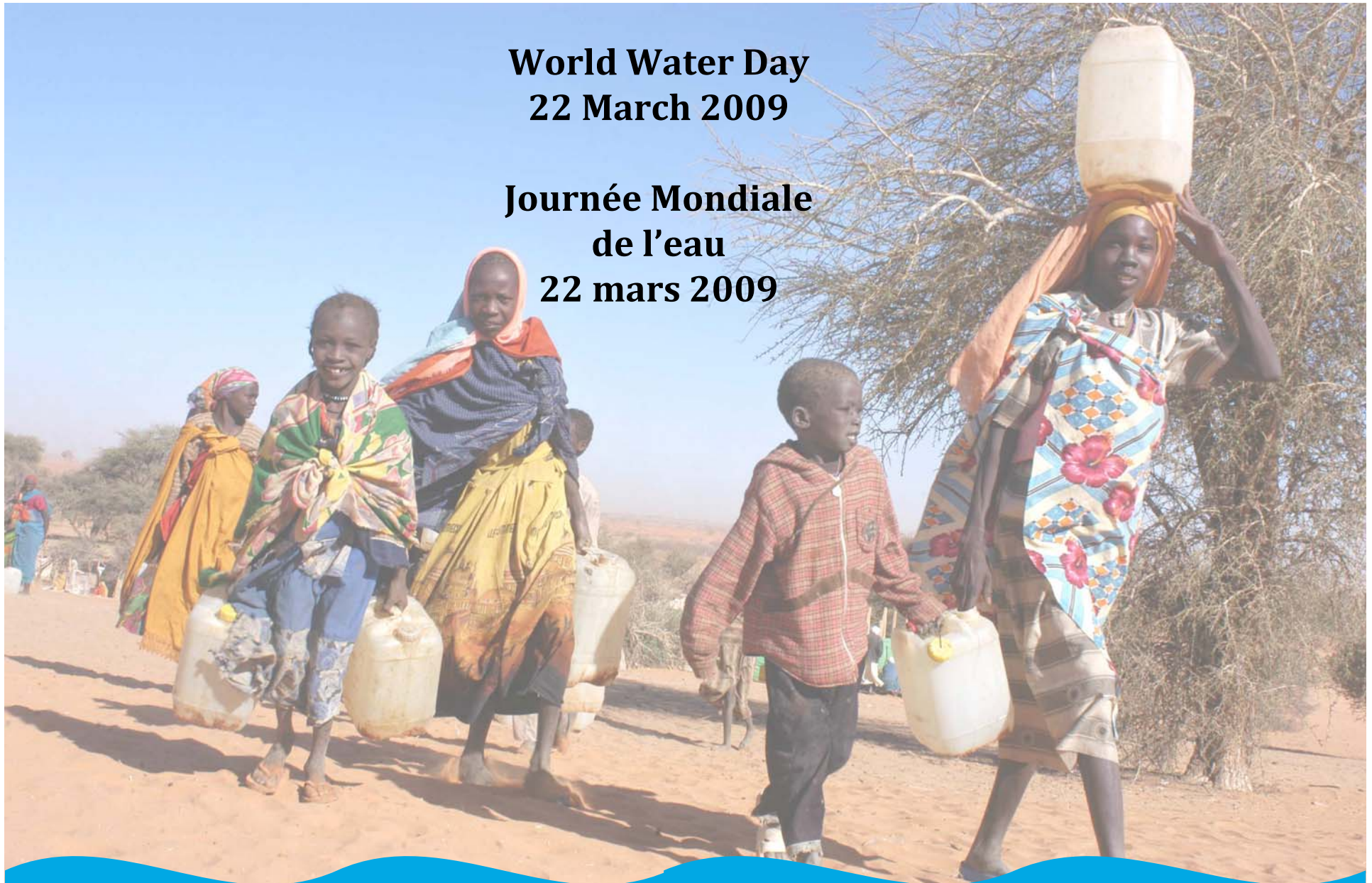


**World Water Day
22 March 2009**

**Journée Mondiale
de l'eau
22 mars 2009**



Walk for Water, Walk for Life



Access to Water

“Water is an essential tool for health and for protection...There is not enough awareness of the importance of water as a key instrument in development both at global level and at local community level”

- Mr. Antonio Guterres, High Commissioner for Refugees, 2008.



1.1 billion people (18 % of the world's population) lack access to clean drinking water.

In camp settings, 20 liters of clean water every day for each person and accessible within 200 meters is a UNHCR minimum standard.

20% of the world's population walk more than 1 kilometer to find water, which is often unsafe to drink.

