

Oxfam America
Research Backgrounders

In need of a better WASH:

Water, sanitation, and hygiene
policy issues in post-
earthquake Haiti

Figaro Joseph

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Acknowledgments

Many people assisted me in this research, but I want to especially thank the people in the six camps that I visited. They could not have been more generous and courageous. They took precious time from their days to talk to me in a time of extraordinary hardship for them. Showing a stranger the environment in which you live and telling about your social and economic hardships, especially when you live in shelters in precarious conditions, takes a lot of courage.

I thank the representatives of the humanitarian agencies and the Haitian government as well. Despite working long hours under very difficult situations, they found time to talk to me for this report.

I also thank Oxfam America's staff in Haiti for all the help in planning my interviews.

Finally, I thank my drivers for taking me to all the sites, from Port-au-Prince to Petit-Goâve.

Oxfam America is grateful to the Ford Foundation for providing support for this research.

Citations of this paper

Please use the following format when citing this paper:

Figaro Joseph, "In Need of a Better WASH: Water, Sanitation, and Hygiene Policy Issues in Post-Earthquake Haiti," Oxfam America Research Backgrounder series (2011): oxfamamerica.org/publications/wash-policy-issues-post-earthquake-haiti.

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Abbreviations

AECID	<i>Agencia Española de Cooperación Internacional para el Desarrollo</i> (Spanish Agency for International Development Cooperation)
CAEPA	<i>Comité d'Approvisionnement en Eau Potable et Assainissement</i> (Drinking Water Supply and Sanitation Committee)
CAMEP	<i>Centrale Autonome Métropolitaine d'Eau Potable</i> (Independent Metropolitan Water Company)
CESCR	Committee on Economic, Social, and Cultural Rights
DINEPA	<i>Direction Nationale de l'Eau Potable et de l'Assainissement</i> (National Directorate for Potable Water and Sanitation)
GC	General Comment
GoH	Government of Haiti
GoS	Government of Spain
IASC	Inter-Agency Standing Committee
IDB	Inter-American Development Bank
IDP	internally displaced person
IFI	international financial institution
IGO	intergovernmental organization
IJDH	Institute for Democracy and Justice in Haiti
IOM	International Organization for Migration
JMP	Joint Monitoring Program
MDGs	Millennium Development Goals
MINUSTAH	<i>Mission des Nations Unies pour la stabilisation en Haïti</i> UN Stabilization Mission in Haiti
MTPTC	<i>Ministère des Travaux Publics, Transports, et Communications</i> (Ministry of Public Works, Transportation, and Communication)
NGO	nongovernmental organization
OCHA	Office for the Coordination of Humanitarian Affairs
OHCHR	Office of the High Commissioner for Human Rights
OSE	Office of the Special Envoy for Haiti
PAHO	Pan American Health Organization
PBS	Public Broadcasting Service
PDNA	post-disaster needs assessment
POCHEP	<i>Poste Communautaire d'Hygiène et d'Eau Potable</i> (Community Water Supply and Sanitation Post)
SNEP	<i>Service National d'Eau Potable</i> (National Water Supply Service)
UN	United Nations
UNDP	UN Development Program
UNICEF	UN Children's Fund

URSEP	<i>Unité de Réforme du Secteur en Eau Potable</i> (Reform Unit for Potable Water)
USAID	US Agency for International Development
WASH	Water, sanitation, and hygiene
WHO	World Health Organization

Key terms

Accountability

Policies, systems, and services are accountable when water and sanitation users have a say in the design, implementation, evaluation, and reform; have access to mechanisms for voicing grievances; can depend on the resolution of their grievances in a timely manner; and are provided with all necessary information on the relevant process. (See Appendix A for an expanded definition.)

Cluster system

What is the cluster system and why was it created? In 2005, the UN commissioned a review of international humanitarian response to disasters and conflicts. A panel of independent experts conducted the review of the system and documented a series of gaps.¹ To address these gaps, the UN made a number of recommendations, including the adoption of a concept of “lead organization” to ensure the protection of those affected by conflict or natural disasters. To implement the recommendation of a lead organization concept, the Inter-Agency Standing Committee (IASC) created nine “clusters” that year:

- Camp, coordination, and management
- Early recovery
- Emergency shelter
- Emergency telecommunications
- Health
- Logistics
- Nutrition
- Protection
- Water, sanitation, and hygiene

Later, the IASC added three more clusters:

- Agriculture
- Education

1. Costanza Adinolfi, et al., “Humanitarian Response Review” (New York: UN, 2005).

- Food security

The clusters “consisted of groupings of UN agencies, nongovernmental organizations (NGOs) and other international organizations around a sector or service provided during a humanitarian crisis. During large-scale emergencies, UN agencies and partner organizations create clusters in various sectors to facilitate better information gathering and sharing so that humanitarian actors can be better informed to assist those affected during the disaster.”²

Effectiveness

Policies, systems, and services are effective when stated goals are achieved in a sustainable manner. (See Appendix A for an expanded definition.)

Equity

WASH policies, systems, and services are equitable when they seek to progressively ensure universal access to clean drinking water and safe sanitation for all Haitians – men, women, and children, both rural and urban dwellers. (See Appendix A for an expanded definition.)

Power

Power is a concept frequently referenced but less easily defined. Green (2008) has recently argued that power can take at least four different forms, *power over*, *power to*, *power with*, and *power within*:

- *Power over* is often inconspicuous and can frequently be noted by how elites manage to keep certain items out of political, social, and economic debates.
- *Power to* is when one has “the capability to decide actions and carry them out” (Green 2008:28).
- *Power with* is through collective or joint actions and can be exercised through organizations.
- *Power within* is associated with “personal self-confidence, often linked to culture, religion, or other aspects of collective identity” (Green 2008:29).

These personal and collective attributes “influence what thoughts and actions appear legitimate or acceptable” (ibid.). In whatever form it may appear, power is relational and contextual. (See Appendix A for an expanded definition.)

2. Ibid.

Social exclusion

Terms such as equity and accountability cannot be fully understood without an understanding of the concept of social exclusion. For example, the concept of equity at least implies an attempt to eliminate or reduce social exclusion and consequently social injustice.

Broadly defined, social exclusion is the prevention, for whatever reason, of individuals or groups/communities in a society from fully participating in the social, political, and economic life of that society. Most often, such social exclusion is the result of actions or inactions of those in power positions, actions or inactions that have placed barriers in the way of a particular community's full participation in the society in which it lives.³ (See Appendix A for an expanded definition.)

Sphere standards

Developed by the Sphere Project (a partnership among humanitarian NGOs and the Red Cross and Red Crescent movement), Sphere standards are qualitative in nature but with some quantitative indicators.⁴ For example, the first water standard, access and quantity, reads, "All groups within the population have safe and equitable access to WASH resources and facilities, use the facilities provided, and take action to reduce the public health risk...."⁵ It then prescribes some key indicators, one of which is, "Average water use for drinking, cooking and personal hygiene in any household is at least 15 liters [four gallons] per person per day...."⁶

WASH cluster

The WASH cluster is a group of response agencies working together to provide water, sanitation, and hygiene support to affected communities and individuals after a disaster. At the global level, it is led by the UN Children's Fund (UNICEF), which works with government agencies in an affected country, other international organizations, and NGOs at the global, national, and sometimes local level to coordinate, monitor standards, and issue tasks.⁷

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3. Tania Burchardt, Julian Le Grand, and David Piachaud, "Social Exclusion in Britain 1991-1995," *Social Policy and Administration* 33, no. 3 (1999). For further explanation of this concept as it relates to development, see Amartya Sen, "Social Exclusion: Concept, Application, and Scrutiny," *Social Development Papers* (Manila: Asian Development Bank, 2000).
 4. The Sphere Project, *The Sphere Handbook 2011: Humanitarian Charter and Minimum Standards in Humanitarian Response* (Rugby, UK: Practical Action, 2011).
 5. Ibid., "Minimum Standards in Water Supply, Sanitation, and Hygiene Promotion," 89.
 6. Ibid., 97.
 7. UNICEF, "Water, Sanitation and Hygiene: Emergency Coordination and the Wash Cluster Initiative," http://www.unicef.org/wash/index_43104.html (accessed May 22, 2011).

In Haiti, in response to the 2010 earthquake, the cluster has been led by *Direction Nationale de l'Eau Potable et de l'Assainissement* (National Directorate for Potable Water and Sanitation, DINEPA) and UNICEF. It also consists of the NGOs that are members of the system put in place to coordinate the emergency response.

WASH sector

The WASH sector refers broadly to water, sanitation, and hygiene as a sector of the economy/society. This broad segment includes policies as well as facilities, allowing for the provision of clean drinking water, safe hygiene practices, and safe excreta disposal facilities.

Executive summary

This research initiative examined Haiti's water, sanitation, and hygiene (WASH) sector and the work of the WASH cluster in the context of effectiveness, equity, and accountability. The WASH sector was analyzed pre- and post-earthquake; the WASH cluster was analyzed after the January 12, 2010, earthquake.

Part I of this Oxfam America Research Backgrounder reports that before the earthquake, Haiti was struggling to expand its WASH sector but faced many challenges, including lack of funds, all forms of instability, and lack of coordination among the different ministries. In 2007, the Haitian government sought to reform the sector by replacing the national institutions responsible for drinking water and sanitation with regional entities. The research found wide gaps between urban and rural areas, translating to significant differences in rates of coverage: coverage rates for drinking water in urban and rural areas were 70 percent and 51 percent, respectively, while the figures for sanitation were 29 percent and 12 percent, respectively.⁸

Part II of the backgrounder focuses on developments in the WASH sector since the January 2010 earthquake and examines the extent to which activities of the Haitian government and the nongovernmental organizations (NGOs) have been effective, equitable, and accountable.

With respect to the WASH cluster's effectiveness, whether its practices have been equitable, and whether it has been accountable primarily to the people it is supposed to serve, the research found the answer to be mixed:

- The NGOs in the cluster provided crucial assistance to residents in the camps at a critical moment after the 2010 earthquake. However, in many cases WASH programs did not meet accepted international standards, with the outbreak and spread of cholera pointing to weaknesses in the cluster system.
- At the national level, many of the participants in the WASH cluster noted that the cluster has not been effective because of a lack of understanding of what the cluster was supposed to be. As a result, some participants expressed dissatisfaction with the level of participation in meetings and overall coordination.
- At the camp level, WASH activities were seen by the residents in more practical terms. Camp committee members educated rank-and-file residents

8. Government of Haiti (GoH), "Post Disaster Needs Assessment," ed. Prime Minister (Port-au-Prince: Republic of Haiti, 2010).

about the programs. Those interviewed expressed greater satisfaction with WASH at the local level than at the national level, even though some pointed to outcomes of certain programs at campsites that were unsatisfactory.

While the cluster has produced mixed results in the area of effectiveness, it is clear that partner organizations have worked to ensure that their programs were accountable and equitable. Given the fragile nature of the Haitian state, there was no formal accountability mechanism, so it was left to the different groups to design and implement their own accountability mechanisms and work to adhere to them. The different NGOs put in place different types of accountability mechanisms, including a phone line and suggestion boxes for camp residents to use to provide them with feedback. Although there are examples of the organizations responding to feedback, there were also complaints about cases that were not addressed. The same can be said with respect to the equitable nature of WASH interventions. The report finds that WASH programs in the camps have been equitable. However, there was a debate on whether the programs have created some unfairness between those who were living in the camps and those who were not. This is a debate that goes beyond specific cases but speaks to how humanitarian assistance has been generally designed.

Lastly, the residents of the camps expressed deep dissatisfaction with the government's response to the earthquake. They also expressed frustration about the slow-paced nature of the reconstruction efforts and great worry about WASH in the camps, as more service providers were either planning to leave or shifting from emergency to development programming. Preparing for this shift has meant either a reduction in or phasing out of humanitarian services while there continues to be a need for such services.

The conclusion and recommendations of this report call for a more creative engagement or partnership between the NGO community and the Haitian state, a new partnership where they would work together instead of keeping each other at arm's length. Haiti's institutions remain weak and the country has few resources, so keeping the state at arm's length would deepen its weakness and further undermine its ability to meet its responsibility as the primary duty bearer with respect to the rights of its citizens. It is the state that must be the primary actor in developing the WASH sector, as well as designing and implementing public policies to promote universal access to drinking water and safe sanitation. If the NGO community continues to keep the state at arm's length, it will limit the impact of its work both in the short and long term. It is past time for a new partnership that will allow NGOs and the Haitian state to work on common goals with mutual respect.

Specific recommendations for stakeholders:

- The Haitian government must lead reconstruction and development programs, and the process needs to be genuine and participatory to ensure accountability to all Haitians as well as to international donors and partners.
- The WASH sector must be developed through a comprehensive but realistic plan, with adequate national and international financing and other resources. Special attention should be paid to expanding and improving access in rural communities.
- All efforts must be made to stop the spread of cholera, including comprehensive WASH programs throughout the country and a robust health education campaign. These efforts should be led by the Haitian government in partnership with the WASH cluster and other NGOs working in the sector.
- Gender-based violence must stop. Efforts must be made to address women's concerns around safety in the camps. The Government of Haiti (GoH) and the NGO community must ensure that all facilities are safe and that latrines and showers are of adequate quality and gender appropriate.
- Members of the cluster must coordinate better. There is no reason for members of the cluster not to be able to coordinate their activities. Coordination would make it easier to identify gaps in services and fill them.

Part I: Background and contextual framework

Overview

This report has two major parts. Part I focuses on Haiti's WASH sector before the January 12, 2010, earthquake. Part II focuses on the issues of equity, effectiveness, and accountability as they relate to the WASH system, including the WASH cluster, since the earthquake.

