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# Introducing a Framework for Analyzing Weaknesses in Institutional Service Delivery and the Human Rights to Water and Sanitation: Case Studies from the Democratic Republic of Congo, Haiti, Mozambique, and Niger

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Abstract: This article discusses how weaknesses in the governance of the water, sanitation, and hygiene (WASH) sector may present barriers to the assurance of human rights to WASH. The analytical framework in this article involves four key actors involved in the service-delivery process, operating across a three-way accountability connection linking the State, service providers, and citizens. The framework, drawn from the World Bank's 2004 World Development Report, is applied to the following countries: the Democratic Republic of Congo, Haiti, Mozambique, and Niger. The findings suggest that breakdowns in provision can be strongly linked to disruptions in the accountability association between the State and WASH providers. Informed by the human-rights literature, suggestions are made as to how to increase financing and coverage for the sector. These include encouraging greater coordination across different levels of government, improving the governance structure, and reducing funding gaps.

Keywords: HRBA; human rights; water and sanitation; state; accountability; politics



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#### 1. Introduction

In 2003, the United Nations (UN) Committee on Economic, Social and Cultural Rights (CESCR) published General Comment No. 15, which established the human right to "sufficient, safe, acceptable, physically accessible and affordable water for personal and domestic uses" [1]. The right was cemented in 2010, when the United Nations General Assembly (UNGA) passed "Human Rights to Water and Sanitation" Resolution 64/292, recognizing access to safe and clean drinking water and sanitation (WASH) as a human right [2].

The role of the State in ensuring sufficient access to WASH was recognized under resolution 18/33, which called upon States and international organizations to provide financial resources, capacity building, and a regulatory and accountability framework to ensure the provision of safe, acceptable, and affordable water and sanitation services [3]. The Universal Declaration of Human Rights holds States accountable for implementing progressive measures to ensure the human rights and freedoms of its citizens [4]. The framework assigning governments the responsibility to respect, protect, and fulfill human rights was first introduced within the UN system in the 1980s, and formally adopted across UN institutions in the 1990s [5].

Given the central role of the State in guaranteeing citizens safe access to water and sanitation, this paper analyzes how deficiencies in government service delivery may prevent the fulfillment of the human rights to WASH. It uses the analytical framework from the 2004 World Development Report (WDR) [6] to map out institutional constraints on access by examining citizens and clients, politicians and policymakers, organizational providers, and

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frontline providers, operating across a three-way accountability connection. The analytical framework is a useful tool for understanding deficiencies in WASH services because it allows the mapping of the key actors involved in the process of delivery, the identification of sources of weaknesses, the establishment of a global blueprint for comparing issues of service distribution in the water and sanitation sector, and for drawing broader connections between failures of service delivery and a human-rights based approach to WASH. One of the central issues behind the frameworks used for analyzing the fulfillment of human rights, particularly in the WASH sector, is that they typically omit the voices of citizens in the process of service delivery. A key attribute of the WDR 2004 analytical framework is that it remedies this by mapping out the process of service-delivery failure as a function of weaknesses in the accountability mechanisms linking the State, providers, and citizens.

This article applies this analytical framework to evaluate the governance and institutional capacity of the following four countries: Niger, the Democratic Republic of Congo (DRC), Mozambique, and Haiti. These countries were selected because they share similarities in the socioeconomic status of their populations and in the levels of the distribution of their WASH services: they experience high levels of poverty, high proportions of their populations live in rural areas and endure low levels of access to WASH services, and their delivery of public services faces serious challenges. The analysis suggests that weaknesses in the sector can be strongly linked to disruptions in the accountability association between the State and local providers. Moreover, there is also a lack of citizen capacity to hold WASH government agencies accountable.

This paper then outlines recommendations for improving service delivery through a human-rights-based approach (HRBA) to WASH. A HRBA is a conceptual framework for understanding processes of human development, which is normatively based on international standards, and is operationally directed at promoting and protecting human rights [7]. The HRBA includes the following cross-cutting principles: equality and non-discrimination, participation and inclusion, and access to information, accountability, and sustainability [7].

In accordance with the essential elements of this approach, this paper recommends expanding access according to the cross-cutting human rights principles. These principles are particularly important to enhance citizens' ability to hold their governments accountable, thereby ensuring services of better quality, which are more equally distributed. Moreover, to improve service delivery, and informed by the human-rights literature, the paper suggests: (a) encouraging greater government coordination and a fairer distribution of resources, (b) promoting decentralization and strengthening local capacity, and (c) increasing access to funding through the principle of progressive realization and maximum available resources. Lastly, under the purview of the Sustainable Development Goal (SDG) of universalizing access to WASH, this paper lays out a series of steps to help shape the research agenda in a way that advances progress in achieving the human rights to water and sanitation.

#### 2. Background

Global access to WASH has risen incrementally, but the sector continues to face widespread inequalities. In 2020, the WHO/UNICEF Joint Monitoring Programme (JMP) published estimates for 234 countries, which suggested that 367 million people still use unimproved drinking water sources, 2 billion people do not have access to safely managed water, and over 120 million access drinking water directly from surface sources [8]. Of the 138 countries for which data on safely managed water services are available, only 16 are on track to reach universal access by 2020 [8]. In sanitation, the pathway to universalization is even more challenging: 3.6 billion people lack safely managed sanitation, while over 616 million rely on unimproved sanitation sources, and 494 million practice open defecation [8].

The access gap is amplified in rural areas: 97 percent and 85 percent of the urban population have access to clean water and sanitation, respectively, whereas 81 percent and 59 percent of the rural population have access, respectively [9]. Moreover, evidence

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has shown an extensive gap between the rich and the poor in access to water and to handwashing with soap [8]. The lack of WASH access is often concentrated among the most vulnerable populations, such as women, ethnic minorities, refugees, internally displaced persons, and people with disabilities [9]. For instance, in Guatemala, only 31% of indigenous populations have access to sanitation, compared to 51% of non-indigenous populations [10]. In Tajikistan, 24 percent of households reported having at least one household member with one or more functional disabilities who was unable to access the main drinking-water source without assistance [11]. Moreover, in Niger, in 2012, around 70 percent of those tasked with fetching water are women [12].

