

## MDG 7 – ENSURE ENVIRONMENTAL SUSTAINABILITY

### WHY SHOULD THE WATER AND SANITATION SECTOR CONSIDER DISABLED PEOPLE?

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#### DISABILITY IS A POVERTY ISSUE

As many as one in five of the poorest of the poor is likely to be disabled. Poverty both causes and is caused by disability.

#### So why are poor people more likely to be disabled?

- Poor nutrition, bad water, poor hygiene and sanitation, limited health services, lack of information and HIV and AIDS are some of the causes of impairment.

#### And why are disabled people more likely to be poor?

- Inadequate treatment and equipment, lack of education or employment and discrimination all contribute to poverty. Disabled people are at high risk of HIV infection, as they have least access to information and tools to protect themselves.

#### HEADLINE FACTS

- Disabled people are among the poorest, most vulnerable and marginalised groups in society.
- Development targets for water and sanitation will never be equitably met unless disabled people's needs are included.

- The biggest problems for disabled people are obstacles in the environment, not their own impairment.
- Water and sanitation providers have a key role in reducing physical and infrastructural barriers in the environment.
- Disabled people often need only minor changes to be made to enable them to be included in ordinary water and sanitation service provision. Specialist skills and knowledge are therefore not required.
- Making water and sanitation facilities more accessible benefits everyone in the community, such as the elderly, the young and those who are ill.

#### THE IMPACT OF DISABILITY

The impact of disability is usually felt by the whole family, through lost income, treatment costs and the reduced well-being of everyone.

Lack of clean water and sanitation keep people poor, unhealthy and unable to improve their livelihoods. Disabled people have the least access to these services, which compounds their isolation, poor health and poverty.

A lack of accessible sanitation facilities can have a double impact. For example, in communities where women defecate at night, moving around in the dark is extra hazardous for a disabled woman.

Some disabled people manage with inaccessible facilities, others do not. Some receive support from disability services, such as individual equipment and advice. Others develop their own solutions, adapting local materials to make equipment that suits them.

**A 60 year old disabled man had a simple toilet of bamboo pieces placed over a ditch. It was very old and did not provide any privacy so he only used the toilet at night. Finally the bamboo broke one night and he was found dead the next morning, having fallen into the ditch full of stinking, dirty refuse. CRP, Bangladesh**

However, water and sanitation are personal issues, so solutions are often not shared with others, leaving disabled people and their families searching for solutions alone.

It is therefore clear that development targets such as the Millennium Development Goals of poverty reduction, improved health and access to safe water, will never be equitably met unless disabled people are included. Providers recognise the need to target the poorest sections of society, to provide more equitable access to basic services. This must therefore include disabled people.

## BARRIERS AND OBSTACLES FACED

Most problems for disabled people in accessing water and sanitation facilities are caused not by their impairment, but by external factors, as in the examples below:

External factor	Example
Natural environment	Muddy pond/river banks Distant water sources
Physical infrastructure	Narrow entrances and steps High well walls
Institutional	Strategies ignoring disabled people Lack of consultation with disabled people Lack of knowledge and information
Social	Prejudice and isolation

It is often possible to make changes in this external environment. This is where the knowledge and skills of the water and sanitation service provider are indispensable.

## WHY ADDRESS THE ISSUE OF DISABILITY

### Human rights

The right to safe water is enshrined in Article 25 of the UN Declaration of Human Rights and in Article 27 of the UN Convention on the Rights of the Child.

For the majority of disabled people in low-income communities, accessing their basic needs and rights is a daily struggle.

### **Benefits of inclusive facilities**

Many people, such as the elderly, pregnant women, girls, parents with small children and people who are injured or sick may have difficulty with balance, coordination, weak grip, squatting or lifting. Because of this they experience many of the same problems as disabled people, although they are not described in this way. Inclusive planning of water and sanitation services therefore benefits the whole community, and often involves only minor adjustments to ordinary services.

