

# UNICEF's game plan to end open defecation

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## Vision

UNICEF works towards the progressive realisation of the human right to water and sanitation<sup>1</sup> with a focus on priority interventions for children.

**Ending open defecation by 2030**, paying special attention to the needs of women and girls<sup>2</sup> and those in vulnerable situations, is at the heart of the Sustainable Development Goal (SDG) 6.2 for sanitation and hygiene. To successfully end open defecation, at least 60 million people need to stop the practice each year between 2015 and 2030<sup>3</sup>. UNICEF's commitment and ambition to meet this challenge are steadfast and stronger than ever.

This document presents UNICEF's 'game plan' to end open defecation. This game plan helps operationalise the SDGs' call to 'leave no one behind' – and focuses on **reaching the furthest behind first**. In the context of sanitation, the furthest behind are easily identified: the **892 million people<sup>4</sup> still practising open defecation in 2015**.

The game plan outlines UNICEF's programmatic focus and approaches in sanitation over the next four years to 2021. It will help ensure that ending open defecation receives the **deliberate and sustained attention** it will require to succeed: without a constant focus on the issue, there is no doubt that both the SDG objectives and UNICEF's objectives for sanitation (as per Goal Area 4 in the Strategic Plan 2018-2021) will be jeopardised. The game plan will ensure that there is a strong emphasis on both equity and the sustainability of results, in line with UNICEF's WASH Strategy 2016-2030<sup>5</sup>.

Ultimately, the game plan sets out how UNICEF can and will do its part to ensure more children can grow up in a **safe and clean environment**.

1 General Assembly resolution 64/292. The human right to water and sanitation, 2010. And General Assembly resolution 70/169. The human rights to safe drinking water and sanitation, 2015.

2 The game plan aims to empower women and girls, to improve equity and sustainability of the game plan results. UNICEF focuses on gender equality across the organisation's work, in line with its Gender Action Plan 2018-2021 (UNICEF, 2017a).

3 JMP (2017)

4 Ibid.

5 UNICEF (2016)

## Background

Open defecation has devastating consequences for public health. Faecal contamination of the environment and poor hygiene practices remain a leading cause of child mortality, morbidity, undernutrition and stunting, and can potentially have negative effects on cognitive development. Poor sanitation can also be a barrier to education and economic opportunity, with women and girls

often particularly vulnerable to the consequences of poor sanitation services. The multiple adverse effects of poor sanitation show how SDG 6.2 underpins and will be crucial to achieving many other SDGs, including those related to nutrition, health, education, poverty and economic growth, and gender equality.

### SANITATION FACTS AND FIGURES<sup>6</sup>

- The Millennium Development Goals (MDGs) sought to halve the proportion of the population globally without access to an **improved sanitation** facility (designed to hygienically separate excreta from human contact). Despite progress, this global target was missed by nearly 700 million people<sup>7</sup>.
- The SDG 6.2 target is far more ambitious than previous MDG targets. It calls for access to **adequate and equitable sanitation and hygiene for all** and **to end open defecation**, paying special attention to the needs of women and girls and those in vulnerable situations.
- The task ahead is enormous. In 2015<sup>8</sup>:
  - 892 million people worldwide still practiced **open defecation**<sup>9</sup>.
  - 856 million people worldwide used an **unimproved sanitation** facility.
  - 600 million people used a **limited sanitation service**; which is an improved sanitation facility but shared by two or more households.
  - 5.0 billion people used **at least a basic sanitation service**, which is the use of an improved facility that is not shared with other households.
  - Only 2.9 billion of these people **used a safely managed sanitation service**; that is, a basic sanitation service where excreta is either safely disposed of in situ or treated off-site.

