

Absence of faecal sludge management shatters the gains of improved sanitation coverage in Bangladesh

The paper presents an analysis of systematic data collected from three cities in Bangladesh on current management practices and highlights the importance of improved sludge management.

Author: Aftab Opel

Abstract

In recent years, Bangladesh has managed to achieve a significant reduction of open defecation although still about half the population in the country do not have access to improved sanitation. In absence of any sewerage system, the predominant onsite technologies has created a new challenge of faecal sludge management that is still a 'never thought of' agenda at the policy level. This study in three cities of Bangladesh is part of a multi country study in Asia and Africa which shows that in absence of any safe emptying, transportation, dumping and treatment mechanism most of the sludge generated are going again to the surface water that ultimately shatter the gains achieved through increase sanitation coverage. Most septic tanks or pits in the cities require emptying which is mostly done by the manual sweepers. On the other hand, except Dhaka, no cities have any designated dumping site or treatment plant for faecal sludge. Consequently, manual sweepers dump the sludge in nearby open drain or water-body. In Dhaka too, most safety tanks and pits are connected directly with the drainage system linked to open water body within the city or outside. This practice ultimately regenerates the risks of faecal matter re-enter into the domestic environment. Poorer groups who mostly dwell in unsafe environment are most sufferer of this; however, the risk remains also high for those who practice safe sanitation.

Introduction

Access to safe sanitation is increasing globally. However, achieving access is not just the end of the problem itself; it is the beginning of new set of challenges which demand systematic and much higher level of interventions. Pits get full quite soon and they need to be emptied to keep the toilets usable. Emptied sludge needs to be transported to safer places and treated properly so that they do not contaminate environment. If these three aspects are not dealt properly, it is not possible to get the full benefits of achieving increased access to safe sanitation. There has been some development in the treatment and management of waste water but unfortunately, emptying, transportation and treatment of faecal sludge (FS) have not yet received adequate attention.

Cities in developing countries are the worst sufferer of this service gap since most cities in the developing countries have high population density, rapid and unplanned growth, inadequate and often inaccessible service provisions. In cities where most households practice on-site sanitation, the emptying septic of tanks or pits, and transport of sludge to a safe dumping site for treatment becomes an emerging need. There is no doubt that if safe disposal of sludge is not ensured, gains achieved by increased sanitation coverage cannot be realized.

The importance of improved faecal sludge management (FSM) in reducing public health and environmental impacts is widely acknowledged. Research suggests that improved excreta management could reduce the

Key facts:

- The situation of faecal sludge management in 3 cities in Bangladesh (Dhaka, Khulna and Faridpur) has been analysed
- Most households rely on simple pits, VIPs and septic tanks.
- Manual emptying is predominant in all 3 cities.
- Only Dhaka has a designated area for disposal of faecal sludge, however, treatment for faecal sludge is provided in none of the cities
- In general there is a big lack of faecal sludge management in Bangladesh

diarrhoeal morbidity by 36 per cent (Carr 2001). A meta-analysis of 25 studies which investigated the association between sewerage and diarrhoea or related outcomes, including presence of intestinal nematodes show that sewerage systems typically reduce diarrhoea incidence by about 30 per cent or perhaps as much as 60 per cent when starting sanitation conditions are very poor (Norman, Pedley and Takkouche 2010). However, as most of the developing countries are still struggling to gain universal sanitation coverage; they are yet to put adequate emphasis on this important environmental need. This paper provides evidence from three cities of Bangladesh where in an absence of safe emptying, transportation and treatment facilities, most faecal sludge re-enters the environment with full potential for harming public health.

Sanitation context in Bangladesh

Sanitation is still one of the biggest challenges for Bangladesh although it has made some good progress in increasing sanitation coverage over the past years. A well-coordinated effort by the government, non-government development agencies and other development partners as well as the introduction of the innovative Community-led Total Sanitation approaches have made it possible to bring down the proportion of open defecation from 43 % in 2003 (SACOSAN 2008) to 4.4 % of the population in 2011 (BBS, 2011). Despite this significant gain, the challenge still remains high as about half of the population do not have access to safe sanitation (BBS and Unicef, 2010). This report suggests that only about 54 % of the population has access to improved sanitation facilities which eliminate the potential for contact with human faecal matter, largely through water seals in toilets. Besides, 25 % and over 15 % of the population has access to shared latrines and unimproved sanitation facilities (largely open pit latrines) respectively.

