WATER AND SANITATION The fastest breach

A ccording to WHO, in 2000 1.1 billion people (17% of the world's population) lacked access to an improved water supply. Nearly two-thirds of these people live in Asia. In Sub-Saharan Africa, at present four out of ten persons lack access to an improved water supply. In 2002, there were 2.6 billion people who lacked improved sanitation services. Nearly 1.5 billion of them lived in China and India. In Sub-Saharan Africa, only 36% had access to these services. These deficiencies are closely linked to diseases such as diarrhoea, malaria, ascariasis, trichuriasis, anchylostomiasis¹ and hepatitis A.

In addition, they are related to the existence of water sources which are contaminated with arsenic and fluoride. All of which implies the need to redouble focalized efforts to detect alternative sources of water and/or to implement procedures and technology capable of extracting them and guaranteeing healthy levels for human consumption.²

In short, these are essential aspects if sustainable development is to be guaranteed, since they involve basic conditions of existence and health. This is not only because the preservation of life is involved, in itself a sufficient end which cannot be delayed, but also because it involves the degree to which individual capabilities and the conditions for existence are affected. Together with malnutrition, water contamination leads to the alteration and reduction of the physical and cognitive capacity of large sectors of the population.

In general terms, deficiencies in water and sanitation no longer affect every region in the world. There are no countries either in Europe or in North America situated beneath the world average. In fact, the vast majority are situated in the best relative position, whereas in Sub-Saharan Africa and in South Asia nine out of ten countries are ranked below the world average.

Countries in East Asia and the Pacific, Latin America and the Caribbean, the Middle East and North Africa, and Central Asia show similar results. In the first place they mostly tend to be above the world average (63.9%, 81.6%, 83.3% and 88.9%, respectively). In addition, some of the countries in these regions have managed to achieve places in the best relative position: 36.8% in Latin America and the Caribbean, 27.8% in the Middle East and North Africa, 22.2% in East Asia and the Pacific, and 21.7% in Central Asia.

2 The principal mitigation strategies consist in the exploitation of deepseated water, using freshwater sources, building reservoirs and extracting harmful elements (source: "Water, sanitation and health", WHO.

CHART 1. Current Water and Sanitation Situation (number of countries)



TABLE 1. Current situation according to evolution of water and sanitation coverage (number of countries)

	-	+	н	\rightarrow	\rightarrow	Total
Worse relative situation	18	5	5	4	4	36
Below average	7	9	11	5	7	39
Above average	4	9	12	11	11	47
Better relative situation	1	6	48	10	7	72
Total	30	29	76	30	29	194

TABLE 2. Averages by indicator in countries with worst and best water and sanitation coverage

		Population with access to sanitation (%)	Population with access to improved water supply (%)
Worse relative situation	Average	24.7	53.0
	Number of countries	39	33
Better relative situation	Average	97.5	99.1
	Number of countries	55	75
Total	Average	67.3	84.9
	Number of countries	156	193

Special cases

Four of the countries in the worst situation are Niger. Ethiopia. Eritrea and Ghana - not necessarily because of their position in the Water and Sanitation Index, but because of the relative values of each of their indicators and their recent evolution These are countries which have suffered serious (Niger, Eritrea and Ghana) or slight (Ethiopia) regression. Some of them have also undergone very rapid demographic evolution: Niger increased its population from 7.7 million in 1990 to 10.1 million in 2000 and 14.2 in 2007; Ethiopia, from 53.5 million in 1994 to 73.9 in 2000 and 83.5 million in 2008; Ghana, from 17 million in 1995 to 18.4 million in 2005 and 23.5 million in 2007 (Eritrea has 4.9 million inhabitants but there is no data on population evolution).3

Beyond these similarities, two different situations should be noted. Niger and Ethiopia have undergone a significant drop regarding population with sanitation services between 2008 and 2009 (from 13% to 7%, and from 13% to 11%, respectively). In both cases, in a situation which was already alarming, now only 42% of the population has access to water from improved sources. These are mainly agricultural countries, with a life expectancy of 56 and 52 years and a rural population of 83% and 84% respectively.

The cases of Eritrea and Ghana are somewhat different. They are also basically agricultural countries, but they also have rich mineral resources (Ghana particularly, has gold, diamonds and manganese deposits). In both countries life expectancy is higher (57 and 60 years, respectively) and there is a relatively smaller rural population, particularly in Ghana. In both countries most of the population has access to improved water sources (60% in Eritrea and 80% in Ghana). Most countries are stagnant in their coverage of these services; although services reached acceptable levels, many countries are stagnant in a scenario of rigid limitations to the access of drinkable water and sanitation.

¹ Nearly 2 million people die every year due to diarrhoeal diseases – including cholera – 1.3 million die from malaria (in both cases 90% are children below the age of five) and 133 million suffer from intestinal helminthiasis with serious consequences resulting in some 9,400 deaths per year (source: "Water, Sanitation and Health", WHO. Available at: <www.who.int/water_sanitation_health/publications/ facts2004/es/index.htmb.

³ Statistical information published by UNESCO's Institute for Statistics (UIS) in: <stats.uis.unesco.org/unesco/ TableViewer>.