

32nd WEDC International Conference, Colombo, Sri Lanka, 2006

SUSTAINABLE DEVELOPMENT OF WATER RESOURCES, WATER SUPPLY AND ENVIRONMENTAL SANITATION

**Sanitation Policy in S Africa:
Does it address People with Disabilities?**

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South Africa is one of the countries facing the challenge of meeting the Millennium Development Goals (MDGs) for sanitation. At least five percent of the South African population consists of people with disabilities (PWDs) and the question remains whether sanitation delivery in the country is addressing the needs of this group of individuals. This paper reviews legislation and sanitation policy within South Africa to determine whether the needs of PWDs were being addressed. The review highlighted that PWDs are excluded by the policy. The conclusions of the review are that sanitation policy should be inclusive and adopt a holistic approach. This should be achieved by reviewing present policy to ensure inclusion and focus on PWDs; ensuring implementation of sanitation awareness programmes for PWDs, monitoring and evaluation of compliance to policy requirements and the introduction of economic measures such as subsidies, incentives and fines.

Background and Introduction

DATA collected in the South African Census 2001 indicated that there were over 2 million people with various forms of disability in the country. This number constituted 5% of the total population. (Statistics South Africa, 2005). People with disabilities PWDs are one of the minority groups of the South African population and are among the poorest, most vulnerable and marginalized groups in society. A large part of this group consists of African or black people, many of whom reside in rural areas, where a large number of the inhabitants are poor and have minimal access to basic services such as sanitation, water, electricity, health, education and recreational facilities (Office of the Deputy President, 1997). They are among a group of people identified as experiencing the greatest difficulties with the built environment, including their own homes and/or toilets.

The development of the Basic Household Sanitation policy in 2001 and the Strategic Framework for Water Services in 2003 by the South African government (National Department of Water Affairs and Forestry/DWAF), indicates the country's commitment to addressing water and sanitation issues. This policy framework lays the foundation for addressing the current sanitation backlog by 2010. This necessitates mobilisation and cooperation of all stakeholders (public and private) involved in sanitation implementation and for them to understand and accept their roles and responsibilities for sanitation service delivery (Duncker and Matsebe, 2005).

The Sanitation policy of South Africa is not only based on the principles of access to the service as a basic human right and a human health issue, but also on protection of the natural resources. Sanitation improvement is expected to be demand responsive; supported by an intensive health

and hygiene programme; ensure community participation; include integrated planning and development and ensure cooperative governance while at the same time promoting delivery at local government level. The sanitation services provided must be affordable and sustainable to the households as well as to local government (DWAF, 2001).

Despite having policies and strategic frameworks focusing on sanitation delivery and the commitment of the South African government to addressing basic needs within this sector, more than 16 million South Africans still lack access to safe, hygienic and adequate sanitation services (DWAF, 2005). In addition, these statistics do not highlight the number of PWDs who are without access to sanitation or who have already benefited from sanitation service delivery initiatives. The findings of census 2001 provided by Statistics South Africa (STATSSA) on access to basic service by PWDs, did not track any aspect around this sector. The focus was on housing, piped water, electricity and schooling or education (STATSSA, 2005). The questions remains, how can South Africa achieve the sanitation Millennium Development Goals, if the basic needs of vulnerable groups such as PWDs are not addressed?

This paper will highlight the available legislation and policy in South Africa in relation to sanitation and people with disabilities (PWDs). It will also recommend actions that could be taken to address exclusion of PWDS from the policies.

Policy and legislation in South Africa

Policy and legislation play a crucial role in establishing a framework of rights for disabled people, as it can either underpin or undermine activities at community level (Jones

et. al. 2002). A sanitation policy which includes PWDs indicates acknowledgement and recognition of the needs of this group and underpins addressing this need. On the other hand a strategic framework that sets sanitation targets overlooks the needs of PWDs in the process of achieving such targets, undermines the rights and basic needs of this group. These issues should be addressed to in sanitation policies, strategies and frameworks in South Africa to ensure that all our citizens are included in the service delivery process.

Since 1994, the South African democratic government has developed and promulgated several policies and legislation documents to address the imbalances of the past (regarding service delivery). The focus is on sanitation as one aspect of service delivery. There have been increasing legislation, policy and interventions aimed at enabling PWDs to be fully integrated into South African society.

The policies and legislation documentation included in this review include the Constitution, the National Housing Act; the Integrated National Disability Strategy (INDS), and the White Paper on Basic Household Sanitation.

