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TO THE RESCUE | Nyeri emerges top in sanitary facilities but still loses over Sh400 million annually due to hygiene-related health

# Ministry seeks to save Sh27bn lost every

Drive to boost levels of cleanliness in the 47 devolved units started after survey reveals massive loss of public funds due to lack of toilets

BY SAMUEL SIRINGI

he Health ministry has launched a campaign to help counties save Sh27 billion that they lose every year due to poor sanitation.

The move follows a sanitation survey, which shows that most of counties are lagging behind in provision of proper sanitary facilities like toilets and latrines.

Results of the assessment released early this month show that only 13 counties have above-average sanitation facilities. Some 14 counties are average while 19 are classified as below average in the report released by the Environmental Health Department with the Support of Water and Sanitation Programme of the World Bank.

The report was prepared after ranking counties on a score of 120 marks based on several criteria— including number of latrines, number of communities that have no one defecating in the open, number of toilets per pupil, availability of hand-washing facilities and budget allocated to provide sanitary services.



Pedestrians wade through a section of Pumwani Road that was flooded by sewage near Machakos bus station in Nairobi yesterday. Nairobi County was ranked 42 out 47 in a ministry of Health survey on availability of sanitary facilities

With 96 per cent, Nyeri county has the highest score, although it still loses Sh426 million per year due to sanitary related issues.

Nakuru with 88 per cent was second best county in sanitation facilities and it loses Sh978 million per year.

Nairobi that is ranked 42 loses Sh1.7 billion annually due to poor sanitation. The worst, Mandera loses Sh1.2 billion.

The money is used to treat patients who contract diseases as a result of poor sanitation as others are lost through of

failure to work.

This includes time absent from work or school due to diarrhoea, seeking treatment from a health clinic or hospital, and time spent caring for under-fives suffering from diar rhoea or other diseases caused by poor sanitation.

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Ms. Eunice Mbogo

Eunice is currently working as a Regional Director at the African Reinsurance Corporation Limited. She is the former Managing Director of Reinsurance ed and has served on the Boards of PTA Reinsurance Company and Industrial Development Bank. Eunice holds an MBA from the Eastern and Management



Dr. Monica Kerretts-Makau

Dr. Makau is a World Bank Consultant working on various projects in Africa. She is also a Senior Faculty of the Strathmore Business School and a at the Communications Commission of Kenya. Dr. Makau holds a PHD in Public Policy Regulation from the University of Nev South Wales-Australia.



Ms. Susan Kasinga

Susan works at the Standard Investment Bank, Corporate Finance Division, and is a Board Member of the CIC Asset Management Company. She holds an MBA Company. She holds an MBA (Strategic Management) from the University of Nairobi.

# Bank of Africa (K) Ltd Appoints New Directors



For more information, Call us on 0703 058120 Email: yoursay@boakenya.com or visit your nearest branch for more details.

\* Bank of Africa is regulated by the Central Bank of Kenya

23 33 881,842,846 Bungoma 536.144,388 84 Busia 3 70 307,707,308 E/Marakwet 10 10 40 345,146,119 Embu 44 Garissa 651.549.374 17 919,895,790 Homa Bay 46 20 138,751,976 Isiolo 29 Kaiiado 29 542.386.862 942,755,377 Kakamega 74 5 28 30 408,597,468 Kericho 75 Kiambu 940,854,297 23 992,893,378 33 74 299,581,502 5 Kirinyaga Kisii 48 19 776,470,119 70 739,547,492 10 71 9 Kitui 859.405.251 23 Kwale 42 676,587,796 38 Laikipia 25 267,184,969 10 40 80,894,563 Lamu Machakos 74 5 756,626,277 Makueni 33 27 638,167,077 44 1.229.335.518 Mandera Marsabit 59 15 331,791,085 Meru 43 815,928,892 64 14 800.093.480 Migori Mombasa 39 24 548,095,163 Murang'a 73 8 606,040,344 42 1,712,512,884 Nairobi 8 Nakuru 88 2 977,654,057 59 Nandi 15 482,788,192 28 30 863.648.110 Narok Nyamira 70 10 392,796,963 Nyandarua 51 366,631,422 96 425.812.703 Nveri Samburu 24 32 268,435,448 Siaya 707,999,269 45 191.169.475 T/Nithi 21 TaitaTaveta 33 27 282,928,987 Tana River 43 22 257,416,194 17 35 507.509.404 Trans Nzoia Turkana 44 1,099,969,461 UasinGishu 14 38 533,079,182 16 306.555.951 37 Vihiga Wajir 1 44 854,360,931 West Pokot 26 586,876,488