Faecal sludge management scenario in Bangladesh

No formal FS management system exists in Bangladesh. The only treatment plant exists in Dhaka was constructed in 1980 by DWASA (Dhaka Water Supply and Sewerage Authority) and was upgraded in 1992 has a treating capacity up to 1.25 million m³ of sewage and has 4 sludge lagoons for the treatment of sludge produced by the plant. The sewerage network in the city serves the need of around 20 % of sewage generated in the city (Rahman 2009) and only 1 % of the sludge generated in the country. This means that 99 % of the sludge generated throughout the country remains untreated, most of which goes directly to the surface water.

Emptying in urban and rural areas is overwhelmingly done by the manual sweepers. Two NGOs in Dhaka and three other Municipalities provide pit emptying service through vacu-tug machines. However, their service is constrained by a number of factors. The manual emptying is most hazardous as the sweepers usually do not use anything other than some buckets and a plastic drum for

transport. These manual sweepers do not even use hand gloves to avoid contact with sludge. In few instances, they use pump machines to pump out liquids from the septic tank or pit and then manually empty the remaining solid manually. This saves time but the liquid is usually pumped out to nearby drains, canals or water-bodies. Thus, the method is extremely harmful for both the emptier and the environment.

The limited mechanical emptying systems available in few cities, other than Dhaka, are not efficient enough and not a popular option although considering the market size (described in a later section), they have huge potential. In an absence of a proper dumping site for faecal sludge and treatment facilities, emptying and transportation through this system have only limited benefits. In the end, collected sludge through this system is dumped into open drains, canal and water-bodies. On the other hand, the NGO-run emptying service in Dhaka is environmentally sound since the collected sludge is put into the sewer lines which then end up in the treatment plant. However, since a high number of septic tanks in Dhaka are connected illegally with the storm sewerage or other drainage systems, there is not much demand for the service provided by the NGOs.

The study and the methodology

This study was conducted in three cities in Bangladesh: Dhaka, Khulna and Faridpur, provides analysis of household level practices, preferences and aspirations of sludge management. Dhaka accommodates more than one-third of the total urban population and about 9 % of the total population of the country. Although, the average income is high in Dhaka, in absolute terms, a large number of people remain poor. Slums house nearly one-third of all residents of Dhaka and they continue to absorb most of the new migrants (Islam 2005). Khulna is the third largest city in Bangladesh. The population of the city was estimated to be around 1.2 million in 2009 and population density was 21000 per km². In Faridpur a total of 135,837 people live in an area of 22.39 km². The city is considered to be a high density city with an estimated growth rate of over 3.91 per cent annually. About 10 % of the city dwellers live in slums and squatter settlements in the city.

Data was collected during June to September 2011. Statistically representative samples were drawn randomly in Khulna and Faridpur cities. In Dhaka, septic tanks and pits in the whole city do not require emptying as they are either covered by the sewerage networks or connected to the storm drainage or other drainage systems. Therefore, sample households were drawn from several pockets areas mainly in the fringe of the city which require emptying. A total sample of 467 household for Dhaka, 395 households for Faridpur and 358 households for Khulna were selected and interviewed using a semi-structured questionnaire. In addition, relevant stakeholders were

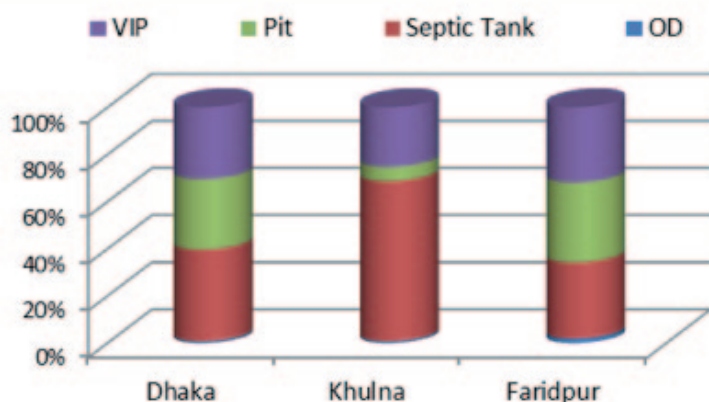


Figure 1: Latrine technologies

consulted, secondary data were reviewed, pits and septic tanks emptying work were shadowed to generate accurate information.

