

UNICEF
Water, Sanitation
and Hygiene
Annual Report

2006

For every child
Health, Education, Equality, Protection
ADVANCE HUMANITY



Executive Summary

Sector Challenges

The latest sector statistics show that while the developing world is on track for meeting the water MDG target, sanitation lags far behind. At current rates, only 67 per cent of the world's population will have access to basic sanitation by 2015, over half a billion people short of the MDG target of 75 per cent. The implications for children, and for women, are far-reaching. Of the approximately 120 million children born in the developing world each year, only half will live in households using improved sanitation facilities and only four-fifths in households using improved drinking water sources. Unsafe drinking water, poor hygiene and lack of access to sanitation are the main cause of diarrhoeal disease, which kills 1.9 million children under five annually and sickens tens of millions more.

Interest in the sector is rising, driven by an increased understanding of the importance of water and sanitation (and – increasingly – hygiene) for sustainable development. There are indications that this interest is translating into increased funding for the sector. In 2006 the governments of Japan, the United Kingdom and the Netherlands – along with the Asian and African Development Banks – announced significantly increased budgets and renewed sector commitments. A number of other donor countries have increased sectoral disbursements, including Denmark, Norway and the USA. However, requirements still exceed available funding by wide margins. The current funding requirement estimate for meeting the MDG water and sanitation target using the lowest-cost sustainable technology options is US\$ 10 billion per year.

UNICEF WASH Strategies and Programme Scope

The new UNICEF WASH (water, sanitation and hygiene) Strategy Paper was formally approved by the UNICEF Executive Board in January 2006. The strategy paper marks the first time that UNICEF has set time-bound targets for the sector and targets a set of priority countries chosen to specifically to increase the rate of progress for the MDGs. The year 2006 saw the beginning of a process to bring the entire WASH programme in line with the principles and strategies in the strategy paper.

In 2006, UNICEF supported WASH programmes and activities in a total of 93 countries, including in 58 of the 60 priority countries. While over 85 per cent of UNICEF's WASH expenditure in 2006 was in priority countries, in half of the countries resources are still insufficient to support the comprehensive programmes required for meeting the MDGs.

The total UNICEF expenditure in 2006 for water, sanitation and hygiene programmes was US\$ 245 million. This represents a slight decrease from the US\$ 254 million expenditure in 2005, but is significantly higher than average expenditure figures over previous years. Much of the significant increase from 2004 onwards is due to emergency WASH programming. As in both 2005 and 2004, more than half (53 per cent) of UNICEF sectoral expenditure was for emergency programmes and activities.

Key UNICEF Support Achievements in 2006

- increased service coverage and improved national programme structures through support in the areas of policy development and reform, technical assistance, strategy development, behavioural change and/or water and sanitation facility construction in communities and schools in a total of 93 countries in 2006;
- successfully assumed leadership and coordinated response for the sector for emergency WASH through the cluster approach globally and in declared Clusters in DR Congo, Liberia, Somalia, Uganda, Lebanon, Indonesia (Jogyakarta) and the Philippines;
- reached tens of millions of people through UNICEF direct support in emergencies, including in Lebanon, Indonesia, the Horn of Africa and many other countries;
- contributed to new/revised national sectoral policies in countries in Africa, Asia and the Americas including a major new sanitation policy in Pakistan;
- in partnership with WHO, continued to lead sector monitoring efforts through the Joint Monitoring Programme (JMP) and issued two important publications in 2006 on global progress on meeting the MDG water and sanitation target;
- accelerated support for sanitation programming in response to lagging global performance on achieving sanitation MDG target;
- initiated major new hygiene promotion partnerships with public and private sector organizations at the global and country levels;
- completed a global assessment of UNICEF-supported WASH in Schools programming, and initiated a major new study on impact and sustainability;
- continued to lead arsenic mitigation efforts in affected countries and promoted an increased focus on water quality in general through country programmes;
- promoted gender-positive changes in government sector programmes and initiated a new global monitoring mechanism to measure progress in this area;
- made concrete steps to improve the gender balance in the UNICEF professional staff cadre;
- re-focused efforts to improve the sustainability of UNICEF and government sectoral interventions including the initiation of a major new programme in East Africa that uses sustainability of outcomes as the primary determinant of success.

As a consequence of greater emphasis being placed on hygiene and sanitation programming by UNICEF country offices (in response to evidence showing the importance of these inputs for child survival and development), expenditure on hygiene and sanitation promotion now represents almost one-third (31 per cent) of total expenditure. Water supply at 42 per cent continues to be the highest single expenditure, in large part for emergency response. The remaining 2006 expenditure was for capacity building, management and advocacy; water quality programming; environment initiatives and water resources management.

Policy Development

In the area of policy development, UNICEF support contributed to new or revised national sectoral policies in Columbia, Ethiopia, Malawi, Pakistan, Uganda and Zimbabwe in 2006, and to new policy development processes in China, DR Congo, Liberia and Sudan.

The new Cabinet-approved sanitation policy in Pakistan – a major development for the sector – is the culmination of a participatory bottom-up process that began in 2005. With this new policy, all South Asian countries now have sanitation policies in place, an important prerequisite in a region where over 50 million people still need to gain access to basic sanitation facilities every year until 2015 in order to meet MDG Target 10. The sector reforms incorporated into new policies are leading to increasing sanitation coverage, notably in India (see below).

UNICEF also worked with partners and governments in efforts to prioritize WASH in national development agendas. Activities in this area included global monitoring of conformance of national plans with the MDG water and sanitation target, the development of water and sanitation components in national planning and poverty-alleviation frameworks, and support to sectoral SWAp processes. A new UNICEF monitoring mechanism shows progress in this area: in 55 per cent of priority countries, the National Development Plan (or equivalent) now incorporates explicit programmes and targets for achieving the MDG target on sustainable access to safe drinking water and basic sanitation.

Hygiene and Sanitation

In line with a new emphasis on hygiene promotion in the WASH strategy paper and in the sector as a whole – based on the overwhelming evidence of its important for children’s health – UNICEF is increasingly active in the promotion of hygiene, and especially the promotion of handwashing with soap.

In 2006, UNICEF was involved in two major global initiatives for the promotion of handwashing. One was the Global Public-Private Partnership for Handwashing with Soap, in collaboration with the World Bank, the Water and Sanitation Programme, other sectoral partners and three major multinational corporations. In the second initiative, UNICEF teamed up with Unilever in a major new partnership called “Project Champion”, which focuses on increasing the demand for soap amongst the poorest segments of national populations.

At the country level, there are a number of new and ongoing handwashing promotion initiatives in Ethiopia, Madagascar, Nepal, Nigeria, Indonesia and other countries.

While gains are being made in sanitation coverage in some countries, many lag behind and some (such as Nigeria) have actually experienced a decrease in coverage rates over the last decade. It is now very clear that new approaches are necessary if the world is to meet the MDG sanitation target by 2015. This is increasingly recognized at the country level and UNICEF is taking steps to find more effective sanitation promotion models, including the “total sanitation” approach, which has had considerable success in some countries, especially Bangladesh and India (which surpassed the 40 per cent rural sanitation coverage milestone in 2006). UNICEF is increasingly focusing on sanitation programming in its country programmes and will use the upcoming “International Year of Sanitation” in 2008 as an opportunity to further expand its own programmes of support and advocate for an increased focus on sanitation by governments and donors.

In addition to the development of new approaches at country level, UNICEF is actively involved in national, regional and global advocacy programmes to raise the profile of sanitation amongst decision-makers and the public. A key event in 2006 was the Second South Asian Conference on Sanitation (SACOSAN-2), hosted by the Government of Pakistan with support from UNICEF and partners. In 2006, preparations began for upcoming conferences in Latin America (LatinaSan) and East Asia (EASAN).

UNICEF promotes improved sanitation as a gender issue in both its advocacy and programmes of support. Women are affected most by limited access to sanitation facilities from health, personal security and socio-economic perspectives, and women are key allies in the development of appropriate and effective sanitation models and technologies.

Water Supply and Water Quality

UNICEF as an organization has neither the resources nor the mandate to appreciably contribute to MDG water targets through direct service delivery. UNICEF remains engaged in service delivery in emergencies and for reconstruction, in marginalized communities and regions (in keeping with the principle of rights-based programming), as part of WASH in schools initiatives and – and most importantly for long-term results – in pilot projects to demonstrate improved approaches for scaling up.

Through such support, millions of people gained access to water supply in 2006, and in several countries UNICEF-supported models were scaled up.

A trend that continued in 2006 is a greater focus on water quality, including ongoing support to arsenic detection and mitigation programmes as well as to the broader issue of bacteriological contamination of water supplies. UNICEF was involved in arsenic programming in 12 countries in 2006 in activities ranging from comprehensive multi-faceted programmes in Bangladesh, India and Southeast Asia to testing initiatives in other countries.

UNICEF-supported programmes also improved the capacity of families and communities to monitor and control bacteriological contamination of their own water sources through the establishment of community-based surveillance systems, training, sanitation and hygiene promotion, and the introduction of low-cost testing and treatment technologies in India, Laos, Malawi, Myanmar, Cambodia and other countries.

WASH in Schools

The UNICEF commitment to WASH in primary schools was first made at the World Summit on Sustainable Development in 2002 and then enshrined in the WASH strategy paper as one of two ten-year targets. Since then, the number of countries in which UNICEF has supported WASH activities in schools has almost doubled to a total of 85 countries in 2006. Activities supported by UNICEF include national policy development, promoting the inclusion of hygiene education in primary school curricula, training of teachers in the area of hygiene education, construction of water, sanitation and washing facilities in primary schools, developing and promoting child- and girl-friendly facility designs and promoting hygiene behaviour change in communities through students. Support to WASH in Schools programming represents a key UNICEF effort to improve girls' enrolment and retention rates – and performance – in schools and contribute to the fulfilment of MDG Goal 2 for universal primary education.

A total of US\$ 26.7 million was spent on WASH in schools in 2006, representing 11 per cent of UNICEF's total WASH expenditure. Of this expenditure, 55 per cent (US\$ 14.6 million) was spent on sanitation facilities and hygiene education, and the remainder was spent on water supply systems.

UNICEF also supports national planning processes for WASH in schools and in this MTSP cycle has begun to gather data on the number of countries that include facilities in schools in development plans (only one third of priority countries had such plans in 2006).

A major milestone in 2006 was the completion of an assessment of the five-year six-country school sanitation and hygiene education pilot project. The assessment report highlights the fact that the project schools performed better than control schools in virtually all of the study indicators, including facility sustainability and use. But the report also notes that availability of soap in schools is a major problem that threatens to undermine the health benefits of the new facilities and new attitudes towards handwashing. Lessons learned from the study were disseminated in two regional workshops and are already being applied in some countries. In Viet Nam, for example, the assessment findings informed the design of the new 2006-2010 WASH in schools programme with the Ministry of Education that will stress child-friendly school water, toilet and handwashing designs; scaling up; and a more comprehensive training and advocacy programme.

In 2006 UNICEF also initiated a major new study to assess the impact and sustainability of WASH in schools programmes. The study is being conducted together with key

sectoral partners will include extensive fieldwork in India and Kenya. The study is the first rigorous attempt to assess the sustained impact of WASH in schools programming, which currently represents a major gap in the sectoral body of evidence.

Emergency Programming

The UNICEF emergency WASH response programme consists of direct support in both new and ongoing emergencies, the coordination of emergency response through the UN Inter-Agency Standing Committee (IASC) Cluster approach, emergency preparedness, and support to post-emergency reconstruction efforts.

In 2006, UNICEF responded to new emergencies in Lebanon and Sri Lanka (conflict), Indonesia (Jogyakarta earthquake), the Horn of Africa (drought, subsequent flooding and conflict) and many other smaller emergency events such as the civil unrest in Timor Leste, cyclones in the Philippines, hurricanes in Honduras, conflict in Uganda and cholera outbreaks in Angola. UNICEF also provided ongoing support to emergency response and reconstruction in Darfur, the tsunami-affected countries, Iraq, Pakistan, DR Congo, Liberia and Sierra Leone. Tens of millions of people benefited from UNICEF direct support in emergencies in 2006.

The Cluster approach, launched in 2005 by the IASC, is a mechanism to address gaps in response and enhance the quality of humanitarian actions by strengthening partnerships and coordination between UN agencies, the Red Cross/Crescent movement, international organizations and NGOs. UNICEF is the designated lead for the WASH Cluster globally, and is also taking the lead agency role when Clusters are instituted at country level including – in 2006 – in DR Congo, Liberia, Somalia, Uganda, Lebanon, Indonesia (Jogyakarta) and the Philippines. While a major undertaking in all countries, this was especially a challenge in Lebanon, where UNICEF had no existing WASH programme, and in the Philippines, where the UNICEF WASH programme is very small.

The global WASH Cluster conducted reviews of the WASH Cluster approach in Liberia and Indonesia (Jogyakarta), both of which yielded a rich set of lessons learned to be applied in future emergencies. For example, the Jogyakarta assessment concluded that while the Cluster approach did indeed enhance coordination and emergency response effectiveness, it noted that UNICEF's dual role of coordinator and implementer resulted in some lack of clarity amongst partners.

A broader assessment of the field-level impact of building response capacity through the Cluster approach as a whole showed an overall improvement in the areas of response coordination and accountability. In Liberia, the implementation of the Cluster approach has led to improved joint WASH emergency preparedness planning. In Jogyakarta, coordination through the WASH Cluster has resulted in the development common approaches to WASH technologies and methodologies (e.g. a standardized latrine design) that go beyond emergency response. And in Lebanon, the decision of a bilateral agency (DFID) to support the implementation strategy developed by WASH Cluster partners led to greater coherence in the programme of response.

Other Programming Areas and Initiatives

In some countries UNICEF was involved in a limited number of activities in the area of the environment, including solid waste management and water catchment protection initiatives. More importantly, in 2006 steps were taken to re-define UNICEF's scope and focus in the area of environmental programming, including the development of a significant new collaborative programme with UNEP on children and the environment.

UNICEF is working to ensure that women are directly involved in the planning and management of water supply and sanitation services through the promotion of gender-positive changes in government sector programmes and related UNICEF support. Activities in 2006 included a new monitoring mechanism to promote national sector gender analysis and concrete steps to improve the gender balance in UNICEF's own staff cadre. At the country level, UNICEF worked to promote gender issues at the policy level and supported a variety of affirmative action initiatives to increase the number of women on sectoral planning bodies.

UNICEF also continued to promote improved sustainability of both water and sanitation facilities as well as the sustainability of the behavioural change promoted through capacity building at both the community and intermediate (sub-national) levels along with other measures including new studies that focus specifically on sustainability issues. In 2006, UNICEF and the Government of the Netherlands initiated a major new effort in East Africa which, for the first time in such a large project, the sustainability of programme outcomes – the continued operation and use of the water supply and sanitation facilities constructed under the programme – will be the ultimate determinant of programme success.

UNICEF also played a prominent role in sector monitoring through its continuing co-management of the Joint Monitoring Programme (JMP) with WHO. The JMP issued a new set of sector coverage figures in 2006 and published the report "Meeting the MDG Water and Sanitation Target". Also in 2006 UNICEF launched the "Progress for Children Report Card on Water and Sanitation", which compliments the JMP report by providing a region-by-region analysis on progress for children in the sector.

UNICEF entered into major new funding partnerships with the Government of the Netherlands and the EU Water Facility, as well as new agreements with DFID, SIDA and the Government of Norway. UNICEF also continued to support UNDAF through leadership roles in several priority countries. Cooperation continued with a very wide range of UN, bilateral, NGO and local partnerships at the global, regional and national levels.