**KENYA 47 COUNTIES SANITATION RANKING** 

17

Baringo

38

35

complications as Mandera bears the brunt of poor sanitation, with over Sh1.2bn being lost per year

# year due to poor sanitation in counties

The Sh27 billion can sustain the Free Primary Education Programme for nearly three vears, where each of the nearly 10 million pupils is allocated

Sh1,020 per year.
According to the Health ministry report, each person practising open defecation spends almost 2.5 days a year finding a private location to defecate leading to big economic losses.

This cost affects women more since majority of them act "as caregivers who may spend additional time accompanying young children or sick or elderly relatives"

This cost is likely to be an underestimation as those without toilets, particularly women, will be obliged to find a private location for urination as well.

Number of Kenyans using unsanitary or shared latrines

800,00

Number of Kenvans living in areas that are free from open defecation

According to the study, open defecation costs more per person than any other type of poor sanitation. The additional costs are mainly due to the time taken to find a safe, private location for defecation.

Costs associated with shared sanitation are likely to be higher than shown if time taken to reach and queue at a public latrine as well as userfees were added.

"Loss of dignity and privacy or risk of physical attack and sexual violence may not be easily valued in monetary units, but these issues are the reality when sanitation facilities are not available," the study says.

The costs of poor sanitation are inequitably distributed, with the highest economic burden falling disproportion-ately on the poorest.

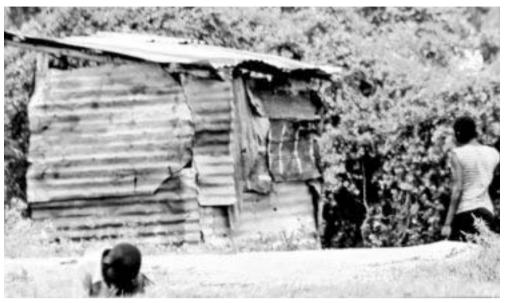
The average cost associated with poor sanitation constitutes a much greater proportion of a poor person's income than that of a wealthy one. The poorest 20 per cent of the population are 270 times more likely to practise open defecation than the wealthiest 20 per cent of Kenyans.

For the poorest, therefore, poverty is a double-edged sword — not only are they more likely to have poor sanitation but they have to pay proportionately more for its negative effects.

According to the report, faecal contamination of the environment is the root cause of an annual average of 3,500 cases of cholera affecting Kenva.

However, the economic implications of a cholera outbreak go beyond the immediate health system response—there are also costs related to loss of productivity and premature death, diversion of expenditure from other essential items and loss of trade and tourism rev-

According to the report, more than half of the population, 21 million people, use



A pit latrine in a Kisumu slum. A research report released by the World Bank early this year shows that more than five million Kenvans do not have latrines and help themselves in the open.

insanitary or shared latrines. Some 5.6 million people have no latrine at all and defecate in the open.

The situation is largely to blame for the high number of children, more than 17,000, under five who die of diar-

rhoea every year.

Of the deaths, "90 per cent of them are directly attributed to poor water, sanitation, and hygiene". The ministry is pushing for a campaign that helps households and communities to build their own latrines.
"Since the beginning of

the campaign to declare rural Kenya Open Defecation Free, we have seen significant gains in sanitation and hygiene, but we must maintain this momentum," said Chief Public Health Officer Kepha Ombacho.

