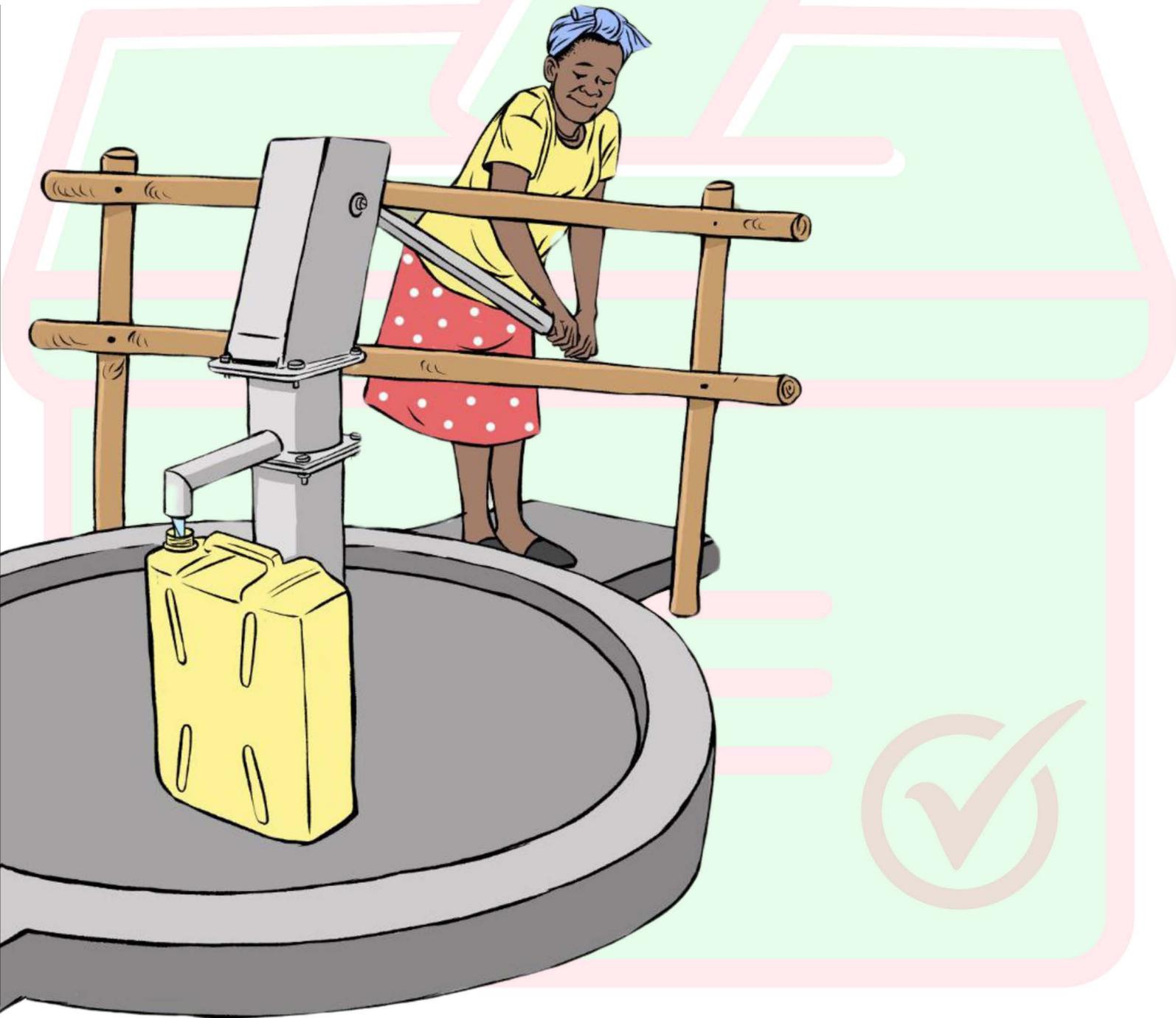




CITIZENS' MANIFESTO FOR WATER, SANITATION AND HYGIENE (WASH) 2025



COMPILED BY UGANDA WATER AND SANITATION NETWORK

INSTRUCTION

This Water, Sanitation and Hygiene (WASH) Manifesto is a compilation of Citizens' voices from across the country. It is a concerted appeal by Ugandans to the aspiring leaders to strive to improve the health of the Citizens through universal access to safe water, sanitation and hygiene.

