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# **WATER SUPPLY AND SANITATION INITIATIVES IN SUB-SAHARAN AFRICA**

**ActionAid** background paper for the Italian G8  
January 2009

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## Abbreviations

|          |   |
|----------|---|
| ADF      | African Development Fund  |
| AfDB     | African Development Bank  |
| AMCOW    | African Ministers Council on Water  |
| EC       | European Commission   |
| EUWI     | European Union Water Initiative   |
| GSF      | Global Sanitation Fund  |
| GNI      | Gross National Income   |
| GW       | Global Water Initiative   |
| GWSI     | Global Water and Sanitation Initiative  |
| IFRC     | International Federation of Red Cross and Red Crescent Societies                        |
| IGT      | Intergovernmental Transfer  |
| IWRM     | Integrated Water Resources Management   |
| M&E      | Monitoring & Evaluation   |
| MDG      | Millennium Development Goal   |
| MUS      | Multiple (Water) Use Services   |
| NEPAD    | New Partnership for Africa's Development  |
| ODA      | Official Development Assistance   |
| OECD-DAC | Organisation of Economic Cooperation and Development – Development Assistance Committee |
| RWSSI    | Rural Water Supply and Sanitation Initiative  |
| SSA      | sub-Saharan Africa  |
| WHO      | World Health Organisation   |
| WMC      | Water Management Committee  |
| WSS      | Water Supply and Sanitation   |
| WSSCC    | Water Supply and Sanitation Collaborative Council                                       |

## 1. Introduction

### 1.1. Rationale for the report

Italy will hold the next G8 Summit in July 2009. The main subjects for discussion are climate change, health, and the fight against poverty in Africa, including progress towards the United Nations' Millennium Development Goals (MDGs). In light of the promised progress report by the G8 towards the 2003 Evian Water Plan, a key issue foreseen in the MDG discussion is access to water and sanitation.

#### Objectives:

- *Critically mapping the G8's efforts and the main and innovative international initiatives in the water and sanitation sector in Sub-Saharan Africa, identifying their strengths and weaknesses as well as their financial needs and gender focus;*
- *Identifying gaps in interventions and mandates or neglected areas that need to be specifically addressed in the water and sanitation sector;*
- *Synthesising the information gathered into a matrix of the international initiative(s), with their financial gaps;*
- *Identifying the most promising pilot experiences to effectively deliver water and sanitation, and especially financing schemes, that could be scaled up with G8 political or financial support.*

### 1.2. Water Supply and Sanitation: The Issue

Water supply and sanitation (WSS) provision refers to interventions to improve access to, and ensure security of, a safe water supply and basic sanitation facilities and improve hygiene practices, which are vital to sustain human life. The three components can be defined by:

- Water supply, the provision of adequate safe water for domestic (including drinking) water needs;
- Sanitation, the provision of basic sanitation facilities for excreta, wastewater (generally from domestic activities) and solid waste disposal;
- Hygiene, the promotion of safe hygiene practices at the personal, domestic, and community levels to realise behavioural change to prevent the contamination of people, water, fields, and food from harmful pathogens that lead to disease and ill health.

At the high level, the G8's attention on WSS principally stems from the international community's preoccupation with progress towards the MDGs that were agreed to by the world in 2000. MDG 7, Target 10, pledged to "halve by 2015 (from 1990) the proportion of people without sustainable access to safe drinking water and basic sanitation<sup>1</sup>." MDG7 is being supported by the 2005 – 2015 International Decade for Action 'Water for Life' created by the UN General Assembly. Furthermore, the current 2008 International Year of Sanitation is putting timely pressure on donor and recipient governments and development agencies to address the appalling lack of sanitation facilities for the poor, which has been forgotten and neglected in past development interventions. The momentum behind the WSS movement is also aided

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<sup>1</sup> Sanitation was added to MDG at the World Summit on Sustainable Development, Johannesburg in 2002



by annual events, such as the World Water Forum (next in March 2009), the Stockholm World Water Week (next in August 2009) and the ad-hoc AfricaSan on sanitation and hygiene issues in Africa (next in 2010), which are attended by WSS professionals from around the world to discuss topical issues, share best practice and generate solutions.

Behind these international drivers for change, lie the real imperatives for change at the grassroots level. Box 1 offers a brief introduction to some of the major issues.

### **Box 1: Imperatives for improved access to WSS**

*Health:* Everyday, 5000 children under 5 years old die from diseases caused by poor access to WSS (WaterAid, 2008). Furthermore, water and excreta-related diseases are a cause and a result of malnutrition, and together they not only induce a short-term negative spiral in to poverty, but also have adverse long-term effects such as impaired physical growth and cognitive development (Guerrant et al, 1999). See Appendix 1 for the five most prevalent types of WSS diseases and their burden on daily life.

*Human Rights:* It is universally understood that poor access to WSS is also an affront to life with privacy and dignity. Since 2002, the UN have officially recognised adequate access to sufficient water for drinking and domestic uses as a human right (UN, 2003). Recent calls for sanitation to be officially considered as a human right similarly aim for political and legislative frameworks to ensure access to sanitation, rather than purely relying on technical solutions.

*Gender equality:* Poor access to WSS reinforces gender inequalities when women have to spend hours collecting water or caring for the sick instead of being more industriously engaged, and when girls forego school a few days a month when struggling to cope with their menstruation with cleanliness and dignity. In addition, poor WSS reinforces other societal inequalities, defined by income, caste, or age for example, rendering the most vulnerable helpless and unable to escape the poverty trap.

*Economic development:* When poor people are restricted in their ability to work and study, economic inequalities are also augmented but on a national and global scale. An estimated 443 million schooldays are lost a year due to water-related diseases, having an enormous impact on the economic development of countries (UNDP, 2006). It has been shown that, for every \$1 invested in sanitation, \$9 are returned to national economies through decreased health costs and increased productivity (Hutton et al., 2006)

## **1.3. Current water and sanitation situation**

### *1.3.1. Coverage*

A staggering 884 million (13%) and 2.5 billion (38%) of the world's population lack access to an 'improved' water supply and 'improved' sanitation facilities, respectively (World Health Organisation (WHO) & UNICEF Joint Monitoring Programme (JMP) for Water and Sanitation (JMP), 2008)<sup>2</sup>. A startling 18% of the world's population

<sup>2</sup> 'Improved' water supply refers to household connection, standpipe, borehole, protected dug well, protected spring, and rainwater. 'Improved' sanitation facilities refer to a simple latrine, ventilated improved pit latrine, pour-flush latrine, and connection to a septic system or a public sewer. Note the



practices indiscriminate or open defecation of whom the majority come from Southern Asia and Sub-Saharan Africa (SSA). Urban and rural disparities continue to plague the WSS sector whereby 84% and 70% of those without improved water supplies and sanitation facilities, respectively, are in rural areas (WHO & UNICEF JMP, 2008).

Between 1990 and 2006 the proportion of people without access to improved sanitation decreased by only 8%, with the least progress in SSA. Over the same time period, improved water coverage increased from 49% to 58% in SSA but coverage levels remained lower compared to other developing regions. At current rates of progress in SSA, the MDG7 for water and sanitation will not be met until 2035 and the 2076, respectively (WaterAid & Tearfund, 2008; WaterAid 2008). See Appendix 2 for maps of progress towards MDG7 and coverage levels in rural and urban areas in SSA.

It should be borne in mind that even if the MDG7 for WSS were achieved, 2015 would still witness more than 800 million people without an improved water supply and 1.8 billion people without improved sanitation (UNDP, 2006).

It is often reasonable to apportion part of the blame for poor improved water coverage on the impact of climate change, which is indeed leading to more and longer droughts and highly variable rainfall, both spatially and temporally. However, due to its scarce and precious nature, water is in itself political whereby water supplies are commonly derived from the interplay of power, politics, and inequality. Research suggests that human, as opposed to natural, reasons are the main cause for poor improved water coverage in SSA; that human, institutional, and financial, capital limit access to water even though water in nature is available locally to meet human demands. See Appendix 3 for a world map of water scarcity issues.

### 1.3.2. Sector funding

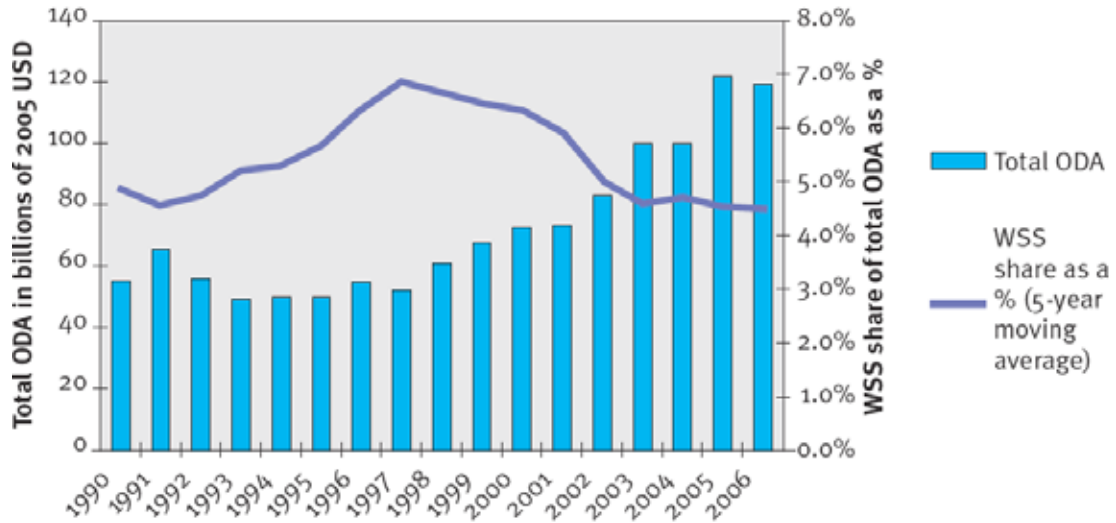
The OECD-DAC database shows that in absolute terms international aid, measured by Official Development Assistance (ODA), going to WSS has generally increased from 2000 to 2006. ODA bilateral and multilateral commitments to WSS in 2000 were US\$3.6 billion, which dropped to US\$2.2 billion in 2002 only to steadily rise to US\$6.4 billion in 2006. Since the mid-1990s total ODA has been rising but the proportion going to WSS has been decreasing, see Figure 1.

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distinction between improved water supply, which refers to a shared *communal* source whereas improved sanitation refers to a service at *household* level



**Figure 1: The WSS share of total ODA**



Source: WaterAid and Tearfund, 2008

In 2006, total ODA commitments to WSS were US\$6.4 billion (US\$3.3 billion in grants and US\$3.1 billion in loans, of which 55% were non-concessional loans) (UN Water Global Annual Assessment of Sanitation and Drinking Water (GLAAS), 2008). According to recent cost estimates from the WHO these commitments are not enough. An estimated US\$72.2 billion per year of ODA to WSS is required to achieve MDG7.



**Table 1: Summary of estimated funding requirements to meet MDG7**

|                                 | Sanitation          |  | Drinking water      |   |
|---------------------------------|---------------------|--|---------------------|---|
|                                 | US\$ billion / year | Share of total needed for sanitation (%) | US\$ billion / year | Share of total needed for drinking wat. (%) |
| New capital investment          | 14.2                | 77                                       | 4.2                 | 23  |
| Maintenance of existing systems | 21.6                | 40                                       | 32.2                | 60  |
| TOTAL                           | 35.8                | 50                                       | 36.4                | 50  |

Source: Hutton & Bartram, 2008; UN Water GLAAS, Pilot report, 2008

Hutton & Bartram (2008) estimate that approximately 28% and 24% of the *new capital investment costs* for water and sanitation (respectively) are required in the WHO African region (SSA, plus Algeria, excluding Sudan & Somalia). The additional figures for maintenance of existing systems highlight an important policy issue: the funding required to meet MDG7 should not only be allocated to coverage expansion programmes but also to programmes that ensure ongoing maintenance of facilities for the existing covered population to prevent them from returning to the unimproved category once more.

#### 1.4. The G8 and Water: A recent history

**2002 Kananaskis, Canada.** The water issue was first introduced onto the G8 agenda in 2002 in the Africa Action Plan. Reference was made to supporting African efforts to improve water resource development and management through productive and environmentally sustainable development of water resources and improvements in access to potable water and sanitation.

**2003 Evian-les-Bains, France.** Water became a priority issue in 2003 and the G8 leaders signed up to the Evian Water Action Plan: A declaration of commitment to play a more active role in international efforts towards achieving MDG7 on WSS and to reverse the trend of environmental degradation. Action areas were:

- Promoting good governance;
- Utilising all financial resources – with a high priority in ODA allocations to WSS;
- Building infrastructure by empowering local authorities and communities;
- Strengthening monitoring, assessment and research; and,
- Reinforcing engagement of international organisations – underlining the need for the UN to take a key role in the water sector

**2004 Sea Island, USA.** The water issue was not discussed.

**2005 Gleneagles, Scotland, UK.** Preceding the G8 Summit, the Commission for Africa published its report “Our Common Interest” on African development, reminding the international community of the human right to water for leading life with dignity. It called for actions to meet the Evian Water Action Plan commitments and recommended that donors reversed the decline in aid to WSS. The report influenced the G8 Summit, in which African development was a priority issue, and helped lead to the declaration to support African partners’ commitment to ensure that by 2015 people have improved access to safe water and sanitation. This would be undertaken by:



*“Implementing the G8 Water Action Plan, agreed at Evian, in partnership with the African Development Bank’s initiative on rural water and sanitation, including through increasing aid in this sector; maintaining political momentum and commitment on the water issue; and reinforcing coordination and monitoring mechanisms” (G8 Gleneagles, 2005).*

**2006 St Petersburg, Russia.** African development was not a priority issue, and the G8 merely renewed the previous year’s promises.

**2007 Heiligendamm, Germany.** The water issue was not discussed.

**2008 Toyako, Japan.** Leading up to the 2008 G8 Summit there were high prospects for WSS issues because Japan is both the sponsor of the 2008 International Year of Sanitation and the largest bilateral donor in the water sector. The final result was an acknowledgement of the link between WSS and health, education, and peace and security, and the need to “accelerate the achievement of the internationally agreed goals on water and sanitation” by reinvigorating G8 efforts to implement the Evian Water Action Plan (G8 Research Group, 2008). G8 water experts were tasked with reviewing progress towards the Evian Water Action Plan and presenting their findings at the 2009 G8 Summit in Italy.

**UN High Level Event of the Millennium Development Goals.** Little more was achieved on WSS at the UN meeting held in September 2008. Strong political and diplomatic support for WSS were reiterated alongside acknowledgements of the importance of Integrated Water Resources Management, mobilising financial resources, and developing partnerships to implement national strategies and action plans. Commitments made were:

- Japan will establish a Water Security Action Team for Africa to provide safe drinking water for 6.5 million people and implement a water supply capacity-building program that will train 5000 people over the next 5 years.
- The Netherlands will help provide access to safe drinking water and sanitation for at least 50 million people by 2015, having already signed agreements that will benefit almost 30 million people at a cost of €1.3 billion.
- Germany will continue to train Central Asian water experts
- The Netherlands and the UK committed €106 million to a Framework for Action to improve access to WSS in 20 developing countries over 5 years. Activities will involve support to the development and implementation of national WSS plans and the establishment of an annual report and high-level meeting to monitor and drive progress in the sector (see section 3.9 for more details).

(UN, 2008)

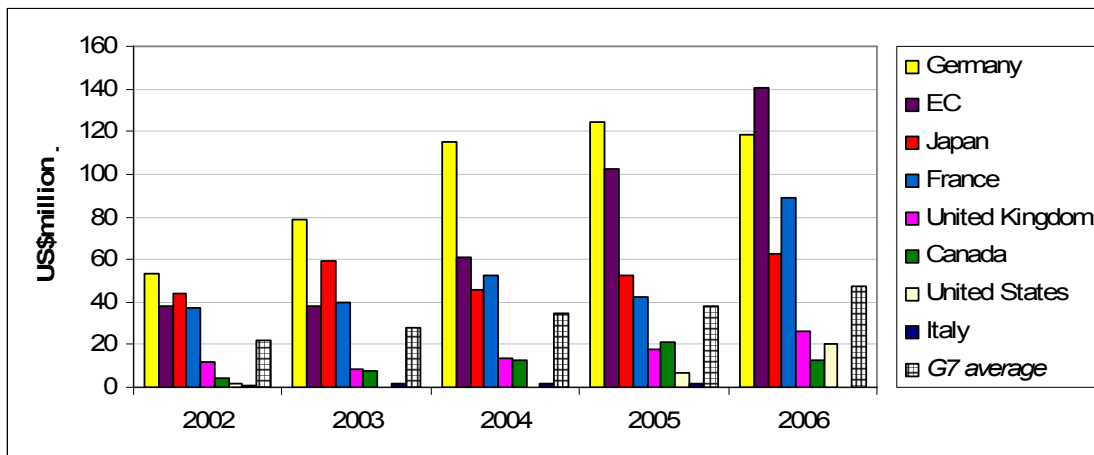


## 2. Mapping of G8 efforts in the water and sanitation sector

### 2.1. Analysis of bilateral (G7) and multilateral (EC) ODA in WSS to SSA<sup>3,4</sup>

**Volume of aid.** Figure 2 shows donors ranked in order of average annual disbursements in WSS over SSA in the period 2002 to 2006. Germany and the EC gave significantly more ODA to WSS in SSA out of the remaining G7. Figure 2 also shows how the G7 average bilateral disbursements steadily rose from 2002 to 2006.