The repercussions of the lack of access to clean WASH have been exacerbated by the current pandemic. Access to clean water, sanitation, and hygiene remains central to helping contain the spread of COVID-19 [13–15]. Recent literature has emphasized the importance of decentralization and strengthening local government, in facilitating service delivery. Robinson [16] reviewed the government-decentralization literature across low-income countries and found that: "health and education services are better administered by deconcentrated public agencies working under the direct control of central line departments". Furthermore, Boex et al analyzed the institutional capacity of a series of countries across Asia and Africa and argude that countries "should focus on improving the role of urban local governments in delivering urban services in the context of a multilevel governance system" [17]. Moreover, Ndaw [18] showed how a World-Bank-funded capacity-building program in Egypt targeted at the government and local water and sanitation companies (WSCs) helped improve procurement, citizen engagement, and monitoring and evaluation (M&E) systems. Governments and institutions must ensure the right to water and sanitation for all, prioritize access among the most marginalized populations, and help ensure that these services remain affordable.

This paper uses the analytical model of service delivery introduced in the 2004 WDR to analyze institutional deficiencies in access to WASH services, under the purview of accelerating coverage and striving towards universalization. The model is applied to the Democratic Republic of Congo, Haiti, Mozambique, and Niger, which are studied as part of the WASH Poverty Diagnostics.

The WASH Poverty Diagnostic initiative was a 2015 World Bank multidisciplinary initiative that sought to identify key challenges and opportunities for improving the access, quality, and sustainability of services for the poor. The study covered eighteen countries, ranging from conflict-affected states to middle-income countries [9]. Four core questions were addressed as part of the diagnostic: (i) Who are the poor and where do they live? (ii) What is the level and quality of WASH services for the poor compared to the non-poor? (iii) What are the linkages and synergies between WASH and other sectors? (iv) What are the WASH service constraints and potential solutions to improving services to the poor? [9]. This paper focuses on question (iv), covering service-delivery issues in access.

The analysis suggests that weaknesses in the sector can be strongly linked to disruptions in the accountability association between the State and local WASH providers. The report then outlines recommendations for improving service delivery, including addressing the core cross-cutting human-rights principles, which remain essential components of HRBAs. Under the framework of the HRBA, the paper also identifies three key areas of work for expanding the government allocation of services.

Human-Rights Literature on the Responsibility Role of the State in Safeguarding Access to WASH

A central feature of HRBAs is the notion of accountability, which in practice requires the development of adequate laws, policies, institutions, administrative procedures and practices, and mechanisms of redress. International human-rights law assigns the State the responsibility to respect, protect, and fulfill the right to water and sanitation [1]. In line with the human-rights obligation of governments to respect, protect and fulfill access to WASH, CESCR Commentary 15 states that [1]:

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Governments should not interfere, directly or indirectly, with the enjoyment of rights.
 This includes the government refraining from "engaging in any practice or activity that denies or limits equal access to adequate water."

- Governments should prevent third parties from interfering in any way with the
  enjoyment of rights. This includes "adopting the necessary and effective legislative
  and other measures to restrain, for example, third parties from denying equal access
  to adequate water; and polluting and inequitably extracting from water resources,
  including natural sources, wells and other water distribution systems."
- Governments should take active steps to put in place laws, policies, institutions, and
  procedures, including the allocation of resources, to enable people to enjoy their rights.
  This does not mean that states must provide these services but, rather, that it must
  make provision for the services to be delivered by a third party if necessary and/or
  available.

The Universal Declaration of Human Rights holds states accountable for implementing progressive measures to ensure the human rights and freedoms of its citizens [4].

There are additional resolutions which articulate the role of the State in ensuring access to water and sanitation. UNGA resolution 18/33, dated October, 2011 reads: "[...] The rights to water and to sanitation are guaranteed under international human rights law and States must take measures towards the progressive realization of these rights. This requires concrete and targeted steps to the maximum of their available resources. States are required to move towards the goal of full realization as expeditiously and effectively as possible, within the framework of international cooperation and assistance, where needed. Certain aspects of these rights are immediate obligations, including the requirement to guarantee them without discrimination" [3].

Moreover, UNGA resolution 18/33 calls upon states to continuously monitor and analyze the status of the realization of access to WASH based on availability, quality, acceptability, accessibility, and affordability, as well as cross-cutting human rights principles, such as equality and non-discrimination, participation, accountability, transparency, and sustainability [3]. Other human rights principles include universality, inalienability, interdependency, and interrelatedness [7]. The principles applied in this paper are typically more operational, although all the principles remain important. This resolution also calls on states to: address existing policies and activities in the sector, develop comprehensive plans and strategies to ensure access to WASH, set targets for access and assess whether existing legislative and policy frameworks are in line with these targets, offer disaggregated data, and provide a regulatory framework for providers, including the monitoring of WASH systems and the offer of legal remedies.

In addition, further responsibilities of the State in ensuring access to services fall under the principle of progressive realization, which is the formal recognition that the full enjoyment of economic, social, and cultural rights is resource-dependent [19]; maximum available resources should include those existing within the State, as well as those available from the international community through international cooperation and assistance (as outlined in articles 2 (1), 11 and 23 of the ICECSR) [20].

Thus, under the international legal-human-rights frameworks, governments are tasked with the responsibility of safeguarding access to WASH. Bearing this in mind, the following section introduces an analytical framework to map out the process of service delivery for citizens and the provision of water and sanitation by organizations and governments. Failures in service delivery are driven by breakdowns in the accountability mechanisms linking these actors.

#### 3. Analytical Framework

Given that international human-rights frameworks assign governments the responsibility for safeguarding access to WASH, failures in service delivery represent a significant violation of the human right to water and sanitation. To better understand the processes involved in failures in the delivery of services, this paper uses the analytical framework introduced in WDR 2004 [6] (Figure 1) and applies it to the following four countries: the

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DRC, Haiti, Mozambique, and Niger. The analytical framework maps out the process of service delivery as a function of the accountability mechanisms linking States, providers, and citizens.

