

Vanuatu

DEMOGRAPHIC AND ECONOMIC ESTIMATES

Population (2012)^a	0.25 M
Urban population (2012)^a	0.06 M
Rural population (2012)^a	0.18 M
Population growth rate (2012)^a	2.22%
Gross domestic product USD (2012)^b	0.79 billion

^a World Population Prospects: The 2012 Revision, UNDESA 2013.

^b World Development Indicators, World Bank 2013.

HEALTH ESTIMATES

Infant mortality / 1,000 live births (2012)^c	15.3
Under 5 mortality / 1,000 live births (2012)^c	17.9
Life expectancy at birth (2012)^d	72 yrs
Diarrhoea deaths attributable to WASH (2012)^e	17

^c Levels & Trends in Child Mortality. Report 2013, UNICEF 2013.

^d World Health Statistics, WHO 2014.

^e Preventing diarrhoea through better water, sanitation and hygiene, WHO 2014.

SANITATION AND DRINKING-WATER ESTIMATES

Use of improved sanitation facilities (2012)^f	58%
Use of drinking-water from improved sources (2012)^f	91%

^f Progress on Drinking-Water and Sanitation – 2014 Update, WHO/UNICEF 2014.

Sanitation, drinking-water and hygiene status overview*

Vanuatu has a predominately rural population spread throughout many islands, and as a result, water and sanitation are limited in many of these areas. The government has various policies and strategies to guide activities that provide good governance, but these tend to be limited in implementation by funding constraints. There is very good support and cooperation between NGOs and government agencies.

Sanitation and drinking-water assessments are carried out by province and results generally mean operational changes as opposed to direct policy intervention. Water quality monitoring is undertaken by urban suppliers themselves, but the results are not regularly shared unless specifically requested. Rural monitoring is undertaken by the government and the results shared with those areas. It is hoped that the proposed Vanuatu Drinking-Water Quality Standards will improve this situation, by outlining testing requirements and also the requirement to have a water safety plan (WSP). WSPs are seen as a method to promote water safety, security and hygiene particularly in rural areas. The recent successful workshops with WHO on WSPs showed much promise. NGOs are also promoting WSPs and it is likely that over 20 WSPs will be developed over the next two years by the government and NGOs.

Financing of WASH activities in many parts of Vanuatu, particularly rural areas and islands, is currently unlikely to meet the MDG goals with all allocated and donor funds being spent. This is acknowledged as one of the key issues and always at the forefront of Vanuatu's progress. Overall Vanuatu is progressing towards WASH targets, but the fact remains that there are many rural areas throughout the country and not all can be covered with current resources in a timely manner. However, every opportunity is taken to promote hygiene and WASH by all NGOs and the government whenever the opportunity arises.

* Sanitation, drinking-water and hygiene status overview provided and interpreted by national focal point based on GLAAS results.

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Highlights based on country reported GLAAS 2013/2014 data¹

I. Governance

Two ministries and institutions share the lead for drinking-water services. The Ministry of Health leads hygiene promotion initiatives and has a number of responsibilities in sanitation and water.

LEAD INSTITUTIONS	SANITATION	DRINKING-WATER	HYGIENE PROMOTION
Ministry of Health	✓		✓
Department of Water Resources		✓	
Public Work Department (in provincial headquarters in urban and peri-urban areas)		✓	

Number of ministries and national institutions with responsibilities in WASH: **4**

Coordination between WASH actors includes: ✓ All ministries and government agencies
 ✓ Nongovernmental agencies
 ✓ Evidence supported decisions based on national plan and documentation of process

PLAN AND TARGETS FOR IMPROVED SERVICES	INCLUDED IN PLAN	COVERAGE TARGET (%)	YEAR
Urban sanitation	✓	80	2016
Rural sanitation	✓	80	2016
Sanitation in schools	✓	80	2016
Sanitation in health facilities	✓	80	2016
Urban drinking-water supply	✓	90	2016
Rural drinking-water supply	✓	85	2014
Drinking-water in schools	✓	100	
Drinking-water in health facilities	✓	80	2016
Hygiene promotion	✓	100	
Hygiene promotion in schools	✓	100	
Hygiene promotion in health facilities	✓	100	

There are specific plans implemented to improve and sustain services. Four urban water safety plans have been developed and seven rural plans are currently in development. There is also plumber training and management training (for water committees) to increase capacity and improve services to maintain the system.

SPECIFIC PLANS FOR IMPROVING AND SUSTAINING SERVICES^a

	EXISTENCE AND LEVEL OF IMPLEMENTATION OF MEASURES
Keep rural water supply functioning over long-term	Low → High
Improve reliability/continuity of urban water supply	Low → High
To rehabilitate broken public latrines	Low → High
Safely empty or replace latrines when full	Low → High
Reuse of wastewater or septage	Low → High
Ensure DWQ meets national standards	Low → High
Address resilience to climate change	Low → High

^a Including implementation.

¹ All data represented in this country highlight document is based on country responses to GLAAS 2013/2014 questionnaire unless otherwise stated.

II. Monitoring

There is a high level of data availability reported for policy-making and response to WASH related disease outbreak. There is little data on sanitation since the service provision at present is entirely down to self-supply by households.

