

CARE REPORT

COUNCIL OF GOVERNORS

FEBRUARY 20, 2016

Although water is not quite as scarce in Guatemala as in other parts of the world, high rates of waterborne diseases indicate poor water quality and inadequate access to sanitation. Exposure to contaminated drinking water and poor sanitation promote the spread of diseases, including diarrhea, which is the world's number one killer of children under 5.

According to recent data, more than 54 percent of the Guatemalan population lives in rural areas. Less than 60 percent of these rural households have access to clean water supply sources, and only 46 percent have access to basic sanitation services. These conditions undermine the country's development by keeping children, especially girls, out of school¹, having a negative impact on their future livelihoods, and denying many people a healthy and productive life.

Problems created by lack of access to proper water and sanitation are exacerbated by other situations that perpetuate poverty, such as gender inequality and social exclusion. The responsibility of supplying households with water rests disproportionately on the shoulders of women and girls, limiting their participation in family income generation, decision-making, community leadership and ability to go to school. Family incomes are further affected by poor water and sanitation services, as the costs associated with purchasing water are high, as are the costs of treatment and medicine for treating water-related illnesses.

CARE uses a proven approach known as the Rural Water Supply and Sanitation (RWSS) model, which is based on the active participation of communities and promotes gender equity. Under this model, municipal governments work with communities and provide technical support to strengthen the communities' ability to address their own water and sanitation problems, promote basic sanitation, and supply water and sanitation infrastructure.

In Guatemala, CARE is implementing *Water Links*, a project in the western highlands (shaded on map) that seeks to improve access to water and sanitation services for 5,000 people in at least eight communities, through the promotion of improved health and hygiene practices, the protection of groundwater recharge areas and the strengthening of organizations' and local governments' technical capacities. This project is currently underway, and CARE seeks to leverage current funding and support necessary activities with additional funding. For this reason, CARE asks Multiple District 19 Lions to partner with us on this project for a two-year period. An amount of \$40,000 in Year 1 with an additional grant of \$40,000 in Year 2 would be incredibly valuable and make it possible for us to carry-out this life-changing work.



¹ School attendance is low because children are often sick from gastrointestinal diseases caused by poor water quality or because the task of collecting water takes priority over their educational pursuits.

The above is an overview of the current project supported by MD 19 Lions. We are in the second year of this two year project having completed a very successful first year raising over the budgeted amount. Well done Lions of MD 19.

I usually do not like to deal with the money aspect as my vision was to have the Lions of MD 19 informed and knowledgeable with the projects. I think we are succeeding in spreading the word about CARE, but we must remain diligent in knowing our current project and passing that info to as many Lions in the MD as possible.

For this report for the Council of Governors, I would like to dwell a little on the money collection side of CARE and MD 19 Lions. As of the end of December 2015, the total raised to date is \$12, 4015.00. By District: A – 750.00, B - \$1050.00, C - \$950.00, D - \$950.00, E - \$2295.00, F - \$835.00, G – \$800.00, H - \$4375.00 and I - \$\$410.00. This gives an idea of where each district stands. Traditionally, clubs have been holding onto funds and tend to donate later in the Lion's year.

The year rockers for clubs that donated \$5 per member have been mailed.

This will be my last year as the MD CARE Chair. I have been doing this for many years and feel it is time to let someone with new ideas to step up to this position. I have enjoyed it tremendously and feel very proud of the Lions of MD 19 as they exceeded the goal amount of \$40,000.00 year after year. As a Lion it is heart-warming to know that we made a difference to the lives of many women and children in south and Central America. Thank you everyone.

Respectfully submitted
Jane Beddows
MD CARE Chair