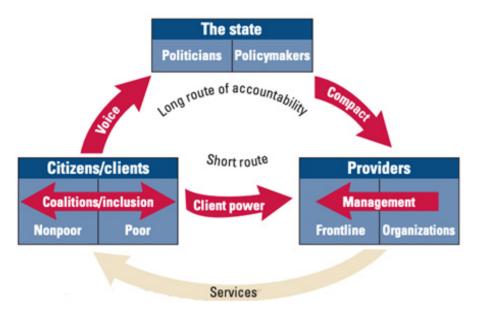


Figure 1. Key relationships of power and accountability, as introduced in the WDR 2004 report [6].

The four actors involved in the accountability relationship are: citizens and clients, politicians and policymakers, organizational providers, and frontline providers. This interaction is displayed in Figure 1, and the ideal scenario involves different actors intertwined in relationships of power and accountability; "citizens exercise voice over politicians. Policymakers have compacts with organizational providers [state responsibilities]. Organizations manage frontline providers [state's oversight]. And clients exercise client power [voice and accountability] power through interactions with frontline providers" [6].

The framework offers a succinct method of analyzing the processes of service delivery in the WASH sector, as a system of accountability between these actors. The framework defines service failures as the result of breakdowns in any of the accountability networks specified above. The short route to accountability involves holding providers directly accountable to clients by passing decisions and powers directly to citizens or communities. The long route, which is more commonly adopted, involves "clients as citizens influencing policymakers, and policymakers influencing providers". For water and sanitation, given the assumption that services are offered by the government and not the market, no direct accountability mechanisms between the provider and the consumer exist. Thus, the process of service delivery traditionally follows the long route to accountability. Throughout this paper, it is assumed that water and sanitation are public goods, and that they thus follow the long route to accountability. This is not always the case across countries, and access to WASH is often offered via private providers. The role of the private sector, and of the privatization of the process of WASH service delivery, is a subject that merits further debate, which lies outside the scope of the current paper.

As displayed in Figure 1, the voices of citizens and compact associations are the mediating components between the State, citizens, and WASH providers. The 2004 WDR report defines these associations in the following way: the "compact" is the "broad, long-term relationship of accountability connecting policymakers to organizational providers. This is usually not as specific or legally enforceable as a contract. But an explicit, verifiable contract be one form of a "compact" [6]. The "voice" is the avenue connecting citizens and politicians and "comprises many formal and informal processes, including voting and electoral politics, lobbying and propaganda, patronage and clientelism, media activities, access to information, and so on. Citizens delegate to politicians the functions of serving

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their interests .... Politicians perform by providing services, such as law and order to communities" [6].

The mapping of the analytical framework onto the water sector was informed, in part, by the frameworks used as part of the service-delivery process of the WASH Poverty Diagnostics; many of the background papers commissioned for the diagnostics followed a similar framework. In terms of its application to the WASH sector, the WDR framework maps onto the sector in the following ways:

- Citizens/clients: water consumers/clients.
- Politicians/policymakers: those in charge of administering laws in the WASH sector, water-and-sanitation government departments, health departments.
- Organizational/frontline providers: water and sanitation utility staff, frontline sanitation workers.

The analytical framework enables us to: (a) map out the key relevant actors involved in the process of service delivery, (b) identify sources of weakness in provision, (c) establish a common blueprint for comparing issues of service distribution and outline key difficulties facing the sector, and (d) draw broader connections between failures of service delivery and a human-rights-based approach to WASH. Drawing on the case studies described below, we aim to identify whether the failures observed in these countries can be attributed to the "compact" or the "voice" association between citizens, the State, and WASH providers.

The application of a human-rights lens to this framework recognizes consumers/clients as individual rights holders and politicians/policymakers, as well as organizational/frontline providers, as duty bearers. Under this framework, human-rights law assigns States, as duty-bearers, accountability for the (progressive) realization of the rights to water and sanitation and empowers rights holders to claim this right [3].

#### 4. Case Studies

The empirical evidence provided in this paper draws from the WASH Poverty Diagnostics and the background research papers on service-delivery inefficiencies that informed them [9].

The framework described above (Figure 1) is applied to the following four countries: the DRC, Haiti, Mozambique, and Niger. These countries were selected as case studies because they share several commonalities: low levels of access to WASH services, a high proportion of the population living in rural areas, elevated levels of poverty, and serious constraints on institutional delivery. It should be noted that despite these similarities, which allow valid comparisons under the case-study analytical framework introduced here, the four countries also experience significant differences. The DRC has an aprroximately equal distribution of urban and rural poor, whereas the levels of poverty in Haiti, Mozambique, and Niger are significantly higher among the rural population. Furthermore, the rate of stunting of children under five in the DRC, Mozambique, and Niger is over 30 percent, whereas in Haiti, it hovers around 7 percent [9,21–23].

All four countries experience low levels of access to water and sanitation. As of the time at which the WASH Poverty Diagnostics were published, only 52 percent of the population of the DRC [21], 58 percent of the population of Haiti [23], 51 percent of the population of Mozambique [22], and 58.2 percent of the population of Niger had access to improved water [12]. Furthermore, only 20.6 percent of the population of the DRC [21], 33–34 percent of the population of Haiti [24], 28 percent of the population of Mozambique [22], and 10.9 percent of the population of Niger [12] had access to improved sanitation.

Moreover, in all the countries, a high proportion of the population live in rural areas, and there are elevated levels of poverty. In 2018, around 56 percent of the population of the DRC, 45 percent of the population of Haiti, 64 percent of the population of Mozambique, and 84 percent of the population of Niger lived in rural locations [24]. Furthermore, the latest estimates of the number of people living below the international poverty line of

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USD 1.9 were 77 percent in the DRC, 25 percent in Haiti, 64 percent in Mozambique, and 41 percent in Niger [25].

These countries also experience serious constraints on institutional WASH delivery, as outlined below. The case studies covered here map out connections between breakdowns in the long route to accountability and disruptions in the "compact" association between the State and WASH providers. Some of the common issues across countries, which lead to failures in the "compact" association, include: overlapping agendas among different ministries, incomplete/improper decentralization processes, and bottlenecks in the distribution and assignation of funding services. The empirical analysis from the WASH Poverty Diagnostic focuses mostly on capturing service-delivery failure by institutional providers; thus there is less evidence on the "voice" association between citizens and the State.

