

FEATURE

SDG6: Access to Clean, Safe Water: A Case Study of Khayelitsha Township, Cape Town

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Introduction

Safe and clean drinking water is indispensable for sustaining life and health, and is fundamental to the dignity of all. This article investigates the lived experiences of the residents and their access to water in the township of Khayelitsha in Cape Town, South Africa. The reference points are Sustainable Development Goal (SDG) 6 and General Comment 15 of the Committee on Economic, Social and Cultural Rights (CESCR). The methods of qualitative research, literature review, and interviews and observation are used to gain a better understanding of the needs of the residents.

The conclusion is that residents in government subsidised homes (RDP homes) find access to water stressful, challenging and a struggle. They feel powerless, and are pressured by their inability to pay for water. This shortage has negative effects on food security, health, livelihood choices and educational opportunities. Water becomes even more essential for survival given that hand-washing is a key measure in limiting the spread of Covid-19.

For the residents, access to sufficient water remains a daily challenge and puts them at high risk due to ongoing water apartheid. The government must thus provide constant access to sufficient water to the most vulnerable residents.

Problem statement and research question

Water is essential for life. Safe and clean water is indispensable for sustaining life and health, and is fundamental to the dignity of all (OHCHR 2010: 1). Shortage of water, poor water quality and poor sanitation have negative effects on food security, livelihood choices

and educational opportunities (OHCHR 2010: 3, SAHRC 2014: 14&25). The current water crisis can be traced back to poverty, inequality and unequal power relationships, and is reinforced by social and environmental challenges, increasing urbanisation, the depletion, pollution and privatisation of water resources, and climate change (OHCHR 2010: 1).



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Section 27(1) of the Constitution of South Africa states that everyone has the right to access to clean water and proper sanitation. However, the reality in many townships looks very different, and this reflects a structural problem which is due to the large wealth gap be-

tween the rich and poor and to persisting racial segregation. The wealth gap and racial segregation reduced the access of black and poor people to water and sanitation. On the one hand, the water crisis is about water scarcity, and on the other hand it is the product of structural discrimination of access to water, also known as water apartheid. After assessing the problems that South Africa faces, it is clear that its water issues are the result of a flawed system historically based on institutionalised racism and discrimination against many of its people.

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This research investigates the lived dimensions of water access in impoverished and marginalised urban areas in South Africa. The target group consists of the residents of the township of Khayelitsha in Cape Town. Equitable and universal access to water is of particular importance in the context of post-apartheid South Africa, where there has been a strong desire to abolish deeply-rooted historical colonial inequalities through improving the quality of life of formerly marginalised populations (Rodina 2016: 58). The research draws attention to a new development in the discussion about universal access to water, since the challenges caused by Covid-19 are related to the socio-economic rights of impoverished residents in the townships in South Africa.

The object of this research is to acquire a balanced picture of access to water for residents of Khayelitsha, with reference to SDG 6, which refers to the CESCR's General Comment 15, 'The Right to Water' (articles 11 and 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR)). The research question is: How do residents living in RDP homes experience access to water in Khayelitsha?

Human rights perspectives

In order to address the water crisis, the United Nations (UN) has increasingly recognised that access to safe drinking water must be considered within a human rights framework. While access to water is not yet recognised as a self-standing human right in international treaties, international human rights law contains specific obligations related to the access to safe drinking water.

In 2002 the CESCR framed a general comment on the right to drinking water, which is defined as the right of everyone 'to sufficient, safe, acceptable, physically accessible and affordable water for personal and domestic uses' (OHCHR 2010: 1). The Committee underlined that the right to water was part of the right to an adequate standard of living, and was indispensably linked to rights to health, adequate housing and food. It defined the right to water, including key principles like acceptability, physical accessibility, affordability, quality and safety (OHCHR 2010: 4&8; UNESCO 2019: 36-38). In 2010, the UN General Assembly recognised the human right to water and sanitation, and acknowledged that clean drinking water and proper sanitation are essential to the realisation of all human rights (UNDESA 2014, A/HCR/RES/16R).

