



SPECIAL RELEASE

Most Filipino Families have Access to Improved Source of Drinking Water (Results from the 2017 Annual Poverty Indicators Survey (APIS) and Water Quality Testing Module)

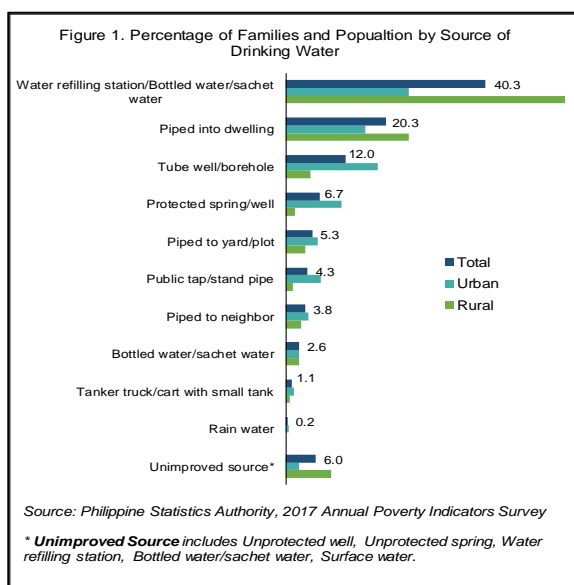
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Nine in ten Filipino families have an improved source of drinking water

The World Health Organization and UNICEF Joint Monitoring Report (2017) defines improved drinking water sources as those that have potential¹ to deliver safe water by nature of their design and construction. These include piped water tubewells or boreholes; protected dug wells, protected springs; rainwater. Families that use bottled water or refilling stations for drinking are classified as using an improved source only if the water they use for cooking and handwashing comes from an improved source.

According to the results of the 2017 APIS, 94 percent of the 24 million Filipino families have improved source of drinking water. In the urban and rural areas, 97 and 91 percent, respectively, have improved source of drinking water. Residents in rural areas are more likely to have an unimproved source of drinking water than those in urban areas (9.1% vs. 2.6%). Almost four in every five families (77%) do not practice any method or treatment in ensuring that their drinking water is safe to drink (Table 1a).

On the sufficiency and accessibility of drinking water, majority (88%) of the families reported that drinking water is sufficient while four percent of families are unable to obtain sufficient water because it is not available from source. Three in every four families (75%) obtain their drinking water within the premises or within their yard/plot. It is more likely that families in urban areas have their water sources within their premises (87%) compared with families in rural areas (63%) (Table 1a).



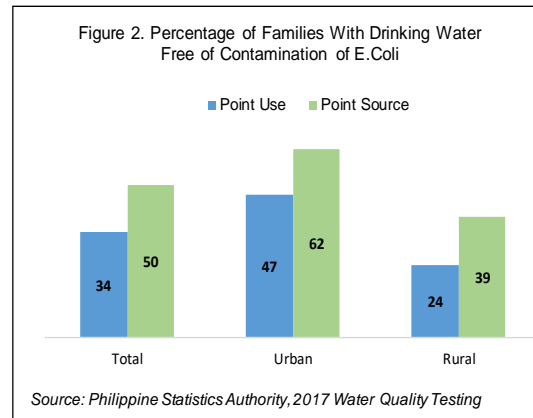
¹ Improved water source does not guarantee that the water will be safe for drinking

One in Three Families' Drinking Water is Free From Contamination of Escherichia coli (E.coli)

E. coli is a faecal indicator bacteria, hence it is likely to be present when faeces or raw sewage has entered the water supply. The presence of *E. coli* in drinking water does not necessarily mean that the person drinking it will become sick, but it indicates that over time the household is at a higher risk for waterborne diseases.

Although most strains of *E. coli* are harmless, others can make a person sick. Some kinds of *E.coli* can cause diarrhea, while others cause urinary tract infections, respiratory illness and pneumonia, and other illnesses (Centers for Disease Control and Prevention).