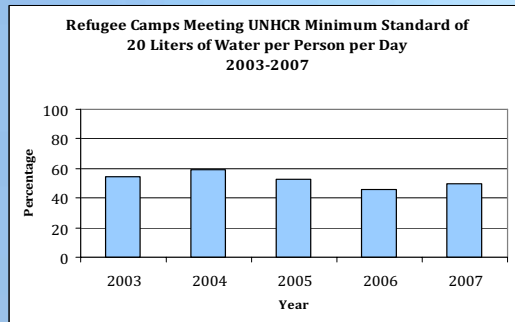
Timely and adequate provision of clean water to refugees is of special importance given that refugees face difficulties in fully exercising their rights and are very prone to exploitation.

Access to clean water and sanitation is vital to human health, promotes gender equality, supports primary education, and generates economic benefits.

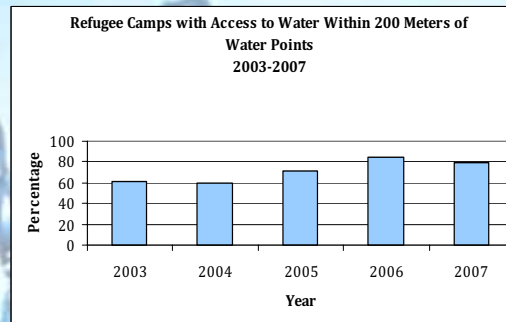
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Water and Sanitation Indicators

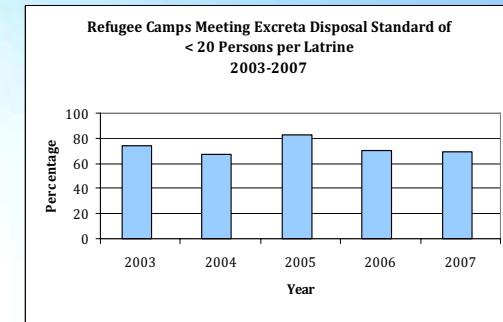
Quantity of Water



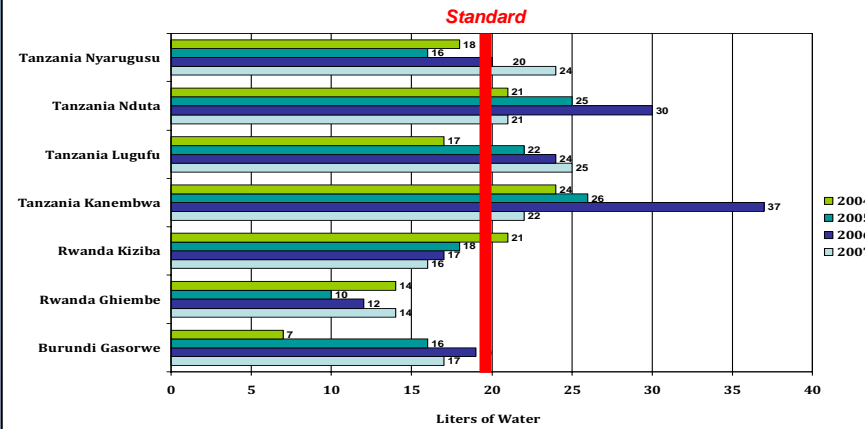
Distance to Water



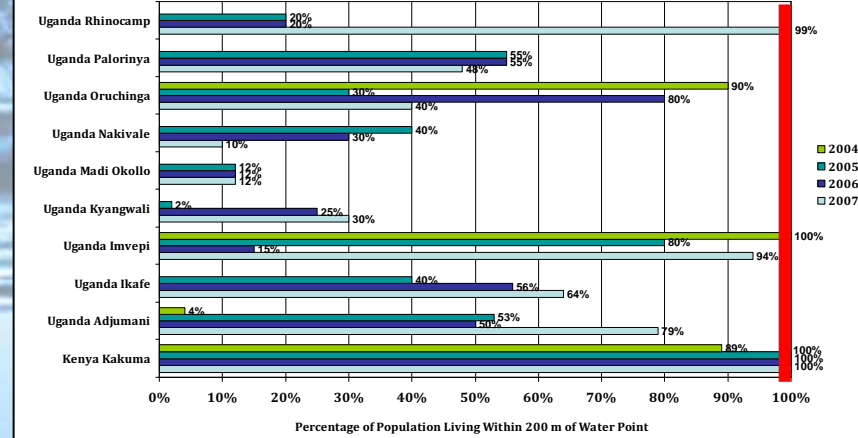
Latrine Ratio



Average Quantity of Water Available per Person per Day (Liters) in Selected Camps in the Central Africa - Great Lakes Region 2004 - 2007



