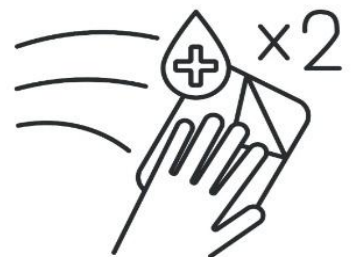
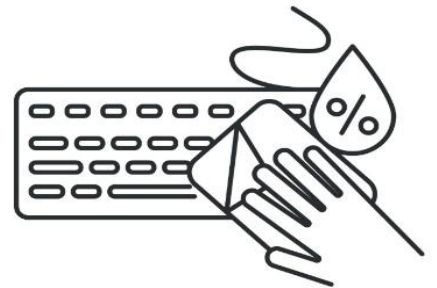


Gallup Pakistan Analysis of Punjab Health and Population Survey (PHPS) 2024–25

Sanitation and Hygiene



PRESS RELEASE

Gallup Pakistan Analysis of Punjab Health and Population Survey (PHPS) 2024–25

Only 30% of Dera Ghazi Khan Households Have Improved Sanitation — While Gujranwala Reaches 99% for Handwashing Facilities

Islamabad, July 31st, 2026

Punjab's sanitation and hygiene landscape is defined by a gap that no provincial average can capture. While 82.8% of households across the province have access to improved sanitation facilities and 87.8% have handwashing facilities with soap, these figures collapse to 30% and 62% respectively in the worst-performing district — Dera Ghazi Khan — and rise to 100% and 99% in the best-performing ones. Data from the Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report, covering 24,540 households across 36 districts, reveals that a rural household in a lagging district has only a 64.7% chance of accessing improved sanitation, and that one in four rural households shares toilet facilities with other households. The province does not have a sanitation problem uniformly — it has a southern Punjab problem, a lagging district problem, and a rural problem that compound each other.

What is the Big Data Analysis Series by Gallup?

Gallup Pakistan's Big Data series was initiated by Bilal I. Gilani, Executive Director of Gallup Pakistan. As he explains: *“Pakistan does not suffer from a lack of data, but from limited accessibility and weak translation of numbers into understanding. Gallup Pakistan bridges this gap by analyzing large, often under-used datasets — from PSLM and Labour Force Surveys to Economic Surveys and National Census data — so these statistics can meaningfully inform policy and public discourse.”*

What data points this current edition covers:

This analysis is based on Figure 2.4: Percentage of Households with Improved WASH Services Availability, Table 2.8: Percentage of Households Sharing Toilet Facilities and Location of Toilets for Men and Women, Table 2.9: Percentage of Households by Water Availability for Washing/Bathing and Type of Soap Used, Figure 2.6: Percentage of Households with Improved Sanitation Service Availability by District, and Figure 2.7: Percentage of Households with On-Premises Washing Facilities with Soap for Handwashing by District — all drawn from Chapter 2 of the Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report. The data covers 24,540 households across 36 districts of Punjab, surveyed between November 2024 and February 2025, and is disaggregated by rural and urban residence and by lagging and non-lagging district classification.

Only 30% of Dera Ghazi Khan Households Have Improved Sanitation — While Gujranwala Reaches 99% for Handwashing Facilities

82.8% of Punjab households have access to improved sanitation facilities overall but this falls to 77.0% in rural areas, 68.4% in lagging districts, and a provincial low of 64.7% in rural lagging district households.

OVERALL PUNJAB



82.8%

ALL HOUSEHOLDS
82.8% of Punjab households have access to improved sanitation.

RURAL AREAS



77.0%

RURAL HOUSEHOLDS
77.0% falls in rural areas of Punjab.

11.1% of rural households use toilet facilities located entirely outside their dwelling or yard — compared to just 1.1% of urban households — meaning more than one in ten rural Punjabis has no on-premises sanitation access at all.

RURAL HOUSEHOLDS



11.1%

RURAL HOUSEHOLDS
11.1% of rural households use toilet facilities located outside.

URBAN HOUSEHOLDS



1.1%

URBAN HOUSEHOLDS
1.1% of urban households use toilet facilities located outside.

One in five Punjab households (22.1%) shares toilet facilities with other households — rising to one in four in rural areas (26.3%), compared to one in six in urban areas (16.2%).

OVERALL PUNJAB



22.1%

ALL HOUSEHOLDS
22.1% of Punjab households share toilet facilities.

RURAL AREAS



26.3%

RURAL HOUSEHOLDS
26.3% of rural households share toilet facilities.

All three worst-performing sanitation districts — Dera Ghazi Khan (30%), Rajanpur (45%), and Muzaffargarh (62%) — are lagging districts in southern Punjab

DERA GHAZI KHAN



30%

DERA GHAZI KHAN
30% of households have access to improved sanitation.

RAJANPUR



45%

RAJANPUR
45% of households have access to improved sanitation.

MUZAFFARGARH



62%

MUZAFFARGARH
62% of households have access to improved sanitation.

