Integrating the human right to sanitation in Burkina Faso

Improving women’s access to sanitation in Burkina Faso’s rural areas

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In present-day Burkina Faso, there is an immense backlog in sanitation services in rural areas. One of the main consequences is the absence of latrines at the household level, resulting in a situation in which the great majority of the country’s rural population resorts to open defecation on a daily basis. In the quest towards achieving universal and sustainable sanitation services for all, this qualitative research explores how the integration of sanitation as a human right in national policies and strategies can improve access to sanitation in rural areas, in particular for the country’s most socially and geographically marginalised group: Burkina Faso’s women living in rural areas.
Executive Summary

In present-day Burkina Faso, there is an immense backlog in sanitation services in rural areas. One of the main consequences is the absence of latrines at the household level, resulting in a situation in which the great majority of the country’s rural population resorts to open defecation on a daily basis. In the quest towards achieving universal and sustainable sanitation services for all, this qualitative research explores how the integration of sanitation as a human right in national policies and strategies can improve access to sanitation in rural areas, in particular for the country’s most socially and geographically marginalised group: Burkina Faso’s women living in rural areas.

The study uncovers the ways in which the lack of sanitation services negatively affects women’s lives on a daily basis, and provides clear examples of how women’s rights to health, education, safety, and dignity are breached by the lack of latrines. In the same rural context, women are constantly excluded from decision-making, and this is identified as one of the main mechanisms perpetuating the low sanitation rates in rural areas. An analysis of previous research demonstrates how the lack of latrines in the country’s rural areas is consistently wrongly attributed to poverty and the lack of knowledge, and the results of the present research point towards the fact that a demand for latrines exists amongst women, that the dangers of open defecation are known, and that a lack of financial means cannot fully explain the lack of latrines.

Several interviews held with professionals in the water and sanitation sector have indicated the difficulty that women face in voicing their concerns related to sanitation, particularly in front of men, and that there seems to be a discrepancy between women’s demand for sanitation and their ability to influence the decision of opting for a household latrine. Indeed, other studies reveal that in rural societies women are generally not considered to be apt for influencing or making decisions, neither at the household level, nor at the societal level. As a result, women living in Burkina Faso’s rural areas are excluded from participating in decision-making, suggesting that the widespread lack of latrines is intrinsically related to factors determining men’s decision-making.

With the post 2015 targets currently being defined, correcting the shortcomings of the international Millennium Development Goals (MDGs) and the existing national water and sanitation policies will require new policies to focus on the sustainability of interventions and prioritise the inclusion of marginalised groups. The integration of the human right to sanitation in Burkina Faso has the potential of providing the necessary push towards assuring a clear and targeted commitment for sanitation improvements in general, and can play an especially important role in prioritising a drastic improvement of women’s access to sanitation services and decision-making in rural areas in particular. By ensuring women’s full participation in sanitation-related decision-making, this research depicts how the outcome is simultaneously more equitable for women and guarantees more sustainable services for all.
## Abbreviations

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<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tr>
<td>AFJBF</td>
<td>Association des Femmes Juristes du Burkina Faso</td>
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<td>AMCOW</td>
<td>African Ministers’ Council on Water</td>
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<td>CLTS</td>
<td>Community-Led Total Sanitation</td>
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<td>Danida</td>
<td>Danish International Development Agency</td>
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<td>DGAEUE</td>
<td>Direction Générale de l’Assainissement des Eaux Usées et Excrétas</td>
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<td>MEAHA</td>
<td>Ministère de l’Eau, Des Aménagements Hydrauliques et de l’Assainissement</td>
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<td>MEF</td>
<td>Ministère de l’Économie et de Finances</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>OHCHR</td>
<td>Office of the High Commissioner for Human Rights</td>
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<td>ONEA</td>
<td>Office National de l’Eau et de l’Assainissement</td>
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<td>PN-AEPA</td>
<td>Programme National d'Approvisionnement en Eau Potable et d'Assainissement</td>
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<td>PSNA</td>
<td>Politique et Stratégie Nationales d'Assainissement</td>
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<td>RWSN</td>
<td>Rural Water Supply Network</td>
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<td>SDGs</td>
<td>Sustainable Development Goals</td>
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<td>SR</td>
<td>UN Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNICEF</td>
<td>United Nations Children's Fund</td>
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<td>UNIYS</td>
<td>United Nations International Year of Sanitation</td>
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<td>UPR</td>
<td>Universal Periodic Review</td>
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<td>UNRRC</td>
<td>United Nations Regional Information Centre for Western Europe</td>
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<td>UNWLD</td>
<td>United Nations Water for Life Decade</td>
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<td>WB</td>
<td>World Bank</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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Introduction

In Burkina Faso’s largely rural society, the persisting lack of access to water and sanitation services remains a pressing issue for the country, particularly for the estimated 80 percent of Burkinabè population that live in rural areas (WB, 2014). As a response to this issue, and in line with the Millennium Development Goals (MDGs), the country set specific water and sanitation targets to be reached by 2015. Whilst funds and efforts have been funneled towards reaching the water and sanitation targets, as the 2015 deadline approaches, the country still exhibits an overall deficiency in services and an immense gap between urban and rural water and sanitation delivery.

The coverage rate of water services has grown rapidly in Burkina Faso’s urban areas (which stands at 86%), with the coverage rates of water in rural areas (at 63%) following suit (IRC, 2014). On the other hand, sanitation coverage rates remain low, particularly in rural areas where access to sanitation remains at a mere 6%. This is a trend that reflects what has been happening at the global level, where efforts to meet the water and sanitation MDGs seem to have been focused mostly on water, and where actions have not been directed towards the most marginalised populations, such as is the case of Burkina Faso’s rural population.

The post 2015 Sustainable Development Goals (SDGs), which are currently still in the process of being defined, strive to correct some of the shortcomings in the approach that many actors have taken towards the MDGs. The SDGs aim to differ from the MDGs by ensuring the sustainability of interventions as well as by prioritising the inclusion of marginalised groups. This concerns groups and individuals that are excluded because of either situational or context-specific factors, such as people living in remote geographical areas, as well as groups and individuals who are systematically discriminated against because of factors such as race, religion, and gender (RWSN, 2013).

