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Sector Development Plan (FY2011-25)

Water Supply and Sanitation Sector in Bangladesh

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Hard to Reach Areas

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Hard to Reach Areas

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1. Introduction

During last three to four decades, more visibly, concerted efforts and interventions in the water supply and sanitation sector were undertaken in Bangladesh. Besides government initiatives, a large number of NGOs and private sector operators have come forward to extend WSS coverage and to improve service levels. These drives were taken focusing not only to extend coverage, but also to contribute to improve country's overall public health situation and poverty reduction at the end. After this huge drive, by mid 90's, Bangladesh had achieved almost a universal coverage in safe water supply which had been further deteriorated from about 97% to 74% due to unfolding the presence of arsenic in ground water in late 90's. Till now, although arsenic problem in groundwater is persisting the country has earmarked a significant achievement through developing and scaling up of alternative technologies for safe water supply. By 2009, as DPHE sources say, the coverage of safe (arsenic free) water supply in the country has reached to about 90%, and sanitation coverage to about 87%.

Turning around to the previous success from the present context of WSS sector in Bangladesh, it is revealed that the overall progress has been become steady due to some drawbacks. The government and NGOs have experienced that, among others, there are some pocket/distant areas and segment of population of the country which could not be outreached yet. This was because of geo-physical and hydro-geological characteristics and variances of the particular areas, and populations because of their mobility and occupational identities. The characteristics and issues of such areas and populations relating to water supply and sanitation are vigorously discussed during last 5-10 years among WSS service providers, and through a process of consolidation these segments are termed as 'Hard to Reach Areas and Population'.

2. Hard to Reach Areas and Population

2.1 Hard to Reach Areas

The WSP-World Bank, Bangladesh with the assistance of Dhaka Ahsania Mission (DAM) conducted a study¹ in 2009, and identified the 'Hard to Reach Areas' of Bangladesh considering nine criteria embedded themselves with the name of areas. These are: i) Char lands, ii) Haor areas, iii) Beel areas, iv) Exposed coastal zones and islands, v) Hill areas (including greater Sylhet districts), vi) Barind track, vii) Tea gardens, viii) Saline (including Sundarbans) areas, and ix) Isolated areas (Chitmohol, Mohazer, and Brothel etc.).

The summary of the areas and their coverage intensities is presented below:

SL	Category	No. of Districts	No. of Upazilas	No. of Unions
1	Barind Track	8	28	104
2	Beel areas	15	26	72
3	Char lands	26	73	300
4	Exposed coastal zones and islands	6	23	107
5	Haor areas	6	26	156

¹ Map of Hard to Reach Areas of Bangladesh on Water and Sanitation Services

6	Hill areas (including Sylhet districts)	6	40	163
7	Saline (including Sundarbans) areas	3	13	81
8	Tea gardens	3	8	40
9	Isolated areas (Chitmohol, Mohazer, Brothels, etc.)	3	3	5
Total (coverage):		50	240	1,028

2.2 Hard to Reach Population

There are some isolated communities who are very inaccessible than general communities. These groups are scattered and live in different places of the country. These groups include:

- So-called untouchable and socially oppressed minorities such as *muci, dom, hijra, sweeper, bashmali, low-caste fishermen* etc.
- Indigenous communities e.g. *saotal, mushhor, orao, munda, mahato, bagdo mahato minorities, river gypsies* (i.e. locally called 'Bedey') etc.
- *Mohazers* (popularly known as non-bengali Bihari), *Rohinga refugees, brothels* etc.
- People living in Chitmohols and enclaves of Bangladesh in Indian territory (covering an area of about 12,290 acres)
- Urban slums and floating people
- CHT based rural communities (a separate thematic report is prepared and attached)

The hard to reach population are commonly characterized by socio-political exclusion, shortage of land, absence of appropriate technology and lack of WSS facilities and services.

3. Present Water Supply and Sanitation Status

It is estimated that around 5 million people live in **Char areas** of the country. The people in the chars are constantly exposed to risk of flooding and erosion and are considered as most vulnerable to water borne diseases due to poor water quality, sanitation and hygiene.

Haor areas are prone to water inundation and flash floods, and consequently to a high level of livelihood insecurity and poverty. The communication infrastructure is very poor due to complex seasonal variability. The fresh water supply is poor to moderate but the sanitation situation is worse as the latrine coverage is below 10%. Individual and locally made low-cost pit latrines are not feasible due to fragile nature of soil and overall climatic conditions.