The Manifesto has been developed by the combined efforts of Uganda Water and Sanitation Network (UWASNET) members. These organizations conducted extensive consultation in country and documented the pertinent issues that the Citizen would like the next government to address. The list of CSOs that contributed to this Manifesto is shown in Annex 1.

The Manifesto targets political parties and independent candidates who are vying for the Presidency, Members of Parliament and District Chairpersons. These leaders are in the best position to consider and implement the recommended commitments that are contained in this Manifesto.

The Manifesto describes the Citizens' perspective of the WASH situation in Uganda, outlines their key issues and recommended commitments for the next government.

2. THE WASH SITUATION IN UGANDA

2.1 Clean and Safe Water Supply

2.1.1 Constitutional Commands

The Citizens of Uganda reminds aspiring leaders of the constitutional commands regarding the right to clean and safe water. The 1995 Constitution of Uganda, objective XIV: General social and economic objective states that "the state shall endeavour to fulfil the fundamental rights of all Uganda to social justice and economic development, and shall, in particular ensure ... (b) all Ugandans enjoy the rights and opportunities and access to education, health services, clean and safe water ...). Objective XX1: clean and safe water states that "the state shall take all practical measures to promote a good water management system at all levels".

2.1.2 Citizens' Perspective of clean and safe water services in Uganda

Access to safe drinking water is a major issue for the majority of the citizens of Uganda. One in three persons (33%) or more than 10 million people living in rural areas do not have access to an improved water source within a distance of 1km. In urban areas, one in 4 persons (25%) or more than 3 million people do not have access to improved water source within 250 metres. Altogether, more than 14 million people do not have access to clean and safe water within acceptable distance.

There are over 10,000 villages in Uganda without an improved water source (protected spring, borehole or tap). In such villages, people share drinking water sources (unprotected wells, ponds, swamps, streams, rivers and lakes) with animals.

There is inequality and inequity in clean and safe water supply. Some districts and urban centres are over served with safe water coverage of over 80% while other are under served with less than 50% safe water coverage. There are 18 districts in the country with safe water coverage of 50% and below. In Kyegegwa, Buvuma, Kakumiro, Rakai and Kazo districts, one in three persons has access to safe drinking water as illustrated in the table below.

Kyegegwa	28%
Buvuma	28%
Kakumiro	31%
Rakai	34%
Kazo	34%
Buyende	36%
Wakiso	37%
Sembabule	37%
Mubende	37%

The Citizens noted declining safe water coverage in the country. In 2018 government reported rural safe water coverage of 70% which has since reduced to 67% in 2024. In 2018, government reported urban safe water coverage of 79% which has since declined to 74.5% in 2024.

This trend in safe water coverage is worrisome to the Citizens who attribute it to inadequate investment and aging safe water supply infrastructure. The rate of investment in safe water supply does not match the rate of population growth. According to the recent population census (2024), every year, the population of Uganda grows by 1.1 million people compared to less than 800,000 new people served with safe water supply.

Citizens also attributed the falling safe water coverage to the aging safe water supply infrastructure in most part of the country. Majority of the infrastructure has outlived its design life and operating at suboptimal level with high maintenance cost. There are over 20,228 non-functional safe water facilities comprising: protected springs (4,294), shallow wells (5,950), deep boreholes (6,894) and public stand pipes (3,090). This has deprived over 6 million people from accessing safe water and have gone back to drink unsafe water from ponds, swamps, streams, rivers and lakes.