Constitution (1996)

The South African Constitution developed in 1996, is one of the most progressive pieces of legislation in the world. It outlaws any form of discrimination on any aspect of identity, including disability. It emphasises achievement of equality, and the right to human dignity, which is particularly important in relation to disability issues since the dignity of PWDs is frequently compromised. The rights to a healthy and safe environment, adequate housing and sanitation are also recognised, although there is no specific reference to the access needs of PWDs. The government's constitutional responsibility to ensure that all citizens have access to adequate sanitation has been supported by other governmental policies, such as the White Paper on Basic Household Sanitation of 2001 and the Housing Act of 1997 - provision of universal access to sanitation. However, there is no specific reference to the needs of PWDs.

The White Paper on an Integrated National Disability Strategy (INDS)

This White Paper came into being in 1997, with the aim of providing a framework for writing policy to achieve full integration of PWDs (Office of the Deputy President, 1997). It draws on the UN Standard Rules on the Equalisation of opportunities for PWDs by identifying a number of key policy areas and suggests policy objectives, strategies and mechanisms for each area. The vision of the INDS is a society for all. This means that there must be an integration of disability issues in all government developmental strategies, planning and programmes. There must be integrated and co-ordinated management systems for planning, implementation and monitoring at all spheres of government. To complement the process, there must be capacity building and wide public education. The white paper does not highlight

sanitation as a key area which contradicts the concept of universal access highlighted in this strategy.

The Housing Act (1997)

The Housing Act No. 107, 1(vi) translates the right to housing into policy, stating that all citizens and permanent residents should have access to '... permanent residential structure with secure tenure' plus 'potable water, adequate sanitary facilities and domestic energy supply.' According to Coulson *et. al.* (2003), since South Africa has endorsed the United Nations Standard Rules, the concepts of universal access and the need for special provision for PWDs to ensure universal access appear in key government policy documents regarding housing (Housing Act, 1997) – provision of universal access to sanitation. The core argument lies in the fact that sanitation cannot be provided as a stand-alone, but is linked to other issues such as housing. The design of housing influences accessibility to proper sanitation.

White Paper on Basic Household Sanitation (2001)

The White Paper stresses that sanitation is not simply a matter of providing toilets, but encompasses other aspects that make up good sanitation provision. These include community participation in decision making, improved health of millions of people, safer living environments, greater knowledge of sanitation-related health practices and improved hygiene (DWA, 2001). Despite the ingenuity of the South African White Paper, one of the major shortcomings of this sanitation policy is that it does not make specific mention of PWDs.

South African reality

South Africa is faced with a high percentage of poor people with no access to proper sanitation including PWDs. PWDs are highly affected in a sense that sanitation facilities are not accessible to them e.g. the case of a wheelchair user and other disabilities.

The findings of the Department for International Development's (DFID) funded study on 'Enabled Environments: reducing barriers for low-income PWDs' conducted by the Council for Scientific and Industrial Research (CSIR) in 2001/2002, revealed that the lack of appropriate toilet facilities was a concern that was raised by PWDs in low-income settlements of Pretoria. The discussion centred on two key issues: the problems encountered by people with locomotor and visual disabilities who live in households with informal pit toilets, and the inaccessibility of flush toilets built (as part of the country's subsidised housing for low-income families) on household plots for wheelchair users and those who use other types of mobility devices (Coulson *et al.* 2003). It became apparent during the field research that although PWDs may be recorded as living on a plot that has a flush toilet (and therefore be counted amongst people who have access to adequate sanitation), this does not mean that the intended user is able to use the facility (Coulson *et al.* 2003).

Despite the South African Constitution being regarded as one of the most inclusive and progressive pieces of legislation, and having a White Paper which is specifically targeting the needs of PWDs in the country, some key policies still exclude this group. The White Paper on Basic Household Sanitation does not make specific reference to PWDs and this has resulted in their exclusion to accessing adequate sanitation facilities. Lack of policy that fully addresses the needs of a specific section of the population (PWDs), in this regard, is an institutional barrier. However, DWAF should be commended for recognising the need to develop technical guidelines for sanitation facilities for PWDs for the household sanitation programme. These are not yet available in the public domain (still need to be adopted).

Another shortcoming is the lack of intergovernmental partnerships in the South African context. The importance of such partnerships can for example, enforce the link between housing and sanitation. Improved housing designs have the potential of improving access to good sanitation. The argument is that there should not be separate designs for PWDs, but they should be accommodated in the normal standardised sanitation facilities (household).