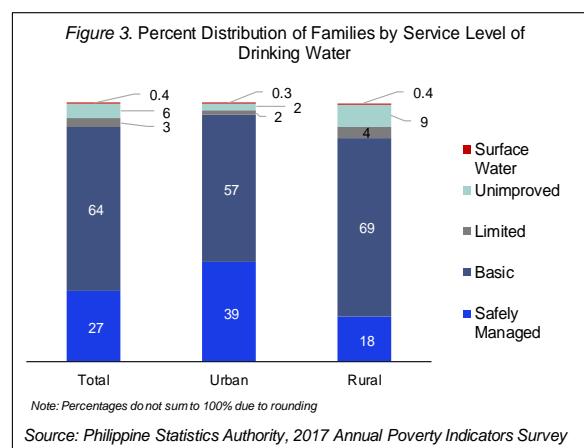
Based on the results of 2017 Water Quality Testing (WQT), a rider module in the 2017 APIS, with around 1,300 households sampled to test the quality of water that they actually drink in their homes (point use²) and the quality of their drinking water at the point source³, almost one in every three families (34%) have their drinking water at the point use free from faecal contamination. In this module, *free from faecal contamination* refers to drinking water that have zero *E.coli*. Families in urban areas more likely have drinking water free from contamination of *E.coli* compared with families in rural areas (Figure 2).



The percentage of families with drinking water with no contamination of *E.coli* is higher in the point source (50%) than from point use (34%). This may indicate that handling and storage may affect the quality of water (Figure 2).

Service Level of Drinking Water Source

Relative to the Sustainable Development Goal (SDG) monitoring for Goal 6.1 i.e., aims to achieve universal and equitable access to safe and affordable drinking water for all, drinking water has been classified according to service levels, namely: Safely-Managed; Basic; Limited; Unimproved; and Surface water (The WHO/UNICEF JMP Report, 2017). In 2017, based on the results of 2017 APIS and WQT module, 27 percent of families use “Safely-Managed” drinking water services, in which the drinking water is from the improved water source that is located on premises, available when needed and free from faecal contamination. More than 9 in every 10 (91%) of families have at least “Basic” drinking water services, in which the drinking water is from the improved source and collection



²Point use refers to the water samples collected from a glass of water that the families actually drink (e.g. the Water Tester will ask the survey respondent for “a glass of water that members of your family would drink” and the water samples of the household will be tested for *E. coli*).

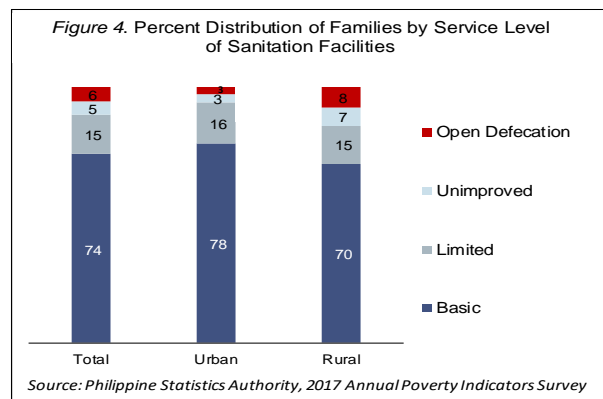
³Point source refers to the water samples collected from the source (e.g. if source of water is from the protected spring, the water tester will go to the protected spring to get 110ml water to sample for *E.coli*).

time is not more than 30 minutes for a round trip including queuing. Some families may either have access to improved water source but it took them more than 30 minutes to collect water, thus they are classified as having “Limited” drinking water services (3%). Five percent of families have “Unimproved” drinking water services which means that the drinking water is from unprotected dug well or unprotected spring while less than one percent have a source of drinking water from surface water or water directly from a river, dam, lake, pond, stream, canal or irrigation canal (Table 1b and Figure 3).

Inequalities are observed across areas of residence and income quintile⁴ groups. Families in the urban areas (39%) have higher percentage that have access to “Safely Managed” compared to the families in rural areas (18%). The percentage of families with access to ‘Safely Managed’ increases as income quintile increases ranging from 7.1 percent in the First Quintile to 49 percent in the Fifth Quintile (Table 1b).

Service Level of Sanitation and Hygiene

Goal 6.2 of the SDG is about achieving access to adequate and equitable sanitation and hygiene for all and ending open defecation, paying special attention to the needs of women and girls and those in vulnerable situations. In consonance with the SDG monitoring, sanitation has been classified according to service levels, namely: Safely Managed; Basic; Limited; Unimproved; and Open defecation (The WHO/UNICEF JMP Report, 2017)



Improved sanitation facilities are those designed to hygienically separate excreta from human contact. These include the following: flush/pour flush to piped sewer systems, septic tanks or pit latrines; ventilated improved pit latrines, composting toilets or pit latrines with slabs.