Key Findings:

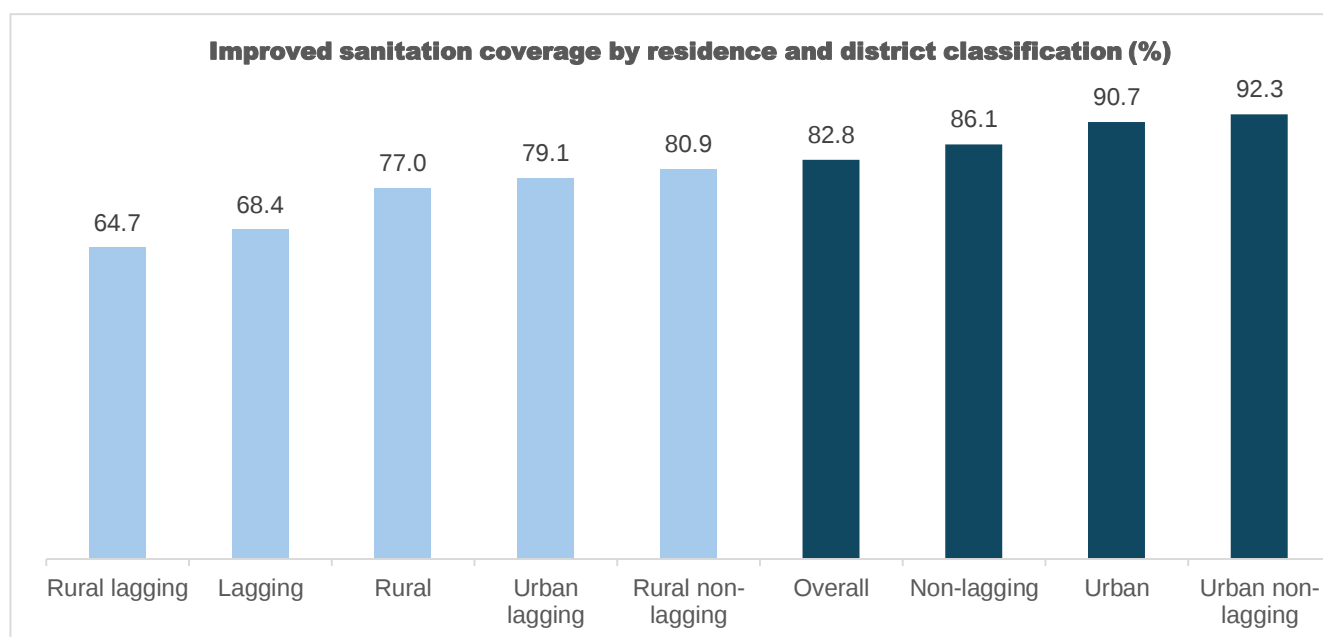
1. 82.8% of Punjab households have access to improved sanitation facilities overall — but this falls to 77.0% in rural areas, 68.4% in lagging districts, and a provincial low of 64.7% in rural lagging district households.
2. Dera Ghazi Khan records the lowest improved sanitation coverage of any district at 30% — less than a third of the provincial average and 70 percentage points below Gujrat, which leads at 100%.
3. All three worst-performing sanitation districts — Dera Ghazi Khan (30%), Rajanpur (45%), and Muzaffargarh (62%) — are lagging districts in southern Punjab, confirming a concentrated geographic deficit.
4. One in five Punjab households (22.1%) shares toilet facilities with other households — rising to one in four in rural areas (26.3%), compared to one in six in urban areas (16.2%).
5. 11.1% of rural households use toilet facilities located entirely outside their dwelling or yard — compared to just 1.1% of urban households — meaning more than one in ten rural Punjabis has no on-premises sanitation access at all.
6. Hygiene — defined as the availability of a handwashing facility with soap on premises — reaches 87.8% overall, but falls to 74.5% in lagging districts and 70.1% in rural lagging district households.
7. Dera Ghazi Khan records the lowest handwashing facility coverage at 62%, followed by Bhakkar (69%) and Mianwali and Rajanpur (74% each) — while Gujranwala leads at 99%.
8. 8.6% of rural households rely on water alone for handwashing, with no soap — compared to 1.5% of urban households — a ratio of nearly 6 to 1.
9. The gap between urban non-lagging districts (94.5% hygiene coverage) and rural lagging districts (70.1%) is 24.4 percentage points — within a province that governs all 36 districts under the same policy framework.

1. Dera Ghazi Khan's 30% vs Gujrat's 100%: Sanitation Is Punjab's Sharpest Internal Divide

At the provincial level, 82.8% of Punjab households have access to improved sanitation facilities — a figure that implies reasonable coverage but conceals the most extreme internal disparity in the entire PHPS dataset. Gujrat reports 100% coverage, Attock 97%, Sialkot and Toba Tek Singh 96% each. At the other end, Dera Ghazi Khan records just 30% — meaning seven in ten households in the district lack access to improved sanitation facilities. The gap between Gujrat and Dera Ghazi Khan is 70 percentage points, making sanitation coverage the most polarised district-level variable in this chapter. Rajanpur at 45% and Muzaffargarh at 62% complete the three worst-performing districts; all three are lagging districts in southern Punjab.