The Part I historical account is important to help one understand the challenges in the sector. The research sought to answer a number of questions, among them: Was there significant coverage of potable water and sanitation services in Haiti before the earthquake? What were the agencies responsible for the provision of water and sanitation? The data for Part II were collected through field research in Haiti and review of published reports since the earthquake. This part of the report—designed to inform stakeholders, as well as others who are concerned about Haiti's WASH programs and reconstruction plans since the earthquake—assesses whether reconstruction plans will address the urban-rural divide in WASH, as well as whether these plans can move Haiti toward universal access to clean water and safe sanitation.

Methodology

After conducting desk research, I traveled to Haiti for 12 days (February 28 through March 12, 2011) to conduct field research. I visited six camps and organized focus group meetings in two of the camps.⁹ One of the focus group meetings was in a camp in the Port-au-Prince metropolitan area and was attended by 13 people; the other was in Grand Goâve (rural/semirural) and was attended by 20 people.

Initial visits to the camps, which occurred before the focus group meetings, were random. During those visits, I talked to 14 people, including camp committee members and rank-and-file residents. (Approximately 50,000 people were living in the camps that I visited.)

I also interviewed 14 other people from five different NGOs and two government agencies, the *Direction Nationale de l'Eau Potable et de l'Assainissement*

9. Four of the camps were in Port-au-Prince, one in Mariani/Gressier, and one in Grand Goâve.

(National Directorate for Potable Water and Sanitation, DINEPA) and the Ministry of Health.

Finally, I attended one WASH cluster meeting, which DINEPA chaired.

See Appendix B for details on interviewees.

Identifying the actors

The actors in this research are the GoH, the people of Haiti, NGOs, bilateral aid donors, and intergovernmental organizations (IGOs).

Given that the term IGO may not be as familiar to the public as NGO, some clarifying words would be useful. IGOs are agencies formed by countries, and those countries appoint their citizens to represent them in these organizations. In other words, IGOs are public institutions—such as the UN and the World Bank—and their members tend to be states. On the other hand, NGOs are private institutions and their members are generally individuals. As a result of this distinction, member states of IGOs are accountable to their citizens while NGOs are accountable to their individual members and/or funders.

The relationships among these actors takes on different characteristics at varying times and under different circumstances. However, when we talk of accountability, we primarily mean one or more of these actors being accountable to the Haitian people; in some contexts, the accountability may be specifically focused on a subset of the population, for example those who are living under tents as a result of the January 12, 2010, earthquake.

Right to water as a basic human right

Since the early 1990s, the UN has codified water as a basic human right. However, similar to many other rights, there are vast power differences in terms of who can actually access such rights. Lacey (2008) puts it this way: “[T]here are significant power differentials among those who have access to water and rights to make decisions about the way in which it is used, and those who do not” (244). People who are poor would obviously be among those with limited access to these rights. This would truly be the case if they lived in a developing country that did not provide affordable water access to the public. The unequal access to water that exists in Haiti illustrates the definition of power offered under Key Terms above and has heightened the many kinds of sociopolitical exclusion of women, which is the denial of “the ability to make basic choices about water.”¹⁰ Lacey (2008) notes, “The denial of the right to participate in social and political decision-making processes is a form of social exclusion that displaces people

10. Justine Lacey, "Utilising Diversity to Achieve Water Equity," *Rural Society* 18, no. 3, 244 (2008).

from their social freedoms, and in this case, from equity and social justice with regard to their access to water.”¹¹

The exclusion of people from this basic human right of access to clean water and safe sanitation has a host of adverse consequences for communities. Women and children have been particularly affected because of the lack of access and/or the difficulties they face in accessing clean water. As US Secretary of State Hillary Rodham Clinton noted recently, “More than 5,000 people die each day from causes linked to unsafe water, sanitation, and hygiene, and most of them are children. Millions of women and girls walk for hours every day to collect water for their households, and some of them put their physical safety and even their lives at risk.”¹²

Rights-based approach promotes equity, effectiveness, and accountability

On July 28, 2010, the UN General Assembly endorsed the right to water and sanitation; on September 30, 2010, the UN Human Rights Council affirmed for the first time the rights to water and sanitation as being part of existing international human rights treaties and therefore legally binding.¹³ Before this recent affirmation, advocates of access to water and sanitation as a right would point to specific instruments. For example, Article 25 (1) of the Universal Declaration of Human Rights¹⁴ states that “[e]veryone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.” Although the Declaration is not a legally binding treaty, many legal experts argue that it constitutes a part of customary international law, that is, international rules derived from the conduct of states.¹⁵ Clean water and safe sanitation are necessary elements for enjoying the right to adequate food and health and well-being.

11. Ibid.

12. Hillary Rodham Clinton, “Remarks on World Water Day,” *World Water Day* (Washington, DC: The World Bank, 2011).

13. Office of the High Commissioner for Human Rights (OHCHR), “UN United to Make the Right to Water and Sanitation Legally Binding” (ohchr.org: UN, 2010), <http://www.ohchr.org/EN/NewsEvents/Pages/RightToWaterAndSanitation.aspx>.

14. UN, *The Universal Declaration of Human Rights* (New York: 1948), <http://www.un.org/en/documents/udhr/index.shtml#a25> [accessed on February 5, 2011].

15. On this point, see, for example, Lorenzo Cotula and Margret Vidar, “The Right to Adequate Food in Emergencies,” *FAO Legislative Study No. 77* (Rome: Food and Agriculture Organization of the UN, 2002).

In addition, the right to water and sanitation is explicitly or implicitly mentioned in national constitutions and UN treaties that are legally binding. One of the most prominent of international treaties pertinent to the right to water is the UN International Covenant on Economic, Social, and Cultural Rights, as interpreted by the UN Committee on Economic, Social, and Cultural Rights (CESCR) in General Comment No. 15 (GC-15).¹⁶ While the committee's General Comments are not legally binding, they are given great weight in the international community, both by governments of the states parties to the covenant and legal experts, because the committee is an official UN treaty body. According to GC-15, three articles in the covenant – 10, 11, and 12 – are fundamental to the issue of the right to water (and sanitation facilities). It is important to quote some of GC-15's language on these articles to fully understand how a rights-based analysis plays out in the WASH sector.

- Article 10: The right to water contains both freedoms and entitlements.
- Article 11: Water must be “adequate for human dignity, life and health” —adequate in broader terms beyond the volumetric or technological.
- Article 12: Specifies the factors that should be used to evaluate whether or not states are meeting the obligations posed by the right to water for their inhabitants—availability, quality, physical and economic accessibility, and non-discrimination.¹⁷

GC-15 argues that “freedoms” are efforts to ensure that persons have continuous access to existing water supplies and that the supplies are free from interference. Free from interference means water supplies on which people rely should not be subjected to “arbitrary disconnections or contamination.” By “entitlements,” on the other hand, GC-15 means efforts to ensure that all states parties to the Covenant take the responsibility to manage such water supplies or systems in ways that provide “equality of opportunity” so people can “enjoy the right to water.”¹⁸ As Article 10 places the right to water into the protective shields of freedoms and entitlements, Article 11 provides the specific requirements that states must meet to fulfill their obligations to the inhabitants of their territories. Very important to the right to water is that water should be regarded as a “social and cultural good, and not primarily as an economic good.” Finally, Article 12 specifies the criteria for evaluation.

Availability is explained in the context of each person having “sufficient and continuous” water for personal and domestic uses. Uses entail drinking, personal sanitation, washing of clothes, food preparation, and personal and household

16. The text of the Covenant can be found at <http://www2.ohchr.org/english/law/cescr.htm>. See also CESCR, “General Comment Number 15: The Right to Water (Articles 11 and 12 of the Covenant)” (New York: UN, 2003).

17. *Ibid.*

18. *Ibid.*

hygiene. By quality, GC-15 declares that the water “must be safe, therefore free from micro-organisms, chemical substances and radiological hazards that constitute a threat to a person’s health.”¹⁹ It also means that the water must be acceptable in terms of color, taste, and odor. GC-15 defines accessibility in both physical and economic terms. Water, water facilities, and services have to be accessible to all inhabitants without discrimination and they should be at a distance that is considered reasonable to be reached by all segments of the population. In addition, “All water facilities and services must be of sufficient quality, culturally appropriate and sensitive to gender, life-cycle, and privacy requirements.”²⁰ Economically, according to GC-15, water, facilities, and services must be affordable to all. This means that direct, indirect, and other charges related to having water should be affordable to everyone. Finally, all habitants must have access without having their physical safety threatened.²¹

The rights related to an adequate standard of living that are enumerated in the Universal Declaration are enshrined explicitly and/or implicitly in Haiti’s 1987 constitution. Chapter II deals primarily with what it calls “Basic Rights”; Section A of that chapter addresses the “Right to Life and Health.” The following articles are the most pertinent to the issues of water and sanitation:²²

- Article 19: The state has the absolute obligation to guarantee the right to life, health, and respect of the human person for all citizens without distinction, in conformity with the Universal Declaration of Human Rights.
- Article 22: The state recognizes the right of every citizen to decent housing, education, food and social security.
- Article 23: The state has the obligation to ensure for all citizens in all territorial divisions appropriate means to ensure protection, maintenance, and restoration of their health by establishing hospitals, health centers, and dispensaries.

These explicit rights to food and health clearly imply a right to water, as water is necessary for sufficient and adequate food as well as for keeping people healthy.

19. Ibid.

20. Ibid.

21. UN, *The Universal Declaration of Human Rights* (1948).

22. GoH, "Constitution" (Port-au-Prince: Republic of Haiti, 1987).

Importance of human rights instruments

These instruments are relevant to this paper because they broaden the issues that the concepts of equity, effectiveness, and accountability seek to address, since they are the yardstick with which to measure structural issues—whether or not the issues involve humanitarian response. The Sphere standards relating to displaced persons, while important in their own right, alone are limited in the context of this research. By employing them alone, for example, NGOs and governments can justifiably claim responsibility simply for those affected by a disaster. However, when one uses international human rights instruments, accountability and fairness expand. Combined with national constitutions, the case is even stronger. For example, the national government and/or a humanitarian agency must answer to community members who are outside internally displaced persons (IDP) camps but have to walk for over an hour to find potable water because their community lacks access to a clean water system. It is because of this understanding that this paper can examine gaps in water and sanitation coverage between urban and rural areas in the context of equity and accountability. It is also because of this understanding that this paper can ask whether or not WASH policies and practices that neglect certain groups and make it more difficult for women to have access to clean and sufficient water are unjust and if those responsible should be held accountable.

WASH before the earthquake: Government agencies, clean water, and sanitation

Since the 1960s, the *Department of the Service Nationale d'Eau Potable* (National Water Supply Service, SNEP), the *Centrale Autonome Métropolitaine d'Eau Potable* (Independent Metropolitan Water Company, CAMEP), and the *Poste Communautaire d'Hygiène et d'Eau Potable* (Community Water Supply and Sanitation Post, POCHÉP) have been the agencies responsible for WASH in Haiti. CAMEP, established in 1964 and placed within the *Ministère des Travaux Publiques, Transports, et Communications* (Ministry of Public Works, Transport, and Communications, MTPTC), was responsible for water supply to Port-au-Prince and surrounding areas. SNEP, also under MTPTC, was created in 1977 and charged with the responsibility for construction, operation, and maintenance

of all water supply systems outside of the Port-au-Prince metropolitan region.²³ MTPTC lacked adequate resources, but it was supported by several international institutions, including the World Health Organization (WHO), US Agency for International Development (USAID), the World Bank, the Inter-American Development Bank (IDB), and the German Foundation for Technical Assistance.²⁴

There was no national agency whose primary responsibility was sanitation. The closest institution that Haiti had that was responsible for sanitation issues, primarily in rural areas, was POCHEP, a small unit in the Health Ministry that was always understaffed and underfunded. POCHEP eventually closed, in 1998, as part of a government initiative.²⁵ The lack of a major public agency to focus on sanitation has resulted in significantly low sanitation coverage in Haiti. It is estimated that only 17 percent of the rural population has access to improved sanitation.²⁶ ("Access to improved sanitation" refers to connection to a septic system, pour-flush latrine, simple pit latrine, or a ventilated improved pit latrine.) According to the World Bank (2006), those who do not have access to improved sanitation often have to resort to open defecation, which has posed enormous sanitation challenges, as the sewer systems do not work and wastewater treatment mostly does not exist. As the World Bank notes:

Storm water drainage, where it exists, consists of open drains that are often clogged by solid waste. This exacerbates already precarious sanitary conditions, especially in slum areas that are home to about half of Haiti's urban population. Septic tanks in urban areas contribute to the pollution of aquifers that serve as sources for public water supply. In some cases, sewage is directly discharged into open water [sources].²⁷

Despite the efforts of the Haitian government and NGOs, progress to improve access to water and sanitation for all Haitians has remained painfully slow. One can point to many reasons for the lack of progress, such as political instability, lack of funding, and lack of clear leadership. Having three different agencies in charge may have created confusion for the sector, as "Haiti did not have a comprehensive water policy."²⁸ Hence, authority over water and sanitation has been fragmented among the various bodies. In the 1990s, the Haitian government sought to reform the sector and agencies. The initial step in the

23. Robert B. Knowles, et al., "Water Resources Assessment of Haiti" (Mobile, Alabama: U.S. Army Corps of Engineers, 1999).

24. Marko Ehrlich, et al., "Haiti: Country Environment Profile - a Field Study" (Washington, DC: USAID, 1985).

25. World Bank, "Project Appraisal Document to the Republic of Haiti for a Rural Water and Sanitation Project" (Washington, DC: The World Bank, 2006).