6 JMP (2015) and JMP (2017). Latest global WASH data is available at [www.washdata.org](http://www.washdata.org)

7 JMP (2015)

8 JMP (2017)

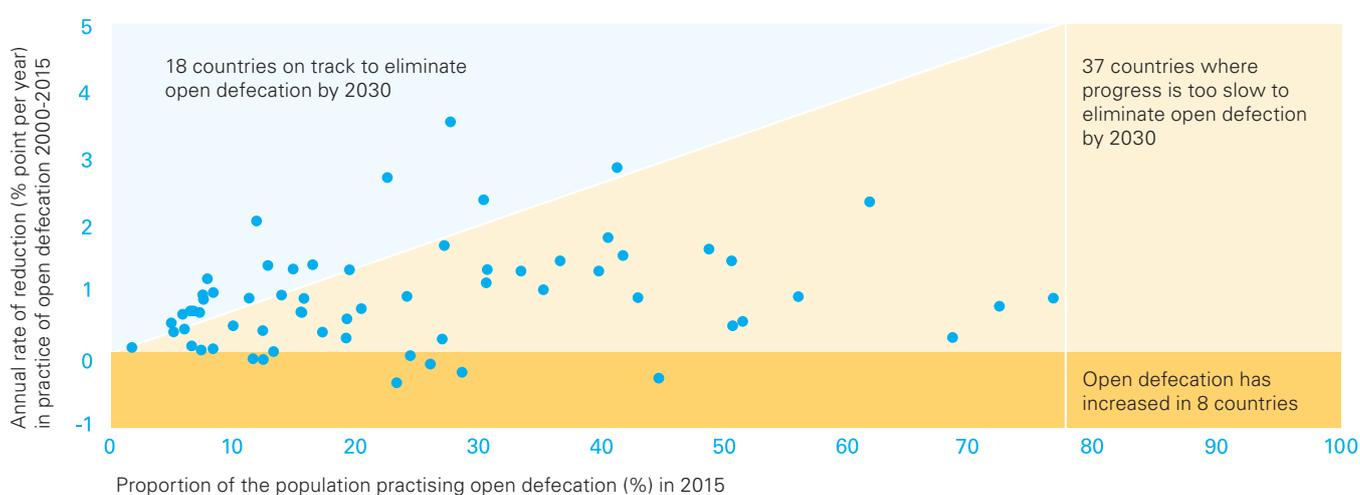
9 Open defecation is defined as when human faeces are disposed of in fields, forests, bushes, open bodies of water, beaches or other open spaces or disposed of with solid waste.

## Acceleration is needed

The world is currently off-track to eliminate open defecation by 2030. Between 2000 and 2015, 337 million people stopped practising open defecation: about 22 million a year. To successfully end open defecation, at least 60 million people need to stop the practice each year between 2015 and 2030<sup>10</sup>.

Figure 1 shows that of the 62 countries where at least five per cent of the population practised open defecation in 2015, **only 18 countries are on track to eliminate open defecation by 2030**. Globally, **three times the current progress is needed** to end open defecation by 2030<sup>11</sup>.

### PROGRESS TOWARDS ELIMINATION OF OPEN DEFECTION BY 2030



**Figure 1.** Annual rate of reduction in practice of open defecation<sup>12</sup> for 62 countries with over five per cent of the population practising open defecation. Source: JMP (2017).

## Our goal by 2021

UNICEF's commitment and ambition to meet this challenge are stronger than ever. Our goal is that by 2021:

- 1. 250 million fewer people will be practising open defecation;**
- 2. 30 million additional people will be living in certified open defecation free communities<sup>13</sup>** as a direct result of UNICEF programming support;
- 3. 60 million additional people will be accessing basic sanitation services** as a direct result of UNICEF programming support; and
- 4. In 26 game plan countries, governments will be routinely analysing trends** (including equity analysis) and reporting on progress towards the fulfillment of SDG 6.2, with a specific focus on reducing open defecation.

<sup>10</sup> JMP (2017).

<sup>11</sup> Ibid.

<sup>12</sup> Please note: China has less than 5% of the population practicing open defecation, but it has been included in Figure 1 to compare with other game plan countries. In South Sudan, the annual rate of

