

# UNICEF

## Water, Sanitation and Hygiene

### Annual Report 2008



UNICEF Water, Sanitation and Hygiene Annual Report 2008

UNICEF WASH Section  
Programmes  
UNICEF New York

May 2009

## **Executive Summary**

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### **Sector Developments**

In 2008, the focus in the water, sanitation and hygiene (WASH) sector was clearly on sanitation and hygiene. The goal of the International Year of Sanitation (IYS) to raise awareness amongst decision makers and the public was achieved in various ways, both at the global level and within countries around the world. The commemoration of the first annual Global Handwashing Day (GHD) in 2008 helped to ensure that handwashing with soap was part of the dialogue.

It is still too early to judge the long-term impact of IYS on progress in the field, but already there are indications that progress is being made. UNICEF country offices report increased resource allocations for sanitation, improved policy and legislation, new collaborative mechanisms, and a higher priority for sanitation within national planning instruments. This and other progress notwithstanding, the challenges remain daunting and the consequences of failure as serious as ever.

New figures on official development assistance within the sector are a cause for optimism. Over the 2001-2007 period bilateral donations increased by an average annual rate of 19 per cent and multilateral donations by 11 per cent annually. However, the new figures also reveal continuing structural inequities in sector financing patterns: less than a quarter of funds are allocated for basic water and sanitation, and a disproportionate amount of financing is channelled to a relatively small number of countries. New information on corruption in the sector released in 2008 also gives pause.

Coverage figures released by the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) show that while much remains to be done, there has been substantial progress: the number of people without access to water has dropped below a billion for the first time ever, hundreds of millions of people have gained access to improved sanitation facilities, and the number of people practicing open defecation is in decline. There was significant progress in the fight against guinea worm in 2008 and there is new optimism that the disease can be eradicated. On a less positive note, new UNICEF data on WASH in schools shows much more effort is needed to achieve the goal of safe and private water and sanitation facilities for girls and boys in all primary schools around the world.

### **The UNICEF WASH Programme**

The UNICEF WASH programme again expanded in 2008, by 9 per cent in terms of expenditure (to US\$ 311 million), and by 7 per cent in terms of staffing (375 professional staff). For the first time in its history, UNICEF supported WASH activities in over 100 countries (101). However, many countries designated as high priority by UNICEF due to low WASH coverage, poor rates of progress and high child mortality rates continue to be under-funded.

The programme continues to be strongly field-based: 98 per cent of expenditure and 92 per cent of professional staff postings are at the country level. At the same time, the emphasis (and proportion of expenditure) on “upstream” programming is increasing as UNICEF expands its

role in the areas of evidence-based advocacy, policy development, and building human and institutional capacity amongst government and civil society partners.

UNICEF and its partners made considerable progress in the sector in 2008.

UNICEF played a central role in the success of IYS and GHD to raise awareness on sanitation and hygiene, and in the continuing campaign to influence decision makers' programme prioritization and funding decisions. In the sector as a whole, UNICEF continued to help build enabling environments, including the development of improved policy and planning instruments and working with partners to leverage new resources for WASH.

Efforts in this area included the expansion of the Community Approaches to Total Sanitation (CATS) model – especially in Africa – where there are encouraging signs that the approach will accelerate progress.

UNICEF is also playing an important role with its partners in the development of new, more effective collaborative mechanisms in the sector, both at the country level and globally through work on a new Global Framework for Action for WASH that will bring together major sectoral financing and implementation stakeholders.

In support of advocacy and programme design, UNICEF helped to further build and solidify the evidence base for WASH, notably in the area of sanitation and hygiene. These efforts included the publication of new coverage figures for water and sanitation through the JMP and moves to develop a new broader partnership for improved, more comprehensive sector monitoring.

UNICEF is playing a key role in the piloting and promotion of lower cost water supply technologies and methodologies such as low cost drilling and self supply, and in the promotion of household water treatment as a key intervention to reduce diarrhoea rates.

The ability of sector agencies to prepare for and respond to humanitarian emergencies was again enhanced in 2008 by building capacity and developing collaborative frameworks through the UNICEF-led IASC WASH Cluster. In fulfilment of its Core Commitments for Children (CCCs) UNICEF directly responded with WASH interventions in 40 declared emergencies and numerous smaller crises in 2008.

A total of 13 million people benefited from UNICEF direct support for improved sanitation facilities (8.4 million through development programmes and 4.6 million in emergencies) and 24 million for water supply (8.1 million through development programmes and 15.9 million in emergencies). In every case, this represents an increase over 2007 figures, with the most notable increases in the area of sanitation and WASH-in-schools. Many more people, numbering in the tens of millions, were reached through handwashing promotion campaigns and in water quality interventions, including through the distribution of water treatment chemicals in emergencies.

There are many challenges remaining for UNICEF and all other stakeholders working to improve WASH for children and their families, starting with the need to accelerate and scale up programmes explicitly designed to meet the MDG target of halving the proportion of people

without sustainable access to safe drinking water and basic sanitation. In 2009, UNICEF will focus on a specific set of challenges, including the need to build on the gains made through IYS, the further expansion of the CATS model, a scaling up of WASH-in-schools programmes, a review of the UNICEF role in water supply, building in-house capacity and further developing collaborative programming frameworks.

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### **Cover Photo Credits**

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## Abbreviations and Acronyms

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<b>ADB</b>	Asian Development Bank
<b>AED</b>	Academy for Educational Development
<b>AfDB</b>	African Development Bank
<b>AMCOW</b>	African Ministers' Council on Water
<b>CANADEM</b>	Canadian International Civilian Reserve
<b>CATS</b>	Community Approaches to Total Sanitation
<b>CCCs</b>	Core Commitments for Children
<b>CFS</b>	Child-Friendly School
<b>CHERG</b>	Child Health Epidemiology Reference Group
<b>CLTS</b>	Community Led Total Sanitation
<b>CREPA</b>	Centre Régional pour l'Eau Potable et l'Assainissement à faible coût
<b>CRS</b>	Catholic Relief Services
<b>DEWATS</b>	Decentralised Wastewater Treatment System
<b>DFID</b>	Department for International Development (UK)
<b>DGIS</b>	Directorate-General for International Cooperation (Government of the Netherlands)
<b>DHS</b>	Demographic and Health Survey
<b>EAPRO</b>	East Asia and the Pacific Regional Office
<b>EC</b>	European Commission
<b>ECHO</b>	European Commission Humanitarian Aid Office
<b>EOR</b>	Emergency Other Resources
<b>ESARO</b>	Eastern and Southern Africa Regional Office
<b>EU</b>	European Union
<b>GF4A</b>	Global Framework for Action
<b>GHD</b>	Global Handwashing Day
<b>GLAAS</b>	UN-Water Global Annual Assessment of Sanitation and Drinking-Water
<b>GSM</b>	Global System for Mobile communications
<b>HWS</b>	Handwashing with Soap
<b>HWTS</b>	Household Water Treatment and Safe Storage
<b>IASC</b>	Inter-Agency Standing Committee
<b>IDP</b>	Internally Displaced Persons
<b>ILE</b>	International Learning Exchange
<b>IRC</b>	International Water and Sanitation Centre
<b>IYS</b>	International Year of Sanitation
<b>JMP</b>	Joint Monitoring Programme for Water Supply and Sanitation
<b>LSHTM</b>	London School of Hygiene & Tropical Medicine
<b>MDG</b>	Millennium Development Goal
<b>MDG-F</b>	MDG Achievement Fund
<b>MENA</b>	Middle East and North Africa

<b>MICS</b>	Multiple Indicator Cluster Survey
<b>MTSP</b>	Medium-Term Strategic Plan
<b>NatCom</b>	National Committee
<b>NGO</b>	Non-governmental Organization
<b>NRC</b>	Norwegian Refugee Council
<b>ODA</b>	Official Development Assistance
<b>ODF</b>	open defecation free
<b>OECD</b>	Organisation for Economic Co-operation and Development
<b>OFDA</b>	Office of U.S. Foreign Disaster Assistance
<b>ORR</b>	Other Resources Regular
<b>PPP</b>	Public-Private Partnership
<b>PPPHW</b>	Global Public-Private Partnership for Handwashing with Soap
<b>PRSP</b>	Poverty Reduction Strategy Paper
<b>ROSA</b>	Regional Office for South Asia
<b>RR</b>	Regular Resources
<b>RRT</b>	Rapid Response Team
<b>RWSN</b>	Rural Water Supply Network
<b>SACOSAN</b>	South Asian Conference on Sanitation
<b>SIDA</b>	Swedish International Development Agency
<b>SWAP</b>	Sector-Wide Approaches to Programming
<b>TACRO</b>	The Americas and Caribbean Regional Office
<b>UNDAF</b>	United Nations Development Assistance Framework
<b>USAID</b>	United States Agency for International Development
<b>WASH</b>	Water, Sanitation and Hygiene
<b>WCARO</b>	West and Central Africa Regional Office
<b>WEDC</b>	Water, Engineering and Development Centre
<b>WIN</b>	Water Integrity Network
<b>WHO</b>	World Health Organization
<b>WSMP</b>	Water and Sanitation Monitoring Platform
<b>WSP</b>	Water and Sanitation Program

# 1 Sector Analysis

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## 1.1 A Focus on Sanitation and Hygiene

Sanitation and hygiene were the clear focus of the sector in 2008, highlighted on the world stage through the celebration of the first annual Global Handwashing Day (GHD) and through the many other events and initiatives related to the International Year of Sanitation (IYS).