26. WHO/UNICEF Joint Monitoring Program (JMP), "Progress on Sanitation and Drinking-Water: 2010 Update," 43 (Geneva: WHO and UNICEF, 2010), http://whqlibdoc.who.int/publications/2010/9789241563956_eng_full_text.pdf.

27. World Bank, "Project Appraisal Document," 28 (2006).

28. Knowles, et al., "Water Resources Assessment of Haiti" (1999).

reform process was the creation of the *Unité de Réforme de Secteur en Eau Potable* (Reform Unit for Potable Water, URSEP) in 1996 by the Ministry of Public Works, a division at the ministry charged to study how the sector could be reformed so it could expand and improve services.²⁹ A water and sanitation framework for reform was drafted that year and submitted to Parliament; Parliament debated it and failed to vote on it for three years.³⁰

Meanwhile other efforts by the GoH to secure funding to reform the sector had stalled. One of its funding proposals was to the IDB. The bank approved a loan of \$50 million, but it took more than 10 years for the funds to be distributed. As of 2008, 10 years after the IDB loan package was approved, a report by the NGO Partners in Health and two other organizations noted that “the water projects [that were to be funded by the loans] have yet to be implemented.”³¹ The US representative on the IDB board of directors blocked the release of the funds all those years because of political concerns that may have been unrelated to the project to expand and improve water and sanitation services.³² The government could not carry out planned major reforms due to lack of funding.

The reforms that the government did undertake failed to improve the sector in any significant way; in fact, access to improved sanitary facilities has markedly deteriorated since 1990. To be effective, facilities must be correctly constructed and properly maintained, and those facilities qualified as “improved” can range from “simple but protected pit latrines to flush toilets with a sewerage connection.”³³ In 1990, for example, 26 percent of Haiti’s population had access to improved sanitation facilities; in 2008, that figure was down to 17 percent. The charts in Figure 1 and Figure 2 further illustrate the varying statistics.

Figure 1: Proportion of population with access to improved water sources³⁴

	1990	2000	2008
Rural	41%	49%	55%

29. Ibid.

30. World Bank, "Project Appraisal Document" (2000).

31. Monika K. Varma, et al., "Woch Nan Soley: The Denial of the Right of Water in Haiti," *Health and Human Rights* 10, no. 2 (2008).

32. For a complete account of the history and politics of this case, see Ibid.

33. World Bank, "World Development Indicators" (Washington: World Bank, 2011).

34. WHO/UNICEF, "Progress on Sanitation and Drinking-Water" (2010). "Access to an improved water source" refers to the percentage of the population with reasonable access to an adequate amount of water from an improved source, such as a household connection, public standpipe, borehole, protected well or spring, and rainwater collection. Unimproved sources include vendors, tanker trucks, and unprotected wells and springs. Reasonable access is defined as the availability of at least 20 liters [5 gallons] a person a day from a source within one kilometer [1,000 yards] of the dwelling." Statistics are in this spreadsheet, http://www.wssinfo.org/fileadmin/user_upload/resources/1278061137-JMP_report_2010_en.pdf (accessed May 18, 2011).

Urban	62%	67%	71%
Total	47%	55%	63%

Source: WHO/UNICEF (2010)

Figure 2: Proportion of population using improved sanitation facilities³⁵

	1990	2000	2008
Rural	19%	15%	10%
Urban	44%	34%	24%
Total	26%	22%	17%

Source: UN (2011)

The wide divide between rural and urban areas with respect to access to drinking water and improved sanitation facilities has existed for a long time. The reasons for the disparity include lack of funds, political instability, and a general government failure to prioritize the rural communities, where a majority of Haitians lives. These reasons have resulted in little to no infrastructure in those communities. Neglect and lack of funds often mean that even the limited infrastructure that exists is ineffective or inoperable because of lack of maintenance and repairs. For an example, among the water-supply networks in rural areas that were damaged during a series of hurricanes in 2008, approximately 250 remained unrepaired after two years.³⁶ With this persistent divide between the urban and rural areas, emergency as well as long-term development programs and projects have to be designed in ways that prioritize rural communities.

However, highlighting the rural-urban divide does not mean that the country has not made any progress. The WHO defines improved drinking water sources to “include household connections, public standpipes, boreholes, protected dug wells, protected springs, and rainwater collections.”³⁷ The country has made some progress with respect to access to improved drinking water during the period noted in the charts above. These statistics are a clear indication that progress in this sector has been uneven or mixed and more work is needed if the Haitian state is to meet its basic responsibility to its citizens. One should also

35. UN statistics from the Millennium Development Goals Indicators spreadsheet, <http://unstats.un.org/unsd/mdg/SeriesDetail.aspx>.

36. GoH, "Post Disaster Needs Assessment" (2010).

37. WHO, « Access to Improved Drinking Water Sources and to Improved Sanitation (Percentage). »

note that the numbers fall short of meeting the Millennium Development Goals (MDGs). (The MDGs are a set of eight international development goals with specific targets that member countries of the UN and international organizations have agreed to achieve by 2015.) With respect to clean water and safe sanitation, Goal 7, Target C, pledges to “halve, by 2015, the proportion of the population without sustainable access to safe drinking water and basic sanitation,”³⁸ taking 1990 as the base year.

The MDG target numbers for Haiti are for 74 percent of the population to have sustainable access to drinking water, as well as for 63 percent to have access to improved sanitation facilities, by 2015. Currently, it is projected that Haiti will miss both targets.³⁹ According to the IDB, for Haiti to reach these MDG targets it would need to invest \$106.7 million per year in the WASH sector between 2008 and 2015, a total of \$746.9 million. The current annual WASH investment in Haiti is running at \$15 million.⁴⁰

Despite the financial difficulties, the government continued to seek ways to expand and improve access to water. In the mid-1990s, CAMEP initiated a program of establishing public communal water fountains in poor neighborhoods to increase access to potable water at affordable prices.⁴¹ To manage the fountains, residents created *Comités d’Approvisionnement en Eau Potable* or, more recently, *Comités d’Approvisionnement en Eau Potable et Assainissement* (Drinking Water Supply and Sanitation Committee, CAEPA), indicating the additional responsibilities for sanitation. The water committees charged end-users affordable fees, which the committees used to maintain the systems and pay monthly charges to CAMEP. Local water committees emerged to help manage water supplies in slum areas, small towns, and rural communities.⁴² Members were unpaid volunteers and elected by their community.⁴³ By 2003, there were some 230 CAEPAs throughout the country. Recognizing their role in the sector, the government, with support from NGOs, the Pan-American Health Organization (PAHO), and the WHO, sought to formalize and strengthen them by offering them technical and administrative training.⁴⁴

In addition to managing water systems in villages and small towns, in Port-au-Prince some of these committees operated water kiosks and managed funds

38. UN, "We Can End Poverty 2015: Millennium Development Goals."

39. IDB, "Drinking Water, Sanitation, and the Millennium Development Goals in Latin America and the Caribbean" (Washington, DC: 2010).

40. Ibid. These figures were calculated at the time of the report. The report also calculates the investment required to reach universal coverage by 2020 – \$137.2 million per year or for a total of \$1.647 billion. (See Appendix III, page 11, of the original report.)

41. Michelle Karshan, "Haiti Water Alert: The Poor Pay the Heaviest Price" (2002), <http://webster.edu/~corbetre/haiti-archive/msg11244.html>.

42. IDB, "Support for the Preparation of Ha-L1044 (Expansion of Clean Water and Sanitation Services)" (Haiti: DINEPA, 2009).

43. Ibid.

44. PAHO/WHO, "Development Durable Et Sante Environnementale En Haiti" (Port-au-Prince, Haiti: 2003).

generated from water sales for community projects.⁴⁵ They worked in close partnership with CAMEP, from which they bought their water.⁴⁶ Some of the committees, especially those that had worked closely with members of their communities, were very effective; they collected revenues and managed and maintained the systems.⁴⁷ However, other CAEPAs were not as effective, according to evaluations by the World Bank and the International Monetary Fund. Effective ones proved to be an efficient and cost effective way of expanding access to clean water for poor Haitians. Although the communal fountain initiative provided a sustainable, safe water supply to thousands, it could not keep up with Haiti's rapid urbanization and population growth or close the gap that resulted from decades of underinvestment. The program eventually collapsed and residents had to rely on buying water from private vendors at exorbitant prices (see next section below for more on the private water industry).⁴⁸ The need for a comprehensive program to reform the system and increase access to potable water was self-evident.

High hopes for new reforms

The various WASH agencies discussed above continued to serve the same functions with the same responsibilities until a new round of reform started in 2006. The framework for the reform, written and submitted to the Haitian Parliament in 2007, proposed reforming the sector, including creating DINEPA to replace CAMEP and SNEP during the period of 2008-2010.⁴⁹ The law passed in January 2009, and DINEPA was created. The new law names DINEPA as the national entity responsible for executing national policy for the sector, a broad mission that includes (1) development of the potable water and sanitation sector at the national level, (2) regulation, and (3) managing all actors within the sector. Another important change the new law makes is formalizing the local water committees. Unlike in the past, when water committees lacked a clear structure, rules, and regulations, the new law sets requirements on membership, size of communities they can serve, and their role if and when a system is to be contracted to a private entity (or a professional operator).

45. World Bank, "Project Appraisal Document" (2006).

46. *Ibid.*, 29.

47. *Ibid.*

48. According to Karshan, during CAMEP's program public communal water fountains would charge 1 gourde (\$0.04) for 13 gallons of water, while at supermarkets it cost 35 gourdes (approximately \$1.40) to buy 5 gallons of water, or 7 gourdes (\$0.28) for 1 gallon of water. A truck of water cost approximately 800 gourdes (approximately \$32.00) for 3,000 gallons of water or 1 gourde (\$0.04) for only 3.75 gallons of water. In 2011, private vendors charged 1,500 gourdes (\$38) for a truck of water (with a foreign-exchange rate of 8/1). Fifteen hundred gourdes is the same as 300 Haitian dollars.)

49. GoH, "Secteur Eau Potable Et Assainissement," ed. MPTC (Port-au-Prince: Government of Haiti, 2007).

Unlike in the past, when committees were managing water supplies for towns and villages of various sizes, the new law mandates that they only manage systems serving communities of fewer than 10,000 people; any system serving a community of 10,000 people or more must be managed by the government.⁵⁰ A system is defined as a hydraulic infrastructure with harnessing points that has at least two communal or domestic distribution points (fountains, kiosks, or domestic extensions). A local water committee must have at least four members, two of whom are women, elected by the community for a three-year term. The new law also encourages the privatization of the system if necessary, that is if this would “professionalize” the sector to make it more efficient and facilitate a pricing system based on economic efficiency, financial viability, and social equity. Equally important, the law mandates that the committee be consulted about privatization and be part of the process of selecting the contractor.⁵¹ The hope is that the new sets of reforms will help to modernize the sector and expand and enhance services. The historical account thus far shows that, for many years, the government has been looking for ways to reform and improve the sector. However, it has remained constrained by a number of issues, including continued lack of funds, lack of trained human resources, political instability, and concentrated control of water trucking by a few private businesses.

Precise studies of the private water industry in Haiti—an industry that is largely unregulated—have not been undertaken. According to a Public Broadcasting Service (PBS) “Frontline” documentary, the water trucking business started in the early 1970s as an enterprising idea among some individuals, involving a few trucks.⁵² Over the years, the idea has turned into a very profitable industry. Water trucking has become one of the primary ways people in major cities can have access to water. The trucks deliver water to any household or business with a cistern, which they use for drinking, cooking, and cleaning. In many cases, individuals who own cisterns and can afford to do so will buy a truck of water and then sell it in poor communities by the bucket. The PBS documentary also noted that water companies would buy “the trucked water, treat it, then sell it as drinking water.”⁵³ A truck of water can cost anywhere from \$30 to well over \$100 for the consumer, depending on the location of the delivery. In Port-au-Prince, for example, an individual truck can make between \$3,000 and \$4,000 per month in water sales.⁵⁴ In a country where more than 70 percent of the people are living on less than \$2 a day and 80 percent are without a formal job,⁵⁵ it is financially

50. DINEPA, ed., *Status Du Caepa* : (Port-au-Prince, Haiti, 2010).

51. *Ibid.*, 7.

52. Shoshana Guy, "Haiti: The Struggle for Water," PBS Frontline, October 2004, <http://www.pbs.org/frontlineworld/fellows/haiti/indexb.html>. See also Varma, et al., "Woch Nan Soley," (2008).

53. Guy, "Haiti: The Struggle for Water" (2004).

54. *Ibid.*

55. Oxfam America, "Haiti: Advocacy, Media and Campaign Strategy" (Washington, DC: 2011). (Revised on April 8, 2011).

impossible for the poor to have access to the minimum water required for their basic needs, as called for under international treaties and Haiti's constitution. The 2006 reforms sought to address head-on the issue of increased affordable access to water and sanitation, but thus far without much success.

Part II: The challenges of WASH in post-earthquake Haiti

As noted, this report has two major parts. Part I focused on Haiti's WASH sector before the January 12, 2010, earthquake. Part II focuses on the issues of equity, effectiveness, and accountability since the earthquake as they relate to the WASH system, including the WASH cluster.

