HUMAN RIGHTS TO WATER, SANITATION AND HYGIENE

EXAMINATION OF FRANCE BY THE COMITTEE ON ESCR

22/08/2023

Key words: right to water and sanitation, hygiene, migrants, exiles, right to health, human dignity, French overseas, inequalities, exclusion, poverty, access to water, water quality

I INTRODUCTION

1. COLLECTIVE OF CONTRIBUTING NGOS

Founded in 2007, the Water Coalition is a group of 30 French NGOs committed to defend the human rights to drinking water and sanitation and the preservation and sustainable management of water as a common good.

The members of the Water Coalition are ACAD · Action contre la Faim · BlueEnergy · CRID · 4D · Dynam’eau · EAST · Eau et Vie · Eau Sans Frontières International · Experts Solidaires · GRDR · GRET · Guinée 44 · Hamap Humanitaire · Human Dignity · Hydraulique Sans Frontières · Initiative Développement · Kynarou · Ligue des Droits de l’Homme · Morija · Première Urgence Internationale · Secours Catholique · Caritas France · Secours Islamique France · SEVES · Solidarité Eau Europe · Solidarités International · Vision du Monde · WECF · Wikiwater

More information: www.coalition-eau.org

The Water Coalition has been coordinating a working group on the human rights to water and sanitation in France since 2012, which brings together around twenty French NGOs and advocates for:

- The recognition of the human right to water and sanitation in French legislation
- Extending measures to ensure affordable access to water and sanitation services (social pricing of water, water vouchers, etc.)
- Guaranteed access to water facilities, toilets and showers for all people living in precarious housing situations (on the streets, in camps, shanty towns, squats, etc.).
CONTRIBUTION ECRITE DES ONG DE LA COALITION EAU : DROITS A L’EAU ET A L’ASSAINISSEMENT DANS LES OUTRE-MER

- Measures to improve access to water and sanitation in the French Overseas Departments and Regions

The author organisations of this submission are the NGOs of the Water Coalition and contributing NGOs to the Working Group on the Human Rights to Water and Sanitation in France : French Red Cross · Médecins du Monde Nord Littoral, Mayotte and Guyane · Observatoire Terre Monde · Sillages · Solidarités International · Calais Food Collective · Roots · Vents Contraires.

2. PRESENTED SITUATIONS

This report draws attention to the critical problems of access to water and sanitation for certain populations in the most deteriorated geographical areas of France:

- Overseas territories (Guadeloupe, French Guiana, Reunion Island, Martinique and Mayotte), where water is generally inaccessible, polluted and expensive, with regular breakdowns in access to public water services.

- On the northern coast of France, on the Franco-British border, specifically for exiled people, for whom access to drinking water and hygiene is a daily challenge and remains well below the reference humanitarian standards in crisis situations.

The analysis of these situations takes as its framework the five criteria of the human rights to water, sanitation and hygiene: Availability; Physical accessibility; Quality and safety; Economic accessibility; Acceptability.

The facts presented are based on data collected in the field, from local actors, supported by written reports and official figures, most often from the French authorities themselves, the references of which are given in the footnotes.

3. MAIN LAWS ON ACCESS TO WATER IN FRANCE

- The right to water and sanitation is linked to a number of French constitutional objectives (principle of safeguarding human dignity, right to decent housing, protection of public health).

- The right to access to drinking water is enshrined in article L. 210-1 of the Environment Code: “the use of water belongs to all and every individual, for his or her food and hygiene, has the right of access to drinking water under conditions that are economically acceptable to all”.

- The ban on water cuts and flow reductions was enshrined in Law no. 2013-312 of 15 April 2013 (Law Brottes).

- Law no. 2019-1461 of 27 December 2019 on involvement in local life and the proximity of public action authorises public water and sanitation utilities to implement social measures to provide affordable access to drinking water and sanitation for all.

- Article 1 of Order no. 2022-1611 of 22 December 2022 on accessibility and the quality of water intended for human consumption states that “Everyone benefits from access, at least daily, in their home or place of residence or, failing that, in their vicinity, to a sufficient quantity of water intended for human consumption to meet their needs in terms of drinking, food preparation and cooking, personal hygiene, general hygiene and to ensure the cleanliness of their home or place of residence” (Art. L. 1321-1 A of the French Public Health Code). Its implementing decree defines essential water requirements as “between 50 and 100 litres of water per person per day”. The decree requires local authorities to take the necessary measures to improve or maintain access for all to water intended for human consumption, even where there is no connection to

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1 Standards humanitaires SPHERE
2 Rapport A/70/203, par Leo Heller, ancien Rapporteur spécial des NU sur les droits à l’eau et à l’assainissement, 2015, pages 5 à 7
3 Ordonnance
4 Décret d’application
the public water distribution network intended for human consumption, including people in vulnerable situations due to social, economic or environmental factors”.