The key goal of IYS (and GHD) was to raise awareness – especially amongst decision makers – of the vital importance to public health of sanitation and of handwashing with soap. This was achieved in various ways, both at the global level and within countries around the world. An unprecedented range of leaders became involved in IYS and GHD campaigns and participated in the high-level global and regional events linked to IYS. The fact that sanitation and hygiene was put firmly on the policy agenda, and that such a range of prominent persons – from local traditional leaders, to popular celebrities, to finance ministers, to heads of state – were talking openly about the threat of human excreta, is a major achievement in and of itself.

More important, of course, is where this effort leads. Putting sanitation and hygiene on the agenda is only the first step. The next step is using the heightened profile of sanitation and hygiene to achieve real political buy-in, to mobilize resources and ultimately to accelerate progress towards achieving the MDG sanitation target and reducing hygiene- and sanitation-related child mortality.

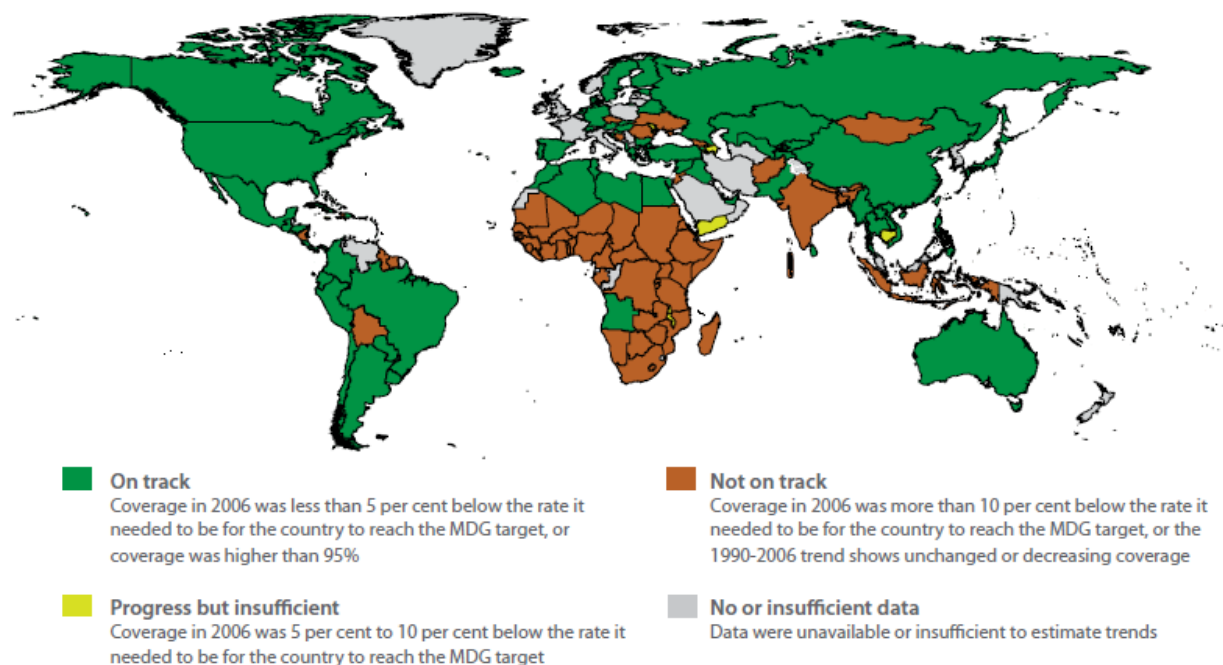
It is still too early to judge the long-term impact of IYS, but already there are some indications that progress is being made.

UNICEF country offices are reporting a number of specific outcomes resulting directly from national IYS and GHD campaigns. Many examples are cited, such as in Nepal, where the national government budget allocation for sanitation was raised by 20 per cent; in Indonesia, where new policies and national regulations were passed; in Bolivia with the signing of a new collaboration agreement for sanitation promotion between the ministries of Water, Education and Health; in China, where a commitment has been made to integrate sanitation into a new rural development policy; in Sierra Leone, with the establishment of a new consortium to ensure a harmonized approach for behavioural change promotion programmes in the country; and in Malawi, where IYS prompted the fast-tracking of the new sanitation policy and its passage in the national legislature.

Governments, UNICEF and other sectoral stakeholders are using 2009 to consolidate gains, working towards ensuring that enthusiasm for and visibility of sanitation and hygiene translate into substantial and sustainable progress on the ground. One way this is being done is through a renewed focus on refining and taking to scale more effective ways to promote sanitation and handwashing with soap. A key example for sanitation is the accelerating expansion of the total sanitation model from its origins in South Asia to other parts of Asia, to the Americas and – especially – to Africa. For hygiene a key trend is the use of more evidence-based approaches for the promotion of handwashing with soap, with more systematic partnering arrangements with the private sector. These signs of progress are discussed in detail later in this report.

Progress notwithstanding, the challenges remain daunting. The WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) report<sup>1</sup> published in 2008 shows that the number of people without an improved sanitation facility – 2.5 billion – is still unacceptably high. The consequences continue to be felt around the developing world: still 1.5 million children die of diarrhoea every year, hundreds of millions of women and girls confront the indignity and danger of open defecation every day, cholera outbreaks kill tens of thousands (6,000 in 2006, nine out of 10 in Africa), and community environments are further degraded. And as new studies in 2008 showed, the economic costs are huge: a four-country study in East Asia by the World Bank calculated GDP losses due to poor sanitation of between 1.4 and 7.2 per cent.<sup>2</sup>

Figure 1: Global progress on meeting the MDG sanitation target<sup>3</sup>



In one of the many sectoral forums that focused on sanitation (and hygiene) in 2008, participants in the 2008 Stockholm World Water Week noted that poor sanitation is a “deplorable, lingering crisis” and that at current progress rates the 2015 MDG sanitation target will be missed by 700 million people. The subsequent call to action from this and other meetings in 2008 highlights the scale of the challenge still ahead.

<sup>1</sup> *Progress on Drinking Water and Sanitation: Special Focus on Sanitation*. Joint Monitoring Programme for Water Supply and Sanitation, 2008. [http://www.wssinfo.org/en/40\\_MDG2008.html](http://www.wssinfo.org/en/40_MDG2008.html)

<sup>2</sup> *Economic Impacts of Sanitation in Southeast Asia: A four-country study conducted in Cambodia, Indonesia, the Philippines and Vietnam*. World Bank Water and Sanitation Programme, 2008. [http://www.wsp.org/UserFiles/file/Sanitation\\_Impact\\_Synthesis\\_2.pdf](http://www.wsp.org/UserFiles/file/Sanitation_Impact_Synthesis_2.pdf)

<sup>3</sup> JMP 2008 report (2006 data set).

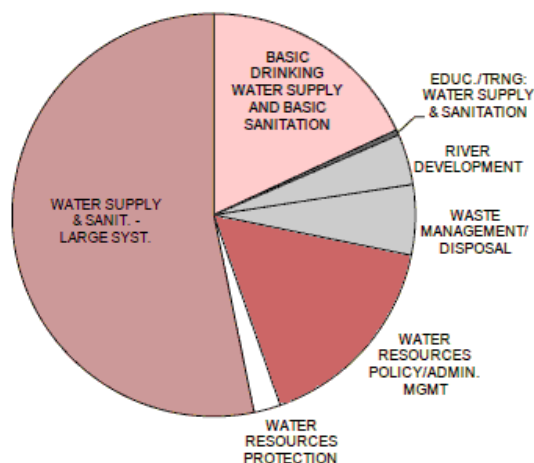
## 1.2 Other Sector Issues

### *Sector Financing*

New figures on Official Development Assistance (ODA) for water supply and sanitation from the Organisation for Economic Co-operation and Development (OECD)<sup>4</sup> showed that financing for the sector is increasing substantially. A total of US\$ 6.2 billion was donated by bilateral and multilateral donors in the 2006/2007 biennium, double the 2002-2003 figure (in adjusted dollars). Over the 2001 - 2007 period bilateral donations increased by an average annual rate of 19 per cent and multilateral donations by 11 per cent. There are also indications that the priority of the sector within the aid community is increasing: the proportion of aid allocated to water and sanitation by OECD countries rose from 5 per cent of all aid in 2002/2003 to 7 per cent in 2006/2007.