The devastating earthquake of January 12, 2010, stopped and even reversed whatever progress Haiti had made in the WASH sector. The WASH problem had become increasingly difficult with the demands of a growing population, and the earthquake further complicated things, killing more than 300,000 people and initially displacing another 1.5 million within the country.⁵⁶ Also, in October 2010 the country had to deal with an outbreak of cholera, which has thus far killed more than 6,900 people and sickened more than 500,000 others.⁵⁷

The earthquake caused tremendous property damage in Port-au-Prince and neighboring areas. Overpopulation and weak construction standards contributed to the scope and depth of the devastation.⁵⁸ According to Dupuy (2010), Port-au-Prince's population had grown from 150,000 in 1950 to 732,000 in the early 1980s and nearly 3 million in 2008.⁵⁹ Over 86 percent of the inhabitants lived in heavily populated slum areas,⁶⁰ areas that have lacked clean water and access to improved sanitation for years and hence have poor hygiene. Understanding the interdependent nature of these issues, Oxfam and other NGOs began to work diligently to assist the victims. Oxfam was in an excellent position to assist the people of Haiti, because it has built solid relationships with communities and had a trusted network across different parts of the country. Throughout its 32-year history in Haiti, Oxfam has adopted a collaborative model of working with Haitian partners (in both civil society and government) to ensure that its programs are effective, participatory, and accountable to the local communities.

In addition to working on long-term development, Oxfam has been a major provider of international humanitarian assistance, and it takes a rights-based approach in all its programs. Oxfam's work in the WASH sector is centered on its core belief that people have a right to clean water and sanitation. The interdependent nature of WASH, food, health, and housing has been why Oxfam

56. CBC News, "Haiti Raises Quake Death Toll on Anniversary" (2011), <http://www.cbc.ca/news/world/story/2011/01/12/haiti-anniversary-memorials.html>.

57. Alejandro Cravioto, et al., "Final Report: Independent Panel of Experts on the Cholera Outbreak in Haiti" (New York: UN, 2011). I update the death and illness numbers since the release of the UN report.

58. Anthony Oliver-Smith, "Haiti and the Historical Construction of Disasters," *NACLA* 43, no. 4 (2010).

59. Alex Dupuy, "Disaster Capitalism to the Rescue: The International Community and Haiti after the Earthquake," *NACLA* 43, no. 4 (2010).

60. Oxfam International, "Haiti Progress Report" (Oxford: 2010).

takes a holistic, rights-based approach to development. For example, a shelter without sufficient clean water and sanitation cannot be considered safe. Oxfam understands and accepts this view and has worked to design its programs within this context. In the first few weeks after the earthquake, Oxfam provided safe drinking water and sanitation facilities for nearly 400,000 displaced people in Port-au-Prince and surrounding areas, as well as some areas outside the capital region, such as Petit Goâve, Grand Goâve, Gressier, and Léogâne.⁶¹

WASH cluster: Good idea but needs work

According to the *Haitian Times*, the UN's Inter-Agency Standing Committee (IASC) started to implement the cluster system in 2009. There were 12 clusters in Haiti, consisting of about 40 to 60 agencies and NGOs among them. Soon after the earthquake, the clusters were holding 70 or 80 meetings a week at the far-off UN Logistics Base near the international airport. The WASH cluster was the exception. Its meetings were coordinated by a staff member from DINEPA and held in more accessible locations in relevant cities or towns. The WASH cluster has been credited with being the best among all the clusters involved in the earthquake response.⁶² As of March 2011, there were 40 to 50 meetings a week at the city and town levels, with a national meeting once every week or two.⁶³ While the cluster coordinator has always been from a large NGO or multilateral agency, as the emergency phase subsides, national government ministries and agencies are supposed to take over leadership so they can coordinate and eventually direct the international agencies and NGOs.

How effective have the WASH cluster and its members' activities been?

Effective policies, systems, and services are those that achieve their stated goals in a manner that is sustainable. The WASH cluster and its member agencies (NGOs and IGOs) played an important role in assisting the victims of the earthquake. In fact, they were the main providers of assistance to those affected by the disaster. According to the UN Office for the Coordination of Humanitarian Affairs (OCHA), the WASH humanitarian response following the disaster met the basic water and sanitation needs of more than 1.7 million people—including delivering at least five liters of drinking water per person to

61. Ibid.

62. *Haitian Times*, "The Cluster System in Haiti" (2010). http://haitiantimes.com/view/full_story/9988306/article-The-Cluster-System-in-Haiti.

63. Ibid.

1.2 million people daily. NGOs and UN agencies also constructed more than 11,000 latrines and distributed 87,300 hygiene kits. (The kits, which contain items such as soap, shampoo, toothpaste, toothbrushes, sanitary pads, and towels, are designed for a family of five and can last up to three months.) Finally, WASH cluster agencies have employed more than 2,200 hygiene promoters and community organizers to educate and distribute WASH information.⁶⁴

Similarly, within the first year after the earthquake, Oxfam alone provided clean drinking water and sanitation facilities to approximately 500,000 displaced people in Port-au-Prince and neighboring areas, and outside the capital in Grand-Goâve, Gressier, Léogâne, and Petit-Goâve. Oxfam provided over 79 million gallons of clean, chlorinated water monthly; built 2,500 latrines and 1,032 bathing shelters, which the camp residents and local people maintain; distributed hygiene kits to more than 120,000 people; and conducted a cholera-prevention program that benefited 700,000.⁶⁵ Other organizations, such as the Red Cross and Haven, assisted tens of thousands of additional displaced people.

Those interviewed for this research evaluated the effectiveness of the WASH cluster at national and local levels. At the national level, many of the participants in the WASH cluster noted that it was not as effective as it could have been—despite the considerable assistance that its members managed to provide—because it could not address all the need at hand. They pointed to two main reasons for WASH sector shortcomings: a misunderstanding of the WASH cluster objectives and the lack of a comprehensive strategy.

Misunderstanding WASH sector objectives

The first reason for WASH shortcomings had to do with the lack of understanding of what the cluster was supposed to be. Attendants of cluster meetings first understood the cluster to be a forum for discussions, a place to share ideas. In reality, the cluster was designed as a coordination mechanism to help in assigning tasks, monitoring compliance with standards, and developing “best-practice” guides.⁶⁶ The WASH cluster’s primary coordinators, the United Nations Children’s Fund (UNICEF) and DINEPA, wanted to use it for such purposes; however, some NGO representatives viewed the way that UNICEF and DINEPA organized meetings as inefficient and complained that the cluster turned out to be a place where the primary coordinators simply passed out information. People interviewed described the cluster as being a forum where “people in positions of power pass information but not a place for discussion.”⁶⁷ One interviewee used a street analogy: “[The cluster] has not been a two-way

64. OCHA, “Haiti: One Year Later” (UN, 2011).

65. Oxfam International, “Haiti Progress Report” (2010).

66. See OCHA Haiti website, <http://haiti.humanitarianresponse.info/Default.aspx?tabid=164>.

67. Interview with Harouna Boubacar. See Appendix B for details on the interviews.

street; it has been a one-way street.”⁶⁸ A representative from UNICEF would come to the meeting with a report and everyone would listen to its findings and that would be it.

At the local level, however, WASH activities were seen in a more practical light. In camps assisted by WASH cluster NGOs, members of camp WASH committees worked extensively to educate rank-and-file residents about the programs. Everyone interviewed, even those who may not have been directly involved in programs, generally knew about WASH services. This was the case whether they were in urban or rural areas and indicates that a good and effective level of education in the camps had been carried out. Participatory discussions and sharing of ideas among the NGOs and the camp committees was a key difference between the two levels. Those interviewed expressed greater satisfaction with WASH at the local level, even though some pointed to outcomes of certain programs at campsites that were unsatisfactory, for instance not enough hygiene promoters in a camp. In essence, the difference between the national and local levels can be described as being between theory and practice.

The different ways that the WASH cluster operated, according to those interviewed, had important consequences for the effectiveness of its members’ programs. Because the cluster, at least during its early stage, served primarily as a place to coordinate and hand out information to NGOs, many participants got discouraged and did not feel any urgent need to attend meetings on a regular basis. The logic was that if one of them missed a meeting, that actor would not miss much. During the early months, the meetings were chaotic and uncoordinated. The uncoordinated nature of the cluster and the lack of a comprehensive strategy undermined its effectiveness initially, although it improved and became better over time.

The cluster’s limited effectiveness could be seen in the type of complaints that camp residents expressed around the issues of clean water, sanitation, and hygiene more than a year after the earthquake. One of the complaints was that the NGOs had not done enough or could have worked in ways that would have been more effective in assisting people in this emergency. Often speaking in general terms, critics of what the NGOs had done or had not done argued that they have spent a lot of money and have little to show for it. In March 2011, when field research was being done for this report, close to one million people were still in camps. The International Organization for Migration (IOM), in February 2011, had estimated that the number of IDPs in the camps had decreased from its peak of 1.5 million in July 2010 to around 810,000; in March it

68. Three representatives from three different NGOs and a representative from DINEPA expressed and confirmed this view in interviews with the author in March 2011.

put the estimate at 680,000 people.⁶⁹ By the end of the year, the number remained at 550,000.⁷⁰ Talking to camp committee members, at the top of their list of concerns were safe water and sanitation facilities. They had major concerns around the systems of water trucking and temporary latrines. The latrines, which are either pit latrines or fabricated toilets, must be emptied regularly, and the costs of emptying and maintaining the latrines are exorbitant. The camp leaders also complained that the latrines were not effective for a number of reasons, including space and design issues. As for concerns about water trucking, the government should be able to do something in fairly short order. As previously noted, water trucking has been a large and lucrative industry in Haiti since the 1970s, and it is largely unregulated. Without the government taking the lead, it is unreasonable to expect the NGOs to address some of the long-standing concerns, although the clusters could help support the government in taking action.

Some of the concerns regarding WASH were due to the fact that many of the Sphere standards were not adopted. From interviews with various participants in the cluster, it became clear that the cluster system was confusing. The different participants had a hard time managing the cluster or even understanding what it was supposed to be and do. It was amorphous and was not able to help the NGOs coordinate their work as effectively and efficiently as it could. Duplication of work and overlapping responsibility contributed to confusion, even among the members of the camp committees. In most of the camps I visited, the committee members had difficulty identifying who they were to contact if they had a problem with regard to WASH issues. Such confusion and disorganization are some of the things that the cluster was created to help avoid. To the extent that the WASH cluster was to serve as a tool to help the participants streamline their work so they could be more effective in assisting those in the camps, it was not as effective as it could have been. As one of the people interviewed explained, "In terms of the various partner organizations using [the cluster] as a way to standardize their work, it is not effective. In other words, people have failed to make it where standards are accepted and used uniformly."⁷¹

Lack of a comprehensive strategy

Another reason why the WASH response to the earthquake was not as effective as it could have been had to do with a lack of a comprehensive strategy. Addressing complex and interdependent WASH issues cannot be done in a limited fashion. In the urban areas, many of the NGOs worked only in camps. Is it possible to address sanitation or hygiene concerns, which are ultimately health

69. IOM, "Displacement Tracking Matrix," V2.0 Update (March 16, 2011)" (Port-au-Prince: 2011).

70. Office for the Coordination of Humanitarian Affairs, *Humanitarian Bulletin* (Port-au-Prince: OCHA, 18 October–17 November, 2011).

71. Interview with Danielle Domersant Torchon.

concerns, in urban IDP camps without having similar concerns in neighboring communities? In the rural areas around Léogâne, for example, some groups worked in adjacent communities as well as the camps. However, not all of the communities were covered. The same logic applies: How effective was it to work in one neighborhood while others are neglected? By only focusing on the camps or a particular neighborhood, the WASH response left significant gaps. These gaps also undermined the work done because people were highly mobile, so hygiene work in the camps or neighborhoods would be compromised once a person left the camp or the immediate neighborhood. This argument, of course, goes beyond the humanitarian WASH response to question the way in which humanitarian assistance programs have routinely been designed; it suggests that humanitarian assistance in general would be more effective if it took a broader approach.

Credit to NGOs

Based on the number of people assisted (see figures above), the NGOs in the WASH cluster deserve significant credit. As noted, there were some criticisms, and a major one was whether the work of the NGOs could have been done more efficiently and effectively if the NGOs had not only assisted those in immediate need but also had helped increase the capacity of the Haitian government and local organizations. Some NGOs installed water kiosks, bladders, and temporary installations, but many interviewees wondered whether beneficiaries would be able to maintain them after the NGOs leave. Nevertheless, considering the enormous challenges that the earthquake created, including the deaths of many civil servants, the Haitian government alone would not have had the capacity and capability to address them in any significant way. Also, the government did not have any experience in addressing this type of emergency. Therefore, assistance from NGO and IGOs was and remains critical.

WASH and the cholera outbreak

In October 2010, 10 months after the earthquake, Haiti was hit by a cholera outbreak. According to a UN Independent Panel of Experts report,⁷² which was released in May 2011, more than 4,500 people had died and almost 300,000 others had been sickened. The source of the cholera has been controversial, however, the report concludes that the “source of the Haiti cholera outbreak was due to contamination of the Meye Tributary of the Artibonite River with a pathogenic strain of current South Asian type *Vibrio cholerae* as a result of human activity.”⁷³

72. Cravioto, et al., "Final Report" (2011).

73. Ibid., 29. The original quote is bold-faced.

The *Mission des Nations Unies pour la stabilisation en Haïti* (UN Stabilization Mission in Haiti, MINUSTAH) base in Mirebalais, which houses soldiers from countries in South Asia, was the source of the bacteria that contaminated the river. As the report notes, “The sanitation conditions at the Mirebalais MINUSTAH camp were not sufficient to prevent fecal contamination” of the river system. The report offers nine factors that contributed to the rapid spread of the disease: ⁷⁴

1. Tens of thousands of Haitians use the Meye Tributary System and Artibonite River waters for washing, bathing, drinking, and recreation, and were thus exposed to cholera;
2. Thousands of Haitian agricultural workers are regularly exposed to the Artibonite River water, particularly in the rice paddy fields;
3. The canal system and delta of the Artibonite River provided optimal environmental conditions for rapid proliferation of *Vibrio cholerae*;
4. The Haitian population lacked immunity to cholera;
5. Many areas of Haiti suffer from poor water and sanitation conditions;
6. Infected individuals fled to their home communities from the initial outbreak locations, and in the process dispersed the disease;
7. Infected individuals rapidly concentrated where treatment was available;
8. The South Asian type *Vibrio cholerae* strain that caused the outbreak causes a more severe diarrhea due to an increase in the production of a classical type of cholera toxin and has the propensity of protracting outbreaks of cholera; and,
9. The conditions in which cholera patients were initially treated in medical facilities did not help in the prevention of the spread of the disease to other patients or to the health workers.