In the case of water and sanitation, there are several groups that do not benefit from services and that are excluded from decision-making due to their geographic or societal marginalisation, of which the determining factors can differ by country and by context. Women, however, comprise a group at the global level that is disproportionately affected by a lack of water and sanitation services as well as a privation of their participation in decision-making processes, which is even more so the case in rural areas. This often has particularly harmful consequences for the women involved, negatively affecting women’s rights to life, health, food, housing, education, work, and a healthy environment (OHCHR, 2014).

Due to the need to address injustices in service distribution, as well as an increasing recognition of the importance of water and sanitation in achieving the overall respect of human rights, the United Nations (UN) officially recognised the right to water and sanitation as a universal human right in 2010. This implies that water and sanitation rights and their specific standards are acknowledged under international law. However, countries must necessarily incorporate these rights into national legislation in order to make them enforceable at the national level (IRC, 2014). Many countries have already proceeded to incorporate the right to water and sanitation into their legislation, and current efforts in Burkina Faso are looking into integrating the right into the mandate of the Ministry of Human Rights (Danida, 2014).
Aim and scope of the research

Considering the existing water and sanitation levels in Burkina Faso, the current move towards integrating the human right to water and sanitation in national policies can play a crucial role in improving coverage and access rates throughout the country. The integration of this human right also has the potential of providing the necessary push towards assuring a clear and targeted commitment for sanitation improvements in particular, including the prioritisation of drastically improving sanitation services in rural areas. Moreover, respecting the principles of human rights will necessarily involve addressing the challenges and underlying barriers that the country’s marginalised groups are facing in accessing water and sanitation services.

In Burkina Faso, where women in rural areas are particularly vulnerable due to their geographic and societal marginalisation, the widespread lack of latrines is prone to have an especially harmful impact on the women involved. Therefore, this study intends to uncover the ways in which the lack of latrines in Burkina Faso’s rural areas negatively affects women’s rights, thereby identifying the social mechanisms that play a role in perpetuating women’s exclusion from participating in sanitation-related decision-making. In the quest towards achieving universal and sustainable sanitation services for all, this research aims to determine how integrating water and sanitation as a human right in Burkina Faso will help develop strategies to improve access to sanitation throughout the country—particularly in rural areas—and simultaneously guarantee an improvement of the respect of women’s rights.

This study is qualitative in nature, and is intended to introduce and open up the discussion of human rights and gender in Burkina Faso’s sanitation policies. The research is being carried out on a voluntary basis, being part of a grant scheme of the Municipality of The Hague, the Netherlands. The study bases itself on a combination of desk research and semi-structured interviews with professionals working in the fields of sanitation, human rights, and/or gender issues, and is further complemented with testimonies of women living in the country’s rural areas. Due to limited financial resources, villages with mixed ethnic compositions have been carefully selected in order to have a representative sample of the sanitation practices throughout the country. With the purpose of depicting the reality lived by Burkina Faso’s women without access to sanitation services, visual material has been produced throughout the research process in order to support the key findings and arguments.

As the post 2015 targets are being formulated at this moment in time, this research has been designed in order to provide input for the formulation of Burkina Faso’s sanitation targets and policies. To start with, the study explores the concept of sanitation as a human right and delineates the parameters of the right, as defined by the United Nations. In order to understand the context in which the government of Burkina Faso is seeking to integrate the right to water and sanitation, the study provides an insight into the country’s human rights performance as well as the current access levels to sanitation, with special attention placed on the standing of women. Based on these findings, the study reflects on the implications of integrating the right to sanitation in Burkina Faso, with the final chapter presenting recommendations to ensure that the integration of the right is truly reflected by an improvement of women’s access to sanitation in Burkina Faso.
Sanitation as a human right

Since July 2010, the human right to water and sanitation has been officially recognised by the UN General Assembly as a universal human right under the International Covenant on Economic, Social, and Cultural Rights. This right is defined as a right to water and sanitation services that are safe, reliable, acceptable, sufficient, and accessible. The Resolution makes appeal to states and other international actors to direct resources towards safeguarding this right for all people around the world (UNRIC, 2014).

According to the international human right to water and sanitation, the role of the State is to create an enabling environment for the realisation of this right (OHCHR, 2010). This involves putting in place a strategy that ensures that all principles of the human right to water and sanitation are met and that these comply with international standards. States also carry the responsibility of making certain that the actions of all actors involved do not result in human rights violations or exclude vulnerable people. This, therefore, does not imply that water and sanitation services need to be offered for free, nor does it mean that the State is the sole actor with a responsibility towards safeguarding the right to water and sanitation. In developing countries where national resources may not suffice, such as in Burkina Faso, the State is under the obligation to seek international cooperation and assistance in order to ensure a progressive realisation of the right to water and sanitation (RWSN, 2013). The human right to water and sanitation requires giving priority to marginalised and vulnerable groups as well as taking action towards eliminating discrimination against these groups. Any retrogression of the situation or failure to eliminate discrimination in the enjoyment of the right to water and sanitation is considered to be a violation of human rights.

A Special Rapporteur on the Human Right to Safe Drinking Water and Sanitation has furthermore been appointed by the UN, who carries the responsibility of examining issues and providing recommendations concerning the human right to water and sanitation. According to Catarina de Albuquerque, the first Special Rapporteur for water and sanitation, recognising the right to water and sanitation is a critical move towards truly eradicating the persisting lack of access to water and sanitation that certain regions and groups face (OHCHR, 2010). This is because the recognition of water and sanitation as a human right transforms the perception on water and sanitation from a matter of charity into a priority and legal entitlement. Not only does this empower people into claiming their rights, it also allows for the necessary push towards addressing the underlying structural causes that explain why certain groups or individuals do not have access to water and sanitation.