However, the new figures also reveal continuing structural inequities in sector financing patterns. More than half of committed funding from the 2006/2007 period was allocated to large infrastructure programmes, while less than a quarter was for programmes classified as “basic drinking water supply and sanitation” (see Figure 2). In addition, middle income countries and countries with medium coverage levels are still receiving far more sectoral aid per capita than are poor countries with low coverage levels. Finally, the figures show that a disproportionate amount of financing is channelled to a relatively small number of countries: 51 per cent of the 2006/2007 commitments were being disbursed to the top ten recipient countries.

Figure 2: Breakdown of ODA by sub-sector, 2006/2007 commitments<sup>5</sup>



Sector financing was on the agenda of the United Nations MDG High-Level Event held in September 2008. It included a call for increased national and international investment in the sector and more effective assistance strategies building on the Paris Declaration on Aid Effectiveness.

The High-Level Event also identified the need for harmonization and coordination of existing mechanisms for sector monitoring and evaluation. This need was partially addressed in 2008 through the new UN-Water Global Annual Assessment of Sanitation and Drinking-Water (GLAAS) mechanism, which is designed to complement JMP coverage data with additional information on institutional capacity, policy frameworks, human resources capacity, and the flows of sector funds (see Section 8 for more information on sector monitoring).

<sup>4</sup> CRS Aid activities in support of water supply and sanitation, 2001-2006. OECD/WWC, 2008 (with updated figures for 2007).

<sup>5</sup> OECD, 2008.

## Corruption

The problem of corruption in the water sector was highlighted in 2008 with the publication of *Global Corruption Report 2008: Corruption in the Water Sector* by Transparency International.<sup>6</sup>

The report cites a growing body of evidence to illustrate the significance of corruption in the sector, estimating it inflates the overall cost for achieving the MDG target for water in developing countries by 30 per cent – a total of more than US \$48 billion – and blaming a lack of transparency and poor accountability between consumers, service providers and regulators as the underlying cause.

The publication of the report and the gathering of other evidence has prompted more action within the sector to combat corruption, including, at the global level, the expansion of the Water Integrity Network (WIN) a grouping of international organizations, civil society organizations, government bodies and private companies. There is also increasing anti-corruption activity of various types at country level, and within stakeholder organizations.

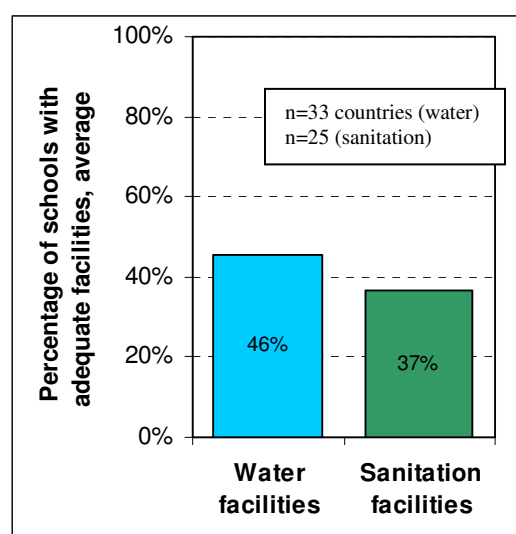
## WASH in Schools

The majority of schools in developing countries still do not have adequate water, sanitation and washing facilities and many schools have none at all. This threatens the health of children and contributes to low school attendance, performance and completion rates, especially for girls.

While WASH in schools is not an MDG target, many sectoral stakeholders recognize the importance of the issue, and have prioritized programmes to address it. UNICEF has specifically committed itself to the goal of water and sanitation facilities in all primary schools by 2015.

New data collected by UNICEF in countries in which it works shows that there is still a long way to go to achieve this goal. In the 60 countries UNICEF has identified as priority for WASH interventions (see list in Annex) fewer than half of primary schools have adequate water facilities and just 37 per cent have adequate sanitation facilities (see Figure 3). In reality, the situation is

Figure 3: Percentage of primary schools with adequate water and sanitation facilities in UNICEF priority countries, 2008<sup>7</sup>



<sup>6</sup> *Global Corruption Report 2008: Corruption in the Water Sector*, Transparency International. [http://www.transparency.org/publications/gcr/download\\_gcr](http://www.transparency.org/publications/gcr/download_gcr)

<sup>7</sup> Data are from UNICEF Country Offices through the MTSP baseline and progress monitoring system: 33 priority countries responded for the water indicator and 25 for the sanitation indicator.

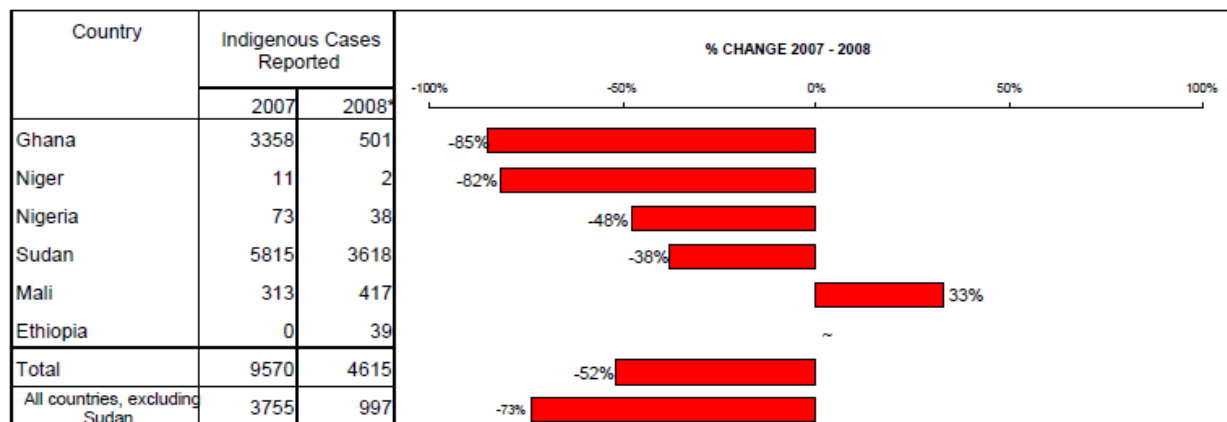
likely even worse: these figures are primarily based on government standards, which are often outdated. For example, standards in many countries do not take into account the need for handwashing facilities near toilets, for private toilet facilities for girls, or for the need for lower student-to-toilet ratios for girls.<sup>8</sup>

Substantial progress is being made by UNICEF and its partners in addressing the WASH-in-schools challenge (see Section 3.4), but it is also clear from these new figures that much more needs to be done to step up progress.

### Guinea Worm Eradication

The number of cases of dracunculiasis (guinea worm) fell to 4,615 cases in 2008, a 52 per cent reduction from 2007 and the lowest number ever. This includes reductions in four of the remaining six endemic countries (Sudan, Ghana, Mali, Ethiopia, Niger and Nigeria – see Figure 4). This global caseload reduction is indicative of the significant ongoing efforts of the Carter Center, UNICEF and other organizations working jointly in the eradication effort.

Figure 4: Guinea Worm Case Reductions 2007 to 2008<sup>9</sup>



\* Provisional: excludes 4 cases exported from one country to another

Due to unprecedented access to programme areas in Southern Sudan where the most cases remain, and a continuing solid funding base for the overall eradication effort, there is renewed hope that the targets of stopping all transmission in 2009 and achieving zero indigenous cases in 2010 will be met. If guinea worm is eradicated, it will be only the second disease ever eradicated (after smallpox). However, much remains to be done to achieve this, and 2009 will be a watershed year in determining success.

<sup>8</sup> The UNICEF data are actually disaggregated by sex for sanitation facilities but the data shows that coverage levels for boys and girls is virtually identical. This result is much more likely to be due to inadequate non-disaggregated standards than it is an indication that girls' needs are being met (the graph purposely does not include the disaggregated data to avoid giving the impression that girls' and boys' coverage levels are the same).

<sup>9</sup> From "Guinea Worm Wrap-Up #188," March 2009, The Carter Center and the Centers for Disease Control and Prevention (provisional figures).