**Figure 2: Trend in annual ODA disbursements in WSS to SSA, 2002 - 2006**



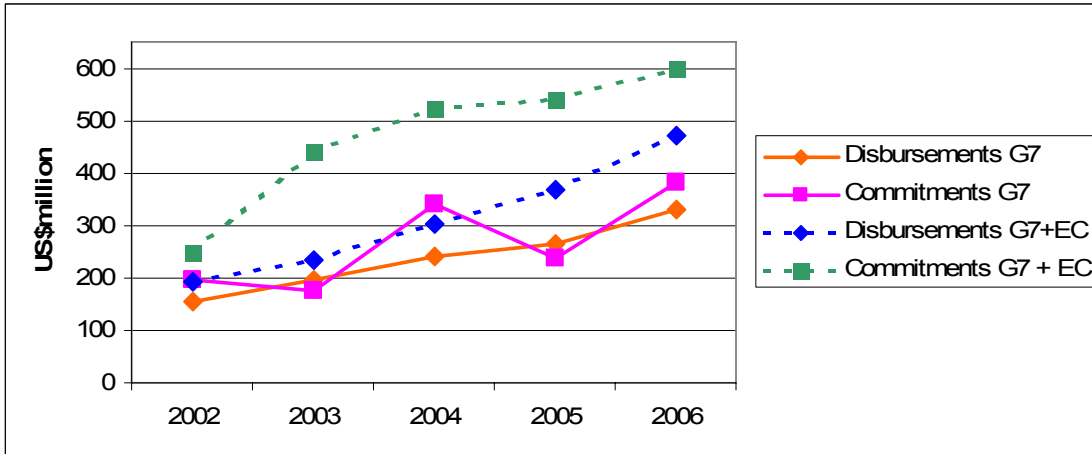
**Commitments versus disbursements.** From 2002 to 2006, commitments and disbursements of the G7 remained similar except for in 2004 when commitments exceeded disbursements by approximately US\$100 million. The same data for the G7+EC shows that commitments always exceeded disbursements from 2002 to 2006 but with the greatest divergence in 2003 and 2004 by US\$205 million and US\$220 million, respectively. Arguably, the 2003 Evian Water Action Plan had an affect of raising commitments but no particular affect on the steady increase in annual disbursements.

**Figure 3: Trend in total annual ODA commitments and disbursements in WSS to SSA, from 2002 to 2006**

<sup>3</sup> Data from the OECD DAC Credit Reporting System, retrieved October/November 2008

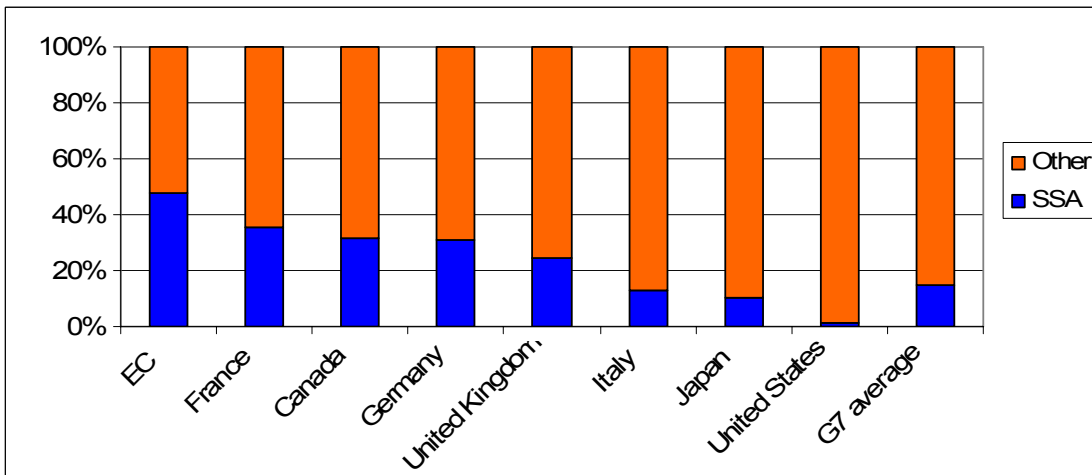
<sup>4</sup> The G7 refers to the G8 minus Russia, which does not give any significant ODA outside of the country.





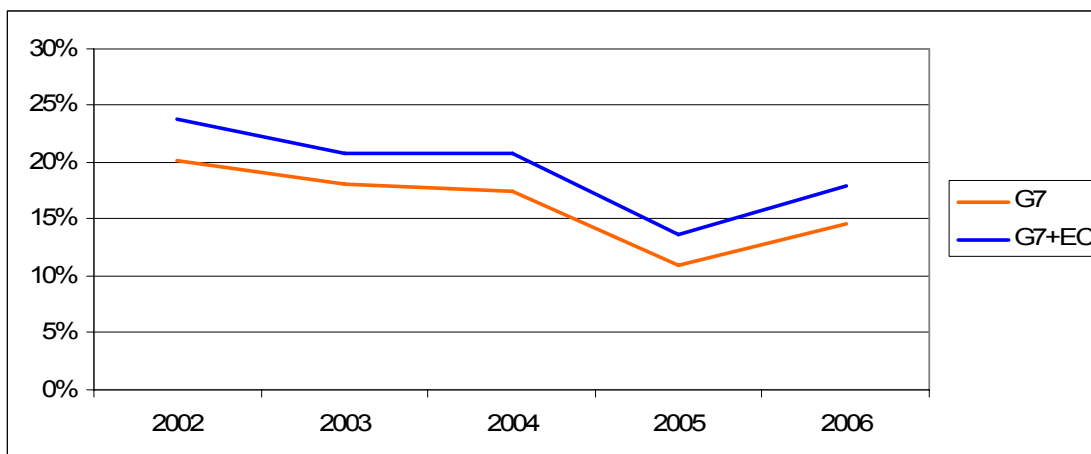
**Focus on SSA.** Figure 4 shows that nearly half of global disbursements in WSS from the EC went to SSA, and over 30% from France, Canada, and Germany. The UK, Italy, Japan and the USA directed less than one quarter of ODA in WSS to SSA. The G7 average of 15% is adversely affected by the minimal amount of ODA in WSS to SSA from the USA (1%). Figure 5 shows that from 2002 to 2005, the G7 and EC ODA disbursements in WSS have targeted SSA less and less from 24% to 14% of total ODA in WSS, with a slight resurgence in 2006 to 18%.

**Figure 4: Proportion of average annual disbursements in WSS to SSA versus ODA in WSS worldwide, between 2002 & 2006**



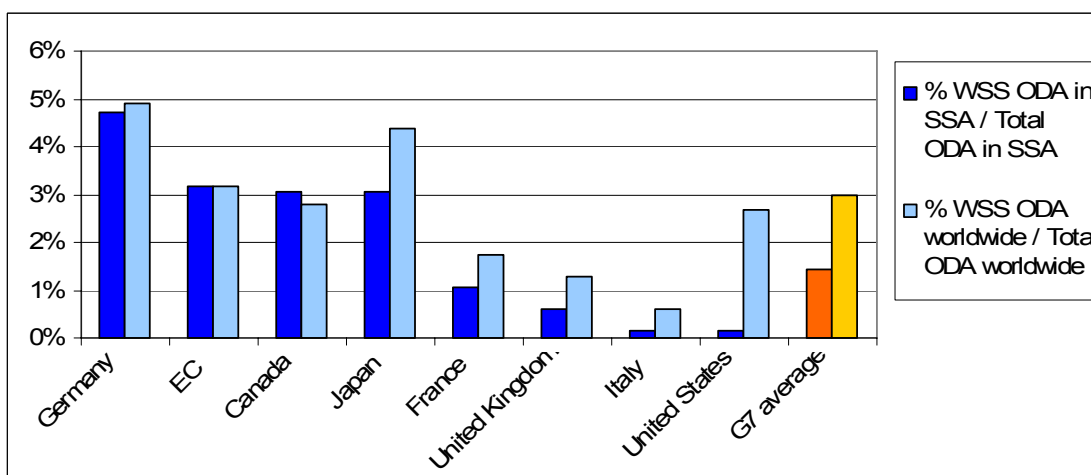
**Figure 5: Trend in average annual disbursements in WSS to SSA versus ODA in WSS worldwide, from 2002 to 2006**





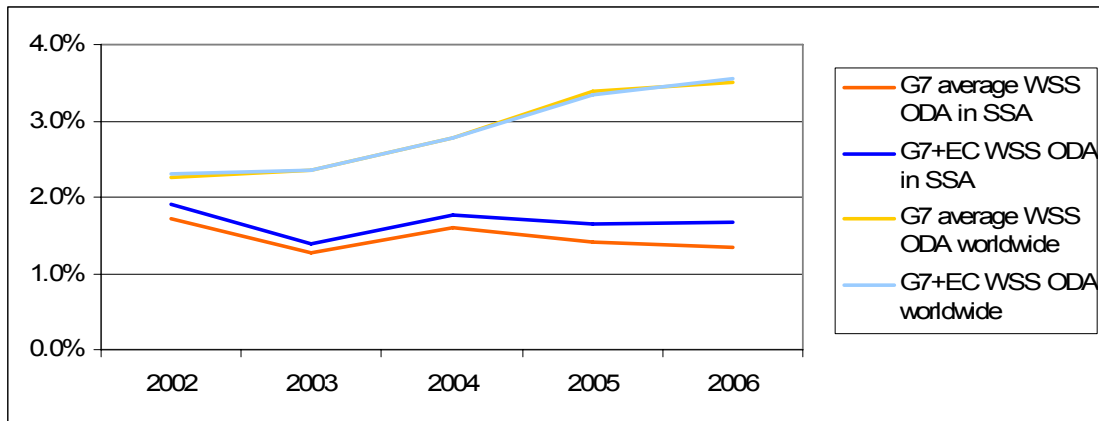
**Focus on WSS.** Overall, the proportion of ODA disbursed to WSS in SSA and worldwide is very low at under 5%, see Figure 6. Germany gave the greatest focus to WSS in SSA and worldwide. The USA gave the least focus to WSS in SSA and Italy the least focus worldwide. Interestingly, Japan, France, the UK, Italy, and the USA all gave a much greater focus to WSS as a proportion of total ODA outside of SSA. Figure 7 charts the focus of disbursements in WSS as a proportion of total ODA in both SSA and worldwide. The trend lines clearly show that whilst the G7+EC focus on WSS in SSA has slightly decreased from 2002 to 2006, albeit with a short-lived increase in 2004, the focus on WSS worldwide has steadily increased from 2.3% to 3.6%.

**Figure 6: Proportion of average annual disbursements in WSS versus total ODA, in SSA and worldwide, between 2002 & 2006**



**Figure 7: Trend in average annual disbursements in WSS versus total ODA, in SSA and worldwide, from 2002 to 2006**



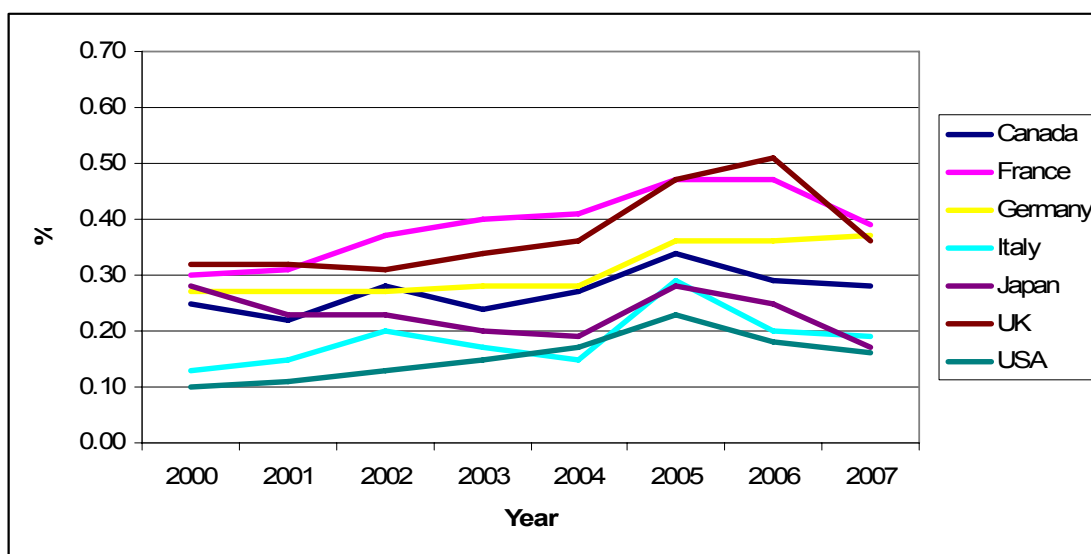


**Potential for more investment.** At less than 0.4%, ODA, as a proportion of Gross National Income (GNI) in all G7 countries, is significantly lower than the 1970 commitment to spend 0.7% of GNI on ODA. There is therefore potential for more investment in ODA from all the G7. Rates peaked in 2005 and 2006 only to fall again in 2007. Assuming the 22 members of the Development Assistance Committee (DAC) spent 0.7% of their GNI in 2007 on ODA, US\$2557 billion would have been spent on development aid<sup>5</sup>. The estimated annual cost of achieving MDG7 for WSS (US\$72.2 billion) represents 28% of this total development aid. However it should be borne in mind that the estimated annual cost of achieving MDG7 for WSS would also be contributed to by recipient governments, beneficiaries, as well as private foundations.

<sup>5</sup> DAC - A key forum of major bilateral donors that work together to increase the effectiveness of sustainable development. GNI figures from World Bank Quick Reference tables (which calculate GNI using the Atlas method)



**Figure 8: Trends in ODA / Gross National Income (GNI), from 2000 to 2007**



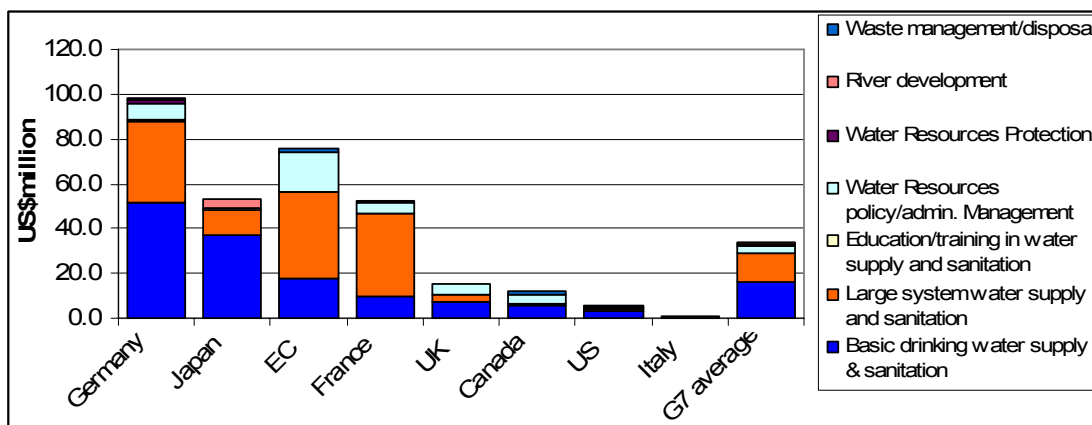
**Demand responsiveness.** WSS investments in SSA were predominantly in basic WSS, large-scale WSS, and water resources policy/administration management, see Figure 9. Encouragingly, 5 out of the 7 donors invested more on meeting basic needs rather than on large-scale sewerage systems and piped water networks, which generally serve those who are less poor and already have access to improved WSS. The EC and France were the only donors to invest more in large-scale WSS. Taking a global perspective, WaterAid have reported that the WSS sector has experienced a decrease in ODA to basic WSS since 2002 (WaterAid, 2008). The data suggest that insufficient investment was made in capacity building, that is, investments in individual and group skills and capabilities, and in the systems and procedures that serve to satisfy organisational demands. Learning from the approach undertaken in successful Asian countries that have significantly increased access to WSS, for every dollar invested in infrastructure, a recommended 70 cents should be invested in capacity building (UNESCO-IHE, 2007)<sup>6</sup>.