In 2015, the UN Agenda 2030 for Sustainable Development was adopted by the General Assembly. It contains 17 SDGs (United Nations 2015: 1). Goal 6 of the SDGs – 'Ensure availability and sustainable management of water and sanitation for all' (United Nations 2015: 14) – is considered one of the central SDGs. Its essential functions are related to human health, dignity and the survival of the planet (UNESCO 2019: 36).

At the regional level, draft guidelines on the right to water in Africa have been developed by the African Commission on Human and Peoples' Rights. These guidelines state that persons living in informal settlements should not be denied access to water because of their housing status. Their living situation should be upgraded through the provision of water services (African Commission on Human and Peoples' Rights 2015: 17).

With regard to all human rights obligations to clean water, South Africa, as a UN member state, is bound by them, and responsible for realising access to water for all. South Africa provides an example of the progressive implementation of the human right to water as a constitutional guarantee of the right of citizens to access sufficient water. The Constitution of South Africa states that ‘all citizens have the right to access sufficient food and water’ (Gov ZA 1996: 11).

Furthermore, its Free Basic Water (FBW) policy of 2001 sets a minimum amount of water for basic needs, free of charge, to ensure that the constitutional right to water is realised, regardless of the ability to pay. It was initially mandated that municipalities provide at least 25 litres per person per day of free water for basic needs, within 200 meters of their dwelling. In 2007, this was revised to 50 litres per person per day (Rodina 2016: 58-59).

Methodology

This research used three different methods. There were interviews with residents; one group discussion with community leaders; and field observations. The collection of field observations and interview data took place in March 2020. The first field observation on communal water taps was done during a township tour with a local guide in the shack area QQ of Khayelitsha. The second field observation on water management devices was done on a tour with the community leader in the neighbourhood of the Uxolo High School in Mandela Park, Khayelitsha. The group discussion with community leaders about their difficulties concerning the realisation of the right to health took part during community workshops hosted by the Socio-Economic Rights Project at the Dullah Omar Institute, University of the Western Cape. Three interviews were held with residents in the neighbourhood of the Uxolo High School in Mandela Park, Khayelitsha.

Results

The main result is that access to water for the residents is highly contextual. The residents in shack area QQ in Khayelitsha can collect water free of charge and theoretically reach the 50 litres per day per person. However, the collection of water depends on distance and time. The communal taps are not maintained, and are often unhygienic and polluted with dirt. Their design and location make them inaccessible for vulnerable groups. It is not safe to collect water at night as their location is not visible and criminal attacks happen often. Also, in the case of a fire in the shacks, the communal taps provide insufficient water to extinguish the fire. Nevertheless, a greater risk is currently posed by Covid-19, as the communal taps are not cleaned and pose a high risk of spreading of the virus.

The residents in the Uxolo High School Area in Mandela Park, Khayelitsha, have a small amount of water per household for free. As the interviewees either are or were unemployed or have lost their jobs due to the national lockdown, they are unable to afford more. As a consequence, they are often unable to afford the necessary 50 litres per person per day. These taps are more accessible than the communal taps, but bring their own problems, as the water is unaffordable. The water management devices are much discussed in the neighbourhood; the residents receive letters and bills, and fear disconnection because they cannot pay.

The interviewees stated that their biggest need is access to water at home and they hope that this will not be denied due to their income. They are generally aware of their human right to water, but they feel powerless, and do not know what to do. When they have no water, they rely on the help of their community. However, their neighbours are in a similar position and do not have enough water either. Most of the interviewees were also afraid of the Covid-19 situation because of the



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shortage of water in their homes. One interviewee, as well as the community leader, stated that this shortage promotes the spread of Covid-19.

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These results mean that access to water for the residents of Khayelitsha has positives and negatives. It is helpful that water at communal taps is free; however, security, design, maintenance and hygiene are all below standard. The collection of water is a barrier against ensuring that everyone has the necessary daily amount of water. It can be assumed that the collection of water, with its attendant physical exertion, will fall to women and children.

Indoor water taps do not present problems of security, design, maintenance and hygiene, but they have the disadvantage of costs. Because of lack of employment (possibly because of the national lockdown), the residents cannot afford water anymore. Many residents are unemployed, and Covid-19 has made this problem worse. The amount of water provided free of charge is not enough, so residents go into debt or rely on the support of neighbours. The amount free of charge is not sufficient to provide the necessary water per person per day, which pressures the residents to go into debt or rely on solidarity. This puts them at great risk, especially in times of Covid-19.