## 2 UNICEF WASH Programme Overview

### 2.1 Programme Scope and Structure

The UNICEF WASH programme again expanded in 2008. For the first time in its history, UNICEF carried out WASH activities in over 100 countries (101), almost two thirds of the 155 countries in which UNICEF supports programmes for children.

Expenditure also expanded in 2008, for the first time exceeding a total of over US\$ 300 million (US\$ 311 million) an increase of 9 per cent over 2007. The number of professional WASH staff members increased by a similar proportion (7 per cent) to a total of 375 in December 2008.

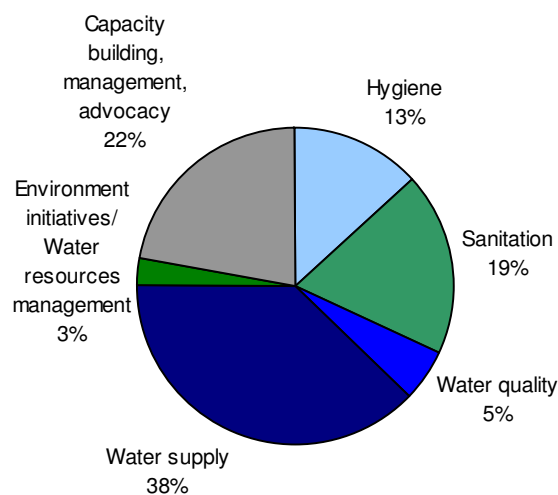
The UNICEF WASH programme continues to be strongly field-based: 98 per cent of expenditure and 92 per cent of professional staff postings are at the country level.

Most programme expenditure (90 per cent) continues to be focused on the 60 priority countries. However, engagement in WASH in other countries is also important – often representing a catalytic activity within an integrated programme for children, or a critical emergency intervention in fulfilment of UNICEF’s core commitments for children (CCCs).

About 42 per cent of expenditure was for emergency programmes in 2008, representing a continuing fall in the proportion of UNICEF WASH funds spent on humanitarian response and early recovery since the years following the 2004 Asian Tsunami. However, it is unlikely that the proportion of funds spent on emergency programmes will continue to fall to the levels of the 1990s (on average 25 per cent) given UNICEF’s more prominent role in emergency WASH and the likelihood that emergencies will continue to increase in number and severity due in part to climate change.

In accordance with the 2006 UNICEF WASH Strategy Paper,<sup>10</sup> UNICEF is working towards a balanced programme generally, and an increase in focus on hygiene and sanitation specifically. It is also working towards increasing its role in the area of upstream programming. Expenditure patterns are beginning to reflect these changes. Expenditure classified as "capacity building, management, advocacy" increased from 16 per cent of the total expenditure in 2007 to 22 per cent in 2008 (see Figure 5), indicating an increase in activities related to advocacy, sector development and building enabling

Figure 5: Programme balance by expenditure, 2008



<sup>10</sup> United Nations Economic and Social Council (2006). *UNICEF water, sanitation and hygiene strategies for 2006-2015*, United Nations Economic and Social Council: New York (E/ICEF/2006/6).

environments. Expenditure on hygiene and sanitation also increased in 2008 to a total of just under a third of the overall programme, and to 41 per cent of the direct expenditure on primarily field-based programmes (from 37 per cent in 2007).<sup>11</sup>

## 2.2 Programme Highlights

### *Key Results*

UNICEF helped to push forward the WASH agenda in several key ways in 2008. As described below – and in detail later in the report – important successes were registered in the areas of sanitation and hygiene promotion, developing enabling programming environments, building new partnership frameworks, and moving ahead with innovative approaches. UNICEF direct interventions helped millions of poor and marginalized people gain access to safe water and sanitation facilities in countries around the world.

UNICEF played a central role in using IYS and GHD to successfully **raise awareness on sanitation and hygiene** amongst decision makers and the public, at global, regional, national and sub-national levels. This heightened profile was used in various ways to influence programme prioritization and funding decisions within governments and financing institutions (see Sections 1.1 and 3.2).

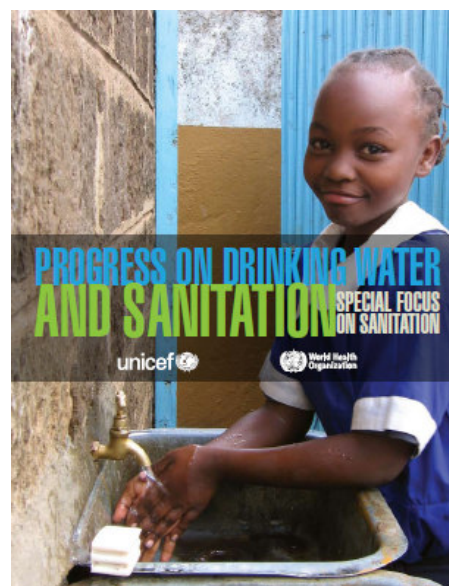
In recognition of the need to create the conditions to achieve the MDG targets, UNICEF continued to **build enabling environments** within the sector, including the development of improved policy and planning instruments and working with partners to leverage new resources for WASH. As part of this effort, UNICEF accelerated efforts to **enhance capacity** both of its own staff cadre as well as the institutional capacity of key partners at national level.

UNICEF is playing a central role in the development of a new **Global Framework for Action (GF4A)** for WASH that will bring together major sectoral financing and implementation stakeholders to collaboratively support high-quality national plans to scale up progress towards MDG targets and beyond (see Section 9).

Work also continued to improve the effectiveness of existing partnership frameworks with governments, sister UN agencies and other partners.

In support of advocacy and programme design, UNICEF helped to further build and solidify the **evidence base for WASH**, notably in the area of sanitation and hygiene (see Section 2.2). These efforts included the publication of new

*Figure 6: 2008 WHO/UNICEF JMP Report*



<sup>11</sup> Expenditure on activities other than capacity building, management and advocacy.

coverage figures for WASH through the JMP and moves to develop a new broader partnership for improved, more comprehensive **sector monitoring** (see Section 8).

The ability of sector agencies to prepare for and respond to **humanitarian emergencies** was again enhanced in 2008 by building capacity and developing collaboration frameworks through the UNICEF-led IASC WASH Cluster. In fulfilment of its Core Commitments for Children (CCCs) UNICEF directly responded with WASH interventions in 40 declared emergencies and numerous smaller emergencies in 2008 (see Section 4).

UNICEF played a catalytic role in the expansion of the **Community Approaches to Total Sanitation** (CATS) model, especially in Africa where there are encouraging, albeit early, signs that the approach is helping to accelerate progress (see Section 3.2).

A total of 13 million people benefited from UNICEF **direct support for improved sanitation facilities**, 8.4 million through development programmes and 4.6 million in emergencies. Many more people, numbering in the tens of millions, were reached through a range of handwashing with soap promotional activities (see Sections 3.2 and 4).

UNICEF is playing a key role in the piloting and promotion of **lower cost water supply technologies and methodologies** such as low cost drilling and self supply, and in the promotion of household water treatment as a key intervention to reduce diarrhoea rates. In countries around the world a total of 24 million people gained access to new or rehabilitated **drinking water sources** through UNICEF-supported programming, 8.1 million through regular development programmes and 15.9 million in emergencies. Many more were reached in water quality interventions, especially through the distribution of water treatment chemicals in emergencies (see Sections 3.3 and 4).

Finally, UNICEF continued to be very active in the area of **WASH-in-schools**, both through contributions towards building the evidence base and building capacity, and by providing direct support to school programmes, resulting in the construction of water and sanitation facilities in 20,489 schools serving 4.2 million students, and through support to hygiene education (see Section 3.4).

### ***Building the Evidence Base for WASH***

UNICEF influence on national policy and planning processes stems from the position of trust enjoyed with government sectoral partners, which is in turn due to three key factors: UNICEF's continuing work at the field level, its long-standing support to governments' national WASH programmes, and increasingly, an emphasis on building the evidence base for WASH to inform priority setting and programme design.

All major UNICEF-supported WASH programmes at country level support surveys, studies, pilots and research to help build the evidence base in countries. Examples are many: reviews of emergency WASH cluster performance in Bangladesh and the Dominican Republic, a major study of the sustainability of India's national total sanitation programme, a study on the

accessibility of WASH facilities for disabled children in Viet Nam, and a study on the efficacy of environmental sanitation interventions for cholera prevention in Zambia.