Citizens reported the increased adverse impacts of climate change and human activities on safe water supply and warned of looming drinking water crisis in many parts of the country. Frequent droughts coupled with reclamation of wetlands have led to drying up of many springs, shallow wells and rivers which were sources of drinking water. During dry seasons people in rural areas travel long distances and spend a lot of time fetching water. Women and girls wake up as early as 4 am to go and fetch water and others return late in the night due to overcrowding at the water sources. This increases gender based violence against women and girls including rape and assault.

The frequent floods coupled with unsafe waste disposal and farming practices have increased the pollution of the water resources rendering some of it unfit for human consumption without treatment. Floods and landslides have also damaged the safe water infrastructure.

The Citizens complained about the high cost of safe water due to unfair tariff system and taxes. The Citizen question why they pay taxes for water which is a fundamental human right enshrined in the constitution and yet other similar rights like education and health services are provided free of charge. Citizens are calling for equal treatment of all fundamental human rights.

The Citizens are concerned about unfair water tariff system where the rich pay less and the poor more. The people of Kayunga town where incomes are relatively high pay UGX 3528 per cubic meter, and those of oil rich Albertine region (mid-west) like Butiaba town pay UGX 2,419 (VAT inclusive) compare with the poor people living Kaabong town who pay UGX 5082 (VAT inclusive).

The Citizens are concerned that the sixth sustainable development goal (SDG6): universal access to safe water by 2030 is unlikely to be achieved if the incoming government does not commit to it. With the safe water coverage declining instead of increasing, the incoming government must commit to double the investment in safe water services.

The Citizens are concerned about lack of clean and safe water supply in schools. The safe water coverage in government primary schools is 58%. 5224 primary schools with over 3.3 million learners do not have access to safe drinking water at school.

This forces many learners to travel long distances and spend a lot of learning time fetching water for use at school. Girls miss school during menstruation because of schools lacking water to enable them maintain good hygiene. Schools with safe water supply have high retention of girls. There is no government grant for construction of safe water infrastructure in institutions of learning.

Citizens are concerned about lack of clean and safe water in health care facilities (HCFs). Yet water plays a critical role in prevention of infections and maintenance of good hygiene in health care facilities. 60.5% of the 4,272 HCFs have safe water service (basic). 1,687 HCFs do not have improved water sources. Some of these HCFs have maternity wards without water which exposes the mothers and new born children to the risk of infections. There is no government grant for construction of safe water infrastructure in HCFs.

2.2 Sanitation and Hygiene

2.2.1 Constitutional Command

The Citizens reminds aspiring leaders of the constitutional commands regarding the right to clean and health environment. The 1995 Constitution of Uganda, Chapter 4: Protection and promotion of fundamental and other human rights and freedoms – Article 39: Right to clean and health environment states that “every Ugandan has a right to clean and health environment”.

2.1.2 Citizens’ Perspective of safe sanitation and hygiene services

Access to safe sanitation is a concern for Citizens. One in three households (31%) in rural areas has access to improved latrine/toilet. This means that over 22 million Citizens living in rural areas do not have access to improved latrines/ toilets.

In urban areas, one in two households (48%) has access to improved sanitation facilities. This means that over 6.6 million people (out of the estimated 13.7 million people living in urban areas) do not have access to safe sanitation facilities. The sanitation situation in urban informal settlements/slums is a cause for concern among urban dwellers because it affects the environmental health.

The Citizens worry about open defecation and unsafe disposal of human waste as a threat to the right to clean and health environment. In rural areas less than 10% and in urban areas 40% of the human waste is safely managed. Majority of the towns in Uganda do not have faecal sludge emptying and treatment facilities. In informal settlements/slums faecal sludge from latrines and septic tanks is discharged directly into open drainage. Faecal sludge drained manually or using cesspool emptier trucks is disposed of in the nearby bushes, swamps or buried in shallow pits and washed away by rains.

The Citizens are concerned with the high cost of constructing improved latrines. The majority of the Citizens cannot afford the cost of an improved latrine. There is no support given to vulnerable people like the elderly, and persons with disabilities to construct latrines. The space for constructing latrines in urban areas is shrinking making it difficult to replace them.

