

Supportive Environments for Healthy Communities

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This issue contains recent studies and reports on health-related aspects of water, sanitation and hygiene (WASH) in slum areas. Included are the latest UNICEF State of the World's Children report, a research report on sanitation-related disease burdens of the urban poor and country reports from Ghana, India, South Africa and Uganda. Also included are news articles on a USAID urban health exchange tour and links to WHO and other urban health websites.

Please let WASHplus know at any time if you have resources to share for future issues of WASHplus Weekly or if you have suggestions for future topics. An <u>archive</u> of past Weekly issues is available on the WASHplus website.

IN THE NEWS

 Feb 2012 – USAID: Urban Health Professionals from India and Ethiopia Inspired by Study Tour, (Link)

In February, urban health program managers from Ethiopia had a unique experiencesharing opportunity as they traveled to India to learn how health issues are being tackled in its highly diverse urban and peri-urban communities.

Water & Sanitation for the Urban Poor (WSUP): Urban Voices, (Website)
 Stories of five low income urban consumers and how they overcame barriers to accessing safe, affordable water.

REPORTS

Children in an Urban World: State of the World's Children, 2012. UNICEF. (Full-text)

The rate of water and sanitation coverage is not keeping pace with urban population growth. Access often entails long queues and high costs. Without access to water mains, the urban poor often pay up to 50 times more for a liter of water than their richer neighbors. Sanitation also remains a major issue – as urban populations increase, so does the number of people practicing open defecation. That number rose by 20 per cent between 1990 and 2008. The impact of open defecation in densely

populated urban settlements is particularly alarming for public health.

 Estimating Inequities in Sanitation-related Disease Burden and Estimating the Potential Impacts of Propoor Targeting, 2012. R Rheingans, SHARE. (Fulltext)

An objective of this study was to model the spatial distribution of sanitation-related health burdens and benefits for 10 low-income countries. One of the key results is that while rural populations generally have lower levels of access, the sanitation associated risk may be greater for the urban poor due to the increased likelihood of these households being in areas with a high density of people without sanitation.

 Exploration of the Impact of the Lack of Sanitation on Women in the Slums of Kampala, Uganda, 2011. K Massey, SHARE. (Full-text)

The lack of substantive evidence concerning the connection between violence against women and inadequate access to sanitation demonstrated a need for further research. The aim of this qualitative study was to explore whether women are exposed to humiliation, violence and rape as a result of inadequate toilet facilities, and to examine the scope and impact of this association in order to inform future policy and programming.

 Hidden Cities: Unmasking and Overcoming Health Inequities in Urban Settings, 2010. WHO; HABITAT. (Full-text)

Some key messages from this report include: urban growth has outpaced the ability of governments to build essential infrastructures, and one in three urban dwellers lives in slums; to unmask the full extent of urban health inequities, it is important to disaggregate health and health determinants data within cities and solutions often lie beyond the health sector, and require the engagement of many different sectors of government and society.

 A Social Impact Assessment of the Impact of Two Waste-to-Energy Plants on Wastepickers in Delhi, 2011. Chintan/India. (Full-text)

The study shows that when waste-to-energy plants reduce the amount of waste that wastepickers have access to as a source of income (primarily through recycling), most do not change occupations but rather adapt and families will increase the number of wastepickers or the amount of time they spend in search of waste. This will negatively impact the amount of time that child wastepickers can spend on education and some may be forced to drop out of school. The report recommends that firms that operate these plants be required to include human resource considerations for these wastepickers and that these efforts be monitored and evaluated.

Turning Slums Around: The Case for Water and Sanitation, 2011. WaterAid.
 (Full-text)

There is an unacceptably weak global policy response to the water and sanitation crisis

in the rapidly expanding slum areas of the developing world. Without a serious commitment to redress the low political and financing priority given to sanitation and water in housing and urban development, and slum upgrading, the growing challenge of urbanization risks setting off an unmanageable health, education and economic crisis.

 Winning the Race: Sanitation in Rapidly Growing Towns, 2011. D Schaub-Jones, IRC. (Full-text)

The majority of urban growth is not in "mega-cities" but in the small and medium-sized towns of today. Rapidly growing towns have fewer resources and often little existing sanitation infrastructure. However, their small size and lower housing density also create significant opportunities for action. This note highlights how smaller towns typically act as a bridge between rural and urban, which permits the development of new, original strategies.