Although the right to sanitation officially falls within the human right to water and sanitation under international law, Catarina de Albuquerque emphasises that the rights to water and sanitation are equally important and should therefore be treated as two separate human rights (Albuquerque, 2012). She argues that whenever water and sanitation are mentioned together, water usually takes up the spotlight at the cost of sanitation. Treating water and sanitation as two distinct human rights, it is argued, stimulates actors in the water and sanitation sector to define and work towards accomplishing specific standards for water and sanitation separately and equally (OHCHR, 2012).

The human right to sanitation entitles everyone to services that are safe, reliable, and accessible, and must additionally be hygienic and socially and culturally acceptable, whilst providing privacy and ensuring dignity. In order for sanitation to be considered a service and thereby comply with the human right to sanitation, certain criteria must be met that go beyond the sole construction
of latrines. Sanitation facilities must safely separate its users from excreta, and must further have a service in place which guarantees the collection and transport, treatment, disposal, and re-use of solid and liquid waste (WASHCost, 2010).

If we have a closer look at what has been achieved in relation to the MDGs, we see that the world was able to meet the global water targets five years ahead of schedule, whilst the current rate of sanitation accomplishments will only succeed to meet the targets by 2026 (UNWLD, 2014). Catarina de Albuquerque explains this as being due to a worldwide political preference given to water (OHCHR, 2012). However, even though water might receive preferential treatment, the importance of sanitation for economic growth, for poverty reduction, and for the realised importance of sanitation for economic growth, for poverty reduction, and for the realisation of several other human rights, including gender equality should not be underestimated (UNIYS, 2008).

Several countries around the world have proceeded to include principles of water and sanitation rights in their national constitutions and legislation, thereby making these rights enforceable at the national level. Simultaneously, several development programmes have taken on a human rights-based approach to their work in water and sanitation, thereby basing their practices on international water and sanitation standards, and working towards rectifying discriminatory and unjust distributions (OHCHR, 2006). Considering the ongoing global water and sanitation crisis, many international actors are also calling for the inclusion of principles of the right to water and sanitation in the design of the new post-2015 SDG targets and indicators (IRC, 2014). This will consist of building on the water and sanitation MDGs, whilst placing emphasis on making interventions pro-poor, equitable, and sustainable.

Together with other universal human rights, Burkina Faso also recognised the right to water and sanitation in 2010. This right, however, has not yet been included within the mandate of the Ministry of Human Rights, nor are its principles reflected in sector policies, meaning that in practice the application and reinforcement of water and sanitation as a human right remains weak (Danida, 2014). This weakness in safeguarding human rights in Burkina Faso does not limit itself to water and sanitation, as the subsequent section will further elaborate.

Human rights and women in Burkina Faso

Burkina Faso has signed and ratified most international and regional conventions on human rights. However, several studies on the status of human rights in Burkina Faso show that despite the formulation and ratification of many documents concerning human rights, there seems to be a difficulty turning policies into action at the national level. Therefore, although Burkina Faso can be praised for playing an exemplary role in the recognition of human rights, the application and reinforcement of these remain weak in practice.

In an overview of the human rights situation in Burkina Faso, the Danish International Development Agency (Danida) identifies several weaknesses in the country’s human rights sector, including structural deficiencies such as the lack of independence of the judiciary and a weak national Human Rights Commission (Danida, 2014). Overall, an inadequate protection of civil, political, economic, social and cultural rights has been identified throughout the country, in particular concerning vulnerable and marginalised groups. Furthermore, the Universal Periodic Review (UPR) by the United Nations Human Rights Council has provided Burkina Faso with a range of recommendations, including the need to realise the right to water and sanitation, to
eliminate regional disparities in access to water and sanitation, and to improve women’s rights in the country (Danida, 2014).

As UN Women warns, women in every society suffer from violence and discrimination, and are under-represented in political and economic decision-making processes. A study has furthermore found that unsustainable development has a disproportionate negative impact on women, which underlines the importance of women’s participation in decision-making (UN Women, 2014). This same study calls for policies to be guided by human rights in order to improve gender equality, which has the additional advantage of improving the overall sustainability of development interventions. The UN Convention therefore urges states to take targeted measures towards eliminating discrimination against women, thereby ensuring their participation in the elaboration and implementation of development planning and in other decision-making that can positively influence their quality of life (UN, 1979).

The situation in Burkina Faso is such that, despite the official recognition of the importance of women’s rights, women remain under-represented in decision-making posts and experience a very limited access to justice (US Department of State, 2011). In an interview at the Ministry of Women, Thérèse Valérie Sanou confirms this finding that implementation of women’s rights remains weak in practice¹. In fact, in Burkina Faso it is often said that “poverty has a female face”, as poverty, low scholarization rates for girls, a lack of knowledge of their rights, and wide-spread discrimination based on cultural customs and beliefs are factors which characterise the reality of a majority of Burkinabè women (AFJBF, 2012). As a result, women continue to occupy a subordinate position in society, as is reflected in a Human Rights Report (US Department of State, 2011).

The Human Rights Report reveals how women face widespread discrimination in access to education, jobs, property ownership, credit, and family rights. It also illustrates how many violations of women’s rights, such as gender-based violence, sexual harassment in the workplace, and child marriage are common and can even be considered to be culturally acceptable. Although recent years have seen an increase of women demanding equal rights and occupying decision-making positions in urban areas, the effects of this movement have remained particularly weak in Burkina Faso’s rural areas.

The Association of Female Lawyers of Burkina Faso confirms that the concept and impact of women’s rights remains virtually inexistent in Burkina Faso’s rural areas (AFJBF, 2012). With gender inequality being more pronounced in these areas, women living in Burkina Faso’s rural areas face the consequences of being both geographically and socially marginalised. The UN Convention on the Elimination of all Forms of Discrimination Against Women recognises this additional vulnerability of women living in rural areas, and therefore calls for all states to address the specific realities and challenges faced by women living in rural areas (UN, 1979).