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When compared to the research of Rodina, the same picture is found, where the residents are divided into unregistered shack residents with communal water taps and RDP homes with private water access.

Similarly to Rodina's results, the communal taps were often described as dirty, filthy and messy. Also, residents without access to water have to ask residents in the RDP homes for water. This too caused a similar problem found in this study where neighbours cannot afford more water. A common theme was: 'Wasting water means wasting money', which conforms to the statement: 'It is all about the water bills'.

Likewise, there is a big problem of safety in the townships, especially at night due to crime. In addition, safety concerns related to health risks were prominent themes of the interviews and group discussions. It was expected to find that water access in the shack area, through communal taps, is often inconvenient, unsafe and physically inaccessible. In contrast, it was unexpected to be confronted with the water cut-offs of the residents in RDP homes, who might seem to have a higher living standard due to their private water access and housing status. Whereas the in-house water taps provide hygiene and cleanliness, and tend to be more convenient and significantly safer, in terms of health risks and crime, the problem of paying for water is of importance.

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Rodina's research merely touches on this issue by stating that RDP home residents do not want to share water, as with the in-house service a sense of ownership arises (Rodina 2016: 62-65). The problems concerning the inability to pay for water, the water cut-offs, the denial of access to water and the current health risk of Covid-19 are new.

Conclusion

This research showed that a township does not mean that people only live in shacks. There are also RDP homes with private in-house water access. The South African government tries to change the image of shack areas by sugar-coating these areas through the building of RDP homes for residents of shack areas. Shack residents can apply for these houses, yet actually prefer their shacks as it takes decades to receive a RDP house, which may be far away from their neighbourhood, and brings financial burdens like water bills.

Here lies the problem with access to water – the residents in the shacks and in the RDP homes are both impoverished groups, even when their housing status might suggest differently. The shack residents can access water without limit and for free, despite physical access remaining problematic. There is also diversity in the design of housing, which brings two different kinds of access to water with it – the communal tap or the private in-house tap. But the users are the same poor people, and those who have private water access can also still not afford the water bill. The residents in the RDP homes are denied access to water because of their inability to pay.

The former UN Special Rapporteur on access to water and sanitation, Catarina de Albuquerque, has stated that disconnection of water supplies because of the inability to pay due to a lack of means may constitute a violation of human rights (UNCESCO 2019: 37).

Concerning the human rights perspective, it was great to recognise the access to safe and clean drinking water as a human right as this addresses global inequalities in access to water. Most residents in the RDP homes know about this right, but feel powerless in claiming it. The lived-experience approach gave valuable insights into the on-the-ground realisation of the human and

constitutional right to water. Hence, social workers and human rights advocates can get a deeper understanding of the lived dimensions of different forms of water access to better address the inequalities.



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Moreover, it gives current, important, and first-insight knowledge of the impact of the access to water and the spread of Covid-19. Water becomes essential to survive, as hand-washing is a key measure in limiting the spread of Covid-19, and prevents other public health risks.

However, the ongoing water apartheid puts residents in the township at high risk due to their inability to afford water (as well as sanitisers, health insurance, and adequate housing). Covid-19 emphasises how critical access to water is for the residents in townships because their access to safe, clean, affordable drinking water remains a daily challenge. Besides, the communal areas are a perfect base to exchange bacteria or viruses, which makes it crucial that these taps remain hygienic.

As the safest ways to stop the distribution of the virus is repetitive hand-washing, the provision of clean water to the residents is essential for them to remain healthy. Thus, the government must provide continuous access to sufficient water to those residents living under the most deprived conditions. With regard to the future, it is essential to abolish the two classes of access to water for the residents in the townships, and to ensure a sufficient amount of water per person per day.



Covid-19 emphasises how critical access to water is for the residents in townships because their access to safe, clean, affordable drinking water remains a daily challenge.

To answer the research question: The residents living in RDP homes experience access to water as stressful, challenging and a huge struggle. They feel powerless, and are pressured by their inability to pay for water.

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