Live and Learn Environmental Education
- Nusa Tenggara Association
- Save the Children
- UNICEF
- Uniting World Church

Why WASH is so cost effective

WASH is cost effective because it stops easily preventable disease and deaths. Nearly 1 in 5 child deaths – around 4,000 each day – is due to preventable diarrhoea.

It has been estimated that 88% of diarrhoeal deaths worldwide are attributable to unsafe water, inadequate sanitation and poor hygiene.¹

Diarrhoea remains the 2nd most common cause of death among children under 5, killing more than AIDS, malaria and measles combined.

Outbreaks of Cholera in 2010 (after the Haiti earthquake and the Pakistan floods) show how vulnerable communities are to unsanitary conditions.

Almost two-fifths of the world's population (2.6 billion people) lack access to sanitation. 1 in 8 people (884 million people) lack access to safe water.²

Saving lives, saving the MDGs

If the world is to achieve the MDGs then aid programs must become more effective at WASH and other outcomes.

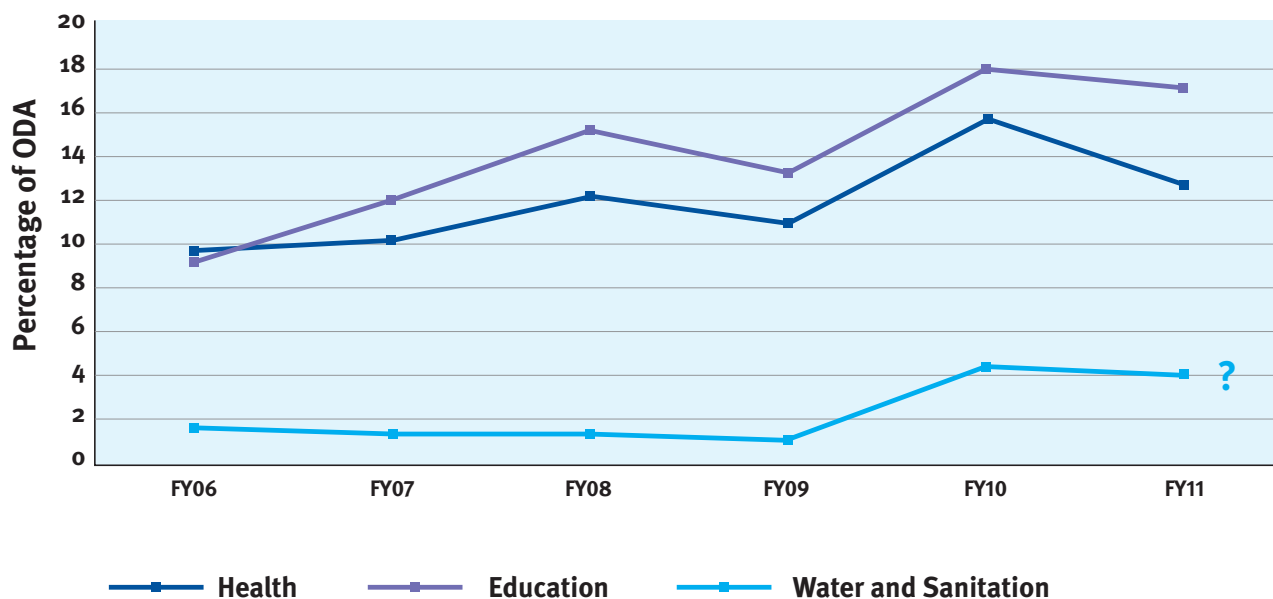
AusAID's \$300 million Water and Sanitation Initiative is cost-effective because it removes the drivers of disease. It ends in June 2011, just after the Independent Review of Aid Effectiveness concludes.

WASH programs should be preserved and expanded, as part of Australia's responsibility to get the MDGs back on track.

1. UNICEF and WHO (2009), *Diarrhea: Why children are still dying and what can be done*.

2. UNICEF and WHO (2010), *Progress on sanitation and water: 2010 Update*.

AusAID allocations to sanitation and water are very low compared to health and education and uncertain after June 2011



Sources: AusAID Statistical Summary; ARDE 2009 and Budget Documents

Our Call to Action

Senators and Members can make sanitation, hygiene and water a key focus of Australia's international development assistance policy by:

1. Committing to increase resources to sanitation, hygiene and water to \$500 million per year by 2015 and continue this over the long-term
2. Prioritising basic services and capacity building in poor countries that are the least likely to achieve water and sanitation MDG targets
3. Champion sanitation, hygiene and water everywhere, from the electorate and Parliament to regional and international fora

Next steps

- Speak to your colleagues
- Join the Parliamentary Friends of the Millennium Development Goals

How we can help

The diverse member organisations of the WASH Reference Group can support you with:

- Electoral and media awareness
- Speeches, questions or resolutions in Parliament and its Committees
- Briefing aid portfolio holders or policy committees in your party