**Overseas**

- Article 1 of the Law for Real Equality in Overseas France, adopted in 2017, states that “The Republic recognises the right of overseas populations to real equality within the French people. [...] The State and local authorities [...] shall undertake appropriate public policies aimed at: 1° Reduce the differences in levels of economic, social and health development, environmental protection and enhancement, and differences in access to [...] public services [...] between France and their territories”.

- In 2016, France launched the Eau-DOM plan for the five overseas territories (Martinique, Guadeloupe, Mayotte, Reunion, French Guiana) and Saint-Martin. Scheduled to run for 10 years, this plan is an investment programme that takes into account the specific characteristics of each territory, in order to renovate public drinking water and wastewater infrastructure. Six years after the launch of the Eau-DOM plan, the investment required amounts to several hundred million euros per territory, but the progress contracts currently signed do not cover these needs or guarantee the effective exercise of the right to water and sanitation for people in precarious situations.

- On 25 October 2022, the French Economic, Social and Environmental Council (CESE) adopted an opinion on “Water and sanitation management in overseas France” and put forward 23 recommendations to ensure that the right of access to water is effective and equal for everyone in overseas France.

**Migration and the coastline of northern France**

- In its ruling of 21 June 2019 (no. 431115), the French Council of State recalled that mayors, who hold general police powers, must “ensure in particular that the right of all persons not to be subjected to inhuman or degrading treatment is guaranteed”, including in this case access to a sufficient number of water points, showers and toilets for migrants.

- In an order dated 2 June 2023 (no. 2301351), upheld by the Conseil d'Etat, the Administrative Court of Caen ordered Ouistreham town council and the Calvados prefecture to provide access to water, showers and toilets for migrants in the Ouistreham camp.

**4. PREVIOUS ALERTS AND RECOMMENDATIONS**

Several warnings have already been issued by national and international human rights authorities:

- As part of the 4th cycle of France’s Universal Periodic Review, several recommendations were made to France concerning the effectiveness of the rights to water and sanitation in France and overseas, and access to basic services for migrants.

- By special rapporteurs on drinking water cuts in Guadeloupe and their impact on several human rights (in July 2021) and on the violation of the right to adequate housing, health, food and physical integrity of migrants in Calais (in 2019).

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5 Rapport RSNU 2015 page 11
6 Ouistreham : le droit à l'eau des personnes exilées enfin reconnu - SOLIDARITÉS INTERNATIONAL (solidarites.org)
7 Recommandation n°6.187 de l'Irlande ; Recommandation n°6.185 du Vanuatu ; Recommandation n°6.342 du Costa Rica ; Recommandation n°6.186 du Sri Lanka ; Recommandation n°6.336 de la Somalie ; Recommandation n°6.339 de Djibouti ; Recommandation n°6.343 de l'Equateur ; Recommandation n°6.355 de l'Irak ; Recommandation n°6.176 de l'Angola
8 Communication de 5 rapporteurs spéciaux
9 Déclaration de fin de mission de la Rapporteuse spéciale sur le droit à un logement convenable présente ses observations préliminaires au terme de sa visite en République française du 2 au 11 avril 2019 | OHCHR
At the end of its 93rd session in Geneva (June 2023), the UN Committee on the Rights of the Child (CRC) issued recommendations to France asking it to guarantee access to drinking water for people living in the French Overseas Territories (§42. d) and to strengthen measures to ensure that unaccompanied children in transit, particularly in Calais, are not subjected to cruel and degrading living conditions, the destruction of their shelters, the use of disproportionate police force and the absence of protection measures (§23.b).

In reports by the Defender of Rights in 2015 and 2018 highlighting violations of the fundamental right to water, hygiene and sanitation of people exiled at the border (Calais, Grande-Synthe and Ouistreham) 10.

By the Défenseur des Droits 11 in a press release following a visit to Calais, denouncing the “degrading and inhumane living conditions” of exiles (2020) 12.

By the Commission nationale consultative des droits de l’Homme (CNCDH) concerning the situation on the coast of northern France, recommending “that sufficient and accessible sanitary facilities and showers be installed” (2021) 13.

II RIGHTS TO WATER AND SANITATION IN OVERSEAS FRANCE

1. LIMITED ACCESS TO WATER

1.1. Poor infrastructure

As a result of a chronic lack of investment in the renovation of drinking water supply networks, overseas territories have deficient infrastructures that are unable to provide a continuous supply of water to the entire population.

In Martinique, 53% of the water taken from the natural environment is lost in the pipes 14: remedying this problem would require the renovation of 500 km of pipes 15. In Guadeloupe, 64% of the water produced is lost in the networks, 1/3 of the pipes need to be renewed 16 and ¼ of the Guadeloupean population has no access to drinking water at home 17. In Mayotte, the drinking water network does not cover all inhabited areas and is non-existent in most shanty towns: around 30% of the population has no access to running water at home 18. Operation Wuambushu, carried out in 2023, reinforced these inequalities by destroying informal settlements, systematically evicting people living illegally and failing to implement an appropriate rehousing policy. Throughout the operation, there was no monitoring of respect for the rights to water, hygiene and sanitation of those being rehoused or evicted.