Challenges

While important steps have been made in 2006, there is still considerable work to be done to fully roll out the new global WASH strategy to country programmes and to increase progress towards the MDGs, notably in the area of resource allocation and prioritisation, especially in all 60 WASH priority countries.

Integrating water and sanitation aspects in other key sectoral areas, including health, education and HIV/AIDS, remain a significant challenge. In late 2006, UNICEF started a major effort aimed at focusing efforts on supporting countries in Africa to achieve their health-related MDGs 1, 4, 5, 6 and 7. Ensuring that key WASH components are fully incorporated in the high-impact, low-cost health intervention packages will be a considerable challenge for 2007, and beyond.

While WASH in schools is increasingly part-and-parcel of UNICEF's work on basic education, greater challenges remain to strengthen the WASH elements in HIV/AIDS programming (and vice-versa).

With more than half of UNICEF's WES expenditure is incurred in emergencies, and UNICEF is the global cluster lead for emergencies, UNICEF needs to have in place appropriate strategies to ensure that the post-emergency transition is in line with regular development policies and approaches for the sector. The post-crisis transition strategy adopted by the Executive Board in 2006 guides UNICEF's work in this phase.

This report indicates that sector investment are well short of needs. One of the challenges facing UNICEF is how to increase funding for WES in general, as well as for UNICEF's work in the sector in particular. UNICEF activities aimed at increasing financing for water supply and sanitation include promoting sector needs globally, advocacy with major financing agencies, sharing costs, and reducing corruption.

In 2002, the United Nations Committee on Economic, Social and Cultural Rights, through its General Comment 15, asserted that access to domestic water supply is a human right. UNICEF programming in WASH addresses the right to water (and sanitation) by advocating for its inclusion in national policy instruments, focusing financing on populations with greatest needs, identifying the unserved with least resources, and strong support for decentralized, demand-responsive, community-based approaches.

Other challenges remain in the areas of gender equity, increasing the profile of hygiene and sanitation within UNICEF and national programmes, improving effectiveness of emergency response, and deepening partnerships with sectoral partners to further improve the quality of WASH programming for children.

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Abbreviations

ADB	Asian Development Bank
AfDB	African Development Bank
AusAID	Australian Agency for International Development
ACF	Action Contre la Faim
CAP	Consolidated Appeals Process
CBO	Community-based Organization
CCCs	Core Commitments for Children
CERF	Central Emergency Response Fund
CIDA	Canadian International Development Agency
CRS	Catholic Relief Services
CSD	Commission on Sustainable Development
DFID	Department for International Development (UK)
DGIS	Directorate-General for International Cooperation (Government of the Netherlands)
DRC	Danish Refugee Council
EAPRO	East Asia and the Pacific Regional Office
ECD	Early Childhood Development
ECHO	European Commission Humanitarian Aid Office
FGM/C	Female genital mutilation/cutting
ESARO	Eastern and Southern Africa Regional Office
GTZ	German Technical Co-operation Agency
HDR	Human Development Report
IASC	Inter-Agency Standing Committee
ICRC	International Committee of the Red Cross
IFRC	International Federation of Red Cross and Red Crescent Societies
IRC	International Water and Sanitation Centre
JMP	Joint Monitoring Programme for Water Supply and Sanitation
MDG	Millennium Development Goal
MICS	Multiple Indicator Cluster Survey
MSF	Médecins Sans Frontières
MTR	Mid-Term Review
MTSP	Medium-Term Strategic Plan
NatCom	National Committee
NCA	Norwegian Church Aid
NETWAS	Network for Water and Sanitation
NGO	Non-governmental Organisation
NRC	Norwegian Refugee Council
OCHA	Office for the Coordination of Humanitarian Affairs

OECD	Organisation for Economic Co-operation and Development
OFDA	Office of U.S. Foreign Disaster Assistance
PPP	Public-Private Partnership
PPPHW	Global Public-Private Partnership for Handwashing with Soap
PRSP	Poverty Reduction Strategy Paper
ROSA	Regional Office for South Asia
RWSN	Rural Water Supply Network
SACOSAN	Second Regional Ministerial Conference on Sanitation in South Asia
SIDA	Swedish International Development Agency
SRSA	Swedish Rescue Services Agency
SWAp	Sector-Wide Approaches to Programming
TACRO	The Americas and Caribbean Regional Office
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNEP	United Nations Environment Programme
UNHCR	United Nations High Commissioner for Refugees
UNOPS	United Nations Office for Project Services
USAID	United States Agency for International Development
WASH	Water, Sanitation and Hygiene
WatSan	Water and Sanitation
WAWI	West African Water Initiative
WCARO	West and Central Africa Regional Office
WES	Water, Environment and Sanitation
WFP	World Food Programme
WHO	World Health Organization
WSP	Water and Sanitation Program

1 Sector Analysis

1.1 Status of Water and Sanitation in the Developing World

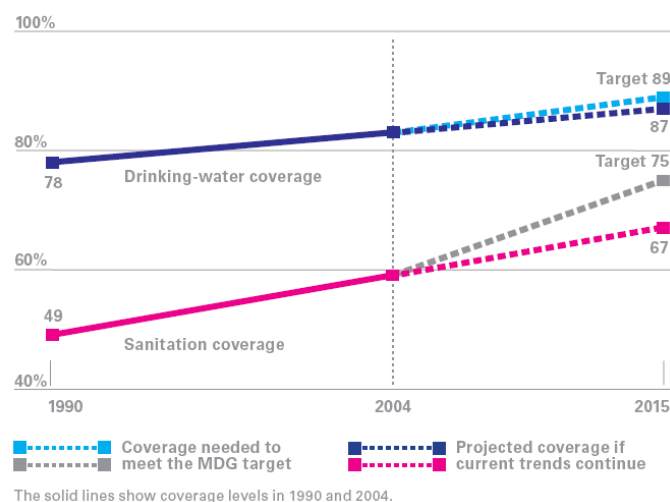
In line with the global development community, UNICEF measures progress in the area of water and sanitation within the framework of the Millennium Development Goals (MDGs). This includes the primary sector target of halving, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation (Goal 7, Target 10), as well as Goal 1 (poverty eradication), Goal 2 (universal primary education), Goal 3 (gender equality) and Goal 4 (reducing child mortality).

The latest sector statistics from the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation¹ (JMP) – which are the official figures for monitoring MDG Target 10 – show that while the developing world remains, barely, on track for meeting the water target, sanitation lags far behind. To meet the sanitation target, the rate of progress will have to be double the current trend. At current rates, only 67 per cent of the world's population will have access to basic sanitation by 2015, over half a billion people short of the target of 75 per cent.

While progress has been made in sanitation – 1.2 billion people have gained access since 1990 – it is now very clear that urgent measures are needed to meet the target. In South Asia, for example, two of every three people are still without sanitation.

While water coverage is on track globally, the trend appears to be weakening in recent years, a worrying sign. Also, the global water figure obscures regional trends, including – significantly – that the water target will probably not be met in sub-Saharan Africa.

Figure 1: Global trends towards the MDG Water and Sanitation Target



The implications for children, and for women, are far-reaching and serious. Of the approximately 120 million children born in the developing world each year, half will live in households without access to improved sanitation facilities and one-fifth in households

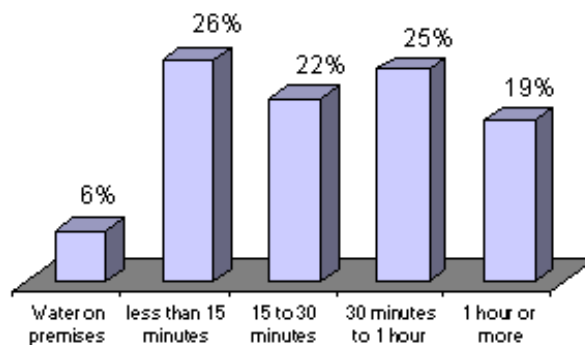
¹ Two major publications based on the JMP data sets were released in 2006: “Meeting the MDG Drinking Water and Sanitation Target: The Urban and Rural Challenge of the Decade” (WHO/UNICEF), and “Progress for Children: A Report Card on Water and Sanitation” (UNICEF). The JMP programme is discussed in Section 7.3.

with access to improved drinking water sources. Children in these households are especially vulnerable to illness, and especially diarrhoea.

Globally, diarrhoeal diseases are the second leading killer of children under five years of age (after pneumonia). Unsafe drinking water, poor hygiene and lack of access to sanitation together contribute to about 88 per cent of deaths among children under five from diarrhoeal diseases, or more than 1.5 million of the 1.9 million children under five who perish from diarrhoea each year. In addition, children weakened by frequent diarrhoea episodes are more likely to be seriously affected by malnutrition and opportunistic infections (such as acute respiratory infections – the other major killer of children), and they can be left physically and mentally stunted for the rest of their lives.²

Lack of adequate water and sanitation affects women disproportionately. Poor access to water in communities increases the time-wasting drudgery of fetching water – borne principally by women – with extensive and complex effects on women’s health, education, security, livelihoods and quality of life. And when schools lack adequate sanitation and washing facilities – and in many developing countries more than half the schools do lack these facilities – girls especially are discouraged from going to and remaining in school.

Figure 2: Time spent fetching water in rural sub-Saharan Africa³



There is an increasing body of evidence showing the economic costs of poor water and sanitation associated with health spending, productivity losses and labour diversions. Such costs are most severe in poorer countries: sub-Saharan Africa loses about 5 per cent of GDP, or some US\$ 28 billion annually, a figure that exceeds total aid flows and debt relief to the region in 2003.⁴

Emergencies continue to take a major toll on people’s access to safe water and sanitation in countries around the world. In 2006, emergencies in Lebanon and Sri Lanka (conflict), Indonesia (Jogyakarta earthquake), the Horn of Africa (drought, subsequent flooding and conflict) and elsewhere led to the destruction of facilities and mass movements of people who become vulnerable to WASH-related diseases. In other countries – notably the tsunami-affected countries – tens of thousands of people continue to recover from past

² See the 2006 UNICEF publications “Progress for Children: A Report Card on Water and Sanitation” and the “UNICEF WASH Strategies Background Paper” for references and details.

³ Figures are compiled from the most recent UNICEF country-level MIC (Multiple Indicator Cluster Survey) data.

⁴ Figures are from WHO sources and research carried out for the 2006 Human Development Report (see Section 1.2).

emergency events. In 2006 there were major new outbreaks of cholera and acute watery diarrhoea outbreaks in Angola as well as in other sub-Saharan Africa countries, signalling a continuation of a worrying upward trend in the number of cholera cases worldwide that started in 2005, reversing an earlier downward trend.⁵

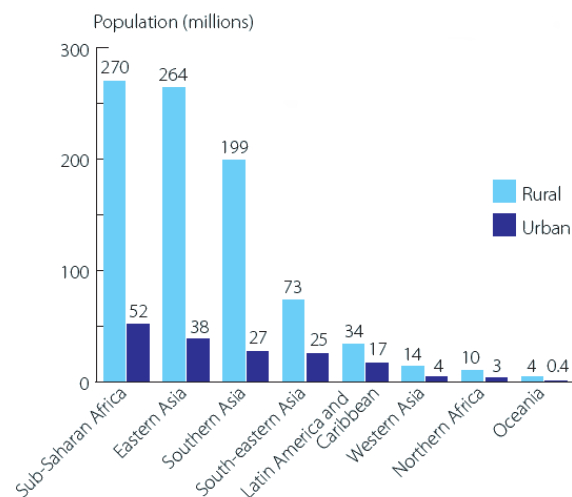
1.2 Major Sector Developments in 2006

From UNICEF’s perspective, the most important sectoral developments are those that occur at the country level where the work is carried out, especially in the areas of sector reform, policy development and progress on the ground for scaling up programmes to meet sectoral MDG targets. These are discussed in detail in subsequent sections of this report.

At the global level, interest in the sector continues to rise, driven by an increased understanding amongst global public and decision-makers of the importance of water and sanitation (and – increasingly – hygiene) for sustainable development. The now irrefutable evidence of global climate change and new evidence of its far-reaching ramifications on water security and water-related disease (especially in poorer water-stressed countries) is also fuelling increased interest in the sector.

The 2006 Human Development Report (HDR)⁷ focused on the water and sanitation sector for the first time. The report included a call for G8 countries to take action on sector financing, a recommendation for developing countries to increase funding for the sector to 1 per cent of GDP, and a plea to enshrine affordable, safe water as a basic human right into national legislative frameworks. The HDR echoed, to a certain extent, similar discussions and declarations at the year’s most important sectoral meeting, the 4th World Water Forum (WWF), which took place in Mexico in March 2006. One of UNICEF’s contributions to the 4th WWF was the sponsorship of the Children’s World Water Forum in

Figure 3: Rural and urban population (millions) without access to an improved drinking water source in 2004 in developing regions⁶



⁵ WHO reported a total of 131,943 cases in 2005 (including 2,272 deaths) a 30% increase over 2004. Official figures are not yet available for 2006, but the major outbreak in Angola alone – a reported 67,000, more than double the number of cases in any single country in 2005 – will likely push the global total above the 2005 figure (“Cholera 2005” in the WHO Weekly Epidemiological Record No. 31, August 2006 – and other sources).

⁶ “Meeting the MDG Drinking Water and Sanitation Target: the Urban and Rural Challenge of the Decade”, WHO/UNICEF, 2006.

⁷ “Beyond scarcity: Power, poverty and the global water crisis”, Human Development Report 2006, UNDP, Nov. 2006.

which 107 child participants from 29 countries discussed WASH issues, developed plans for child-led local action and lobbied the 140 Ministers present at the 4th WWF through the “Call for Action” declaration.⁸

Another major driver of increased interest in the sector is the poor performance in meeting the sanitation MDG target to date. This has prompted sectoral agencies, donor governments and developing countries to stress the need to focus additional resources on sanitation. Interest in sanitation led to calls by the UN Secretary General’s Advisory Board on Water and Sanitation in 2006 for an “International Year of Sanitation”, which was formally declared for 2008 by the UN General Assembly.

Corruption in the water and sanitation sector is receiving greater recognition as an important constraint in meeting the MDG targets. The year 2006 saw an increase in sector-specific anti-corruption measures, including the launch of the Water Integrity Network (involving WSP, IRC Water and Sanitation Centre, Transparency International and other partners) and the publication of new research. Anti-corruption efforts are beginning to be incorporated into programme design such as, for example, a new West African sectoral partnership development and local government capacity-building programme that involves both Transparency International and UNICEF. The related but more general subject of water governance was also increasingly on the sector agenda in 2006, including the launch of the Water Governance Facility by UNDP and SIDA,⁹ and the publication of the 2nd United Nations World Water Development Report, which also focuses on governance issues.¹⁰

1.3 Sector Financing

Due at least in part to renewed interest in the sector, there are indications that overall sector funding is on the increase. Important funding agencies for water and sanitation programming announced increased budgets in 2006. At the 4th World Water Forum in March, the Asian Development Bank (ADB) announced that it would double its investments in the water sector over the next five years. Also at the 4th World Water Forum, Japan – the sector’s largest donor since the 1990s, announced further commitments to the sector through the Water and Sanitation Broad Partnership Initiative (WASABI). In its 2006 White Paper on International Development, DFID announced a commitment to double aid to Africa for water and sanitation by 2010. The Government of the Netherlands announced that it would significantly increase sector financing and committed to funding basic drinking water and sanitation services to 50 million people over the 2005-2015 period. And in 2007, the African Development Bank (AfDB) announced a 50 per cent increase in funding for water and sanitation programmes. A number of other donor countries have increased sectoral disbursements, including

⁸ “Call for Action”, http://www.worldwaterforum4.org.mx/files/Call_For_Action.pdf

⁹ See <http://www.watergovernance.org>

¹⁰ “Water: A shared responsibility”, UN-WATER and the World Water Assessment Programme (WWAP), 2006.