Figure 10 shows that average G7 investments in basic WSS increased from 2002 to 2005 and as a proportion of total ODA in WSS in SSA (from 40% to 44%). Meanwhile, investments in large-scale WSS increased in absolute terms but decreased as a proportion of the total (from 51% to 39%).

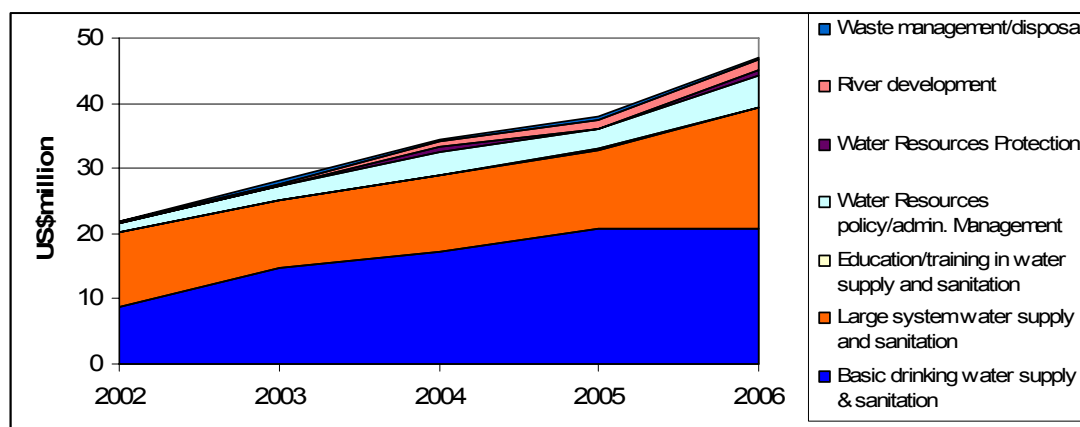
<sup>6</sup> Statement by Mr Wouter T. Linklaen Arriens, Lead Water Resources Specialist at the Asian Development Bank at the UNESCO-IHE 50<sup>th</sup> Anniversary celebration ceremony.



**Figure 9: Average annual ODA disbursements in WSS by type in SSA, 2002 to 2006**



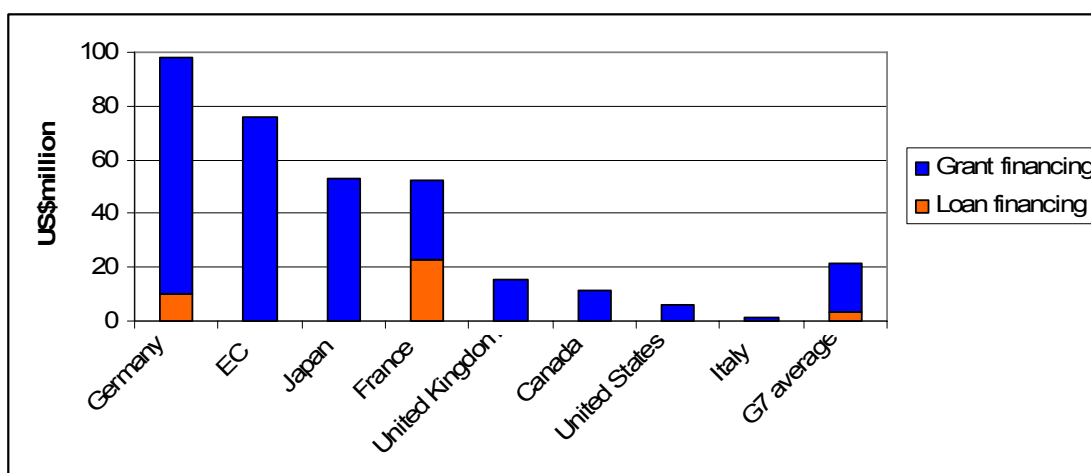
**Figure 10: Trend in average G7 ODA disbursements in WSS by type in SSA, from 2002 to 2006**



**Type of financing.** Only France, Italy, and Germany gave loans to finance WSS activities in SSA between 2002 and 2006. In 2002, loan financing (US\$17 million) represented 46% of France's ODA in WSS in SSA but by 2006 this increased to 67% (US\$60 million). In contrast the proportion of Germany's loan financing of ODA in WSS in SSA decreased between 2002 and 2006 from 11% to 5% (US\$6 million to US\$5.4 million, respectively). Italy gave loans in 2005 only, at total value of US\$910,000.



**Figure 11: Proportion of average annual ODA disbursements in WSS in SSA by type of financing, between 2002 & 2006**



## 2.2. Focus on Italy

**Commitments versus disbursements.** Italy is the least active in the WSS sector both globally and in SSA compared to the G7+EC, ranking last in the average annual disbursement to WSS in SSA with US\$1.64 million. According to the OECD DAC Credit Reporting System, in 2006, the relatively higher commitment of US\$3.9 million to WSS in SSA was not matched by any significant disbursements. Regarding the disbursements, this could be due to no investments made or because results were not reported. The reliability of Italy's reporting system is questionable so these figures are at best indicative.

**Focus on SSA.** Only 14% of Italy's bilateral ODA to the WSS sector went to SSA. However, according to the Italian Ministry of Foreign Affairs, SSA has been the main geographic focus of Italian bilateral ODA over the last few years. According to the OECD DAC donor profile (2008) on Italy, particular attention of Italian ODA is given to the Mediterranean and Middle East Region in the framework of the Barcelona Process (whereby Italy, France and Spain founded the Euro-Mediterranean Information System on the know-how in the water sector – EMWIS).

**Focus on WSS.** The priority sectors of Italian bilateral ODA are broadly those that concern the MDGs but more explicitly are reported as health and gender equality, and since 2008, rural and agricultural development and environmental protection. In a governmental report that forecasts investments and programmes for 2008, no mention is made of water and sanitation as a priority area. Moreover the Ministry of Foreign Affairs' annual reports (2003 – 2006) to Parliament on Italian ODA refer to 4 initiatives and action plans of the G8 as part of their description of the international framework for development cooperation, namely, the Global Fund to Fight AIDS, Tuberculosis, and Malaria, the Africa Action Plan, the Geneva Plan for e-government, and Education For All. No reference is made to the Evian Water Plan as a guiding policy for Italian ODA. That said, in the latest (2006) report to Parliament on Italian ODA, the water sector is mentioned as one of the main recipients of Italian ODA in SSA, although this could be due to the significant level of ODA directed to emergency relief activities, which often include water and sanitation activities. The

OECD DAC donor profile (2008) on Italy reports that WSS activities are deeply intertwined in most operations and that water supply is often found as a sub-component in food security initiatives. Nevertheless, without a distinctive co-operation policy on water, data from the Italian Ministry of Foreign Affairs are generally insufficient and inconsistent to determine whether the WSS sector is/was a main recipient of aid.

According to the OECD DAC Credit Reporting System and in terms of the average annual ODA disbursed to all sectors and on a global scale, the proportion going to the WSS sector is very small at 1%. Within the geographical area of SSA the proportion going to WSS is even less at 0.2%. In both instances, Italy ranks last out of the G7+EC.

**Potential for more investment.** From 2000, Italian ODA as a percentage of GNI has varied from 0.13% in 2000, up to 0.29% in 2005 and down to 0.19% in 2007. There is therefore potential for more investment in ODA based on the 1970 commitment by the world's wealthy nations to spend 0.7% of GNI on ODA.

**Demand responsiveness.** Italian ODA disbursements to WSS in SSA have varied in their focus. In 2004, 67% was invested in large WSS systems, and 16% in both basic WSS and Water resources policy/administration and management. In 2005 a more pro-poor approach was adopted with 55% of disbursements to WSS in SSA going to basic WSS. No data for 2006 could be due to no investment in WSS in SSA or because results were not reported. Development projects promoting access to water as well as environmental sustainability also include the principles of partnership, at local and global levels, and the equitable sharing of water resources among stakeholders and across geographical and administrative boundaries. Furthermore, the Italy promotes the mainstreaming of women's empowerment into its water projects (OECD DAC Secretariat and the World Water Council, 2008).

**Aid channels.** The majority of ODA goes through bilateral channels followed by multilateral, and multilateral channels. In 2008, forecasts show ODA going to multilateral agencies that focus on gender issues, climate change and environmental protection, agricultural development and food security, and emergency relief. NGOs are also typically used for implementation in the WSS sector. Moreover, within the WSS sector, Italy is increasing its involvement in joint programmes and programme-orientated joint financing with other donors, in line with its adoption of the 2005 Paris Declaration, to enhance aid effectiveness and increase recipient government ownership of development projects (OECD DAC Secretariat and the World Water Council, 2008).

**Current WSS projects.** At the time of writing, the Italian government is supporting five WSS projects in SSA in Mali, Sudan (2 projects), Burundi, and Kenya through a mix of bi- and multi-lateral channels, and with commitments ranging from Euro 0.24 million to Euro 3.5 million. All projects are funded through grants, which are managed directly by the Ministry of Foreign Affairs' Director General for Development Cooperation (DGCS) or, by NGOs: *Comunita' Impegno Servizio Volontariato* (CISV), *Comitato Collaborazione Medica* (CCM), *Associazione Internazionale Volontari Laici* (LVIA) and *OI*. Likewise, implementing agencies are either the DGCS or NGOs (CCM) as well as the multilateral organisations, UNICEF and UN HABITAT<sup>7</sup>. For more details of ongoing and past WSS projects see Appendix 4.

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<sup>7</sup> See Appendix 4 for the complete list of NGOs



### **3. Mapping of the main and innovative WSS initiatives in SSA**

'Main' initiatives refer to those with large financial investments and a significant presence in the WSS sector in SSA. 'Innovative' initiatives refer to those that are small or new yet promising in their ability to increase access to WSS for the poor.

#### **3.1. Rural Water Supply and Sanitation Initiative**

The Rural Water Supply and Sanitation Initiative (RWSSI) is one of four water initiatives of the African Development Bank Group but places greater emphasis on addressing basic WSS needs. It aims to provide safe water and basic sanitation to 66% of the rural population in Africa by 2010, and 80% by 2015, with the possibility of reaching 100% coverage by 2025.

The cumulative investment required to achieve 80% coverage by 2025 is US\$14.2 billion. Estimated investments by area are US\$9.7 billion for water supply infrastructure and associated investments, US\$4.4 billion for sanitation, and US\$95.5 million for administration and facilitation. Estimated financial needs by phase are, Phase 1 (2004-2007) US\$4.6 billion, phase 2 (2008-2010) US\$4.6 billion, and phase 3 (2011-2015) US\$5.4 billion

Predicted financial contributions are 30% from the ADF replenishment; 50% from other bi- and multi-lateral donors; 15% from recipient governments; and, 5% from beneficiaries. Significant donors are France, Denmark and the Netherlands who are providing earmarked support through a multi-donor trust fund.

However Phase 1 experienced a significant financial shortfall. Commitments were as follows: US\$1.367 billion from the African Development Fund (AFD) (30% of final target as planned); US\$912 million (20% of final target compared to the 50% planned); and US\$912 million from recipient governments and beneficiaries (20% of final target as planned). The commitments meant a financial shortfall of US\$1.366 billion, or 30% of the final target (US\$4.557 billion). Furthermore, the ADF approved only US\$767 million for rural WSS by the end of Phase 1 representing 56% of their commitment. An additional US\$492 million of approved finance was redirected to urban WSS.

Activities cover a wide range, including: Mobilising funds from a range of sources; Fast-tracking the preparation and implementation of national WSS programmes; Encouraging greater coordination within the sector; Adoption of demand-driven programmatic approach as opposed to multi-project approaches; Capacity building for decentralised Government institutions, communities, private sector and artisans; Ensuring beneficiary participation; Assuring sustainability through promotion of appropriate technology; and, Hygiene promotion and health education.

A wide range of partners are involved: Donors, for funding and technical assistance; NGOs, for funding, implementation, facilitation and mobilisation, education, training, capacity building; the Private sector, for programme implementation, Operation & Maintenance, manufacturing and supply of components, spares, tools, training, etc; and, the New Partnership for Africa's Development (NEPAD)/Africa Ministers Council on Water (AMCOW), for securing political and financial support.

See Appendix 5 for an overview of the AfDB Water Framework and the linkages between the initiatives.



## Strengths and Weaknesses

| Issue                 | Strengths  | Weaknesses   |
|-----------------------|--|--|
| Strategy              | <ul style="list-style-type: none"> <li>- Clear strategic direction</li> <li>- Focus on social development</li> </ul>   | <ul style="list-style-type: none"> <li>- Gender equality not mainstreamed</li> </ul>   |
| Knowledge & capacity  | <ul style="list-style-type: none"> <li>- Sound reputation in SSA</li> </ul>  | <ul style="list-style-type: none"> <li>- Internal systems and staffing capacity poor. Issues identified and being addressed with assistance from Denmark, Finland, France, the Netherlands, and the UK, but current and near future internal capacity levels unknown.</li> </ul>   |
| Approach              | <ul style="list-style-type: none"> <li>- Well aligned with national poverty reduction strategies and policies</li> <li>- Harmonised with other donor activities including inter-agency co-ordination and information sharing</li> <li>- Solid partner relationships at all levels and with African organisations</li> <li>- Demand responsive centralised management approach at local government and community levels (although capacity constraints first need to be addressed)</li> <li>- Field presence</li> </ul> | <ul style="list-style-type: none"> <li>- Differing degrees of alignment with national procedures</li> </ul>  |
| Investment activities | <ul style="list-style-type: none"> <li>- Social and gender issues previously overlooked but addressed since 2007.</li> <li>- M&amp;E systems recently built into programmes</li> </ul>   | <ul style="list-style-type: none"> <li>- Slow start from 2005</li> <li>- Prior to 2007, significant funds redirected to urban WSS projects</li> </ul>  |
| Beneficiaries         | <ul style="list-style-type: none"> <li>- Rural poor in SSA, including those countries with very low coverage rates and/or poor progress towards MDGs, such as Ethiopia, Mali, Burkina Faso, Tanzania</li> </ul>  | <ul style="list-style-type: none"> <li>- Rate of coverage low</li> <li>Estimated versus planned beneficiaries by end 2007:<br/>32million/82.5million (water)<br/>31million/104.8million (sanitation)</li> </ul>  |
| Innovativeness        |  | <ul style="list-style-type: none"> <li>- Slow internal business processes due to capacity constraints and inefficiencies such as the ability of field officers to approve even small contracts, which slows down implementation</li> <li>- Innovative financing instruments not used, now being considered to raise investment capital (local currency financing, sub-sovereign lending, local capital markets, guarantee instruments). Usage unknown</li> </ul> |
| Finance               | <ul style="list-style-type: none"> <li>- Strong financial partnerships with donors</li> </ul>  | <ul style="list-style-type: none"> <li>- Disbursement delays</li> <li>- Insufficient funds leveraged from donors in Phase I</li> <li>- Funds sometimes insufficient to create programmes or cover cost of planned interventions</li> </ul>   |

(AfDB, 2006; ANEW, FAN, WaterAid, 2007; MOPAN, 2007; DANIDA, undated)

### 3.2. European Union Water Initiative

The European Union Water Initiative (EUWI) was launched in 2002 as the EU's main contribution to the achievement of MDG7 on WSS, within the context of an integrated approach to water resources management. It is due to end in 2015. As a political initiative, rather than a financial instrument to deliver ODA, its five objectives are to:

1. Reinforce political commitment towards action and partnership;
2. Promote improved water governance, capacity building and awareness;



3. Improve efficiency and effectiveness of water management through multi-stakeholder dialogue and coordination;
  4. Strengthen co-operation through promoting river basin approaches in national and transboundary waters; and,
  5. Identify additional financial resources and mechanisms to ensure sustainable financing.
- (EUWI, 2008)

The EUWI organization framework consists of various groups, which hold different advisory/organizational/cooperative responsibilities. Worthy of note is the African Working Group open to African and European countries and other interested organisations. Since the reform of the EUWI in 2007, the regional working groups are supposed to be the engines behind the initiative and be responsible for implementing the EUWI objectives, designing work plans and monitoring indicators. So far, lead countries of the African Working Group have been France (2007) and the UK (2008).