In the active flood-plains of Bangladesh, there are thousands of **beels** (swampy lands) of different sizes. Most of the large beels have water-logging characteristics. More than 5 million people live in those areas including some ethnic communities. Pit clay and clay soil of the beel areas are not suitable for conventional pit latrines due to poor permeability of soil. Most of the people have access to private hand tubewells that are installed at very shallow (30-60 feet) to shallow (80-120 feet) depths and not protected from being contaminated though pit latrines in the saturated zones. Hygiene situation is even more outdated in these areas.

Water supply systems, in the **exposed coastal zones and islands**, are mostly dependent on deep hand tubewells having increased saline concentration above 600 ppm. Sanitation infrastructures are vulnerable to tidal surge and cyclones. Soils are moderately permeable and water table remains high at zone of saturation due to tidal effects. Hygiene situation is very poor in exposed coastal areas.

The areas under **Barind Tract** are vulnerable to droughts and the whole region is now in an acute state of deforestation. Water supply options are difficult due to geologic nature and high water scarcity especially during drought period. People are mostly dependent on deep-set tubewells which are costly and unaffordable to many.

Latrine coverage is high but sanitation situation remains poor due to water unavailability. This becomes worse during dry season when surface water sources dry up and ground water falls below 6-8 meters.

Tea garden laborers live a kind of industrial slavery life. Their access to safe water and sanitation services is very limited due to lack of attention of estate owners. People live in dense clusters where sanitation facilities are almost absent. The practice of open defecation and using canal water for drinking and domestic purposes indicate miserable WSS situation exposing the people especially the ethnic laborers to high risk of water borne diseases.

The **Saline tidal flood plain area** has a transitional physiographic, which is located in the administrative districts of Satkhira, Khulna, Bagerhat, Jhalokhathi, Barguna and in the Sundarban areas. Salinity affects miserably infrastructures as well as economic activities. The fresh water sources are scarcely available for drinking and other domestic purposes. Due to climate change, the increased river water salinity is becoming an emerging threat for environmental preservation and bio-diversity, functioning of the Sundarban ecosystem, fresh water flow in tidal rivers, and human health. People face a lot of trouble in their daily life for use of saline water for drinking, bathing and cleaning purpose and thus suffer from diarrhea, chronic dysentery, skin disease and other health related problems. Sanitation and hygiene practice is also very poor in this saline zone. People have keen concern about salinity in water but unavailability of suitable technology for softening the hard water and reducing salinity is worsening the WSS situation.

The **hard to reach population** indeed have lack access to basic water supply and sanitation services. The static groups including people of **Chitmohols** live in densely populated places and are exposed to high risk of epidemic outbreaks where safe water supply and sanitation condition is acute. Shortage of land, absence of appropriate technology and WSS services are the main reason of human suffering in these cases. The other groups of hard to reach population are floating. Hundreds of thousand people daily come to and go out of big cities like Dhaka and in other towns for their livelihood and official purposes have lack access to adequate WSS services. Street hydrant or shared taps and public toilet facilities in cities are inadequate; particularly for women the situation is miserable.

4. Major Issues and Recommendations

Issues	Recommendations
The need for basic WSS services are out of focus due to social exclusion	<ul style="list-style-type: none"> - Undertaking appropriate measures for assessing present WSS situation and demands - Taking into account the needs of basic WSS facilities and services while planning and implementation - Allocating adequate funds and deepening outreach of WSS services to the targeted population through LGIs and NGOs - Awareness raising of the hard to reach population on rights issues - Mainstreaming of hard to reach population through sensitizing and involving greater societies and employers wherever applicable
Lack of appropriate WSS technologies and strategies	<ul style="list-style-type: none"> - Undertaking action researches (R&D) for identifying and developing appropriate technologies to best suited to the specific contexts - Ensuring full coverage of WSS services, so that floating and gypsy population can access to WSS facilities wherever they go - Reformulation of WSS strategies to address the problems, and needs of the hard to reach areas and population
Policy gaps	<ul style="list-style-type: none"> - Inclusion of problems and possible solutions of the socially excluded groups in the policies and strategies related to WSS services - Incorporate special considerations for providing WSS services in to the regulatory framework of SDP
Lack of awareness on health and hygiene	<ul style="list-style-type: none"> - Designing, development and implementation of awareness raising campaigns incorporating issues and contexts of the targeted groups - Keeping budgetary provisions for WSS services during emergencies on priority

		basis
Affordability of WSS services and facilities	-	Increasing opportunities for income generation and employment
	-	Inclusion of the groups in to the government's safety net programmes