The findings of the report as well as other studies⁷⁵ make it clear that the lack of clean water and adequate sanitation services was a major factor in the rapid spread of cholera. According to Piarroux et al. (2011), an investigation October 21-23, 2010, “showed that most affected persons worked in rice fields or resided alongside a stretch of the Artibonite River and that 67% drank untreated water from the river or canals” (9).

74. Ibid.

75. R. Piarroux, et al., “Understanding the Cholera Epidemic, Haiti,” *Emerging Infectious Diseases* (July 2011).

Waste management is an even bigger concern in Haiti than water and sanitation. People interviewed in Haiti were highly concerned about this issue. The UN report raises those same concerns. The UN experts point to mismanagement of human fecal waste by contractors as a possible contributing factor in the cholera outbreak. After the cholera outbreak, the government began to talk about developing more waste-dumping sites. The current site, Truttier, is essentially full and the Haitian government and its international partners have been talking about creating more latrines and developing a robust system. To date, no other waste dumpsite has been established.

Notwithstanding its devastating impact, the cholera outbreak has forced an important change in the water sector: it has made the government and the NGOs more serious about treating drinking water. With respect to water, after the outbreak all of the NGOs began to treat the water that they were providing at the campsites. Oxfam was one of the organizations that sought to address these issues. In addition to education around storage, Oxfam treated (chlorinated) all of the water it provided to the camps that it managed. With more and better quality water, it is certain that fewer Haitians would have contracted cholera and fewer would have lost their lives.⁷⁶

With respect to wastewater treatment, the Government of Spain (GoS) provided funding for the construction of Haiti's first wastewater treatment facility. Unfortunately, the project was suspended because of disputes over the ownership of the land.⁷⁷

Cholera outbreak points to a weakness of the WASH cluster

Management of human waste is a key part of preventing and managing cholera, but waste management in Haiti is essentially nonexistent.⁷⁸ The main coordinators of the WASH cluster could not say for certain whether Truttier, the one site where collected waste is being taken, is a legal site. In addition, only a fraction of waste is being taken there. Even before the earthquake, lack of waste collection was a problem. Only 52 percent of waste in the Port-au-Prince metropolitan area was being collected. In the ten largest urban areas, only 17 percent of waste was collected by municipal services.⁷⁹ As one of the people

76. Torchon interview.

77. Anonymous, "Haiti - Spain: Works Blocked, Unacceptable!," *Haiti Libre* (January 21, 2011), <http://www.haitilibre.com/en/news-2177-haiti-spain-works-blocked-unacceptable.html>.

78. The lack of waste management infrastructure in Haiti was well known. The UN (UNICEF) knew it and DINEPA mostly certainly knew it. See Haiti's Poverty Reduction and Strategy Paper, part of which sought funding for the creation of DINEPA and reforming the WASH sector. [GoH, "Growth and Poverty Reduction Strategy Paper," ed. Ministry of Planning and External Cooperation (Washington, DC: International Monetary Fund, 2008).] UNICEF and DINEPA were (are) the national coordinators of the cluster. The threat of cholera should have been obvious, considering the conditions in Haiti after the earthquake.

79. GoH, "Post Disaster Needs Assessment," 67 (2010).

interviewed asked, “What has happened to the rest of the waste?”⁸⁰ There is neither the infrastructure nor the resources to increase collection capacity or allow significant monitoring or inspection. Under these circumstances, it is impossible for anyone to effectively address the issue of cholera and other diseases.

People interviewed for this report expressed deep disappointment with the government’s response to the cholera outbreak but credited the WASH cluster as having done a fairly good job. They pointed to the lack of cholera epidemics in the camps as evidence of the efficient WASH activities in the camps.⁸¹ There is some evidence to support this view. Statistics from the Ministry of Health have shown that the fatality rate in the Port-au-Prince metropolitan area stabilized at 0.9 percent in March 2011, compared to a national rate of 1.7 percent.⁸² While it is true that some of the worst-case scenarios that were predicted for the camps at the outset of the cholera outbreak have not come to pass, the cholera outbreak did make its way to Port-au-Prince from Mirebalais, and indeed, the disease has spread throughout the country and to offshore islands.⁸³ There was no cholera prevention plan; one was not created until after the outbreak. Given that one of the major responsibilities of the cluster was coordination, it is reasonable to argue that more should have been done in term of cross-cluster coordination between the WASH and health clusters even before the cholera outbreak.

Laudable support from GoS

Having offered this critical evaluation of the WASH cluster, it is important, however, not to lose sight of the support Haiti has been receiving in the WASH sector and the work that members (the NGOs and IGOs) have done. Since the work of the NGOs has been noted elsewhere in this report, let us look at some of the support the sector has received from Spain, for example, which has been underreported. After the earthquake, the GoS and the IDB allocated \$50 million in grants to fund repairs to Haiti’s damaged water and sanitation infrastructure. More than half of the grant (\$29.5 million) came from the Spanish Cooperation Fund for Water and Sanitation in Latin America and the Caribbean (Spanish Fund) and was allocated to repair and expand systems and services. Equally important, the funds were to be used “to strengthen the institutional capacity” of DINEPA.⁸⁴ Spain’s support to the WASH sector has been constant for a number of years. Since 2008, *Agencia Española de Cooperación Internacional para el Desarrollo*

80. Interview with Raphael Mutiku.

81. Interview with Christian Paul Nanphy.

82. Liz Clayton, "Situation Report #41" (Port-au-Prince: Oxfam, 2011).

83. Information provided by Kenny Rae and Myra Foster of Oxfam America’s Humanitarian Response Department.

84 . IDB, "Haiti Will Rehabilitate and Expand Water and Sanitation in Port-Au-Prince with Grants from Spain and the IDB," news release (Washington: IDB, July 21, 2010), <http://www.iadb.org/news-releases/2010-07/english/haiti-will-rehabilitate-and-expand-water-and-sanitation-in-portauprince-with-gra-7534.html>.

(Spanish Agency for International Cooperation, AECID), in partnership with the IDB, has supported eight drinking water, sanitation coverage expansion, and improvement projects in Haiti. In 2009, Spain provided \$20 million to expand and improve water and sanitation services in many Haitian cities and town. Repairing and expanding the systems are crucial to reach all communities. According to the IDB, Spain has created a \$100 million bilateral fund to finance the reform and modernization of the WASH sector, an effort that will benefit all Haitians in the long-term.⁸⁵

Post-earthquake WASH accountability

As defined under the “key terms” section at the beginning of this report and expanded on in Appendix A, accountability means that those providing services to a community are responsible for ensuring that the services are indeed rendered; as well providers must answer to the community if they fail to meet their responsibilities. Also, those who would be affected must consent to the services and be involved in the projects or programs. Given this understanding, this research initiative based accountability on how the service providers thought they had done and what the recipients of the services thought.

Accountability techniques

Experts have proposed and argued the merits of a number of ways to hold service providers accountable.⁸⁶ In 2004, the World Bank offered a model of what it called the accountability framework for service delivery.⁸⁷ This model includes a *short route* and a *long route* of accountability, involving three sets of actors: (1) the state (politicians/policymakers), (2) citizens/clients, and (3) public/private utilities and service providers. The short route of accountability is very simple: a direct relationship between the seller and the buyer of a service. If the service/product bought is good and the buyer is satisfied, then the relationship will continue, rewarding the seller with continued business. On the other hand, if the service is subpar, the buyer will punish the seller by ending the relationship and choosing another service provider. The seller whose primary interest is to stay in business would do his/her best to be accountable by providing good

85. Ibid.

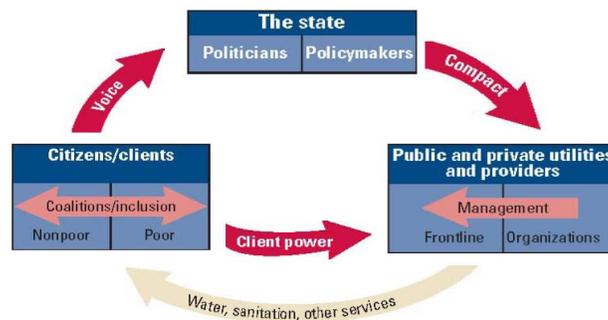
86. The argument about market competition versus government regulation is essentially about accountability. On the one hand, proponents of the former argue that the market mechanism combined with consumer freedom will reward accountable businesses and punish unaccountable ones. The logic is that businesses that hold themselves accountable by providing quality products and services to the public will prosper and those that do not provide quality services and products will fail. On the other hand, proponents of the latter view posit that government regulations are necessary to ensure that businesses are accountable. However, it often requires a combination of both market forces and regulations to ensure accountability.

87. World Bank, "World Development Report 2004: Making Services Work for Poor People," 160 (Washington, DC: The World Bank, 2004).

products and services to the buyer. In this simple model, there is no intermediary.⁸⁸

The second way that citizens/clients can hold service providers accountable is through a more complex long route. Through the political process, citizens “use voice” (make demands for better services) to politicians and policymakers, who then engage with the service providers to create compacts or agreements to serve the citizens. The success of the long route is dependent on a variety of factors, including the nature of the political system, the strength of citizens’ voice, and the effectiveness of the state. For example, in countries where water and sanitation facilities are publicly managed, the state needs to be able and willing to “ensure that utilities, boards, and government departments provide efficient and equitable services for all citizens, including the poor.”⁸⁹ If the state fails to meet this obligation and the voice option is not able to pressure it, then the long route of accountability will have failed. If the services are provided by the private sector, the state must be able to secure “compacts” with the private actors. A compact includes the agreement “to design the service delivery framework, choose a provider, and ensure that it meets citizen expectations.”⁹⁰ (See conceptual diagram in Figure 3 below.)

Figure 3: Conceptual diagram of accountability in service provision



Source: World Bank (2004:162)

88. Ibid., 161.
89. Ibid., 162.
90. Ibid.

Given the fragile or weak nature of Haiti's institutions, it is doubtful that either of the routes of accountability can be taken.⁹¹ First, let us examine why the short route as explained above is unlikely to have any success in Haiti. The number of those who are poor is large and they are not well organized. Due to the collective action problem,⁹² these two characteristics make it difficult for the poor to significantly penalize a seller for inadequate service provision. The collective action problem is particularly acute when the population is large in number and the benefit to each individual is perceived as being relatively small compared to the individual's sacrifice required to generate change. In this context, a service provider will not be intimidated by the threat of being penalized by a poor buyer. The small number of service providers reinforces the unequal bargaining power between providers and clients. Therefore, the direct relationship that the short route of accountability assumes is not likely to hold.

The long route of accountability is equally difficult in the Haitian context because of the weakness of the state and the lack of effective institutions, including political parties. Clients would find it extremely difficult to use voice to pressure politicians/policymakers to establish compacts with service providers on their behalf. If policymakers made compacts, there would be no guarantee that either the state or the private sellers would be willing or able to adhere to them. In addition, there is no formal mechanism for voicing grievances. As a result of these weaknesses and institutional failures, accountability has been lacking. In short, the accountability routes, as proposed by the World Bank, will not work under the present conditions in Haiti.

Finally, one could use something as basic as visiting the campsites to evaluate whether the Haitian government exercised an acceptable level of accountability toward the victims of the earthquake. Based on interviews with the various stakeholders, as well as accounts from ordinary people in Port-au-Prince, it was clear that the government could have done better in meeting its responsibilities to the victims. After more than a year, many of the camps had yet to receive even a visit from any government official. Residents expected at the very least a visit from representatives of the agencies responsible for their basic needs, such as water and sanitation. It is absolutely reasonable for people to expect officials from DINEPA, for example, to visit their camps. Equally important, the GoH

91. Haiti is the 12th weakest of the 141 countries in the developing world.[Susan E. Rice and Stewart Patrick, "Index of State Weakness in the Developing World," (Washington, DC: The Brookings Institution, 2008).] The index defines weak states as those that lack "the essential capacity and/or will to fulfill four sets of critical government responsibilities: fostering an environment conducive to sustainable and equitable economic growth; establishing and maintaining legitimate, transparent, and accountable political institutions; securing their populations from violent conflict and controlling their territory; and meeting the basic human needs of their population" (pg. 3). At number 12, Haiti is a critically weak state.

92. The literature on coalition and interest group politics supports this logic. For an in-depth explanation of the logic of collective action, see Mancur Olson, *The Logic of Collective Action: Public Goods and the Theory of Groups* (Cambridge: Harvard University Press, 1965).

should have sent people to the camps to consult with and inform residents of reconstruction plans. Reverend Jean-Marie Exilhomme, the committee leader of a small camp in Mariani, Commune of Gressier, was dismayed that no one from the government had visited his camp.⁹³ He was particularly concerned with the lack of safe water and sanitation facilities for residents in the camp, who relied on using plastic bags as toilets and put them by the drains so that they would be washed away when it rained.

Residents in other camps in Delmas 31 and Delmas 33 expressed similar concerns around water and sanitation, yet as of March 10, 2011, no one from the government had visited camp Union Adventist in Delmas 33, according to members of the camp committee.