Results and analysis

Latrine technology and usage practices

In Khulna, most household latrines have septic tanks and the number of pits is much less compared to the other two cities. In Faridpur and Dhaka cities, the distribution of septic tanks, pits and VIPs is almost equal (Figure 1).

Probably because of less land availability, the size of septic tanks and pits is smallest in Dhaka compared to the other two cities. Average size of septic tank is biggest (19.8 m³) in Faridpur. The size of the pits is also biggest in Faridpur compared to the other two cities (Table 1).

Table 1: Average size of septic tanks and pits (in m³)

Tank type	Dhaka	Khulna	Faridpur
Septic tank	13.7	14.4	19.8
Pit	2.5	3.1	3.3

Access type of toilet

Households predominantly use personal toilets (Table 2). In Khulna, the higher percentage of households use shared latrines. In some low income housing complexes, multiple families share a latrine. On the other hand, community latrines are mainly constructed by the NGOs in low income settlements which are usually used by an average of 20 families.

Table 2: Access types of toilets (in %)

Access type	City		
	Dhaka	Faridpur	Khulna
Personal	22.9	84.1	62.0
Joint	73.4	15.7	36.9
Community	3.7	0.2	1.1

The average number of households sharing a latrine is much higher in Dhaka compared to the other two cities. Average 7.6 households share a latrine in Dhaka while 3.4 households share a toilet in Faridpur and 5.7 households per toilet in Khulna. However, the average user per septic tank/pit is much higher in all the cities; 31.5, 14.8 and 7.2 respectively in Dhaka, Khulna and Faridpur cities. The difference between the user

numbers in latrines and septic tank/pit is mainly because in slum settlements several toilets share a common septic tank/pit.

Emptying methods

In all three cities, manual emptying is the predominant practice (Table 3). Compared to the other two cities, a higher percentage of households use mechanical emptying in Dhaka particularly because collected sludge cannot be dumped randomly in the slum settlements in Dhaka due to community pressure. That's why people prefer mechanical emptying so that sludge can be transported outside the neighbourhood. Mechanical emptying service is comparatively easily available in Dhaka being provided by two NGOs that also have other WaSH programmes in many of the studied slums. In the other two cities, this frequency is much less. Particularly in Khulna, only 2 % of the households empty their pits or septic tanks mechanically. There is another option whereby emptiers use pump machines to drain out the liquid part from the tank first and then empty the solid part manually but this is seldom practiced.

Table 3: Methods of emptying (in %)

Method of emptying	Dhaka	Khulna	Faridpur
Manual	69.4	96.3	86
Mechanical	30.1	2.0	13
Semi-mechanical	0.5	1.7	1

Emptying frequency

In Dhaka, most households emptied their tanks or pits at least once while this is much lower in Faridpur. This is probably correlated to the size of tanks/pits and number of users per toilet. Tank and pit sizes were higher in Faridpur and lower in Dhaka. Again, frequency of emptying is also higher in Dhaka probably for the same reason. More than a quarter of the tanks/pits have to be emptied more than once a year in Dhaka (Table 4).

Table 4: Frequency of emptying (in %)

Emptying	Dhaka	Khulna	Faridpur
Emptied at least once	92.5	83.0	77.0
Never emptied	7.5	17.0	23.0
Emptying frequency			
2-3 times / year	26.3	6.8	13.2
Once per year	4.9	0.0	2.6
Once every 2 years	29.3	16.7	23.8
Once every 3 years	15.5	11.9	10.3
Once every 4 years	6.8	11.6	13.2
Between 5 - 10 years	13.6	35.0	26.2
Over 10 years	3.5	18.0	10.6

In choosing a particular emptying process, most people consider the ease of availing of the service. For other people, the choice depends on a combination of factors, such as cost, flexibility of timing and ease of availing of the service. All these factors favour manual emptying. Therefore it is likely that most people use a manual emptying service (Table 5).