Denmark, Norway and the USA.¹¹ Major new funding for UNICEF for WASH (Section 8) is part of this trend.

While official development assistance figures seem to confirm a rising trend in water sector financing,¹² development assistance tends to concentrate on a relatively small number of countries (notably in Iraq in 2006) and on larger infrastructural projects that may not result in sustainable MDG progress. Sector financing also continues to focus more on water than on sanitation or hygiene, and more on urban, better-off populations than on the poor in rural areas and slums.

In any case, the requirements still exceed available funding by wide margins. The current funding requirement estimate for meeting the MDG water and sanitation target using the lowest-cost sustainable technology options is US\$ 10 billion per year.¹³ And a recent UNICEF exercise based on costs associated with UNICEF projects estimates that an additional US\$ 8 billion total is required for water and sanitation facilities and hygiene education in primary schools.¹⁴

2 UNICEF WASH Targets and Priorities

2.1 New Targets and Strategies for WASH

The new UNICEF WASH Strategy Paper¹⁵ was formally approved by the UNICEF Executive Board in January 2006. The strategy paper marks the first time that UNICEF has set time-bound targets for the sector:

- Target 1: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation (same as the Millennium Development Goal Target 10);
- Target 2: Ensure that all schools have adequate child-friendly water and sanitation facilities and hygiene education programmes (now widely

UNICEF WASH Strategy Paper – Guiding Principles

1. A human rights-based approach to programming
2. Working in-country, with governments
3. Working effectively with partners to develop innovative approaches and leverage resources
4. Promoting a gendered approach and recognizing the central role of women
5. Targeting pro-poor approaches
6. Evidence-based advocacy and programme design
7. A learning-based approach guided by effective knowledge management

¹¹ “Measuring Aid for Water: Has the downward trend in aid for water reversed...?”, OECD, 2006. (disbursement increases from 2003 to 2004).

¹² Ibid.

¹³ Human Development Report 2006 and other references.

¹⁴ Estimate based on data from “School Sanitation and Hygiene Education: Results from the assessment of a six-country pilot project”, UNICEF and IRC, May 2006.

¹⁵ “UNICEF water, sanitation and hygiene strategies for 2006-2015”, United Nations Economic and Social Council (E/ICEF/2006/6), 2006.

recognized as a sector priority – endorsed at the World Summit for Sustainable Development and by the Commission for Sustainable Development).

The WASH Strategy Paper was developed in coordination with – and contributes to – the current UNICEF Medium-Term Strategic Plan (MTSP).

In addition to defining targets, the strategy paper describes the sectoral programming context, summarizes lessons learned, outlines guiding principles for UNICEF programming (box) and discusses the implications of the new strategy for UNICEF. At the core of the strategy paper is a set of three strategic packages of support: one for the newly-defined set of priority countries (see below), one for emergency countries and one for all other countries where UNICEF works.

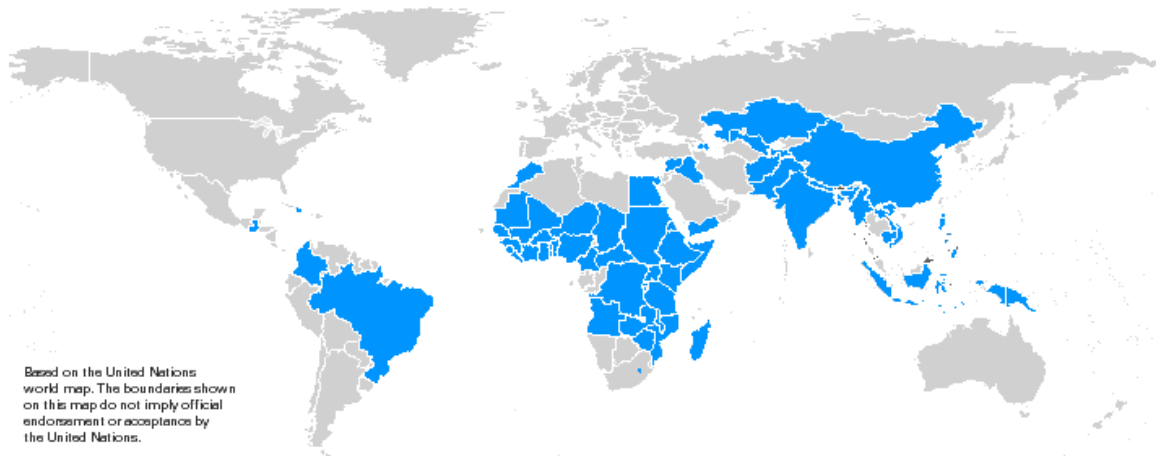
With Executive Board approval, UNICEF has initiated the process of operationalizing the new strategies in its regional and country programmes. The strategies are now used as the structure for the design of new programmes and to inform course adjustments in existing programmes. For example, the process of re-defining the Nigeria WASH programme – one of UNICEF’s largest – used a gap and opportunity analysis based on the new strategies for priority countries. The strategy paper is also becoming the basis for the development of funding proposals and for dialogue with donor partners. It was used, for example, as the over-arching strategic framework for UNICEF’s new US\$ 79 million WASH strategic partnership with the Government of the Netherlands in Eastern and Southern Africa.

2.2 Priority Countries

The 60 priority countries for WASH were chosen as part of the strategy development process. The countries were selected on the basis of a weighted set of sectoral indicators, including water and sanitation coverage percentages and absolute numbers of unserved people, along with education and child mortality indicators (see list of priority countries in Annex 1).

While over 85 per cent of UNICEF’s WASH expenditure in 2006 was in priority countries, an analysis of 2006 expenditure levels shows that half of the priority countries still require significant additional funding to fully operationalize the strategy. Related to funding shortfalls is a staffing shortfall in these same countries.

Figure 4: UNICEF priority countries for WASH

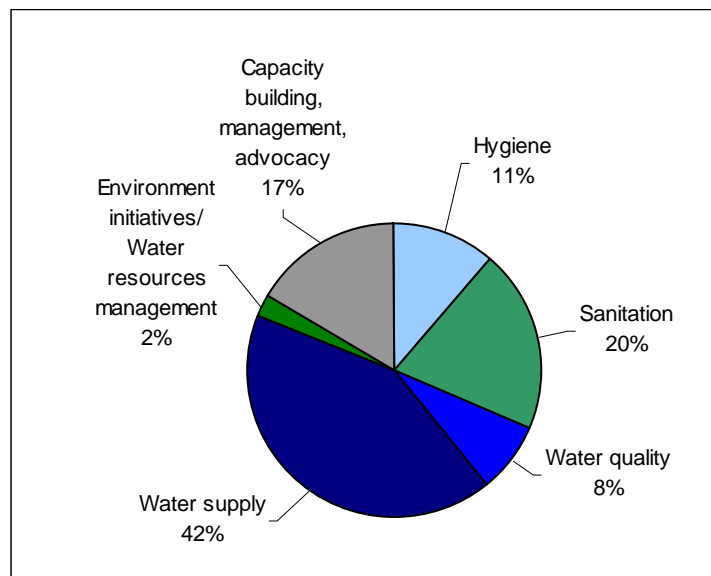


The challenge facing UNICEF in the coming years is to engage with donor partners to increase funding levels in these priority countries. Progress was made in 2006 as new programmes were developed in priority countries such as Lesotho, Papua New Guinea and the Philippines, and programmes were expanded significantly in DR Congo and Indonesia. See Section 8 for additional information on UNICEF expenditure levels for WASH.

2.3 Programme Balance

The strategy paper introduces new directions and programmatic focuses in a number of areas, including sector reform and decentralization, capacity building, sustainability and the need to provide continuous support for going to scale with WASH programmes (which is in-line with UNICEF’s renewed focus on taking all programmes to scale, as articulated, for example, in the 2006 UNICEF all-Africa representatives meeting).

Figure 5: Programme balance by expenditure, 2006^{16,17}



¹⁶ While budget coding has improved, it is still necessary to use some estimates to present these breakdowns, given the complexity and decentralized nature of UNICEF country WASH programmes.

¹⁷ Salary support costs are incorporated into the categories shown.

Another new emphasis is the promotion of programmes that have a better water, sanitation and hygiene balance. In most situations, this means promoting a less “water-centric” approach in response to the increasing body of evidence that shows the importance of sanitation and hygiene for health outcomes for children. This applies both to UNICEF’s own programmes of support and – through advocacy – to national programmes and the programmes of sectoral partners.

For UNICEF support programmes, Figure 5 shows the balance between programming components for 2006 expenditures. At 42 per cent of the total, water supply is still the largest single component in UNICEF programming. However, there are indications that it is decreasing: in 2005, water supply expenditure was estimated to be 54 per cent of total expenditure.¹⁸

The relatively high percentage of spending on water supply is due to three principal factors:

- hygiene and sanitation promotion are less costly than water supply and thus expenditure-based estimates are not a completely accurate representation of the level of effort put into each;
- emergency response makes up more than half of all expenditure, and emergency spending is heavily weighted towards water supply;
- promoting more balanced programmes is still a work in progress that will take time because of the national-level priorities of governments and other partners, and the decentralized nature of UNICEF programming.

Strategies in Priority Countries

1. Promote a balanced national WASH programming framework
2. Support inter-sectoral approaches
3. Provide catalytic and continuous support for scaling-up sustainable WASH programmes
4. Ensure effective decentralization and community choice
5. Promote safe and sustainable water supplies through improved water resources management
6. Focus on sanitation, water quality and hygiene at the household level
7. Address a child’s right to health and education through WASH in schools

Notwithstanding the difficulty in making direct expenditure comparisons with previous years, it is clear from a number of indicators that there is a greater emphasis on environmental initiatives, sanitation, water quality and especially hygiene than in previous years.

3 Progress in Priority Countries

UNICEF supported WASH (water, sanitation and hygiene) programmes and activities in a total of 93 countries in 2006, compared to 78 in 2000. These activities took place in 58

¹⁸ Note, however, that direct comparisons between 2006 and previous years are not possible due to changes in accounting codes introduced by UNICEF for the current MTSP.

of the 60 countries identified by UNICEF as priority WASH countries (however, as noted, only half of the priority countries have well-funded comprehensive programmes).

The WASH strategy paper defines a different set of strategic packages for priority countries, for emergencies and for other countries. In priority countries, country programmes are being developed on the basis of the seven strategies for priority countries (see box) and include water, sanitation, hygiene and – in some cases – environmental components.

3.1 Enabling Environments for WASH

A key strategic emphasis in priority countries is the provision of support to government partners and other stakeholders on the development and refinement of appropriate enabling environments for the sector. This includes a progressive policy environment that promotes sector reform (including especially the decentralization of resources and decision-making to the local government and community level); the prioritization of water, sanitation, hygiene and environment programmes in the national development agenda; and improved coordination amongst sectoral stakeholders.

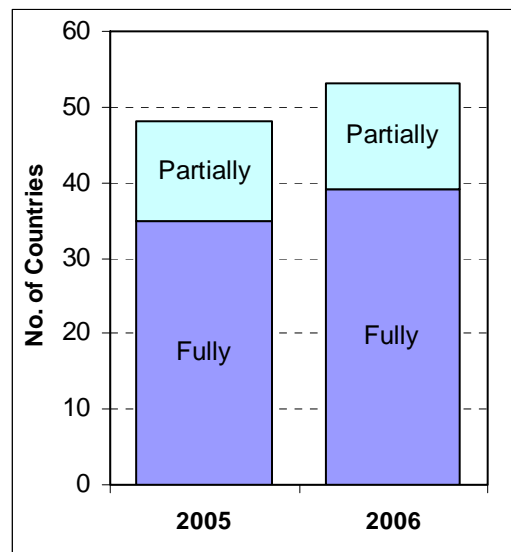
Progress along these lines was made in several priority countries in 2006. New or revised national policies on sanitation and/or water supply were finalized with UNICEF support in Columbia, Ethiopia, Malawi, Pakistan, Uganda and Zimbabwe, and new policies are under development in China, Liberia and elsewhere.

In Pakistan, the first-ever National Sanitation Policy was approved by Cabinet in 2006, the culmination of a participatory bottom-up process that began in 2005 with UNICEF support. The new strategy was also linked to the hosting by Pakistan of the Second Regional Ministerial Conference on Sanitation in South Asia (SACOSAN – see Section 3.2). With this new policy, all South Asian countries now have sanitation policies in place, an important prerequisite in a region where over 50 million people still need to gain access to basic sanitation facilities every year until 2015 in order to meet MDG Target 10.

UNICEF initiated support to major new policy initiatives in both Sudan and DR Congo in 2006. In both countries, new sectoral policies are a critical initial step in the transition from emergency response to comprehensive development programmes. This process is especially important given the fact that MDGs can only be met in Africa with substantial gains in these and other high-population countries. UNICEF-supported activities in DR Congo included the development of preliminary codes and guidelines that will feed into a new policy, and in Sudan the formation of a joint steering committee, support to a multi-stakeholder policy development workshop and to the drafting task force.

Efforts to prioritize the sector in national development plans were carried out at all levels in 2006. Globally, UNICEF used the MDG progress monitoring process (linked to the country office annual reporting system) to establish a baseline and measure progress in this area. Through this process country offices were asked if the National Development Plan (or equivalent) incorporates explicit programmes and targets for achieving the MDG target on sustainable access to safe drinking water and basic sanitation (Figure 6). While progress has been made, 45 per cent of the priority countries still have not fully embraced MDG targets.

Figure 6: Priority countries with national plans incorporating explicit programmes and targets for WES MDGs¹⁹



At country level, UNICEF offices approached this in a variety of ways. In some countries, including DR Congo and Zambia, UNICEF worked with governments and other partners (including the World Bank) on the development of water and sanitation components in national planning frameworks or PRSPs. In other countries, UNICEF was involved in the development of, and support to, sectoral SWAp processes (Section 7.4).

In most priority countries UNICEF engages in dialogue with government and other stakeholders on sector reform and provides support as appropriate, with a focus on decentralization of WASH governance and resources. In many countries, UNICEF support takes the form of capacity building for local and intermediate government institutions. In Indonesia, for example, UNICEF works with district governments and partners such as the World Bank in capacity-building programmes that stress system sustainability through improved management practices. In Colombia, much of the current programme is focused on building capacity of municipalities for management of water, sanitation and solid waste. And in Nepal, UNICEF builds capacity of the Water Users' Federation at both the national and local levels.

3.2 Hygiene and Sanitation Promotion

Hygiene

In line with a new emphasis on hygiene promotion in the WASH strategy paper and in the sector as a whole, UNICEF is increasingly active in the promotion of hygiene, and especially the promotion of handwashing with soap. In 2006, the UNICEF was involved in two major global initiatives on the promotion of handwashing.

¹⁹ Data is from UNICEF County Offices through the MTSP baseline and progress monitoring system.