NGOs at the campsites

Given the absence of formal, effective, known accountability mechanisms, what one is left with in Haiti is a situation in which individual actors design their own accountability mechanisms and work to adhere to them. The different NGOs have put in place different types of accountability mechanisms within their programs. Internally, organizations produced extensive reports, both narrative and financial, for their funders. Also, for most of the organizations, their structures included some built-in accountability mechanisms where different staff members were accountable to a superior or a group. In the early months after the earthquake—as expected given the breadth and scope of the devastation—accountability was not the top priority for many of the organizations. Extrapolating from the interviews, in some cases no significant consultation with the affected communities in the development of programs took place. Even where there were some consultative efforts, they took place after the programs had been developed.⁹⁴ Nevertheless, over time the organizations instituted accountability mechanisms. For example, Oxfam provided beneficiaries of its programs with a toll-free “400” number to call if they had any complaints or suggestions on the programs. The 400-number approach is a good strategy given the increased availability and use of cell phones in Haiti. (The number of cellular subscriptions in Haiti went from 1 percent of the population in 2001 to 36 percent in 2009.⁹⁵ Increased availability and accessibility have made it possible for a substantial number of people to use mobile phones as an important tool to express their opinions as well as to receive information from

93. Interview with Jean-Marie Exilhomme.

94. Several people interviewed expressed this view. Among them were Frederic Deparis and Dr. Danielle Domersant Torchon. See Appendix B for dates of interviews.

95. World Bank. <http://search.worldbank.org/all?qterm=Use%20of%20mobile%20phone%20Haiti> (accessed July 13, 2011).

various sources.) Oxfam also placed suggestion boxes at the various sites where it worked and instructed the beneficiaries in their use.⁹⁶

While having these accountability mechanisms in place was notable, it also begs the question of whether the organizations acted on the suggestions or complaints they might have received from beneficiaries. In camps where Oxfam was present, the result was fairly good. In fact, most of the camps that had a visible presence and involvement of a well-established NGO fared better than those that did not have such an NGO presence.⁹⁷ There were cases where organizations took seriously the concerns of communities and made changes in some of their operations as requested by community members. One of Oxfam's latrine and shower construction programs was strong in this respect: Oxfam accepted a request from the community and redesigned its showers by adding a concrete platform in the middle of the showers instead of having it all in gravel.⁹⁸ On the other hand, two of the camps I visited, Camp Magwana in Delmas 31 and Camp Centre Tabernacle Apostle of Jesus in Mariani, had no significant NGO presence and consequently had no WASH services, accountable or otherwise. Such cases illustrate the crucial role of the NGO community.

Equity: High level of awareness but needs better implementation

In terms of equity on the part of the NGOs with respect to programs and services, the emergency WASH response was equitable. The question that I posed to different stakeholders—NGO and government representatives and people at the camps that I visited—was whether the WASH programs in the camps had been equitable to their beneficiaries or their communities. As defined earlier in this report, the conception of fairness/equity is largely based on how the stakeholders—including the intended beneficiaries—perceived the programs, as well as what they said about them.

Those interviewed recognized that the NGOs spent considerable resources in terms of time and energy to ensure that their programs were fair and justified. They concluded that the programs were fair to residents of the camps, even though two NGO representatives (and one government official) expressed the view that they could have done better to reach out to communities outside the camps. In the camps where WASH was functioning, residents interviewed

96. Author's interview with staff members of various NGOs and residents at several camps confirmed these accountability mechanisms.

97. This finding is consistent with a major report by Professor Mark Schuller: [Mark Schuller, "Unstable Foundations: Impact of NGOs on Human Rights for Port-Au-Prince's Internally Displaced People" (New York: York College (CUNY) /Port-au-Prince: Faculte d'Ethnologie, 2010).]

98. Mutiku interview.

expressed a general satisfaction in terms of their involvement, and individuals did not feel that they were discriminated against. Participants reported that all of the sites⁹⁹ were served either by one organization or by a combination of organizations. As one person put it: "The people received the services," even though one "cannot say that everything was done 100%, but services were done." While most agreed with this view, there were others who would have liked to see a much more comprehensive approach, and they had important reasons for their views. They argued that the campsites helped set the context for WASH and general NGO intervention. Indeed, the people in the camps were, and, to date, still are in need of WASH and other services, but they were not the only ones in need, according to an interviewee. The camps served as an attraction point, a characteristic that would have been avoided if the programs were comprehensive and had taken communities outside the camps into account. Also, those who expressed significant reservations around the issue of fairness based their concerns on high indirect costs of some of the programs. There were a number of reasons for the high costs, including policies and practices of some of the NGOs and inefficiencies in some government agencies. The issue of high costs is one the NGOs should carefully examine as they continue to work in Haiti.

One glaring inequity I observed was in leadership positions in the camps, where there was clearly a gender imbalance. In my initial visit to each of the six camps, when I asked to meet with a committee member, I was taken to man. He would either be the "leader" of the committee, a spokesperson, or a security person. Only once was a woman called to participate, and she was introduced as the committee treasurer. While I did not carry out a comprehensive survey, other reports have made similar conclusions on this issue.¹⁰⁰ During the two focus group meetings I held, which were conducted a couple of days after my initial visits to the camps, the men dominated the discussions, even though there were fewer of them. This is an issue that future research should seek to address, as it is important to the issue of gender equity and fairness. Why is there a gender imbalance in camp committees' leadership positions, as appears to be the case? The NGO community should work with the residents of the camps to address the apparent imbalance as soon as possible. In the meantime, to encourage balanced discussions in residents' meetings, it may be a good idea to have such meetings be co-chaired by one man and one woman.

99. By "all" I mean the four of the six sites visited with a clear presence of at least one major NGO.

100. Schuller, "Unstable Foundations" (2010).

A rights-based approach to WASH delivery

Another important task for this study was to examine whether post-earthquake WASH services fit a rights-based model. The findings are mixed, because service quality deteriorated as time went on. According to people interviewed, in the few months after the earthquake, camps that were managed by well-established NGOs provided good quality services to the residents.¹⁰¹ Since field research for this report was done a year after the earthquake and at a time when some of the NGOs were either leaving the camps or reducing their services, the analysis is biased toward this latter period.

The WASH conditions in several of the camps visited were such that they fell short of human rights standards. There were several reasons for the shortcomings, including the expensive nature of WASH and lack of training of camp committee members. For example, as the costs of maintaining the camps increased, conditions deteriorated to the point where latrines were left hardly useable.

As WASH agencies and the Haitian government debated moving from addressing the issues in the context of an emergency to the context of development, people were taking a day-to-day approach to WASH that raised serious concerns for camp residents. During a focus group meeting March 10, 2011, residents expressed frustration about the lack of hygiene promoters in the camp. Also, residents stated that the last time the company that managed the latrines came to empty them, in January 2011, several of the wooden slabs were broken and they remained unfixed. Residents also complained that women had no privacy with respect to the showers, noting that such conditions are dangerous and humiliating and put them at great physical risk. As one of the residents said during the meeting: “We are frustrated because of the conditions we are forced to live in in this camp.”¹⁰² The leader of the camp committee voiced the frustration more simply: “That’s not human rights.”¹⁰³

Conditions at another camp that I visited, Pak Magwana, in Delmas 31, also fell short of the basic elements of what could be considered within a rights-based framework. Interviewing a young family whose tent had flooded during heavy rain the night before, it was clear that a rights-based approach had not been reached. The couple’s important documents, including birth certificates and baptismal certificates were soaked in their small tent. With a baby, both the father and mother were frustrated with the conditions in which they were living. The father showed me the papers and allowed me to take pictures. Then he

101. Author’s interviews with two camps committee members, *Kan Inyon Advantis* and *Kan Sinayi*.

102. Interview with Benito Merilus.

103. Interview with Michel Jean Ylbonet.

rhetorically asked: “I am a young man with a wife and a child; does anybody believe I want to live like this?” He complained that WASH services have been lacking at the camp and said that various staff members of UNICEF visited and promised to assist, but never delivered on the promises.

The complaints regarding repeated visits and unfulfilled promises were common and reflected high staff turnover among humanitarian organizations. As a representative of one of the WASH coordinators explained, “It’s hard to talk about accountability because [the WASH cluster] is not an institution; it’s a forum, it has a few staff and a lot of staff turnover. Handover of information has been abysmal—no responsible turnover from staff to staff and that’s a real problem.”¹⁰⁴ High staff turnover led to interruption in work and failure to follow up with camp committees and community leaders.

These criticisms, however, do not mean a complete absence of the notion or influence of a rights-based approach. The fact that there were latrines in places that did not have them before was in and of itself an improvement. Equally important, the fact that organizations spent time to consult with communities and encouraged them to come up with their priorities and participate in programs that directly affected them was important progress in recognizing and respecting their human rights. In Léogâne, for example, Oxfam spent weeks engaging community members, and the organization refrained from constructing a latrine until there was broad agreement among the members for it.¹⁰⁵ Such an approach fosters not only personal and community responsibility, it also empowers communities and promotes human rights and equity.

Sphere standards: A matter of equity

Meeting the Sphere standards is important in helping those affected by disasters survive with dignity. The risks to survival that are inherent in disasters remain throughout the emergency period and will persist if water and sanitation issues are not properly addressed. Failure to meet the minimum standards can have severe consequences for victims of a disaster. Take for example the issue of hygiene promotion. According to the standards, to ensure the optimal use of water and sanitation facilities as well as to achieve the maximum impact on public health, “[I]t is imperative to ensure that disaster-affected people have the necessary information, knowledge and understanding to prevent water- and sanitation-related disease, and to mobilize their involvement in the design and maintenance of those facilities.”¹⁰⁶

104. Nanphy interview.

105. Interview with Frederic Deparis.

106. Sphere Project, “Minimum Standards in Water Supply, Sanitation, and Hygiene,” 56. See also the 2011 edition of the Sphere Project’s handbook.

Figure 4: Basic survival water needs¹⁰⁷

Water intake (drinking and food)	Basic Hygiene Practices	Basic Cooking Needs	Total Basic Water Needs
2.5-3.0 liters/day	2.0-6.0 liters/day	3.0-6.0 liters/day	
Depends on the climate and individual physiology	Depends on social and cultural norms	Depends on food type, social, and cultural norms	
			7.5-15.0 liters/day

Source: Sphere (2011:98)

Figure 4 shows Sphere’s basic survival water needs standards. In the first few months after the earthquake, some of these standards were met in some areas while other areas fell short.¹⁰⁸ Cullen and Ivers (2010) conducted a study¹⁰⁹ in Parc Jean Marie Vincent three months after the earthquake and found that Sphere’s minimum standards of access to water were met.¹¹⁰ Residents reported having access, on average, to 15 liters per person per day for drinking, cooking, and personal hygiene. Also, more than half (50.4 percent) of respondents told the researchers that their access to water at the time of the survey was better than before the earthquake. The authors, rightly, surmised that the improvement in access to water reflected “both a relative success in delivery of water in the post-disaster phase and also the severe lack of access to water in this community prior to the disaster” (67). In addition, 85.4 percent either agreed or strongly agreed that the systems of distributing water were working. At the same time, 67.3 percent of respondents agreed with the statement that there were groups of people that had more difficulty finding sanitation services (64).¹¹¹

Another study,¹¹² at a different camp from that assessed by Cullen and Ivers (2010), revealed results on access to water that were not up to the level of the

107. A liter is equivalent to 3.75 gallons.

108. Kimberly A. Cullen and Louise C. Ivers, "Human Rights Assessment in Parc Jean Marie Vincent, Port-Au-Prince, Haiti," *Health and Human Rights* 12, no. 2 (2010).

109. Ibid. The researchers completed 486 interviews, representing about 5 percent of the households in the camp, in each of the five sectors—food, health, water, sanitation, and shelter. At the time of the study, the camp housed 9,362 families (approximately 48,000 people).

110. For all the standards (in addition to the chart of basic water needs provided in Figure 4, see: The Sphere Project, *Humanitarian Charter and Minimum Standards in Humanitarian Response* (Rugby, UK: The Sphere Project, 2011).

111. I chose these statistics because they are WASH. The other sectors did not reach as high a level of standard as water.

112. Institute for Justice and Democracy (IJDH) in Haiti and Lamp for Haiti Foundation, "One Year after the Earthquake: Haitians Still Living in Crisis" (Boston, 2011). The study was a longitudinal analysis of conditions in six camps. It comprised three surveys, conducted in February, July, and December 2010. The

Sphere standards. These results contradict the argument that the WASH cluster was more effective in the early months of the emergency. Six weeks after the earthquake, Lamp for Haiti Foundation surveyed 90 families in six camps in the metropolitan area and found that only 35 percent of them reported receiving water from the humanitarian agencies. It is not always wise to compare studies that may be varied in sampling techniques and methodology, but since the studies were conducted around the same time, it is worth noting a key difference with respect to access to clean water. These different survey results exemplify the varying nature of the camps and show that one has to be careful about making broad generalizations. Two follow-up studies (in July and December 2010) showed deteriorating conditions in the camps due to lack of funds.¹¹³

Sanitation is another issue for which the Sphere Project had developed minimum standards. “Drainage” is a key element in the standards’ definition of sanitation. Three of the six camps that I visited had major problems with drainage. I saw a large amount of standing dirty water near the showers and latrines, and the drain was clogged with trash and other debris, creating an environment conducive for disease-carrying mosquitoes. While it may be reasonable to accept an argument that some of Sphere’s quantitative indicators are exceedingly difficult or impossible to meet in Haiti (e.g., two hygiene promoters per 1,000 people of the target population or one latrine for every 20 camp residents¹¹⁴) meeting drainage standards should not be difficult. Improper drainage such as this reflects a failure to meet the Sphere standards.