### **Cost effectiveness**

It is much cheaper to plan from the outset to make services inclusive for disabled people, than to provide 'special' services which only a small minority benefit from.

### **Gender**

Where traditional family ties are strong, support is offered to disabled and frail family members. Improved services for disabled people also benefit those who provide that support, usually women and girls (by reducing their workload), who would otherwise be taken out of school.

**Before the treadle pump was installed, it used to take Mrs Nourn a whole morning to fetch four buckets of water from the river. As she is blind, one of her children would guide her there and back. Now she can draw water without a guide and all her children can attend school.**

## **INCLUSION AND ACCESS IN PRACTICE**

Although the water and sanitation sector is developing planning and design approaches to understand and respond to the needs of different communities, still the service delivery process often excludes disabled people, and their concerns and needs remain hidden.

### **The nature of exclusion**

Exclusion of disabled people often arises through a lack of awareness or thought. For example, holding a meeting on the second floor of a building, with no lift or ramp, excludes people who have difficulty walking. Social factors can also lead to exclusion, such as when it is the norm for powerless groups, such as women, disabled people and people of low caste, to speak only when asked a direct question, thereby limiting participation. This is why inclusive design has to be seen to benefit the whole community, by making buildings and services accessible for everyone.

### **What does equal access mean?**

Disabled people do not expect more or better facilities than other people, only equal access and opportunity to participate in family and community life. However, equal access and equality of opportunity do not mean that everyone must be treated exactly the same, as some people may need something different or extra. For example, for a person with difficulty walking to have equal access to water (i.e. to spend a similar amount of time fetching water as her neighbour), the water point needs to be nearer to her home than to that of her neighbour. Services need to be designed to be able to provide a flexible range of options to accommodate a range of needs. Some

disabled people have healthcare needs, and require certain equipment to support them to access water and sanitation facilities – a wheelchair for example. However, to provide this individual support, but without accessible services being available, is often of little or no use to the disabled person concerned.

### **But I'm not a disability specialist...**

The needs of most disabled people could be met by ordinary facilities and services. Service providers only need a little more information, thought and awareness to make the differences to ensure the inclusion of a disabled person. Usually a 'special' service is not required. This means that service providers cannot simply pass responsibility for disabled people to 'specialists'. Doing nothing is unacceptable. All service providers need to consider ways to ensure that disabled people are not excluded from their services and programmes.

### **Collaboration with disabled people**

Whilst engineers have design knowledge and skills, they are not always aware of the needs of disabled people. Disabled people on the other hand, do understand what their access needs are, but because they are not generally knowledgeable about engineering, they tend to be unaware of what solutions may be possible. So, when planners and engineers start the process of designing a water and sanitation project, they should consult local disabled people's organisations, including women's sections, to get their input.

## **FINAL THOUGHTS**

Water and sanitation services cannot ignore the issue of disability for much longer. The knowledge and skills

of the water and sanitation sector will play a vital part in making changes in the physical environment and in service delivery approaches, to provide more inclusive access to disabled people and other vulnerable groups.

This briefing note raises awareness about the need to address disability issues within water and sanitation service provision.

## **KEY REFERENCES**

Jones, H.E. and Reed, R.A. (2005) *Water and sanitation for disabled people and other vulnerable groups: designing services to improve accessibility*. Water Engineering and Development Centre; DFID: UK.

<http://wedc.lboro.ac.uk/wsdp>

DFID (2000) *Disability, Poverty and Development. Issues Paper*. Department for International Development: UK.

<http://www.dfid.gov.uk/Pubs/files/disability.pdf>

Elwan, A. (1999) *Poverty and Disability: a survey of the literature*. World Bank: Washington.

<http://siteresources.worldbank.org/INTPOVERTY/Resources/WDR/Background/elwan.pdf>

European Disability Forum (2002) *Development Cooperation and Disability*. European Disability Forum: Brussels.

<http://www.edf-feph.org>

A full report by Hazel Jones of WEDC including details of all the material used is available at

[www.Lboro.ac.uk/well](http://www.Lboro.ac.uk/well)