UNICEF serves on the steering committee of the Global Public-Private Partnership for Handwashing with Soap (PPPHW), the world's largest handwashing promotion initiative. Partners include the World Bank, the Water and Sanitation Program, the London School of Hygiene and Tropical Medicine, the Academy for Educational Development, USAID, the Centers for Disease Control and Prevention and three major soap companies: Colgate-Palmolive, Unilever and Procter & Gamble. PPPHW supports major handwashing campaigns in Ghana, Nepal, Peru and Senegal and is planning new campaigns in other countries. Activities supported through the initiative include multi-level partnerships with local soap manufacturers and distributors, consumer research studies, promotional and educational materials, national mass-media handwashing campaigns and tie-ins with ongoing water, sanitation and hygiene programmes, including school-based programmes. UNICEF also chairs the schools group of the PPPHW, and is the lead agency at the country level in Nepal.

In a separate initiative, UNICEF has teamed up with Unilever in a major new partnership called "Project Champion", which also involves the Discovery TV Channel's Global Education Project. This initiative is a unique partnership with a major soap company that involves neither soap distribution nor the use of the programme as an advertising vehicle. Instead it has the long-term but focused objective of increasing demand for soap amongst the poorest segments of the national population. Unilever recognizes this approach as representing a short-term loss but a long-term gain as demand for soap increases in the poorest economic quintiles that are currently out of the company's reach. The programme – now in its start-up phase – will initially run in Uganda and then expand to Nigeria, Indonesia and India. In each country, state-of-the-art techniques will be used to develop national handwashing campaigns, with a focus on reaching school children with new marketing approaches.

The WES Section in New York Headquarters and the regional WES advisors are also involved in evidence-based advocacy for hygiene in a variety of venues. These include the all-Africa UNICEF representatives meeting and the American Public Health Organization panel on handwashing.

At the country level there are also a number of new and ongoing handwashing promotion initiatives. In Ethiopia, Indonesia and Madagascar UNICEF works with government, media outlets and other partners (including WaterAid and USAID) to sponsor multi-year national-level handwashing promotion campaigns. Sub-national campaigns are supported in many other countries, including Malawi and Nigeria.

In some countries, handwashing promotion is combined with other UNICEF-supported initiatives, such as in Eritrea, where handwashing was included in the national Vitamin A campaign, and in India, where it is one of four key message sets in UNICEF's Behaviour Change Communication initiative in convergence districts

In Nepal, the handwashing with soap promotion activities expanded to an additional 57 villages, bringing the total to 176 in four districts. Assessments showed that the presence of soap in households increased by approximately 35 per cent and handwashing with

soap after defecation increased on average 15 per cent against the target of 10 per cent. In another achievement, the government rural water and sanitation programme has now incorporated the handwashing with soap promotion in all their regular programmes, using tools and methodologies developed through the UNICEF project.

In Bangladesh, UNICEF and its local partners have promoted and supported a network of adolescent girls' hygiene monitoring groups in its urban slums programme. Within the programme the girls play a leading role in hygiene promotion through door-to-door visits and engagement with peers. Participation in the programme has led to an increase in the girls' own personal skills and confidence levels, and has resulted in some groups of girls becoming community advocates and activists on other gender issues, including early marriage.

In countries throughout Africa, Asia and the Americas, UNICEF programmes use the Participatory Hygiene and Sanitation for Transformation (PHAST) methodology – or similar approaches – to promote hygiene and sanitation in communities. In Kenya, where PHAST has been used for many years, UNICEF has commissioned an impact evaluation, and in Liberia, UNICEF is assessing the impact of the use of the PHAST tools in schools.

In Ethiopia, UNICEF is using the CHAST technique – modeled on PHAST but with a focus on children – to build a culture of adults learning from children, with the ultimate goal of influencing positive behaviour change through children. In other countries, alternative participatory promotion techniques are used, including in Viet Nam, where the Women's and Farmer's Unions were supported to develop their own hygiene promotion models.

UNICEF also works at the policy level for hygiene, including in Afghanistan, where it is supporting government efforts to develop policy guidelines on hygiene education. It also supports national hygiene coordination and promotion networks and assists efforts to harmonize hygiene messages, including in Viet Nam, where UNICEF sponsors a nation-wide IEC material inventory, assessment and dissemination system.

Sanitation

While gains are being made in sanitation coverage in some countries, many lag behind and some (such as Nigeria) have actually experienced a decrease in coverage rates over the last decade. It is now very clear that far greater efforts are necessary to reverse current trends and meet the MDG sanitation target 2015.

The failure to substantially increase sanitation coverage is due not to technology and not even (wholly) to funding shortfalls, but to the difficulty in developing and applying motivational and marketing approaches to change behaviour patterns on a large scale. In Mozambique, for example, an assessment of progress at the end of the latest five-year sanitation programme showed that gains were modest (a total of 24,000 household latrines) because the community participatory approach employed was not effective beyond the early adopters.

As a result, UNICEF-supported WASH programmes in priority countries such as Mozambique and Nigeria are re-assessing sanitation programming models. In some countries UNICEF is now promoting local variations of the “total sanitation approach” that originated in Bangladesh, which stresses intensive mobilization efforts to reduce open defecation in communities, and assist householders to find local solutions, including low-cost locally built latrines. In many cases these new initiatives are being carried out in partnership with the Water and Sanitation Program (WSP), which is a strong proponent of the approach, as well as with partners with experience in applying the approach in communities, including WaterAid and local NGOs.

Cambodia is one of the countries that have adopted the total sanitation approach in response to poor progress with traditional programmes. While it is too early to assess results, initial progress is encouraging.

The most successful wide-scale application of the approach to date has been in south Asia, notably in Bangladesh and India but also in other countries in the region. In India there are indications that rural sanitation progress is accelerating – with sanitation coverage reaching 40 per cent in 2006²⁰ – in part due to the adoption of the total sanitation approach by national and state governments with support from UNICEF and its partners. This includes both the nationally-funded Total Sanitation Campaign as well as the Nirmal Gram Puraskar (Clean Village Award) that rewards villages and districts that attain certified open-defecation-free status. The Clean Village Award programme is resulting in an exponential increase in open-defecation-free villages from tens in 2005 to hundreds in 2006 and already thousands in 2007.

Of course the wholesale transfer of the total sanitation model to other countries is not appropriate in most cases, due to socio-economic and cultural differences. The same approach is sometimes not even appropriate in different regions in the same country. UNICEF is thus working with its partners on variations in the approach, such as the school-led total sanitation initiative in Nepal, and other approaches elsewhere.

In addition to the development of new approaches, UNICEF is actively involved in national, regional and global advocacy programmes to raise the profile of sanitation amongst decision-makers and the public. A key event in 2006 was the Second South Asian Conference on Sanitation (SACOSAN-2) hosted by the Government of Pakistan with support from UNICEF and partners. The conference attracted wide participation from countries in the region and promoted the adoption of the new sanitation policy in Pakistan. SACOSAN-2 follows similar regional conferences in previous years in Africa (South Africa) and Asia (Bangladesh) and upcoming conferences in Latin America (Colombia) and East Asia (China), all supported by UNICEF, WSP, WaterAid and other agencies.

²⁰ This is an estimate based on latrine production figures. It does not take into account unused latrines (which would bring the coverage figure down) or latrines constructed outside of the government programme (which would bring the figure up). The official coverage figure that will be used in the WHO/UNICEF JMP programme for measuring MDG progress will be based on household surveys and will only be available in 2008.

Through all models, UNICEF promotes improved sanitation as a gender issue. Women are affected most by limited access to sanitation facilities from health, personal security and socio-economic perspectives, and women are key allies in the development of appropriate and effective sanitation models and technologies. UNICEF-supported programmes engage women in sanitation design and implementation, such as in Bihar, India where UNICEF has entered into a strategic partnership with Mahila Samakhya women self-help group to promote sanitation in low-coverage areas and in Malawi where girls are engaged in the design of school latrines. Privacy for women and girls in school and household latrines is now a key design parameter, as is gender issues around latrine usage. For example, in some West African communities men and women do not share latrines even in households, and UNICEF responds through the construction of separate latrines for women within its own programme of support and through advocacy for changes to coverage definition within the national programme.

At the country level, UNICEF raised awareness on sanitation through a variety of communication initiatives, including the National Sanitation Week campaigns in Nepal, Viet Nam and in Myanmar, where mobilization efforts resulted in the construction of over 185,000 new household latrines by community members.

3.3 Water Supply and Water Quality

UNICEF as an organization has neither the resources nor the mandate to appreciably contribute to the MDG water supply target through direct service delivery. However, UNICEF remains engaged in service delivery for a number of purposes. Most UNICEF direct support to water system construction is in emergency situations and for reconstruction in countries transitioning from emergencies (Section 4). UNICEF also provides direct support for marginalized communities and regions, in keeping with the principle of rights-based programming. The third category of direct support – and most important for long-term results – is pilot projects to demonstrate improved approaches to water and sanitation service delivery. The final category where a significant amount of service delivery is part of UNICEF programmes is in the WASH in schools programme (Section 3.4). In many cases, these categories merge.

Examples of direct support for water supply in marginalized communities can be found in all UNICEF regions. In DPR Korea, UNICEF – in partnership with ECHO – rehabilitated city water supply systems in the isolated north of the country through the provision of materials and technology unavailable in-country, providing significantly improved access to water to over 200,000 people. In Zimbabwe, UNICEF provided safe water supply and basic sanitation services to 45,000 poor people including those affected by “Operation Clean Up”. In Yemen, 18 water schemes initiated in previous years were completed in 2006, benefiting over 70,000 people. In the Americas UNICEF supports more modest initiatives that improve water supplies (and/or water quality) in indigenous communities. In other countries, such as Nigeria and the Philippines, water interventions are a component of an overall UNICEF rights-based approach of targeting marginalized districts with integrated child survival, development and protection inputs.

Water supply is a key component of the Guinea Worm Eradication Programme, in which UNICEF works with the Carter Center, WHO and other partners in the nine countries where the disease remains endemic and especially in Ghana (where there has been a major resurgence in cases) and in Sudan (which has by far the most cases). March 2009 has now been established as the global target date for ending transmission of guinea worm disease.

Examples of UNICEF-supported pilot initiatives to demonstrate new approaches in the area of water supply are also numerous. In Egypt, for example, UNICEF is developing a methodology for providing water to poor households in rural communities and slums through a revolving fund mechanism. In India, UNICEF supports the Gujarat cluster storage initiative that demonstrates new approaches to promote more equitable and socially inclusive distribution of water through existing piped systems. In Bangladesh, lessons learned from the Urban Slums and Fringes Project, which concluded in 2006 (and which included sanitation, hygiene and water components), are being applied in the development of a major new programme.

UNICEF also continues to be involved in water supply technology development such as in Chad, where drilling costs have been significantly reduced with the scaling-up of low-cost manual drilling technology, and in Maldives, where UNICEF is supporting the large-scale adoption of rain water harvesting systems.

While these examples show that water supply remains an important part of UNICEF programming, more emphasis is now being put on water quality. The India Child Environment programme – UNICEF’s oldest and still amongst its largest – is an example of this move. In the current country programme, instead of a water supply programme (which at one time included the construction of thousands of boreholes a year by UNICEF-supplied drilling rigs) UNICEF now focuses mainly on water quality initiatives.

In 2006, UNICEF continued to support efforts to measure, map and mitigate arsenic contamination of water supplies. Arsenic testing initiatives supported by UNICEF in India, Nepal, China and other countries have led to expanded testing and the development of comprehensive mitigation programmes. In Bangladesh, the large-scale arsenic mitigation programme is increasing access to safe water sources, while in Pakistan and Viet Nam, new government programmes have been launched with UNICEF support. In China, UNICEF facilitated the creation of a National Arsenic Network of research and government institutions to share experiences and address technical issues. UNICEF involvement in testing and studies is also helping to determine the extent of arsenic contamination outside of the Asia “arsenic belt”, including in West Africa.

In its arsenic programmes UNICEF promotes the right of households and communities to be informed about the quality of their own water sources through initiatives like the informed-choice-approach project in Cambodia.

UNICEF-supported programmes also improved the capacity of families and communities to monitor and control bacteriological contamination of their own water sources through

the establishment of community-based surveillance systems, training, sanitation and hygiene promotion, and the introduction of low-cost testing and treatment technologies in Laos, Malawi, Sri Lanka and other countries.

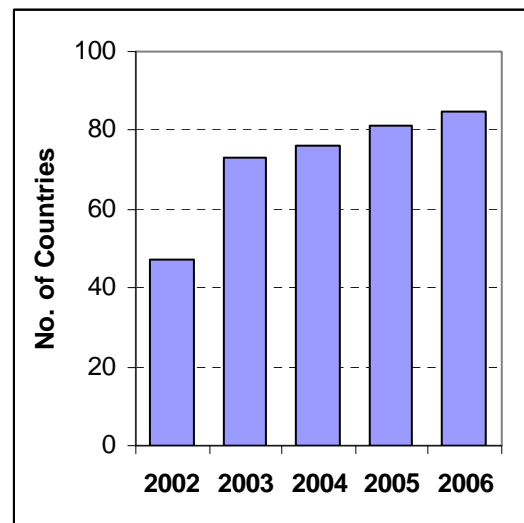
In keeping with new emphases in the WASH strategy paper, more UNICEF programmes are encouraging household level approaches to improving drinking water quality through the promotion of safe storage practices and point-of-use water treatment. UNICEF is also involved with the development and appraisal of appropriate technologies for household water treatment, including an assessment of arsenic removal filters in Bangladesh, support to local filter manufacture in Myanmar, and sponsoring a University of North Carolina ceramic filter study in Cambodia.

3.4 WASH in Schools

WASH in Schools is a flagship component of the global UNICEF WASH programme. Promoting safe and private WASH facilities in schools, combined with hygiene education and linked to initiatives that promote hygiene and sanitation in host communities, can have wide-ranging effects on children's health, girls' school enrolment and retention rates, and the health of communities as a whole.

Support to WASH in Schools programming represents a key UNICEF effort to improve girls' enrolment and retention rates – and performance – in schools and contribute to the fulfilment of MDG Goal 2 for universal primary education.

Figure 7: Countries with UNICEF WASH in schools activities



WASH in schools activities are also part of the broader Child-Friendly School initiative supported by UNICEF and its partners, in which water, sanitation and hygiene inputs contribute to improvements in the overall learning environment.

The UNICEF commitment to WASH in primary schools was first made at the World Summit on Sustainable Development in 2002 and then enshrined in the WASH strategy paper as one of two ten-year targets. Since then the number of countries in which UNICEF has supported WASH in schools activities has almost doubled (Figure 7). In 2006, all but 3 of the 60 priority WASH countries engaged in WASH in schools programmes or activities.

A total of US\$ 26.7 million was spent on WASH in schools in 2006, representing 11 per cent of UNICEF's total WASH expenditure. Of this expenditure, 55 per cent (US\$ 14.6 million) was spent on sanitation facilities and hygiene education, and the remainder was spent on water supply systems.

At the global level, UNICEF is active in the promotion of WASH in schools programmes on a number of fronts. For several years, UNICEF and the IRC International Water and Sanitation Centre have maintained a web site on WASH in schools. In 2006 the site was completely revamped, moved to its own URL (<http://www.schools.watsan.net/>), and given added functionality with a focus on information sharing – including the launch of the new WASH in Schools electronic forum. Related to this is the publication of the joint IRC-UNICEF WASH in Schools newsletter “Notes and News”, which is widely read by sector professionals. In 2006 UNICEF also financed the translation of the World Bank/WSP/UNICEF toolkit on hygiene, sanitation and water in schools into French and Spanish.