A major WASH-in-schools study was completed in 2008<sup>12</sup> in partnership with the IRC International Water and Sanitation Centre. The study looked at both impact and sustainability of long-running WASH-in-schools projects in Africa (Kenya) and Asia (India) and found that the impacts of well-designed and funded WASH-in-schools programmes can be substantial, long-lasting and extend beyond the school and into the homes of the pupils. The key specific findings were that the interventions did indeed have a positive impact on handwashing and sanitation knowledge and practices amongst students and – to a certain extent – their families; as well as having a positive impact on absenteeism rates for girls, especially girls who are beginning to menstruate. For years such results have been “accepted wisdom” within the sector, but up until now evidence has been largely anecdotal.

Various studies related to water supply and water quality were also completed or initiated in 2008. These include a major four-country arsenic mitigation programme evaluation in East Asia, a multi-country study on viability of manual-drilling and an African handpump market survey (see Section 3.4).

Another important exercise in building the evidence base for WASH in 2008 was ongoing work with the London School of Hygiene and Tropical Medicine (LSHTM) to gather and synthesize evidence related to the impact on health of several WASH interventions, including excreta disposal, the disposal of child faeces specifically, household water treatment and handwashing promotion. Results of this research are being prepared for presentation to the Child Health Epidemiology Reference Group (CHERG).<sup>13</sup>

In 2008 one study related to this programme was published,<sup>14</sup> and two more were in press (on household water treatment and distance to drinking water source). Several others will be published in 2009 and 2010.

*Table 1: Selected UNICEF-supported WASH global and regional publications, 2008*

<i>Progress on Drinking Water and Sanitation – Special Focus on Sanitation, WHO/UNICEF JMP</i>
Seven regional water and sanitation coverage “Snapshot” publications (see list in Section 8), WHO/UNICEF and UNICEF
<i>The Last Taboo – Opening the Door on the Global Sanitation Crisis, Black and Fawcett</i>
<i>Tackling a global Crisis: International Year of Sanitation 2008, UN Water Sanitation Task Force</i>
<i>Predicting the Global Extent of Arsenic Pollution of Groundwater and its Potential Impact on Human Health, Ravenscroft</i>
<i>WASH for Children: Investing in Water, Sanitation and Hygiene for Children in East Asia and the Pacific, UNICEF EAPRO</i>
<i>Water, Sanitation and Hygiene (WASH section of UNICEF website – revised in 2008), UNICEF</i>

<sup>12</sup> *Impact and sustainability of WASH in schools study* (to be published in 2009)

<sup>13</sup> CHERG, a grouping of eminent scientists hosted by WHO and UNICEF, was established in 2001 to provide external technical guidance and global leadership in the development and improvement of epidemiological estimates for children under five years of age. It is influential in determining the type of resource allocations to child health, survival and development programmes worldwide.

<sup>14</sup> Fung IC-H, Cairncross S. 2008. “Ascariasis and handwashing”. *Transactions of the Royal Society of Tropical Medicine and Hygiene*. DOI: 10.1016/j.trstmh.2008.08.003

In 2008 several key publications related to evidence building were released by UNICEF global and regional offices and affiliated bodies (see Table 1). Not included in the table are the many publications produced and published by UNICEF country offices.

### **Capacity Building**

Capacity building of UNICEF WASH staff and partners was identified as a priority in 2007 to improve the effectiveness and impact of programmes. In 2008 a number of training exercises were initiated.

One priority area for capacity building is hygiene promotion. A special set of skills is needed to design and manage hygiene promotion programme, one that is not necessarily available amongst the existing staff within UNICEF and its partners in many countries. Consequently, UNICEF developed a new training module – “More than Soap and Water: Taking Handwashing with Soap to Scale” – that provides an overview of the public health benefits of handwashing with soap and outlines new approaches to bringing about behaviour change. Some 100 staff and partners were trained using the new module in one face-to-face training session and three WebEx distance learning sessions.<sup>15</sup>

Work started on two other WebEx training modules in 2008, one for household water treatment and safe storage (HWTS) and one for mainstreaming environment in programming.

UNICEF also carried out a variety of training programmes related to the expansion of the CATS model to new countries in collaboration with global experts and regional training centres, including a workshop for UNICEF and government participants from ten Francophone governments in the West and Central Africa region (WCAR). UNICEF also sponsored study visits for UNICEF and partners as part of the CATS capacity building effort, including one from Ghana to Ethiopia and Bangladesh, and another from Pakistan to Nepal.

Coordination and implementation of emergency WASH interventions is another area identified as a priority for capacity building within UNICEF. In 2008 the WASH cluster carried out several capacity building initiatives, and a new “WASH in Emergencies” module was developed for use in 2009 and beyond (see Section 4.2 for more information on emergency capacity building).

*Table 2: Selected UNICEF-supported WASH technical and capacity building publications, 2008*

<i>UNICEF Handbook on Water Quality</i> , UNICEF
<i>Arsenic Primer</i> , UNICEF
<i>Introduction to Hygiene Promotion: Tools and Approaches</i> , WASH Cluster Hygiene Promotion Project
<i>Global Handwashing Day: Planner’s Guide</i> , Public Private Partnership on Handwashing with Soap
<i>More than Soap and Water: Taking Handwashing with Soap to Scale</i> (participant notes for WebEx training programme), UNICEF
<i>Literature Review on Sanitation and Hygiene Interventions</i> , UNICEF (published twice annually)
<i>Notes and News on WASH in Schools: International Year of Sanitation</i> , IRC and UNICEF
<i>Preventing and Fighting Corruption in Water Supply, Sanitation and Hygiene Promotion: What Can UNICEF Do?</i> , UNICEF guidance note to WASH staff

<sup>15</sup> WebEx is an online system for meeting and training, combining real-time desktop sharing with phone conferencing.

At country level capacity building is a key part of all major UNICEF WASH programmes. Country offices sponsor a wide range of training opportunities for partners in many facets of WASH programmes. These involve in-country workshops, courses, study tours and other mechanisms.

As part of its overall programme of support UNICEF also actively engages in broader capacity building programmes to develop key institutions at national and sub-national level. Greater attention is being given to the need to develop more strategic capacity building plans of action that target critical areas of weakness within national WASH programmes. At the same time, it is increasingly recognized that sectoral capacity building should be planned, funded and managed in partnership with other support agencies to reduce duplication of effort and increase effectiveness: new initiatives in Ethiopia and Nigeria are following this path.

As part of national capacity building efforts, UNICEF encourages the local sourcing of essential WASH supplies and services to reduce dependencies on imports, and to improve effectiveness and sustainability. For example, in certain cases where quality can be assured, UNICEF procures equipment such as plastic pipes and handpumps locally to support the manufacturing base (UNICEF is undertaking a handpump market study in Africa to support this – see Section 3.3). Another example is the use of local drilling contractors as an alternative to using expensive and complex drilling equipment. These type of initiatives are also undertaken at the sub-national level, notably through no-subsidy sanitation promotion programmes in which communities are encouraged and supported in the use of locally available materials.

UNICEF continues to use its extensive network of offices and its large staff cadre as a resource to promote learning within the organization, through a variety of mechanisms. The most prominent example of this is the India International Learning Exchange (ILE) for WASH, a collaborative effort of the India Country Office, UNICEF headquarters and the Government of India. The ILE, which offers comprehensive package study tours of various aspects of the WASH sector (such as water quality, total sanitation and school WASH), has hosted 169 participants from more than 30 countries since its launch in 2006.

### 2.3 Beneficiaries

As noted in last year’s report, it is not possible to assess the progress or impact of the UNICEF global WASH programme of support simply by counting beneficiaries. UNICEF WASH country programmes go far beyond constructing water and sanitation facilities for people. Even

<b>Assumptions and Notes for Beneficiary Figures</b>
<ul style="list-style-type: none"> <li>• Service standards (e.g., number of people per water point) vary significantly from place to place.</li> <li>• The level of UNICEF contribution to systems also varies significantly from country to country, from project to project and even from year to year.</li> <li>• School water points often serve the host community as well as the school.</li> <li>• There is no distinction made between rehabilitated and newly constructed water supply facilities in these tables. Beneficiaries from rehabilitated systems are counted because they represent people who – at least for some period of time – have not had access to improved water supplies, but now do.</li> <li>• Some emergency water and sanitation systems are temporary.</li> <li>• The distinction between emergency and “development” WASH facilities is inexact. Although listed separately in the tables, in reality there is some overlap between the two.</li> </ul>

the emergency component of the programme puts significant emphasis on interventions such as capacity building and preparedness planning, in addition to building and rehabilitating WASH facilities. The number of people indirectly benefiting from UNICEF's overall programme of support is much larger than the number of direct beneficiaries that appear in the tables below. Examples of indirect beneficiaries include people who ultimately benefit from national policy development and capacity building support, people reached by handwashing promotion efforts, by technology development efforts, by the distribution of water treatment chemicals, and through water quality surveillance programmes. Sanitation beneficiaries are generally under-represented in the tables, in part because new demand-led approaches to sanitation rely on households building their own latrines in response to education and mobilization, without direct interventions from UNICEF.

