



Unlocking Cambodia's future by Improving Access to Basic Drinking Water, Sanitation Services and Hygiene



Less than 65% of the Cambodian households have access to an improved water source, and only 76% have access to improved sanitation.ⁱ This is among the worst levels of access to improved water in Asia.ⁱⁱ

What is happening?

Good hygiene remains a substantial obstacle to development and growth in Cambodia, having one of the highest rates of open defecation in the region with 6 million people continuing the practice.ⁱⁱⁱ Households in rural areas are substantially worse than in urban areas, with 98.9% of households in Phnom Penh having flushable toilets connected to sewerage, compared to only 70.9% in rural areas.^{iv}

Even where toilets are available, their type and condition vary, and they are not sufficiently available in public services where children and vulnerable citizens frequent. For example, less than 30% of separate public preschools have latrines and hand washing facilities, and less than 60% of primary schools have access to safe water and hand washing facilities.^v Analysis of social accountability data at schools shows that 20% of the issues raised by citizens to be addressed as a priority by local authorities related to access to clean water and sanitation at the school.^{vi}

Similarly, health care facilities are often reported as having insufficient water, sanitation and hygiene amenities, with only 50% reported by the National Institute of Public Health as always having sufficient water for their needs. Health care services cannot adequately respond to health needs without access

to clean water. Positively, health centers have much better performance in regards to general sanitation, although they lack separate toilets for males and females as well as the relatively basic additions that make toilets accessible for people with reduced mobility who would frequent the health center (such as pregnant women, people with disabilities, the elderly, and menstrual hygiene facilities for women and girls).

Access to improved water supplies is also low, with only 58% of rural households having access to an improved water source, leaving over 1.1 million rural households without access to an improved water source.^{vii}

Access to clean water, sanitation and hygiene is enshrined in the United Nations Convention on the Rights of the Child, and is a key component of achieving **SDG 6**:



Ensure availability and sustainable management of water and sanitation for all.

What is the impact if not addressed?

Cambodia is not on track to achieve its 2030 targets for improved sanitation.^{viii} Low access to sanitation, safe drinking water, hygiene services can have serious consequences for children, including high occurrences of diarrhea, skin disease, respiratory illness (such as pneumonia), intestinal diseases and other waterborne and excreta-related diseases. All of these can cast a shadow over child health and, in many cases, result in death. Diarrhea is the second-largest cause of infant and under-5 mortality in Cambodia – one of the highest rates in the region.

Poor sanitation and hygiene also impacts Cambodia's economic growth, especially as it is a key driver of malnutrition in children, which in turn impedes human capital development.^{ix}

What are the obstacles to progress?

The challenges in water, hygiene and sanitation reveal substantial inequality between urban and rural areas, and across wealth quintiles, which links the issue to a range of other underlying challenges in social development. People living in urban areas have higher scores on all indicators of water and sanitation than people living in rural areas (for example, open defecation is five times more prevalent in rural areas than urban)^x and prevalence of diarrhea is highest in poorer household than wealthier ones.^{xi}

Everyday practices that can perpetuate problems are difficult to alter. Too many children are at risk from unsafe water practices, with 31% of households reporting that they do not do anything to treat drinking water before consuming it.^{xii} Additionally, water can quickly become contaminated by fecal matter, industrial waste or other naturally occurring contaminants. The level of fecal contamination at household level is high (including E. coli bacteria) and leads to diarrhea and disease among Cambodian children.^{xiii}

Other issues that are culturally sensitive, such as menstruation, also pose a challenge to progress. Many women fear speaking openly about such topics, and many girls leave school in order to manage their menstrual hygiene as schools may not provide the needed facilities for privacy or hygiene (such as a discreet and simple way of disposing of sanitary pads).^{xiv} The 2016 minimum requirements for water and sanitation/hygiene in schools establishes the expectation that girls must be able to manage their hygiene needs at school in a safe and comfortable way.

Given the complexity and wide ranging nature of hygiene, sanitation and water management, the Royal Government of Cambodia has been working to address challenges through multi-sectoral policies and working groups which complement sector-specific initiatives.^{xv} This multisector approach is critical for ensuring improved water, hygiene and sanitation transitions into other development outcomes for children, especially reducing malnutrition. However, like in many other areas of child rights, implementation has been challenging with local actors having limited knowledge of the broad impacts of poor sanitation and hygiene, as well as limited funding to support local initiatives.