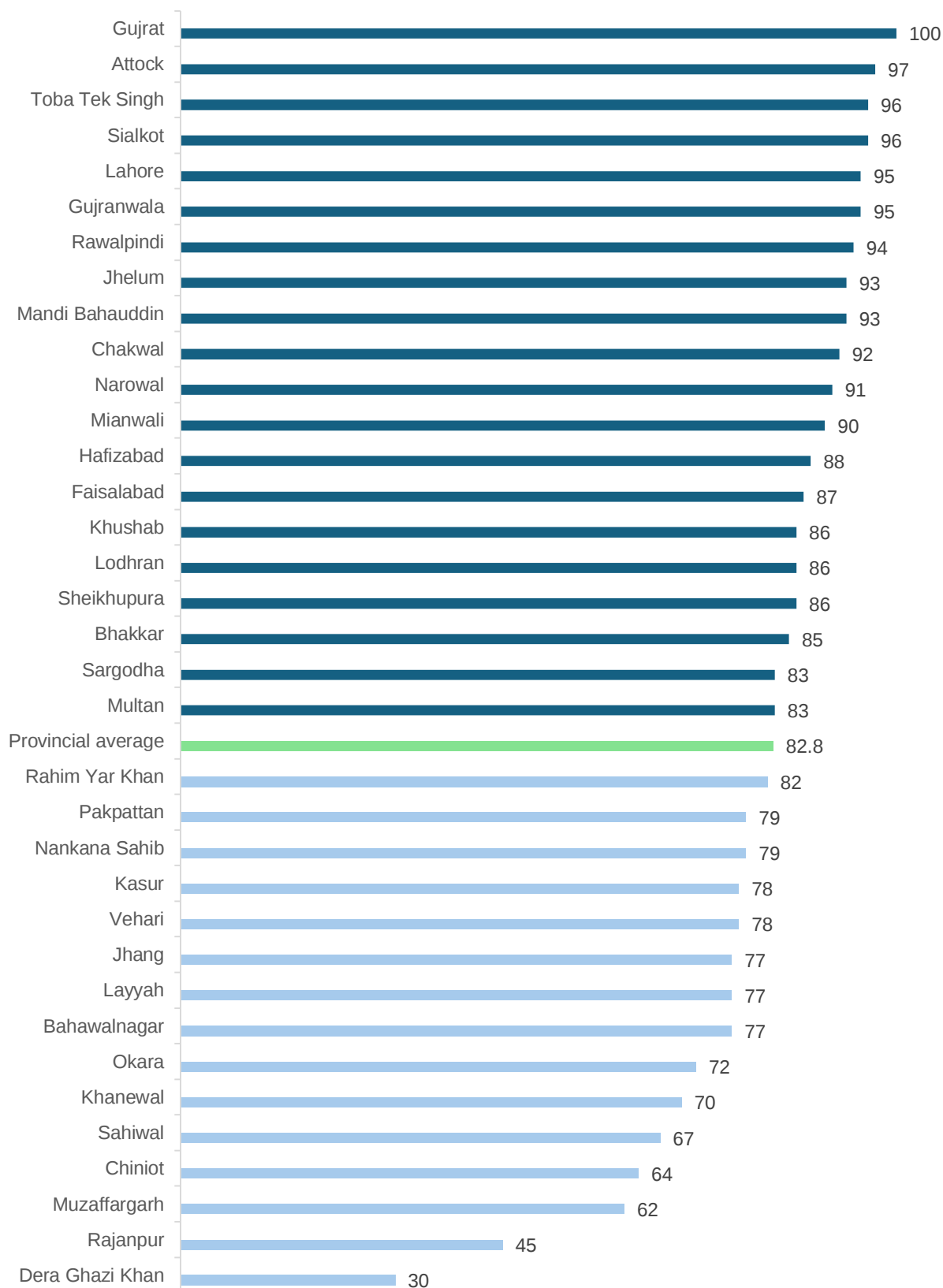
The lagging/non-lagging distinction is analytically important here. Lagging districts — the seven lowest-performing districts identified under the PHPS framework — record average improved sanitation coverage of 68.4%, against 86.1% in non-lagging districts — a gap of 17.7 percentage points. But within lagging districts, the rural-urban divide is even sharper: urban lagging district households access improved sanitation at 79.1%, while rural lagging district households access it at just 64.7%. Rural lagging districts are therefore the double-disadvantaged tier — lagging by classification and rural by geography — and their 64.7% coverage rate means that more than one in three rural households in the most deprived districts of Punjab lacks improved sanitation. Even within non-lagging districts, Chiniot (62%) and Sahiwal (67%) fall substantially below the non-lagging average of 86.1%, indicating that the classification does not guarantee uniform adequacy.