According to Mr Ombacho, more than 800,000 Kenyans are now living in areas that are open-defecation-free. Nambale sub-county became

the first to be declared Open Defecation Free last year.
Mr Ombacho said the

government was preparing to launch a national behaviour change communications campaign to help encourage people to use pit latrines.
"We ask community leaders

to keep in mind the importance of these goals in their annual budget planning, and adequately consider funding for proper sanitation initiatives next year," he said.

The report came soon after another released early this month that revealed that more than 40 per cent of Kenyans use pit latrines, buckets and bushes to relieve themselves.

The inequality report released by the Society for International Development and Kenya National Bureau of Statistics indicated that some counties have stark differences between households headed by men and female-headed families on access to improved sanitation.

"Use of the bush accounts for 17.5 per cent of the population—reflecting lack of basic infrastructure or household initiatives towards the use of alternative forms of waste disposal," said the report.

The document, Pulling Apart or Pooling Together, said the proportion of households that are headed by women use the bush slightly more, at 24.2 per cent, compared to the male-headed households, at 23.9 per cent.It said only 5.9 per cent of the country's population was connected to main sewers systems hence have in-house toilets.

Nairobi county, according to the report, has the highest population with access to improved waste disposal means, at 87.9 per cent. Wajir is on the other end of the stick, with only at 6.8 per cent enjoying improved waste disposal services.

#### 15 times better

Access to improved modes of waste disposal in Nairobi county is 15 times better than Wajir county.

A World Bank report on

water and sanitation for 2012 was the first to indicate that 21 million Kenyans, about half the population, use insanitary or shared latrines, while 5.6 million others do not have latrines at all and are forced to defecate in the open.

The report notes that open defecation costs the economy Sh7.3 billion every year, yet eliminating the practice would require construction and use of less than 1.2 million latrines. The study established that

the majority of these costs are as a result of premature deaths from diarrhoea of 23,000 Ken-



# **POLITE REMINDER**

# **ANNUAL GENERAL MEETING**

The Sixty-first Annual General Meeting of the Company will be held on Friday, 20th December 2013 at 11.00a.m. at Kasarani Gymnasium, Thika Road, Nairobi.

By Order of the Board

R. MIANO **COMPANY SECRETARY** 

**16 December 2013** 



## **KENYA INSTITUTE OF** STUDIES IN CRIMINAL JUSTICE

**CENTRE FOR FORENSIC INVESTIGATION & SECURITY MANAGEMENT** 

JANUARY MAY AND SEPTEMBER 2014 INTAKES

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- Higher Diploma in Forensic Psychology and Criminology
- Higher Diploma in Criminal Justice Administration and Management
- Higher Diploma in Security and Disaster
- Higher Diploma in Economic Crimes Management
- Higher Diploma in Intelligence and Forensics
- Higher Diploma in Transport Security Management

### **B. DIPLOMA PROGRAMMES**

- Diploma in Criminology
- Diploma in Intelligence Management Diploma in National Security
- Diploma in Public Prosecution Management
- Diploma in Public Administration
- Diploma in Security Management Diploma in Penology and Correctional
- Services Management
  Diploma in Police Science and Crime
- Management
- Diploma in Fingerprint & Biometrics Science
- Investigation
- Diploma in Forensic and Criminal

#### C. CERTIFICATE COURSES (MONTHLY INTAKES)

- Certificate in Disaster Management Certificate in Intelligence Collection
- Certificate in Forensic Investigations
- Certificate in Security Management
- Certificate in Prison Administration
- Certificate in Fingerprint Technology
- Certificate in Terrorism Studies
- Certificate in Criminology and Forensic
- Certificate in Biometrics Technology Certificate in County Administration
- Certificate in Intelligence Analysis
- Certificate in Economic Crimes Investigation

Target Groups: Military Police Officers, Police Officers, Crime Scene Officers, Immigration Officers, Intelligence, Officers, Prison Officers, Security nel. State Counsel and other interested professionals and individuals

Qualifications: Certificate - D+ in KCSE, Diploma C-in KCSE, Certificate in the relevant field, H/Diploma-C in KCSE, Relevant Diploma.

Applications should be addressed to:-

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