The looming garbage hazard in towns and cities in Uganda is a cause for concern. All towns and cities do not have adequate garbage collection and disposal services. Majority of towns do not have garbage skips and trucks. Garbage collection companies do not have adequate capacity. The garbage is not sorted to facilitate recycling/reuse. People in informal settlements/slums dispose of garbage in drainage channels which cause flooding. The landfills are unsafe and a health hazard to the neighbouring communities.

The Citizens are concerned about inadequate sanitation and hygiene facilities in schools. In the majority of the schools, the pupil stance ratio is over 70 pupils to one stance compared to the national standard of 40:1. The schools have constructed VIP lined latrines as directed by MOES but do not have facilities for safe emptying and treatment of faecal sludge when the latrine fills up. They use manual emptying and disposal methods which are unsafe to the humans and the environment. Majority of the schools do not have sanitation facilities for PWDs.

Majority of the learners do not wash hands after latrine use because they lack functional hand washing facilities. Girls are dropping out of school because sanitation facilities are inadequate and do not provide the necessary privacy.

The Citizens are concerned about inadequate sanitation and hygiene facilities in health care facilities. Most of the HCFs (81.5%) have limited sanitation service, 9.7% have no service, 4.7% have basic and 4.1% have advanced services. Sanitation facilities in majority of the HCFs do not have gender disaggregated latrines, lack menstrual hygiene management facilities, health workers share latrines with patients and have not functional handwashing facilities. The majority of the latrines are unhygienic with high risk of infections. Majority of the HCFs do not have sanitation facilities for PWDs.

Citizens complain about lack of safe and inclusive sanitation and hygiene facilities in public places like markets, taxi and bus parks and along highways. Where public sanitation facilities are available, they are poorly managed or abandoned. Majority of the public sanitation facilities are not inclusive – do not have facilities for PWDs.

2.3 Consequences of inaction on Citizens' WASH Needs

Aspiring leaders should consider the Citizens' WASH requirements in the context of the health, economic and social consequences of inaction.

The health consequences of inaction on Citizens WASH requirements include increased disease burden arising from poor WASH practices contributes to diarrheal diseases, which are among the leading causes of death and illness, especially among children under five. In Uganda, diarrhoea kills 33 children every day and over 4,500 children under 5 are estimated to die each year from diarrheal diseases. 2.7% of the babies born, die within four weeks (28 days) due to infections related to poor hygiene that is associated to inadequate safe and clean water. Poor sanitation also contributes to the spread of other diseases such as schistosomiasis, malaria, and soil-transmitted helminth infections.

Access to WASH services in health care facilities is critical for birth practices including birth attendants' handwashing, cleaning birth surfaces, cleaning the maternal perineum, and cleaning the newborn cord, among others. Unhygienic practices due to inadequate WASH services expose new borns and their mothers to the risk of infections and in some instances death of both mother and baby. Neonatal sepsis, which often stems from unhygienic handling of newborns at birth, contributes to 31% of deaths under four weeks.

The economic consequences of inaction on Citizens' WASH requirements include high health care costs, lost work due to death and off duty as well as low productivity. The high incidence of WASH-related illnesses leads to increased healthcare expenditures for individuals and the government. It is estimated that annually, Uganda loses UGX 4 – 5.9 trillion or 2.9% of GDP due to lack of access to poor WASH.. Productivity losses due to missed workdays for individuals and reduced output from the sick workers. The time spent seeking healthcare or fetching water, especially by women and girls, reduces the engagement in income-generating activities or education.

The social consequences of inaction on the Citizens' WASH requirements include high absenteeism from school, especially among girls who may face challenges accessing safe and private sanitation facilities. Girls miss school for 3-5 days every month due to lack of menstrual hygiene facilities in the schools. Learners miss school for 5-7 days recovering from diarrhoea episodes. The water-related illnesses and lack of adequate sanitation facilities contributes to learners drop out of school with an estimated 10% of girls dropping out due to poor menstrual hygiene management. Illnesses related to poor WASH, like skin infections, negatively affect children's overall academic progress by impacting their ability to focus and learn effectively. Girls and women are disproportionately affected by inadequate sanitation facilities since they often bear more of the burden of collecting water, which also introduces aspects of safety risks as they travel long distances to collect water.