The importance of addressing gender inequality is furthermore underlined in a study by the World Bank and IRC which demonstrates that water and sanitation projects designed and run with the full participation of women are more sustainable and effective than those that are not (WB, 2000). Several organisations working in the water and sanitation sector have recognised the importance of prioritising and addressing gender issues in their programmes and interventions, such as can be seen in UNICEF, CARE, and WaterAid’s work in Burkina Faso and around the world, amongst others. In line with the move towards pro-poor, equitable, and

¹Watch the full interview with Thérèse Valérie Sanou, Ministère de la Promotion de la Femme, at: <http://youtu.be/kkewIPjcpzg>
sustainable services, an upcoming cooperation between Danida and the Ministry of Human Rights will work towards introducing mechanisms that will guarantee the protection and respect of human rights in accordance with international principles- with a special emphasis on gender.

**Access to sanitation in Burkina Faso**

Considering that almost 80% of the approximately 16.5 million inhabitants in Burkina Faso live in rural areas, the current 6% sanitation access rate in rural areas is alarming (WB, 2014; BBC, 2014). These figures reflect the access rate to improved sanitation facilities, which only include those systems that hygienically separate human excreta from human contact and comply with international standards. At the household level, access to sanitation is defined as access to an improved latrine which is accessible at any moment in time, and where the number of daily users does not surpass ten (DGAEUE, 2011).

This is not to say that the water and sanitation sector hasn't been active. As a study commissioned by the African Ministers' Council on Water (AMCOW) illustrates, a huge mobilisation has taken place on behalf of the Burkina Faso government as well as several development partners towards improving water and sanitation coverage in the country (WB, 2011). The National Programme for Water Supply and Sanitation (PN-AEPA) has played a crucial role in working towards achieving MDG-based targets for water and sanitation. It is important to note that today's 6% access figure to improved latrines shows a significant improvement from 2010, when access rates in rural areas figured at a mere 0.8% (IRC, 2014). Even so, the overall water and sanitation targets will not be met by the 2015 deadline, and accomplishing sanitation goals in particular is proving to be a major challenge, especially in rural areas.

In order to address the persisting low levels of access to sanitation in rural areas, it is important to understand the context in which this is taking place. It is argued that a certain weakness remains in the entire sector stemming from the water and sanitation decentralisation process throughout the past decade (WB, 2011). Rural municipalities still face many challenges in taking on their responsibilities, in particular when it comes to implementing local management and evaluation systems for water and sanitation services. This is especially the case when it comes to sanitation, as there are difficulties developing these into lasting services. This results in a situation where the construction and management of latrines are almost entirely up to households, and as the 6% access figure indicates, these conditions cannot satisfy the sanitation needs of the country's rural population.

However, as research by IRC points out, finding funding for rural sanitation is one of the main challenges that the country's water and sanitation sector faces, and yet other figures demonstrate how almost all available finance goes towards institutional and public sanitation, thereby bypassing the importance of prioritising household sanitation (IRC, 2014; WB, 2011). One of the rural sanitation priorities is therefore to increase finance allocated to improving household sanitation, although it is argued that this must go hand-in-hand with an augmentation in the demand for latrines at the household level (DGAEUE, 2009).

An analysis of household's behaviour and motivations related to sanitation confirms that Burkina Faso's rural areas exhibit inadequate sanitation facilities and extremely high rates of open defecation (DGAEUE, 2009). To start with, the report analyses the rural population's conception of cleanliness. The notion of cleanliness was found to be present in all of the rural communities studied, and includes keeping the living environment, body, food, and water clean. Interestingly
enough, the notion of a clean household extends beyond the physical and encompasses social cohesion and socially acceptable behaviour. Women are considered to have a particularly decisive role regarding the cleanliness of their respective households, which includes their duty to regularly clean the house and courtyard, but also comprises ensuring their own corporal hygiene and behaving in a socially desirable manner. The absence of latrines, on the other hand, does not fall under the notion of uncleanness.

The analysis further argues that the lack of latrines in the country’s rural areas is consistently wrongly attributed to poverty and the lack of knowledge. Findings point towards the fact that the rural population is aware of the importance of latrines, but that the construction of latrines remains at the bottom of the list of households’ financial priorities. There is an additional cultural constraint which contributes to a low demand for latrines in rural areas, which is that the presence of a latrine within a household’s premises is often considered to be a polluting factor putting the household’s cleanliness at risk. However, this cultural constraint is often overcome by the placement of latrines on the periphery of the household’s premises. Still, the result of this combination of factors is that the great majority of Burkina Faso’s rural households don’t have a latrine, resulting in widespread open defecation practices (DGAEUE, 2009).

Ultimately, is it argued, the current state of sanitation in Burkina Faso undermines the recognition of the rights to water and sanitation as well as other rights that are closely related, including health, education, and security (Danida, 2014). Figures by the World Health Organisation (WHO) demonstrate how inadequate sanitation facilities are at the root of many diseases in developing countries, which obstructs the right to life and health (WHO, 2014). In Burkina Faso alone this results in the deaths of more than 12,000 children under the age of 5 each year (WaterAid, 2014). At the same time, a lack of adequate sanitation facilities interferes with the right to an education, as children spend school time looking for a place to relieve themselves, or end up missing class when they are sick due to diarrhoea or another sanitation-related disease. The search for a private place to defecate outside the safety of their homes also puts people at a heightened risk, obstructing their right to security. Therefore, improving sanitation in rural areas will play a vital role for the indivisibility of human rights in Burkina Faso, but can moreover give significant returns to society in terms of costs avoided related to public health and lost productivity (WHO, 2004).

**Main challenges for women’s access to sanitation in rural areas**

A recent report by Burkina Faso’s Ministry of Water, Hydraulic Infrastructure, and Sanitation confirms that water and sanitation service provision throughout the country remains weak and that it is characterised by high rates of exclusion of the poor and vulnerable (MEAHA, 2014). According to UN Women, women are especially at risk, considering that “gender inequality is particularly visible in contexts where public provision is weak” (UN Women, 2014). So as to counter these inequalities, specific measures will need to be taken in order to eliminate systemic or structural discrimination that women and other vulnerable groups face, and this commitment should be clearly reflected in the design of water and sanitation sector policies (OHCHR, 2014). This will imply identifying the conditions and attitudes which cause or reinforce discrimination against women, and addressing these mechanisms of social exclusion at the root.
As a first step, it is important to understand the relationship that exists between sanitation and women. It is well known that in Burkina Faso, as in much of the African continent, water is considered to be a women’s domain, with women carrying the sole responsibility of finding and providing water for their households. In water-scarce regions this task can take up to several hours a day, which is often the case in much of the country’s rural areas (Charity: water, 2014). As a result, many efforts are directed towards relieving women from the burden of searching for water. When it comes to sanitation, however, the needs of women are not always taken into consideration during the design of sanitation interventions. In fact, the experience of the present research has been that the relationship between women and sanitation seems to be much less researched and documented in Burkina Faso than women’s relationship with water, but as Catarina de Albuquerque warns, access to sanitation is just as urgent to gender equality as access to water (Albuquerque, 2012).