Resource mobilization for national programs that improve water and sanitation access, and that are nutrition sensitive, has also been challenging. The Ministry of Rural Development has launched an Action Plan for 2019-2023, which is estimated to require at least \$898.4 million to achieve ^{xvi}– a daunting yet necessary investment if goals are to be reached in this area. While it is unclear how much is being spent by all stakeholders in Cambodia, sporadic data suggests that current investment is dramatically insufficient.

What needs to be done?

All government ministries have a role to play in improving water, sanitation and hygiene in Cambodia, including by improving planning and coordination among fragmented stakeholders and actors (including donors, private operators and NGOs).

To change the game on access to basic drinking water, sanitation services and hygiene, the Child Rights Now! coalition recommends that the Royal Government of Cambodia:

1. Hold multisector and inter-ministerial **coordination mechanisms more accountable** for joint planning, data management and reporting on progress against government Action Plans.
2. Use the decentralization process to **improve the institutional capacity of government departments** and actors, especially at sub-national level, for planning, budgeting and reporting for water, sanitation and hygiene services.
3. Increase **funding and budget transparency** for water, sanitation and hygiene services in order to expediate implementation of existing
4. Ensure water, sanitation and hygiene services and programs are **gender transformative** – being comprehensively proactive on the obstacles we know girls and women face, especially in rural and remote areas of Cambodia.
5. Ensure all stakeholders responsible for water, sanitation and hygiene implementation are aware of the **potential to significantly reduce malnutrition** through their efforts and ensure government actors are reporting accurate data that aligns with indicators in the National Strategy on Food Security and Nutrition (2019-2023).
6. Respond to the data becoming available through social accountability processes (ISAF) and other assessment data by **prioritizing improved water, sanitation and hygiene at all public facilities** (especially schools and health centers).

How child rights are the key to future economic growth and development in Cambodia

On child rights, Cambodia has achieved in less than three decades what many nations took a century to achieve. However, sustaining economic growth and achieving the country development targets will require increased productivity and innovation by a skilled, educated and healthy workforce. These workers are today's children and they continue to experience gaps in the full realization of their rights preventing them to reach their full wellbeing and potential.

For Cambodia to continue its growth and achieve its ambitious plans for 2030, we need to “change the game” for children and address these gaps.

The Child Rights Now! coalition believe that putting children at the center of Cambodia's development strategy will ensure the dramatic progress on child rights needed to develop the human capital Cambodia requires to meet ambitious growth and development targets, including the Cambodian Sustainable Development Goals and becoming an upper-middle income country by 2030.

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- i National Institute of Statistics, Ministry of Planning, 2018: Cambodia Socio-Economic Survey 2017.
 - ii FAO, 2018. Asia and the Pacific Regional Overview of Food Security and Nutrition 2018. p.48
 - iii FAO, 2018. Asia and the Pacific Regional Overview of Food Security and Nutrition 2018. p.52
 - iv National Institute of Statistics, Ministry of Planning, 2018: Cambodia Socio-Economic Survey 2017.
 - v Ministry of Education, Youth and Sports, 2019: Education Strategic Plan 2019-2023, pp.22 & 27.
 - vi Through the program Implementation of the Social Accountability Framework (ISAF), more than 250,000 people took part in the evaluation of education services in 1400 primary schools and 450 health centers in 60% of the municipalities of the country. The data mentioned here is an aggregation of their assessment.
 - vii National Institute of Statistics, Ministry of Planning, 2018: Cambodia Socio-Economic Survey 2017.
 - viii WHO & UNICEF, 2017: Progress on Drinking Water, Sanitation and Hygiene: 2017 Update and SDG Baselines. p.11.
 - ix World Bank Group, 2019: Cambodia Economic Update May 2019
 - x National Institute of Statistics, Ministry of Planning, 2018: Cambodia Socio-Economic Survey 2017, see also FAO, Cambodia - Food and Nutrition Security Profile.
 - xi National Institute of Statistics, Directorate General for Health, 2013: Factors Associated with Utilization of Health Services for Childhood Diarrhea and Fever in Cambodia.
 - xii NIS, 2015: Cambodia Demographic and Health Survey 2014. p.40.
 - xiii Poirot, E. et al, 2018: Water quality for young children in Cambodia—High contamination at collection and consumption level.
 - xiv Cowley, Sarah, 2018: From taboo to empowerment through menstrual management and education, UNICEF. Available at <https://unicefcambodia.blogspot.com/2018/03/from-taboo-to-empowerment-through.html>
 - xv For example, the National Strategy for Food Security and Nutrition (NSFSN 2014-2018) that integrates WASH, nutrition, social protection and agriculture programs nationally and at the community level.
 - xvi National Action Plan II presentation at the 2019 Watsan Retreat.