In French Guiana, 15% of the population (or 30,000 people, living in urban and peri-urban areas and along rivers) is affected by this lack of access to drinking water 19.

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10 rapport_calais-num-14.12.18.pdf (defurdesdroits.fr)
11 Français “Ombudsman”
12 Visite de la Défenseur des droits mardi 22 et mercredi 23 septembre à Calais | Défenseur des Droits (defenseurdesdroits.fr)
13 Avis sur la situation des personnes exilées à Calais et Grande-Synthe - Légifrance (legifrance.gouv.fr)
16 Chiffres de l’eau 2018 (p.3) et Chiffres de l’eau 2019 (p. 22-23) publiés par l’Office de l’Eau Guadeloupe, les services de l’Etat (DEAL et ARS), le Conseil Départemental, le Conseil Régional et les opérateurs
17 Proposition de loi rénovant la gouvernance du service public d’eau potable et d’assainissement en Guadeloupe
19 https://eau.guadeloupe.fr/l-eau-en-guadeloupe/eau-potable-et-assainissement/l-eau-potable-en-guayane#:~:text=En%20Guadeloupe%2C%20%20estime%20que,des%20communes%20de%20l%27inter%C3%A9t
The difficulties of connection and the lack of infrastructure are also indicative of poor housing conditions: connections do not always guarantee access to water with basic comfort (hot water, shower, etc.). In the overseas territories as a whole, 21.6% of the total population live without hot water in their homes. 45% of households in French Guiana live in accommodations without running hot water\textsuperscript{20}. Although the provisions of article 3 of decree 2002-120 of 30 January 2002 specify that the supply of hot water is not compulsory for dwellings located in the overseas departments, the right to decent housing, including hot water, remains an objective of constitutional value with which regulations must comply. A regulation prohibiting the installation of hot water systems in new or existing buildings, even those located in an overseas department, would therefore be in direct breach of this objective and therefore be unlawful.

1.2. A water service that is regularly cut off

The authorities in several French overseas departments and territories (Guadeloupe, Martinique, Mayotte) have put in place water towers (frequent water cuts) to reduce water distribution and avoid widespread interruption throughout the country. As a result, people have to live with water cuts, which affect both homes and public facilities (schools, hospitals, fire services, fountains, etc.).

In Mayotte, water cuts are widespread due to insufficient drinking water production capacity and pressure on resources. Since July, 17th 2023, the two main towns of Mamoudzou and Koungou and Petite-Terre have been cut off every night from 4pm to 8am the following day. The other villages in Mayotte are cut off three days a week. In Guadeloupe, an estimated 400,000 people are affected by water turns\textsuperscript{21}.

1.3. Access to water outside the home

To alleviate the problems of access to water, French Guiana and Mayotte have developed networks of pay-per-use standpipes (BFMs), providing access to water outside homes for a fee (this type of system exists in other countries; elsewhere in France, water fountains are free). These BFMs depend on a connection to the water network, which prevents them from being deployed in precarious neighbourhoods on the outskirts or on high ground where there is no connection. The solutions proposed by local authorities or the State do not take into account local ways of appropriating water resources and cultural references linked to water in these areas\textsuperscript{22}. As a result, cultural rights of overseas populations are not respected in the implementation of the right to water in France.

In French Guiana, as well as having to pay, the number of BFMs is insufficient for the population living in informal settlements (50 BFMs for 61 sites surveyed, i.e. more than 15,000 people on the coast)\textsuperscript{23}. Difficulties with maintenance and upkeep, as well as repeated damage to the facilities, mean that there are far fewer functional BFMs for these populations.

In Mayotte, BFMs are often located on the side of the road, far from precarious housing areas. It takes an average of 30 minutes to walk to these kiosks\textsuperscript{24}. According to data from Mahoraise des Eaux, 94 of the 142 BFMs installed are in use. Access to water from these kiosks also depends on payment by prepaid cards, making them difficult to use: distance from the recharging point, conditions of access to the subscription and supporting documents, payment methods, etc. These factors increase the exposure of the most vulnerable people (the disabled, the elderly, women, children, etc.) to the risk of financial or

\textsuperscript{20} Etude sur le mal-logement dans les départements et régions d’Outre-Mer de la Fondation Abbé Pierre, 2023
\textsuperscript{22} Thèse de Maëlle Nicault « L’expression des capacités, un facteur de résilience territoriale ? Le cas de la gestion de l’eau à Mafate », mai 2023
\textsuperscript{23} Source : Résorption-bidonvilles – Agir pour résorber les bidonvilles (beta.gouv.fr)
sexual abuse when they are looking for water. In addition, standpipes are sometimes subject to water turns, breakdowns and vandalism. What's more, the journey to and use of these facilities involves major risks for people in an irregular situation, against the backdrop of Mayotte’s highly repressive immigration policy. The police is frequently present near these facilities, restricting access to water for illegal immigrants who risk arrest, deportation or even placement in an administrative detention centre.