With only limited data available on the effects that the lack of sanitation has on women in Burkina Faso, an overview compiled by WaterAid is a good reference on how the lack of sanitation often disproportionally affects women (WaterAid, 2013). It is, for example, especially important for girls to have access to sanitation services when they are menstruating, and a lack hereof often obliges girls to stay at home and miss school, thereby posing an additional monthly obstacle to their right to an education. A main finding of a study by UNICEF in Burkina Faso indeed demonstrates that inadequate sanitation facilities at school particularly affect girls’ participation and performance during menstruation (UNICEF, 2013). A similar situation was witnessed during a school visit to the rural community of Bantogdo, where students explained how class time was often lost in the search of a private place to relieve themselves, proving to be a particularly challenging exercise for girls.

Also, due to cultural reasons, it is often considered more shameful for women to urinate and defecate in the open than for men, meaning that a lack of access to sanitation facilities negatively affects women’s dignity and self-esteem. As a result, many women choose to do so only when it’s dark outside. Not only is it physically extremely uncomfortable to postpone relieving oneself until night time, this act has also been seen to increase the probability of urinary tract infections and other health implications. Above that, women often walk long distances in order to find a place of privacy, and this act has proven to expose women to many dangers, including reported cases of rape. Finally, with women being the primary caregivers at the household level, they are often the ones to look after family members that have fallen sick due to a sanitation-related disease, thereby taking up a lot of women’s time and adding on to their often already long list of chores and responsibilities.

As part of the present research, several interviews were held with women in the Sahel region, where levels of open defecation are among the highest in the country. According to a national survey on sanitation, 86% of the population in the Sahel practised open defecation on a daily basis in 2010, with some areas within the region reaching 93% (DGAEUE, 2011). The interviews took place in focus groups as well as in one-on-one exchanges, and aimed to provide a better understanding of the reality lived by women in rural areas. Being asked about their experience in coping with an absence of latrines, women were quick to open up on the challenges they face on a daily basis.

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2 For more information on the school visit to Bantogdo, read the blog *When the presence of latrines isn’t enough*, available at <http://www ircwash org/blog/when-presence-latrines-isn%27t-enough>
A recurring view is that open defecation poses different challenges to women than to men. Men, it is argued, face fewer dangers when defecating in the open, experience less shame, and are less constrained by time than women. In a video filmed as part of this research\(^3\), a woman from the village of Gorgadji explains how she walked long distances every day in order to find a private place to relieve herself. Men in her community, she explains, have access to bicycles and mopeds which quickly allow them to transport themselves to a private area. Women, on the other hand, don't have access to such means, and additionally find it difficult to find the ideal moment to relieve themselves during the day due to their maternal and household responsibilities.

The previously mentioned analysis of household motivations related to sanitation indeed indicates that shame plays a role in explaining the distances people will walk to defecate (DGAUE, 2009). In fact, as explained by another woman in a second video\(^4\), the feeling of shame commences when a woman starts walking out of the village in search of a private place, as she is aware that people know she will go relieve herself. Indeed, the women interviewed explain that one of the most important considerations when determining the place and time to defecate is to avoid anyone—especially men—from seeing you. But finding an isolated place goes hand-in-hand with new fears, such as that of coming across snakes and scorpions, encountering evil spirits, or falling prey to the attack of a “crazy man”. For safety reasons, it is considered particularly important for young women to go relieve themselves in pairs or in groups\(^5\). Although this act suggests a high incidence of aggressions, no national statistics are available on the relationship between a lack of sanitation and the incidence of assaults. As explained by Josephine Ouedraogo, Director at the Ministry's sanitation department, the majority of cases of rape may in fact go unreported, due to the resulting social stigma this has on women\(^6\). Even so, many women opt to relieve themselves when it is dark outside, so as to decrease the chances of being seen by others.

Throughout the interviews, most women expressed a desire to have access to a latrine, as this would allow them to better combine their maternal and household responsibilities with their human need to relieve themselves. Much in relation to women’s responsibilities regarding household cleanliness in rural areas, UN Women explains that it is characteristic of poor women to carry the social responsibility to meet the needs of other household members as well as their own (UN Women, 2014). A study by USAID and CARE in the Sahel region further demonstrates that women's days are fully packed with traditional and household-related responsibilities that come along with being a woman in rural areas (USAID, 2014). Therefore, finding the time to walk long distances is said to disrupt a woman's ability to fulfil her responsibilities, with the situation getting particularly complicated in cases of diarrhoea. Having access to a latrine, it is argued, allows a woman to fulfil her responsibilities, as well as quickly go to the latrine whenever the urge arrives\(^7\).

Besides issues of shame, privacy, time constrains, and dangers faced by women on a daily basis, other arguments are based on the advantages that access to a latrine would have on health. Many women explained how having access to a latrine facilitates the act of washing hands after

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\(^3\) The video *The importance of latrines in rural areas: a woman's point of view* can be viewed at: <http://youtu.be/TsJGbZv8Q4>

\(^4\) The video *The lack of latrines in rural areas. Testimonies of women from the village of Bouloye-Siguidi in Burkina Faso* can be viewed at: <http://youtu.be/OfqQhbd7u8>

\(^5\) Interview. Juliette Sanou, L’Office National d’Eau et Assainissement (ONEA)


\(^7\) The video *The importance of latrines in rural areas: a woman's point of view* can be viewed at: <http://youtu.be/TsJGbZv8Q4>
defecation, but that this is more complicated when they walk long distances away from their home. Women also recognised that open defecation can easily put people into contact with faeces, which has further negative consequences on health. These findings support the argument that a lack of knowledge does not solely explain the poor levels of sanitation in rural areas (DGAEUE, 2011). At the same time, women’s expressed desire to have access to a latrine seemingly counters the belief that there is a lack of demand for latrines at the household level. Therefore, there appears to be a gap between the knowledge of the importance of latrines amongst women, and the actual realisation of latrines at the household level, suggesting that women’s voices are in fact not being heard.