Percentage of Population Living Within 200 m of Water Point in Selected Camps in the East and Horn of Africa Region 2004 - 2007

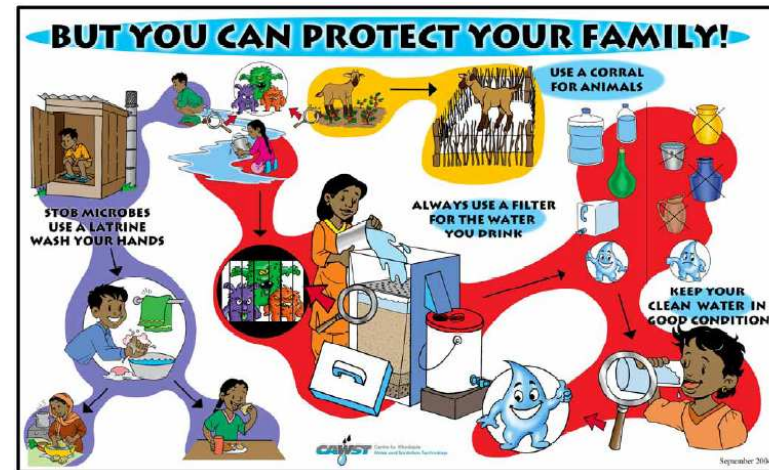
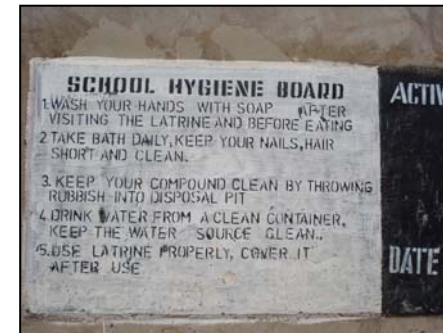


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Hygiene Promotion

Hygiene Promotion in an emergency aims to prevent diarrhea and other communicable diseases through:

- **Safe disposal of excreta**
- **Effective handwashing**
- **Reducing the contamination of household drinking water**
- **Improved living condition and environmental sanitation**



In refugee settings, Hygiene Promotion can **reduce health risks and associated social and economic burdens**, particularly on women and children. It is a way of **engaging with the community**. **Hygiene Promotion** can influence behavior and practices towards better use of water and sanitation services and **increase ownership of camp facilities**.

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Access to Sanitation

About 2.6 billion people (42% of the global population) lack access to basic sanitation.

In refugee camps, one-third of the population still lacks adequate sanitation.

For every **US\$ 1 invested** in improved sanitation, it shows an average of **US\$ 9 return in value**, in terms of avoided deaths, time and effort saved, more productivity due to less down time due to illness, as well as saved health costs.



Reasons for investing in latrines:

- Avoid discomfort of the bush
- Avoid dangers at night
- Reduce flies in compound
- Have more privacy to defecate
- Keep house/property clean
- Save time
- Make house more comfortable
- Gain prestige from visitors
- Reduce households health care costs
- Making it easier in old age/sickness
- For improvements in health

(London School of Hygiene and Tropical Medicine)



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Special Projects on Water, Sanitation & Hygiene Initiated by the High Commissioner



*Newly constructed 45,000 liters ferro-cement tank
in E-Block, NYP camp, Bangladesh*

In 2008, the HC approved a budget of \$ 5 million to address critical WatSan gaps in 16 UNHCR operations – 9 in Africa, 5 in Asia and 2 in MENA.

In 2009, under this initiative 17 UNHCR operations – 12 in Africa, 3 in Asia and 2 in MENA - have been selected to address WatSan gaps with a total budget of \$ 4 million.



*Borehole in Kityaza,
Nakivale Refugee Settlement, Uganda*



*Rehabilitated pump house
at borehole 3 in Dagahaley, Kenya*

Key activities include:

- Improvement & rehabilitation of aging WatSan facilities/infrastructures,
- Construction of new facilities for additional needs,
- Provision of non-food items (soaps, sanitation tools, etc.),
- Enhancing technical capacity to monitor and guide improved quality of services,
- Implementation of hygiene promotion activities.



