

LIBERIA Water and Sanitation Profile

| POPULATION AND HEALTH STATISTICS | | |
|--|-------------------------|--|
| Population (2006) | 3.6 million | |
| Proportion of population living in urban areas | 59% | |
| Urban/Rural population growth rates (1980-2000) | 3.8 / 1.8% | |
| Diarrheal deaths/year (2004) | 4,300 | |
| Under age 5 mortality rate | 235/1000 live births | |
| Under age 5 mortality rate due to diarrheal disease (2000) | 17.3% | |

SECTOR OVERVIEW

Water and sanitation access data in Liberia is generally unreliable. However, it has been obvious that the water supply and sanitation (WSS) sector has seriously deteriorated after 14 years of civil war. Destruction and population displacement (approximately 500,000 internally displaced people, about half living in camps and half in informal settlements) means that almost a complete rehabilitation of the WSS systems is required, including re-starting operation and maintenance (O&M) activities. With approximately 80 percent of the population living in absolute poverty and 54 percent in extreme poverty (living on less than US\$1/per day), the WSS sector will be reliant on outside donor assistance for years to come. Cost recovery is a much lower priority than meeting essential needs.

Rapid population growth in the capital, Monrovia, has severely stressed the only marginally functional urban WSS system. Rural areas remain relatively unpopulated and devoid of functional facilities while other urban areas have had their systems fall into complete disrepair. Looting, vandalism, lack of spare parts, and lack of technical knowledge perpetuate the

difficulty in providing service. Management of water points remains a major challenge, even in those areas that are accessible. Communities are generally unwilling or unable to contribute funds for upkeep.

SECTOR FRAMEWORK

The civil war's effects on Liberia's WSS infrastructure precipitated the same destructive effect on the WSS institutional arrangements and capacity to manage the WSS sector. Although a number of laws, rules, and a regulatory framework existed in the past, government and donor efforts at rebuilding have taken precedence over other policy issues.

In general, four government ministries oversee the WSS sector. WSS service is provided by one public corporation and number of city corporations. The rules governing these bodies have not changed; however, the Water and Sanitation Coordination Committee and the Inter-ministerial WatSan Committee are updating and developing standards, guidelines, policies, and laws for the WSS sector. Although good coordination of WSS sector objectives continues in the committees, a stronger secretariat is needed to effect the recommendations of both committees. In addition, greater transparency and

| WATER AVAILABILITY IN LIBERIA | | |
|--|--------|--|
| Renewable water resources per capita, m³/person/year (1960-2007) | 67,207 | |
| Water withdrawals, m³/person/year (2000) | 36 | |
| Projected water resources per capita, m³/person/year in 2015 | 45,904 | |
| Note: 2015 projected water resources per capita is a straight- line regression calculation based on population growth rates | | |

KEY AGENCIES

| Agency | Description | Contact Information |
|---|--|--|
| Liberia Water Sewer Corporation (LWSC) | Government owned for-profit agency WSS service provider for urban areas greater than 5,000 people | Clarence M. Momoh, Technical Manager cmurraymomoh@ya hoo.com Tel: 231-6533-814 |
| Ministry of Planning and Economic Affairs (MoPEA) | Regional development planning and coordination | |
| Ministry of Health (MoH) | Water quality monitoring | |
| Ministry of Rural Development | Rural WSS service provider | |
| City Corporations | WSS services in those cities not served by the LWSC | |

accountability need strengthening so that political and financial interference does not constrain sector rebuilding.

THE URBAN SUB-SECTOR

Liberia's cities experienced rapid growth throughout the 14 years of civil war as people in rural areas and small towns abandoned their homes for refuge in the cities. Among the cities, Monrovia experienced the greatest amount of immigration. The population of Monrovia is estimated to have increased from 700,000 to 1.2 million people throughout the last 10 years of the civil war.

During a 2004 assessment, it was estimated that the water production rate in Monrovia was only 10 percent of the production rate of 1990. Additionally, the Liberia Water and Sanitation Corporation (LWSC) and private pumpers have become more dependent on groundwater wells, however very few of the wells are believed to be free of contamination. The LWSC still requires significant subsidies from outside donors even though service is reduced to only a small part of Monrovia. Outside of Monrovia, the 10 managed water systems completely collapsed during the civil war. The populations in these areas have relied on

spring water, untreated surface water and community operated wells.

Finally, all sewerage systems have broken down. In Monrovia, the government and donors have relied on pumper trucks to remove wastewater and sewerage that has collected in low spots since lift station pumps and the wastewater treatment plant have been inoperable for the duration of the civil war. As a result, most Liberians have come to rely on pit latrines or onsite septic tanks. In those areas where sewerage or sanitation facilities are not available or completely inoperable, residents have resorted to open defecation.

THE RURAL SUB-SECTOR

During the war, many rural areas were abandoned for the relative safety of the cities. Looting and vandalism rendered many wells and pumps inoperable or missing. Rural village water committees or user associations that operated in the past are now largely defunct. Sanitation facilities such as pit latrines and septic tanks suffered similar damage and if salvageable, will likely need significant rehabilitation or back filling to protect public health.

DONOR INVOLVEMENT

Donor involvement is coordinated through the Infrastructure and Basic Services Committee of the Liberia Reconstruction and Development Committee (LRDC), which is the main aid coordination body for

URBAN

RURAL

52%

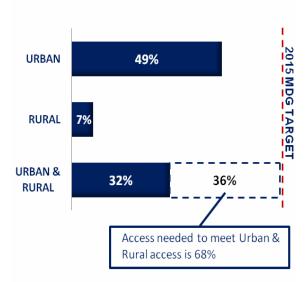
URBAN & 64%

RURAL

63% MDG Target claimed to have been met in Urban & Rural areas

Data Source: UN MDG Indicator Database

Meeting MDG 7: Access to Sanitation in 2006



Data Source: UN MDG Indicator Database

development assistance. Major donors operating in the WSS sector include the World Bank, the African Development Bank, UNICEF, and the European Union.

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| DONOR | ACTIVITIES | CONTACT INFORMATION |
|----------------|---|---------------------|
| The World Bank | Urban WSS infrastructure redevelopment and capacity building | |
| European Union | Urban WSS infrastructure redevelopment and capacity building | |
| UNICEF | Water, sanitation, and hygiene promotion Basic service access to internally displaced persons in refugee camps Assessment of WSS facilities | |
| AfDB | Urban WSS infrastructure redevelopment Urban WSS sector reforms Management capacity building | |

Additional information and sources: Statistics were compiled from the WHOSIS database, WRI-Earthtrends Water Resources and Freshwater Ecosystems database, and the UN MDG Indicators database. Other sources include the United Nations / World Bank – Liberia Joint Needs Assessment Sector Working Paper (2004), UNICEF – Liberia Water, Environment and Sanitation Country Profile (2005), and the World Bank – Emergency Infrastructure Project Supplemental Component Project Paper (2006).

This Water and Sanitation Profile was prepared under the **Advancing the Blue Revolution Initiative (ABRI)**. ABRI is funded by the U.S. Agency for International Development and addresses some of the most challenging water issues in the Middle East and Africa including the lack of access by the poor to improved water and sanitation services, inefficient and nonproductive water use, and transboundary river basin management. ABRI works closely with host country governments, actively pursues co-investments from the private sector, reaches out to likeminded foundations, and partners with regional institutions.