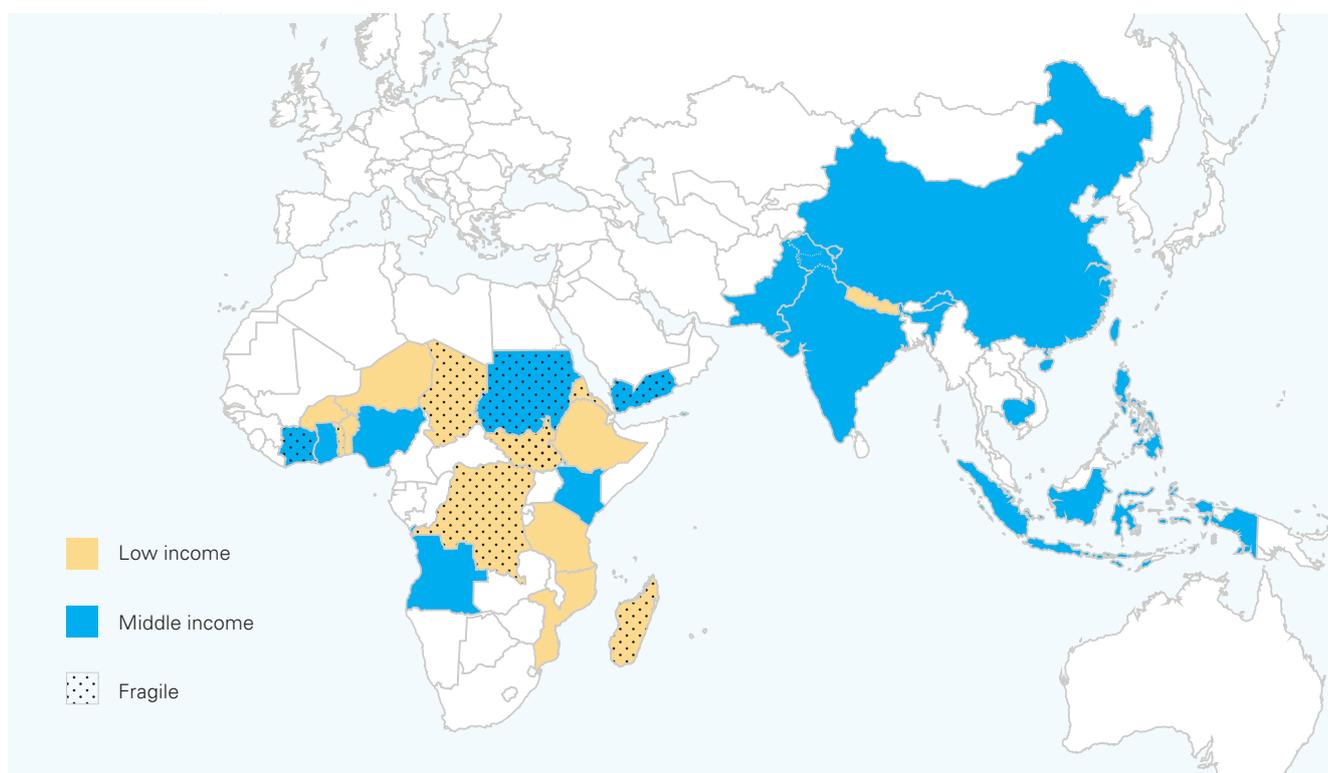
reduction only takes into account data from 2011 onwards.

<sup>13</sup> Recommended minimum ODF certification criteria: excreta-free open spaces, drains and water bodies; 100% use of improved sanitation facilities (shared or not shared); presence of soap and water near or in the sanitation facility.

## Geographic focus: the 26 game plan countries

UNICEF is currently implementing WASH programmes in over 100 countries, and will continue to do so based on regional and country contexts and their respective priorities. There will be a special focus on sanitation programming in the 26 'high burden' countries. These either have more than **five million** people defecating in the open or more than **50 per cent** of the population

defecating in the open. These are UNICEF's 'game plan countries'; together, the 26 game plan countries represent over 90 per cent of the global burden of open defecation. UNICEF's game plan to end open defecation will specifically target these 26 countries for additional support over the next four years, to accelerate or sustain the annual reduction rate in open defecation.



West and Central Africa	Eastern and Southern Africa	Middle East and North Africa	East Asia and Pacific
Benin	Angola	Sudan	Cambodia
Burkina Faso	Eritrea	Yemen	Indonesia
Chad	Ethiopia	<b>South Asia</b>	Philippines
Côte d'Ivoire	Kenya	India	China
Democratic Republic of the Congo	Madagascar	Nepal	
Ghana	Mozambique	Pakistan	
Niger	United Republic of Tanzania		
Nigeria	South Sudan		
Togo			

**Figure 2.** The 26 game plan countries: 13 low-income countries and 13 middle-income countries (including nine fragile states)  
Source: World Bank, (2017a, 2017b).