In the interviews carried out for this research, much like the results of the survey on sanitation-related motivations, the sole reason given for the lack of latrines was attributed to the lack of financial means at the household level (DGAEUE, 2011). However, as the DGAEUE’s survey demonstrates, financial means are not the fully determining factor for the possession of a household latrine. The characteristics in household composition that were identified as being favourable for sanitation are alphabetisation, access to drinking water, and a female head of household. At the national level, the regions with the highest levels of open defecation, such as the Sahel region, coincide with the lowest scholarization levels, with the presence of latrines having a direct correlation with the education level of male heads of household.

However, even a household’s possession of a latrine does not provide a guarantee on the actual usage of this facility by all household members. In certain villages, the belief exists that men and women cannot make use of the same sanitation facilities, and children are not perceived to be able to use the same facilities as adults. In yet other situations, the location of a latrine within the household’s premises can be a determining factor to women’s usage of it, particularly when this requires walking in front of the male head of household’s house. This indicates that in some cases, discrimination in the access to latrines exists at the household level.

Thus far, the results of this research point towards the fact that a demand for latrines exists amongst women, that the dangers of open defecation are known, and that a lack of financial means cannot fully explain the lack of latrines. Several interviews held with professionals in the water and sanitation sector have indicated the difficulty that women face in voicing their concerns related to sanitation, particularly in front of men. Even though the entire household’s cleanliness is considered to be a woman’s responsibility and considering that women face heightened sanitation challenges than men, there seems to be a discrepancy between women’s demand for sanitation and their ability to influence the decision of opting for a household latrine. Indeed, a study by USAID and CARE in Burkina Faso’s Sahel region reveals that in rural societies women are generally not considered to be apt for influencing or making decisions, neither at the household level, nor at the societal level (USAID, 2014). As a result, women living in Burkina Faso’s rural areas are excluded from participating in decision-making, suggesting that the widespread lack of latrines is intrinsically related to factors determining men’s decision-making.

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This same study by CARE and USAID demonstrates how attempts to include women in water and sanitation decision-making have faced difficulties in ensuring a true participation of women, due to a perceived clash between women’s traditional role and their ability to participate in decision-making. This finding was also found true when women in rural areas were encouraged to occupy decision-making positions, such as through membership of water user associations. However, these traditional gender roles and perceptions not only pose a major obstacle to gender equality, as the resulting lack of female participation jeopardises the sustainability of water and sanitation services in the entire country (WB, 2000).

**Next steps towards integrating the right to sanitation in Burkina Faso**

Despite Burkina Faso’s official recognition of the right to water and sanitation, this right has not yet been incorporated into the Ministry of Human Rights, and is not yet adequately reflected in the water and sanitations sector policies. Burkina Faso has recognised this shortcoming, and is currently looking into ensuring the integration of the right to water and sanitation, as well as other economic, social, and cultural rights.

An analysis carried out on the inclusion of the poor and vulnerable in Burkina Faso argues that the entire development sector in the country must undergo a paradigm shift (MEAHA, 2014). Although Burkina Faso is equipped with a range of policies and strategies focusing on sustainable development, gender and equity—such as the Strategy for Accelerated Growth and Sustainable Development, the National Gender Policy, and the National Policy for Social Protection—these remain weakly operational and exhibit a very limited pro-poor focus. As has been discussed regarding the PN-AEPA (which was formulated in order to work towards the water and sanitation MDGs), it has not sufficiently taken into account the sustainability of interventions or the inclusion of marginalised groups (PN-AEPA, 2006). The National Sanitation Policy and Strategy (PSNA) has remained one of the main references for sanitation interventions in relation to the PN-AEPA targets; however it also only superficially mentions marginalised and vulnerable groups, and makes no specific reference to principles of human rights (PSNA, 2007).

Nonetheless, considering the negative impact that women’s exclusion from decision-making has on their rights, as well as the role it plays in perpetuating the sanitation crisis in Burkina Faso’s rural areas, the urgency of prioritising principles of human rights and inclusion becomes clear.

With the SDGs currently being defined, correcting the shortcomings of the international MDGs and the new 2016–2030 PN-AEPA and PSNA being currently designed (in March 2015), the post 2015 targets are expected to ensure the sustainability of interventions and to prioritise the inclusion of marginalised groups. This will require a paradigm shift, which will mean that the sanitation sector will need to go beyond building latrines as the sole response to eliminating open defecation, and will need to address issues of social and geographic inequality of access. Although discrimination based on race, gender, disability, language, or social status are prohibited by law and constitution in Burkina Faso, discrimination against women remains a particularly concerning problem. As the Human Rights Report has demonstrated, women continue to occupy a subordinate position in society, which is reflected in the challenges women face in accessing many of their rights (US Department of State, 2011). Therefore, it is essential to make the safeguarding of women’s rights a priority, and this should clearly be reflected in the water and sanitation sector.
Initial steps towards integrating the right to water and sanitation include a cooperation agreement between Danida and Burkina Faso’s Ministry of Human Rights between 2016 and 2020. Within this cooperation, IRC is currently identifying the need for technical assistance and capacity building with the goal of ensuring an institutional environment that ensures equality, performance, and the inclusion of vulnerable groups in its services. A successful implementation of the cooperation programme should lead to human rights principles playing a central role in the setting of priorities and the making of investment decisions. This will involve defining and introducing the concept of rights-holders and rights-bearers, which will empower people to claim their rights and ensure the accountability of those who must respect these rights (Danida, 2014).

