Paraguay has made considerable progress in water and sanitation and is well on track to meet its MDG targets. There are, nevertheless, still considerable challenges in providing and sustaining services, notably in rural areas.

**Responsibilities for water, sanitation and hygiene**

The lead responsibilities for water and sanitation in Paraguay are under the Ministry of Public Works and the Ministry of Public Health and Social Welfare. The lead responsibilities for hygiene are under the Ministry of Public Health and Social Welfare and the Ministry of Education. A national plan for hygiene is in place and is partially implemented.

Technical assistance and financing for rural water boards is given by Servicio Nacional de Saneamiento Ambiental (SENASA) under the Ministry of Public Health. The institutional framework was set by law in 2000 whereby the regulator, Ente Regulador de Servicios Sanitarios (ERSSAN), establishes a regulatory framework and tariffs for the sector.

In general, there are three types of service provision: the main service provider, Empresa de Servicios Sanitarios de Paraguay (ESSAP); small scale informal or private service providers called “Aguateros;” and water and sanitation boards.

**Progress**

Since 2007, Paraguay has recognized in law that access to sufficient and quality water is a human right. There are also ambitious targets for the provision of piped water in urban and rural areas. Efforts have been made by the government, especially with local water and sanitation boards, to subsidize services for communities of less than 150 people.

**Challenges**

There are still many challenges to overcome to ensure safe and accessible WASH services to all, including providing services in rural areas, ensuring adequate surveillance of water quality, and increasing funds to reach national targets.

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**Sanitation, drinking-water and hygiene status overview**

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**Challenges**

There are still many challenges to overcome to ensure safe and accessible WASH services to all, including providing services in rural areas, ensuring adequate surveillance of water quality, and increasing funds to reach national targets.
Highlights based on country reported GLAAS 2013/2014 data

I. Governance

The Ministry of Public Works and the Ministry of Public Health and Social Welfare share the lead for drinking-water and sanitation services. The Ministry of Public Health and Social Welfare leads hygiene promotion initiatives and has a number of responsibilities in sanitation and water.

LEAD INSTITUTIONS

<table>
<thead>
<tr>
<th></th>
<th>SANITATION</th>
<th>DRINKING-WATER</th>
<th>HYGIENE PROMOTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Public Works and Communications (MOPC) / Directorate of Drinking-Water and Sanitation (DAPSAN)</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>Ministry of Public Health and Social Welfare / National Environmental Sanitation Service (SENASA)</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>Ministry of Public Health and Social Welfare / Directorate of Health Promotion</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>Ministry of Education and Culture</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
</tbody>
</table>

Number of ministries and national institutions with responsibilities in WASH: 7

There are no specific plans implemented addressing the issues of improving and sustaining services.

SPECIFIC PLANS FOR IMPROVING AND SUSTAINING SERVICES

- Keep rural water supply functioning over long-term
- Improve reliability/continuity of urban water supply
- To rehabilitate broken public latrines
- Safely empty or replace latrines when full
- Reuse of wastewater or septage
- Ensure DWQ meets national standards
- Address resilience to climate change

All data represented in this country highlight document is based on country responses to GLAAS 2013/2014 questionnaire unless otherwise stated.
II. Monitoring

There is a high level of data availability reported for policy-making, resource allocation, national standards and response to WASH related disease outbreak.

**MONITORING**

<table>
<thead>
<tr>
<th>Latest national assessment</th>
<th>SANITATION</th>
<th>DRINKING-WATER</th>
<th>HYGIENE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Use of performance indicators**

- Policy and strategy making: ✓
- Resource allocation: ✓
- National standards: NA
- Response to WASH related disease outbreak: NA

**Data availability for decision-making**

- Health sector: NA
- NA

**MONITORING**

<table>
<thead>
<tr>
<th>Surveillance</th>
<th>SANITATION</th>
<th>DRINKING-WATER</th>
<th>HYGIENE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td>Rural</td>
<td>Urban</td>
<td>Rural</td>
</tr>
<tr>
<td>Independent testing WQ against national standards</td>
<td>NA</td>
<td>NA</td>
<td>☒</td>
</tr>
<tr>
<td>Independent auditing management procedures with verification</td>
<td>NA</td>
<td>NA</td>
<td>✓</td>
</tr>
<tr>
<td>Internal monitoring of formal service providers</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

**Communication**

- Performance reviews made public: ☒ ☒
- Customer satisfaction reviews made public: ☒ ☒

III. Human resources

Human resource strategies are not developed for WASH services. There are, however, numerous constraints identified for human resources for WASH.

**HUMAN RESOURCES**

<table>
<thead>
<tr>
<th>Human resource strategy developed</th>
<th>SANITATION</th>
<th>DRINKING-WATER</th>
<th>HYGIENE</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ No.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Strategy defines gaps and actions needed to improve**

- Availability of financial resources for staff costs: ☐
- Availability of education/training organisations: ☐
- Skilled graduates: ☐
- Preference by skilled graduates to work in other sectors: ☐
- Emigration of skilled workers abroad: ☐
- Skilled workers do not want to live and work in rural areas: ☐
- Recruitment practices: ☐
- Other: ☐

**Human resource constraints for WASH**

- No. In development. ✓ Yes.

---

*a Few. b Some. Most. c Not reported. d Not used. e Used and informs corrective action. NA: Not applicable.*
IV. Financing

There is no reported financing plan for WASH. There are reported difficulties in absorption of donor commitments and an insufficiency of funds to meet MDG targets for sanitation.

FINANCING

**Financing plan for WASH**
- Assessment of financing sources and strategies

**Use of available funding (absorption)**
- Estimated % of domestic commitments used
- Estimated % of donor commitments used

**Sufficiency of finance**
- WASH finance sufficient to meet MDG targets

---

**SANITATION**
- **Urban**
- **Rural**

**DRINKING-WATER**
- **Urban**
- **Rural**

---

V. Equity

As a step towards addressing equity in access to WASH services, five disadvantaged groups are identified in WASH plans. There are also other measures to address equity, such as 100% subsidies for new water/sanitation boards with less than 150 users.

EQUITY IN GOVERNANCE

**Laws**
- Recognize human right in legislation

**Participation and reporting**
- Clearly defined procedures for participation
- Extent to which users participate in planning
- Effective complaint mechanisms

---

**SANITATION**
- **Urban**
- **Rural**

**DRINKING-WATER**
- **Urban**
- **Rural**

---

DISADVANTAGED GROUPS IN WASH PLAN

1. Poor populations
2. People living in slums or informal settlements
3. Remote populations
4. Indigenous populations
5. People living with disabilities

---

EQUITY IN ACCESS

**Figure 3.** Population with access to improved sanitation facilities
- Improved sanitation access
- Unserved

**Figure 4.** Population with access to improved drinking-water sources
- Improved drinking-water access
- Unserved

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COUNTRY HIGHLIGHTS • PARAGUAY • GLAAS 2014

- **GLAAS 2014**
  - **Improved drinking-water access**
    - **Rural**
      - Unserved
      - 94%
    - **Urban**
      - 80%
  - **Improved sanitation access**
    - **Rural**
      - Unserved
      - 20%
    - **Urban**
      - 18%

---