It is also important to note that there is no way of determining exactly the number of direct beneficiaries in a programme as varied and complex as the UNICEF WASH programme. Thus the figures below are estimates, and are based on a number of assumptions and criteria, summarized in the box, above.

Finally, it should also be noted that this is only the second year in which UNICEF has counted direct beneficiaries globally. Because of this, there was a greater response from country offices for this report, and some of the increases in beneficiaries from 2007 to 2008 are due to this factor.

These caveats notwithstanding, there is much merit in estimating the total number children and their families that have benefited directly from the programme. It represents another way to measure the scale of the programme (in addition to expenditure levels, number of countries where the programme is active, etc.). It helps to assess to what extent UNICEF is active in priority vs. non-priority countries, and it is another way of judging the relative sizes of the emergency and the development components of the programme.

As detailed in Tables 3 and 4, a total of 13 million people benefited from UNICEF direct support for improved sanitation facilities (8.4 million through development programmes and 4.6 million in emergencies) and 24 million for water supply (8.1 million through development programmes and 15.9 million in emergencies). In every case, this represents an increase over 2007 figures, with the most notable increases in the area of sanitation and WASH-in-schools.

*Table 3: Estimated direct beneficiaries from UNICEF-supported community WASH programmes, 2008*

(millions of people)	<b>Water</b>		<b>Sanitation</b>	
	Emergency Programmes	Development Programmes	Emergency Programmes	Development Programmes
Estimated total beneficiaries	15.9	8.1	4.6	8.4
Estimated under-five beneficiaries	2.5	1.3	0.8	1.2

*Table 4: Estimated direct beneficiaries from UNICEF-supported WASH-in-Schools programmes, 2008*

Number of schools with facilities installed	Estimated children benefiting
20,489	4.24 million

### 3 Progress in Priority Countries

#### 3.1 Building Enabling Environments

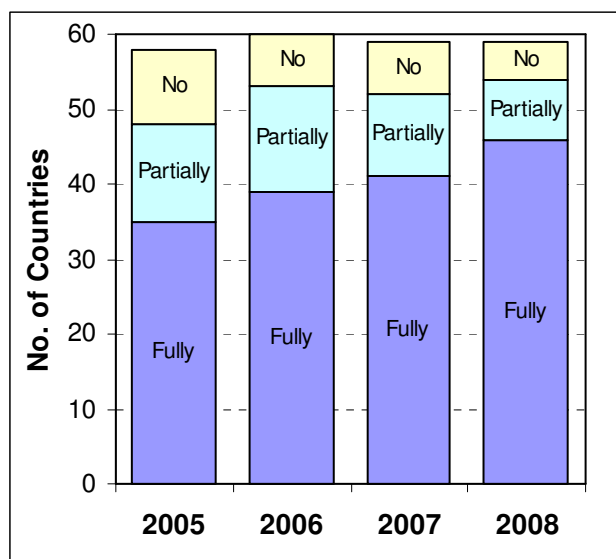
A steadily growing budget notwithstanding, UNICEF remains a small-scale actor in the sector in terms of the number of water and sanitation facilities it directly finances and it thus can never make an appreciable impact on coverage at global or even country levels. Consequently the focus of the UNICEF WASH programme is ever increasingly on synergistic interventions with partners, leveraging the greater resources of governments and large sector financiers such as the development banks, and on upstream programming in general.

Upstream programming takes many forms, one of which is engagement with government partners and other key stakeholders to facilitate the reform of national WASH policy and planning instruments. The type of reforms promoted varies from country to country, but normally includes the promotion of budget decentralisation and transparency; the prioritization of interventions for poor, marginalized and underserved communities; the encouragement of gender-positive approaches; a greater focus on sanitation and hygiene promotion; improved cost-effectiveness; and measures to mitigate the effects of corruption in the sector.

In 2008 new national WASH policies were approved and adopted in Ghana, Kenya, Liberia, Madagascar, Malawi, Puntland (Somalia) and in Sierra Leone, all of which were in part due to UNICEF advocacy and support. UNICEF engagement in the sector is also helping to increase the number of priority countries that include explicit programmes and targets for achieving the MDG target on sustainable access to safe drinking water and basic sanitation in national development plans (from 35 countries in 2005 to 46 in 2008 – see Figure 7), including in Liberia, for example, where UNICEF helped draft the water and sanitation chapter of the new national Poverty Reduction Strategy.

A key UNICEF strategy related to resource leveraging is continuing involvement in SWAp and similar processes in programme countries. This includes the promotion of SWAp in countries where they do not yet exist, such as in Sri Lanka, Nepal and in Mozambique where – through UNICEF support – agreement is being reached on a harmonised SWAp framework and common funding arrangement for the rural water and sanitation sub-sector. Elsewhere, UNICEF continues to be fully engaged in existing SWAp mechanisms, including in Kenya, Tanzania and Uganda.

Figure 7: Priority countries with national plans incorporating explicit programmes and targets for water and sanitation MDGs<sup>16</sup>



<sup>16</sup> Data are from UNICEF Country Offices through the MTSP baseline and progress monitoring system.

UNICEF also took some initial steps towards addressing the issue of corruption in the sector in 2009. Many WASH staff members joined the Water Integrity Network and UNICEF stepped up engagement with Transparency International. UNICEF also issued a guidance note to all country offices engaged in WASH on preventing and fighting corruption within the sector at national level.

Other examples of UNICEF engagement in upstream programming to help build enabling environments for WASH programming are many, some are discussed in the sections below on hygiene, sanitation, water and WASH in schools.

### 3.2 Hygiene and Sanitation Promotion

#### *Hygiene*

People everywhere in the world wash their hands, but relatively few wash their hands with soap at key times (after defecation and handling children's faeces, before eating and food preparation and before caring for children). If handwashing with soap increased significantly, diarrhoea rates would fall substantially and the incidence of other diseases would also be reduced, including pneumonia, trachoma, scabies and influenza. Consequently, the promotion of handwashing with soap at key times is a cornerstone of UNICEF WASH programmes at sub-national, national and global levels.

Handwashing promotion was given a substantial boost in 2008 with the launch of the first-ever Global Handwashing Day (GHD), an initiative promoted by UNICEF through the Public-Private Partnership for Handwashing with Soap, which also includes USAID, the US Centers for Disease Control and Prevention, the Water and Sanitation Program (WSP), the Academy for Educational Development (AED), Unilever and Procter & Gamble.

GHD was celebrated on October 15<sup>th</sup> in a total of 82 countries, where some 200 million school children washed their hands with soap, including 80 million in India who washed their hands before their mid-day meal. The event was widely publicised through national media outlets as well as other means such as SMS messaging, school events, billboard campaigns and government outreach networks. Celebrities were engaged as spokespersons, including the Australian children's music group, the Wiggles, the Angolan singer, Pedrito do Bie, and one of India's best known cricketers, Sachin Tendulkar.

In other populous countries large turnouts were also achieved, including in Bangladesh where over 15 million students from 75,000 primary and secondary schools participated, in Indonesia where 40,000 students from 600 schools participated and Ethiopia where 500,000 school children participated in events held across the country.

Figure 8: Global Handwashing Day logo



The Global Handwashing Day is helping to stimulate longer-term initiatives such as in Latin America where UNICEF, WSP, the Swiss development agency and PAHO/WHO launched a regional programme for developing national handwashing campaigns. Possibly the most far reaching spin-off effects from the GHD experience are new partnership possibilities opening up with the private sector for handwashing promotion in new countries due to the high degree of participation of soap manufactures and other companies in the event.

At country level UNICEF used the GHD strategically to reinforce existing initiatives, such as in Malawi where events were organized through the existing SOPO national handwashing promotion campaign,<sup>17</sup> and in other countries where the GHD activities fed into existing WASH-in-Schools hygiene education programmes.

In an ongoing effort to mainstream hygiene into UNICEF's broader child survival and development agenda, an increasing number of country offices are prioritizing handwashing with soap messages into integrated campaigns, such as in northern Sudan where five key messages (hand washing, personal hygiene, importance of routine immunization, mosquito nets and exclusive breastfeeding) were broadcast in 2008, targeting 31 million people and in Pakistan where almost 2 million children were reached with an integrated package of interventions including hygiene promotion.