2. EXPENSIVE WATER

2.1. High water bills

In the Overseas, a significant proportion of the budget of insecure households is allocated to water and sanitation-related expenditure, between 13% and 19% depending on the territory, and systematically exceeds 3% of household income (the threshold at which the water bill becomes unaffordable). This forces people to choose between several basic needs such as water, food and clothing.

In Mayotte, the average price of water will be €4.81/m³ in 2020, compared with €3.56/m³ nationally. In this department, where the poverty rate is 77%, the decision was made to introduce a progressive pricing system, based on consumption bands (the less water the user consumes, the lower the band and the lower the bill). However, this environmentally-friendly system has proved ill-suited to the situation in Mayotte, where a large proportion of the population is not connected to the mains and uses collective water meters shared by several residents. As a result, the volume of water consumed on a single meter is significant and the water price bracket is high. This progressive pricing measure, which is the opposite of social pricing, backfires on the most vulnerable, forced to pay exorbitant bills.

In French Guiana, where the poverty rate is 52%, a social tariff is applied. The cost per m³ of water is €0.8 up to 60 m³. This social bracket is applied to all residents of the department who have a subscription with the Guiana water company. This does not apply to people living illegally or in informal settlements who, if they have access to prepaid cards, consume water at more than 3 times the social rate. This has led to people falling into debt and consuming non-potable water via private wells or rainwater harvesting, or connecting to the network illegally.

On Reunion Island, where the poverty rate is 39%, the rate of unpaid bills is twice that of the average (5.17% compared with 2.55%). The estimated bill in 2019 for a consumption of 120 m³/year is on average €280 island-wide, with a variation between €150 and €410, i.e. between 1/6 and 1/4 of the value of the net minimum wage. If you buy bottled water, the cost is 500 to 1000 times more expensive than tap water. In this context, a group action has been launched with UFC Que Choisir against CISE Réunion, a subsidiary of SAUR, for the Saint-André service, for failure to guarantee continuity of service while the operator continued to bill and distribute unhealthy water to more than 80,000 people.

In Guadeloupe, where water and sanitation services are inadequate, with regular and prolonged water cuts, and where the poverty rate is 34.5%, the average price of water and sanitation is €4.89/m³. Water bills can be very high (from around a hundred euros to several thousand, including during the health crisis, when water cuts were exacerbated).
Added to this is the additional cost of dock dues, a tax originally applied to imported products, which has gradually been extended to local production, particularly in Martinique and Guadeloupe. This tax is also applied to water distribution, and affects all consumers, including the most modest. Several operators deduct this dock dues unduly from the subscription part of the bill, which, being a service, should not be subject to it. Every year, users pay more than €150,000 in undue dock dues.

2.2. Costly alternative solutions

In the French overseas departments and territories, people with the fewest connections are also the most vulnerable. They are forced to find more costly solutions to access water: buying bottled water, reselling water without supervision (buying water in jerry cans), connecting to a neighbour’s private meter, using a nominee meter, and so on.

In Guadeloupe, to have access to safe drinking water, many users have to buy bottled drinking water (often imported, as chlordecone has been identified in bottled water produced locally), which costs 32.9% more than in France, not to mention the obvious environmental cost of transport and plastic production. The authorities or operators sporadically distribute bottled water to residents because of pollution or power cuts. However, these emergency measures remain insufficient, opaque and lead to inequality of treatment between users, as well as contradicting the need to produce and consume fewer plastic bottles.

In Martinique and Guadeloupe, the installation of water tanks attached to homes represents a significant cost for people on the margins of society. Although the subsidy rate for these cisterns varies from 50% to 90%, many households do not have the financial capacity to meet the cost (around €3,000), which is accessible almost exclusively to well-off households. These tanks also have operational weaknesses, and are unusable in the event of a power cut. Many households therefore choose not to invest in these expensive systems.

3. CONTAMINATED WATER

3.1. Non-compliant wastewater infrastructure

All the overseas territories are characterised by wastewater treatment failures, particularly in the case of non-compliant collective sanitation infrastructures, which is the case for 72% and 67% of wastewater treatment plants in Guadeloupe and Martinique respectively. In these areas, wastewater is discharged into ponds, mangrove swamps, rivers, the sea, beaches and roads, leading to the presence of muddy water or faecal matter at the tap in Guadeloupe.