The 26 game plan countries represent a broad range of contexts. They include 13 low-income countries and 13 middle-income countries<sup>14</sup>. Nine of the countries are characterised as 'fragile states'<sup>15</sup> (see Figure 2). This highlights the very different backgrounds against which ending open defecation programmes need to be developed.

Figure 3 below shows that of the 26 game plan countries:

- Only **five** are **on track** for eliminating open defecation by 2030;
- **Seventeen** are making progress but at **too slow** a rate; and
- In **four** countries, the share of people practising **open defecation** is actually **increasing**.

### PROGRESS OF GAME PLAN COUNTRIES TOWARDS ELIMINATION OF OPEN DEFECTION BY 2030

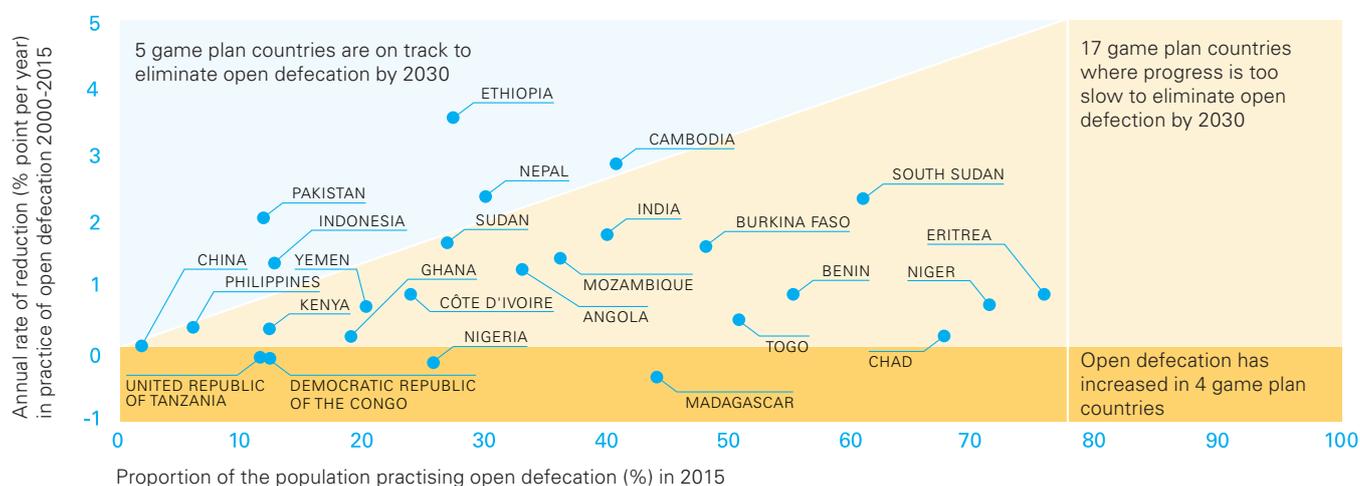


Figure 3. Annual rate of reduction in practice of open defecation for 26 game plan countries<sup>16</sup>. Source: JMP (2017)

14 World Bank (2017a)

15 World Bank (2017b)

16 Please note: China has less than 5% of the population practicing open defecation, but as with Figure 1, it has been included in

Figure 3 to compare with other game plan countries. In South Sudan, the annual rate of reduction only takes into account data from 2011 onwards.

## Country office programming approaches

All programme approaches must of course be context specific. Each country is at a different stage and country offices are designing their own set of activities towards successfully eliminating open defecation, built on UNICEF's long experience and comparative advantage in the sector. UNICEF will ensure that resources target the communities in greatest need and look for intervention models that can be sustained and scaled up within the capabilities of government and partners.

What constitutes a successful approach will be different in each country. By working with government and partners to map the national and sub-national contexts, UNICEF can identify what approaches, skills and resources are appropriate and most likely – to maximise and sustain results. UNICEF's sanitation programmes are a blend<sup>17</sup> of three main elements, with the emphasis on each element differing according to country contexts. These elements are:

**Creating demand** through institutionalising community approaches to total sanitation, addressing behavioural barriers, and creating a sustained social norm of not practising open defecation at scale.

