

Why Water supply and Sanitation Interventions Fail in LDCs (A case of Uganda)

Bukirwa Faridah

fbukirwa@agriculture.go.ug

nbfarida@gmail.com

Tel: +256-779-693309

Ministry of Agriculture, Animal Industry and Fisheries
Republic of Uganda

Introduction

- Urban centres with high population growth due to perserved "opportunities"
- Increased pressure on resources including WSS
- Capital city poorly located in a wetland: high water table
- Physical planning lagged behind expansion of the cities

Uganda on Achievement of MDGs on Water Supply and Sanitation

- Types of interventions
 - Mainly on-site based technology-driven interventions:
 - Pit-latrines, VIPs, Septic tanks, Ecosan
 - Hand-washing stations
 - "Protected" Wells
 - Stand taps (that are paid for)
- Cost of piped water at stand taps high
- Research shows safe latrine use in urban cities less than 30%

Uganda on Achievement of MDGs on Water Supply and Sanitation

- Research showed:
 - *Where international and national agencies implemented more on-site interventions diarrheal disease prevalence was higher*
- Less where Community Based Organisations, NGOs, Youth groups were involved
 - *Higher functional sustainability, acceptability and adoption*

Main Challenges

- Poor financing of local government
- Poor institutional framework
- Lack of a single entity to manage, plans projects and programmes on WSS and waste management
- Socio-political issues
 - ➔ Votebank politics
 - ➔ Tagging WSS to political favors
 - ➔ Cultural beliefs
 - ➔ A fear for new technologies
- ➔ Lack of community participation in planning and implementation

Way forward

- ✓ Implementation of options that are functionally sustainable
- ✓ Strong community involvement at all stages of the project cycle
- ✓ Emphasize importance of traditional knowledge
- ✓ Set goals and targets that are tailor-made to fit local context (national or regional)