At the national level, the concept of rights-bearers would hold the Ministry of Water, Hydraulic Infrastructure, and Sanitation responsible for ensuring equity in the allocation of resources for water and sanitation. By basing its mandate on human rights principles, the Ministry should be in charge of ensuring the representation, participation, and inclusion of vulnerable and marginalised groups in decision-making processes. In the case that national funds or capacity do not suffice, the ministry will be under the obligation of seeking assistance. Similar responsibilities would hold true for local rights-bearers, which include authorities such as regional councils and municipalities. Rights-holders, on the other hand, should include groups or individuals living in areas with inequitable access to water and sanitation, as well as groups or individuals that are considered to be particularly vulnerable or marginalised, with women living in rural areas comprising a large priority group.

Therefore, Burkina Faso’s success in turning human rights policies into action should be manifested by a decrease in inequality and discrimination as well as an increased capacity of vulnerable people to claim their rights. Improvements of human rights in the water and sanitation sector will require the strengthening of the respect, protection, and promotion of human rights in the sector’s policies, strategies and programmes. In Burkina Faso, ensuring the sustainability and equitable access to water and sanitation services calls for a prioritisation of gender inclusion in particular.

Improving women’s access to sanitation in rural areas through integrated policies

As Thérèse Valérie Sanou from the Ministry of Women summarises in an interview, there is an important relationship between women’s rights and the right to sanitation, and successfully implementing the human right to sanitation will have far-reaching positive effects on women. Based on the principles of equality, inclusion, and vulnerability, a successful integration and implementation of the human right to water and sanitation has the potential of significantly improving women’s access to sanitation in rural areas. This will allow for a greater participation of women in decision-making, and by defining and prioritising women as rights-holders, will guarantee a setting in which women can claim their rights.

Research has furthermore proven that fully implicating women in water and sanitation services improves the sustainability and effectiveness of services, meaning that when women take on an explicit role in sanitation planning and delivery, the outcome is simultaneously more equitable.

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11 Watch the full interview with Thérèse Valérie Sanou, Ministère de la Promotion de la Femme, at: <http://youtu.be/KkefWPlczpZ>
for women and more sustainable for all (WB, 2011). However, as UN Women warns, whilst gender equality plays a central role in reproducing economic, social, and environmental sustainability, the reverse is not automatically the case (UN Women, 2014). Therefore, gender equality must necessarily take on a focal role in the design of interventions and sector policies must be specifically targeted to eradicate inequalities. Women’s participation in water and sanitation decision-making should therefore be improved in order to address the various challenges women face on a daily basis, and this will moreover play a crucial role in achieving gender equality and ensuring the sustainability of sanitation services for everybody.

Although scepticism may arise regarding the ability of Burkina Faso to implement the human right to water and sanitation in practice, concrete steps are being taken in order to ensure that the right to water and sanitation is reflected in sector policies, as well as incorporated into the mandate of the Ministry of Human Rights. Considering the immense mobilisation that has taken place in working towards Burkina Faso’s MDG-related water and sanitation targets in the past, Burkina Faso’s renewed commitment to integrating the human right to water and sanitation in national strategies and policies promises a focused approach to increasing access to water and sanitation throughout the country in an equitable manner.

Indeed, a preview of the National Strategy for Community-Led Total Sanitation (CLTS), which is currently undergoing its last stages of formulation, already seems to indicate a transformation in the sanitation approaches in Burkina Faso (MEHA, 2014). This strategy strives for an impact beyond the construction of latrines by ensuring and measuring the accessibility of latrines for every single family member and the collection of disaggregated data in the monitoring and evaluation process. By aiming to correct the existing regional disparities against women, and by basing its strategy on principles of equity, inclusion, and vulnerability—with a special emphasis on women’s participation—this strategy offers a glimpse of a transformation that might already be taking place in the approach of Burkina Faso’s water and sanitation sector.

In order to ensure that the right to water and sanitation truly becomes consolidated within sector policies, and for gender to play a prominent role in the design of these policies, it is highly recommendable to make use of existing tools that have been devised for these purposes. For example, the already existing guide on the integration of human rights in sector policies provides specific recommendations based on the Burkina Faso context, which can play an important role in ensuring that the principles of the human right to water and sanitation are incorporated in sector policies (MEF, 2011). Additionally, an extensive guide has been made available by the UN Special Rapporteur, which provides check-lists for ensuring adherence to the right to water and sanitation at all planning levels, from legislative frameworks, to financing, to monitoring (SR, 2014). Other useful instruments to help ensure the application of human rights principles and the adequate consideration of gender in the elaboration of new programmes and interventions include screening tools, such as the ones that were used for the cooperation concept note between Danida and the government of Burkina Faso (Danida, 2014).

Moreover, a UN report on common violations of the human rights to water and sanitation provides a typology of violations which can serve as a good indicator on the types of violations to look out for and avoid (OHCHR, 2014). These range from the State’s failure to take into account particular sanitation requirements of vulnerable groups, to a failure to eliminate discrimination in the private sphere, to a failure to monitor and collect disaggregated data on inequalities in access to water and sanitation. Finally, as the human right to sanitation calls for access to sanitation services rather than to mere facilities, a useful reference is a scorecard developed by
The World Bank’s Water and Sanitation Programme, which defines and explains the building blocks that constitute proper water and sanitation services (WB, 2011).