Table 5: Reasons of choosing a particular type of emptying

Factors of choice	%
Cheap	23.8
Easy to avail	75.0
Flexible timing	10.0
Personally known	6.4

On the other hand, accessing mechanical emptying services from the municipality in the case of Khulna and Faridpur cities is quite a lengthy and bureaucratic process. If someone chooses to use the service of a municipality, he has to go to the municipality to collect a form, fill and submit it to the appropriate department. He will then be given a date of inspection by the Municipality. It usually takes 2/3 days to get this date. The purpose of this inspection is to assess the size of the tank and distance of disposal site to fix the rate. Once the rate is fixed, he then has to deposit the money to get the date of the work. It usually takes about a week to complete this processing. Most people usually decide to empty their tank once it is overflowing. Therefore, they cannot wait for so long to use the service of the municipality. As a result, even though some people know about the availability of this service they avoid it. On the other hand, in Dhaka city, most interviewed households who used manual emptying do not know about the availability of mechanical emptying services provided by the NGOs. None the NGOs providing this service do any marketing about it.

Emptying fees

Quite naturally, the cost of manual emptying is comparatively low. As presented in Table 6, mean cost of manual emptying was US\$ 17.1, US\$ 14.3 and US\$ 12.6 in Dhaka, Khulna and Faridpur respectively. Cost of mechanical and manual emptying is almost same in Dhaka. This is due to the fact that in Dhaka the mechanical service is provided by the non-profit organisations at a subsidised rate. The cost of manual emptying is comparatively high in Dhaka because of higher transportation cost. In Khulna and Faridpur cities, the cost of mechanical emptying is about three times higher than the cost of manual emptying. In these two cities, although the services are provided by the Municipalities on no-profit basis, the cost for the households is higher due to corruption by the emptying staff.

Table 6: Expense of emptying and transportation (in US\$)

Methods	Dhaka	Khulna	Faridpur
Manual	17.08	14.33	12.60
Mechanical	17.26	39.52	37.52
Semi-mechanical	5.71	17.14	10.71

Willingness to pay for improved service

It is not very surprising that most people in all three cities are willing to pay to improve the prevailing situation of faecal sludge emptying and disposal services (Table 7). In terms of money, the amount they could afford to pay is not very high – the average monthly amount a household could afford to pay is about US\$ 1.

Table 7: Willingness to pay for improved service (in %)

Willingness to pay	Dhaka	Khulna	Faridpur
Yes	71.3	80.3	71.8
No	28.7	19.7	28.2

Destination of sludge

It is a great environmental concern that in most cases, collected sludge is not managed in an environmentally safe way. Sludge is released randomly ('here and there') or dumped into open drains or water-bodies which contaminate surface water. In 18.2 % of the cases in Faridpur, 30.6 % of the cases in Dhaka and 24.5 % in Khulna, collected sludge is dumped in a particular place which is a designated site to dump solid waste. But in no cases does this prevent sludge from contaminating surface water (Figure 2).