Recommendations

In order to address the challenges highlighted regarding policy (above):

- it would be necessary for DWAF to review the sanitation policy to ensure that it is inclusive. For example, the sanitation policy does not mention PWDs, therefore it becomes difficult for implementers to include them in sanitation programmes.
- According to Elledge (2003) the following policy instruments can be used to ensure that the policy is effectively implemented: economic measures, information and education programmes and assignment of rights and responsibilities for providing services.
- *Economic measures* include user charges, subsidies, incentives and fines. Currently, the subsidy for a sanitation facility ranges between R2 400 and R3 300 per household, which covers materials, labour, social facilities and training, as well as project management. The subsidy is sufficient to build a toilet with a dimension of 1.2m X 1.5m width and a height of 2.2m (DWAF, 2004). This is too small for physically disabled people (mainly wheelchair users). Based on the above DWAF should increase the sanitation subsidy for PWDs to ensure that their needs are met. The increase or variation subsidy can cover amongst other things, extension of the structure and installation of assistive devices such as grab rails when inside the toilet and lower or upper position of the door handle depending on the individual needs of PWDs. Since the South African disability population comprised 5% of the entire population, 5% of the sanitation programmes or projects should be allocated to PWDs.
- Concerning *non-compliance*, there should be policies around withdrawal of subsidies for municipalities that

are not performing. DWAF should put monitoring mechanisms in place to ensure that municipalities implement sanitation programmes effectively, e.g. utilise the budget allocated for facilities of PWDs (adherence to the policy). Programmes should be evaluated and indicators need to be set to measure progress in relation to sanitation delivery to PWDs.

- The policy instrument on *information and education* programmes includes public awareness campaigns and educational programmes designed to generate demand and public support for efforts to expand sanitation services. DWAF should develop awareness raising campaigns and programmes aimed at PWDs. The programmes should be directed towards both the implementers (municipalities) and the general public. The municipalities should ensure that their sanitation programmes also benefit PWDs. The general public, which include PWDs and their families, need to be conscientised on the available sanitation disability subsidy, which can be used to adapt their toilet facility according to the individual sanitation needs of PWDs. It is also important to develop practical strategies of partnerships with other government departments that are involved in the delivery of social services e.g. housing, land, etc.
- *Assignment of rights and responsibilities* for providing services is another policy instrument. It highlights that national governments are responsible for determining the roles of national agencies and the appropriate roles of the public, private, and non-profit sectors in programme development, implementation, and service delivery. DWAF should have a champion for PWDs to take on the responsibility of raising awareness in terms of their sanitation needs.
- There should not necessarily be sanitation facilities designed specifically for PWDs only, but they should be accommodated within the normal standardised sanitation facilities (household).
- For the programmes to be inclusive, all the factors discussed above should be integrated holistically, i.e. policy review, implementation of programmes, monitoring and evaluation, non-compliance.

Despite DWAF's development of the technical guidelines (draft) for technical advice and guidance for the design of latrines for PWDs and the modification of existing latrines to cater for people with disabilities some thoughts on the design of standard latrines to cater for the needs of the temporarily disabled or incapacitated is still needed. The Department should therefore, speed up the process of approving and implementing the guidelines as well as keeping records of all beneficiaries (categories should include PWDs) in order to have a clear figure for the backlog.

It is the government's responsibility to ensure that poverty reduction programmes, universal primary education drives and economic growth targets include all citizens (including PWDs) if they are to meet their objectives. Without addressing

the sanitation needs of PWDs, it might not be possible for the above programmes to be inclusive of all sectors of the communities. For example, the poverty alleviation programmes should take into account the sanitation needs of PWD in order for them to fully participate in such programmes.

Conclusion

Despite the existence of sanitation policy and legislation in South Africa, in practice this appears to have resulted in only limited improvements in disabled people's lives (there is a gap between the translation of policy and reality). Legislation has contributed to the social exclusion of PWDs. It fails to protect the rights of PWDs to basic sanitation services and through the focus on meeting national and international targets, barriers are created to prevent PWDs from accessing equal opportunities. The policy has failed to fully integrate the sanitation needs of PWDs (mainly at household level). As a result, large sections of the sanitation policy framework in South Africa still fail to meet international human rights standards and principles with regard to the rights of PWDs. The exclusion of disabled people not only has an impact on individuals, but also on their families and communities, in both human and economic terms.

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