Strengthening **supply chains and markets** so that they meet the demand for quality sanitation goods and services that are affordable to all – including to the lowest quintile and otherwise marginalised communities and individuals. This will allow households to move progressively up the sanitation ladder.

Strengthening of the **enabling environment and national systems** to deliver sustainable sanitation services with an equity focus. This includes support for bottleneck analyses, policy development, including financing of sanitation in sector plans, promoting sustainability checks<sup>18</sup>, coordination, and monitoring. A focus of UNICEF's support to governments is improving monitoring systems at the national and sub-national level, in close coordination with ongoing efforts of other UN agencies on SDG monitoring. Improved monitoring systems provide information that supports decision-making and enhances sustainability and equity of the sanitation programmes.

More specifically, UNICEF country offices will support national governments in game plan countries to develop and strengthen 'ending open defecation roadmaps', including ensuring that they are linked to effectively targeted and properly costed sector plans. UNICEF will pay specific attention to ensuring that these plans have an equity focus, with explicit targets to reach the disadvantaged, including prioritising those living in areas at high risk of WASH-related disease, such as cholera. UNICEF will also ensure the plans have a focus on affordability of sanitation goods and services, and that any programme is appropriate to both the social and geographical context.

A thorough analysis of the social, technical, physical/environmental, financial, and institutional factors that can lead to decreased sustainability is also essential. Learning and best practices on equity-lensed programming, such as targeted

subsidies, micro-loans or savings groups will be documented and shared. This will be of particular importance, where low-cost starter latrines might not be a sustainable option (for example, in flood-prone regions where collapse of latrines can be a significant issue and latrines that withstand flooding may be more expensive). Ensuring gender equality in the design, management and monitoring of sanitation programmes and services will be prioritised, to empower women and girls by embedding gender considerations as mainstream practice.

Strategic partnerships will be critical if we are to be successful. Most of the game plan countries are also Sanitation and Water for All (SWA) partner countries, meaning the SWA Secretariat can provide additional support to galvanise partner action at country level, in order to strengthen the enabling environment.

<sup>17</sup> UNICEF/Plan International/WaterAid (2018)

<sup>18</sup> UNICEF (2017c)

## Country office milestones

Game plan country offices, with support from the regional offices and headquarters, will work towards the following milestones<sup>19</sup>:

### 2018 – YEAR 1

- SDG 6.2 baselines are analysed and national targets and strategies reviewed against the goal of ending open defecation by 2030;
- Country office WASH strategy is reviewed against UNICEF's Strategic Plan 2018-2021 outcome indicator 4.5<sup>20</sup>;
- Effectiveness of the current approaches to end open defecation is analysed and reviewed against UNICEF's Strategic Plan output indicator 4.b.2<sup>21</sup>;
- SDG 6.2 baseline analysis and UNICEF's comparative advantage is used to convene stakeholders, and leverage a vision and political will for national policy analysis and the development of roadmaps;
- SDG 6.2 baseline analysis is reflected in national and regional advocacy and resource mobilisation materials;
- Country office annual/rolling work plans and monitoring frameworks for 2019 to 2021 are adjusted to support the game plan;
- Resources required to fulfil country office work plans are identified and mobilised; and
- Regional consultations such as South Asian Conference on Sanitation (SACOSAN) VII (April 2018), AfricaSan V (February 2019) and other WASH network meetings are used as an opportunity to address open defecation in country presentations.

### 2019 – YEAR 2

- Country office staff are engaged in strategic global game plan planning and review;
- Experiences and lessons on monitoring sanitation progress towards SDG targets with an equity focus are shared;
- National policies and plans that aim at achieving SDG 6.2 are reviewed;
- Current domestic investments, both public and private for sanitation are analysed;
- Capacity to implement at national scale is demonstrated<sup>22</sup>; and
- Governments are supported to develop costed plans and implement roadmaps to end open defecation.

### 2020 – YEAR 3

- Governments continue to be supported to develop costed plans and implement roadmaps to end open defecation, and are also supported to mobilise domestic partnerships and resources for these costed plans and roadmaps;
- Cross-country learning continues to accelerate diffusion of innovations within and between countries; and
- SWA High-Level Meeting addresses ending open defecation, with finance and line ministers attending<sup>23</sup>.

### 2021 – YEAR 4

- Governments continue to be supported to mobilise domestic partnerships and resources for costed plans and roadmaps;
- Lessons learned from national game plans are compiled; and
- Contributions are made to a special global report on open defecation.