The Mozambique case study is exceptional in that it also includes a wealth of evidence, in the form of a costumer survey, pointing to citizens' lack of capacity to express their concerns to those in charge of the WASH sector. The background papers for the other three countries mention some "voice" associations, but this information is limited, and does not offer a rich collection of information with which to build a narrative around the service-delivery associations between citizens and the State. For example, in the (unpublished) background study conducted for the DRC, there is a short reference to citizen-demand initiatives to provide better services, but the authors argue that richer information is required in order to better capture this association [21]. In the background study conducted for Niger, there is also a reference to corruption and patronage among civil-society members, but there is scarce evidence related to water-and-sanitation to more thoroughly examine how this applies to the WASH sector [12]. The Haiti WASH Poverty Diagnostic, and the background studies that fed into them, focus almost entirely on processes of service delivery [23].

#### 4.1. The DRC

#### 4.1.1. Institutional Landscape and Service Failure

The national government, through the Ministry of Planning—National WASH Action Committee, oversees all the planning, investment, and strategies in the sector. In turn, the Committee assigns the responsibility for overseeing the implementation of the agenda to seven different ministries: the Ministry of Energy and Water Resources (MEWR), the Ministry of Environment, Conversion of Natural and Durable Development (MECNDD), the Ministry of Public Health (MPG), the Ministry of Infrastructure, Public Works, and Reconstruction, the Ministry of Portfolio, the Ministry of Rural Development (SNHR) and the Committee for the Reform of Public Enterprises (COPIREP) [21].

The DRC has experienced deep failures in service delivery across an array of areas. There are pronounced inequalities in access to water between major and marginal urban areas, the quality of the water is poor, and urban access is eroding in the face of growing urbanization. Moreover, large urban–rural divides in access to water persist: in total, 81 percent of people in cities have access to improved water compared to 31 percent of people in rural areas. Moreover, among the top 10 percent of households in terms of wealth, 95 percent have access to improved water and 35 percent to improved sanitation, compared to 22 percent and 17 percent for the bottom 40 percent of households. Urban-sanitation services are dwindling or nonexistent, and the rural water and sanitation sector has proven unsustainable and unable to scale up its services [21].

#### 4.1.2. Mapping Service-Delivery Failure onto the Analytical Framework

Failures in the delivery of WASH services in the DRC can be mapped onto the WDR model by linking service breakdowns to failures in the "compact" association between the State and local water providers. This failure is driven by of the overlapping of leadership roles over the sanitation agenda and the fact that the State has undergone an incomplete, and fractured, decentralization process. This, in turn, has caused bottlenecks in access to

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local-level funding, as well as confusion in the ladder of operation among provincial- and city-level operators [21].

Different agencies have overlapping leadership responsibilities over the sanitation agenda. Both the Directorate of Hygiene in the Ministry of Public Health (MPH) and the Directorate of Sanitation (DAS) in the Ministry of Environment (MECNDD) are assigned responsibility for operating urban-sanitation programs, even though, in theory, the law stipulates that their agendas should be focused on different areas [21]. Furthermore, there appears to be a lack of leadership in urban sanitation, which raises obstacles to the assignation of funding, and significantly affects government-level decision-making processes. As detailed in the country's urban-sanitation service-delivery backgroun report (unpublished), conducted as part of the WASH Poverty Diagnostic [21]:

"For urban sanitation. the lack of leadership appears to be self-reinforcing and there is no national programme. Therefore, donors do not know who to invest in. Without funds, there is little incentive to take the lead (but without a lead, funds will not be forthcoming). At the front-line in municipalities, this results in inertia. Mayors have theoretical responsibility to develop local sanitation programmes including construction and maintenance of infrastructure, but no budget to do so."

Moreover, the decentralization of the WASH sector, which was authorized in 2006, has been a heavily splintered process. Even though the key decision-making authority in urban sanitation was devolved to municipalities (*villes* in the DRC), in practice, these municipalities enjoy little financial autonomy, and do not receive appropriate budget allocations. Furthermore, provincial revenues are below their constitutionally mandated share; for instance, even though the central government is expected to transfer 40 percent of the budget to the provinces and other ETDs (French: Entités Territoriales Decentralisées), the ETDs report receiving only an average of 10 percent [21].

Overlapping leadership roles and a fractured decentralization process have resulted in an array of failures in service delivery. This has caused bottlenecks in access to local-level funding, as well as confusion in the ladder of operation among provincial and city-level operators, disrupting the "compact" relationship between the government and water-and-sanitation providers. This uneven relationship is perhaps best illustrated by the following quotation, from the urban sanitation report submitted as part of the WASH Poverty Diagnostic [21]:

"Mayors of municipalities may have theoretical responsibility to develop local sanitation programmes including construction and maintenance of infrastructure. However, they have no budget to do so and the respective provincial-level cadres of the two key ministries are in disagreement. There may be zero, one or two types of sanitation brigades in any given municipality, and it is not clear whether they are formally (or informally) under the control of the mayor or the provincial government" [21].

#### 4.2. Haiti

#### 4.2.1. Institutional Landscape and Service Failure

The National Directorate for Drinking Water and Sanitation (Direction Nationale de l'Eau Potable et de l'Assainissement, DINEPA) is Haiti's central governance body. It is in charge of policy formulation, sector coordination, and the regulation of the country's agenda. There are four regional agencies of DINEPA, called regional bureaus of water and sanitation (offices region aux de l'eau potable et de l'assainissement (OREPA)). These four OREPA support local water committees (CAEPA), which in turn support rural WSS systems through rural-development units (URD), one per province, and two community water and sanitation technicians (TEPAC) per commune [23].

Haiti has experienced a series of failures in its service delivery: access to improved drinking-water sources decreased by 4 percentage points between 1990 and 2015, and by 7 percent among the bottom 40 percent in rural areas. Moreover, water utilities are struggling to manage urban-population growth, and households have a severe distrust over the quality of public water. In 2012, around 55 percent of the Port-au-Prince metropolitan

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population had access to a public water network, but just 28 percent used it as their main drinking source. Furthermore, many water systems are managed by a poorly performing water provider, and a substantial portion of them are non-operational and lack chlorination services. Moreover, only 28 percent of households in the country have access to improved sanitation, and almost all households in Port-au-Prince rely on non-network sanitation [23].