What the sanitation district data reveals, when read in full, is a north-south gradient that runs consistently through the province. Among the bottom 10 districts by sanitation coverage, the majority are in southern or central southern Punjab — Dera Ghazi Khan, Rajanpur, Muzaffargarh, Chiniot, Sahiwal, Okara, Khanewal — while the top performers are overwhelmingly concentrated in northern Punjab — Gujrat, Attock, Sialkot, Toba Tek Singh, Gujranwala, Lahore, Rawalpindi. This is not a random distribution of poor sanitation infrastructure; it is a structural pattern that maps onto the same geographic inequality visible in the hardship, income, and remittances data from earlier chapters.



Source: Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report, Bureau of Statistics Punjab.

Improved sanitation coverage by district (%)



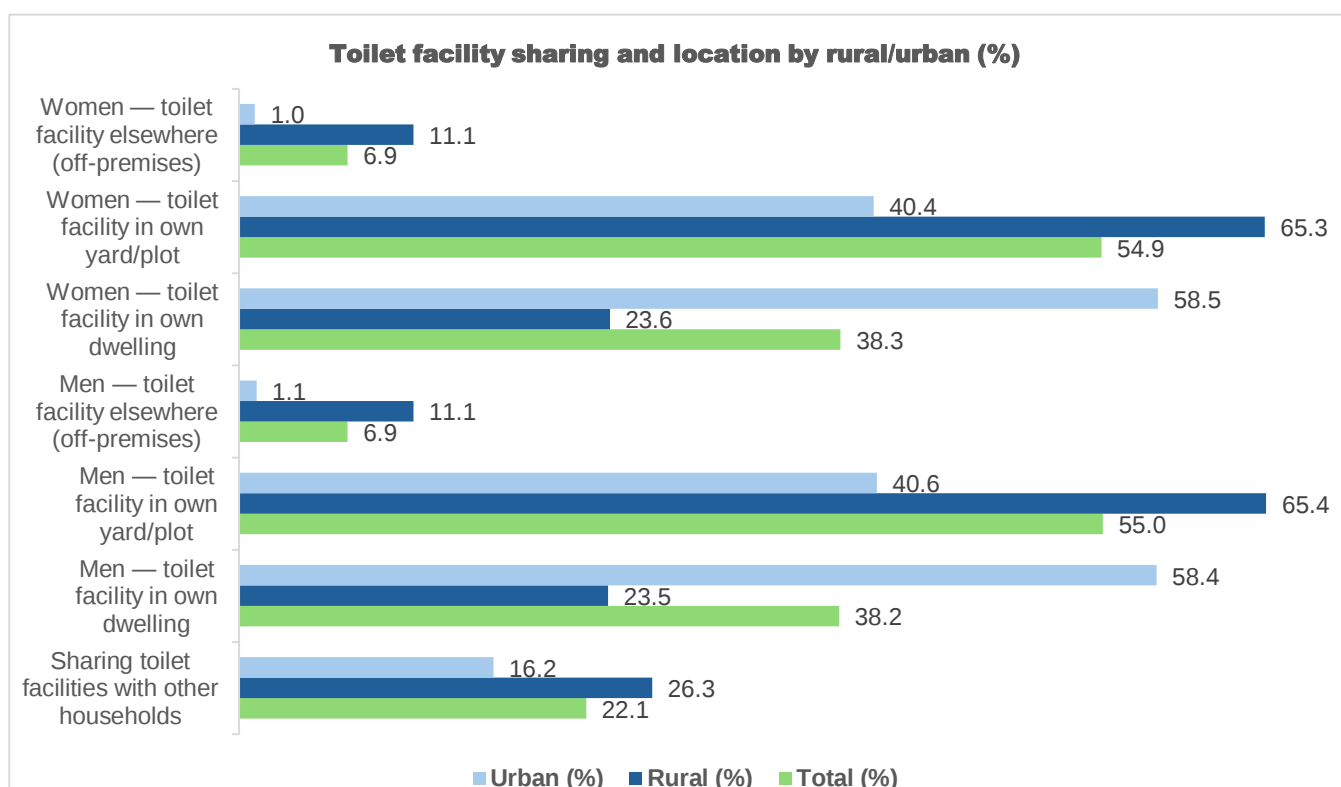
Source: Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report, Bureau of Statistics Punjab.

2. One in Four Rural Households Shares a Toilet — and One in Ten Has No On-Premises Access at All

Improved sanitation coverage figures — which measure whether households have access to improved facilities — do not tell the full story of how those facilities are actually used and by whom. Table 2.8 adds a critical dimension: 22.1% of Punjab households share their toilet facilities with other households. In rural areas, this rises to 26.3% — one in four rural households. Urban households share at 16.2%, a meaningful difference but still one in six. Shared facilities are relevant to sanitation outcomes because shared use degrades maintenance standards, reduces privacy, and in the context of women's toilet access specifically, creates safety concerns.