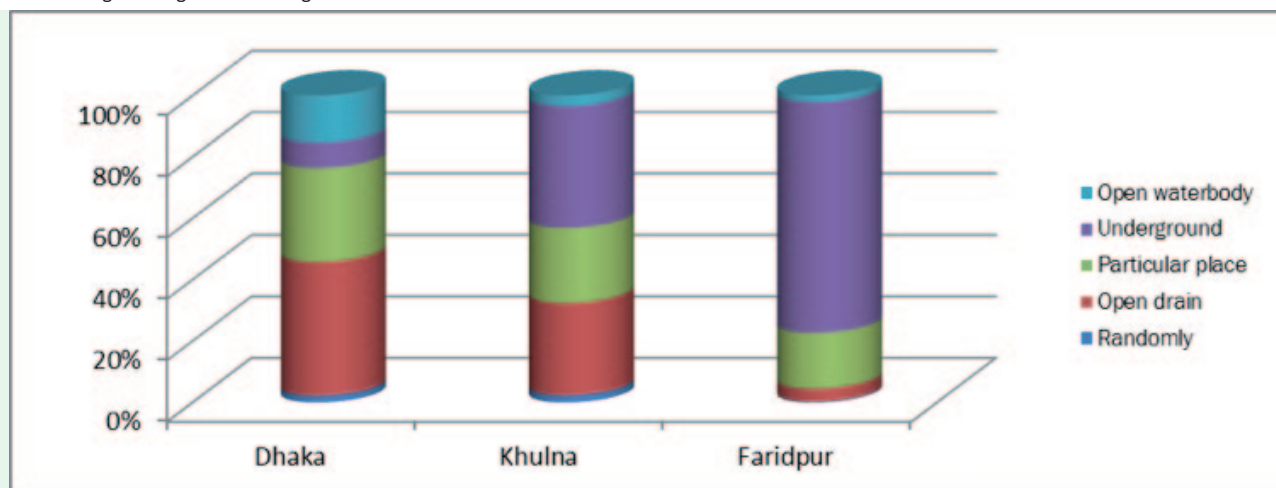


Figure 2: Destination of sludge

Public awareness

Although collected sludge often goes into open, most people stated that they are aware of its negative consequences. In Dhaka, more than 60 % of the respondents expressed their concern that putting sludge here and there contaminates water, affects human health and has negative consequences on environment in general. In the other two cities, although this percentage is lower compared to Dhaka, there is certain level of awareness among people about negative consequences of this act (Table 8).

Table 8: Views about the consequences of sludge disposal (in %)

Parameters	Dhaka	Khulna	Faridpur
Contaminate water	60.2	43.5	27.1
Human health	61.0	42.5	29.6
Environment	63.6	47.6	39.1

Demand vs. Supply of service provision

In the absence of any sewerage network or drainage system, Khulna and Faridpur have relatively larger markets for emptying and treatment service provision compared to Dhaka. Dhaka has a sewerage network and a treatment plant which covers approximately 20 % of the total sludge generated in the city. Although there is no study available; however, it is estimated that nearly 70 % pits/septic tanks in the areas that are not under sewerage coverage in Dhaka are connected to storm drainage system or other type of drains. These tanks and pits do not require any emptying service. As such, effective demand for on-site sanitation is quite low (only about 10 %, as shown in the table below) compared to the sludge generation in Dhaka. On the other hand, as shown in Table 9, coverage under OSS in Khulna and Faridpur is 98.2 % and 98.5 % respectively which demand emptying, safe transpiration and treatment. Therefore, it is assumed that both the cities have high demand of improved and affordable service. This demand is growing rapidly with the growth of population.

Table 9: Demand estimation for on-site sanitation in 3 cities

Description	Unit	Dhaka	Khulna	Faridpur
Market size:				
Total population (in 2011)	Number	15,018,594	1,728,760	146,667
Total Household (in 2011)	Number	3,337,470	384,169	24,840
Production of Faecal Sludge				
Total production of FS*	m ³	2,740,893	315,499	26,767
Coverage under sewerage system	%	20.0	0.0	0.0
Coverage under drainage	%	69.2	0.0	0.0
Open defecation, hanging, etc.	%	0.8	0.8	1.5
Coverage under OSS	%	10.0	98.2	98.5
Coverage under OSS	m ³	541,585	815,276	25,434
Treatment plant coverage				
Number of treatment plant	Number	1	0	0
Coverage by treatment plant	m ³	548,179	0	0
Coverage of treatment plant	%	20	0	0

* 0.5 ltr per person per day including grey water

Table 10: Present coverage by different categories of service providers

Description	Dhaka		Khulna		Faridpur	
	m ³	%	m ³	%	m ³	%
Coverage by informal providers (manual)	562,829	99.7	883,384	99.0	90,005	99.8
Coverage by formal providers (mechanized by NGOs)	1,860	0.3	0	0.0	0	0.0
Coverage by utility department (mechanized)	0	0.0	8,667	1.0	144	0.2
Total	564,689	100.0	892,051	100.0	90,149	100.0

The market share of each category of service providers was assessed for 3 cities, as shown in the table below. The supply-demand gap analysis clearly suggests that the manual emptiers fully control the markets of on-site sanitation in all 3 cities. The mechanized emptying business therefore has huge potential to penetrate the markets which could effectively contribute to the reduction of environmental pollution caused by current improper management of faecal sludge.