A major milestone in 2006 was the completion of an assessment of the five-year six-country²¹ UNICEF-IRC school sanitation and hygiene education pilot project. The assessment report²² highlights the fact that the project schools performed better than control schools in virtually all of the study indicators, including facility sustainability and use. But the report also notes that availability of soap in the schools is a major problem that threatens to undermine the health benefits of the new facilities and new attitudes towards handwashing. Lessons learned from the study were disseminated in two regional workshops (see below) and are already being applied in some countries. In Viet Nam, for example, the assessment findings informed the design of the new 2006-2010 WASH in schools programme with the Ministry of Education that will stress child-friendly school water, toilet and handwashing designs; scaling up; and a more comprehensive training and advocacy programme.

In 2006 UNICEF also initiated a major new study to assess the impact and sustainability of WASH in schools programmes. The study is being conducted together with IRC, the London School of Hygiene and Tropical Medicine, the Network for Water and Sanitation (NETWAS) and Socio-Economic Units Foundation (SEUF), and will include extensive fieldwork in India and Kenya. The study is the first rigorous attempt to assess the sustained impact of WASH in schools programming, which currently represents a major gap in the sectoral body of evidence.

UNICEF sponsored two regional WASH in schools workshops in 2006, in Lilongwe (Malawi) in January for Eastern and Southern Africa and in Bangkok in October for East Asia and the Pacific countries. The Lilongwe workshop focused on child participation, advocacy and mobilization while the Bangkok workshop participants discussed cooperative programming with education and WASH professionals, and the balance between hardware and software inputs. Both meetings reviewed the pilot project assessment and stressed the need to “scale up with quality”.

At the country level, UNICEF involvement in school WASH programmes ranges from comprehensive programmes in about 20 countries to a more limited set of activities in

²¹ Burkina Faso, Colombia, Nepal, Nicaragua, Viet Nam and Zambia.

²² “School Sanitation and Hygiene Education: Results from the assessment of a 6-country pilot project”, UNICEF and IRC, May 2006

other countries. Activities include support to national policy development and planning, promoting the inclusion of hygiene education in primary school curricula, training of teachers in the area of hygiene education, construction of water, sanitation and washing facilities in primary schools, developing and promoting child- and girl-friendly facility designs and promoting hygiene behaviour change in communities through students.

In most WASH in schools programmes, UNICEF support focuses on model development and advocacy and support for scaling-up programmes, but in some countries UNICEF is a major funder of school WASH facilities. This is mainly in countries in transition from emergencies and included – in 2006 – facilities for 43,000 students in tsunami-affected areas of Sri Lanka, 24,000 students in drought-affected regions of Eritrea, 19,000 in Somalia, 13,000 in Sudan and 270,000 students in Afghanistan. In all cases, students were also reached with hygiene education programmes.

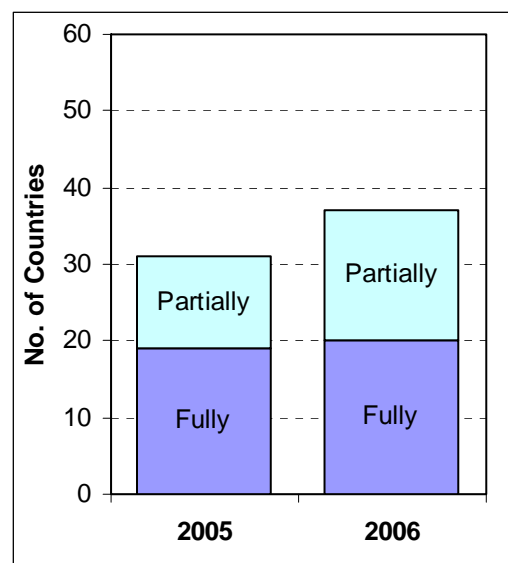
In DR Congo and Pakistan UNICEF-demonstrated approaches have led to new or modified national education policies and guidelines concerning WASH in schools. New national school WASH policies were drafted with UNICEF support in Cameroon and Kenya. UNICEF also supports national planning processes for WASH in schools and in this MTSP cycle has begun to gather data on the number of countries that include facilities in schools in development plans (Figure 8).

Monitoring and evaluation of WASH in schools is another key area of UNICEF activity. In several countries, including China and Egypt in 2006, UNICEF sponsored baseline surveys of water and sanitation facilities and hygiene practices in schools. UNICEF is also working towards a more systematic monitoring approach by incorporating WASH indicators into national Education Management Information Systems (EMIS), in cooperation with UNESCO and the World Bank.

Other country-level WASH in schools studies conducted in 2006 include the nationwide School WASH Assessment in Ethiopia, assessments of hygiene practices of children in schools in both India and Viet Nam and an ongoing assessment of participatory school hygiene education methodologies in Liberia.

UNICEF promotes the participation of children in WASH mainly through school-based programmes. Examples include the involvement of high school children in the national water point enumeration exercise in Eritrea, consultation with children in school latrine designs in Malawi, and the promotion

Figure 8: Priority countries with national plans to provide water, sanitation and hygiene education in all primary schools



of child participation in all aspects of the school environment through the formation of school sanitation or environment clubs. In most countries where UNICEF supports WASH in Schools programmes, working with children as agents of change for hygiene promotion in communities is an integral part of the programme design. In October 2006 UNICEF sponsored a workshop for staff and partners in the Eastern and Southern Africa region to analyze methodologies and lessons learned for enhancing child participation in both WASH in schools projects and general WASH programmes.

A continuing challenge in the area of WASH in schools is making the move from pilot projects to national programmes. While WASH in schools is a popular programme amongst UNICEF country offices, governments and partners, there are still relatively few examples of UNICEF programmes that have succeeded in leveraging significant resources for comprehensive school WASH programmes. Important exceptions include India and Viet Nam.

4 Emergency and Reconstruction Programming

The UNICEF emergency WASH response programme consists of direct support in both new and ongoing emergencies, the coordination of emergency response through the UN Inter-Agency Standing Committee (IASC) Cluster approach, emergency preparedness, and support to post-emergency reconstruction efforts.

UNICEF has now become the pre-eminent emergency agency in the water and sanitation sector. As the lead agency for WASH under the Cluster approach, the agency is responsible for ensuring timely and adequate overall response in emergencies. In addition, its own emergency programme has grown substantially, accounting for more than half of all WASH expenditures for three years in a row (Section 8). UNICEF was also the largest single recipient of sectoral funds from the UN Central Emergency Response Fund (CERF) in 2006, drawing over US\$ 13 million, which represents 41 per cent of total allocations to the sector. UNICEF also receives significant resources for emergency WASH programmes through the UN Consolidated Appeals Process (CAP).

4.1 UNICEF Emergency Response

In 2006, UNICEF responded to new emergencies in Lebanon, Indonesia, the Horn of Africa and many other smaller emergency events such as the civil unrest in Timor Leste, the cyclones in the Philippines, the hurricanes in Honduras, conflict in Uganda and cholera outbreaks in Angola. UNICEF also provided ongoing support to emergency response and reconstruction in Darfur, the tsunami-affected countries, Pakistan, DR Congo, Liberia and Sierra Leone. In these and other, smaller emergencies, UNICEF response is guided by the UNICEF Core Commitments for Children (CCCs) in emergencies.

In a comprehensive response to the war in Lebanon, UNICEF provided direct support in the areas of water tankering, family water and hygiene kits, and water and sanitation system repairs, as well as serving as WASH cluster lead agency (see Section 4.3). During

the shelling in the south of the country, UNICEF delivered almost two million litres of bottled water, which was the only feasible way to reach affected families.

In the aftermath of the Yogyakarta earthquake in Indonesia UNICEF provided water trucking services and distributed hygiene kits and other supplies (and served as cluster lead). UNICEF also built capacity in affected communities for water and sanitation facility rehabilitation and sponsored hygiene promotion activities.

During the 2006 cholera and acute watery diarrhoea outbreaks in Angola and other sub-Saharan Africa countries (including DR Congo, Ethiopia, and Sudan), UNICEF provided support to community and household water chlorination programmes, water trucking, hygiene and sanitation promotion as well as technical assistance, training and supplies for treatment centres. The cholera contingency plans earlier developed with partners – including water treatment, hygiene promotion, supply pre-positioning and training – are credited with reducing cases and deaths.

In 2006 UNICEF continued to provide extensive support for water and sanitation reconstruction in countries affected by the 2004 Indian Ocean tsunami, including – for example – in Sri Lanka where 17,000 tsunami-affected families gained access to sanitation and water, in Indonesia where UNICEF and its partners have completed 17 new water systems (and an additional 120 are ongoing or planned), and in Maldives where more than 3,500 communal and household rainwater systems have been installed. Post-tsunami monitoring and studies have confirmed that major outbreaks of water-related diseases were successfully avoided.

Through such direct support interventions in emergencies and subsequent reconstruction efforts millions of people gained access to water and sanitation in 2006, including 1.8 million in Ethiopia, 1 million in Sudan, 500,000 in DR Congo and 1.2 million in Afghanistan. In Iraq, the culmination of nearly 70 projects has provided 1.7 million people with access to safe water and another 700,000 people to improved sanitation.

Emergency response programmes are sometimes opportunities for influencing practices and policies in the sector as a whole. In Guatemala, for example, UNICEF's involvement in sectoral relief efforts in the aftermath of tropical storm Stan in 2005, led to the development and use of improved sanitation and drainage technologies and methodologies in schools and communities.

4.2 Preparedness and Capacity Building

UNICEF significantly boosted its specialized emergency staff cadre in 2006, bringing on board three new staff members in headquarters (New York and Geneva) to run the global WASH Cluster and to manage preparedness and response within UNICEF. This new emergency team is funded in large part through DFID thematic funding. The staff recruited for these positions bring extensive specialized emergency knowledge and experience into UNICEF. In addition to the headquarters team, dedicated regional posts are now being created in five of the seven UNICEF regions.

At the country level, UNICEF WASH emergency preparedness and response is managed by a mix of regular staff, consultants, and through UNICEF's standby arrangement system with partners for short-term placement of experienced emergency staff in UNICEF WASH programmes. A total of 11 professionals from five agencies were placed in 2006 (Table 1).

Table 1: Emergency placements through standby arrangements with partners in 2006

Agency	Title	Country	Duration
RedR	WES project officer	Indonesia	6 mths
RedR	WES reconstruction engineer	Indonesia	6 mths
DFID UK	WES officer	Pakistan	3 mths
DFID UK	WES officer	Pakistan	2 mths
DRC	WES officer	Pakistan	3 mths
RedR	Civil engineer	Indonesia	6 mths
RedR	WES officer	Sri Lanka	4 mths
NRC	WES coordinator	Somalia	4 mths
RedR	WES project officer	Indonesia	6 mths
RedR	WatSan engineer	Timor-Leste	3 mths
SRSA	WES engineer	Lebanon	1.5 mths

UNICEF uses its own cadre of WASH staff members to engage in emergency preparedness and response in countries in which they are posted, and in some cases, are transferred temporarily to emergency countries. While this system is useful – and will continue to be used as necessary – there are downsides to it: many UNICEF WASH staff do not have emergency training or experience, and there are negative impacts on the regular programme when staff are transferred temporarily to other countries.

In 2006, UNICEF initiated a number of activities to develop staff emergency knowledge and capacity to better respond to WASH Cluster and CCC obligations. Activities included starting the revision of UNICEF's WES emergency supply lists and related procedures for rapid delivery; support visits to Lebanon, Kenya, Ethiopia and Jordan; and the training of TACRO staff at a regional meeting in Cuba.

Also in 2006, the headquarters team commissioned a comprehensive independent assessment of the UNICEF WASH supply procurement process of the tsunami response. The review looked at the supplies themselves, their procurement, distribution and utilisation and resulted in a useful analysis with relevance to all future WASH emergency responses. As a consequence, a full review of UNICEF's emergency water, sanitation and hygiene equipment kits and rapid deployment processes has been initiated.

All UNICEF country offices prepare emergency preparedness and response plans as an institutional requirement, and in most priority and emergency-prone countries these plans include a WASH component. Country preparedness activities include provisions for emergency staff deployment (UNICEF staff, consultants or standby arrangements), the pre-positioning of strategic supplies, and the development of pre-approved contracts with

local implementation partners (such as drilling companies) and suppliers, and advance coordination arrangements with government partners and other stakeholders.

Preparedness also includes contingency planning for specific threats identified by UNICEF, the UN Country Team or governments. For example, in 2006 UNICEF Liberia prepared a detailed contingency WASH plan for response in what was considered the likely event of major population movements resulting from instability in neighbouring Cote d'Ivoire and Guinea.

Because of UNICEF's long-standing partnership with governments in many countries, it is often invited to participate in the development of national preparedness plans and policies, such as in Pakistan, where UNICEF was a key contributor to the new national earthquake reconstruction and rehabilitation policy, and in Ethiopia, where UNICEF supports the Ministry of Water Resources Emergency WASH Preparedness and Response Unit.

In Bangladesh, the UNICEF-supported Flood Emergency Response Project that was completed in 2006 combined response and preparedness components. Activities included the reconstruction of facilities destroyed in the major floods of 2004, the construction and provision of new facilities for deployment in future flood events (including water treatment plants), preparedness training for government staff, and the dissemination of an emergency WASH handbook for communities.

4.3 Coordination of the WASH Cluster

The cluster approach, launched in 2005 by the IASC, is a mechanism to address gaps in response and enhance the quality of humanitarian actions by strengthening partnerships and coordination between UN agencies, the Red Cross/Crescent movement, international organizations and NGOs.

UNICEF is the designated lead for the WASH Cluster globally, and is also taking the lead agency role when Clusters are instituted at country level. WASH Cluster members include the NGOs ACF, CARE, Concern, CRS, IRC, NCA, Oxfam, RedR and World Vision; ICRC and IFRC from the Red Cross movement; and WHO, UNHCR, OCHA and UNEP from the UN. A number of non-member agencies – ECHO, DFID, USAID and others – also participate in the process.

Under the leadership of the UNICEF team, in 2006 the Global WASH Cluster developed its multi-year workplan (Table 2); engaged the donor community and secured funding; developed and instituted participatory mechanisms for effective consultation and collaboration with Cluster members; and initiated a process of coordination with other Clusters including Health, Shelter and Nutrition.

The global WASH Cluster also conducted reviews of the WASH Cluster approach in Liberia and Indonesia (Jogyakarta), both of which yielded a rich set of lessons learned to be applied in future emergencies. For example, the Jogyakarta assessment concluded that while the Cluster approach did indeed enhance coordination and emergency response

effectiveness, it noted that UNICEF's dual role of coordinator and implementer resulted in some lack of clarity amongst partners.

A broader assessment of the field-level impact of building response capacity through the cluster approach as a whole showed an overall improvement in the areas of response coordination and accountability. In Liberia, the implementation of the Cluster approach has led to improved joint WASH emergency preparedness planning. In Jogjakarta, coordination through the WASH Cluster has resulted in the development common approaches to WASH technologies and methodologies (e.g. a standardized latrine design) that go beyond emergency response. And in Lebanon, the decision of a bilateral agency (DFID) to support the implementation strategy developed by WASH Cluster partners led to greater coherence in the programme of response.