#### 4.2.2. Mapping Service-Delivery Failure onto the Analytical Framework

Failures in the delivery of WASH services in Haiti can be mapped onto the WDR model by connecting issues of service breakdowns to failures in the "compact" association between the State and local water providers. Disruptions in the "compact" association can be attributed to the financial difficulties facing the sector, as well as weak coordination among stakeholders and institutions.

The financial difficulties facing the sector include a heavy dependence on outside-donor financing and fiscal allocations to the sector below is the levels that are required. The sector relies heavily on outside donations for its survival. Between 2009 and 2015, 99 percent of the transfers received by the sector were grants from outside donors, and only 1 percent were transfers from the national treasury [23]. Moreover, fiscal allocations to the sector were below the levels needed: World Bank estimates suggest that providing universal access to improved water in the 20 communes with the highest incidences of cholera required around USD 123 million between 2014 and 2017 [23], a third of the total of USD 325 million invested in the sector between 2009 and 2015 [23].

Failures in the "compact" association between the State and local water providers can also be attributed to weak coordination among institutions and stakeholders. For instance, the 2009 Water Law calls for the establishment of a board of directors, which includes the Ministry of Public Works, the Ministry of Finance, the Ministry of the Interior, and the private sector, to streamline and facilitate coordination in the sector, but the board was never established. Moreover, although DINEPA is pushing for a concerted effort to promote greater coordination in sanitation, and recommended several actions, structured around three pillars, to be implemented during 2016–2021 to move the sanitation agenda forward, progress has not occurred [23].

Disruptions in the "compact" association linked to financial difficulties and weak coordination among stakeholders and institutions has resulted in significant failures in service delivery. Some of the issues in delivery, as covered previously, include poor management of water systems, a lack of chlorination services, and a non-existent centralized sewer network in Port-a-Prince.

#### 4.3. Mozambique

#### 4.3.1. Institutional Landscape and Service Failure

The Ministry of Public Works and Housing (MoPh) is the lead agency in charge of all water- and sanitation-related matters. The department oversees the National Directorate of Water (DNA), which regulates the sector, and has the responsibility for policymaking, planning, monitoring, and reporting related to rural water supply and sanitation. It also oversees water-resource management and has responsibility for urban water and sanitation. The central government of Mozambique divides its authority between central and local state organs (OECLs) in rural and small-town areas and elected local-government municipalities in urban areas. The Water Supply Asset Holding and Investment (FIPAG, its acronym in Portuguese) is responsible for promoting and steering the efficient and sustainable management of urban water supplies [22].

Mozambique has faced serious issues and inefficiencies in its service delivery. In 2015, only 28 percent of households had access to an improved sanitation facility, and merely 58 percent had access to clean water. Around 56 percent of those in the bottom 40 percent of the population practiced open defecation. The country also suffers from financing constraints, which have accumulated over the last 15 years and have resulted in a widening of the geographic disparities in terms of service coverage [22].

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#### 4.3.2. Mapping Service-Delivery Failure onto the Analytical Framework

Failures in the delivery of WASH services in Mozambique can be mapped onto the WDR model by connecting issues of service breakdown to failures in the "compact" association between the State and local water providers, and in the capacity of citizens to express their voice to the government.

Ruptures in the "compact" association between the State and local providers can be linked to an incomplete and fractured state-decentralization process, and significant bottlenecks in sector financing. The 2007 Rural Water Supply and Sanitation Strategic Plan (PESA-ASR) established a framework and a water policy to push for decentralization. Since then, the devolution process from the federal to the local level has begun, but significant challenges in terms of building capacity at lower levels of government remain. In rural areas, the ownership of water points is not clearly defined; therefore the assets of existing infrastructure are not managed, resulting in uncoordinated maintenance and rehabilitation. Furthermore, in peri-urban sites, subnational agencies have weak administrative and political autonomy [22].

Further issues affecting the "compact" association between the State and local WASH providers relate to problems in access to financial resources. In part, this is related to the incomplete decentralization process mentioned previously. For instance, a 2014 public financial-management assessment of Mozambique found that 63 percent of all government expenditures weredirected centrally, with only 21 percent at the provincial level and 14 at the district level [26]. However, the sector also faces significant issues in access to funding: the rural water sector has received limited support for improving management capacity and suffers from annual shortfalls in access to finance. Moreover, the sector is highly dependent on donor money to guarantee its efficiency: in 2011, approximately 85 percent of the funding from the WASH sector was provided by sources of development assistance. Rural sanitation is particularly underfunded, as estimates suggest that barely 50–65 percent of the country's funding needs are covered) [27]

In terms of the disruption in the "voice" channel between citizens and WASH state agencies, a (unpublished) background study on urban water [22] administered a survey to 1326 customers across five cities in Mozambique and illustrated some of the many ways in which the capacity of citizens to express their concerns to water-and-sanitation government agencies is limited. For instance, citizens of the city of Maxixe suggested that the lines of communication between customers and the government to promote appropriate readings of water bills were nonexistent. Furthermore, residents of Nacala city complained that FIPAG was inattentive to their needs, and that the processes for them to respond to institutional requests and complaints from citizens were long and inefficient [22].

## 4.4. Niger

#### 4.4.1. Institutional Landscape and Service Failure

Water-supply services in Niger are regulated by the Ministry of Water and Sanitation (MHA: Ministeres de l'Hydaulique et de l'Assainisseent) at the central level, and by decentralized bodies and regional directories in rural areas. The 2010 Water Law assigned responsibility for rural water supply to local governments. The entities in charge of governing the urban WASH are: (i) La Société de Patrimoine des Eaux du Niger (SPEN), a public company responsible for investment programs and debt-service repayments; and (ii) La Société d'Exploitation des Eaux du Niger (SEEN), a private company responsible for the operation of infrastructure (billing and collection) and the marketing of water services. Rural-water governance is the responsibility of local governments, who oversee public-water-supply services within their territories [12].

Niger faces serious issues in its service delivery. Access to improved water and sanitation is low: only 58 percent of the population has access to improved water and a dire 10 percent has access to improved sanitation. Moreover, rates of open defecation are over 70 percent. Inequality in access to WASH illustrates a sharp urban–rural divide, as well as a pronounced divide lower down the income ladder. In addition, the country faces

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severe problems of accountability across all sectors; local state-actors suffer from low levels of capacity, and the sector faces institutional fragmentation and a lack of coordination. Furthermore, the country lacks adequate wastewater collection and management of fecal sludge [12].

