Introduction:

The consumption of water and the generation of human waste are such commonplace aspects of human life that planning for the appropriate use or removal of them is often overlooked. The evidence is abundant that failure to ensure an adequate supply of safe water or to arrange for safe disposal of excreta is a major contributing factor to disease transmission, ill health, misery and death.

More than one billion people lack access to safe water and over three billion, half of humanity, do not have adequate sanitation facilities. The failure to promote a safe water supply and healthy hygiene practices often lead to the transmission of infectious diseases. The WHO estimates that 2.5 million people died from diarrhoeal diseases in 2000, 80% of them being children under the age of five. The number of people without adequate water and sanitation facilities could reach 5.5 billion in the next 20 years.

Access to safe water and sanitation is a human right as declared by the United Nations. In carrying out their humanitarian mandate in alleviating and improving the condition of the vulnerable populations of the world, both in ordinary times as well as in emergencies, the International Federation of Red Cross and Red Crescent Societies and individual National Red Cross and Red Crescent Societies are increasingly involved in the provision of Water and Sanitation services as part of the overall health and care interventions. Water and Sanitation programmes provide an integral link to the International Federation and it’s National Societies programmes from Disaster Management to Organizational Development and provide an avenue for the various technical sectors to collaborate and cooperate in their activities.

A careful, respectful approach to official community leaders and traditional and/or religious leaders is imperative. Local knowledge and advice is crucial, and utilization of the Red Cross/Red Crescent local structures is adamant. Cultural and traditional background information on the target community should be sought prior to approaching the community. When the community is committed, Government is informed and relationships with other players and local Red Cross structures are established, the engineering work may commence.

Important is the acknowledgement of effective international partnerships and the establishment of such.
Scope:

This policy applies to all Water and Sanitation interventions carried out by National Societies and the International Federation. National Societies and the International Federation’s programming and advocacy aims at incorporating Water and Sanitation objectives into general health and development programmes as well as in emergency situations.

Water and Sanitation is a Health initiative, clearly defined and seen as one of the most important aspects of preventive/public health. The Federation’s basic health policy has underlined the need for a community-based approach. Community Based Health Care can therefore not be considered without addressing the issue of Water and Sanitation coverage.

Statement:

The International Federation and each National Society shall:

1. Recognize the importance of having a regular exchange of information between the water supply and sanitation sector and the health information system and where possible and feasible collect and analyze health statistics and trends before starting any Water and Sanitation intervention and to monitor them during and after implementation to determine the projects impact upon the health status of the beneficiaries.

2. Acknowledge the need for appropriate assessment before any intervention, confirming the need as well as avoiding duplication of efforts made by other organizations and/or governments.

3. Recognize the issue of gender and the need for a gender-balanced approach to any Water and Sanitation intervention. Consult with and encourage the participation of all sections within the population in formulating objectives and identifying key public health issues, especially recognising the needs of women and children.

4. Ensure community participation and management in the programme, aiming at reducing implementation costs and to encourage ownership. Communities should naturally be involved from the onset. Participatory techniques (such as PHAST-Participatory Hygiene and Sanitation Transformation) are well established in Federation Water and Sanitation/Health Programmes.

5. Realize that the hardware (e.g. pumps, pipes) aspects of Water and Sanitation interventions are easier to implement compared to the software aspects. Hygiene promotion (hygiene education, community participation and management etc.) must be established parallel to, if not, before introducing the hardware. Hardware installations need to be sustainable for the community with the ability to maintain them leading to long-term ownership. This will ensure best possible community ownership, management and commitment. In emergencies minimum aspects of hygiene promotion need to be established.
6. Give due consideration to the use of appropriate local technologies and cultural preferences for the sustainability of the work. Imported solutions from developed countries are often bound to fail. This will require well designed projects that build community capacities, recognizing local leadership in operation and maintenance skills as well as build capacities within the National Red Cross and Red Crescent Societies.

7. Encourage the establishment of national society water and sanitation strategies for which this policy provides the base.

8. Ensure full attention to development of human resources like National Society staff, delegates and volunteers in the area of Water and Sanitation. Suitable training is required in technical, managerial and public health areas for most Water and Sanitation initiatives.

9. Respond to emergencies and disasters (population movements, camp situations etc.) which require Water and Sanitation interventions with qualified personnel following Red Cross/Red Crescent and other technical standards.

10. Design and implement Water and Sanitation operations aiming at an effective evolution from relief to development and consider the integration of related sectors e.g. Health Programmes, HIV/AIDS, food security, organizational development, disaster preparedness, as much as possible, keeping in mind that programs can have a developmental character right from the start and do not always evolve out of an emergency situation.

11. Formulate clear exit or phasing out strategies at an early stage of any Water and Sanitation intervention recognising the responsibility of the National Societies and the International Federation for the long term impact and durability of technical installations.

Responsibilities:

National Societies and the International Federation have the responsibility to ensure that all Water & Sanitation activities and programmes are carried out in compliance with this policy; that all staff and volunteers participating in such programmes are aware of the rationale and content of the policy; and that all relevant governmental, intergovernmental and non-governmental partners are adequately informed about this policy. It is the responsibility of the International Federation and it’s National Societies to adhere to Government Policies/Standards with regards to water quality issues. In the absence of such standards, the WHO drinking water guidelines need to be followed.

Reference:

This policy was adopted by the 8th Session of the Governing Board in Geneva, 21-23 October 2003.