When it comes to non-collective sanitation, many homes do not comply with current regulations, either because the sanitation system has failed or because they do not have one. In Guadeloupe, of the 54% of homes with individual connections, 75% are non-compliant. In Martinique, of the 60% of homes with individual connections, around 90% are non-compliant. In La Réunion, 47% of homes are connected to a non-collective sanitation system, of which 70% are non-compliant, although the impact

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41 Ibid. p326

is not quantified. In Mayotte, 80% of "official" dwellings are in non-collective sanitation: 42% of them discharge their wastewater without any means of sanitation.

In French Guiana, 60,000 people have their wastewater untreated by a collective system, whether public or private, and there are also a very large number of illegal residents in the region. Under these conditions, people may be forced to build in-ground latrines, impacting the quality of available groundwater and increasing the risk of contamination for people using surface water or wells for their daily consumption (hygiene, drinking, cooking).

### 3.2. Contamination factors

In French Guiana, water-related health risks affect a large proportion of the population, whether living in urban areas or isolated sites. The tropical environment is an aggravating factor, as it encourages the development of pathogens. For example, almost 40,000 people living in small communities were supplied with poor quality water from a drinking water distribution unit (excluding those not connected).

Health checks on human-driven pumps show that 18% of them supply water that is chronically contaminated with dangerous bacteria. Gold mining is also a problem in French Guiana, as it is responsible for the high mercury concentration in rivers located downstream of mining sites, rivers that are used by the populations of inland communities for their daily needs.

In La Réunion, where there are structural delays in the installation of drinking water treatment plants, 46% of people connected to the network do not have access to drinking water of sufficient quality. 5% of these people are supplied by networks where the health risk is proven (detection of pathogens) and permanent (lack of treatment).

Water quality is also affected by a number of chemical pollutions, exposing populations to potential or proven microbiological risks, requiring restrictions on use. In this respect, Mayotte has received repeated warnings from the Agence Régionale de la Santé (Regional Health Agency) regarding the lack of compulsory self-monitoring by operators to monitor water quality.

In Guadeloupe and Martinique, chlordecone (a dangerous pesticide banned by France in 1990, but used under a derogation system until 1993 in Guadeloupe and Martinique) has been found in some water catchments and then in the tap water of some municipalities. Over 90% of the adult population of Guadeloupe and Martinique is currently contaminated by chlordecone.

In La Réunion, saline intrusion (linked to overexploitation of the resource) has been observed in groundwater bodies, as has the presence of pesticides including atrazine (banned since 2003) and glyphosate. No fewer than ten water catchments used for the production of water intended for human consumption have had to be abandoned, and 16 of the 24 communes have been given formal notice due to the inadequate quality of the water intended for human consumption.
Surface water, which is often used for domestic supply in many areas, can also be affected by this contamination. On Reunion Island, while many surface water resources are used subject to treatment, some have been abandoned due to pollution (nitrate, saline intrusion or atrazine). In Martinique, 90% of these surface water sources are unfit for consumption due to bacterial pollution. Their consumption is not recommended by the health authorities, as they represent a proven risk to the population. While abandoning or restricting use is currently the most widespread solution, treating polluted water would also entail significant costs, and therefore major budgetary and technical constraints for the authorities responsible for water production and distribution.

3.3. Worrying health consequences

The total or partial lack of access to water, coupled with the poor quality of the water supplied to homes, has major health consequences and increases the risk of epidemics and water-borne, faecal-oral and vector-borne diseases. The health crisis in Covid19 was a violent reminder of the lack of access to water in the French Overseas Territories.

French Guyana has a high mortality rate due to enteric diseases, a characteristic that puts it on a par with developing countries. It is the French department with the highest mortality rate from infectious intestinal diseases. The departement suffered a cholera epidemic in 1991 and has seen regular cases of typhoid, which is transmitted by ingesting water or food contaminated by the faeces of an infected person. Infant mortality is also strongly linked to diarrhoeal diseases and pneumopathies associated with insanitary living conditions in precarious housing (without access to drinking water and defective waste water management), where people living illegally (without social security cover) or who are economically disadvantaged reside.

Mayotte experienced a major cholera epidemic between 1998 and 2000. Incidence rates of typhoid fever are very high: 231 cases of typhoid fever reported in Mayotte between 2019-2022 (annual reporting rate of 18/100,000 inhabitants, with a sharp increase in the reporting rate in 2022: 41/100,000 inhabitants), as well as hepatitis and gastroenteritis. Skin and parasitic diseases have also been recorded, including epidemics of scabies.

In Martinique and Guadeloupe, the presence of chlordecone in the water also remains a key health issue. According to the French National Institute for Health and Medical Research, chlordecone is a powerful endocrine disruptor. Classified as a possible carcinogen in 1979 by the World Health Organisation, this pesticide is suspected of increasing the risk of prostate cancer (which is twice as common and twice as serious in the French West Indies as in mainland France, with more than 500 new cases per year in Martinique and Guadeloupe).