Discussion and ways forward

Untreated sludge disposing into open environment is almost equally risky as open defecation. This therefore shatters the gains achieved through increased sanitation coverage. This research shows that in absence of any treatment facility, most sludge is disposed into the open with full potential to re-enter into the domestic environment. A large volume which is buried also risks the shallow aquifer. Manual sweepers dominate the market and manage pit emptying and sludge disposal without any safeguard, who risks their own health as well as public health.

On the other hand, dependence on surface water is increasing in Bangladesh due to factors like arsenic contamination in ground water (about 15 % of the ground water sources in Bangladesh is contaminated by arsenic and it is spreading quite rapidly). It is therefore extremely important that the issue of improved sludge management is taken with high importance.

Considerable awareness about the environmental risks of this practice seems to be present among the people who are also willing to pay for better services. However, in absence of any improved services, the traditional method of sludge management continues to run for ages without any sign of improvement.

Despite the fact that there is huge business potential, the mere absence of proper FS management service in Bangladesh by the public and private sectors strongly indicates that there is a widespread lack of understanding and awareness about its health and environmental

impacts as well as its economic value. This study also suggests that the regulatory mechanism is unclear, enforcement is seriously weak and government service agencies lack capacity, motivation and resources to handle this huge challenge. Despite good intentions, this state does not allow NGOs to play an effective role to improve the situation.

This study therefore highlights the importance of working at different levels and with different pilot approaches so that the successful working model can be scaled up. The country context as well as the regulatory framework demands that municipalities take responsibility for FS management. However, there is a serious lack of awareness; and huge resource and capacity gaps amongst the municipalities to manage FS. A potential way forward could be awareness raising as well as advocacy and lobbying at the national level based on a demonstrated business model of comprehensive FS management in municipalities by the NGOs in partnership with.

Government-NGO collaboration models could be limited to piloting service delivery models for emptying and transportation by the NGOs while Municipalities to allocate space for dumping and installation and running of treatment plants yielding bio-gas, compost, and so on. Different modalities should be experimented with different types of municipalities (large, medium and small) so that the successful demonstration of pilot schemes would be advocated for nationwide scaling up through public-private partnership.

Disclaimer:

This report is based on research funded by the Bill & Melinda Gates Foundation. The findings and conclusions contained within are those of the authors and do not necessarily reflect positions or policies of the Bill & Melinda Gates Foundation.

References

- BBS (2011): Household Income and Expenditure Survey 2010. Preliminary report, Statistical Division, Ministry of Planning, Government of Bangladesh, Dhaka, Bangladesh.
- BBS and Unicef (2010): Progotir Pathay: Multiple Indicator Cluster Survey (MICS), 2009. Statistical Division, Ministry of Planning, Government of Bangladesh and Unicef, Dhaka, Bangladesh.
- Carr, R. (2001): Excreta-related infections and the role of sanitation in the control of transmission, Water Quality: Guidelines, Standards and Health. World Health Organization (WHO). http://www.who.int/water_sanitation_health/dwq/iwachap5.pdf
- Islam, N. (2005): Dhaka now: Contemporary Urban Development, Bangladesh Geographical Society, Department of Geography and Environment, University of Dhaka, Bangladesh.
- Norman, G., Pedley, S., Takkouche, T. (2010): Effects of sewerage on diarrhoea and enteric infections: a systematic review and meta-analysis. *Lancet Infect Dis* 10, 536-544. www.thelancet.com/infection
- Rahman, M. M. (2009): Sanitation Sector Status and Gap Analysis: Bangladesh. Global Sanitation Fund, WSSCC, Switzerland.
- SACOSAN (2008): Sanitation in Bangladesh. Country Paper, Third South Asian Conference on Sanitation (SACOSAN), Ministry of Local Government, Rural Development and Cooperatives, Government of Bangladesh, Dhaka, Bangladesh.

Names: Aftab Opel
Organisation: WaterAid
Country: Bangladesh
eMail: aftab.opel@wateraidbd.com