Disposal and treatment of excreta is not very common within household levels or that the families are not aware how the excreta are treated whether on site or transported and treated offsite. Hence, families using improved sanitation facilities were not classified as to using or not using safely managed sanitation services.

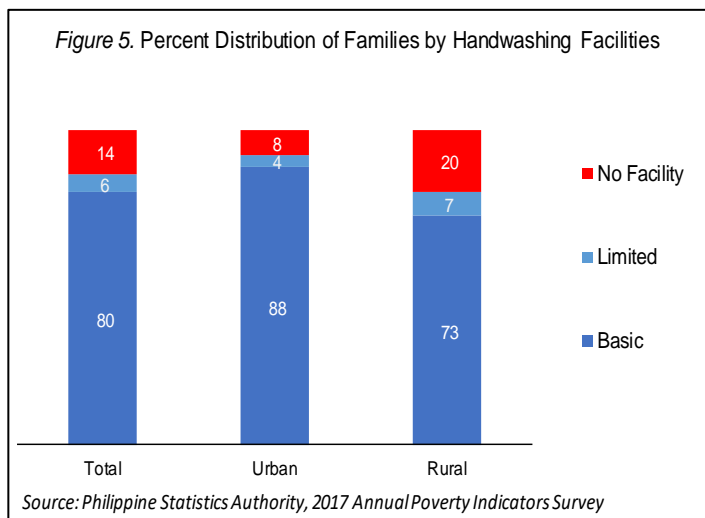
Based on the results of the survey, around 74 percent of the Filipino families have at least “Basic” sanitation services which have an improved sanitation facility that was not shared with other households while 15 percent have “Limited” sanitation services which pertain to improved but shared facilities. Five percent have a “Unimproved” sanitation services, when the families use pit latrines without a slab or platform, hanging latrines or bucket latrines. Around 6 percent of families practice open defecation.

Disparities are observed across areas of residence and income quintile groups. More Filipino families residing in urban areas have basic sanitation services (78%) in contrast to families residing in rural areas (70%). Moreover, more families residing in rural areas use unimproved facilities (7%) and practice open defecation (8%). With regard to income groupings, there are more families in the lower income quintiles than higher income quintiles

⁴In this survey, the family’s income is also collected. The per capita income of families is arranged in ascending order and the total number of families were equally divided into five groups to form income quintile groups. Families with the lowest per capita income belong to the first quintile while families with the highest per capita income belong to the fifth quintile.

which reported to have either a limited or unimproved sanitation facility. Almost 18 percent of the families in the lowest income quintile still practice open defecation.

The new global SDG indicators for handwashing is the proportion of population with handwashing facilities with soap and water. According to the results of the survey, 80 percent of families have a “Basic” service level of handwashing facility, which pertains to facilities with soap and water while 6 percent have handwashing facilities but without soap and/or water, which is considered as “Limited” service level. And, 14 percent of the families have no handwashing facility.



The proportion of families reporting limited or no facility at all tends to decline as the income quintile rises. Around 35 percent of the families in the lowest income quintile do not have any handwash facility.

The APIS is a nationwide survey conducted by the Philippine Statistics Authority (PSA). The 2017 round of APIS includes a Water Quality Testing Module (WQT) which included the testing for the presence of E. coli in the drinking water of families which indicates possible contamination. Around 11,000 sample households were covered nationwide in the survey with around 2,000 families drinking water were tested for contamination. The APIS is designed to provide non-income indicators related to poverty at the national level. It also gathered data on the socio-economic profile of families and other information related to their living condition.

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Attachments:

Table 1a- Percentage of Families and Population by Source of Drinking Water, Free from Contamination, Time to Obtain Drinking Water, and Treatment of Drinking Water, and Sufficiency of Water, According to their Residence, Philippines 2017

Table 1b - Percentage of Families and Population by Service Level of Drinking Water, According to their Residence and Income Quintile Group, Philippines 2017

Table 2a - Percentage of Families and Population by Sanitation Facilities, According to their Residence: Philippines, 2017

Table 2b- Percentage of Families and Population by Service Level of Sanitation Facilities, According to their Residence and Income Quintile Group, Philippines 2017

Table 3- Percentage of Families and Population by Service Level of Handwashing Facilities, According to their Residence and Income Quintile Group, Philippines 2017