MONITORING	SANITATION		DRINKING-WATER		HYGIENE
Latest national assessment	2013		2013		Survey 2012
Use of performance indicators^a	✗		●		✗
Data availability for decision-making^a					Health sector
Policy and strategy making	●		✓		✓
Resource allocation	●		✓		NA
National standards	NA		✓		NA
Response to WASH related disease outbreak	NA		NA		●
Surveillance^b	Urban	Rural	Urban	Rural	
Independent testing WQ against national standards	NA	NA	✗	✓	
Independent auditing management procedures with verification	NA	NA	✗	✗	
Internal monitoring of formal service providers			✗		
Communication^a					
Performance reviews made public			✗	✗	
Customer satisfaction reviews made public			✗	✗	

^a ✗ Few. ● Some. ✓ Most.

^b ✗ Not reported. ● Not used. ✓ Used and informs corrective action.

NA: Not applicable.

III. Human resources

There is no reported human resource strategies for sanitation and drinking-water. The most important constraints identified are the lack of financial resources and skilled graduates as well as encouraging skilled workers to live and work in rural areas.

HUMAN RESOURCES	SANITATION		DRINKING-WATER		HYGIENE
Human resource strategy developed^a					
Strategy defines gaps and actions needed to improve^a					
Human resource constraints for WASH^b					
Availability of financial resources for staff costs	✗		✗		✗
Availability of education/training organisations	●		●		●
Skilled graduates	✗		✗		●
Preference by skilled graduates to work in other sectors	●		●		●
Emigration of skilled workers abroad	✓		✓		✓
Skilled workers do not want to live and work in rural areas	✗		✗		✗
Recruitment practices	●		✓		●
Other					

^a ✗ No. ● In development. ✓ Yes.

^b ✗ Severe constraint. ● Moderate constraint. ✓ Low or no constraint.

IV. Financing

There is no financing plan in place for WASH. There is also an insufficiency of funds to meet MDG targets for most WASH areas.

FINANCING

Financing plan for WASH
Assessment of financing sources and strategies ^a
Use of available funding (absorption)
Estimated % of domestic commitments used ^b
Estimated % of donor commitments used ^b
Sufficiency of finance
WASH finance sufficient to meet MDG targets ^b

SANITATION		DRINKING-WATER	
Urban	Rural	Urban	Rural
✗	✗		✗
✓	✓	✓	✓
✓	✓	✓	✓
✗	✗		✗

WASH VS. OTHER EXPENDITURE DATA	
Total WASH expenditure ¹	
NA	
Expenditure as a % GDP	
Education ²	NA
Health ²	4.0
WASH ³	NA

^a ✗ No agreed financing plan. ● Plan in development or only used for some decisions. ✓ Plan/budget is agreed and consistently followed.

^b ✗ Less than 50%. ● 50–75%. ✓ Over 75%.

¹ Reported WASH expenditure in GLAAS 2013/2014 converted using UN exchange rate 31/12/12.

² Expenditure as a % GDP – Average 2010–2012, sources UNESCO 2014, WHO 2014.

³ WASH expenditure from country GLAAS 2013 response, GDP Average 2010–2012, World Development Indicators, World Bank 2013. NA: Not available.

V. Equity

Though the constitution of the Republic of Vanuatu does not specifically mention water & sanitation, the Water Supply Act has recently been reviewed (2014) and states water should be provided to all residents of Vanuatu (urban & rural). In addition, utilities are mandated to ensure water and power prices are affordable for customers.

EQUITY IN GOVERNANCE

Laws
Recognize human right in legislation
Participation and reporting ^a
Clearly defined procedures for participation
Extent to which users participate in planning
Effective complaint mechanisms

SANITATION		DRINKING-WATER	
	✗		✗
Urban	Rural	Urban	Rural
✗	✗	✗	✗
✓	✓	✓	✓
✓	✓	✓	✓

DISADVANTAGED GROUPS IN WASH PLAN
Not available

^a ✗ Low/few. ● Moderate/some. ✓ High/most.

EQUITY IN FINANCE

Figure 1. Urban vs. rural WASH funding

[No data available.]

Figure 2. Disaggregated WASH expenditure

[No data available.]

EQUITY IN ACCESS¹

Figure 3. Population with access to improved sanitation facilities

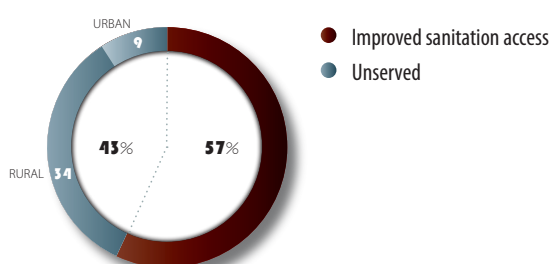
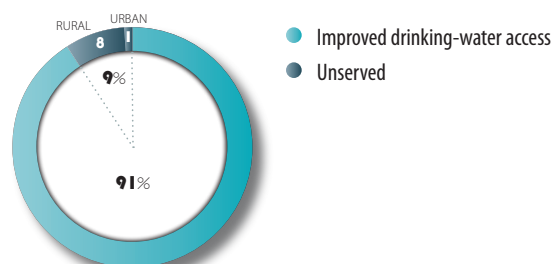


Figure 4. Population with access to improved drinking-water sources



¹ Progress on Drinking-Water and Sanitation – 2014 Update, WHO/UNICEF 2014.