In 2007 and 2008, the African Working Group's overall activity was continuing the dialogue between the African Ministerial Council on Water – Technical Advisory Committee (AMCOW-TAC) and the EU on the African – EU Strategic Partnership on Water Affairs and Sanitation, signed by Heads of State in 2002. In other words, activities comprise of meetings, summits, revising work plans, and communicating with members and stakeholders. In addition: A thematic discussion was held on sanitation, the result of which is not clear; Country dialogues were held with the Republic of Congo and the Central African Republic and a road map of political and financial strategies to reach MDG targets were prepared and reviewed in national forums; A mapping exercise of EU aid to Africa has been conducted and due for publication in December 2008; and, activities were closer aligned with other international actors such as UN-Water, AfDB, and the World Bank Water and Sanitation Programme (WSP).

The African Working Group's budget in 2007 was €125,000 (€95,000 from Germany, for the Africa Working Group support group & the mapping exercise, and 130,000€ from France, for the AWG support group, the mapping and the thematic discussions on sanitation and IWRM). In 2008 the budget was €427,000 of which nearly all has come from the EC.

In December 2005, the EUWI came under severe criticism from two NGOs, WaterAid and Tearfund, for its slow progress, ineffective systems and lack of any tangible results. At the same time, EU member states' aid to WSS had reportedly declined and became less targeted at Africa (WaterAid & Tearfund, 2005).

**Past EUWI initiative:** Under the framework of the EUWI lay the Africa, Caribbean & Pacific – EU Water Facility (ACP-EUWF). Its aim was to boost the sustainable delivery of water and sanitation infrastructure and improve water governance and Integrated Water Resources Management (IWRM) practices in ACP countries by helping to address the financing gap. A total of €500 million, were evenly spent between the two calls for proposals in 2004 and 2005. Funds were awarded to state and non-state actors, NGOs and civil society, as well as the African Water Facility, and the Nile Basin Initiative. However there do not appear to have been any new calls for proposals for a few years.



### 3.2.1. Strengths and weaknesses

| Issue                 | Strengths  | Weaknesses   |
|-----------------------|--|--|
| Strategy              | - Clear strategic direction<br>- Gives much needed political support to the WSS sector   | - Gender equality not mainstreamed<br>- High level and political with as yet no impact on the ground                           |
| Knowledge & capacity  |  | - Designed by officials & politicians not practitioners in development countries<br>- Poor reputation in development community |
| Approach              | - Starting to harmonise activities with other donors   | - Bureaucratic and slow<br>- Risk of duplication of EUWI country dialogues with other donor-government liaisons                |
| Investment activities | - Aimed at improving the 'quality of aid' to the WSS sector e.g. enhanced enabling environment (improved sector strategies, governance, capacity), improved targeting (geographically, urban/rural context, water/sanitation sub-sectors), and sharing of best practices (technologies & approaches) | - Slow start from 2002   |
| Beneficiaries         | - Potential to create an effective enabling environment at the national level to benefit the poor  | - None of the poor with no or low access to safe drinking water and basic sanitation have benefited yet                        |
| Innovativeness        |  | - None   |
| Finance               |  | - Poor commitment from EU member states through ad hoc financial contributions   |

### 3.3. Public-Private Partnership for Handwashing

The Public-Private Partnership for Handwashing (PPPHW) is a global initiative to promote handwashing with soap to reduce the incidence of diarrhoea. It aims to facilitate large-scale handwashing programmes at the country level and use lessons learnt to promote the approach at a global level. Rather than provide funding it offers technical assistance to partner countries. Its philosophy is based on the requirement that the recipient countries' public sectors take the lead and provide political commitment, that existing WSS schemes are built on, programmes target the vulnerable (mothers, children and the poor) and are large-scale, PPPs are only a tool, no branded soap products are used, and all partners are transparent in the operations and considered equal.

Partners supporting and driving the initiative since 2002 are: the Water & Sanitation Program (WSP)<sup>8</sup>, World Bank, London School of Tropical Hygiene and Medicine, Academy for Educational Development, Centre for Disease Control and Prevention, USAID, UNICEF, Bank Netherlands Water Partnership, Colgate-Palmolive, Procter & Gamble, and Unilever. The Secretariat is based in the WSP and provides assistance to the initiatives Steering Committee, offers technical assistance to country programmes, arranges cross-country learning, promotes the development of evidence-based handwashing programmes and conducts advocacy at the global level.

<sup>8</sup> Created in 1979, the Water and Sanitation Program (WSP) is a multi-donor partnership and independent unit of the World Bank that has gained significant experience and expertise in the WSS sector. Its overall aim is to help the poor gain sustained access to improved WSS.



Key principles of the initiative are:

- Transparency and equality of the partners
  - All research information and knowledge coming out of the new initiative is placed in the public domain in a timely manner, through the program website and other dissemination tools.
  - All research information and knowledge arising out of the new initiative is open to other soap manufacturers.
  - No branded soap products are used in the communication campaigns.
- Involvement of local soap firms
  - The focus is on the act of washing hands at critical junctures using whatever soap people like.
  - The consultative process includes the small-scale sector at every stage since the outset in January 2001.
  - All local manufacturers are welcome to participate in the program.
  - The shift in consumption pattern with overall increase in market size of soaps for the private manufacturers won't have any detrimental impact on the small scale sector.

<http://www.globalhandwashing.org/Aboutus.htm>

Besides from the above principles, there does not appear to be an ethical code of conduct per se to which the international private sector must sign up. In the original concept paper of the initiative, predicted benefits for the international private sector included: Enhanced image as a global corporate citizen that increases brand equity; and, an insight into the nature of future markets.

Handwashing projects in SSA are currently underway in Benin, Ghana, Kenya, Senegal, and Uganda, with activities planned in Mali<sup>9</sup>. Based on its experience to-date, the initiative has published the Handwashing Handbook to provide a practical guide to handwashing promotion on a large-scale. The PPPHW is an ongoing initiative with no current plans to end it.

### 3.3.1. Strengths and weaknesses

| Issue                | Strengths  | Weaknesses   |
|----------------------|--|--|
| Strategy             | <ul style="list-style-type: none"> <li>- Clear strategic direction</li> <li>- Focus on social development</li> <li>- Bottom-up approach</li> </ul>   |  |
| Knowledge & capacity | <ul style="list-style-type: none"> <li>- National Governments and local partners have excellent local knowledge of needs of the poor</li> <li>- Excellent knowledge base from wide range of partners – international, national, and local</li> <li>- Secretariat capacity for coordination and support.</li> </ul>                       | <ul style="list-style-type: none"> <li>- Progress/results communicated infrequently on initiative website</li> </ul> |
| Approach             | <ul style="list-style-type: none"> <li>- Alignment with national policies and procedures</li> <li>- Harmonised with other donors and partners</li> <li>- Wide range of partners – governments, donors, national and local private sector, academic and scientific institutions, NGOs and CBOs</li> <li>- Targeted at the poor</li> </ul> |  |

<sup>9</sup> Other countries involved but outside of SSA are Colombia, China, India, Nepal with plans in Panama and Paraguay.



|                       |  |   |
|-----------------------|--|---|
|                       | - Field presence (of local partners)   |   |
| Investment activities | - Focus on software e.g. hygiene promotion<br>- Focus on rural and peri-urban areas<br>- Focus on hygiene<br>- Use of locally produced affordable technology - soap<br>- Monitoring and evaluation system in place |   |
| Beneficiaries         | - Rural and peri-urban poor in countries with 10-45% improved sanitation coverage and 60-80% improved water coverage   | - Questionable whether large-scale programmes using mass media channels will reach the remote rural poor. |
| Innovativeness        | - Public-Private partnerships to launch large-scale promotional campaigns and support local soap producers   |   |
| Finance               |  | - Financial leverage capability unknown   |

### 3.4. Global Scaling Up Handwashing project

The Global Scaling Up Handwashing project will run until the end of 2010 and is a continuation of work previously supported by the PPPHW (see 3.3 above). It aims to implement a structured learning and dissemination process to share evidence, practical knowledge, and tools. With funding from the Bill & Melinda Gates Foundation, WSP supports large-scale projects for the promotion of handwashing with soap in Senegal and Tanzania (as well as Peru and Vietnam) to the target audience of disadvantaged women aged 15-49 and children aged 5-9. As the PPPHW, the project provides technical assistance rather than funding.

Projects objectives are to:

- Promote, design and support the implementation of large-scale handwashing programmes;
- Document and learn about the impact and sustainability of the programmes and the most effective and sustainable approaches to triggering, scaling-up, and sustaining handwashing behaviours;
- Position handwashing as a global public health priority through advocacy, applied knowledge, and communication products.

#### 3.4.1. Strengths and weaknesses

| Issue                | Strengths  | Weaknesses  |
|----------------------|--|---|
| Strategy             | - Clear strategic direction<br>- Focus on social development   |   |
| Knowledge & capacity | - Expert WSS knowledge in-house<br>- National Governments and local partners have excellent local knowledge of needs of the poor<br>- Sound reputation in the WSS sector and in SSA<br>- Dissemination of technical and analytical reports | - Progress/results to-date not communicated to public |
| Approach             | - Facilitator approach<br>- Alignment with national policies and procedures<br>- Harmonised with other donors and partners<br>- Targeted at the poor<br>- Field presence (of local partners)   |   |



|                       |  |   |
|-----------------------|--|---|
| Investment activities | - Focus on software e.g. hygiene promotion<br>- Focus on hygiene<br>- Use of locally produced affordable technology – soap |   |
| Beneficiaries         | - Rural and peri-urban poor in countries with 28-33% improved sanitation coverage and 55-77% improved water coverage       |   |
| Innovativeness        | - Focus on handwashing   |   |
| Finance               |  | - Technical assistance alone, no funding given to partner countries |

### 3.5. Water for African Cities programme

In support of MDG7, the Water for African Cities programme aims to improve water access, management, and conservation in African cities through water demand management, minimising environmental impact of urbanisation on freshwater resources, and awareness and information exchange on water issues. Initiated in December 1999, it follows the Cape Town declaration of 1997 adopted by African Ministers to urgently address water resource management in African cities.

Phase 1 (1999 - 2002) resulted in the wide acceptance of water demand management as the cheapest form of augmenting supply at utility and national policy-making levels. Catchment management strategies united various stakeholders from the urban water and environment sectors and community groups into action-planning, implementation, and monitoring of local environmental water resource management. A strategy for raising public awareness to urban water issues was developed for both large-scale public campaigns and educational approaches in schools. Phase 1 cities were: Abidjan (Côte d'Ivoire), Accra (Ghana), Addis Ababa (Ethiopia), Dakar (Senegal), Johannesburg (South Africa) Lusaka (Zambia) and Nairobi (Kenya).

Phase 2 (2003 – 2008) was launched by African Ministers of the African Ministerial Conference on Water (AMCOW) and focused on a wide range of issues in 17 African cities: pro-poor governance; improved sanitation; urban catchment management; water demand management at city, national, and regional level (in other words water charging, improving efficiency and reducing waste - leakage); water education in schools and communities; advocacy, awareness raising and information exchange; gender mainstreaming; and, capacity building of managers and policy/decision-makers. The Gender and Water Alliance (GWA) was engaged by UN HABITAT to develop gender sensitive norms and standards in WSS utilities so that the most vulnerable urban families could benefit from improved access to safe water and basic sanitation facilities.

The programme represents one of the UN HABITAT's global initiatives in urban WSS and is financed under the auspices of the WSS Trust Fund whose previous significant donors were the Netherlands, Canada, Norway, Sweden, and Spain. The Trust Fund's strategic plan from 2008 to 2012 shows the estimated financing requirement of US\$63 million for the Water for African Cities programme and its two equivalents in Asia and Latin America & the Caribbean.



### 3.5.1. Strengths and weaknesses

| Issue                 | Strengths   | Weaknesses   |
|-----------------------|---|--|
| Strategy              | <ul style="list-style-type: none"> <li>- Focus on social and economic development in an environmentally friendly manner</li> <li>- Integrated approach to water management</li> </ul>   |  |
| Knowledge & capacity  | <ul style="list-style-type: none"> <li>- Wide knowledge base of water supply issues (social, ecological, environmental, economic, managerial)</li> <li>- Expert knowledge developed in-house and through partnerships and a global and regional presence.</li> <li>- Sound reputation in the urban WSS sector and in SSA</li> </ul> |  |
| Approach              | <ul style="list-style-type: none"> <li>- Work closely with the Government and City authorities</li> <li>- Alignment with national policies and procedures</li> <li>- Harmonised with other donors and partners</li> </ul>   | <ul style="list-style-type: none"> <li>- Risk of not always being pro-poor through large-scale investments and cost recovery mechanisms</li> </ul> |
| Investment activities | <ul style="list-style-type: none"> <li>- Focus on software (capacity building) and hardware (infrastructure)</li> <li>- Focus on urban areas with expert knowledge base</li> </ul>  | <ul style="list-style-type: none"> <li>- Focus on water supply as opposed sanitation and hygiene</li> </ul>  |
| Beneficiaries         | <ul style="list-style-type: none"> <li>- Urban poor</li> </ul>  | <ul style="list-style-type: none"> <li>- Urban wealthy</li> </ul>  |
| Innovativeness        | <ul style="list-style-type: none"> <li>- Integrating WSS with water resource management and environmental protection</li> </ul>   |  |
| Finance               |   | <ul style="list-style-type: none"> <li>- Type of financing (grant/loan) not publicised</li> </ul>  |

### 3.6. Global Sanitation Fund

The Global Sanitation Fund (GSF) is a trust fund that aims to boost expenditure on sanitation and hygiene in accordance with national sanitation and hygiene policies. The overall purpose therefore is to help large numbers of poor people to attain safe and sustainable sanitation services and adopt good hygiene practices.

Officially launched in March 2008 by the UN Water Supply and Sanitation Collaborative Council (WSSCC)<sup>10</sup>, the GSF was created to fill the gap of no global financing mechanism for sanitation. It represents the third pillar of WSSCC's work which otherwise centres on sector collaboration, knowledge management and advocacy in the WSS sector with particular regard to sanitation and hygiene. The WSSCC Secretariat is legally and administratively hosted by the UN World Health Organization (WHO) in Geneva, so the legal identity of the GSF is as a trust fund of the WHO.

The GSF is a single pooled fund open to contributions from a variety of sources, governments, organisations, and the private sector. New donors in WSS are welcomed to attract more funds into the sector. Donors are encouraged to make multi-year commitments and are not allowed to earmark investments.

<sup>10</sup> The WSSCC was established by the UN in 1990 to improve access to drinking water and sanitation for the world's poor.



In addition to the WSSCC Secretariat is the Advisory Committee, consisting of seven experts, and set up to offer professional advice to maximise the quality of work supported by the GSF.

At the national level, funds will be allocated to Executing Agencies, selected by the WSSCC Secretariat, which will then grant funds to Sub-Grantees at the local level to implement the sanitation and hygiene programmes agreed for each country. The programmes need not be new but can already exist and be in need of additional funding. Funds will be closely monitored by WSSCC and in country and global audit mechanisms.

Planned investment approaches will be people-centred, community-managed and demand driven, targeted to poor and unserved communities, gender considerate, respectful of national leadership, and will strive to expand coverage in a sustainable manner. The GSF's main function is to help the poor by increasing the number of people with improved sanitation and hygiene. It will therefore support scaling up and replication of proven techniques rather than the development and testing of new ones. The WSSCC considers that in many countries the small CBOs and NGOs are best at working with communities on a demand-led basis, so the GSF is likely to fund a large number of small programmes rather than a small number of large ones.

The main emphasis of GSF funding is on hygiene promotion and demand creation, not construction of (either on-site or off-site) infrastructure. The latter would rarely be funded and only if proven to be specifically pro-poor and sustainable.

The GSF will operate globally but on a country-by-country basis. Country selection criteria include: WSS health indicators; economic and social development indicators; National sanitation policy or strategy and funding from other sources; Governmental cooperation; and, Existing active National Water Sanitation Hygiene (WASH) Coalition or other WSSCC partners that request funding from the Global Sanitation Fund for that country. Round 1- countries where programme development is already underway are Burkina Faso, Madagascar, Senegal, Uganda, as well as India, Nepal, and Pakistan.