Table 2: Outcomes and projects of the Global WASH Cluster's Workplan

Impact Improve predictability, timeliness and effectiveness of a comprehensive (WASH) response to humanitarian crisis	
Outcome 1 Adequate coordination capacity and mechanisms developed	Project 1 Cluster Coordinator Training
	Project 2 Information Management
Outcome 2 Increased hygiene promotion capacity for emergency response	Project 3 Hygiene Promotion
Outcome 3 WASH emergency preparedness and learning developed	Project 4 Capacity Mapping
	Project 5 Emergency Materials List and Stocks
	Project 6 Training for Capacity Building
	Project 7 Learning
Outcome 4 Adequate resources for WASH sector preparedness and response	Project 8 Country Cluster Advocacy and Resources
Outcome 5 WASH in Early Recovery	Cluster Support Team: Strategy Development

At the country level, UNICEF took the lead in all seven WASH Clusters in 2006: the four pilot countries of DR Congo, Liberia, Somalia and Uganda, and the declared Clusters in Lebanon, Indonesia (Jogjakarta) and the Philippines. While a major undertaking in all countries, this was especially a challenge in Lebanon, where UNICEF had no existing WASH programme and in the Philippines, where the UNICEF WASH programme is very small.

5 Progress in Other Countries

Most UNICEF financial and human resources are concentrated in priority and emergency countries. However, in accordance with the WASH strategy paper, all countries with UNICEF programmes are expected to carry out a WASH package of interventions limited to advocacy and technical support in the following four areas:

1. Advocacy and technical support for improving hygiene awareness and promoting behaviour change;
2. Technical support for water quality;

3. Development of emergency preparedness plans for WASH;
4. Support to national monitoring for achievement of MDG target 10.

Because most non-focus countries do not have a dedicated WASH team, these activities rely on the support of regional WASH advisers and/or support from neighbouring countries. Because the regional WASH adviser network is new and as yet incomplete, activities in non-focus countries are limited.

However, as the examples below indicate, much is being done by country offices.

Hygiene awareness-raising activities are part of the UNICEF Country Programme in several non-focus countries, either as part of small WASH programmes, or as part of Health, ECD or integrated development programmes, including in Djibouti, Kosovo and Mongolia. In Bhutan, the Religion and Health project targeting monastic institutions promoted hygiene and sanitation, and trained monks as disseminators of hygiene messages in communities.

In other non-focus countries, hygiene education (along with water and sanitation in some cases) is a component of UNICEF-supported Child Friendly Schools initiatives, including in Belize, Cape Verde, Gabon and Thailand. In several small sub-Saharan African countries – including Equatorial Guinea, Gambia and Sao Tome and Principe – hygiene promotion was included in UNICEF-supported cholera prevention programmes.

Several countries, including DPR Korea, Guyana, Maldives, the occupied Palestinian territory and Nicaragua, developed emergency preparedness and response plans for WASH, and/or supported government planning processes.

UNICEF is involved in water quality assessment and mitigation activities in several non-focus countries, including in Sri Lanka, where it helped to establish a national water quality surveillance system; in Swaziland, where UNICEF is initiating a water quality assessment programme with WHO; and in Paraguay, where UNICEF is building the capacity of indigenous communities to monitor water sources and advocate for improvements with government authorities.

UNICEF supports MDG monitoring in both focus and non-focus countries through support to government monitoring mechanisms. In 103 countries in 2006, UNICEF provided specific support for the use of the DevInfo database package (which includes a variety of MDG and child development indicators), including training of government and UN partner staff, the provision of software and computer equipment, technical assistance for software customization, development of manuals and special support for data collection. UNICEF also provided specific support for sectoral monitoring through the Joint Monitoring Programme (see Section 7.3).

6 Environmental Programming

If water and sanitation is considered a component of environmental programming (which it is, for example, within the MDG classification), then it includes much of what UNICEF does in WASH. However, if a more restricted definition is used, then the current UNICEF environment programme is very small.

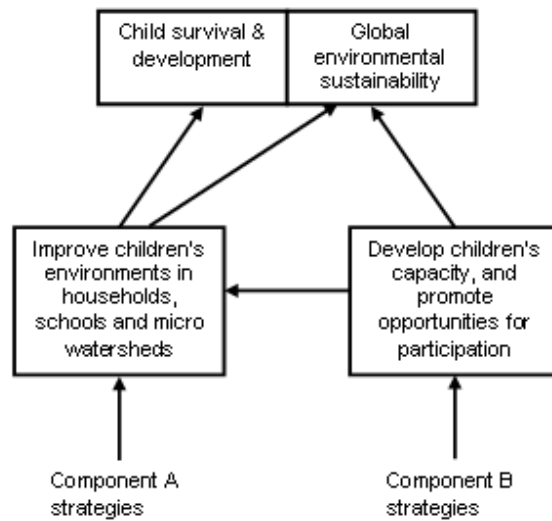
In the 1990s, an independent environment section in headquarters – and later an environmental unit within the WES Section – was involved in a number of environmental initiatives, including in the areas of children’s environmental health, environmental impact assessment and the protection of freshwater environments. To focus on its WASH core mandate and for a variety of other reasons, the WES Section de-emphasized environmental programming in recent years. As a consequence, programming for the environment – both at global and country level – is now only a very small part of the UNICEF WASH programme. Environmental aspects including water resource management initiatives, amount to only 2 per cent of 2006 expenditure (see Section 8).

Starting in late 2005, UNICEF and the WES Section began to re-emphasize environmental programming. This shift was prompted by several factors, the most important being the growing recognition that UNICEF should play a greater role in the protection of water resources, and that the effects of global warming – given its impact on water resources and the spread of WASH-related diseases – must be taken into account at the country level.

At the global level, the expansion of the environment programme has started with the creation and filling of an environment post in the WES Section. Since then the section has embarked on several new initiatives – all still in the development phase – including the development of a joint strategy paper on children and the environment with UNEP (see more below), a draft plan of action on children’s environmental health with WHO, and an update of the joint UNEP-UNICEF publication “Children in the New Millennium”. The WES Section has also carried out an inventory of UNICEF-supported current environmental initiatives across a sample of programme countries.

The joint strategy paper with UNEP, which will be finalized by the third quarter of 2007, will represent a major new joint initiative for both agencies. The strategy paper will be based on the two-pronged concept that children need a safe environment (children are the most affected by environmental degradation) and that the environment needs children (children, adequately supported, are effective environmental advocates and activists). The two agencies will bring their respective competencies together in a package of activities focusing on practical environmental initiatives in schools and communities in developing countries, and advocacy and support to children's participation in programming.

Figure 9: Draft conceptual framework for the UNEP-UNICEF joint strategy paper on children and the environment



Although limited and disparate, some country offices continue to sponsor environmental initiatives. Two country offices initiated environmental impact assessments (EIA) in 2006. In Nepal, EIA was a requirement for CIDA funding for area-based programming initiative. In Maldives, an EIA was tendered as part of preparatory activities for a new four-island sanitation project.

China is involved in promoting smokeless household stoves in Guizhou province, where arsenic-contaminated coal is a major health problem. UNICEF sponsored the participation of 80,000 children in a campaign to promote the new stoves.

In several countries UNICEF supports solid waste management initiatives to improve community environments. In Brazil, UNICEF sponsored the “National and State Forum on Trash and Citizenship”, which addressed the social impact of garbage. In Iraq, UNICEF-sponsored training programmes for government officials (in the principles and application of public-private-partnerships for improving solid waste management systems) and technicians (in the design of sanitary landfills for improved planning and management of solid waste disposal sites). In Banda Aceh, UNICEF helped to upgrade solid waste management infrastructure. In Tamil Nadu (India), a UNICEF pilot solid waste management project emphasizing maximum waste recovery through recycling and reuse is being scaled up.

In Colombia, UNICEF helped develop solid waste management plans in 453 small towns and is also helping to promote environmental activism through a programme involving 7,000 secondary school children.

In many countries – including Burundi, DPR Korea, Laos and Panama – UNICEF supports the construction of spring-based water systems and includes catchment protection in training programmes and guideline development. In the Indian state of Madhya Pradesh, a UNICEF pilot “Wise Water Management” initiative that promotes water conservation techniques and the reuse of grey water in 22 schools, has been taken up by the state government with funding for an additional 300 schools.

7 Crosscutting Issues

7.1 Gender-based Approaches in WASH

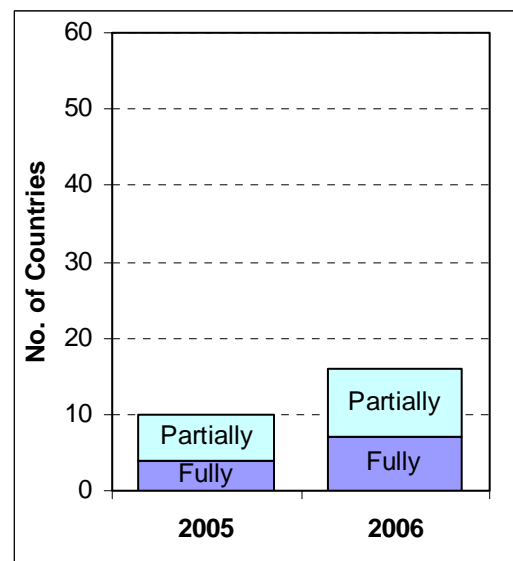
In much of the world, women and girls are traditionally responsible for domestic water supply and sanitation, and maintaining a hygienic home environment. As managers at the household level, women also have a higher stake in the improvement of water and sanitation services and in sustaining facilities. UNICEF is working to ensure that women (and where relevant children) are directly involved in the planning and management of water supply and sanitation programmes, and that hygiene promotion interventions are specifically designed to reach women and girls.

As a first step in promoting systemic gender-positive changes in government and UNICEF-supported sectoral programmes, UNICEF has emphasized the need to conduct a sector gender analysis and has included this as a specific indicator in the UNICEF MDG and MTSP progress monitoring system (Figure 10). Because this is a new initiative, relatively few country WASH programmes have carried it out to date. In countries where an analysis has been conducted (or is planned), they fall into one of two categories – a WASH sector-only analysis, or as part of a broader process linked to UNDAF or PRSPs or MDG progress monitoring. In some cases, UNICEF is carrying this out with partners including the EU and SIDA. In Bangladesh, the UNICEF WASH programme is completing a major poverty, gender and WASH study of the previous five-year programme that will help strengthen how the programme addresses poverty and gender issues.

In its extensive support to sector policy development and reform processes (see Section 3.1), UNICEF works with partners to ensure that gender issues and programmes are incorporated into policies and plans. This is also the case where

UNICEF works with governments and partners on the WASH components of national development and poverty alleviation plans.

Figure 10: Gender analyses undertaken in the current programme cycle for the water and sanitation sector



A major part of UNICEF work on gender in the sector is related to the WASH in Schools programme, described in Section 3.4. Outside of the schools programme, there are a variety of initiatives at the country office level.

In many countries, UNICEF works to promote the participation of women in planning water and sanitation projects through a variety of affirmative action initiatives to increase the number of women on sectoral planning bodies, notably water and sanitation committees at the community level. Several countries, including Malawi, Sudan and Zambia, report progress in this area. In Myanmar, UNICEF has a long-standing advocacy programme with central and sub-national government authorities to ensure that water systems were planned, maintained and evaluated with the active participation of women. In South Asian countries, UNICEF is a strong proponent of the need for special attention to be given to increasing the voice of women in community total sanitation processes.

UNICEF-supported programmes also work to ensure that the special water- and sanitation-related needs of women and girls are considered in WASH programmes. Security and privacy issues related to the location and design of water and sanitation facilities are highlighted. UNICEF is also working to ensure that menstrual hygiene is taken into account in the design of facilities and of hygiene education programmes. Programmes exist both in schools (such as in Malawi, where school WASH designs include private washing facilities for older primary school girls) and outside of schools, including in Bangladesh, Pakistan and in India, where UNICEF is supporting sanitary napkin production by community-based organizations and small enterprises, and is producing technical guidelines entitled *Menstrual Hygiene Management and Napkin Production*.

In some countries, water, sanitation and hygiene activities are incorporated into ongoing gender programmes. In Egypt, for example, rural sanitation and hygiene activities have been integrated into the FGM/C abandonment programme, as the result of participatory planning processes. In Sudan and other African countries, WASH community mobilization programmes include sessions on gender and HIV/AIDS.

In many countries UNICEF promotes programmes that build capacity, especially of women and girls, to become community hygiene promoters. This includes working with existing women's groups and developing new systems. In Bangladesh, UNICEF-supported groups of adolescent girl hygiene promoters has helped to develop their skill and confidence levels.

Finally, UNICEF is looking at ways to increase the number of women in its own cadre of staff. While some gains have been made in recent years (the top WASH post in UNICEF has been held by women incumbents since 2000), the overall percentage of women professional staff remains very low, at about 20 per cent. Recently the WES Section in New York has begun to work with the UNICEF Gender Task Force, which conducted a gender parity study in 2006. The task force has issued a Parity Action Plan of measures to revamp recruitment procedures (including ensuring that candidate short lists must be 40

per cent women), improve the retention of women staff through workplace reforms, invest in targeted capacity-building initiatives and develop a Gender Equity and Equality Policy.

7.2 Sustainability

UNICEF works towards improving the sustainability of its own programmes of support and of national WASH programmes. This includes the sustainability of water and sanitation facilities: ensuring that facilities are reliable and maintained, and that they continue to be used by the intended beneficiaries. It also includes the sustainability of behaviour change programmes: ensuring that interventions continue to result in behaviour change even after project activities cease.

In the 1980s and 1990s, lessons learned about the sustainability of results achieved through past UNICEF assistance programmes led to a greater focus on facilitating community participation in programme design and implementation, including in the maintenance and management of water and sanitation facilities. This led to a greater focus on building the capacity of communities for system management, an effort that continues to this day. Now, except in rare special cases, all UNICEF-assisted WASH programmes include system management capacity building for communities, including in emergency interventions. In 2006, for example, in larger programmes in Africa such as Nigeria and Sudan, thousands of caretakers, mechanics, and WASH committee members were trained with UNICEF support. Also in Africa, UNICEF supported the Rural Water Supply Network (RWSN) forum on “Scaling up Local Entrepreneurship in Rural Water Supply to meet the MDGs” (Ghana, November 2006), which focused on sustainability and cost effectiveness and involved 290 delegates from 37 countries.

The new strategy paper recognizes that service provision can only be sustainable if the financial and policy environment is adequate, and gaps in the use of services can only be identified if the service is adequately monitored. The strategy paper thus emphasizes the need to build the capacity of intermediate level institutions – administrative units that lie between the national and community levels, including states, provinces, districts, municipalities – in addition to that of communities themselves. In many countries, UNICEF is increasingly working at these levels in its capacity-building efforts. In Viet Nam, for example, UNICEF capacity building focuses on the district and provincial level, while in most Latin American countries the focus is on capacity building at the municipal level.

UNICEF and the Government of the Netherlands initiated a major new water and sanitation sustainability effort through the Partnership for Water, Sanitation and Hygiene in 2006. For the first time for such a large project (which will result in 2.9 million people gaining access to water and 2.4 million to sanitation by 2012) the sustainability of the use of the facilities constructed (i.e. the programme outcomes) will be the ultimate determinant of the success of the programme. As the framework in Table 3 shows, project managers will continue to routinely monitor progress using standard indicators, but in addition sustainability checks will be carried out annually using random sample survey methodology. The results of the sustainability checks will be used to improve project sustainability measures (including community- based management and the setting up of maintenance systems and spare parts networks) and to determine the need for repair or replacement systems in the event of permanent breakdowns. UNICEF and government partners are committed to ensuring that all facilities constructed through the projects will be in use up to 2015, three years after the end of the project period. The use of sustainability outcomes to measure the success of interventions will be increasingly stressed in other UNICEF programmes of support in the sector.