*Borehole drilling in
Shedder camp, Ethiopia*

*Hand Pump in KTP camp,
Bangladesh*



*Bathing cubicles in NYP camp,
Bangladesh*



*Waste bins fabricated from half cut drums
awaiting distribution at Hagadera, Kenya*

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Water and Sanitation-related diseases

Almost **50 %** of people in developing countries are, at any given time, suffering from health problems linked to lack of clean water and sanitation

Major causes of illness in refugee situations are **acute respiratory infections, malaria and diarrheal diseases**. These can be prevented to a large extent by improved services in water, sanitation and hygiene.

Every week an estimated 42,000 people die from diseases related to low quality drinking water and lack of sanitation globally. Over 90 % of them are children under the age of 5.

Trachoma

About 6 million people are blind from trachoma, a disease caused by lack of water combined with poor hygiene practices. Providing adequate water supply could reduce the infection rate by 25%.

Cholera

Cholera caused more than 60.000 deaths among refugees during the Great Lakes crisis in 1994. The recent outbreak in Zimbabwe has killed 4000 people.

Diarrhea

Diarrheal diseases alone are responsible for the deaths of 1.8 million people every year (WHO, 2004). Refugees are especially vulnerable .

Malaria

Malaria is the **world's most important parasitic infectious disease** and is among the five leading causes of death in under-5-year-old children.. The ecology of the disease is closely associated with the water and sanitation management practices.

Anaemia

Several infections related to inadequate hygiene and sanitation, and lack of clean water are significant contributors to anaemia. **About 2 billion people suffer from anaemia** (WHO, 2000). Nine out of ten anaemia sufferers live in developing countries. Anaemia may contribute to up to 20% of maternal deaths.

Typhoid

Typhoid is a bacterial infection that can be transmitted through contaminated water and inadequate personal hygiene. Every year **17 million new cases occur worldwide**.

Malnutrition

Poor water and sanitation is an aggravating factor in malnutrition. Malnutrition increases the risk of disease and early death. Worldwide, malnutrition affects one in three people (WHO, 2000).

Schistosomiasis

Schistosomiasis is considered the **second most important parasitic infection after malaria**. Humans are infected when they enter larvae-infested water. **20 million are severely affected by the disease**.

Hepatitis A and E

Two of the viruses that cause hepatitis (hepatitis A and E) can be transmitted through contaminated water and food.

Almost one tenth of the global disease burden could be prevented by improving water supply, sanitation, hygiene and management of water resources

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Disease Outbreaks related to Poor Water and Sanitation among refugees

August 2008 – March 2009



Prevention is possible

A significant amount of disease could be prevented through access to water supply, adequate sanitation facilities and improved hygiene practices.

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Climate Change

Water is at the heart of climate change

Each year more than 200 million people are affected by droughts, floods, tropical storms, earthquakes, forest fires, and other natural disasters.

Rise in temperature increases incident of vector-borne diseases such as **malaria** and **dengue fever**.

Estimates suggest that in developing countries, **diarrheal** incidence will increase by 5% per °C increase in temperature, unless efforts are made to improve access to clean water.

Droughts as a result of climate change could increase the numbers of malnourished people by 75-125 million.

One consequence of climate change is the increase in extreme weather events, resulting in:

- Increased impoverishment of vulnerable people (disruption of livelihoods, loss of property etc)
- Increased potential for conflict over dwindling natural resources such as water and land
- Increased displacement and environmental migration (rising sea levels, increase of uninhabitable areas)

Refugee Operations

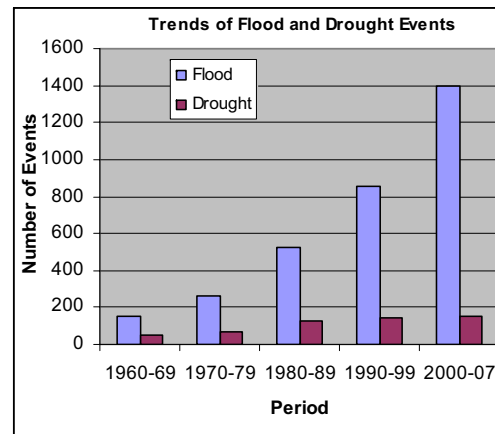
Camps are increasingly subject to recurring water-induced disasters such as floods and landslides, particularly in tropical and semi-tropical regions.

Refugee hosting areas, such as Dadaab (Kenya), Eastern Chad and Jijiga (Ethiopia) have in recent years seen significant changes to their climatic patterns with lower annual average rainfall.

This poses questions on how displaced persons can be hosted and managed if regional water resources cannot support traditional camps and/or if the camps are subject to frequent and severe water-induced disasters.



SOS Children (www.soschildren.org)



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