In addition to the programmes, the GSF plan to enable:

- Informal learning, to inform the public about its activities and lessons learnt
- Structured learning, to share and discuss experience within and outside of the WSS sector
- Internal GSF learning, to update policies and procedures from lessons learnt



### 3.6.1. Strengths and weaknesses

| Issue                 | Strengths  | Weaknesses  |
|-----------------------|--|---|
| Strategy              | <ul style="list-style-type: none"> <li>- Clear strategic direction</li> <li>- Strategic focus on the troublesome areas of sanitation provision and hygiene promotion</li> <li>- Gender equality is mainstreamed</li> </ul>   | <ul style="list-style-type: none"> <li>- Yet to be put into practise</li> <li>- Risk of top-down approach if national policy formulation was not participatory</li> </ul> |
| Knowledge & capacity  | <ul style="list-style-type: none"> <li>- Excellent knowledge base of WSS issues</li> <li>- Longstanding reputation for multi-stakeholder participation, coalition building, people-centred approaches, knowledge management, and advocacy in WSS</li> </ul>  |   |
| Approach              | <ul style="list-style-type: none"> <li>- Relatively un-bureaucratic</li> <li>- Aligned with national poverty reduction strategies and policies</li> <li>- Harmonised with other donor activities</li> <li>- Solid partner relationships at all levels and with African organisations</li> <li>- Targeted at the poor</li> <li>- Field presence</li> <li>- Learning events</li> </ul> | <ul style="list-style-type: none"> <li>- Yet to be put into practise</li> <li>- Planned alignment with national procedures questionable</li> </ul>                        |
| Investment activities | <ul style="list-style-type: none"> <li>- Focus on software (demand creation), as opposed to hardware (infrastructure)</li> <li>- Focus on sanitation and hygiene, not water supply</li> <li>- Investment in proven techniques</li> <li>- M&amp;E systems in place</li> </ul>   | <ul style="list-style-type: none"> <li>- No mention of focus on rural or urban areas</li> </ul>   |
| Beneficiaries         | <ul style="list-style-type: none"> <li>- Four out of seven Round 1 countries are in SSA and have low improved sanitation coverage (ranging from 12% to 33%).</li> </ul>  |   |
| Innovativeness        | <ul style="list-style-type: none"> <li>- Focus on hygiene promotion and demand creation.</li> </ul>  |   |
| Finance               | <ul style="list-style-type: none"> <li>- Strong financial partnerships with donors</li> <li>- Fund open to broad range of sources, old and new, with WHO regulation for support</li> <li>- No earmarked funds from donors</li> <li>- Multi-year grant funding commitments</li> </ul>   | <ul style="list-style-type: none"> <li>- Raised funds as yet not published so ability to raise funds unknown.</li> </ul>  |

### 3.7. Global Water Initiative

In 2007, the Global Water Initiative (GWI) was launched to address the declining state of fresh water resources and the lack of access to safe drinking water and basic sanitation for many of the world's poor. It aims to integrate all aspects of water resource management, including emergency relief and immediate community needs as well as longer-term development (of domestic and productive water uses) and sustainable water resource management.

The GWI is formed of a coalition of seven international NGOs headed up by Action Against Hunger (Action Contre le Faim - ACF) and comprising CARE, Catholic Relief Services, the World Conservation Union, the International Institute for Environment and Development, Oxfam America, and SOS Sahel UK. Thus bringing together experts from a variety of backgrounds: domestic WSS; agriculture; environmental management; water resource analysis; policy development; and, public education.



Activities principally comprise delivering water and sanitation services to poor rural communities. Substantial investments are also made in capacity building at the community, and local-, national-, and inter- governmental levels to facilitate sustained services, improve governance, coordination and cooperation, promote innovation, and support the development of sound integrated water resource management policies. Examples of GWI project activities undertaken so far are constructing/rehabilitating WSS infrastructure in schools, rehabilitating rainwater harvesting storage facilities, raising the awareness of the opportunities for Multiple (Water) Use Services (MUS), and offering leadership training to women.

There are a total of 13 target countries in SSA and Central America. Those in SSA are Burkina Faso, Ethiopia, Ghana, Kenya, Mali, Niger, Senegal, Tanzania, and Uganda. Target communities are the poorest and most vulnerable and include refugees and internally displaced persons.

The private foundation of Howard G. Buffett is funding the initiative with a US\$150million commitment over 10 years.

### 3.7.1. Strengths and weaknesses

| Issue                 | Strengths   | Weaknesses   |
|-----------------------|---|--|
| Strategy              | <ul style="list-style-type: none"> <li>- Focus on social and economic development with primary importance on the former</li> <li>- Integrated approach to water management</li> </ul>   |  |
| Knowledge & capacity  | <ul style="list-style-type: none"> <li>- Wide knowledge base of water supply issues (social, ecological, environmental, economic, managerial)</li> <li>- Civil society organisations pro-poor with sound knowledge of rural livelihoods</li> </ul>  | <ul style="list-style-type: none"> <li>- Capacity to influence national and sub-national policies on IWRM questionable</li> </ul>  |
| Approach              | <ul style="list-style-type: none"> <li>- New model – non-profits with private foundation to enhance non-profit capacities while scaling-up the reach &amp; impact of their programmes</li> <li>- Relatively un-bureaucratic</li> <li>- Activities and procedures harmonised across participating partners</li> <li>- Solid partner relationships with local NGOs</li> <li>- Targeted at the poor</li> <li>- Field presence of NGO(s)</li> </ul> | <ul style="list-style-type: none"> <li>- Alignment with national policies and procedures unknown</li> </ul>  |
| Investment activities | <ul style="list-style-type: none"> <li>- Focus on software (capacity building) and hardware (infrastructure)</li> <li>- Focus on rural areas</li> <li>- MUS takes into account both domestic and productive water needs of rural livelihoods</li> </ul>   | <ul style="list-style-type: none"> <li>- No mention of hygiene promotion activities</li> </ul>   |
| Beneficiaries         | <ul style="list-style-type: none"> <li>- 5 out of the 9 SSA countries have low improved water supply coverage in rural areas (below 50%).</li> </ul>  |  |
| Innovativeness        | <ul style="list-style-type: none"> <li>- MUS</li> <li>- Rainwater harvesting</li> </ul>   |  |
| Finance               | <ul style="list-style-type: none"> <li>- Grant financing</li> </ul>   | <ul style="list-style-type: none"> <li>- Broad strategic direction in terms of issues to address and countries to target, with limited funding per annum of US\$15million</li> </ul> |



### 3.8. Global Water and Sanitation Initiative

The International Federation of Red Cross and Red Crescent Societies (IFRC) created the Global Water and Sanitation Initiative (GWSI) from 2005 to 2015 in support of MDG7 and the UN Decade 'Water for Life'.

From 1993 to 2005, 9 million people benefited from IFRC WSS activities, 28% of which benefited from development activities, rather than emergency relief. From 2006 to 2015 the objective is to reach 14 million people with WSS programmes of which 36% would be recipients of development activities (IFRC, 2004). In short, the GWSI aims to scale-up WSS *development* programmes in order to improve the health and hygiene of more target populations, whilst enabling financial, operational, and environmental sustainability of their community-managed systems.

The GWSI is a common approach across the Red Cross and Red Crescent National Societies who are responsible for preparing proposals for funding from the initiative and subsequent implementation and monitoring and evaluation of the WSS projects. It can involve support to both multilateral and bi-lateral funding opportunities. The WSS unit based in the IFRC in Geneva offers an advisory and technical support services role to the National Societies throughout the project life cycle.

Programme approaches used are: Targeting of vulnerable communities with low WSS coverage; Beneficiary participation; Appropriate, environmental, local, easily maintainable and affordable technology options; Larger and longer-term projects with matching security in resource mobilisation; Capacity building (technical skills, financial management, conflict resolution, etc.); Improved community participation, management and hygiene/sanitation promotion; Measurable impact indicators; Gender mainstreaming; Alignment with national WSS policies and IWRM; and a Partnership approach involving all relevant stakeholders (governmental, civil society, private, etc.) where necessary and harmonising activities.

Besides from WSS development activities, the GWSI will continue to put more focus on WSS emergency relief, IFRC's core subject. IFRC is one of the main players in emergency WSS and is a member of the UN IASC (Ad-hoc Inter-Agency Standing Committee, Water and Sanitation Cluster Group) alongside other leaders such as UNICEF, UNHCR, OCHA, UN World Food Program, WHO, Oxfam, Medecins Sans Frontieres, and the International Committee of the Red Cross. The GWSI is therefore well positioned to improve the link between emergency relief and development activities, an area that is all too often neglected. An example of such a link would be strengthening vulnerable communities' infrastructure and capabilities to respond to disasters.

#### 3.8.1. Strengths and weaknesses

| Issue                | Strengths  | Weaknesses |
|----------------------|--|------------|
| Strategy             | <ul style="list-style-type: none"> <li>- Clear strategic direction</li> <li>- Link between WSS relief and development activities</li> <li>- Bottom-up approach</li> <li>- Gender mainstreamed</li> </ul> |            |
| Knowledge & capacity | <ul style="list-style-type: none"> <li>- National Societies and local partners have excellent local knowledge of needs</li> </ul>  |            |



|                       |  |  |
|-----------------------|--|--|
|                       | of the poor<br>- Proven capacity in WSS emergency relief and development activities on the ground<br>- Head office capacity for coordination and support.                              |  |
| Approach              | - Alignment with national policies and procedures<br>- Harmonised with other donors and partners<br>- Partnerships central to activities<br>- Targeted at the poor<br>- Field presence |  |
| Investment activities | - Monitoring and evaluation system in place  | - Results and focus of implementation activities not yet available |
| Beneficiaries         |  | - As yet, unknown  |
| Innovativeness        | - Link between relief and development  |  |
| Finance               | - Grant financing  | - Financial leverage capability unknown.                           |

### 3.9. Dutch-British Framework for Action

At the September 2009 UN High Level Meeting on the MDGs, the British and Dutch Governments launched the Framework for Action to improve access to WSS in 20 developing countries over 5 years. An investment of €100 million was pledged to support the development and implementation of national WSS plans in the 20 countries furthest behind schedule in meeting MDG7. An additional €6 million was pledged to establish an annual report and high-level meeting to monitor and drive progress in the sector. The first meeting is planned for 2009 and to be convened by UNICEF.

The two governments also plan to strengthen cooperation on WSS issues between the private sector and civil society organisations and promised to consider the merits of a 'fast-track' fund targeted at improving capacity at country level. It is not yet clear how the Framework for Action will work, in other words, whether it will channel aid through projects or sectoral or budget support. Both countries generally provide more than 75% of aid through projects<sup>11</sup>.

The new initiative was welcomed by the End Water Poverty<sup>12</sup> campaign, whose own recommendations shaped much of the strategy. However it is recognised that more funding is required to have meaningful results and it is hoped that the initiative will encourage more action from other European Union member states.

#### 3.9.1. Strengths and weaknesses

| Issue                | Strengths   | Weaknesses             |
|----------------------|---|------------------------|
| Strategy             | - Clear strategic direction to improve national WSS plans and sector communication & monitoring<br>- Bottom-up approach | - Still being designed |
| Knowledge & capacity | - Both government have expert and reputed knowledge of, and capacity in,  |                        |

<sup>11</sup> Recent research shows that the Netherlands give 15% of WSS ODA through sector support, and 75% through projects, and the UK channel 11% through budget support and 89% through projects (UN Water GLAAS, 2008).

<sup>12</sup> A coalition of like-minded organisations (principally from civil society and including UNICEF, UNIFEM from the United Nations), spearheaded by the NGO, WaterAid UK, campaigning to end the water and sanitation crisis



|                       |  |  |
|-----------------------|--|--|
|                       | WSS in-house and through solid partnerships with stakeholders in recipient countries   |  |
| Approach              | - Tackling weaknesses in the global WSS sector (poor stakeholder coordination and monitoring and weak national WSS plans)<br>- Alignment with national policies and procedures | - Details not yet known                        |
| Investment activities |  | - Not yet communicated                         |
| Beneficiaries         | - Those most in need for WSS investment  |  |
| Innovativeness        |  | - Not yet known                                |
| Finance               | - Grant financing  | - More funding required for meaningful results |

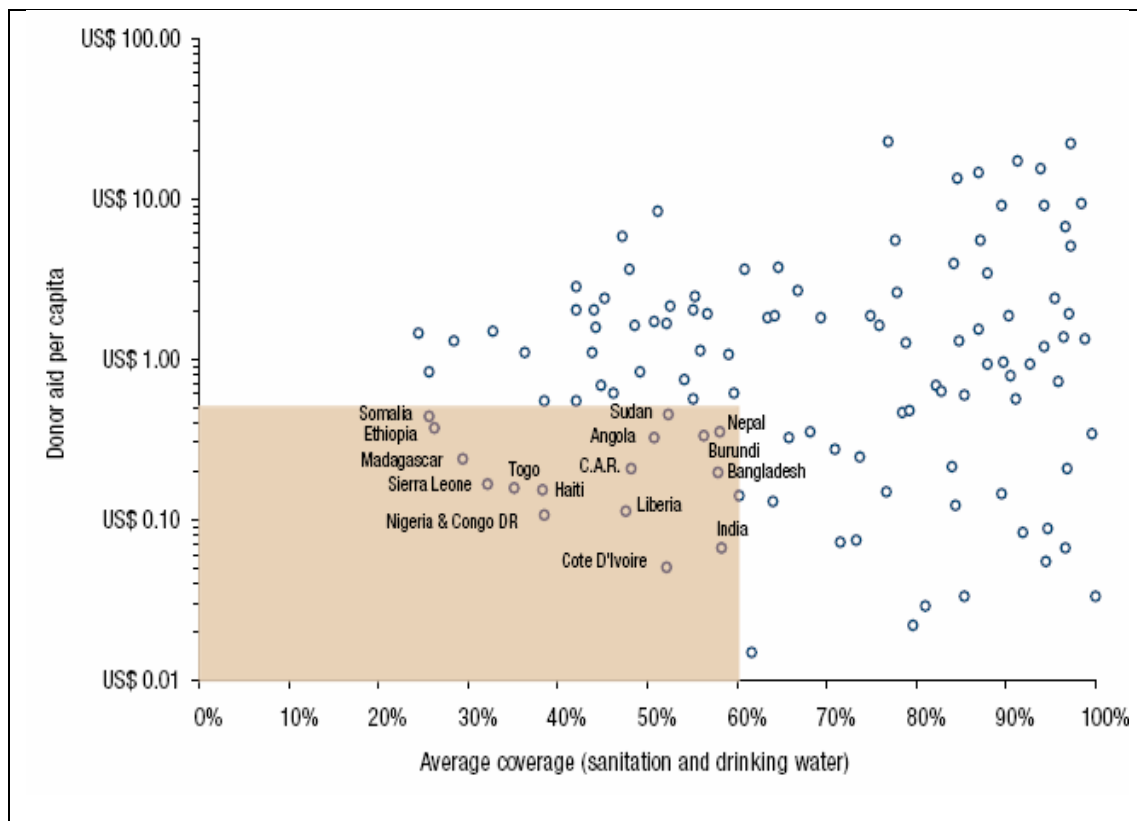


#### 4. Gaps in interventions and mandates and neglected areas to be addressed

##### 4.1. Targeting the poor with low water and sanitation coverage

Data suggest that ODA is not being sufficiently targeted at developing countries with low WSS coverage. Figure 12 shows that 17 countries, 13 from SSA, with low average coverage receive less than US\$0.50 per capita aid for the WSS sector.

**Figure 12: ODA disbursements in 2006 per capita against average WSS coverage levels**



Source: UN Water GLAAS (2008); OECD (2008); WHO/UNICEF (2008)

##### 4.2. Rural / urban disparities

In 2006, global rural and urban populations were almost the same, but 84% and 70% of those without improved water and sanitation, respectively, were rural dwellers. In SSA, improved water and sanitation coverage levels, respectively, in urban areas (81% and 42%) were almost double those in rural areas (46% and 24%) (WHO & UNICEF JMP, 2008). See Appendix 2 for maps of rural and urban coverage in SSA.

WSS has been prioritized in many national development plans and Poverty Reduction Strategy Papers, however actual prioritization, in terms of resource allocations from national budgets, varies considerably between countries. Government spending and aid flows continue to be skewed towards urban areas rather than the more un-served rural areas.



That said, rapid urbanisation and the stress on WSS infrastructure and systems will need to be increasingly addressed. In particular, the development of small towns requires attention and will demand adapted approaches and technologies (Carter, 2006).

### 4.3. Sanitation

The new cost estimates detailed in Table 1 show that needs are heavily weighted towards developing *new* coverage in sanitation. However, data from the following 10 development agencies show that disbursements still focus on water supply rather than sanitation. Note that the sample of agencies is limited because aid flows are rarely disaggregated within the WSS sector.