Table 3: Monitoring protocol for DGIS/ UNICEF/ Government partnership

Monitoring Stream / Component	Periodicity
<p>Results-based Progress Monitoring</p> <ul style="list-style-type: none"> - results monitoring for key indicators, including community and household-based systems - implementation process monitoring through routine data collection and analysis using existing (improved) government monitoring systems 	<ul style="list-style-type: none"> - continuously (process indicators) - twice per year (result indicators)
<p>Sustainability check</p> <ul style="list-style-type: none"> - annual audit of cumulative new water and sanitation users - random sample survey based methodology 	<ul style="list-style-type: none"> - once at project inception and then annually
<p>Monitoring coordination</p> <ul style="list-style-type: none"> - coordination of project-specific monitoring processes with respect to project output milestones - synchronization of monitoring data collection and analysis from internal and external sources 	<ul style="list-style-type: none"> - variable

Information from UNICEF reviews and studies in Bangladesh, Viet Nam and elsewhere point to the difficulty of sustaining hygiene promotion activities and behavioural change beyond the end of projects. These specific studies are reinforced by handwashing data from national household surveys that show consistently low handwashing rates even in countries with long-standing sectoral support programmes.

The school sanitation impact and sustainability study (detailed in Section 3.4) is expected to provide a much better understanding of hygiene promotion sustainability in the context of schools, and to determine programme design improvements. In the meantime, UNICEF is working with partners to address behaviour change sustainability through new hygiene promotion initiatives, and through the use of PHAST and other community-led participatory techniques (Section 3.2).

7.3 Sector Monitoring and the JMP

The Joint Monitoring Programme for Water Supply and Sanitation (JMP) is the UN's mechanism for monitoring progress towards the MDG drinking water and sanitation targets. The JMP is managed jointly by WHO and UNICEF. The guiding principle behind the JMP is that reliable usage data is a prerequisite for promoting the prioritization of the water supply and sanitation sector, and especially for increased investments for the poor.

The JMP relies on data obtained from national censuses and nationally-representative household sample surveys rather than on data from government service providers, and is thus considered the best available indication of sector status and progress. Although there is a wide variability of water and sanitation norms across countries, the JMP system allows inter-country and global comparisons.

Since 2000 the JMP has published four thematic reports, including one in 2006, which focused on measuring progress towards meeting the MDG drinking water and sanitation targets in urban and rural areas.²³ The JMP data set is also disseminated through a dedicated web site (www.wssinfo.org), and is used very widely in other sectoral and MDG-related publications (including, for example, this year's Human Development Report).

The next JMP data update, focusing on sanitation, will be published in early 2008 to coincide with the International Year of Sanitation and the 16th round of the Commission on Sustainable Development (CSD).

In addition to compiling, analyzing and disseminating sector coverage data, the JMP works to improve monitoring systems at the country level (including improving national dissemination networks, pioneered under a grant from the EU Water Facility in Ghana, Mozambique and Nigeria), develop and improve household data collection instruments and improve components of monitoring systems (e.g., it includes water quality information in coverage data). The JMP is also working with external expertise to assess a range of methodological issues in the analyses of data.

In 2006 UNICEF and WHO initiated a consultative process with major sector stakeholders on further improving the JMP. This process will continue in 2007.

The overarching issue under discussion is how to improve the utility of the JMP as a global advocacy tool for the sector. Three major topics are the periodicity of reporting, the development of indicators and the role of water quality in coverage data. Many stakeholders at both global and country levels would like to see regular annual updates of JMP data (currently they are on a two-year cycle) and the use of more detailed and disaggregated indicators to better capture information on sustainability, disparities,

²³ "Meeting the MDG Drinking Water and Sanitation Target: the Urban and Rural Challenge of the Decade", WHO/UNICEF, 2006.

affordability and handwashing. Also under discussion are ways to increase the JMP's resources to meet these new demands.

It is expected that a "JMP reform" process will emerge from these discussion and that an improved sector monitoring instrument will be under development in 2007 and 2008.

7.4 Partnerships

In 2006, UNICEF entered into major new funding partnerships with the Government of the Netherlands and the EU Water Facility, as well as new agreements with DFID, SIDA and the Government of Norway (see Section 8 for more information). Funding from donor partners is the lifeblood of UNICEF WASH programming, accounting for 83 per cent of programme expenditure in 2006. In many cases these partnerships go well beyond funding, with partners having significant involvement in developing, planning and monitoring programmes. UNICEF promotes and welcomes these comprehensive partnership arrangements as they result in stronger programmes.

The US\$ 79-million four-country²⁴ Partnership for Water, Sanitation and Hygiene with the Government of the Netherlands is a major new collaborative framework that is expected to expand, depending on requirements and priorities in individual countries – with a likely focus on scaling up progress for sanitation.

Under the principles of UNDAF, UNICEF is intensifying its cooperation with sister UN agencies at the country, regional and global levels. In many countries, for example, UNICEF works closely with WFP in the area of WASH in schools – usually within the framework of school feeding programmes, including in Bhutan, Ethiopia, Kenya, Laos and Lesotho. UNICEF works jointly on a variety of initiatives with other UN agencies and programmes, including UNDP, UNEP, WHO, FAO and UN Habitat.

In priority countries, UNICEF is especially active in UNDAF processes. In some countries, such as Eritrea, UNICEF chairs thematic groups for WASH and in other countries, such as Ethiopia, UNICEF is the lead agency for the water and sanitation sector within UNDAF results matrices. In many countries, UNICEF WASH programmes are specifically designed to contribute to UNDAF objectives.

In 2006 in India, UNICEF joined together with UNDP and FAO to form a national chapter of UN water. The first task of this body was to review the water components of UNDAF (2008-2012) and develop a framework for action under the rubric of "Water for Life and Livelihoods". Further initiatives are planned in the area of Integrated Water Resources Management in 2007.

In Viet Nam, UNICEF spearheaded the formation of an important new national partnership framework involving 13 other international organizations (including UN agencies, bilateral agencies, development banks and NGOs) and government to facilitate

²⁴ Comoros, Ethiopia, Malawi and Mozambique.

improved coordination and more effective support for rural water supply, sanitation and hygiene promotion.

UNICEF also works increasingly with UNOPS (United Nations Office for Project Services) in the implementation of larger projects such as WASH in Schools projects in Sierra Leone and Banda Aceh, and water and sanitation projects in Iraq, the Maldives and Sri Lanka.

The flagship cooperative mechanism between WHO and UNICEF is the JMP (Section 7.3), but the two agencies also work together in a variety of other ways at the global, regional and country levels. Examples include UNICEF participation in the WHO-led International Network to Promote Household Water Treatment and Safe Storage, as well as extensive cooperation in the area of water quality monitoring in countries around the world.

UNICEF works with the World Bank in a number of different ways, notably in the area of handwashing promotion, including through the global PPPHW (Section 3.2) as well as country-level cooperative programmes in Nepal and other countries. UNICEF engagement with the regional development banks is fairly limited, but in 2006 efforts were made to deepen involvement with both AfDB and ADB.

UNICEF works with many other partners at all levels. Important examples are with major NGOs (notably WaterAid but also Care, World Vision and others), with key sectoral institutions (such as the IRC International Water and Sanitation Centre, WEDC, the London School of Hygiene and Tropical Medicine) and global programmes, including the Water and Sanitation Program and the USAID-funded Hygiene Improvement Project.

At the global level, UNICEF participates and contributes to the two key global UN water and sanitation cooperative mechanisms – UN-Water and the Water Supply and Sanitation Collaborative Council. UNICEF also initiated the development of a new mechanism to promote greater inputs from decision-makers and partners into UNICEF programming for WASH: the Global Task Force for WASH (which was discussed at a major event in January 2007, with the participation of senior UNICEF staff, Cherie Booth (wife of the UK Prime Minister Tony Blair) and government officials from China, Malawi, Norway, Britain, Uganda, Viet Nam, the United States and Japan, along with representatives from the private sector, non-governmental organizations and United Nations agencies).

UNICEF is a member of many sectoral networks, ranging from the global (e.g. RWSN – the Rural Water Supply Network), the regional (e.g. WAWI – West African Water Initiative) and the national (a wide variety of water and sanitation networks and cooperative mechanisms).

SWAps and related mechanisms are important platforms for cooperation in some countries, including in Kenya, Malawi and Uganda. How UNICEF engages in SWAp processes varies from country to country, ranging from support to the development of

SWAp and participating in SWAp processes, to advocating with SWAp members for sectoral reforms for the benefit of children.

In Mozambique, which does not yet have a water and sanitation SWAp, UNICEF is working together with partners to advocate for the progressive transformation of the Water and Sanitation Group (which UNICEF co-chairs) into a formal SWAp. In the SWAp-like development cooperation mechanism used in Ethiopia, UNICEF both contributes to the common fund and plays a lead role in the areas of capacity building and advocacy. UNICEF is also involved in SWAp planning in Burkina Faso and Sri Lanka.

UNICEF also works with the private sector in many ways, ranging from cooperation within PPP frameworks (such as the PPPHW – see Section 3.2) at the global level, to standby agreements with local companies for the provision of supplies in emergencies.

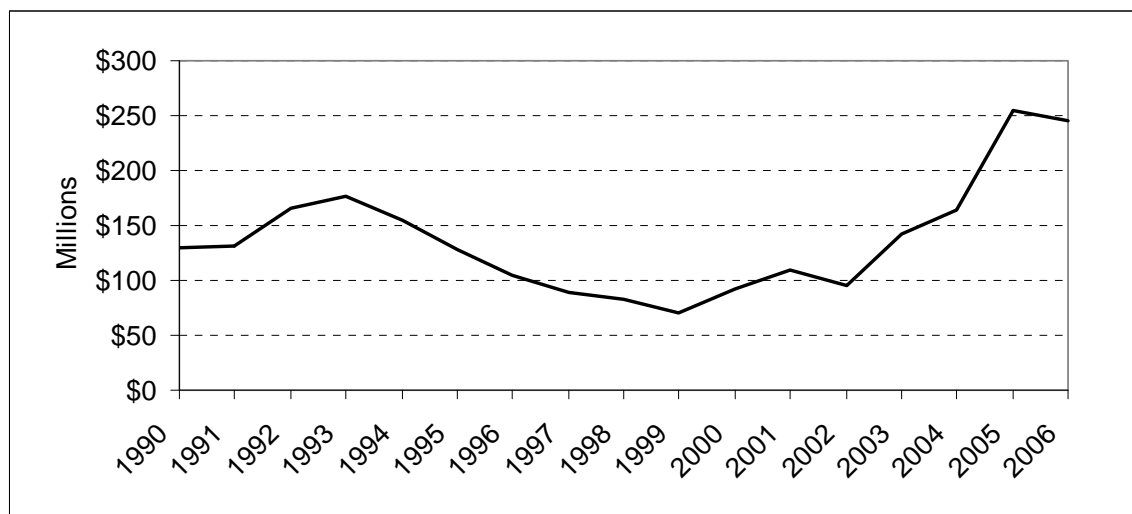
Perhaps the most important new collaborative framework that emerged in 2006 was the WASH Cluster, which – while still a work in progress – has already clearly contributed to improved coordination and cooperation at both global and country levels for emergency preparedness and response.

8 UNICEF Expenditure for WASH

8.1 Expenditure Patterns and Trends

The total UNICEF expenditure in 2006 for water, sanitation and hygiene programmes was US\$ 245 million. This represents a slight decrease from the US\$ 254 million expenditure in 2005, but is significantly higher than average expenditure figures over previous years.

Figure 11: Total UNICEF WASH expenditure, 1990 – 2006



Much of the significant increase from 2004 onwards is due to emergency WASH programming. As in both 2005 and 2004, more than half (53%) of UNICEF sectoral expenditure was for emergency programmes and activities. This is a very sharp increase from the 1990s, which averaged 25 per cent expenditures on emergency per year.

While emergencies and thus emergency expenditure is likely to continue to be high in the coming years, it is expected that it will drop somewhat in relation to overall expenditure, likely approaching the overall UNICEF average of about 40 per cent of expenditure on emergencies.

There continues to be a concentration of UNICEF WASH resources in a relatively small number of countries, especially countries with large emergency response programmes such as Iraq and Indonesia. However, this pattern was beginning to change in 2006. In 2005, there was a total of only 25 countries with annual WASH expenditures above US\$ 1.5 million dollars, whereas in 2006 that number expanded to 34 countries (29 of which are priority countries). Another sign that this trend is on the wane is that in 2005 the top ten country expenditures on WASH accounted for a very high 70 per cent of all country-level WASH expenditure, whereas in 2006 this figure dropped to 53 per cent.

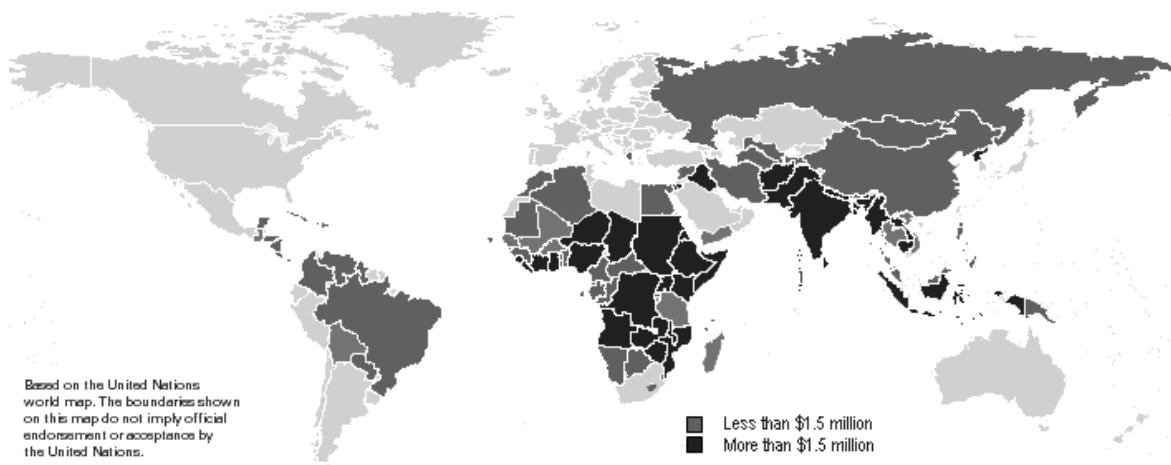
While UNICEF will continue to work towards rationalizing expenditure across countries, significant funds will continue to be allocated to countries where the greatest potential impact on MDG Target 10 can be realized. This includes especially high-population countries with low water and/or sanitation coverage. As shown in Table 4, most of the current top ten by expenditure countries already fall into this category.

Another challenge in the coming years is to develop and fund new or expanded WASH programmes in those priority countries in which UNICEF does not yet have a significant water, sanitation and hygiene programme. UNICEF spent more than 86 per cent of its funds for WASH in the 60 priority countries in 2006, but 31 countries still did not have the US\$ 1.5 million that is considered to be the minimum level for a fully operational programme. In five of these countries, WASH activities were minimal, with expenditures of US\$ 50,000 or less.