RECOMMENDATIONS FOR FRANCE

- Urge France to guarantee continuous and affordable access to quality drinking water for all populations living in the French overseas territories, in accordance with Order no. 2022-1611 of 22 December 2022.
- Urge France to eliminate interruptions to drinking water services in Overseas France by renovating networks, improving efficiency rates and increasing drinking water production capacity.

54 https://www.martinique.ars.sante.fr/leau-des-sources-de-bord-de-route
55 L'alimentation en eau potable en Guyane : problématique et solutions appropriées, CAIRN.info, 2010/2 Vol. 22 | pages 181 à 192
57 Bulletin épidémiologie hebdomadaire_BEH_du 20/02/2001_Institut de veille sanitaire_p33 “le choléra à Mayotte”
58 Santé publique France – Bulletin de santé publique – Juillet 2023 – Mayotte
59 Ibid.
III LACK OF ACCESS TO WATER FOR EXILES

For the past fifty years, France’s northern coastline has seen a constant flow of people in exile. From Ouistreham to Dunkirk, the French coastline is a transit route for people who have settled there mainly for short periods, and is known as one of the main crossing points on the migratory route to the United Kingdom. According to local associations, between 1,000 and 3,000 displaced people are continuously present. The majority are single men, but there are also women, families, children and unaccompanied minors. Their homes are made up of tents or makeshift shelters in camps of varying size and density, scattered more or less close to urban centres (in woods, fields, expressways, bridges, etc.).

In this context, access to water is absolutely essential for displaced people for the following uses: drinking water, basic cooking, personal hygiene (hand washing, bucket showers).

1. NO GUARANTEED ACCESS TO WATER

1.1. Lack of water, sanitation and hygiene infrastructure

1.1.1. Water

There are virtually no fixed water points accessible 24/7 on the northern coast of France.

The Dunkerque/Grande-Synthe area is characterised by a total absence of public water access infrastructures. Since November 2021, the only access to water has been provided by independent associations, through the installation and filling of water tanks by Roots, or the occasional supply of water by other associations.

On May 29th 2023, six residents of the Ouistreham camp and five associations (Solidarités International, CAMO, Vents Contraires, Citoyen.nes en lutte and La Cimade) filed a petition for interim measures to improve access to water, sanitation and hygiene for exiles. On June 2nd 2023, the interim relief judge of the Caen administrative court recognised the violation of the right to water suffered by exiles living in Ouistreham. He ordered Ouistreham town hall and the Calvados prefecture to provide these people with access to water and sanitary facilities. Although a decision by the Conseil d’Etat validates these injunctions, the decision has not been fully implemented yet by the authorities and there has been no response to the requests for an appointment sent to the authorities by the applicants.

There is only one continuously accessible public water point in Calais, but it is located in an outlying area where hardly anyone lives since the occupants were evicted and the area fenced off. The town has two public fountains in the town centre, far from the camps, for a population of almost 76,000 (a very low ratio compared with public fountain installations in the rest of France: an average of 3.5 drinking fountains per 1,000 inhabitants in mainland France). This limited access to water and sanitation is the result of the “zero fixation point” policy, a French security strategy aimed at deterring migrants and making them invisible. This consists of frequently destroying every informal living space and preventing access to food and healthcare. However, it should be emphasised that the absence of drinking water or toilets does not discourage the presence of exiles on the north coast. In addition, this policy of non-fixation requires significant financial resources that could be invested in guaranteeing dignified living conditions for displaced persons.

1.1.2. Sanitation

Access to sanitation is not guaranteed on the northern coast either, as there is no sanitary infrastructure in the majority of camps, with the exception of self-built toilets, which do not guarantee “safe managed” access for all exiles.

60 Ouistreham : le droit à l’eau des personnes exilées enfin reconnu - SOLIDARITÉS INTERNATIONAL (solidarites.org)
As a result, the majority of displaced persons do not have access to toilets in their place of residence and are obliged to defecate close to where they live. Although two sites in Calais are equipped with a few chemical toilets, a number of problems (lack of regular maintenance, distance from living areas, etc.) make them unusable. What’s more, these toilets are sometimes moved without the exiles or independent associations being informed.62

1.1.3. Personal hygiene

In the Dunkirk area, a few shower slots are provided by associations in a gymnasium, for women only, but this solution is woefully inadequate.

In Ouistreham, no shower facilities are available close to the living areas. The only existing shower is on the beach. In all the areas analysed, the exiles have no means of washing their clothes, nor of accessing decent personal and oral hygiene on the living site on a continuous and guaranteed basis.

In Calais, there are no water points where people can wash their teeth and hands. Although the state has been forced to organise shower slots, these are only accessible 5 days a week via organised transport, and only for 8 minutes per person. According to several displaced people living at the border, the average number of showers taken is actually one per week. This inability to enjoy personal hygiene is at the root of numerous health problems. What’s more, the way the system works, which involves undressing as a group before being allowed to use the individual showers, has been the source of a great deal of violence and trauma for people who are already in a precarious physical and mental state.