The location of toilet facilities by gender reveals an additional layer of inequality that aggregate sanitation figures do not capture. In rural areas, 23.5% of men have toilet access within their own dwelling — but only a marginally similar 23.6% of women do. The near-identical figures for men and women in this category appear reassuring until the "elsewhere" figures are examined: 11.1% of rural households' men and women alike use facilities located entirely outside their own dwelling or yard. For more than one in ten rural Punjabis, reaching a toilet requires leaving the premises entirely — a meaningful barrier to privacy, safety, and consistent use, particularly for women and girls. In urban areas, only 1.1% of households rely on off-premises facilities, meaning the urban-rural gap on this specific indicator is approximately 10 to 1.

The combination of shared facilities (26.3% of rural households) and off-premises access (11.1% of rural households) means that rural Punjab's sanitation situation is more constrained than the 77.0% improved sanitation coverage figure suggests. Households counted as having improved sanitation access may share that facility with multiple other families or be required to leave their property to use it. The 77.0% rural coverage figure is a floor, not a ceiling — the actual quality of sanitation access in rural Punjab, when access, privacy, and exclusivity are considered together, is almost certainly lower than the headline figure implies.



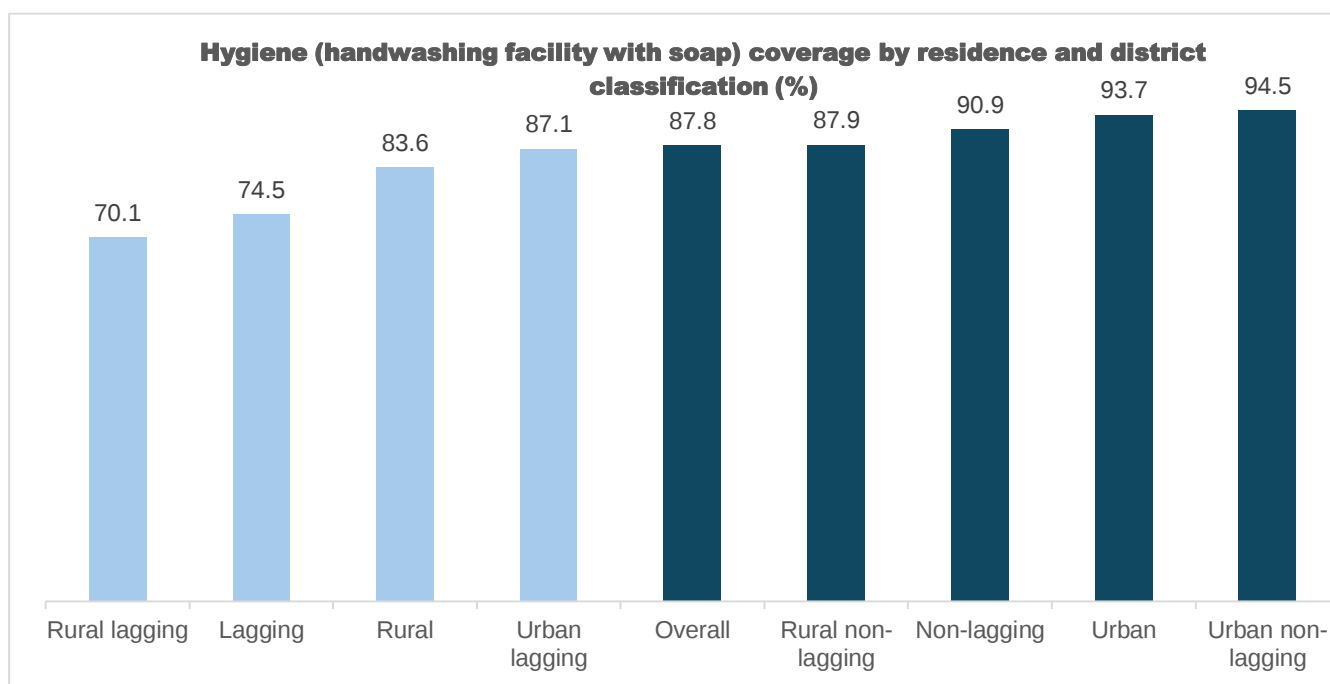
Source: Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report, Bureau of Statistics Punjab.

3. Dera Ghazi Khan (62%) vs Gujranwala (99%): Hygiene Follows Sanitation's North-South Pattern

Hygiene — defined in the PHPS as the availability of a handwashing facility with soap within the dwelling, yard, or plot — reaches 87.8% of households overall. This is the lowest of the three WASH indicators measured (water at 98.7%, sanitation at 82.8%, hygiene at 87.8%), though not dramatically so at the provincial level. The district-level data tells a more differentiated story. Gujranwala leads at 99%, followed by Sheikhpura (97%), Lahore (96%), Sialkot (96%), and Narowal (96%) — all northern or central Punjab districts. Dera Ghazi Khan records the lowest handwashing facility coverage of any district at 62%, followed by Bhakkar (69%) and Mianwali and Rajanpur at 74% each. The gap between Gujranwala and Dera Ghazi Khan on hygiene — 37 percentage points — is nearly as large as the sanitation gap between the same poles.