In response to the growing evidence base, handwashing with soap is also increasingly prioritized within UNICEF-supported health and nutrition programmes. In Nepal, for example, new local evidence<sup>18</sup> showing the importance of handwashing by both attendants and mothers on infant and maternal survival rates has prompted a revision of the national neo-natal care package.

Changing behaviour patterns around hygiene practices is a time-consuming process, and it is often difficult to measure progress directly. Most studies infer progress by using proxy indicators like soap availability or knowledge of handwashing, such as a 2008 study of the child health campaign in Pakistan that indicated a significant increase in the percentage of mothers who could identify key times for handwashing. This year there is also more direct evidence from one of UNICEF's larger programmes that hygiene practices are improving. A mapping exercise in Bangladesh covering over 130,000 programme communities showed significant increases in handwashing after defecation (from 17 per cent to 30 per cent) and in caregiver handwashing after handling child faeces (from 22 per cent to 34 per cent). This same study, however, showed how much work still remains: only one per cent of the cohort washed their hands correctly using soap or ash.

It is clear that UNICEF and its partners at global and national levels will need to continue to stress the promotion of handwashing with soap within WASH programmes, and within the broader UNICEF agenda for children. Consequently UNICEF is taking steps to build capacity in this area both within in its own staff cadre and amongst partners (see Section 2.2 for more information on capacity building).

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<sup>17</sup> SOPO is an animated character that acts as Malawi's handwashing with soap "ambassador".

<sup>18</sup> *Maternal and birth attendant hand washing and neonatal mortality in southern Nepal*. Rhee V *et al.* Arch Pediatr Adolesc Med. 2008 Jul;162(7):603-8.

The extensive field-level research through the “Project Champion” partnership with Unilever was concluded in 2008. The research yielded valuable knowledge on strategies and methodologies for promote handwashing amongst poor communities. The research showed, for example, that older girls are key change agents if they are targeted specifically and reached at critical points in their lives, and that a global promotional programme design is valid if it is executed in different ways across different communities. These and other findings are now being used to inform promotional programmes generally and to develop a handwashing with soap promotional programme with the Unilever Lifebuoy soap brand.

### ***Sanitation***

Like with hygiene, the importance of sanitation for children and their families is beyond dispute. Improved sanitation will help prevent the 1.5 million child deaths caused by diarrhoea each year, and it will reduce mortality rates from malnutrition and opportunistic infections such as pneumonia. Sanitation also improves the quality of life and dignity of women, protects the environment, and generates economic benefits for communities and nations.

Sanitation is a key part of all UNICEF WASH programmes in priority countries. Interventions cover a range of activities including advocacy for the prioritization of sanitation within global and national development agendas, the development of progressive national policy instruments, and field-level interventions designed to help people improve the sanitation situation in their households and communities.

The International Year of Sanitation was an unprecedented opportunity for raising the profile of sanitation amongst decision makers and UNICEF took full advantage of it. UNICEF coordinated the UN Water Task Force on Sanitation, which spearheaded promotional activities at the global level, provided support at regional and country level, and developed the core set of advocacy material (including the “Sanitation is Dignity” exhibition, a comprehensive evidence-based advocacy package and the flagship IYS promotional publication<sup>19</sup>).

In its own capacity, UNICEF used its extensive global presence to push forward the sanitation agenda through IYS-related activities. At regional level UNICEF helped to organize two key regional sanitation conferences linked to IYS in Africa (AfricaSan+5) and South Asia (SACOSAN III). Through the JMP, UNICEF also released special regional data compilation reports for five regions (see Section 8 for details). At country level, UNICEF staff used IYS as a tool in myriad ways to promote the prioritization of appropriate sanitation programmes within national development agendas, including – notably – the development of new plans, agreement on new programming strategies, and new commitments from governments for increased resource outlays. In several countries – including Angola, Djibouti, Madagascar, Namibia and Sudan – IYS was the catalyst for strengthening the national sanitation institutional and policy environment.

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<sup>19</sup> *Tackling a Global Crisis: International Year of Sanitation 2008*. [www.sanitationyear2008.org](http://www.sanitationyear2008.org)

The IYS initiative was designed to increase awareness, achieve political buy-in and accelerate progress towards the sanitation MDG. Preliminary feedback indicates that these expectations have been exceeded. The momentum that was created at a global level is translating into activities and activism at regional and country levels that should continue well beyond 2008. The IYS messages have taken root around the world and the products of this past year's work serve as structure and facilitation for much of the dialogue that has now begun.

For UNICEF the second key result of 2008 was a broad agreement within UNICEF on the programming framework for community approaches to Total Sanitation (CATS) within the organization, and its further expansion to new country programmes. Due to widely varying country conditions and programming contexts the exact design of total sanitation programmes in each country cannot and should not be dictated from headquarters. However, in a July meeting, consensus was reached on key principles and strategies for UNICEF-supported programmes based on CATS with a focus on building demand for sanitation, community leadership, integration of hygiene promotion and encouraging entire communities to abandon the practice of open defecation (see non-negotiable principles box).

Capacity building for staff and partners on the new approach was carried out in cooperation with global experts and regional research and training partners. In the WCAR region, for example, UNICEF worked with CREPA (Centre Régional pour l'Eau Potable et l'Assainissement à faible coût) and WaterAid to introduce CATS through regional workshops, fundraising, evidence building and documentation. At country level, UNICEF and partners organized a

#### **UNICEF's Non-negotiable Principles for the CATS Approach (summary)**

1. The aim is to attain total sanitation, i.e. to achieve open defecation free communities by use of safe, affordable and user-friendly solutions/technologies. It implies that the objective of any sanitation intervention is the sustainable use of sanitation facilities (as opposed to the construction of infrastructure). Safe disposal of human excreta includes the management of children's faeces.
2. The definition of 'Communities' (and particularly where community leadership and participation are emphasized) includes a role for schools, health centres, traditional leadership structures, women and girls.
3. Communities are in charge of the change process and use their capacity to attain their envisioned objective. They play a central role in planning with special consideration to the needs of vulnerable groups, women and girls and in respect of the community calendar.
4. Subsidies (in the form of funds, hardware, etc) are not to be given straight to households. Community rewards and incentives are acceptable only where they encourage collective action, total sanitation and are used to attain sustainable use of sanitation facilities (as opposed to the construction of infrastructure).
5. Households will not have externally imposed standards for choice of sanitation infrastructure. Technologies developed by local artisans from locally available materials are encouraged. External agencies provide guidance as opposed to regulation. Where viable, involvement/instigation of a local market with its local entrepreneurs is encouraged.
6. Involves the training of community facilitators and local artisans.
7. Governments' role and cross fertilisation of experience are essential for scaling up.
8. Sanitation as an entry point for greater social change is implicit as a guiding principle.
9. CATS must include hygiene (the definition, scope and sequencing of hygiene components is contextual).

range of CATS capacity building exercises.

Twenty UNICEF country programmes are now actively engaged in CATS; additional countries have carried out training and planning exercises, and plan to introduce pilots in 2009. The approach is increasingly being adopted by governments and its partners in Africa (see Table 5) including – encouragingly – in Eritrea and Ethiopia where sanitation coverage is very low.

Community sanitation approaches have led to unprecedented progress in some Asian countries. In Bangladesh, for example, government estimates indicate that the practice of open defecation has dropped by a third, from over 40 per cent in 2003 to 10 per cent in 2008.<sup>21</sup> There are now preliminary but concrete indications that the approach has similar potential in Africa. UNICEF-supported programmes based on CATS are registering unparalleled uptake rates in pilot areas, such as in Mozambique where the introduction of a CATS methodology in an existing programme area resulted in a many-fold increase in the rate of latrine construction by households. In other countries significant numbers of communities have already achieved certified open defecation free (ODF) status, including over 400 villages in Zambia in 2008.

*Table 5: African countries with UNICEF-supported pilot CATS initiatives in 2008<sup>20</sup>*

Angola	Madagascar
Burundi	Malawi
Eritrea	Mozambique
Ethiopia	Nigeria
Ghana	Sierra Leone
Kenya	Zambia

UNICEF and most stakeholders in the sector believe that community-based sanitation approaches are the way forward for achieving the MDG sanitation target and the resulting health and societal benefits. Thus the spread of the approach is indeed a positive sign. However, CATS involves a great deal of effort, time and skill to implement correctly and to assure sustainability, thus UNICEF will increasingly focus on assuring the quality of the programming efforts. This will be done through careful study of existing programmes (such as the ongoing review of the related community led total sanitation programme in Cambodia) and continuing engagement with key partners.

Direct support for the construction of latrines and toilets is no longer the focus of UNICEF country programmes. Nevertheless, many are built in countries around the world as a result of UNICEF interventions, including in emergencies and through pilot activities. In 2008, an estimated 13 million people (including 2 million children under five) gained access to an improved sanitation facility, about two-thirds through regular programmes and one-third through humanitarian interventions in emergencies.

