2nd Pakistan Conference on Sanitation

February 17 – 18, 2015

Islamabad, Pakistan

PACOSAN II Declaration

We, the heads from the federal and Provincial Government i.e. Punjab, Sindh, Balochistan, Gilgit Baltistan, AJK and FATA participated in the second Pakistan Conference on Sanitation (PACOSAN II) in Islamabad, Pakistan, which was attended by the ministers, parliamentarians, senior policy makers, implementing agencies, development partners, civil society, professionals, academia, the private sector, and media;

1. **Recognize** that although much has been achieved in the last decade, the overall picture of sanitation in Pakistan still remains dismal and the practice of open defecation, unsanitary disposal of human excreta and other vulnerable practices by the majority of the people in the country is a serious threat to the quality of life, control of disease and the environment.

2. **Concerned** that about xx children under age five in the country die each year of water and sanitation related diseases;

3. **Unanimously agree** that the focus of proper sanitation and hygiene in the country should be based on a paradigm that is “people centered, community-led, gender sensitive and demand driven”;

4. **Recognize** that we must capitalize on the strong political will, local leadership and community ownership to boost sanitation coverage and improve hygiene practices substantially by 2025 (GoP Vision).

5. **Commit** to further accelerate sanitation and hygiene behaviour change in Pakistan to meet the Millennium Development and Sustainable Development targets;

6. **Renew our joint commitment** to Human Right on Sanitation adopted by the United Nationals and endorsed by the SAARC countries to work progressively to achieve an open defecation free and hygienic South Asia, through accessible, affordable, appropriate, acceptable and environmentally safe sanitation and hygiene services that all people can use and maintain with dignity, safety and comfort;

7. **Recognize** sanitation as a matter of justice and equity, with a powerful multiplier effect that unlocks measurable benefits in health, nutrition, education, poverty eradication, economic growth and tourism while also reducing discrimination and empowering communities in rural and urban areas;
8. *Prioritize* sanitation as a development intervention for health, dignity and security of all members of communities especially infants, girl-children, women, the elderly and differently-abled;

9. *Reconfirm* the principles of policy and good practice set out in the SACOSAN declarations of the decade in Dhaka, Islamabad, New Delhi, Colombo and Nepal and to allocate and mobilise resources for delivering on all previous SACOSAN commitments;

PACOSAN II unanimously agrees and commits to an open defecation free Pakistan by 2025 and to progressively move towards sustainable environmental sanitation. In order to achieve this; we commit to:

I. Establish WASH coordination structures led by government at the national, provincial and local level with the 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 etc;

II. Promote WASH as an integrated programme to eradicate stunting, wasting, polio and diarrhea;

III. Mainstream equity (pro poor) dimensions into policy, legislation programming, planning and monitoring;

IV. Promote human rights based approach to sanitation. Work progressively to recognize the right to sanitation in programmes, projects and eventually in legislation.

V. Formulate, develop and implement adequately resourced provincial sanitation and hygiene plans with SMART (specific, measurable, achievable, realistic, time-bound) indicators that measure and report on processes and outcomes;

VI. To develop time-bound plans and to allocate and mobilise resources for delivering on all previous SACOSAN commitments.

VII. Prioritize and promote child and disabled friendly services and menstrual hygiene management in all public buildings and especially schools, health clinics and reflect and monitor this in standards, design, delivery and monitoring;

VIII. Engage the Health sector at all levels in sanitation and hygiene promotion especially the Lady Health Workers (LHW) and nutrition officers as critical agents of preventive healthcare;

IX. Raise awareness at all levels to foster demand and build capacity for sanitation and hygiene including but not limited to empowered community groups, women led groups, pro-poor public private partnerships, academia, service providers, religious leaders and the media.

X. Recognize the importance of sustainable environmental sanitation and hygiene in urban areas and promote thinking of sanitation as the full cycle of proper arrangements, safe conveyance and sanitary disposal / re-use of liquid and solid wastes (including solutions that do not adversely impact the quality of land and water resources);

XI. Raise the profile of WASH in schools with the objective of ensuring that every new and existing school at every educational level has functioning, child-friendly toilets, separate for girls and boys, with facilities for menstrual hygiene management.
XII. Build and strengthen capacity for sanitation and hygiene implementation, including investing in higher education facilities, development of curricula, research and development, and knowledge exchange and partnership development.

XIII. Develop harmonized monitoring mechanisms with roles and responsibilities clearly defined, using agreed common indicators (including baselines) which measure and report on processes and outcomes at every level;

XIV. Recognize the importance of people’s own contribution to sanitation and to ensure that policies and programmes empower communities to invest in and control their own sanitation solutions while protecting the poorest. Innovative mechanism e.g. micro-finance by self help groups, will be effectively promoted;

XV. Establish specific public sector budget allocations for sanitation and hygiene programs and progressively increase allocations to sanitation and hygiene.

XVI. Ensure occupationally dignity, health, safety and improve the profile and working conditions of personnel involved in sanitation work;

XVII. Ensure that the agencies and government departments responsible for sanitation infrastructure and service provision have adequate organizational capacity (personnel, skills, system etc) to fulfill their mandate.

XVIII. Develop and implement approaches, methodologies, technologies and systems for emergencies, and disaster situations, and for areas, with special characteristics/terrains or groups suffering temporary displacement;

XIX. Advocate at the national and provincial level the recognition of climate change impacts on sanitation provision in the country, and develop and implement strategies and technologies that adopt to and aligning implementation programmes;

Agreeing that the momentum gained at PACOSAN II will be further continued by the concerned government departments and development partners to the respective provinces and districts in 2015 and beyond. PACOSAN event to be held every two years to continue building on to the momentum.

We profess our profound appreciation to the Ministry of Climate Change, Government of Islamic Republic of Pakistan for successful hosting the second Pakistan Conference on Sanitation (PACOSAN II).

We are grateful to all the delegates from the federal and provincial governments, international delegates from Sanitation & Water for All (SWA), SAARC and other countries, development partners, civil society organizations, corporate and private sector, academia and the media for their valuable participation and contribution in making this conference a success.