#### 4.4.2. Mapping Service-Delivery Failure onto the Analytical Framework

Issues in service delivery can be mapped onto the WDR analytical framework in terms of disruptions in the "compact" association between the State and local water-and-sanitation providers. Some of the common issues in service delivery include insufficient financing and operational capacity, confusion over government roles, and a lack of monitoring and regulatory capacity. These issues, in turn, result in serious bottlenecks in access to local-level funding, as well as confusion in the ladder of operation among provincial and city-level operators [12].

The WASH sector in Niger faces several issues in financing and regulatory capacity, which weaken the "compact" relationship between the government and operators. The resources allocated to the sector do not match the country's needs. The level of execution of the investment budget for the sector, agreed by vote, was less than 60 percent, on average, for the past 10 years. Moreover, the country is also extremely aid-dependent; between 2007 and 2016, donors contributed 8 percent to the gross domestic product (GDP). Furthermore, since 2015, nonpayment of the government's water bills has placed significant pressure on SPEN's finances [12].

The "compact" association in the WASH sector is also weakened by a fragmented administration, confusion over government roles, and weak government regulatory capacity. Although the MHA oversees the WASH sector, several other ministries have mandates over water supply and sanitation, creating significant overlap in the control and management of resources. Moreover, although a regulatory body was created within the MHA in 2014, it lacks real autonomy and expansion authority. Further confusion in leadership roles is driven by the high mobility of staff at all levels [12].

Insufficient financing and operational capacity, confusion over government roles, and weak regulatory capacity have caused bottlenecks in access to local-level funding, as well as issues in the ladder of operation among provincial- and city-level operators. This has led to serious breakdowns in service delivery. Some of these issues, as mentioned previously, include inadequacies in wastewater collection, a sharp urban–rural divide, and a divide in access to services lower down the income ladder [12].

All four countries, DRC, Haiti, Mozambique, and Niger, experience serious constraints on institutional WASH delivery. Because the WASH Poverty Diagnostics focused mostly on the relationship between the State and water providers, i.e., the "compact" association, it was only for Mozambique for which we could access a rich set of empirical information, in the form of a costumer survey, to examine the "voice" association. All the case studies suggest that the breakdowns in the long route to accountability can be strongly linked to disruptions in the "compact" association between the State and WASH providers. Common factors across countries include: the lack of coordination and overlapping agendas among different ministries, incomplete/improper decentralization processes, and bottlenecks in the distribution and assignation of funding services. In Mozambique, evidence also points to a breakdown in the long route to accountability stemming from a disrupted "voice" association between citizens and the State. In Mozambique, citizens lack the capacity to express concerns to their water providers. Additional research is needed in order to better understand the mediating role of citizens as interlocutors of the State, as well as the role of breakdowns in the "voice" associations between citizens and the State in explaining these failures.

The following section will outline a series of recommendations for improving service delivery along these three dimensions, and will tie these to a HRBA to WASH.

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# 5. Recommendations for Improving Service Delivery Informed by the Human-Rights Literature and a HRBA to WASH

HRBAs are conceptual frameworks for understanding processes of human development, which are normatively based on international standards and are operationally directed at promoting and protecting human rights. They seek to analyze inequalities which lie at the heart of development problems and address discriminatory practices, sources of exclusion, and unjust distributions of power. These inequalities often impede development and may result in the exclusion of a broad range of groups of people, often those who are most marginalized. HRBAs aim to ensure that the duty-bearer (the State) has the capacity to respect, promote, and fulfill human rights, and that rights holders (individuals) are empowered to claim their right [7].

This section outlines a series of recommendations for improving service delivery and universalizing access to WASH, which are informed by a HRBA. The section is divided into two: the first part details recommendations for strengthening service delivery according to the cross-cutting principles of the HRBA. Although not mentioned here, a HRBA for WASH also includes five minimum standards for service, grounded in 2002 ESCR General Comment No. 15, and are recognized by the HRBA as necessary to guarantee that water and sanitation are delivered and preserved as human rights. These five minimum standards are: availability, accessibility, quality and safety, acceptability, and affordability [1]. The standards and their relationship to WASH services are fleshed out in the Appendix (Table A1) in this paper. The second part describes a series of recommendations for increasing service delivery, including: encouraging greater government coordination and a fairer distribution of resources, promoting decentralization and the strengthening of local capacity, and encouraging notions of progressive realization/maximum available resources. While the first set of recommendations primarily addresses the "voice" association, the second set of recommendations addresses the "compact" association.

5.1. Recommendations for Strengthening Service Delivery through the Cross-Cutting Principles of a HRBA

## 5.1.1. Principle 1: Equality and Non-Discrimination

A HRBA for WASH includes analyzing whether existing water and sanitation policies, or practices, are discriminatory, whether in law or de facto, through, for example, from historical, social, or cultural practices. The case studies identified a sharp urban–rural divide in access to services, although access is often heavily limited among the most marginalized populations. Other grounds of marginalization, such as ethnicity, disability, and gender, are not covered here, but they are covered extensively in the WASH Poverty Diagnostics. For example, in Nigeria, Panama, Guatemala, and Ecuador the ethnicity of the household head was found to play a role in explaining a household's access to water and sanitation. Moreover, In Tajikistan, a household survey found that 24 percent of people with disabilities in their household are unable to access the main source of drinking water without assistance. Furthermore, for 78% of households in Tajikistan without water on their premises, the responsibility for fetching water falls on females [9]. The human right to water entitles everyone to sufficient, safe, acceptable, physically accessible, and affordable water for personal and domestic use, without discrimination. Equity involves recognizing that people may need different types of support and resources for their rights to be fulfilled.

To ensure fairness, human-rights-based measures prioritize marginalized groups and compensate for discriminatory practices. HRBAs ensure that women and children have a "voice", which, in addition to its intrinsic value, also has positive spillover effects on the sustainability of water and sanitation services [3]. In this way, the principle of equality and non-discrimination is key to strengthening the "voice" of citizens.