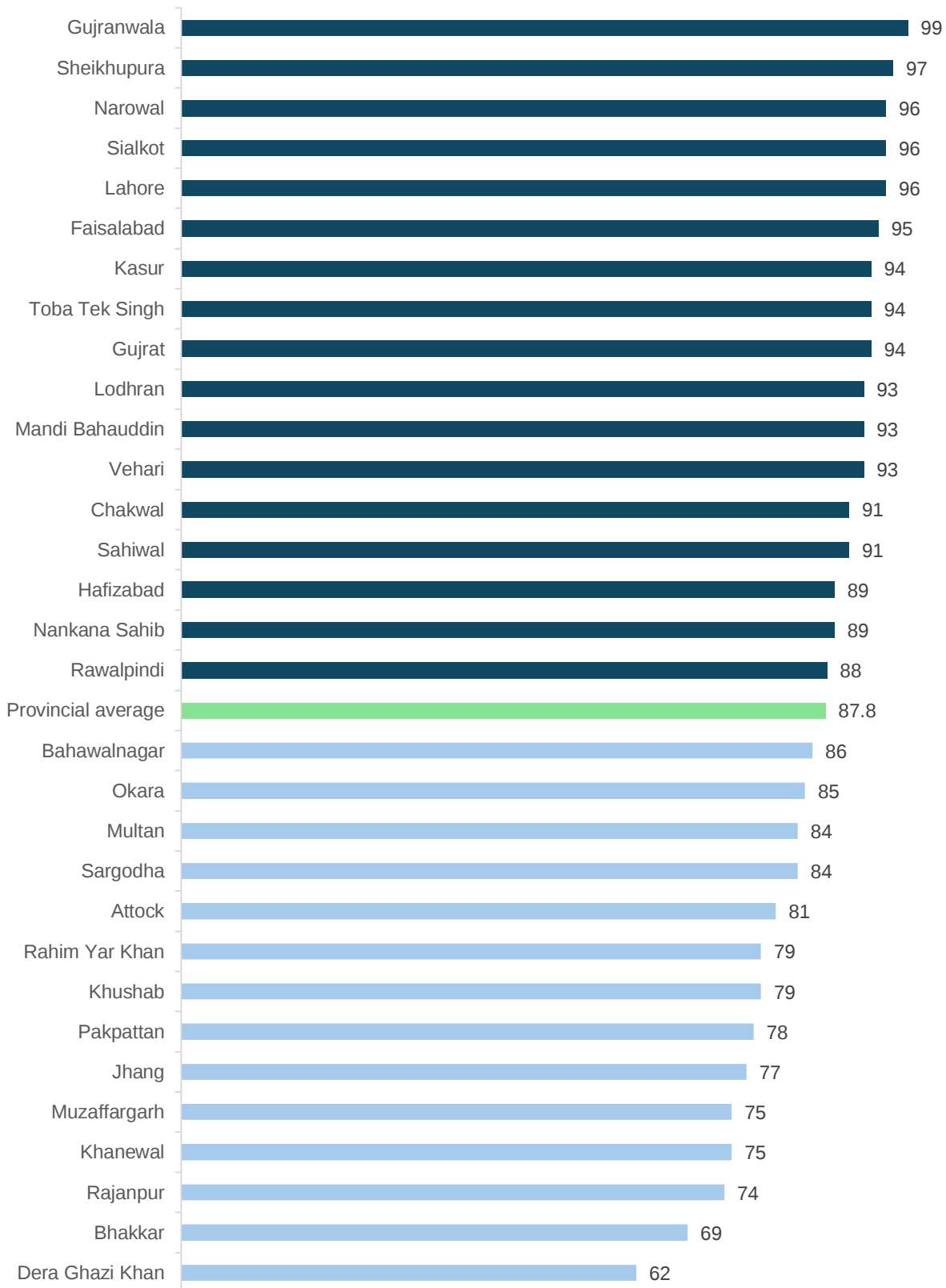
The lagging/non-lagging split is pronounced: lagging districts average 74.5% hygiene coverage against 90.9% in non-lagging districts, a gap of 16.4 percentage points. Within lagging districts, rural households record the lowest hygiene coverage in the entire dataset at 70.1%, while urban non-lagging district households reach 94.5% — a gap of 24.4 percentage points. This 24-point spread between the best-served and worst-served household categories in the province, on a single indicator of basic hygiene, is both a public health gap and a measure of how differently Punjab's policy infrastructure translates into household-level outcomes across its geography.