**Table 2: Disaggregated ODA disbursements in WSS by development agencies**

| Agency                          | Data year | Sanitation & hygiene % | Drinking water supply % | Emergency relief % |
|---------------------------------|-----------|------------------------|-------------------------|--------------------|
| Austria                         | 2007      | 37                     | 63                      | 0                  |
| Bill & Melinda Gates Foundation | 2007      | 46                     | 54                      | 0                  |
| Czech Republic                  | 2008      | 56                     | 44                      | 0                  |
| Germany                         | 2007      | 45                     | 55                      | 0                  |
| Denmark                         | 2008      | 29                     | 71                      | 0                  |
| European Commission             | 2006      | 27                     | 49                      | 24                 |
| Luxembourg                      | 2007      | 23                     | 77                      | 0                  |
| UNICEF                          | 2007      | 38                     | 62                      | 49*                |
| WaterAid                        | 2007      | 20                     | 80                      | 0                  |
| WHO                             | 2007      | 43                     | 57                      | 0                  |

Source: UN Water GLAAS, 2008

Limited investment in sanitation relative to other determinants of human development can be attributed to several factors. Many northern donors have been reluctant to openly discuss the 'nitty-gritty' issues, such as faeces, urine, and menstruation. And only recently, midway through the lifespan of MDG 7, has sanitation become more visible with the United Nations declared International Year of Sanitation in 2008. Methods to advocate for investment in sanitation to policy/decision-makers in recipient countries have also relied upon technological language through epidemiological studies and technology choices, but this has proved relatively unsuccessful (Calow, 2008).

Political indifference on behalf of national governments is another limiting factor, driven by the perceived political risk of support to such an issue compared to other more palatable and attractive issues. Another problem stems from sanitation being an institutional orphan: a crosscutting issue often belonging to several sectors and the responsibility of several ministries (Health, Water, Education, Housing, Environment). Thus, creating difficulties in national policy-making and implementation.

The low priority accorded to sanitation by the rural poor has masked the need for sanitation interventions. A high disease burden is not always a motivator for change,



as people may not realize there is an alternative (Carter, 2006). The issue of sanitation is also socially sensitive, and in many cultures taboo, so raising the issue and asking people to talk about it can be problematic.

In many communities, latrines have a poor reputation for longevity more often than not due to their poor management. Limited financial and technical support leading up to and including the construction of latrines can soon leave them to fall into disrepair. In particular, communal or “off-site” latrines have been hard to manage financially and operationally.

#### **4.4. Hygiene promotion**

Hygiene promotion is commonly used as a politically correct ‘add-on’ to water and sanitation projects. As such, hygiene interventions often fail to create sufficient demand to bring about sustained behavioural change. Miscomprehension of the perceived benefits of sanitation and hygiene intervention hinders effective hygiene promotion. Research suggests that the poor are most interested in having clean homes and communities rid of smells and flies for reasons of status and having improved sanitation and hygiene for convenience sake (McNeill, 2000; UNDP, 2006). In contrast, national governments and development agencies generally think of health and wealth as motivators for change.

Hygiene promotion also faces social and financial restrictions. National or regional hygiene promotion campaigns do not always benefit the poor. Access to mass communication media such as TV and radio, and advertising billboards and promotional posters is often low, particularly in remote rural areas. Illiteracy is another major obstacle to hygiene education. Promotion campaigns have tended to be relatively short and insufficiently supported by local government nor coordinated with the health and education sectors. In addition soap can be too expensive for many of the poorest dwellers despite local demand.

The WSS sector has almost ignored the issue of Menstrual Hygiene to the detriment of women’s and girls’ health, education, and work. Menstruation demands access to materials and facilities that enable hygiene practices and give females the privacy and dignity they deserve. Experiences of agencies in menstrual hygiene have been poorly shared perhaps reflecting the often-taboo nature of the subject.

Although hygiene promotion activities have generally been poor, a few techniques have proved particularly successful, namely, Community-Led Total Sanitation, Participatory Hygiene and Sanitation Transformation (PHAST), Community Health Clubs, and Social marketing.

#### **4.5. Gender equity**

The importance of involving women as well as men in WSS interventions has been frequently recognised at the global level since the UN Water Conference at Mar del Plata in 1977 and up until the MDGs and the International Decade for Action, ‘Water for life’ (2005 – 2015). First and foremost, this is because women are primarily responsible for water collection and management, domestic cleaning and cooking, sanitation, and family health care and therefore have considerable knowledge and



interest in WSS issues. Nonetheless, the rhetoric and good intentions have not always translated into gender-sensitive interventions that attend to gender inequities.

At the community level, this is partly due to women's limited voice when community needs are expressed, but also to illiteracy and their limited ability to express demand for different types of interventions. Females often have limited power in the prioritisation of household expenditure (UNDP, 2006). Consequently technology designs and locations may not be gender sensitive and other important interventions such as bathing shelters and sustainable access to consumables can be overlooked (Source-IRC International Water and Sanitation Centre, 2008). Women's poor access to land is also an underlying factor restricting access to water that has only more recently been addressed by development agencies and still represents an area requiring considerable attention. Meanwhile, increasing migration from rural to urban areas as people leave poor villages in search of work and food, has led to an increase in female-headed households in rural areas, which calls for more and improved gender sensitive WSS interventions.

Beyond the community level, more women are required at the district, regional, national, and international level, if water management is to become representative of the people and to adhere to diverse needs. Capacity building is required to train women to fulfil more WSS jobs, remove gender bias and discrimination in public institutions, and encourage gender sensitive policies, legislation and national strategies (UN Water, 2006).

#### **4.6. Multiple (Water) Use Services (MUS)**

There is commonly a disparity in water usage between what is planned for and what actually happens. Beneficiaries use water systems for what they were originally planned for, as well as for other uses necessary to conduct their daily activities, both domestic and productive. For example, irrigation canals are regularly used for laundry and bathing, and domestic standpipes for livestock watering. The challenges to this are many fold: Facilities can become damaged by improper use limiting their longevity, as when, for example, irrigation canal walls break from human and cattle activity; Health hazards are created when drinking water is taken from untreated water in irrigation canals, which are also used for excreta disposal, washing, livestock watering, etc; Overuse upstream of an irrigation canal causing reduced or even no supply for downstream tail-end users can foster unrest and conflict (Van Koppen et al., 2006). And yet, prohibiting additional uses of single use water services prevents community members from undertaking important livelihood activities.

With community participation, MUS attempts to design, implement and promote integrated management of community water systems based on their multiple livelihood needs. Strategies to improve the livelihoods of the poor need to transcend individual sector boundaries to incorporate varied approaches and enable the reallocation of resources *within* the water sector (domestic, irrigation, livestock, fisheries, water resource management) and *between* sectors (water, health, education, agriculture, rural development). NGOs have generally been at the forefront of MUS implementation as they are less restricted by sector boundaries and national sector-based policies (Van Koppen et al., 2006).



#### **4.7. Capacity building**

During project design there is still an emphasis on hardware (infrastructure) rather than software (hygiene promotion and capacity building - such as financing structures, institutions, social cohesion), whereas software effectively requires two thirds of the design emphasis.

Carefully designed capacity building is required in much of the developing world, from across the public to the private sector and up from the local to national level. This not only involves investing in individual and group skills and capabilities, but also in the systems and procedures that serve to satisfy organisational demands.

In today's development projects, capacity building at the community level to manage community water systems attracts significant investment. Principle focus areas are the establishment of Water Management Committees, ideally formed from existing community organisational structures, and technical, financial and managerial training of these committees so that water systems can be sustained in the long term. A common flaw in the establishment of WMCs, is the poor gender ratio meaning that women and men, with their respective duties, do not have an equal voice. This is partly because projects are restricted to working within and alongside existing community gender balances, which often disfavour women, but are at least a workable solution.

Beyond the community, capacity building efforts have often failed to target those supportive institutions surrounding the communities. This is because after project 'completion', project designs have assumed that communities will be self-sufficient and able to sustain interventions without external support, particularly from development agencies. This has proved to be unrealistic. Community disputes and the need for operational and capital maintenance, rehabilitation and system expansion are common reasons for downfall, highlighting the need for support in maintaining social, human, and physical capital. No matter how appropriate and affordable technologies have been nor how developed local capacities have been, there has always been a need for external assistance (Webster et al, 1999). The problem therefore, is the lack of this assistance.

Decentralisation has changed the role and responsibilities of local authorities to that of service provider but this has rarely coincided with skills and knowledge (let alone financial resources) transfer to the local level. The same lack of capacity in the local private sector holds true, particularly in rural areas, restricting their supportive and innovative potential. Unreliable and undeveloped domestic supply chains also hinder access to consumables, spare parts, and technologies for water, sanitation, and hygiene. The general lack of integrated WSS projects involving local sector stakeholders including self-help associations, NGOs, and the private sector stunts innovation, real demand, and market-orientated solutions that could otherwise help to fill the gaps in sector resources and capacities.

#### **4.8. Development finance at the local level**

During the 1990s there was a wave of decentralisation across many developing countries based on the principle of subsidiarity whereby the responsibility for service-delivery was transferred to the authorities closest to communities. In theory this results in more efficient, accountable and responsive services for community needs.



However, at present the reality is that local authorities have the responsibility but neither the know-how nor the financial resources to deliver effective services to their communities. Insufficient development finance is reaching local authorities responsible for delivering social services.

Development finance follows one of three paths:

- Intergovernmental Transfers (IGTs), determined by the fiscal decentralisation framework, involving transfers of untied or earmarked grants from national to local government;
- Sector programme funds, donor projects whereby funds pass through national ministries and then onto a variety of stakeholders;
- Off-budget funds, project funds following donor policy and implementation procedures and not channelled through national systems.

In a recent study by WaterAid in 12 developing countries<sup>13</sup> it was found that development finance mainly avoided (through sector and off-budget funds) rather than involved local authorities (through IGTs). The reluctance to channel finance through local authorities was attributed to the risk of resources not being allocated to development agency priority sectors and due to poor capacity to plan, finance, implement and manage development projects as required. However, this was found to create a negative cycle of insufficient resources consistently undermining governance and accountability at the local level.

By avoiding local authorities, local authorities have the mandate to deliver WSS services but not the financial capacity for implementation whilst other stakeholders undertake the work. This can have several negative effects:

- Duplication of WSS interventions and inequitable coverage owing to partial knowledge of total available resources and the inability to target resources fairly and effectively
- Incompatible WSS systems that have been based on different IGT (government) and off-budget (donor) policies
- Weak accountability as few projects financed through the budget process, means the majority of WSS projects do not undergo scrutiny by elected representatives (WaterAid, 2007).

#### **4.9. Linking WSS emergency relief to development**

Climate Change is and will continue to be a significant factor to contend with in the fight against poverty. Over the past few decades, more and longer droughts have been observed over wider areas, particularly in the tropics and sub-tropics. The frequency of heavy rainfall events over land areas and flood events in low-lying coastal areas has also increased in many places across the globe. At the same time, human conflict in SSA continues to ravage and strip poor communities of their social and economic capital. WSS systems are destroyed, trained staff flees or is lost, and community members battle with social trauma and disablement preventing the functioning of any kind of WSS development intervention.

Following and during natural disasters and human conflicts, WSS emergency relief is required to fulfil basic human needs, providing minimum levels of well-being and

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<sup>13</sup> Bangladesh, Ethiopia, Ghana, Madagascar, Mali, Nepal, Nigeria, Philippines, South Africa, Tanzania, Uganda, Zambia



preventing the spread of disease. In contrast, the main objective of long-term development is empowerment, enabling people to help themselves. Relief efforts can therefore create a situation of dependence completely at odds with the empowering environment required for development.

Criticisms of emergency relief activities that limit subsequent development interventions include:

- Speed over timeliness – responding to needs as quickly as possible but without assessment to evaluate and prioritise needs that can lead to poor targeting;
- Poor use of local resources – employing agency staff instead of local unskilled and skilled staff, and making insufficient use of local leaders for their influence and local institutions for their knowledge and subsequent role in development;
- Poor coordination between aid agencies - due to competition for funds and media attention, the large numbers of organisations involved and concerns over neutrality, which can cause aid inequalities and duplication;
- Poor consultation with beneficiaries, which can lead to a poor understanding of needs and subsequently poor operation and maintenance of WSS systems (WELL, 2006).

Essential approaches to linking relief and development are ensuring community participation, strengthening infrastructure and institutions and reducing risks through feasible mitigation strategies.



## 5. WSS initiatives and their financial situation

**Table 3: WSS initiatives and their financial situation**

| WSS Initiative                                       | Financial situation   |
|--|---|
| Rural Water Supply and Sanitation Initiative (RWSSI) | - Total financial needs, 2004 - 2015, US\$14.2 billion.<br>- Phase 1, 2004 – 2007, target of US\$4.6 billion. Financial gap of US\$1.4 billion due to lower than planned commitment from donors.<br>- Phase 2, 2008 – 2010, target of US\$4.6 billion. Funds raised not available |
| European Union Water Initiative (EUWI)               | - African Working Group budget, 2007, €125,000 from Germany & France<br>- African Working Group budget, 2008, €427,000, nearly all from EC  |
| Public-Private Partnership for Handwashing (PPPHW)   | - Not available. Technical assistance provided to partner countries rather than funding   |
| Global Scaling-Up Handwashing project                | - Not available. Technical assistance provided to partner countries rather than funding   |
| Water for African Cities                             | - Estimated total financial needs, 2008 – 2012, US\$21 million (Calculated from total financial needs, 2008 – 2012, US\$63 million for the Water for African Cities programme and its two equivalents in Asia and Latin America & the Caribbean).                                 |
| Global Sanitation Fund (GSF)                         | - Not available   |
| Global Water Initiative (GWI)                        | - Total finance leveraged, 2005 – 2015, US\$150 million. With similar funding anticipated   |
| Global Water and Sanitation Initiative (GWSI)        | - Not available   |
| Dutch-British Framework for Action                   | - €106 million pledged by the Dutch and British governments, with additional funding from European member countries being sought.   |



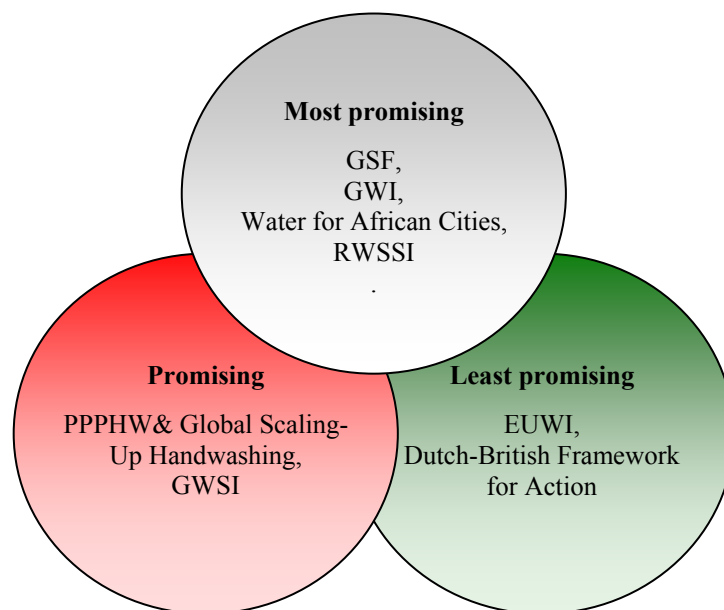
## 6. Selection of the most promising WSS initiatives that could be scaled up with G8 political or financial support

Criteria used to identify the most promising WSS initiatives:

- Finishes at the earliest in 2011 (2+ years after G8 2009)
- Targeted beneficiaries in countries with low WSS coverage levels
- Balanced rural/urban focus
- Investment activities to tackle sanitation and hygiene, as well as water supply
- Gender mainstreaming
- Integrated approach to water management at the community level
- Focus on software rather than hardware
- Effectiveness of development finance
- Attention to linking WSS emergency relief to development

Based on the results of the desk study, and assuming the above criteria, the potential of the WSS initiatives (in section 3) to improve WSS coverage in SSA is depicted in Figure 13.

**Figure 13: The least to the most promising initiatives to improve WSS coverage in SSA**



The reasons for not selecting the following initiatives as very promising were principally:

- PPPHW & Global Scaling-Up Handwashing project. The latter will finish at the end of 2010, too soon after the 2009 G8. There is not a clear distinction between the two initiatives, which both provide technical assistance rather than funding. In addition, it seems that no ethical code of conduct was signed by the international private companies involved;
- GWSI. This is the only initiative in this study to tackle the link between relief and development. However the main focus is undoubtedly on emergency relief rather than development;



- Dutch-British Framework for Action. There is scant information available on this new initiative which still needs to take shape
- EUWI. This is a useful initiative at the high level to raise awareness of WSS issues but no direct impact is felt on the ground and in general progress has been very slow.