19 The milestones will be under periodic review.

20 Strategic Plan outcome indicator 4.5 is the number of people still practising open defecation.

21 Strategic Plan output indicator 4.b.2 is percentage of open

defecation free communities compared to triggered communities.

22 Area-wide outcomes (district or provinces are certified open defecation free) are achieved.

23 Planned for March 2020, or alternatively 2021.

## Headquarters and regional office support to the game plan countries

Headquarters and regional offices' support will include quarterly calls with all 26 game plan countries, the collation of baseline reports, the review of country programme documents, supporting the national Joint Sector Reviews, the establishment of online progress tracking tools, regional and global advocacy and resource mobilisation, development and provision of capacity-building opportunities (including south-south learning exchanges). Regional offices will ensure country inputs at regional and internal meetings, and will conduct a mid-term review of the game plan countries' progress.

At the end of UNICEF's current Strategic Plan period, the goal is that all 26 game plan countries have costed roadmaps to eliminate open defecation. By 2021 at the latest, it is also envisaged that there will be a dedicated SWA High-Level Meeting on eliminating open defecation, and an accompanying global report to increase global political awareness and commitment.

## Monitoring

Together with UNICEF's WASH Regional Advisors, headquarters will monitor the game plan through bi-annual updates of progress, annual programme reviews and project completion reports of the game plan countries, maximising the use of existing organizational monitoring systems.

An online dashboard will enable visualisation of the monitoring data. The dashboard will create accountability and give a clear sense of progress, both on the implementation of the game plan, and ultimately towards successfully eliminating open defecation by 2030.

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## Annex: The 26 game plan countries

Countries	Year	Population (thousands)	Open defecation (%)	Annual rate of reduction in open defecation (% point per year) 2000-2015	Population practising open defecation in 2015 (thousands) <sup>24</sup>
<b>West and Central Africa</b>					
Benin	2015	10 880	<b>55</b>	0,8	6 001
Burkina Faso	2015	18 106	<b>48</b>	1,6	8 686
Chad	2015	14 037	<b>68</b>	0,2	9 488
Côte d'Ivoire	2015	22 702	<b>24</b>	0,8	5 370
Democratic Republic of the Congo	2015	77 267	<b>12</b>	-0,1	9 332
Ghana	2015	27 410	<b>19</b>	0,2	5 139
Niger	2015	19 899	<b>71</b>	0,7	14 190
Nigeria	2015	182 202	<b>26</b>	-0,2	46 530
Togo	2015	7 305	<b>51</b>	0,5	3 702
<b>South Asia</b>					
India	2015	1 311 051	<b>40</b>	1,7	522 261
Nepal	2015	28 514	<b>30</b>	2,3	8 505
Pakistan	2015	188 925	<b>12</b>	2	21 813
<b>Middle East and North Africa</b>					
Sudan	2015	40 235	<b>27</b>	1,6	10 729
Yemen	2015	26 832	<b>20</b>	0,7	5 362
<b>Eastern and Southern Africa</b>					
Angola	2015	25 022	<b>33</b>	1,2	8 218
Eritrea	2015	5 228	<b>76</b>	0,8	3 975
Ethiopia	2015	99 391	<b>27</b>	3,5	26 998
Kenya	2015	46 050	<b>12</b>	0,3	5 542
Madagascar	2015	24 235	<b>44</b>	-0,4	10 646
Mozambique	2015	27 978	<b>36</b>	1,4	10 068
United Republic of Tanzania	2015	53 470	<b>11</b>	-0,1	6 021
South Sudan	2015	12 340	<b>61</b>	2,3	7 515
<b>East Asia and Pacific</b>					
Cambodia	2015	15 578	<b>41</b>	2,8	6 320
Indonesia	2015	257 564	<b>12</b>	1,3	32 063
Philippines	2015	100 699	<b>6</b>	0,3	5 779
China	2015	1 376 049	<b>2</b>	0,1	20 778

Source: JMP (2017)

<sup>24</sup> Unrounded population and open defecation figures were used for calculation.



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A technical working group was formed comprised of headquarters, regional office and country office staff during the development of this game plan and drafts were reviewed in global and regional network meetings.

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