The soap data from Table 2.9 adds a final dimension to the hygiene picture. Among households with handwashing facilities, 93.3% use bar soap overall — but 8.6% of rural households use water only, without any soap. This compares to 1.5% of urban households using water only — a ratio of nearly 6 to 1. Rural handwashing without soap is not a trivial gap: soap is the critical agent in removing pathogens, and water-only handwashing provides substantially less protection against diarrhoeal and respiratory disease transmission. The 8.6% of rural households using water only for handwashing represents the margin between facility availability and effective hygiene practice — a distinction that has direct implications for child health outcomes examined in later chapters of this survey.

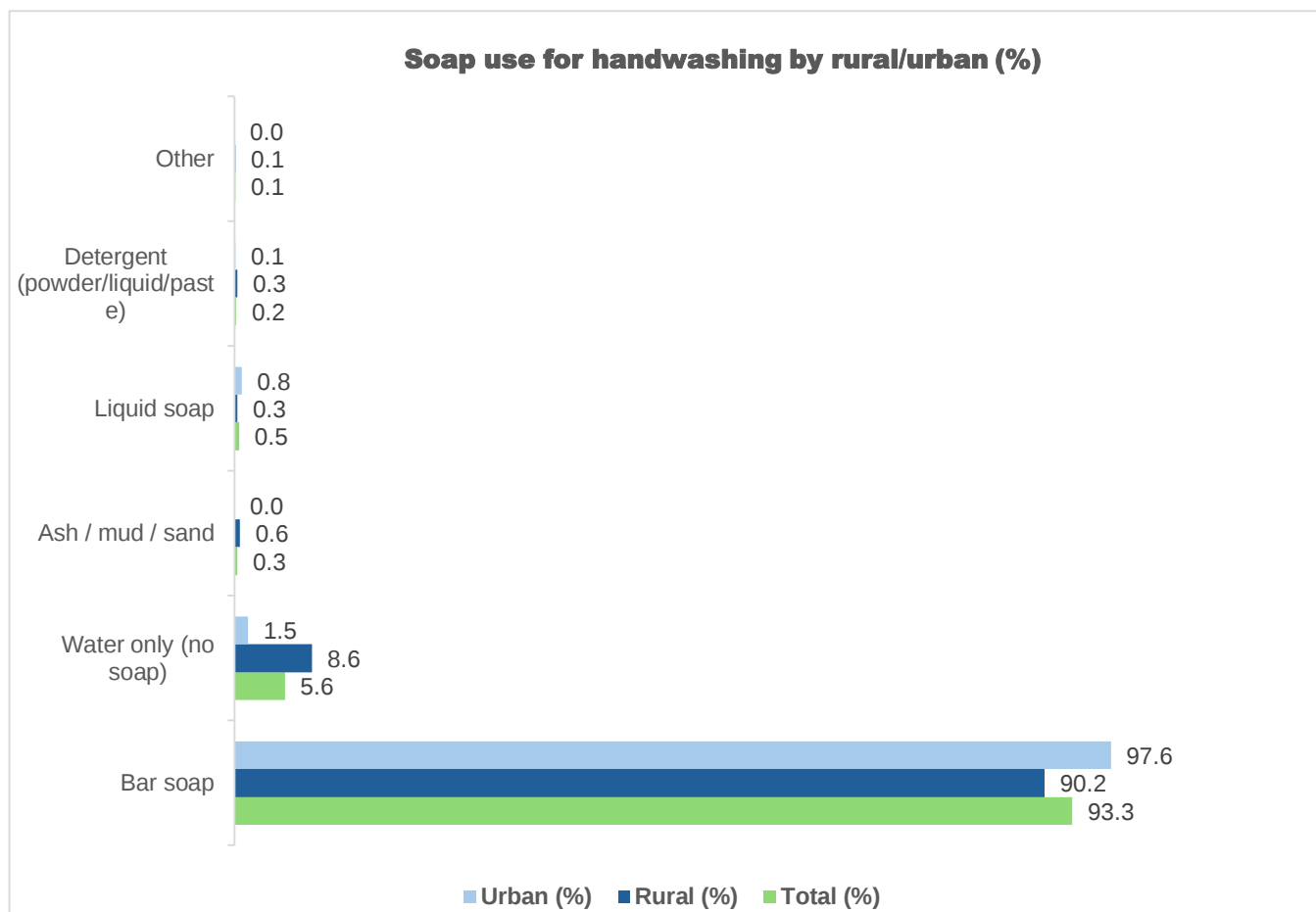


Source: Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report, Bureau of Statistics Punjab.

Hygiene (handwashing with soap) coverage by district (%)



Source: Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report, Bureau of Statistics Punjab.



