

Burkina Faso



WaterAid/Suzanne Porter

Burkina Faso is a small, landlocked and densely populated country in West Africa. It is one of the poorest in the world, ranked 175 out of 177 countries by the United Nations, where one in five children die before their fifth birthday. There are few schools, health facilities and public services – especially in rural areas. About 51% of the population has access to clean water and fewer still – only 12% – have access to sanitation.

Formerly called Upper Volta it regained its independence from France in 1960 and was renamed in 1984. It has since spent many of its post-independence years under military rule and has endured many military coups.

Reducing rainfall levels and recurring droughts have meant more poor rural people, who traditionally rely on farming for a living, are moving to towns and cities looking for work. As a result unplanned slum and squatter settlements without services like water and sanitation are growing.

poorest and most vulnerable are prioritised in future work is vitally important. Currently women, the elderly and disabled are overlooked by decision making and this too needs to change.

A big part of this work will be raising people's awareness of the necessity for, and their rights to, water and sanitation, alongside demonstrating the importance of water and sanitation in achieving the overall MDG of poverty reduction and the targets on health and education. WaterAid plans to carry out awareness-raising work in collaboration with the water and sanitation NGO network and the journalists network. This is particularly pertinent to hygiene and sanitation which are often overlooked compared to water. However, communities who understand that the lack of sanitation and hygiene fuels disease and have the necessary training and support readily build latrines themselves.

In addition to the 'credit for sanitation' scheme (where people are given a small loan to help them pay for the materials needed to build latrines) WaterAid and UNICEF will continue their successful sanitation and hygiene work in schools. Children are key advocates for good hygiene, quickly taking on board new lessons and changing habits that have been ingrained through years of practice in their parents.

Sanitation is a key focus in urban areas where rapid urbanisation is resulting in unplanned settlements without facilities. Sanitation is not being prioritised by decision makers and service providers currently offer inadequate technology choices which means that the poorest can't afford to buy latrines. WaterAid hopes to develop its partnership with the state owned company ONEA, responsible for water and sanitation, to help tackle this vast problem, focusing on sanitation and hygiene issues. One specific aim is to persuade ONEA to include low cost latrines in its strategy rather than only allowing more expensive ventilated improved pit latrines, which the majority of poor people cannot afford. WaterAid will also closely monitor the proposed privatisation of ONEA (of which the details are not yet known) to lobby for the needs of the country's poor people.

Finally, all future projects in Burkina Faso will look at the issue of water resource management. In a country with dramatically reducing rainfall levels, falling water tables and increasing water needs this is crucially important to ensure that there is adequate water for all, and that its use is managed in a sustainable way.

Marie Edith Kinda from Seguedin village.



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"Before we had to go to the toilet in the bushes. The pigs would always trample the dirt back into the village and our homes. When women had diarrhoea they couldn't get far from home and had to go to the toilet in front of everyone else. It was embarrassing. Having latrines has not only helped our health, it has restored our dignity and pride."



Key to states where WaterAid has plans to work or is currently working

1 Lébara 2 Kénéédougou 3 Comoé 4 Houet 5 Bougouriba 6 Tuy 7 Banwa 8 Mouhoun 9 Balé 10 Kossi 11 Sanguie 12 Sissili 13 Ziro 14 Boulkiemdé 15 Passoré 16 Bam 17 Loroum 18 Soum 19 Sanmatenga 20 Ganaourgou 21 Namentenga 22 Oudalan 23 Séno 24 Gnagna 25 Yagha 26 Kouritenga 27 Boulgou 28 Koulpélogo

Burkina Faso

Area: 274,000 km²

Capital: Ouagadougou

Other main cities: Bobo-Dioulasso, Ouahigouya, Koudougou, Banfora

Population **12.4 m**

Infant mortality **207/1000**

Life expectancy **47 years**

Water supply coverage **51%**

Sanitation coverage **12%**

Below poverty line **45.2%**

Human development index **175**

Adult literacy **12%**

Sources: World Development Report 2005 and the Human Development Report 2005.

NB. Official statistics tend to understate the extent of water and sanitation problems, sometimes by a large factor. There are not sufficient resources available for accurate monitoring of either population or coverage. Varying definitions of water and sanitation coverage are used and national figures mask large regional differences in coverage.

Achievements to date

- Helped over 32,000 people gain access to clean water
- Started a credit scheme for sanitation and soap-making enterprises with women
- Initiated and supported the establishment of the water and sanitation NGO network and the water and sanitation journalists network
- Awarded in 2004 for its support to deprived communities by the Burkina Faso Government

£14 pays for training and equipment for one hygiene education volunteer

£250 provides the start-up costs for a local soap-making business for five people

£1000 pays for the rehabilitation of one borehole serving 300 people

£1200 pays for the construction of a school latrine block serving 360 pupils and teachers

£5000 pays for one borehole serving 300 people

WaterAid

WaterAid – water for life

The UK's only major charity dedicated exclusively to the provision of safe domestic water, sanitation and hygiene education to the world's poorest people.

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Charity registration number 288701 January 2006



WaterAid/Suzanne Porter

Laurentine Yaméogo from Bayandi Palogo at the new handpump (and on the front cover with the soap she sells).



WaterAid/Suzanne Porter

“Before WaterAid and AMUS rehabilitated our well we were afraid to collect the water from the pond because of the crocodiles. They would come when the water got a bit higher. I was scared. When the pond dried up we would go to another one further on. But it was a lot steeper which made it harder to get the water.

Before we had the safe water we had lots of illness – especially stomach problems in the village. When the children were ill we went to the clinic. It is very expensive. Often my children couldn't go to school because they were ill. Since the well was rehabilitated we haven't had these illnesses.

We women were part of the process of getting safe water. We helped to make the decisions, collected sand and gravel and prepared food for those who were digging. We now have a women's group where we make soap to sell and we also grow peanuts to sell. We use the money to pay off the loans we took to start our businesses. And we put some money into a kitty for the difficult times like for funerals and weddings.”

Sawadogo Talato, 45, Vice President of Yaké village water committee.



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“Before we had the pump in the village it was a luxury even to have water to quench our thirst. A lack of water can lead to conflict among people. But since we have had the well here we are so much happier. The women are able to get on with lots of other activities. Some of us make millet beer and also bean fritters to sell. All this makes money for the women.

This means we can look after our children better, we can give them better food, or buy them things like shoes which we couldn't do before. The women choose to look after their children better rather than spending the money on themselves. That is the important thing.

All the children go to school. Before the children had to go to get water in the morning which kept them away from school. When the pond dried up even the little ones walked five kilometres and back again twice a day to get water. The children used to suffer. But now everything is better and they are much healthier. They don't get diarrhoea any more. Everything has changed.”