With Burkina Faso’s move towards implementing the human right to water and sanitation coinciding with the post 2015 development goals and targets taking on a more explicit pro-poor, equitable, and sustainable approach, we can expect these principles to take on a central role in the successors of the PN-AEPA and PSNA policies and strategies. This should be mirrored by an increased prioritisation of sanitation and sustainability at the national level, an increased push towards increasing household access to sanitation services in rural areas, and concrete measures aimed at eliminating the exclusion of marginalised groups. Considering women’s marginalised position in Burkina Faso’s rural society, a special emphasis on gender will be needed in the integration of the human right to water and sanitation in Burkina Faso. The emphasis on gender is an important step in eliminating systemic and structural discrimination against women and provides for a setting which guarantees that women can claim their rights. This will allow for a greater participation of women in decision-making, thereby designing policies and programmes that correspond to women’s sanitation needs. This drive, in combination with the use of the appropriate tools, can ensure women’s full participation in sanitation-related decision-making. Importantly, the outcome of the implementation of the human right to sanitation will be more equitable for women, and will simultaneously play an important role in guaranteeing more sustainable services for all.
Conclusion

The current efforts to integrate the right to water and sanitation in Burkina Faso coincide with a moment in time when it is particularly critical to improve access to sanitation in rural areas. Despite a great mobilisation towards attaining the MDG water and sanitation targets in the past years, sanitation implementation programmes have not focused sufficiently on sustainability or the inclusion of marginalised groups. As a result, the sector is characterised by low access rates to sanitation, high rates of exclusion of the poor and the vulnerable, and immense geographic disparities throughout the country. Despite the predominantly rural composition of Burkina Faso’s society, rural areas have stayed especially behind, resulting in the great majority of the country’s rural population resorting to open defecation on a daily basis.

Considering that women face heightened sanitation challenges than men, that the dangers of open defecation are known, and that a lack of financial means cannot fully explain the lack of latrines, there seems to be a discrepancy between women’s demand for sanitation and their ability to influence the decision of opting for a household latrine. With poverty, low schoolization rates for girls, a lack of knowledge of their rights, and wide-spread discrimination based on cultural customs and beliefs characterising the reality of a majority of Burkina Faso’s women in rural areas, women living in Burkina Faso’s rural areas are excluded from participating in decision-making, thereby also being excluded to sanitation-related decision-making. This poses a major obstacle to gender equality, and the resulting lack of female participation additionally jeopardises the sustainability of water and sanitation services in the entire country.

With the new post 2015 SDG targets being formulated at this moment in time, this research calls for the prioritisation of human rights and gender inclusion in global and national sanitation targets and policies. Ensuring that human rights principles are at the core of the upcoming SDG targets offers the necessary push towards ensuring sustainability, equality, and inclusion in the sanitation sector. The integration of water and sanitation as a human right in Burkina Faso is moreover a key move in its consolidation at the national level as a priority and legal entitlement with clearly defined rights-holders and rights-bearers. This will involve ensuring services that are safe, reliable, and accessible, and that are hygienic and socially and culturally acceptable, whilst providing privacy and ensuring dignity. Respecting the human rights principles of equality, vulnerability, and inclusion will necessarily involve addressing the challenges and underlying barriers that the country’s marginalised groups are facing in accessing water and sanitation services.

In view of the findings of this research, gender equality and participation must necessarily take on a focal role in the design of interventions and sector policies must be specifically targeted to eradicate inequalities and discrimination. In this way, the integration of the human right to sanitation in Burkina Faso has the potential of providing a clear and targeted commitment for sanitation improvements in general- but can play an especially important role in prioritising a drastic improvement of women’s access to sanitation services in rural areas in particular. As has been further demonstrated throughout the research, succeeding in ensuring the full participation of women will ultimately play a significant role in guaranteeing the sustainability of services in Burkina Faso, meaning that a successful integration of the human right to water and sanitation in national strategies and policies is a vital step towards guaranteeing lasting services for all whilst improving women’s rights in Burkina Faso.
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Annex 1 Interviews

The following professionals shared their knowledge, opinions, and documents regarding sanitation, human rights, and gender in Burkina Faso through semi-structured interviews:

Anago Traore, Ministère de L’Eau, Des Aménagements Hydrauliques et de l’Assainissement

Gwladys Ouedraogo, Direction Générale de l’Assainissement des Eaux Usées et Excréta, Ministère de L’Eau, Des Aménagements Hydrauliques et de l’Assainissement

Joséphine Ouedraogo, Direction Générale de l’Assainissement des Eaux Usées et Excréta, Ministère de L’Eau, Des Aménagements Hydrauliques et de l’Assainissement

Juliette Sanou, L’Office National d’Eau et Assainissement (ONEA)

Sita Zougouri, CARE

Thérèse Valérie Sanou, Ministère de la Promotion de la Femme

Annex 2 Testimonies

Testimonies were collected in group format in the following villages:

- Bouloye-Siguidi, Municipality of Gorgadji, Burkina Faso
- Tadjo, Municipality of Gorgadji, Burkina Faso
- Bantogdo, Municipality of Sourgoubila, Burkina Faso

The following testimonies took place through informal, one-on-one conversations:

Aissatou Maïga, inhabitant of Tadjo, Municipality of Gorgadji, Burkina Faso

Aissatou Zango, inhabitant of Bouloye-Siguidi, Municipality of Gorgadji, Burkina Faso

Aminata Dicko, inhabitant of Tadjo, Municipality of Gorgadji, Burkina Faso

Asmao Diallo, inhabitant of Gorgadji, Municipality of Gorgadji, Burkina Faso

Fatemata Barro, inhabitant of Bouloye-Siguidi, Municipality of Gorgadji, Burkina Faso

Lydie Sanogo, teacher at secondary school of Bantogdo, Municipality of Sourgoubila, Burkina Faso

Annex 3 Visual material

The following videos have been produced as part of the research, providing support to the key arguments made throughout the research report:

Flores, C. IRC. The importance of latrines in rural areas: a woman’s point of view, to be viewed at <http://youtu.be/TsIQhZv8Q4>

Flores, C. IRC. The lack of latrines in rural areas. Testimonies of women from the village of Bouloye-Siguidi in Burkina Faso, to be viewed at: <http://youtu.be/QfrqQhxl7u8>
Flores, C. IRC. La relation entre le droit à l'assainissement et les droits des femmes au Burkina Faso. Interview avec Mme Thérèse Valérie Sanou, Ministère de la Promotion de la Femme, Burkina Faso, to be viewed at: [http://youtu.be/kketWPJapzg]

Flores, C. IRC. Video clip of Mme Lydie Sanogo, as part of the blog: When the presence of latrines isn't enough. To be viewed at: [http://www.ircwash.org/blog/when-presence-latrines-isn%27t-enough]

**Annex 4 Events**

The following events were attended, providing an important insight on the work being done regarding gender and sanitation in Burkina Faso:


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