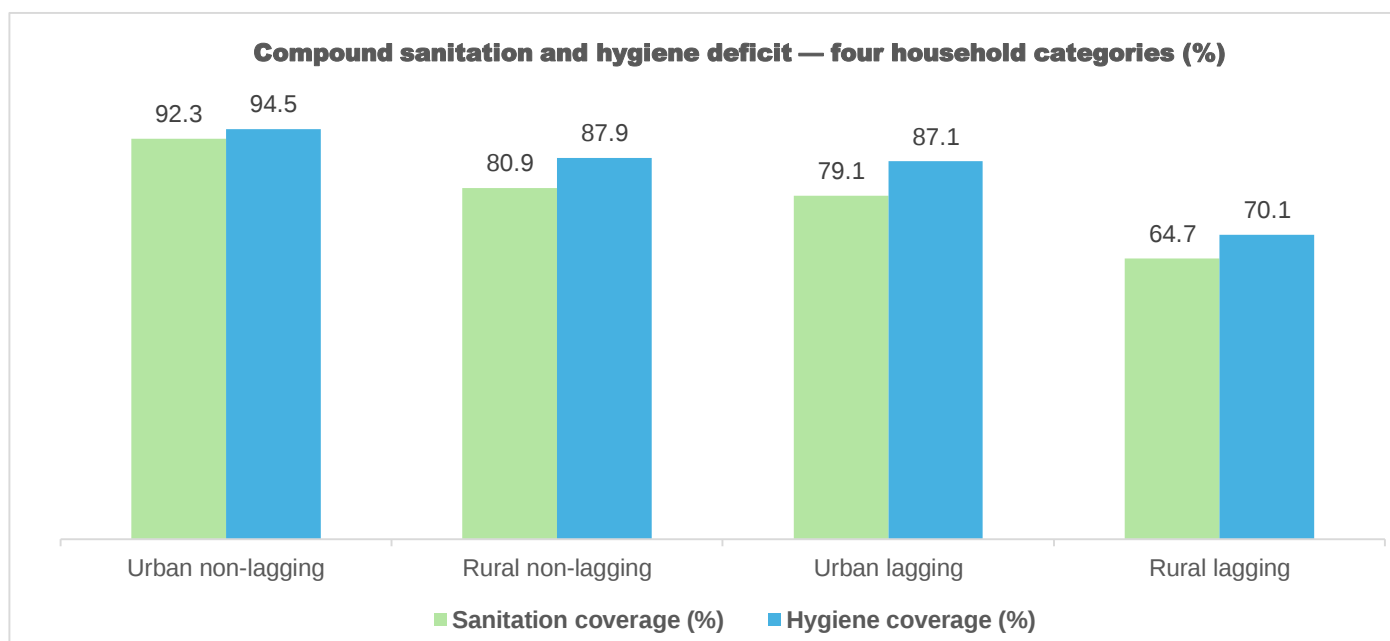
Source: Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report, Bureau of Statistics Punjab.

4. The Compound Deficit: When Geography, Rurality, and Lagging Status Combine

Reading sanitation and hygiene together, and disaggregating by the four sub-categories — urban non-lagging, rural non-lagging, urban lagging, and rural lagging — produces the most precise picture of where Punjab's infrastructure gap is concentrated. Urban non-lagging households sit at 92.3% sanitation and 94.5% hygiene — near-universal access by both measures. Rural non-lagging households fall to 80.9% sanitation and 87.9% hygiene — meaningful gaps but broadly consistent with provincial development patterns. Urban lagging households record 79.1% sanitation and 87.1% hygiene — below the rural non-lagging tier on sanitation despite being urban, which reflects the specific deprivation profile of lagging districts even in their urban centres. Rural lagging households bottom out at 64.7% sanitation and 70.1% hygiene — the lowest values on both indicators.

The 64.7% sanitation coverage in rural lagging districts means that more than one in three households in the most deprived rural areas of Punjab lacks access to improved sanitation. Combined with the 70.1% hygiene coverage in the same category, these figures describe a household environment where deficits in sanitation and hygiene co-occur and reinforce each other. Poor sanitation increases exposure to environmental pathogens; inadequate handwashing hygiene increases transmission risk. Both interact directly with child health outcomes — diarrhoea, stunting, respiratory infections — that are documented in subsequent PHPS chapters. The data in this chapter therefore does not stand alone: it provides the environmental infrastructure baseline against which Punjab's child health and nutrition outcomes must be read.

The district-level data makes this compound deficit geographically explicit. Dera Ghazi Khan records the worst performance on both sanitation (30%) and hygiene (62%) simultaneously — and it is a lagging district in southern Punjab. Rajanpur records 45% on sanitation and 74% on hygiene. Muzaffargarh records 62% on sanitation and 75% on hygiene. These are not districts with isolated infrastructure weaknesses: they are districts where sanitation and hygiene deficits compound, where income informality and hardship exposure are highest, and where social protection coverage remains limited. The PHPS data, read across its chapters, consistently points to the same geographic cluster as the province's most acute zone of compound disadvantage



Source: Punjab Health and Population Survey (PHPS) 2024–25 Baseline Survey Report, Bureau of Statistics Punjab.



Wish to Contribute to Gallup Big Data Analysis?

Gallup Pakistan is looking for collaboration with researchers to expand the Big Data Analysis project. If you have any ideas, please write to Bilal I Gilani, Project Director, Big Data Analysis at Gallup Pakistan.

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