



Nearly half of the planet does not have access to safe drinking water. 1.9 billion people drink water which is a danger to their health⁽¹⁾. 2.5 billion people, 40 % of the world's population, do not have access to basic sanitation⁽²⁾ (latrine). 1 billion still defecate outdoors in the open air. As a result, several million people die every year from water-related diseases, making unsanitary water the biggest cause of death in the world.

For 30 years, SOLIDARITES INTERNATIONAL has worked in the field among the populations most vulnerable to waterborne diseases. In 16 countries where we are currently engaged, our local and international teams are recognised for their professionalism, as well as the quality of their technical and social expertise, which they adapt to each situation.

We aim to improve access to drinking water and sanitation, to promote good hygiene practices and to support communities in managing their infrastructure and in continuing to raise awareness. In this way, our activities contribute to achieving the Millennium Development Goals.

1 | Gerard Payen in "The implementation of the right to safe drinking water and sanitation in Europe", edited by Henri Smets, Johanet publications, January, 2012.

2 | Millennium Development Goals Report 2008.

OUR LATEST PUBLICATION

Water and sanitation in crisis - The emergency of sustainable responses in humanitarian contexts
(Abigail Chatagnon, march 2012)

STEP 1

REDUCE HEALTH RISKS BY MEETING VITAL NEEDS OF ENDANGERED COMMUNITIES

SOLIDARITES INTERNATIONAL sets up activities which aim to limit the spread of waterborne diseases. Following a natural disaster or population displacement, the lack of drinking water and precarious sanitary conditions, sometimes aggravated by overpopulation, creates significant risks to the health and the survival of these populations. To reduce this risk as much as possible, or to respond to potential epidemic outbreaks, SOLIDARITES INTERNATIONAL implements drinking water supply programs (1), sanitation activities (excrement and waste management, and combating parasites), and raises awareness among populations of the importance of applying appropriate hygiene rules for an emergency situation (2).



1 | HAÏTI

DISTRIBUTION OF DRINKING WATER IN DISPLACED PERSONS' CAMPS PORT-AU-PRINCE

Since the earthquake of 12 January 2010, SOLIDARITES INTERNATIONAL has been working among the populations of some 50 displaced persons' sites in the capital (50,000 people). In particular, urgent distribution of drinking water has been organized using tanker trucks and emergency water points, in partnership with the Direction Nationale de l'Eau Potable et de l'Assainissement (DINEPA).



2 | PAKISTAN

DISTRIBUTION OF HYGIENE KITS AND FAMILY KITS SEHWAN, SINDH

After the floods of August 2010 in the south of Pakistan, SOLIDARITES INTERNATIONAL re-opened its mission in the country, to assist communities severely affected by unprecedented water levels in these agricultural regions, which are traditionally protected by dykes. In view of the loss of property and destitution as a result of the destruction of their homes and assets, SOLIDARITES INTERNATIONAL has provided essential kits to families to meet their primary needs in the days following the disaster. These kits enabled them to store water, to wash themselves, to keep warm, and to

ensure essential personal hygiene for women of menstruation age. Since September 2010, our activities have benefitted 200,000 people.

STEP 2

INCREASE RESILIENCY OF DISADVANTAGED POPULATIONS TO SANITATION RISKS

After a crisis, affected populations sometimes struggle to recover their level of access to vital services without external assistance. Help with the construction or the restoration of basic infrastructure can be provided promptly by SOLIDARITES INTERNATIONAL if the causes are only economic. However, community vulnerability is often increased by long-term underlying factors. In conjunction with water access activities (wells, drill holes, source channelling and protection, drinking water conveyance networks, **3**, **5** and **6**) and basic sanitation (**4**), SOLIDARITES INTERNATIONAL works with communities to increase their ability to manage water resources and infrastructure. These actions can sometimes be undertaken through support from national or local authorities.



3 | HAÏTI

RESTORATION OF SOURCE CHANNELLING PETIT GOÂVE

The Haiti earthquake also affected rural areas. SOLIDARITES INTERNATIONAL supports communities towards progressive recovery, through activities to restore facilities existing before the disaster, to reduce immediate health risks (particularly the cholera epidemic that affected the whole country), but also to strengthen their resilience to future crises. Our teams restored 3 water reserves, 2 springs and several drinking water supply infrastructures in this region.



4 | DRC

COMPOST LATRINES BENI

In Beni, SOLIDARITES INTERNATIONAL and its local partners built 240 double-tank ventilated public latrines with rainwater catchment systems for hand washing. The various beneficiaries responsible for the latrine blocks (schools, health centres, markets, car parks...) were trained in latrine maintenance, including the procedure for emptying the tanks.

STEP 3

IMPROVING THE LIVING CONDITIONS OF THE POOREST POPULATIONS

Access to the basic services of water and sanitation is essential for respecting human dignity and contributes to improving the living conditions of affected populations. It supports access to education and development of household incomes via small-scale, informal agricultural and industrial activities. In rural areas, SOLIDARITES INTERNATIONAL is committed to protecting water resources and lessening the disparity with urban areas (5). In urban areas, we develop infrastructures as a response to population growth in the most disadvantaged areas (6).



5 | IVORY COAST

WATER TOWER BAS-SASSANDRA

This water tower is an integral part of an improved rural water supply system, developed within the scope of a project aimed at improving water supply, as well as the level of sanitation and hygiene services in 78 villages in the Bas-Sassandra region. Launched in January 2008 and still ongoing, SOLIDARITES

INTERNATIONAL's action has made the local communities' water more available at all stages of the project.



6 | DRC

EXTENDING THE DRINKING WATER NETWORK BENI AND KALEMIE

In 2003, a programme to support the extension and the renovation of water supply networks in the Democratic Republic of Congo commenced. Specifically, in Béni, the construction of a treatment station using retro filtration and the extension of the water network have enabled 240,000 inhabitants in the 18 central districts of the town to receive water. In Kalemie (Katanga), where 250,000 people live, SOLIDARITES INTERNATIONAL is fighting the spread of cholera by drawing up a master plan to renovate the town's water supply network. For both of these projects, water resources are continuously managed in collaboration with all the local partners (governmental institutions, civic organizations, water point managers). This mechanism enables regular maintenance of water facilities and ensures that water is provided at a fair price for the population.