

# Sanitation activities in Benin

## The challenge

Benin has a population of about 8.7 million. The project area covers six provinces all over Benin with a total population of 3.8 million, out of a total of 12 provinces in the country.

There are no centralised sewer systems and wastewater treatment plants in Benin. The Joint Monitoring Programme (JMP) of WHO and UNICEF indicates that in 2010 only 13% of the total population used improved sanitation facilities, whereas 56% resorted to open defecation ([www.wssinfo.org](http://www.wssinfo.org)). The remainder used either shared or so-called “unimproved” sanitation facilities. In the urban areas, the access rates are better than in the rural areas but even there only 25% of the urban people have access to improved sanitation, and still 28% resort to open defecation.

The lack of sanitation causes severe health problems, and cases of cholera are reported regularly in Benin. The under-five child mortality rate in Benin was 115 deaths out of 1,000 live births in 2010 – with an encouraging trend down to lower numbers ([www.childmortality.org](http://www.childmortality.org)). In 2009, Benin’s Poverty Reduction Strategy Paper was revised and two indicators on sanitation – access to basic sanitation and school toilets – were included. In primary schools the coverage with simple pit latrines rose from 60 % (2006) to 83 % (2011). However, this number does not reflect the quality and accessibility of the toilets. Faecal sludge collection is carried out in large urban centres, but appropriate treatment of the collected sludge is not taking place.

With the present trends, it will be difficult to reach the Millennium Development Goals related to sanitation: 67% of the population should have access to improved sanitation by 2015 in Benin.

The government of Benin has developed a number of sanitation policies, most notably the National Sanitation Policy (1995) and the National Strategy of Wastewater Management in urban areas (2007), to address the serious difficulties it encounters in the sanitation sector. Following the decentralisation process in the country, the responsibility for sanitation has been assigned to the local governments. However, responsibilities are still fragmented at the national level for sewage and waste management, storm

water drainage as well as hygiene education. Insufficient funding for sanitation infrastructure and hygiene sensibilisation has been allocated by the national and local governments in Benin so far.

The main challenges in the sanitation sector in Benin are a fragmented institutional framework, low capacity of the public administration, slow administrative processes, insufficient funding and a lack of awareness among the population concerning the linkage between water, hygiene, sanitation and health.

Project name	Programme Water and Sanitation, Benin
Project region	Sub-Saharan Africa
Partner	National Directorate for Public Health (DNSP) under the Ministry of Health
Duration	July 2012 to June 2014 (current phase)
Budget for sanitation	1,625,000 Euro
Scale	1,250,000 people reached indirectly in 12 municipalities where GIZ assisted to develop sanitation action plans

## Our approach

We apply a “three level approach”:

- **Macro level:** Promote the political dialogue among the responsible authorities; assist the revision of national sector policies and strategies following the decentralisation process; and strengthening stakeholder coordination.
- **Meso level:** Develop capacities of decentralised administrations and local governments to improve the sector’s performance and to provide adequate planning tools. In order to enable the local governments to improve their role as planners and implementers of local infrastructure and services, they are supported in developing a long-term planning process in their municipalities.
- **Micro level:** Support awareness raising activities concerning hygiene and sanitation at the community level.



Left: Slab production using locally available materials  
(© GIZ / N. Hagen, 2011)

Right: Group at an urban agriculture plot in Cotonou where excreta reuse takes place, Benin (© GIZ / S. Blume, 2010)

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Partner country: Benin

## Programme activities

Important activities undertaken so far comprise:

- Advice for the revision of the national sanitation policy.
- Introduction and elaboration of a concept for the Municipal Hygiene and Sanitation Plans (MHSPs).

For the new programme phase (July 2012 – June 2014) a programme component has been created that particularly addresses sanitation and hygiene issues. The concept for this intervention is based on the national strategic approach for the promotion of hygiene and sanitation. The main activities will be to:

- Facilitate the revision of the strategic approach for the promotion of hygiene and sanitation.
- Support the local governments in putting into practice their Municipal Development Plans.
- Develop the capacities of the sector administration for impact monitoring.
- Promote standardised methods for water quality analysis (e.g. household level).
- Support the partner organisations (DNSP, local governments) in budget planning, procurement procedures and budget allocations.

## Outcomes

- The revision of the national sanitation policy is nearly completed.
- Comprehensive MHSPs for 12 municipalities with a total population of about 1,250,000 inhabitants have been prepared with the support of GIZ, to provide the local authorities a decision-making basis for the development of their sanitation infrastructure.
- The MHSPs have become a standard tool for the municipalities and scaling-up is taking place as other donors (SNV, PROTOS, Helvetas) are currently financing 14 additional MHSP.
- A capacity assessment has been conducted with the Sanitation and Hygiene Department of DNSP, which provided a common understanding of the administration's capacity needs. The outcomes of this assessment will contribute to the design of future capacity development measures.

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