1.2. Faced with a lack of infrastructure, water supplies are inadequate

- On the Dunkirk coast

In this area, the State and municipalities refuse to take any direct or indirect action to provide access to water, hygiene and sanitation. Despite the willingness of independent associations to provide a minimum level of access to water and sanitation, their capacity is very limited, as they rely solely on volunteers (extremely small teams) and receive no public financial support.

In Ouistreham, following the court’s decision in June 2023, a tap is available in the immediate vicinity of the camp, but this installation remains flimsy and temporary. A water supply continues to be provided by the associations, with a water tank being filled twice a week (by Vents Contraires) and bottles of mineral water being distributed every week by the Red Cross and Restos du Cœur.

- In Calais

Following the ruling in 2017 by the Council of State against the Prefecture of Pas-de-Calais following a dispute initiated by independent associations, state-mandated mobile water distributions were set up in the municipality in 2018.

These water distributions are carried out by La Vie Active, an association mandated by the Prefecture (State operator) in the municipality of Calais. However, they are highly irregular and unreliable in terms of location and timetables. In addition, they do not serve all the living sites (only 4 of the 8 living sites were served in 2021, and only 2 sites in 2022). Some distribution points are not served for weeks at a time. La Vie Active also offers a few showers in a gymnasium.

- Insufficient water volume

In all the informal settlements on France’s northern coast, the volume of water available per person per day is far from the international humanitarian standards used in complex emergencies (15 litres minimum per person per day). Yet the crisis situation on the French coast has been going on for years, in a country that is fully capable of providing an adequate volume of water to displaced people.

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62 Médecins du Monde, Programme Nord-Littoral
In Calais, the state-mandated distributions provide less than 10 litres of water per person per day (i.e. 8 times less water than people living in other informal settlements in France\(^63\), and 30 times less water than the average French person)\(^64\). Since July 2020, the volume of water available per person per day has remained stable, never exceeding 13 litres. Yet the French government uses these figures to highlight its actions in Calais and to justify the ban on water distribution by independent associations\(^65\).

1.3. Remoteness and discontinuity of the solutions implemented

According to SPHERE’s minimum standards for humanitarian response, a water point should be located no more than 500 metres from a living space, and the waiting time for access to water, hygiene and sanitation should not exceed 30 minutes\(^66\). In France, a developed country capable of managing emergency situations both financially and technically, NGOs recommend a distance of between 0 and 50 metres between the water point and each living area. If there is a water point outside the site, which is already a form of distance, the distance should not exceed 200 metres\(^67\).

In Calais, in September 2021, more than 8 out of 10 people were forced to walk 1.5 hours to access a state-run water supply. In the Dunkirk area, the only accessible tap\(^68\) is located 3.5 kilometres from the main living area.

The remoteness of the facilities considerably hampers access to hygiene. In Calais, showers are accessible by free shuttle bus, but it is not possible to go there on one’s own: people have to go through the La Vie Active meeting point, where they have to wait in long queues. In Dunkirk, showers are provided on Sundays by the Refugee Women’s Centre in a gymnasium located 9.6 kilometres from the main camp (a 2-hour walk), but no transport is provided. Since June 2023, the town of Mardyck has made a gymnasium available and the French Red Cross has accompanied people there twice a week (it is not possible to go there spontaneously).

The same applies to laundry hygiene: the only free options are in Calais with the Secours Catholique day centre (located in the town centre, far from where people live), which provides basins for washing clothes and free washing powder (but this solution is rendered useless in winter, when it is difficult to dry clothes outside\(^69\)). Collective Aid has also opened a launderette in Calais town centre.

In terms of access to toilets, the maximum distance to be covered between the place of residence and the facility must not exceed 50 metres, as recommended by the SPHERE minimum standards for humanitarian intervention. However, in Calais, the majority of displaced persons do not have access to toilets in their place of residence and are forced to relieve themselves outside, close to their place of residence. In Dunkirk, the only public toilets are located in a shopping centre 40 minutes’ walk from the main housing site (4 kilometres). However, people are regularly discriminated against at the entrance, where they are prevented from entering. In addition, identity checks are carried out every day by the border police on the road leading from the camp to the shopping centre.

1.4. Police presence and repression during water distributions

The lack of access to water, hygiene and sanitation in these areas is not only due to unavailability, but also to physical and administrative barriers.

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\(^{64}\) Economie | Un site du service public Eaufrance : la consommation moyenne d’eau en France en 2021 est de 149 litres par personne et par jour.