## 7. Conclusion: The most promising initiatives, in order of priority

### Global Sanitation Fund

The GSF is a trust fund of the UN WSSCC that was launched in 2008 to help large numbers of the poor to attain safe and sustainable sanitation services and adopt good hygiene practices. Funds will principally be invested in hygiene promotion and demand creation to generate real demand for sanitation facilities and good hygiene practices so that they will be sustained. Furthermore, investments will primarily be made in successful existing projects and programmes rather than in new stand-alone projects. The focus is therefore on scaling up and replication of proven techniques rather than developing and testing new ideas.

The WSSCC has a longstanding reputation for multi-stakeholder participation, coalition building, people-centred approaches, knowledge management, and advocacy in the WSS sector. Through its well established internal systems it is capable of elevating grass roots' lessons learnt to the international arena through advocacy work.

The structure of the GSF is conducive to exploiting necessary expertise and knowledge from the local to international level using: the WSSCC secretariat; the WHO which legally hosts the trust fund; the Advisory Committee of 7 sector experts; National executing agencies that understand the national WSS context and potential implementing partners; and, sub-grantees at the local level (implementers, such as Community-based Organisations and NGOs) that know the local context and how best to operate with the communities on a demand-led basis.

The trust fund is actively seeking donor funding and welcomes old and new donors into the sector. Funds will be closely monitored by WSSCC and in country global audit mechanisms.

|                                      |   |
|--------------------------------------|---|
| Targeting poor with low WSS coverage | Improved water and sanitation coverage levels in target countries<br>Burkina Faso (sanitation 13%),<br>Madagascar (sanitation 12%),<br>Senegal (sanitation 28%),<br>Uganda (sanitation 33%)   |
| Rural / Urban disparity              | Not known   |
| Sanitation                           | The construction of sanitation facilities would only be funded if proven to be specifically pro-poor and sustainable. Otherwise the main emphasis is on creating the demand for sanitation facilities so that people are willing to pay for the facilities themselves.  |
| Hygiene                              | Hygiene promotion is the core investment activity of the fund   |
| Gender equity                        | Investment activities will be gender 'considerate'  |
| MUS                                  | No  |
| Capacity building                    | Capacity building for the purposes of hygiene promotion and demand creation by local actors   |
| Dev. Finance                         | Donor funds cannot be earmarked to particular types of investment enabling the GSF to efficiently direct pooled resources to target areas. Effective development finance is encouraged through multi-year grant funding commitments that aid long-term financial planning and steady/secure financial flows to development programmes, which in turn improves project level planning and implementation |
| Link: relief to development          | No  |



## Global Water Initiative (GWI)

The GWI was formed by a coalition of seven international NGOs to integrate all aspects of water management, including emergency relief, long-term development of domestic and productive water uses and sustainable water resources management, as well as improve access to basic sanitation facilities. The coalition of NGOs - Action Against Hunger (Action Contre le Faim - ACF), CARE, Catholic Relief Services, the World Conservation Union, the International Institute for Environment and Development, Oxfam America, and SOS Sahel UK – brings together non-profit expertise from: domestic WSS; agriculture; environmental management; water resource analysis; policy development; and public education.

Launched in 2007, the GWI has so far received a US\$150 million commitment from the Howard G. Buffet Foundation over 10 years. Similar levels of finance are anticipated. The wide-ranging objectives fit current sector demands but seem ambitious relative to the funding available to-date, calling for further financial support.

|                                      |   |
|--------------------------------------|---|
| Targeting poor with low WSS coverage | Improved water and sanitation coverage levels in target countries<br>Burkina Faso (rural water 66%, sanitation 6%),<br>Ethiopia (rural water 31%, sanitation 8%),<br>Ghana (rural water 71%, sanitation 6%),<br>Kenya (rural water 49%, sanitation 48%),<br>Mali (rural water 48%, sanitation 39%),<br>Niger (rural water 32%, sanitation 3%),<br>Senegal (rural water 65%, sanitation 9%),<br>Tanzania (rural water 46%, sanitation 34%), and<br>Uganda (rural water 60%, sanitation 34%).<br><br>Beneficiaries of WSS activities will be in the poorest and most vulnerable communities including refugees and internally displaced persons (IDPs).   |
| Rural / Urban disparity              | Rural focus   |
| Sanitation                           | Activities to increase access to improved sanitation facilities   |
| Hygiene                              | Not referred to in the literature   |
| Gender equity                        | Gender mainstreaming not referred to in literature. Activities to-date have included leadership training to women.  |
| MUS                                  | Projects at local and national levels aim to catalyse change towards better Integrated Water Resources Management. IWRM implies looking at the whole water system, social, political, and physical (hydrological); at integrating the needs of all users upstream and downstream; and at balancing these needs in a way that satisfies the needs of the greatest number possible in a sustainable way while maintaining a healthy environment (Smet & van Wijk, 2002). An integral part of this strategy is MUS whereby access to safe drinking water and water for productive activities will be planned, designed, and implemented together leading to eventual joint financing and management of water systems that attend to multiple rural livelihood needs. |
| Capacity building                    | Capacity building to strengthen institutions, enable organisations to initiate and sustain long-term projects, increase community participation, improve local governance, facilitate inter-governmental coordination and cooperation, raise awareness, emphasise innovation and support the development of responsible water policies.   |
| Dev. Finance                         | Grant financing   |
| Link: relief to development          | In refugee and IDP camps  |



## The Rural Water Supply and Sanitation Initiative (RWSSI)

The RWSSI is an initiative of the African Development Bank Group and aims to provide safe water and basic sanitation to the rural poor in Africa over the period of 2004 to 2015. It is currently in phase 2 (2008 – 2010) of the initiative, which aims to raise US\$4.6 billion from the ADF replenishment (30%), bilateral and multilateral donors (50%), recipient governments (15%), and beneficiaries (5%). Phase I saw a 30% shortfall in funds raised due to insufficient funding from donors. The slow start from 2005 was due to poor internal systems, procedures and staffing capacity. However this is being addressed with assistance from Denmark, Finland, France, the Netherlands, and the UK.

The RWSSI is considered a promising initiative because of its attention to many of the neglected areas in the WSS sector (see below) and the fact it is an African Initiative for Africa. Financial support would represent a long-term approach to developing the capacity of the ADF as well as being a short-term approach to improving WSS coverage in rural Africa.

|                                      |  |
|--------------------------------------|--|
| Targeting poor with low WSS coverage | Improved water and sanitation coverage levels in target countries<br>Burkina Faso (water 72%, sanitation 13%),<br>Ethiopia (water 42%, sanitation 11%),<br>Mali (water 60%, sanitation 45%),<br>Tanzania (water 55%, sanitation 33%) |
| Rural / Urban disparity              | Rural focus, but 56% of Phase 1 commitments were redirected to urban WSS. It is not clear if this issue has been rectified   |
| Sanitation                           | Sanitation is an inherent part of the initiative alongside water supply. It is addressed at the national programme level down to appropriate sanitation technologies   |
| Hygiene                              | Hygiene promotion and health education   |
| Gender equity                        | Not referred to in the literature  |
| MUS                                  | No   |
| Capacity building                    | Capacity building for decentralised Government institutions, communities, private sector and artisans (e.g. for latrine slab making)   |
| Dev. finance                         | Not known  |
| Link: relief to development          | No   |



## Water for African Cities

The Water for African Cities is an initiative of UN HABITAT to improve water access, management, and conservation in African Cities through water demand management, minimising environmental impact of urbanisation on freshwater resources, and raising awareness and facilitating information exchange on water issues. Following the recognition by African Ministers in 1999 of the need to urgently address water resource management in African cities, it was initiated.

Phase 1 (1999 – 2002) and phase 2 (2003 – 2008) have seen extensive water, and to a lesser extent sanitation, activities undertaken across Africa at the national, regional, city, and school level. It is financed by the WSS Trust Fund whose previous significant donors were the Netherlands, Canada, Norway, Sweden, and Spain. In phase 3 (2008 – 2012) the estimated financing requirement is US\$21 million (calculated from total financial needs of US\$63 million for this initiative and its two equivalents in Asia and Latin America).

|                                      |   |
|--------------------------------------|---|
| Targeting poor with low WSS coverage | Improved water and sanitation coverage levels in target countries<br>Phase 1 cities reached in the following countries (below) show that urban coverage of improved water supplies is on average very high, although this cannot be directly related to the success of phase 1 activities it could at least be indicative. Phase 2 and 3 cities (countries) not readily available.<br>Côte d'Ivoire (urban water 98%, sanitation 38%),<br>Ethiopia (urban water 96%, sanitation 27%),<br>Ghana (urban water 90%, sanitation 15%),<br>Kenya (urban water 85%, sanitation 19%)<br>Senegal (urban water 93%, sanitation 54%),<br>South Africa (urban water 100%, sanitation 66%),<br>Zambia (urban water 90%, sanitation 55%), and |
| Rural / Urban disparity              | Urban focus   |
| Sanitation                           | Activities to improve urban sanitation  |
| Hygiene                              | Water education in schools and communities  |
| Gender equity                        | The GWA developed gender sensitive norms and standards in utilities so the women could benefit from improved access to WSS facilities.  |
| MUS                                  | Urban catchment management is not by definition MUS because it is more concerned with minimising the impact of urban activities on freshwater resources than providing water supplies that fit multiple livelihood-needs. However both MUS and urban catchment management fit into the wider concept of Integrated Water Resources Management (IWRM) which satisfies the needs of the greatest number of people/sectors possible in a sustainable way while maintaining a healthy environment.  |
| Capacity building                    | Capacity building of managers and policy/decision-makers for pro-poor governance, urban catchment management including monitoring, and water demand management (in other words water charging, improving efficiency and reducing leakages). Awareness raising and information exchange.   |
| Dev. finance                         | Not known   |
| Link: relief to development          | No  |



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## Appendix 1: The Global burden of disease of the 5 most prevalent water- and excreta-related diseases

| Disease  | Cause   | Mortality in millions (WHO, 2004) | Morbidity in millions (WHO, 2004)                             | DALYs* in millions (WHO, 2002) |
|--|---|-----------------------------------|---|--------------------------------|
| Diarrhoea  | Unsafe excreta disposal, poor hygiene practices, unsafe water   | 1.8                               | 4000  | 57                             |
| Malaria  | Standing water in domestic and public places  | 1.2                               | 396   | 19                             |
| Intestinal helminths (worms), infection from parasitic eggs            | Unsafe excreta disposal, poor hygiene practices   | 0.010                             | 133   | 3                              |
| Trachoma, infection of the eye impairing vision & leading to blindness | Poor personal hygiene due to lack of water. Poor sanitation facilities providing a breeding ground for infection transmitting flies | 0                                 | 500 at risk, 146 threatened by blindness, 6 visually impaired | 2.3                            |
| Schistosomiasis, infection from freshwater snail                       | Unsafe excreta disposal, use of contaminated surface water  | 0                                 | 160   | 1.7                            |

\*DALYs (disability-adjusted life years) are a standard measure of the burden of disease calculated from the number of years of productive life lost (loss of work, disrupted school attendance, medical costs) due to illness and premature mortality (WHO, 2004).

Source: Adapted from Bill & Melinda Gates Foundation (BMGF), 2006; and Cooke, 2008.



## Appendix 2: WSS coverage and progress towards MDG7 in Africa

Figure I: Progress to Water MDG, 2006

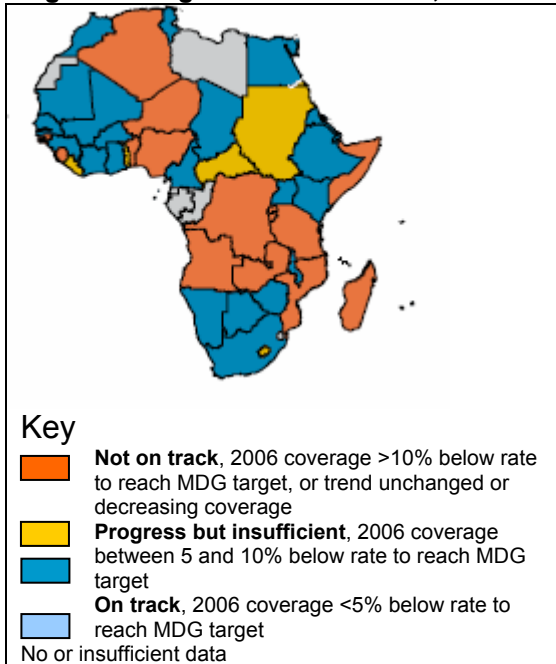


Figure II: Progress to Sanitation MDG, 06

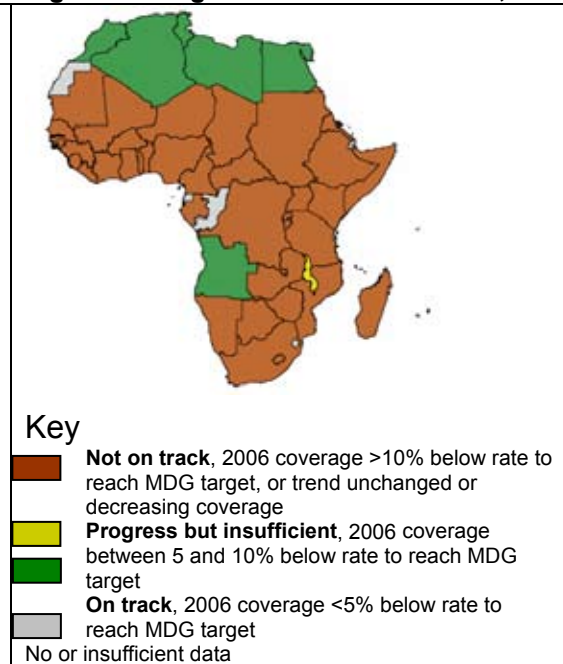


Figure III: Improved sanitation coverage in rural areas, 2006

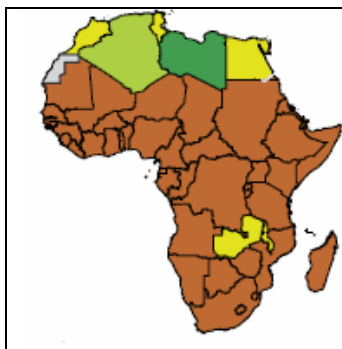


Figure IV: Improved sanitation coverage in urban areas, 2006

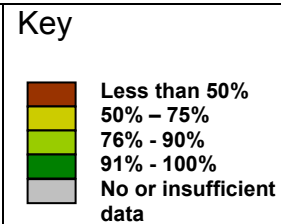
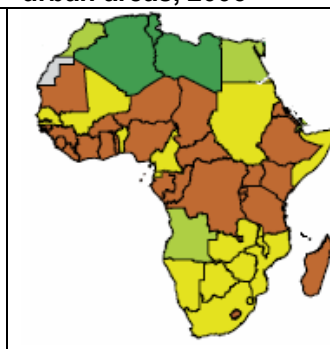
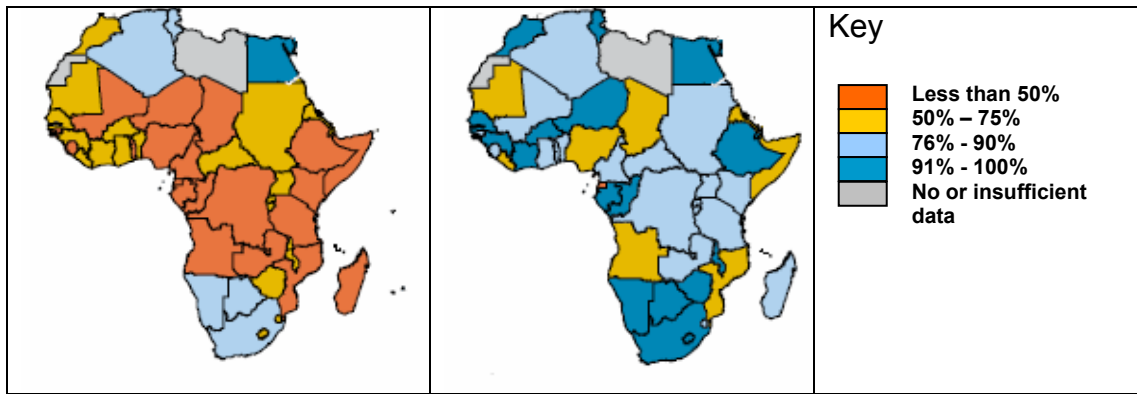