Table 4: Top ten countries by WASH expenditure, in alphabetical order

2005	2006
Bangladesh	DR Congo
Ethiopia	Ethiopia
India	India
Indonesia	Indonesia
Iraq	Iraq
Nigeria	Nigeria
Pakistan	Pakistan
Sri Lanka	Somalia
Sudan	Sri Lanka
Uganda	Sudan

Figure 12: Expenditure levels in 2006, all countries with programmes and activities



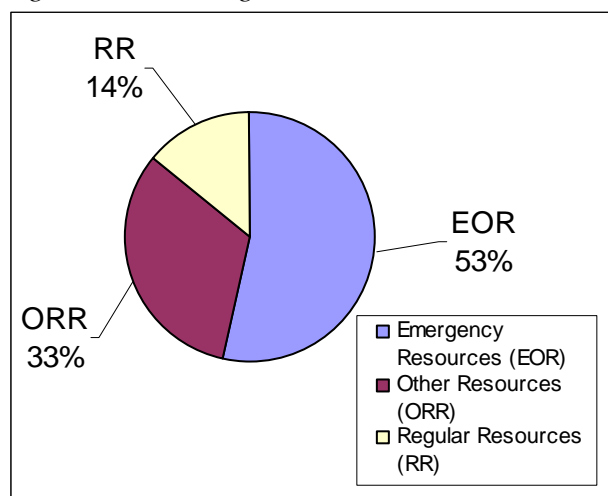
8.2 Funding Sources

Of the 2006 total WASH expenditure of US\$ 245 million, US \$ 35 million was from UNICEF Regular Resource funding and US\$ 210 million was from Other Resources, funding provided by donor partners for specific country programmes and projects or thematic funding for WASH. Of the Other Resources, US\$ 130 million was for emergencies and US\$ 80 million for regular programming.

Funds were provided by a number of donors, including bilateral partners, multilateral partners, UNICEF national committees (NatComs) and the private sector. Of these, the majority of funding continues to be from bilateral sources, but with important contributions from NatComs.

Major new multi-year funding agreements signed in 2006 include US\$ 63 million for the Bangladesh programme from DFID, US\$ 57 million for programmes in East Africa from the Government of the Netherlands, and a total of US\$ 55 million from the EU Water Facility for projects mainly in Africa.

Figure 13: Funding sources, 2006



Continuing an initiative that started in 2005, the Government of Norway again contributed over \$6 million to the global UNICEF WASH programme for administration by the WES Section in New York. These contributions are important in that the WES Section is free to allocate funds to programmes and countries where funding is currently unavailable, and where the strategic application of modest funding can make a significant difference. As an example, one application of these funds is to stimulate the expansion of programmes in focus countries with limited programming activity including in Papua New Guinea and the Philippines in 2006.

Over the last UNICEF MTSP period (2002-2005) and in 2006 (see Table 5) the top four donors were the governments of the United Kingdom, Japan and the USA, and the EU.

Table 5: Top ten donors for UNICEF WASH, 2002-2005 (last MTSP period)²⁵

United Kingdom	\$59,607,958
Japan	\$52,476,643
USA (USAID + OFDA)	\$41,657,260
EU (EC + ECHO)	\$32,727,597
Netherlands	\$15,566,758
Canada	\$15,156,039
German NatCom	\$9,489,066
Norway	\$8,473,888
Sweden	\$7,594,050
Australia	\$6,214,836

Table 6: Top ten donors for UNICEF WASH, 2006

Regular Programmes		Emergency Programmes	
United Kingdom	\$12,385,709	USA	\$7,776,117
Japan	\$9,461,564	US NatCom / Clinton Foundation	\$7,012,967
EU	\$8,668,452	Japan	\$6,807,616
Norway	\$3,585,180	United Kingdom	\$5,820,223
SIDA	\$2,271,991	Netherlands	\$5,779,231
German NatCom	\$1,792,755	French NatCom	\$4,173,094
Denmark	\$1,345,059	Belgian NatCom	\$3,848,187
Netherlands	\$1,318,922	EU	\$3,315,023
Hilton Foundation	\$1,105,183	Netherlands NatCom	\$2,615,929
French NatCom	\$892,561	Canada	\$2,551,640

²⁵ This does not include UNICEF General Resources, inter-UN transfers and some thematic funding or pooled funds. Note that due to accounting procedure changes from the last MTSP period, the 2002-2005 period (this table) is based on donations during the calendar year, whereas in 2006 (next table) it is based on expenditures of donated funds.

9 Challenges for 2007 and Beyond

Operationalising UNICEF's Global WASH Strategies for 2006-2015. While important steps have been made in 2006, there is still considerable work to be done to fully roll out the new global WASH strategy to country programmes.

The first challenge in this respect is to increase staff and financial resources to adequate levels to sustain comprehensive programmes in all 60 priority countries. Currently, less than half of priority countries can be considered adequately resourced. At the regional level UNICEF has created senior posts in WCARO and ESARO and has posted staff in other regional offices. However, due mainly to funding issues, a permanent and full set of regional advisers has not yet been achieved.

Because of the UNICEF WASH programme's reliance on external funding partners, creating a full staff complement in priority countries and at the regional level will require even more extensive support, especially from bilateral partners. UNICEF will take steps in 2007 to engage with partners in a more strategic fashion, in the context of global strategy operationalization.

The second global strategy-related challenge is to bring all countries – especially priority countries – on board with the new strategic framework described in the strategy paper. While the strategy paper describes a more upstream approach to programming at the country level, the fact is that some UNICEF country offices have yet to fully embrace this concept in their programmes. Through a combination of information sharing, consultation and capacity building, UNICEF will continue to promote improvements in this area.

Integration of WES into other activities supported by UNICEF. Operationalizing inter-sectoral approaches at a significant scale remains a considerable challenge, not least because government institutions mostly operate on sectoral lines. Yet, for maximum benefits to children, and for respective sectoral interventions to have maximum impact, cross-sectoral interventions are needed. UNICEF's Medium Term Strategic Plan consists of five focus areas, including young child survival and development (YCSD), basic education and gender equality, and HIV/AIDS. Safe drinking water, sanitation and hygiene are critical elements in each of these areas. UNICEF Country Programmes reflect this and increasingly seek to incorporate key WASH elements in their health programmes, in education programmes and in HIV/AIDS programming, in addition to carrying out activities aimed at supporting governments to achieve their MDG 7 Target 10 goals.

In November 2006, UNICEF organised a meeting of all Representatives of the countries in Africa, where participants agreed to intensify UNICEF support to achieve the health-related MDGs 1, 4, 5, 6 and 7 in these countries. Related to MDG 4, UNICEF is working to incorporate three key WASH interventions in the high-impact, low cost health sector intervention packages that would be scaled up: handwashing with soap, sanitation promotion and home treatment of drinking water. Where successful, this will significantly increase the commitment of the health sector for these high-impact,

preventive, WASH interventions and considerably add to the scaling up of these interventions in countries where this will have the greatest impact.

Sustained improvements in the water supply, sanitation and hygiene practices in schools depend on strong cooperation between the WES and Education sectors. From the late 1990s, UNICEF WES has strongly promoted WASH in schools, primarily with the aim of improving girls' education. In the current MTSP 2006-2009, WASH is firmly embedded in the Basic Education and Gender Equality focus area. Country Offices increasingly have the key WASH elements included in their child-friendly schools initiatives, as well as in the national monitoring system for education, thus enhancing the demand for these indispensable aspects of schools.

Field reports indicate increasing collaboration between the WES and HIV/AIDS sectors, especially in the hardest hit countries in Eastern and Southern Africa. WES programmes recognise the crucial importance of safe drinking water, sanitation and hygiene to people living with HIV/AIDS, the needs of orphaned children, the need to include HIV/AIDS messages in public education, including HIV/AIDS in training activities, bringing water closer to homes, home drinking water treatment, etc.

Emergency work vis-a-vis long-term work. With the nomination of UNICEF as the lead agency for water and sanitation in emergencies and more than half of UNICEF's WES expenditure going to emergency activities, there is a need to ensure that the emergency response work is harmonized and coordinated with the long-term work.

Many of the 60 UNICEF WASH priority countries are in some form of post-crisis transition, with low water supply and sanitation coverage, high under-five mortality and reduced capacity in crisis-affected areas. In 2006, the Executive Board adopted UNICEF's post-crisis transition strategy, in support of the MTSP.

During post-crisis transition, UNICEF carefully and gradually reduces the more direct role in implementing WASH activities often assumed immediately after a crisis, as national and local capabilities are gradually restored. This goes hand in hand with increased efforts towards strengthening institutional and capacity development. In building capacity, UNICEF strives for longer-term engagement with national sector institutions, beyond attending to more immediate staff training needs.

As during an emergency, working in a well-coordinated manner with all major partners is important in the post-crisis situation as well. UNICEF, with its continuous long-term presence, facilitates the transition from leading coordination during the crisis to post-crisis sector coordination, often with different partners as international relief agencies depart and national sector organizations resume their roles.

UNICEF promotes participatory approaches and decentralized planning and programming, involving direct consultations with affected communities. This approach includes support to local authorities to plan and manage the recovery processes. The

participation of children, young people and women are key considerations for UNICEF support in post-crisis situations.

Following crises, UNICEF promotes the concept of 'building back better'. After a crisis, new opportunities often emerge for change or reform of pre-existing policies, infrastructure and services. These opportunities can bring about accelerated developmental gains. Building back better places a premium on rehabilitation of services, systems and institutions through the application of improved standards, methods for rehabilitation, and policies.

UNICEF's lead role on WASH in the response to the Indian Ocean tsunami of 2006 resulted in a significant strengthening of UNICEF's support for WASH in UNICEF's regular programming in several of the affected countries, with a renewed recognition of the need to address WASH issues that existed even prior to the crisis.

In emergencies, UNICEF and partners often bring in large quantities of essential WASH commodities. The global WASH cluster, led by UNICEF, seeks to ensure that supplies with a lifetime beyond the immediate crisis period fit in with local capacities and resources to operate, maintain and repair, including access to services and spare parts.

How can UNICEF contribute more actively to plug the financing gap in the sector?

This report indicates the fund requirement in the sector, which are well short of what is actually available. One of the challenges facing UNICEF is how to increase funding for WES in general, as well as for UNICEF's work in the sector.

There are several estimates for the costs of implementing MDG Target 10, which vary enormously due to data and methodological inconsistencies. The 2006 Human Development Report indicates that to achieve MDG 7 Target 10 would cost about US\$10 billion annually for low-cost, sustainable technology; mostly in Asia and Africa.

Funding for water supply, sanitation and hygiene improvements comes from governments, international development banks, bilateral and multilateral donors, NGOs, the private sector, communities and households. There is no readily available overview of trends in sector expenditure by these stakeholders.

Between 1990 and 2002, ODA commitments for water increased from US\$ 2.6 to 3.4 billion per year. Since 1998, ODA for water has increased at a slower rate than has total ODA. In recent years, several donors have pledged to significantly increase financing for the water supply and sanitation sector.

UNICEF action to increase financing for water supply and sanitation includes:

- Promote the needs of the sector globally, through the WHO-UNICEF Joint Monitoring Programme, which reports on the status and trends in the sector, which allows the regions and countries with the greatest needs to be identified.
- Advocate with national governments to increase their funding for WES.

- Encourage cost sharing between donors, governments and communities/households. Cost sharing also increases the commitment of communities/households to be responsible for operation and maintenance, thus increasing sustainability, which reduces the need for repeated rehabilitation.
- Cooperate with partners to reduce corruption in the sector. From 2006, UNICEF is a member of the Water Integrity Network. UNICEF is participating with other lead agencies to conduct regional workshops for sector agencies on ways to increase transparency and accountability in sector fund utilisation, at all levels.

The right to water. The Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination Against Women recognize the importance of ensuring access to safe drinking water and sanitation in progressively realizing the rights to the highest attainable standard of health and adequate living conditions. In 2002, the United Nations Committee on Economic, Social and Cultural Rights, through its General Comment 15, asserted that access to domestic water supply is a human right.

General Comment 15 also highlights the need for everyone to have access to adequate sanitation, as this is not only fundamental for human dignity and privacy, but is also one of the principal mechanisms for protecting the quality of drinking water supplies and resources. In accordance with the rights to health and adequate housing, States parties have an obligation to progressively extend safe water supply and sanitation services.

The right to water (and sanitation) is a recognition of the need and entitlement of all people to access safe, affordable and sufficient water supplies (and basic sanitation). As such, those without access to water (or sanitation) will be able to use this right to convince decision-makers to prioritize water supply (and sanitation) services.

General Comment 15 requires United Nations agencies, including UNICEF, to cooperate with States parties, providing expertise in relation to the implementation of the right to water. General Comment 15 contains very specific guidance for State parties (governments) to respect, protect and fulfill their obligations with regard to their citizens' right to water (and sanitation). Thus, the role of UNICEF will be to support governments in meeting these obligations.

UNICEF programming in WASH addresses the right to water as follows:

- UNICEF is increasingly active in WES sector policy development and strengthening. UNICEF advocates for the inclusion of the right to water and sanitation, including programmatic implications, in national sector policy documents and in policy application.
- UNICEF also analyses the use of government budgets for water supply and sanitation, and advocates for populations with low coverage to be prioritised, at all levels.
- In programme implementation, UNICEF promotes the use of tools and methods that identify the unserved with least resources and influence and seeks to ensure

- that their basic needs are met, within their means. This helps identify and address disparities in coverage and service levels.
- Many countries seek to decentralise the delivery of essential services, including water supply and sanitation. UNICEF strongly supports effective decentralisation, which should bring decision-making power and control over financial resources closer to people. This increases the likelihood that poor and disadvantaged households also get sustainable access to improved water supply and basic sanitation.
 - In the context of decentralised approach, UNICEF also supports and promotes the equal participation of weaker community members, including poor families, disadvantaged, women and children.

Many UNICEF Country Offices work with their implementing partners to use the human right to water in practical programme implementation.

Gender equity. UNICEF must take a more proactive approach to supporting equity and effectiveness through the promotion of gender-based approaches within national programmes, and through increasing the proportion of women in its own programme staff cadre (Section 7.1).

Accelerating progress in sanitation hygiene promotion. More efforts need to be made to increase the profile of hygiene in both the global and country level programmes. While significant progress has been made, especially at the national level in some countries, in other countries hygiene is still the “little sister” within programmes and it is necessary to apply sufficient and appropriate resources to change this (Sections 3.2 and 8.1).

Sanitation is lagging behind water in progress towards MDG target 10. UNICEF programmes should demonstrate a greater sense of urgency to find effective solutions for taking sanitation programmes to scale. UNICEF WES staff at all levels must continue to work with key partners in this area (notably the Water and Sanitation Program) to adopt new approaches and apply them effectively at a significant scale (Section 3.2). The General Assembly decision to declare 2008 as the International Year of Sanitation offers an excellent opportunity to redouble efforts and accelerate progress in sanitation.

Annex 1: UNICEF WASH Priority Countries

1	Afghanistan
2	Angola
3	Azerbaijan
4	Bangladesh
5	Benin
6	Brazil
7	Burkina Faso
8	Burundi
9	Cambodia
10	Cameroon
11	Central African Rep.
12	Chad
13	China
14	Colombia
15	Cote d'Ivoire
16	D R Congo
17	Egypt
18	Eritrea
19	Ethiopia
20	Ghana
21	Guatemala
22	Guinea
23	Guinea-Bissau
24	Haiti
25	India
26	Indonesia
27	Iraq
28	Kazakhstan
29	Kenya
30	Lao P.D.R.

31	Lesotho
32	Liberia
33	Madagascar
34	Malawi
35	Mali
36	Mauritania
37	Morocco
38	Mozambique
39	Myanmar
40	Nepal
41	Niger
42	Nigeria
43	Pakistan
44	Papua New Guinea
45	Philippines
46	Rwanda
47	Senegal
48	Sierra Leone
49	Somalia
50	Sudan
51	Syrian Arabic Rep.
52	Tajikistan
53	Tanzania
54	Togo
55	Uganda
56	Uzbekistan
57	Viet Nam
58	Yemen
59	Zambia
60	Zimbabwe