\(^{65}\) Calais : distributions de vivres sanctionnées - ASH | Actualités sociales hebdomadaires

\(^{66}\) UNHCR : https://emergency.unhcr.org/entry/32947/emergency-water-standard


\(^{68}\) A la ferme des Jésuites

\(^{69}\) Secours Catholique Calais
In Calais, non-continuous access to water is exacerbated by the systematic presence of the police during water distributions carried out by the service provider La Vie Active. In a context where police violence against exiles is frequent and has been repeatedly denounced by associations and national human rights institutions, this factor can dissuade displaced persons from accessing this vital resource. Access to the drinking water supplied by the State in Calais therefore systematically entails the risk of intimidation and physical and psychological violence. In addition, associations and exiles report police harassment and the theft of tents by the forces of law and order during water distributions, which can lead some people to refrain from using them.

2. HEALTH AND SAFETY CONSEQUENCES

2.1. Safety consequences

- **Water chore**

The remoteness of water access points and toilets are risk factors for people, who have to cope with long walks along the road without pavements and dangerous road crossings (without pedestrian crossings or traffic lights).

What’s more, these chores have a direct impact on personal protection and safety. Fetching water exposes people who are already in an extremely vulnerable situation to a number of risks (exploitation, violence or harassment by the police, etc.).

- **Monetisation and ownership of water points**

The absence of state-guaranteed access to water brings with it the risk of water being monopolised or monetised through practices of control or domination. These practices are common in informal settlements and restrict free and fair access to water for all, with a particular impact on the most vulnerable, who are subjected to the monetisation of a vital service (which also entails a greater risk of abuse, particularly gender-based and sexual violence).

Access to hygiene and sanitation is very limited and also poses many problems in terms of protection against sexual harassment and abuse for the most vulnerable (unaccompanied minors, LGBTQI+, women, children, people with disabilities, etc.).

- **Administrative barriers and criminalisation of solidarity**

In Calais, the prefecture has been hindering distributions by associations since September 2020, by issuing prefectoral decrees renewed every month between September 2020 and May 2022 (banning food and water distributions at more than 30 sites across the town on pain of a €135 fine. This effectively creates a criminal framework for prosecuting people who help migrants, making solidarity an offence). A new prefectoral order was issued in Calais in August 2022, preventing associations from distributing water and food in two camps where thousands of people are living.

These administrative decisions contributed to an increase in police harassment of volunteers in Calais during the provision of services by independent associations (through disproportionate police checks of volunteers’ vehicles and identity papers). Between January and August 2022, at least 186 cases of intimidation of volunteers were recorded by the Human Right Observers project, i.e. almost one a day.

- **Risks associated with the use of surface water sources**

Exiles use surface water (canals, rivers), which is often unsanitary, for their personal hygiene. In Ouistreham, many exiles tend to wash their clothes and bathe in the canal, exposing themselves to the risk of being hit by a boat. These risks are real: in August 2022, a 22-year-old person drowned near the Grande-Synthe camp while washing in the canal. 

70 HRO : Observateurs des droits de l’homme
71 Grande-Synthe : un jeune migrant mort noyé dans un canal aux abords d’un campement d’exilés (francetvinfo.fr)
2.2. Health consequences

Restrictions on access to water have direct impact on the health of exiles, who are already very vulnerable to health problems because of their precarious living conditions. The lack of water and the use of unprotected containers to carry and use water (dirty jerry cans, sharing bottles, etc.) have a direct impact on health, as does the lack of access to hygiene and toilets, and the close proximity of waste on the living sites.

In Calais, some people living in a camp in the town centre use water from a canal, which is dangerous to access and contaminated with a number of pathogens responsible for water-borne diseases, including acute diarrhoea. The use of this water source, which is directly linked to the lack of hygiene infrastructures, leads to the development of skin diseases and parasites.

These health consequences are all the more important for the most vulnerable groups: irregular and limited access to water has a direct impact on health and hygiene. For example, many of the dozens of children living in the Dunkirk area were observed with dirty faces and teeth.

In 2021, Médecins du Monde estimated that 92% of consultations were directly linked to the living conditions of exiles on the French north coast: dermatology: 27% - including 48% for scabies; ENT: 15%; pneumology: 11%; digestive disorders: 9%. The number of people needing scabies treatment at mobile clinics has doubled in the Dunkirk area (from 52 in 2021 to 106 in 2022). In the last quarter of 2022, the scabies epidemic on the camp was confirmed, representing 28% of the reasons for consultations, compared with less than 5% in the same quarter of the previous year. In addition, 43% of the people seen by the PASS had suspected scabies.

RECOMMENDATION FOR FRANCE

- Urge France to ensure access to 50 litres of continuous drinking water per person per day, as well as unconditional, continuous and safe access to sanitary and hygiene facilities for all exiled persons present on the northern coast, in accordance with Order no. 2022-1611 of 22 December 2022.

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72 Rapport rédigé par MDM et Vents
Contraires: https://drive.google.com/file/d/1y42RviodF3VwHToEtITDxTawgZq2bDLyO/view?usp=drive_link
73 Rapport d’activités - données 2022 du Programme Nord Littoral MdM