

This document forms part of the 4th edition of the UNHCR Emergency Handbook and was generated from the digital Emergency Handbook system.

Emergency sanitation standard

Key points

- Interpret indicators with care when population size fluctuates significantly.
- When calculating sanitation-related indicators, clarify whether population figures include or exclude the host community.
- Information on reported defecation in toilets or open defecation observations can be compared with this indicator. If the number of people per toilet is high, this may indicate that the problem may lie in insufficient toilets. If there are sufficient toilets, it can indicate that people are not using them.
- If people have access to both communal and family latrines, the number of people with access to latrines may appear to exceed the total population. Both figures (household use and communal use) should be reported.

1. Overview

Safe excreta disposal is an essential element of any WASH programme, because it helps to reduce direct and indirect disease transmission. To improve safe access to sanitation it is necessary to meet standards of privacy and safety using sanitation structures that are locally or culturally acceptable. Providing equal access to sanitation can be achieved through the distribution of sanitation infrastructure and proper monitoring.

Programme monitoring should use the UNHCR TWINE basic indicator matrix for emergencies, and UNHCR's WASH Monitoring System (WMS).

The main excreta disposal standards, defined by Sphere, have been endorsed by UNHCR.

- The environment should be free of human faeces. 'The living environment in general and specifically the habitat, food production areas, public centres and surroundings of drinking water sources are free from human faecal contamination.'
- People have access to adequate, appropriate and acceptable toilet facilities, which are sufficiently close to their dwellings to allow rapid, safe and secure access at all times, day and night.

UNHCR sanitation-related indicators in emergencies and post-emergency situations:

Objective	Output Objective	Indicator	Unit	Standard		Camp	Of of C:
				Emergency	Post Emergency		
Population lives in satisfactory conditions of sanitation and hygiene.	Refugees have safe access to quality sanitation.	Persons per communal toilet/latrines	# of Persons	=<50	=<20(aiming for 1 latrine /household)	yes	nc
		Households reporting defecating in a toilet.	%	>=60	>=85	yes	nc
		Households with access to latrines.	%	>=60	>=85	yes	nc
		Communal latrines compliant with UNHCR standards (cleanable slabs, privacy & structural safety).	%	>=60	>=85	yes	nc
		Schools and health centres have WASH structures that are compliant with acceptable standards.	%	>=65	>=90	yes	nc

2. Emergency standard

The following UNHCR minimum standards or indicators should be reported or collected during the first phase of an emergency operation:

Every week

- Persons per communal toilet or latrine. No latrine should be used by more than 50 persons during the first phase of an emergency.

Every two weeks

- Communal latrines compliant with UNHCR standards. At least 60% of communal latrines and toilets must comply with UNHCR standards, which require latrines to have cleanable slabs &

superstructures, provide privacy, and allow use at any time by all users. Latrines and toilets that do not comply with UNHCR Standards should not be counted.

- Households who defecate in a toilet. At least 60% of households should report that they defecate in a toilet.
- Households with access to latrines. At least 60% of households should have access to latrines.
- Schools and health facilities with compliant WASH structures. This indicator shows the proportion of schools and health facilities with WASH structures that comply with acceptable standards. At least 65% of schools should provide 1 toilet for every 30 girls and 1 toilet for every 60 boys. At least 65% of health centres should provide 1 toilet for every 20 users in in-patient departments (IPDs) and 1 latrine each for staff, females, males, and children in out-patient departments (OPDs).

In out of camp situations (settlements and dispersed or scattered rural and urban locations) apply national standards with regard to distance to sanitation.

3. Links

WHO, Drinking Water Guidelines, 2011

Need help?

CONTACT UNHCR DPSPM / PH Section. At: HQWASH@unhcr.org.

Annexes

- Global Public Health Strategy 2014-2018
- UNHCR, Water Manual for Refugee Situations, 1992
- The Sphere Handbook

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