National plan: A commendable effort and needs to be supported

In March 2010, the GoH and its international partners drafted a comprehensive recovery and development plan, the Post-Disaster Needs Assessment (PDNA). Similar to the other stakeholders, the government faces difficult challenges. One of CAMEP’s five buildings was destroyed and the others suffered damage. The SNEP office in Petit Goâve was destroyed, and its offices in Grand Goâve sustained damage. The government estimates that it will need \$1.072 billion over three years for the recovery and development of drinking water, sanitation, and hygiene systems.¹¹⁵ The plan puts forth an extensive strategy to rebuild and develop the sector. For example, it includes the construction of regional structures that can operate and manage urban water and sanitation systems. It also focuses on developing the technical and financial capacity of the sector,

authors (pg. 2) describe the first two surveys as “yielding reports measuring living conditions in the camps and the on-the-ground impact of relief efforts from the international community.”

113. Ibid.

114. Ibid, 61.

115. GoH, "Post Disaster Needs Assessment," 67 (2010).

including increased involvement of the private sector in the areas of research, facility construction, and network management.¹¹⁶

Some important questions include: Is the plan realistic given Haiti's current institutional and financial capabilities? To what extent can Haiti's institutions implement and enforce rules and regulations? The plan relies heavily on the financial commitments of the international community. To what extent can these commitments be expected to materialize? Seventeen months after the earthquake, these questions still cannot be satisfactorily answered. The government's ability to implement and enforce rules has not generated confidence. For example, there was supposed to be an 18-month moratorium on forced eviction of people living in campsites on private land. This moratorium has not stopped forced evictions. Residents of the camps did not know about the moratorium and those who knew of "a moratorium" treated it as a "rumor." The national government has not enforced it. According to a government representative, "It became a commune by commune and city hall by city hall situation regarding eviction of people on private land."¹¹⁷ Evictions of people from the camps have continued to date. If the government cannot issue and enforce such a basic rule, can it be expected to deliver on the complex rules, regulations, and structures that the PDNA has proposed? Posing this question does not imply that the GoH cannot do it; rather, it is to sound the proverbial alarm and call on the Haitian government to be serious and redouble its effort so that it can take control of the reconstruction of the country.

In the Action Plan for National Recovery and Development of Haiti, the Haitian government proposes within a three-year period to construct "a system of drinking water supply and sanitation in the country using a cheap and socially adapted technology."¹¹⁸ The objective of this effort is to increase the coverage of drinking water to 60 percent in metropolitan zones and 73 percent in other urban areas and rural areas. It also calls for increasing sanitation coverage to 58 percent in metropolitan zones and 50 percent in other urban areas and rural areas. In addition to these measurable goals, the government recognizes the need to establish a national policy in the water and sanitation sector as well as the need to develop national education campaigns on hygienic practices. The Plan of Action set a goal of reaching 5 million people in the capital region and in the 10 large urban zones in the first 18 months after the earthquake.¹¹⁹ It is doubtful that these targets were reached, especially if there were a lack of funding. The international community has not kept its full financial commitment to Haiti. More than half of what the international community pledged for 2010 and 2011

116. Ibid.

117. Anonymous source.

118. GoH, "Action Plan for National Recovery and Development of Haiti: Immediate Key Initiatives for the Future" (Port-au-Prince: 2010).

119. Ibid., 39.

for reconstruction activities has not been disbursed. According to a report by the UN Office of the Special Envoy (OSE) for Haiti, of the approximately \$4.6 billion pledged for recovery activities in 2010 and 2011 only 43 percent had been disbursed by the end of September 2011.¹²⁰ With respect to the water and sanitation sector, of \$291 million pledged, only \$207 million has been disbursed.¹²¹

Role of the private sector and fee for service

Haiti's "Action Plan for National Recovery and Development" seeks to increase the involvement of the private sector in WASH. The private sector has been an important actor for a long time, as large portions of populations in major cities rely on it for access to drinking water. The increased involvement of the private sector would mean that there will be new areas where beneficiaries of services will have to pay fees. The issue of fees for water has been a subject of contentious debate for years, not only in Haiti but also in many parts of the developing world. These debates are variations of the broader discussion around the privatization of state-owned enterprises. It is not clear that privatization can necessarily be used as an accountability mechanism or to make a broken WASH sector more efficient.¹²² Some argue that the state could retain ownership and even manage the enterprises but charge users at least a minimal maintenance fee. The broad issue of privatization is beyond the scope of this research, but the relevant question with respect to user fees in the WASH sector is whether they can be consistent with a rights-based approach. The answer is yes. The fees would have to be affordable to not undermine the requirements of affordability and universal access. There would also have to be rules and regulations in place to prevent arbitrary disruption and contamination of the water supplies. These are some of the requirements of the international human rights conventions that underpin the rights-based approach, as interpreted by the relevant treaty bodies.¹²³

120. This \$4.6 billion does not include debt relief pledges totaling \$1.01 billion. [OSE, "Has Aid Changed? Channelling Assistance to Haiti before and after the Earthquake," (New York: UN, 2011).] According to the OSE : "pledged" means a general promise to provide assistance; "disbursed" refers to the transfer of money from a donor to an implementing agency, which could be the GoH, an NGO, a UN agency, or a private contractor; and "committed" is when a donor has contracted with an implementing partner or has internally earmarked money for a particular use. See also <http://www.haitispecialenvoy.org/assistance-tracker/#/sectorAnalysis> (accessed December 15, 2011).

121. Ibid.; OSE, "Has Aid Changed?"

122. For an excellent analysis of the limits of privatization, see Jessica Budds and Gordon McGranahan, "Are the Debates on Water Privatization Missing the Point? Experiences from Africa, Asia, and Latin America," *Environment & Urbanization* 15, no. 2 (2003). Budds and McGranahan also provide a good review of the privatization literature.

123. See the "A Rights-Based Approach to WASH Delivery" section of this backgrounder for more requirements. So long as these requirements are not undermined by any fee-for-service system, fees could help to maintain and expand infrastructure and services.

NGO community: Vital but must do better

As noted in the introduction, field research for this report was done more than a year after the earthquake. Many of the people interviewed in the camps were (and are still) having a difficult time, as they deal with a disaster of historical magnitude.¹²⁴ It was even more challenging for them because some of the NGOs were reducing services to the camps at the time of the research, and some camps did not ever have any service. Under these conditions, it was difficult to get a full picture of what conditions were in the early months after the earthquake. Those who had better WASH services soon after the earthquake, compared to the time of this research, would often say, “At the beginning we had good service.” By March 2011, conditions had deteriorated in the camps, prompting complaints against the NGOs, however this should not take away the need to acknowledge the efforts of the humanitarian agencies.

The cluster participants faced difficult challenges following the earthquake. They found themselves dealing with a disaster that was broad in both scope and depth in an urban and high-population-density environment. The environment was made even more challenging because few public institutions were functioning efficiently. In addition, the government, too, was severely affected, as many of its staff members died in the earthquake.¹²⁵ The gravity of the disaster made the humanitarian effort a monumental task. The NGOs had to secure housing, clean water, food, sanitation facilities, and other assistance for more than 1.3 million IDPs. All of these services were expensive. As for WASH, since Haiti was already one of the worst countries in the world in terms of access to water and sanitation facilities, providing these services was even more challenging and expensive. The NGOs rightfully so, had to focus not only on building a large quantity of latrines, but also on other aspects of sanitation methods. Maintaining these efforts has proven very expensive, further compounding the burdens of the earthquake.

124. There is an argument that the camps create a pull factor, meaning that people who live in neighborhoods near the camps and were not necessarily affected by the earthquake go to the camps during the daytime to get some of the various services and assistance that the NGOs provide to camp residents. The Camp Management and Coordination cluster notes that Cash-for-Work programs in camps are one of the contributors to this pull factor (http://www.cccmhaiti.info/z_cccm_cash_for_work_guidelines.php).

125. GoH, “Action Plan for National Recovery and Development of Haiti: Immediate Key Initiatives for the Future.” Shuller, “Unstable Foundations” (2010), reports that 17% of government staff perished in the earthquake.

Conclusion

At the outset, this conclusion needs to highlight two primary WASH issues:

- The rural-urban gap
- The plight of those who are still in the camps

First, there are significant gaps between urban and rural areas in terms of access to WASH. These gaps have existed for a long time, translating into significant differences in rates of coverage (see Figure 1 in Part I, under “WASH Before the Earthquake”). One of the main reasons for this rural-urban divide is the government’s neglect of the rural population, which historically has been excluded politically, economically, and socially. Other reasons for the wide gap include lack of funds and planning and a failure on the part of the Haitian government to prioritize the WASH sector. These shortcomings have resulted in a sector that is ineffective and inequitable, with many of the actors unaccountable to the people they are supposed to serve. As Haiti embarks on reconstruction and development efforts, it is important to prioritize this sector with particular attention to expanding and improving the access of rural communities.

Second, clearly the people in the camps who are not getting WASH services have every right to complain, and the Haitian government and the NGO community need to address their complaints. Each day that these people go without WASH services is a violation of their human rights. Both the NGO community and the Haitian government must do better in improving conditions for people in the camps. While the NGOs have received some deserved criticisms, it should also be noted that they continue to play a crucial part in assisting the people in the camps. There was a marked difference with respect to WASH in camps with a visible presence and involvement of an established NGO and those that did not. In the six camps that I visited for this research, camps with such an NGO presence and involvement had clean water and at least some sanitation services, while the camps that did not have a noticeable NGO presence had neither of these services. I point this out not to excuse any failure of the NGOs, but rather to note that they are and will be needed for some time, at least until the Haitian state can effectively address these issues, many of which were not caused by the earthquake. (As several people pointed out in interviews, the main WASH-associated problem was not something created by the earthquake. It was a problem of poverty, a problem of institutional weakness, a problem of

governance, and a problem of leadership, greatly exacerbated by the earthquake.)¹²⁶

As the GoH and the NGO community debate the transition from emergency to long-term development, it is not clear whether the NGOs can or want to commit to the long-term requirements of development programming. Some of the NGOs are arguing that the government should make permanent some of the temporary infrastructures already in place. One of their suggestions is for the government to connect the main water system with the water points that may have been built in the camps. Others have suggested that the government use eminent domain to make private land public for the purpose of building permanent housing at the campsites and then link the camp water points to the main public water system. The government has been reluctant to entertain these suggestions, because it does not want these temporary infrastructures to become permanent. On the issue of eminent domain, it is possible that the government's reluctance is a recognition of its limited capability. Since the judicial system is hardly functioning, the Haitian government may not be in position to utilize the laws of eminent domain.

This backgrounder goes beyond Sphere standards to include a lengthy discussion on "rights" to water and sanitation facilities as enshrined in national and international instruments because the backgrounder wants to go beyond IDP camps. As the reconstruction efforts move forward, the NGO community must remain engaged. Framing the issues in terms of those international and national instruments gives the NGO community space and standing to engage the GoH, donor countries, international financial institutions (IFIs), and, more importantly, the Haitian people. This time, however, the engagement of NGOs with the GoH, donor countries, and IFIs has to be more comprehensive, complex, and creative than in the past (see Recommendations below for what is meant by comprehensive). Engagement must be more complex in the sense that it will require engaging different communities simultaneously. For example, even though actors are discussing long-term development programs, the "emergency situation" in Haiti will continue for some time, thus while NGOs engage the GoH, donor governments, and the IFIs, the people who remain in camps and other precarious situations as a result of the earthquake should not be forgotten. If they are neglected and forgotten, it would be unjust and would continue a long history of social exclusion of poor Haitians.

Finally, more-creative engagement involves going beyond old arguments in favor of keeping the state at arm's length. It is clear by now that this old model did not work for the majority of the Haitian people. Haiti's institutions remain weak and the country has few resources, so keeping the state at arm's length

126. Deparis and Nanphy interviews and interview with Yolette Etienne.

would deepen its weaknesses and further undermine its ability to meet its responsibility as the primary duty bearer with respect to the rights of its citizens. It is the state that can be the primary actor in developing the WASH sector, as well as designing and implementing public policies to promote universal access to drinking water and safe sanitation. Keeping the state at arm's length would also limit the impact of the work of NGOs, both because the basic structure that is required for long-term development can only be built by the state and because of the need for proper licensing and work permits and other practical issues, . All of these reasons make it an imperative that the NGO community assist the state so it can fulfill its obligations, which requires finding ways to work with national and local authorities in a manner that is meaningful, respectful, and accountable.

Recommendations

The social, economic, environmental, and political conditions in Haiti are such that for any program to have any chance of success it must have a comprehensive perspective, and the Haitian government must be the primary actor. The following are specific recommendations for stakeholders.

- **Haiti must lead the reconstruction/development programs.** The reconstruction process must be fair and the GoH should own it and be in charge of it. The GoH should decide whether it wants to create a new government agency to lead the reconstruction effort or have it be led by existing government agencies. The process needs to be genuine and participatory to ensure accountability to all Haitians, as well as international donors and partners.
- **WASH sector.** A comprehensive but realistic plan with adequate national and international financing and other resources is needed. Special attention should be paid to expanding and improving the access of rural communities.
- **Cholera.** While there was no single cause of the October 2010 cholera outbreak, the lack of WASH services in rural and semirural areas was a central factor in the spread of the disease to all corners of Haiti. The lack of education also contributed to its rapid spread. A robust health and WASH education campaign is absolutely necessary.
- **Gender equity.** Women expressed concerns about privacy and gender-based violence in the camps, and Haitian women's organizations, as well as international NGOs working in Haiti, have reported an increase in gender-based violence.¹²⁷ Efforts should be made to address these concerns and ensure that facilities such as latrines and showers are adequate quality and gender appropriate.
- **Better coordination.** Members of the WASH cluster must improve the coordination of their activities. Coordination would make it easier to identify gaps in services and fill them.