Figure V: Improved water coverage in rural areas, 2006

Figure VI: Improved water coverage in urban areas, 2006

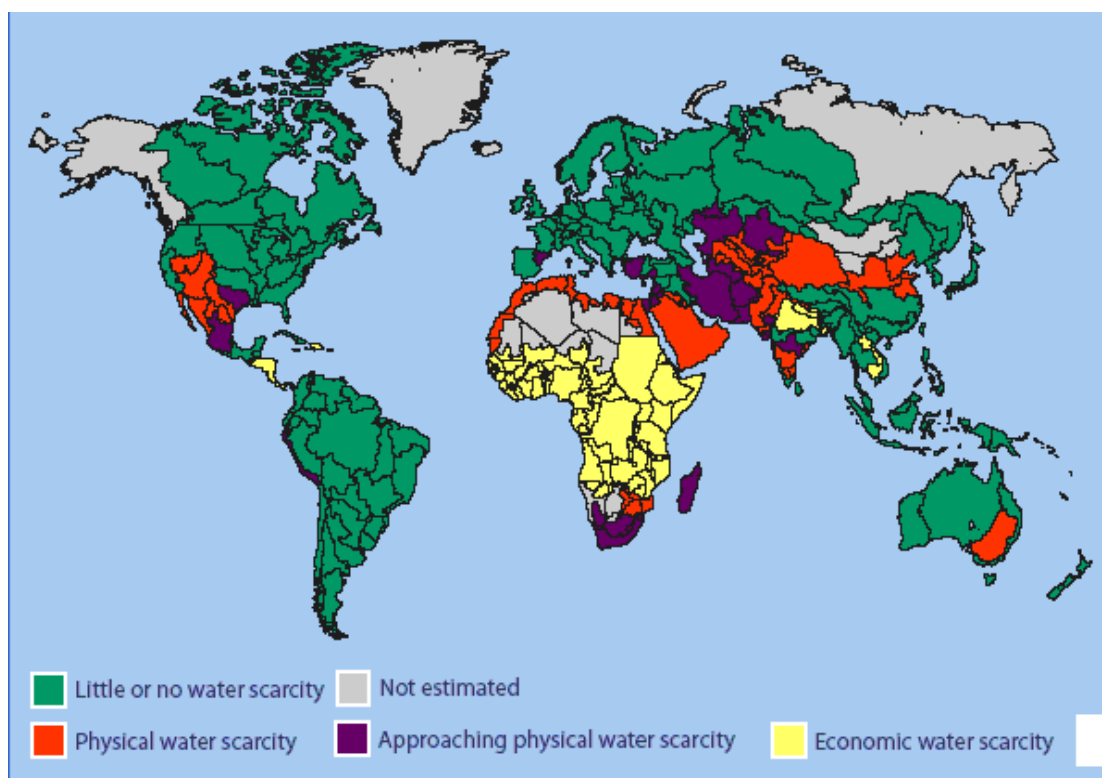




Source: WHO & UNICEF, 2008



### Appendix 3: World map of water scarcity issues



#### Key

**Little or no water scarcity:** Abundant water resources relative to use, with less than 25% of water from rivers withdrawn for human purposes

**Physical water scarcity:** Water resources development is approaching or has exceeded sustainable limits. More than 75% of the river flows are withdrawn for agriculture, industry, and domestic purposes (accounting for recycling of return flows). This definition – relating water availability to water demand – implies that dry areas are not necessarily water scarce.

**Approaching physical water scarcity:** More than 60% of river flows are withdrawn. These basins will experience physical water scarcity in the near future.

**Economic water scarcity** (human, institutional, and financial capital limit access to water even though water in nature is available locally to meet human demands). Water resources are abundant relative to water use, with less than 25% of water from rivers withdrawn for human purposes, but malnutrition exists.

Source: Comprehensive Assessment of Water Management in Agriculture (CA), 2007, accessed on <http://www.unwater.org/wwd07/downloads/documents/wwd07brochure.pdf>



## Appendix 4 Ongoing and past WSS projects funded by Italian ODA

| Status/<br>Start date | Country         | Project  | Sector                                      | Commitment<br>(Euros) | Channel                | Type of<br>Funding | Management         | Executing<br>agency         |
|-----------------------|-----------------|--|---|-----------------------|------------------------|--------------------|--------------------|-----------------------------|
| Ongoing               | Mali            | Riabilitazione dei pozzi nelle regioni di Kayes e Koulikoro  | Water                                       | 2,700,000             | Bilateral              | Grant              | Direct             | DGCS                        |
| Ongoing               | Sudan           | Salute ambientale nella città di Rumbek, sud Sudan   | Water supply & sanitation                   | 887,000               | Bilateral              | Grant              | Direct             | DGCS                        |
| Ongoing               | Sudan<br>Darfur | Contributo al Work Plan 2006 - UNICEF  | Water supply & sanitation                   | 3,500,000             | Multilateral           | Grant –<br>emerg.  | Dna                | UNICEF                      |
| Ongoing               | Burundi         | Miglioramento delle condizioni sanitarie, alimentari e di approvvigionamento idrico della provincia di Cibitoke                        | Water and health                            | 751,648               | Bilateral              | Grant              | CISV,<br>CCM, LVIA | CCM                         |
| Ongoing               | Kenya           | Kahawa Soweto settlement improvement project   | Multi                                       | 240,000               | Multilateral           | Grant              | Dna                | UN<br>HABITAT               |
| 2005                  | Sudan           | Programma di emergenza a favore delle popolazioni del Sud Sudan vittime della guerra civile  | Multi                                       | 1,500,000             | Bilateral              | Grant –<br>emerg.  | Dna                | Dna                         |
| 2005                  | Eritrea         | Programma congiunto per il ritorno/reinsediamento degli sfollati (fase I e II)   | Social                                      | 61,230,021            | Multilateral<br>(UNDP) | Grant –<br>emerg.  | Dna                | Dna                         |
| 2004                  | Eritrea         | Ecof - Fondo di sviluppo a sostegno delle comunità eritree, il fase (programma ponte)  | Water supply                                | 4,596,727             | Multibi-<br>lateral    | Grant              | WB                 | Dna                         |
| 2004                  | Sudan           | Iniziativa di emergenza per l'assistenza alle vittime del conflitto e di calamità naturali nel nord Sudan                              | Health/Water/Re<br>fugee camp<br>management | 1,400,000             | Bilateral              | Grant –<br>emerg.  | Direct             | INTERSOS,<br>COSV,<br>CESVI |
| 2004                  | Tanzania        | Progetto "Malenga": Water, Health and Environment in Dodoma Region   | Health                                      | 1,323,850             | Bilateral              | Grant              | CMSR               | Dna                         |
| 2004                  | Uganda          | Programma di emergenza in favore delle popolazioni del nord Uganda vittime della guerriglia  | Multi                                       | 1,100,000             | Bilateral              | Grant              | Direct             | Dna                         |
| 2003                  | Angola          | Iniziativa di emergenza a favore delle vittime del conflitto civile  | Health/Education<br>/Water supply           | 10,000,000            | Dna                    | Grant –<br>emerg.  | Direct             | DGCS                        |
| 2003                  | Eritrea         | Approvvigionamento idrico della città di Afabet, il fase   | Water supply &<br>sanitation                | 1,809,700             | Dna                    | Grant              | Direct             | DGCS                        |
| 2003                  | Eritrea         | Approvvigionamento idrico e igiene ambientale per la comunità di Sheib e Wadi Labka  | Water supply &<br>sanitation                | 4,093,109             | Dna                    | Grant              | Dna                | UNICEF                      |
| 2003                  | Eritrea         | Rafforzamento dei sistemi idrici nella provincia di Hagaz e miglioramento della sostenibilità della risorsa acqua nella regione Anseba | Water supply &<br>sanitation                | 822,772               | Dna                    | Dna                | Dna                | COOPI                       |
| 2003                  | Kenya           | Programma di formazione e consolidamento gestionale del "Kathita Kiima Water Project"  | Water supply &<br>sanitation                | 686,906               | Dna                    | dna                | Dna                | CEFA                        |
| 2003                  | Somalia         | Riabilitazione di punti d'acqua e impianti sanitari nelle regioni di Bay e Bakol   | Water supply &<br>sanitation                | 550,000               | Dna                    | Grant              | Co-financed        | INTERSOS                    |
| 2003                  | Somalia         | Riabilitazione e miglioramento del sistema idrico urbano di Hargeisa   | Water supply &<br>sanitation                | 1,960,000             | Dna                    | Grant              | Co-financed        | Dna                         |
| 2003                  | Uganda          | Progetto di sviluppo idrico-sanitario e agricolo-produttivo nella municipalità di Soroti   | Multi                                       | 818,327               | Dna                    | Dna                | Dna                | Dna                         |

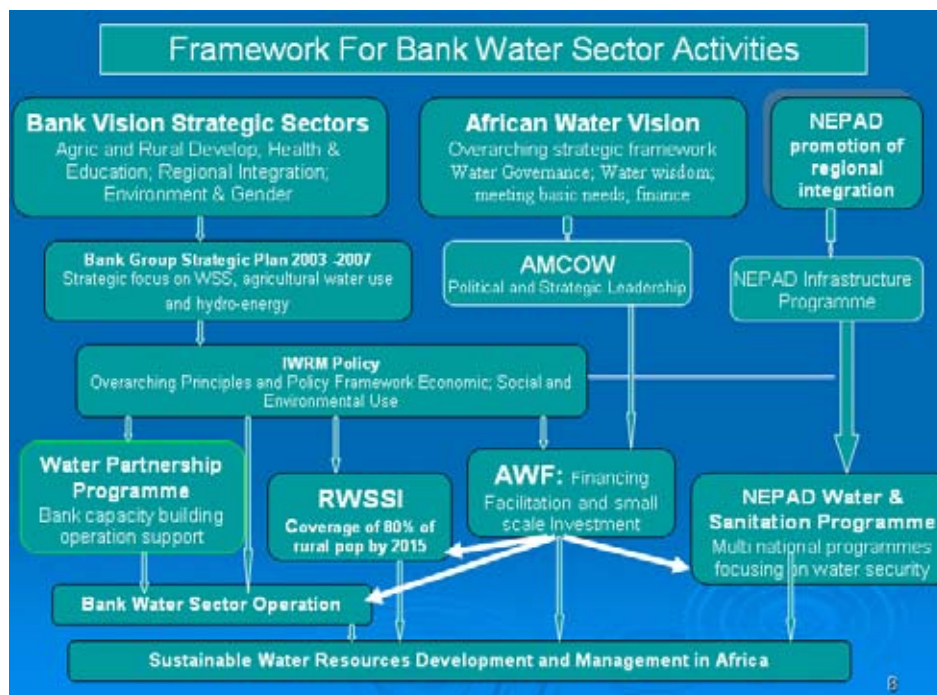
Source: <http://www.cooperazioneallosviluppo.esteri.it/pdges/italiano/iniziativa/aree/tematiche.asp>  
 Key: CCM (Comitato Collaborazione Medica), CEFA (Comitato Europeo per la Formazione e l'Agricoltura), CESVI (Cooperazione e Sviluppo), CISV (Comunità Impegno Servizio Volontariato), CMSR (Centro Mondialità Sviluppo Reciproco), COOPI (Cooperazione Internazionale), COSV (Comitato di Coordinamento delle Organizzazioni per il Servizio Volontario), DGCS (Director General for Development Cooperation), Dna (Data not available), INTERSOS, LVIA (Associazione Internazionale Volontari laici)



## Appendix 5 African Development Bank Group Framework for WSS activities

The African Development Bank Group (AfDB) is the largest development finance institution in Africa and consists of the African Development Bank (ADB), African Development Fund (ADF), and Nigeria Trust Fund. In the past, the WSS sector received very little attention; from 1967 to 2002 the average annual investment in WSS was US\$67million of which 0% went towards rural WSS (ADF, 2007). However, from 2003 to 2007 the average annual investment in WSS was US\$330million, of which 49% went to rural WSS (ADF, 2007).

The 2003 to 2007 Strategic Plan prioritised the allocation of resources “to agriculture and sustainable rural development, with greater emphasis being given to water supply in vulnerable rural and peri-urban areas, and to human capital formation through primary education and basic health services” (African Development Bank Group (2002), Strategic Plan 2003 – 2007, November 2002)<sup>14</sup>. A dedicated department to Water and Sanitation has recently been established to centralise the AfDB’s water sector activities and to manage the intended large increase in financing for the sector from 2008. The AfDB is responsible for four water and sanitation initiatives: the Rural Water Supply and Sanitation Initiative (RWSSI); the African Water facility (AWF); the NEPAD Water and Sanitation Programme; and, the Water Partnership programme.



Source: <http://www.oecd.org/dataoecd/50/21/22>

Key:  
 (AMCOW) African Ministers' Council for Water; Integrated Water Resources Management; (NEPAD) New Partnership for African Development; (RWSSI) Rural Water Supply and Sanitation Initiative

The AWF complements the Bank’s investments in RWSSI and urban water supply and sanitation activities by focusing on the financing of facilitation activities in recipient countries to create enabling policy environments, build capacity of water sector institutions, develop water programmes, conduct feasibility studies for projects, and finance small demonstration projects. The Multi-Donor Water Partnership Program helps to build Bank capacity for promoting IWRM in countries, raise awareness of and build capacity for IWRM in countries. The NEPAD Water Supply & Sanitation Programme develops programmes and projects for transboundary water resources management.

<sup>14</sup> NB. The Strategic Plan from 2008 could not be found



## Glossary of terms

**Bilateral aid:** *Aid flows provided directly by a donor country to an aid recipient country*

**Capacity building:** *investment in individual and group skills and capabilities, and the systems and procedures that serve to satisfy organisational demands.*

**Grants:** *Aid flows made in cash, goods or services for which no repayment is required.*

**Gross National Income (GNI):** *A measure of a country's economic performance. It is Gross Domestic Product (GDP – the total value of a country's annual output of goods and services) plus the INCOME earned by residents from investments abroad, minus the corresponding income sent home by foreigners who are living in the country.*

**Improved sanitation:** *refers access to the following sanitation facilities: a simple latrine, ventilated improved pit latrine, pour-flush latrine, or connection to a septic system or a public sewer.*

**Improved water supply:** *refers access to a water supply via a household connection, standpipe, borehole, protected dug well, protected spring, or rainwater harvesting structure.*

**Integrated Water Resource Management (IWRM):** *is a process which promotes the co-ordinated development and management of water, land and related resources, in order to maximize the resultant economic and social welfare in an equitable manner without compromising the sustainability of vital ecosystems (GWP, 2000. Integrated water resources management. TAC background paper; no. 4. Stockholm, Sweden, Global Water Partnership).*

**Loans:** *Aid flows made in cash, goods or services for which repayment is required.*

**Multilateral aid:** *Initiatives agreed to and financed at a bilateral level, but entrusted to a specialised Agency or international body for execution*

**Multilateral aid:** *Aid flows from an international organisation (who has received financial backing from donor governments) to an aid recipient country. Aid flows are deemed to be multilateral if the financial support from donor government is pooled with other contributions and disbursed at the discretion of the agency.*

**Multiple (water) Use Services/Systems (MUS):** *“Multiple-use approaches involve planning, finance and management of integrated water services for multiple domestic and productive uses based on consumer demand. Recognising the predominance of sector-based services and differences in service delivery models, our typology includes two types of multiple-use services – domestic + and irrigation +. Domestic + approaches involve provision of water services for domestic as well as productive activities. Irrigation+ approaches involve provision of water services for irrigation as well as domestic and non-irrigation productive activities”. (Renwick et al, 2007)*

**Official Development Assistance (ODA):** *Aid flows to developing countries and multilateral institutions provided by official agencies, including state and local governments, or by their executive agencies, each transaction of which meets the following tests: i) it is administered with the promotion of the economic development and welfare of developing countries as its main objective; and ii) it is concessional in character and conveys a grant element of at least 25 per cent.)*

**ODA Commitments:** *A firm obligation, expressed in writing and backed by the necessary funds, undertaken by an official donor to provide specified assistance to a recipient country or a multilateral organisation.*

**ODA Disbursements:** *The release of funds to, or the purchase of goods or services for a recipient; by extension, the amount thus spent. Disbursements record the actual international transfer of financial resources, or of goods or services valued at the cost of the donor.*

[http://www.oecd.org/glossary/0,3414,en\\_2649\\_33721\\_1965693\\_1\\_1\\_1\\_1,00.html#g](http://www.oecd.org/glossary/0,3414,en_2649_33721_1965693_1_1_1_1,00.html#g)

<http://unstats.un.org/unsd/snaama/glossResults.asp?id=8>

[http://www.segretariatosociale.rai.it/INGLESE/codici/glossario\\_coop\\_sviluppo/glossario\\_coop\\_sviluppo.html](http://www.segretariatosociale.rai.it/INGLESE/codici/glossario_coop_sviluppo/glossario_coop_sviluppo.html)

<http://www.economist.com/research/Economics/alphabetic.cfm?letter=G#gni>



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**WATER SUPPLY AND SANITATION INITIATIVES  
IN SUB-SAHARAN AFRICA**

ActionAid background paper per the Italian G8

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