3.1 Water Supply

- Increasing number of Citizens unable to enjoy their constitutional right of access to clean and safe water currently numbering to over 14 million people and projected to increase to 19 million people by 2030 at the current rate of population growth and investment.
- Un equitable allocation of investment in clean and safe water supply facilities which does not prioritize unserved villages currently numbering to over 10,000.
- Growing number of non-functional safe water supply facilities now numbering to over 20,000 - depriving over 6 million Citizens from accessing clean and safe water.
- High cost of clean and safe water due to unfair and discriminatory water tariff and taxes.
- Increasing degradation/ pollution of the water resources due to the failure to implement the constitutional obligation of promoting a good water management system at all levels.
- Climate change which is causing drying up of water sources and damaging the safe water supply infrastructure.
- Increasing number of school learners without access to safe drinking water in over 5224 public primary schools with over 3.3 million learners.
- Lack of clean and safe water supply in a majority of public health care facilities – over 1,687 HCFs do not have improved water sources.

3.2 Sanitation and Hygiene

- Increasing number of Citizens without access to improved safe sanitation facilities and are unable to enjoy their constitutional right of access to clean and health environment currently numbering to over 28.6 million people and projected to increase to 34 million people by 2030 at the current rate of population growth and investment.
- Increasing unsafe disposal of human waste in the environment due to lack of emptying and treatment facilities for faecal sludge in most urban centres in Uganda.
- High cost of construction materials for improved sanitation facilities and lack of government support to vulnerable households (elderly and PWDs) to access safe sanitation.
- The looming garbage hazard/ crisis in all urban areas in Uganda.
- Inadequate sanitation and hygiene facilities in schools/ institutions of learning.
- Lack of basic sanitation and hygiene facilities in most health care facilities (81%).
- Lack of safe sanitation and hygiene facilities in public places like markets, parks and along highways.
- Majority of women and girls lack access/ cannot afford safe menstrual hygiene facilities and products.

4. CITIZENS' RECOMMENDED WASH COMMITMENTS

4.1 Water Supply

- Government commits to increase the number of Citizens with access to clean and safe water (with 1 km in rural and 250 m in urban areas) by 1.5 million people per year and 7.5 million in 5 years.
- Government commits to increase the number of villages with improved safe water sources by 1500 villages per year and 7500 villages in 5 years.
- Government commits to rehabilitate 20,000 safe water supply facilities.
- Government commits to reduce the cost of safe drinking water through revision of the tariff system and taxes.
- Government will promote good water management practices at all levels including prevention of pollution of the water resources.
- Government will implement climate change mitigation and adaptation measures as outlined in the Nationally Determined Contribution (NDC).
- Government commits to provide clean safe water supply to 5224 public schools in the country.
- Government commits to provide clean and safe water supply to 1,687 health care facilities in the country.

4.2 Sanitation and Hygiene

- Government commits to increase the number of Citizens with access to improved safe sanitation by 3 million people per year and 15 million in 5 years through reduction in cost of building improved sanitation facilities and support to the vulnerable households.
- Government commits to construct 50 regional faecal sludge treatment facilities and facilitate the private sector to extend emptying services to all town councils.
- Government commits to improve garbage collection and disposal in urban centres through public private partnerships, provision of trucks and recycling waste.
- Government commits to provide adequate sanitation and hygiene facilities to 5224 public primary schools and ensure that all schools have the standard pupil stance ratio (40:1).
- Government commits to provide basic sanitation and hygiene service in all public health facilities across the country.
- Government commits to provide safe sanitation and hygiene facilities in all public places (markets, parks and highways) through public private partnerships.
- Government commits to increase access to safe menstrual hygiene facilities and products through constructing facilities in schools, HCFs and public places and removing taxes on menstrual hygiene products.



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