127. Brook Stedman, "Security after the Quake? Addressing Violence and Rape in Haiti," *PeaceBrief No. 73*, ed. United States Institute of Peace (Washington, DC: 2011) and Beverly Bell, "Our Bodies Are Shaking Now: Rape Follows Earthquake in Haiti," *Huffington Post*, March 24 2010.

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Appendix A: Expanded definitions of selected key terms

Equity

Equity is the most difficult concept to define and measure. It is easier to define it, however, by first defining its negation, inequity. Observers and policymakers talk of urban inequity, a term used interchangeably with inequality. Inequity and inequality, however, have some significant differences and implications in terms of policy processes and outcomes. Borrowing from Stephens, urban inequity refers to an approach that describes injustice in the distribution of urban resources, power, and involvement in policy processes among various groups within a city (or town). Researchers have tried to measure inequity by pointing to housing conditions and comparative levels of access to services, as well as health outcomes, among groups and communities, and they have linked disparities directly to an injustice. Inequality, on the other hand, describes and measures the same things as inequity among groups, yet “a difference in conditions between urban individuals and/or communities does not infer automatically that a demonstrated ‘inequality’ is unjust....”¹²⁸ Stephens explains the terms in the context of access to clean water:

If different communities within a city or town have lower levels of access to clean water than wealthier communities, this can be described as different access. When this is linked to differential income of the households in each community, and/or to differing levels of need, this differential can be termed an inequality. This inequality can also be termed an injustice if it becomes evident that policy elites in wealthier areas control distribution of water to their own benefit (or limit its expansion to unserved [*sic*] area).¹²⁹

Having defined the negation, now it is easier to define equity for the purpose of this report. Most standard dictionaries define “equity” as something that is fair, impartial, and just. That “something” could be actions and practices that are influenced by the ideal or principle of fairness and ethics. A policy that distributes social and economic resources in ways that affect all groups in society fairly and treats everyone with respect, regardless of age, sexual orientation, gender, or race, is an example of an equitable policy. As Gulyani et al. explain while making a point that applies broadly to the urban poor in developing

128. Carolyn Stephens, “Revisiting Urban Health and Social Inequalities: The Devil Is in the Detail and the Solution Is in All of Us,” *Environment & Urbanization* 23, no. 1, 29-40 (2011).

129. *Ibid.*, 33.

countries, “poor households are almost never directly connected to the public utility, rely on vending systems, buy water by the bucket at very high unit prices, and hence consume very little water.”¹³⁰ In fact, as the UN Development Programme (UNDP) 2006 *Human Development Report* noted, in much of the developing world some of the poorest people are paying some of the highest prices per unit for water, which is an indication of the limited coverage of water utilities in the impoverished areas and informal settlements where poor people live.¹³¹ Poor people living in urban slums often find themselves paying five to ten times more per liter of water than wealthy people living in the same city.¹³² For all these reasons, in urban areas such as Port-au-Prince, poor people are disproportionately underserved and pay exorbitantly for clean water, and poor women and young girls pay a particularly high price as they have carried the lion’s share of the responsibility in finding water for the household, often at risk to their own personal safety.¹³³

Effectiveness

As with equity, some clarity is needed to define effectiveness. There is a sizeable literature on theories of organizational effectiveness. A major contribution to this literature is the work of Herman and Renz. In a major paper, they distinguish between organizational effectiveness and effectiveness of subunits or functions. The distinction is important because “an organization is not the sum of its parts or functions.” They recognize that it is possible to assess the effectiveness of a program or the use of its service; however, one should understand that an assessment does not necessarily reveal the overall organizational effectiveness.¹³⁴ In the context of WASH programs, effectiveness means to have the intended or expected effect or desired outcome. For example, did the WASH programs in the camps reach their goals, say, in providing the minimum requirement of water to residents? The answer varies, depending on the particular camp. Assessing the outcomes of such programs may depend on the timing of the evaluation and the person conducting the evaluation. If the outcome of a program were found to be ineffective, such an assessment does not necessarily mean that the organization as a whole is ineffective.

130. Samula Gulyani, Debabrata Talukdar, and R. Mukami Kariuki, "Water for the Urban Poor: Water Markets, Household Demand, and Service Preferences in Kenya" (Washington, DC: The World Bank, 2005).

131. UNDP, "Human Development Report 2006 - Beyond Scarcity: Power, Poverty, and the Global Water Crisis" (New York: UN, 2006).

132. Ibid.

133. Ibid.

134. Robert D. Herman and David O. Renz, "Theses on Nonprofit Organizational Effectiveness," *Nonprofit and Voluntary Sector Quarterly* 28, no. 2 (1999).

Accountability

Accountability means a party is responsible for outcomes and can be held responsible if progress is not being made.¹³⁵ The key here is the notion of being held to account, but it must be “held to account” to a specific person, group, or community.¹³⁶ In the case of a human services program, it is important to clearly distinguish the actors for two main reasons. First, distinguishing the actors makes it easier to discern who is accountable to whom and why. Second, it allows us to evaluate whether or not an aggrieved actor is, in fact, able to hold the negligent actor accountable. For example, if the government of a country is responsible for providing water to a community affected by a natural disaster and has failed to do so, can that community hold the government accountable? Similarly, if a nonprofit organization promised to provide clean water to that same community under the same circumstances and failed to do so, can the community hold the organization accountable? These are not abstract propositions in post-earthquake Haiti.

Research around the issue of accountability has focused on community participation, transparency, and reporting mechanisms. Varma et al. encourage entities employing a rights-based approach to have “a clear and accessible accountability mechanism (or mechanisms) through which communities can report project problems.”¹³⁷ In the case of Haiti, Varma and colleagues suggest that accountability mechanisms be in place to address complaints and grievances. As they put it, “[The mechanisms] need to be locally focused and easily accessible, and they should have built-in transparency so that community members can follow the status of grievances or complaints and keep the public aware of their outcomes.”¹³⁸ How feasible is all of this if we have not clearly defined the actors and their associated responsibilities? Yamin (2008) recognizes the difficulty that exists in ensuring accountability of and to appropriate actors. As she notes, “Yet it is not always clear how that ‘accountability’ might be ensured in practice, or even what obligations governments and donor states should be held accountable for, when so much of public health programming, and social policy more broadly, is contingent upon resources.”¹³⁹

However, while the suggestions that Varma et al. have made are important and would go a long way in reducing inequalities in the area of access to water, sanitation, and hygiene, they are not in and of themselves enough to result in effective accountability. In other words, providing access to accurate information

135. For a more expansive definition of accountability, see World Bank, “World Development Report 2004: Making Services Work for Poor People, 48.

136. The American Heritage College Dictionary, 3rd edition, 9, 437, and 465 (Boston: Houghton Mifflin Company 2000).

137. Varma, et al., “Woch Nan Soley,” 81 (2008).

138. Ibid.

139. Alicia Ely Yamin, “Beyond Compassion: The Central Role of Accountability in Applying a Human Rights Framework to Health,” *Health and Human Rights* 10, no. 2, 2 (2008).

and indicators is not enough to have effective accountability. Accountability of any significance “requires processes that empower and mobilize ordinary people to become engaged in political and social action.”¹⁴⁰ In short, the analyses and suggestions around the issue of accountability also need to be coupled with an understanding and analysis of power and the nature of social exclusion.

Power

Power is a concept frequently referenced but not easily defined. Green (2008) has recently offered a conception of power, arguing that it can take at least four different forms, *power over*, *power to*, *power with*, and *power within*:

- *Power over* is often inconspicuous and can often be noted by how elites manage to keep certain items out of political, social, and economic debates.
- *Power to* is when one has “the capability to decide actions and carry them out.”¹⁴¹
- *Power with* is through collective or joint actions and can be exercised through organizations.
- *Power within* is associated with “personal self-confidence, often linked to culture, religion, or other aspects of collective identity.”¹⁴²

These personal and collective attributes “influence what thoughts and actions appear legitimate or acceptable.”¹⁴³ In whatever form it may appear, power is relational and contextual.

Power has been the key contributor to the vast inequality of access to water and sanitation in Haiti. While poor people and communities can, in theory, expect to hold duty bearers accountable, in reality, it is most likely that they will not be able to do so, due largely to the issue of power, briefly defined here as having the capacity to realize one’s rights. In a society where relative power among groups is significantly imbalanced, economic and social inequality is likely to be high. As Green notes, “Inequality in power drives the motor of social and economic inequality in the lives of poor and rich alike.”¹⁴⁴ Power is present in households, communities, and the entire society, and it shapes the actions and behaviors of all actors.¹⁴⁵

140. Ibid.

141. Duncan Green, *From Poverty to Power: How Active Citizens and Effective States Can Change the World*, 28 (Oxford: Oxfam International, 2008).

142. Ibid., 29

143. Ibid.

144. Ibid., 28.

145. Ibid.

Because power is relational and contextual, no one is completely powerless. Green offers a simple but illustrative example. While a mother may have power over her children, she may be nearly powerless in relation to a violent male partner. Her older children, on the other hand, may have power over their younger siblings.¹⁴⁶ This example clarifies two forms of power: power over and power to. The stronger individual in these relationships has power over the weaker one, whether because of physical capability or recognition of one being superior in prestige and honor. Both physical power and prestige have enabled one to compel the other into behaving or not behaving in certain ways.

In the midst of this analysis, however, it is important to note that none of these forms of power is always benign or malign; it depends on how and why it is being used. Elites can use whatever form of power they have to assist the poor, just as they can use it to harm the poor or deny them their rights. In Haiti, unfortunately, elites' use of the state to undermine the rights of the poor has been predominant. In this context, the poor are the ones who have been in the weaker position *vis-à-vis* political, economic, and social elites and have suffered the adverse impact of power. With respect to their relation to the state and public policy, the poor are those whose lives have been influenced in ways that they would not have otherwise wanted, leading to social exclusion and forcing them to live precarious lives.

Social exclusion

Social exclusion, broadly defined, is a process that inhibits the ability of individuals, groups, or communities in a society to participate fully in the social, political, and economic life of that society. Social exclusion is important to understand, especially when talking about equity. The concept of equity by its very nature includes at least an attempt to eliminate or reduce social exclusion and consequently social injustice. Most often, such social exclusion is the result of actions or inactions of those in power positions, actions or inactions that have placed barriers in the way of the members of a particular community to participate fully in the society in which they live.

146. *Ibid.*, 29.

Appendix B: List of Interviewees

March 1, 2011

Dr. Danielle Domersant Torchon
Coordinatrice en Sante Publique (Public Health Coordinator) Oxfam Québec
Pétionville, Haiti

March 2, 2011

Yollette Etienne
Haiti Program Director
Oxfam America
Pétionville, Haiti

Harouna Boubacar
WASH Coordinator
Intermón Oxfam Spain
Port-au-Prince, Haiti

Raphael Mutiku
WASH Coordinator
Oxfam Great Britain
Pétionville, Haiti

March 3, 2011

Sunara Fernando
WASH Manager (IOM)
MINUSTAH, Logistics Base, Zone 5
Port-au-Prince, Haiti

March 4, 2011

Jean Eddy Etienne
Coordinator
Organisation Haïtienne pour le Développement Durable (Haitian Organization for Sustainable Development)
Port-au-Prince, Haiti

March 6, 2011

Reginald Michel
Felicie Louisaint
WASH committee members and residents
Camp Sinayi
Port-au-Prince, Haiti

Augustin Dieudonne
Alix (didn't give last name)
Roselene Michel
Lizanne (didn't give last name)
WASH committee members and residents
Camp Adoki Pou Moun Viktim
Port-au-Prince, Haiti

Michel Jean-Ylbonet
Benito Meralus
WASH committee members and residents
Camp Inyon Advantis
Port-au-Prince, Haiti

Fritstzner Nemorin
Bitteur Noel
WASH committee members and residents
Camp Pak Magwana
Port-au-Prince, Haiti

March 7, 2011

Frederic Deparis
Coordinateur (Coordinator)
Water and Sanitation
Oxfam Québec
Léogâne, Haiti

Rachel Deschamps
Intermón Oxfam Spain
Petit Goâve, Haiti

Jean-Louis Victor
Jean-Robert Etienne
WASH committee members and residents
Camp Sintra
Grand Goâve, Haiti

Rev. Exilhomme Jean-Marie
Stephane Alcide
WASH committee members and residents
Camp Tabernacle
Gressier, Haiti

March 8, 2011

Dr. Joseline Marhone
Director of Nutrition
Ministry of Health
[Joint interview with Amber Munger, Oxfam America]
Port-au-Prince, Haiti

Djekou Thierry
Public Health Engineer
Oxfam Great Britain
Pétionville, Haiti

March 9, 2011

Paul Christian Nanphy
Municipal Coordinator
DINEPA
Port-au-Prince, Haiti

March 10, 2011

Sasha Kramer, Ph.D.
Co-Founder and Executive Director
SOIL
Port-au-Prince, Haiti

Nick Preneta
Deputy Director
SOIL
Port-au-Prince, Haiti

Also, 33 people attended two focus group meetings held March 11, 2011, in camps in Port-au-Prince and Grand Goâve.

Appendix C: Figures

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Forty percent of the people on our planet—more than 2.5 billion—now live in poverty, struggling to survive on less than \$2 a day. Oxfam America is an international relief and development organization working to change that. Together with individuals and local groups in more than 90 countries, Oxfam saves lives, helps people overcome poverty, and fights for social justice. To join our efforts or learn more, go to **oxfamamerica.org**.



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