#### 5.1.2. Principle 2: Participation

The right to active, free, and meaningful participation remains an essential part of HRBAs for development. The participation of populations whose rights to water and

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sanitation remain unfulfilled is essential to help improve the quality standards of the services offered. The WDR framework emphasizes the importance of the "voice" for a well-functioning service-delivery model. Although we only have strong evidence to suggest that the breakdown in access to WASH services is connected to lack of "voice" in Mozambique, this does not minimize the importance of the relationship between citizens and the State. HRBAs for development focus on the power dynamics between people who experience marginalization and those who make decisions. Institutional mechanisms for participation and remedies should be implemented to ensure the active, free, and meaningful participation of marginalized groups [7].

Increasing citizen participation allows marginalized populations to express their concerns, claim their rights, and hold governments accountable. This builds trust between rights holders (citizens) and duty bearers (governments). Moreover, carefully crafting participatory approaches to engage marginalized groups can help generate a sense of ownership over water resources, thereby reducing the pressure created by distorted political incentives and allowing the overall local and national strengthening of governance in the water-supply and sanitation sector [28,29]. Furthermore, evidence suggests that tracking the spending of water and using new technologies to monitor frontline providers can help reduce opportunities for graft [30–32]

#### 5.1.3. Principle 3: Accountability, Transparency and Sustainability

The human-rights principle of accountability involves the balancing of power to protect the most marginalized, and those living in the most vulnerable situations [7]. The case studies above suggest that, across the four countries, the most vulnerable are often those with the least access to WASH services.

The WDR framework identifies accountability as key to effective service delivery. With the human right to water and sanitation, universal access to WASH became a legal entitlement. States are obliged to respect, protect, and fulfill rights to water and sanitation [7] and should be held accountable for meeting these obligations to their citizens.

To further help increase accountability, governments should set up robust and transparent monitoring and evaluation systems at ministerial level. International development agencies should lead consultations with local stakeholders to help set up straightforward, easy-to-monitor, achievable objectives, as well as establishing indicators and timeframes for setting up monitoring and evaluation mechanisms. Grievance mechanisms are important to ensure the human right to accessible, effective, and enforceable remedies. Often, deliberate efforts are needed to empower vulnerable groups to submit complaints. The timely handling of complaints, respect for the right to remedies, and the swift collection of disaggregated data are also required.

Transparency is closely related to the right to access information, which should be included as part of the government's legal framework. Furthermore, access to information regarding water-and-sanitation services should be made available to all, in accessible formats; this includes expanding capacity building and training in order that people understand whether their rights are being protected [32]. Furthermore, sustainability is a human-rights principle that is of particular importance to the WASH sector, "meeting the needs of the present without compromising the ability of future generations to meet their own needs" [33,34].

The issues identified in the case studies mostly relate to ruptures in the "compact" association between the State and WASH providers. The key issues include lack of coordination, insufficient decentralization, and unavailable resources. The following paragraphs present recommendations for each of these dimensions and address how they are informed by the HRBA.

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# 5.2. Recommendations for Increasing Service Delivery, Informed by the Human-Rights Literature 5.2.1. Encouraging Greater Coordination and a Fairer Distribution of Resources

The clear allocation of responsibilities to different ministries, departments, and different levels of government is key to ensuring the efficient and effective use of resources. This is even more important, and pressing, in contexts of decentralization. As the case studies show, several actors are typically involved in the management of the WASH sector, but they are often not sufficiently coordinated. As mentioned previously, lack of coordination explains several of the breakdowns between the State and WASH providers. Proper coordination between levels of government can help mitigate conflicts and ensure the fairer distribution of resources. The Fourth South Asian Conference on Sanitation (SACOSAN) established the Colombo Declaration on April, 2011, which calls on countries "to establish one national body with responsibility for coordinating sanitation and hygiene, involving all stakeholders, including, but not limited to, those responsible for finance, health, public health, environment, water, education, gender and local government at national, subnational and local levels" [35].

### 5.2.2. Promoting Decentralization and Strengthening of Local Capacity

The case of the DRC and Mozambique point to the fact that the breakdowns in the "compact" association between the State and WASH providers can be attributed to incomplete and fractured decentralization processes. Decentralization can bring substantial benefits in terms of local participation, accountability, and better-quality service provision to the communities, but, to achieve this, international organizations should support local capacity development in areas such as "practical training in building creditworthiness, managing budgets, attracting investment, designing and implementing tariff and subsidy programs, and operating and maintaining water and sanitation facilities" [36]. However, in line with the HRBA, it requires regular community participation and accountability mechanisms. Local governments should be enabled to finance projects independently, and to better deliver water and sanitation to users. Nevertheless, the national government is responsible for monitoring rights, ensuring their realization, and setting minimum standards.

#### 5.2.3. Ensuring Progressive Realization and Maximum Available Resources

The evidence presented throughout these case studies suggests that WASH providers and the government ministries in charge of providing services suffer severely from access to funding. This may be due to bottlenecks in the distribution of funding, incomplete funding sources, or both. To meet the goal of delivering WASH as a human right, the governance structure of the sector needs to focus on bolstering funding and reducing financing gaps. Although external aid represents less than 15% of total WASH funding sources, many countries remain dependent on grants and repayable financing to help finance the sector [37]. A World Bank study of 140 countries found that "extending basic WASH services to the unserved will cost \$28.4 billion (range: \$13.8 to \$46.7 billion) per year from 2015 to 2030, or 0.10 percent (range: 0.05 to 0.16 percent) of the global product (GP)—the global equivalent of the gross domestic product (GDP) at the country level—oof the 140 countries included per year" [38].

To help improve public expenditure in the sector, it is important to improve intragovernmental coordination to increase the prioritization of the sector within budget cycles, bolster greater government oversight and reporting to make the sector transparent and accountable to citizens, and improve the financial and operational performance of WASH services. These dimensions are all addressed in greater detail above.

The right to water and sanitation is subject to the principle of progressive realization. As outlined in the UN Special Rapporteur on the rights to water's report to the UNGA [3], understanding whether this principle is adhered to implies the analysis of how a country has progressed in terms of service provision and the plans that are in place for the expansion and improvement of these services. The Special Rapporteur notes that this expansion should simultaneously lead to more equality in access among groups.

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The normative content of the human rights to water and sanitation should inform what is meant by progressive realization of higher levels, and by equality of services. Marginalized groups should be identified, and specific inequality dimensions addressed; national policies must ensure compliance which standards of availability, safety, acceptability and affordability, privacy, and dignity. Furthermore, the extent to which relevant actors are held accountable should also be detailed.