JOURNAL ARTICLES

- Analyzing Sanitation Characteristics in the Urban Slums of East Africa, Water Policy, Mar 2012. G G Szánto, Environmental Policy Group. (Abstract)

 This paper analyses the interface of sanitation policy and technology domains by reviewing the distribution and local characteristics of current centralized and decentralized sanitation options. The findings confirm that conventional, centralized sanitation is an unrealistic solution for application in slums. Simplified sewerage may prove appropriate, but the reported initiatives are in the planning phase only. At present, only decentralized sanitation options are found to be viable in the assessed slums, but their servicing is increasingly neglected by the municipal authorities. The quasi-monopoly of pit latrines implies that improved sanitation technologies are not sufficiently rooted yet. Public toilets are crucial to these slums, especially where land tenure issues prevail. Although the potential of ecological sanitation is currently negligible, novel bio-centered initiatives are promising.
- Health Care for Urban Poor Falls Through the Gap, Lancet, Feb 19, 2011. P
 Shetty. (Full-text)

The urban poor rarely fare better than their rural counterparts when it comes to health. Infant mortality and childhood vaccination rates are about the same in both populations. If anything, the health of the urban poor can be even worse than that of rural populations. According to the Urban Health Resource Centre in India, slum children are even more likely than rural children to be malnourished. Overcrowding makes outbreaks of respiratory diseases such as tuberculosis much more likely. For instance, in impoverished parts of the city of Karachi in Pakistan, tuberculosis prevalence is twice the national average. Running water and sewage systems are non-existent in most slums.

. The Impact of Densification by Means of Informal Shacks in the Backyards of

Low-Cost Houses on the Environment and Service Delivery in Cape Town, South Africa, Environ Health Insights, May 2011. T Govender, Stellenbosch University. (Full-text)

This paper investigates the state-sponsored low cost housing provided to previously disadvantaged communities in the city of Cape Town. The strain imposed on municipal services by informal densification of unofficial backyard shacks was found to create unintended public health risks. A high proportion of main house owners did not pay for water but sold water to backyard dwellers.

Motivating Behaviour Change to Reduce Pathogenic Risk Where Unsafe
 Water Is Used for Irrigation, Water International, July 2011, 476–490. H Karg,
 University of Freiburg. (Full-text)
 Based on experiences from Ghana, where informal wastewater irrigation occurs around
 all cities, the necessary steps for increasing adoption probability are outlined under a
 generic framework, which is based on the four pillars of social marketing, incentive
 systems, awareness creation/education and application of regulations. Cost

effectiveness can be improved by linking related efforts with other hygiene and food

 Neighborhood Urban Environmental Quality Conditions Are Likely to Drive Malaria and Diarrhea Mortality in Accra, Ghana, Journal of Environmental and Public Health, Apr 2011. J Fobil, Bernhard Nocht Institute for Tropical Medicine. (Full-text)

There was strong evidence of a difference in relative mortality of malaria across urban environmental zones of differing neighborhood environmental conditions, but no such evidence of mortality differentials was observed for diarrhea.

 When Urban Taps Run Dry: Sachet Water Consumption and Health Effects in Low Income Neighborhoods of Accra, Ghana, Health and Place, Sept 2011. J Stoler, San Diego State University. (Full-text)
 In Accra, Ghana, municipal water is rationed to meet demand, and the gap in water

services is increasingly being filled by private water vendors selling packaged "sachet" water. Sachets extend drinking water coverage deeper into low-income areas and alleviate the need for safe water storage, potentially introducing a health benefit over stored tap water.

WEBSITES

- International Institute for Environment and Development (IIED)/Human Settlements
- International Society for Urban Health (ISUH)
- WASHplus Urban Health Updates

safety interventions.

• WHO Country Profiles on Urban Health

Each WASHplus Weekly highlights topics such as Urban WASH, Indoor Air Pollution,

Innovation, Household Water Treatment and Storage, Hand Washing, Integration, and more. If you would like to feature your organization's materials in upcoming issues, please send them to Dan Campbell, WASHplus knowledge resources specialist, at dacampbell@fhi360.org.



About WASHplus - WASHplus, a five-year project funded through USAID's Bureau for Global Health, creates supportive environments for healthy households and communities by delivering high-impact interventions in water, sanitation, hygiene (WASH) and indoor air pollution (IAP). WASHplus uses proven, at-scale interventions to reduce diarrheal diseases and acute respiratory infections, the two top killers of children under five years of age globally. For information, visit www.washplus.org or email: contact@washplus.org.



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