The principle of maximum available resources guides decisions around how States fulfill the obligation to progressively ensure the human rights to water and sanitation. The Special Rapporteur notes that the primary resources in question are usually considered to be "financial resources, including revenues collected for the water and sanitation, through tariffs, taxes and transfers [ . . . and] also includes budgetary allocations, expenditures and domestic and international macroeconomic policies" [35].

On the financial side, the obligation to use maximum available resources requires states to adopt fair and redistributive taxation and tariff policies and to increase the overall revenue pool. Natural, workforce, technological, institutional, and informational resources are also crucial for achieving these rights, which can be maximized through capacity building. It is clear from the case studies cited above that the issues related to lack of financing are severe.

#### 6. Conclusions and the Future of the WASH Research Agenda

The human right to water entitles everyone to sufficient, safe, acceptable, physically accessible, and affordable water for personal and domestic use. The human-rights-based approach (HRBA) guides development partners on how to direct their operations to support governments in implementing human-rights standards and principles. Human rights provide international standards to guide political and economic decisions over the allocation of water and sanitation resources, and HRBAs for development can enable citizens' voices to be heard in decisions over the water and sanitation sector.

Given the central role of the State in guaranteeing human rights, this article analyzed how deficiencies in government service delivery may prevent the fulfillment of these rights. It introduced a conceptual framework for thinking about institutional constraints on access as a three-way connection between the State, water providers, and citizens. Service failures result from breakdowns in delivery in any of these three accountability networks.

The case studies covered suggest that the breakdowns in capacity can be strongly linked to weaknesses in the "compact" association between the State and local water providers. Some of the common issues include insufficient coordination, incomplete/improper decentralization processes, and bottlenecks in the distribution of funding services. In Mozambique, there was evidence to support the "voice" association linking citizens and the State, since citizens did not have the capacity to raise their concerns to the State. This is not to say that these mechanisms of citizen participation are not important. Citizen participation is a right in and of itself, can be empowering to individuals or groups, and can create trust in government. In addition, participation can ensure that the services provided are more relevant, more efficient, and more effective at reaching marginalized populations.

The issues outlined above highlight the need for significant changes in the decision-making processes of political accountability between the State, citizens, and WASH providers. Moving forward, the HRBA calls for minimum standards of service—availability, accessibility, quality and safety, acceptability, affordability. Furthermore, it is driven by human-rights principles including: equality and non-discrimination, participation, accountability, transparecy, and sustainability. This is particularly important to strengthen the rights of citizens to hold their governments accountable, thereby strengthening the "voice" association. The HRBA also encourages greater government coordination, the fairer distribution of services, the decentralization and strengthening of local capacity, and the encouragement of progressive realization and the use of the maximum available resources.

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The HRBA for WASH is essential to strengthening the governance and institutional framework of the sector. In the future, it is necessary to include additional analysis of layers of exclusion, based on other grounds of marginalization. These should move beyond poverty and geographic location, and include gender, age, migration status, ethnic-minority status, and levels of disability. A human-rights lens can also offer an added focus on the maximization of the allocation of resources, both financial and human, and the equitable and efficient spending of these resources. This can be achieved both through increasing attention one those who lack access and through an increased focus on coordination, minimum standards, transparency, and accountability.

#### The WASH Research Agenda for the Future

In the future, researchers should help to shape the WASH research agenda to ensure that it aligns better with the HRBA. This can be achieved by promoting holistic, cross-disciplinary research approaches to WASH, which allow the identification of cross-sectoral gaps in access and service delivery. The WASH Poverty Diagnostics global initiatives serve as clear examples of this type of interdisciplinary approach to analyzing the sector. Such multifaceted approaches allow interconnected, nuanced overviews of how the sectors operate and permit more focalized, context-specific decision making.

Moreover, given that human rights operate within international frameworks, the conversation on the HRBA for water and sanitation should not be analyzed in a vacuum. Rather, it should be positioned within larger, cross-sectoral human-rights debates. A cross-disciplinary analysis of the human right to WASH access, which analyzes the right to water and sanitation in conjunction with those articulated across other disciplines, will allow a more unified and cohesive agenda through which to push for the advancement of a global human-rights program.

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#### Appendix A Appendix

Minimum Standards

The five minimum standards for service are grounded in 2002 ESCR General Comment No. 15, and are recognized by the HRBA as necessary to guarantee that WASH is delivered and preserved as a human right. The five minimum standards are: availability, accessibility, quality and safety, acceptability and affordability. These five minimum standards, and their relationship to access to WASH services, are fleshed out in Table A1.

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<b>Table A1.</b> The five service dimensions recognized by the HRBA as necessary to guarantee that WASH
is delivered and preserved as a human right Adapted from: UN General Comment 15 [1].

Dimension	Definition
Availability	The supply of water shall be sufficient and continuous for personal and domestic uses, including quality, adequacy for drinking and food preparation, personal hygiene, washing of clothes, cleaning and other aspects of domestic hygiene.
Accessibility	Water and sanitation facilities must be located or constructed such as that they are accessible to everyone at all times. Accessibility to sanitation entails facilities that reduce safety risks for all users, especially women and girls.
Quality and safety	Water delivered shall meet quality standards for human consumption and for personal and domestic hygiene. This implies that water must be free from microorganisms, chemical substances and radiological hazards that constitute a threat to a person's health over a lifetime of consumption. Sanitation facilities shall also be safe to use and prevent contact between people and human excreta.
Acceptability	Water and sanitation facilities must meet social or cultural norms from a user's perspective, for example, regarding the odor or color of drinking water, or the privacy of sanitation facilities. In most culture, gender-specific sanitation facilities will be required in public spaces and institutions.
Affordability	Individual and household expenditure on water and sanitation services, as well as associated hygiene, must be affordable for people without forcing them to resort to other unsafe alternatives and/or limiting their capacity to acquire other basic goods and services (such as food, housing, or education) guaranteed by other human rights.

These minimum standards of service provision are context-dependent, and should be properly tailored to adapt to the local context of each country. They should be advanced through the cross-cutting human rights principles, which include: equality and non-discrimination, participation, accountability, transparency, and sustainability.

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