### **3.3 Water Supply and Water Quality**

#### ***Water Supply***

While the number of people with access to improved water supply is steadily increasing, much remains to be done. There are still hundreds of millions of people around the world who have

<sup>20</sup> Other countries have initiated planning and capacity building activities, but have not yet launched pilots or programmes.

<sup>21</sup> Bangladesh Country Paper for SACOSAN III

never had adequate access, who have only limited access, or who no longer have access to safe drinking water due to breakdowns, emergencies, or the effects of climate change.

UNICEF helps to develop enabling environments – including progressive policies, improved budgeting mechanisms and strengthened institutions – and leverage new funding for safe, affordable and sustainable water delivery systems. This upstream work is highly effective because it is grounded in our ongoing practical work with communities, and our long partnerships with government and non-government stakeholders in countries around the world.

At the same time, UNICEF continues to directly support the construction and rehabilitation of water sources, with a continuing focus on rural communities that are marginalized in some way, are isolated geographically, have serious water quality problems, are in guinea worm endemic areas, or are affected by emergencies. In 2008 a total of 24 million people gained access to improved water sources, 8.1 million through regular programming and 15.9 million in emergencies. Of these beneficiaries, an estimated 3.8 million are children under five years old.

Included amongst these emergency programme beneficiaries are 2 million people in Iraq, 1.3 million in Sudan and just under a million in Zimbabwe in response to the cholera emergency. Other major WASH humanitarian response programmes in 2008 included DR Congo, Iraq and Tanzania.

The high cost of boreholes - especially in sub-Saharan Africa – is a key constraint to achieving water targets, and UNICEF redoubled efforts to address this in 2008. Globally, work with the Rural Water Supply Network (RWSN) continued on the development of a Code of Practice for Cost Effective Boreholes, and many country offices took steps to reduce local costs through the introduction of cost efficiency measures in drilling programmes and the promotion of low-cost alternatives.

In a development related to cost effective boreholes, UNICEF embarked on an initiative to promote manual drilling of boreholes in 2008 (manually-drilled boreholes are up to one-tenth the cost of machine-drilled boreholes). In partnership with specialist agencies (including EnterpriseWorks/VITA and Practica), the initiative is systematically assessing the hydrogeological potential of manual-drilling in 20 target sub-Saharan African countries, producing case studies and other advocacy material to promote manual-drilling as a viable alternative both globally and nationally, as well as developing maps, training manuals and other materials.

The sustainability of water supply systems continues to be a key area of focus for UNICEF, especially in Africa where breakdown rates for handpumps and other technologies can be very high. In an initiative described in previous annual reports, sustainability has been highlighted within an ongoing Government of Netherlands-supported WASH programme in Eastern and Southern Africa. In that programme, sustainability-related criteria (including a series of process-related indicators as well as the physical facility breakdown rates) are monitored by independent bodies and used to determine the overall success of projects in countries.<sup>22</sup> In 2008 two countries – Malawi and Mozambique – conducted these sustainability checks, with the results being used to adjust and improve implementation. Also related to sustainability is the UNICEF-supported African Handpump Market Mapping Study, initiated in 2008, which is studying procurement patterns and manufacturing capacity on the continent. The results will be used to develop new support strategies to improve handpump and spare parts supply chains.

**Sustainability Criteria (selection of criteria included in third-party sustainability checks in East Africa water and sanitation programmes)**

- Existence and functioning of the community water and sanitation committee
- Participation of women in the committee
- Existence and capacity of local mechanics for water point maintenance
- Existence of a system for managing community contributions for operation and maintenance
- Percentage of families contributing to O&M fund
- Community capacity for routine maintenance
- Availability and affordability of spare parts locally
- Status of handpump and installation (including whether or not it is actually functioning)
- Availability of repair kit locally
- Breakdown(s) frequency and period

UNICEF is also becoming more active in the area of “self supply”: a model in which community members are encouraged to use locally-available skills, materials and technologies to construct or upgrade their own water sources, either in individual households or within groups of households. In some countries – notably in Africa – such programmes have been shown to be more cost effective and sustainable than government-led programmes in some situations. UNICEF initiated self supply rural water activities in Ethiopia, Mali and Zambia in 2008.

Finally in the area of water supply, UNICEF was a major contributor to guinea worm eradication efforts in all six remaining endemic countries in 2008 (Ethiopia, Ghana, Mali, Niger, Nigeria and Sudan), and continued to provide support ongoing surveillance and cross-border containment efforts in other countries (see Section 1 for additional information on the guinea worm eradication programme). In the endemic countries the focus of UNICEF support is on safe water source construction. In southern Sudan, where the most cases continue to be registered, the UNICEF-supported water point construction and rehabilitation programme is the key reason that case numbers are dropping so significantly: in 2008, 84 new water systems were constructed in affected villages, serving a total of 46,000 people.

<sup>22</sup> The sustainability check includes criteria for sanitation as well as for water.

## *Water Quality*

UNICEF promotes water safety through interventions including the protection of the water sources, building national capacity for water safety planning and monitoring, developing new water quality monitoring methodologies, and support to a variety of interventions in communities.

A key area of support continued to be the promotion of household water treatment and safe storage (HWTS) as a high-impact, low-cost intervention for reducing diarrhoea, cholera and other water quality related diseases. In 2008, UNICEF took steps to improve the quality and consistency of interventions in this area by developing and disseminating a new set of HWTS guidelines for country offices (which will be incorporated into a WebEx training package in 2009 – see Section 2.2).

More country offices are active in the promotion of HWTS than at any time in the past. Interventions include upstream work on building the evidence base, advocacy, defining strategies, developing national plans of action as well as the promotion of particular technologies such as locally-produced ceramic and bio-sand filters (e.g. in Cambodia, DPR Korea, Myanmar, Paraguay and elsewhere); low-cost home chlorination (Angola, Somalia, Tanzania) and no-cost solar disinfection (Kenya, Madagascar and Bhutan).

In partnership with American Express, UNICEF continued to support and monitor pilot HWTS interventions in four African countries and develop a documentation package to more widely promote cost effective techniques. At the same time, UNICEF helped to expand and inform the group of partners and private sector actors active in the area HWTS through work with WHO within the International Network to Promote HWTS, and by hosting two meetings at the global level: a consultation with global experts and an information exchange session with manufacturers of household water treatment products.

On the specific problem of arsenic-contaminated drinking water sources, UNICEF continued to support government mitigation programmes in Asia and Africa in 2008. Activities supported include source substitution, water treatment and the critical area of testing and mapping. In Nepal, for example, testing in the 20 affected districts is now complete, and in Bangladesh UNICEF has instituted a quarterly testing programme of a set of water sources to monitor treatment efficacy.

A comprehensive evaluation of the arsenic mitigation programmes in Cambodia, Lao PDR, Myanmar and Viet Nam was conducted in 2008. It yielded a valuable set of recommendations to improve mitigation programming that will be applied in these and other countries. The Arsenic Primer and the global occurrence study discussed in last year's report were published and distributed in 2008. UNICEF has more experience in arsenic mitigation support than any other international agency; information tools like these that synthesize this experience help to improve detection and mitigation programmes in countries around the world.

Finally, UNICEF continued to build capacity and institutional environment for the promotion of water safety through a variety of training programmes and through the development of improved

national water quality standards and of water safety plans (including in Myanmar, Nigeria, Pakistan and Viet Nam in 2008).

### 3.4 WASH in Schools

UNICEF continues to prioritize WASH-in-Schools programming to help improve education enrolment, retention and performance— especially amongst girls – as part of the Child Friendly School (CFS) initiative and in line with MDG Goal 2 for universal primary education and Goal 3 for gender equality. WASH-in-Schools programming also contributes to improved health outcomes for children and the health of communities as a whole.

Eighty-eight country offices supported WASH-in-schools activities in 2008, up slightly from previous years (see Figure 9). A total of US\$ 28.6 million was spent on WASH-in-Schools in 2008, representing 9 per cent of UNICEF’s total WASH expenditure.

Expenditure within UNICEF-supported WASH-in-schools programmes is increasingly weighted towards sanitation and hygiene. In 2008 74 per cent of expenditure was on sanitation and hygiene and only 26 per cent on water supply (compared to 56 per cent and 54 per cent on sanitation and hygiene in 2007 and 2006 respectively).

WASH-in-Schools activities vary widely from country to country, but in most cases involve an integrated programme that directly supports the construction of safe and private washing and sanitation facilities, improved drinking water, and hygiene education in target schools. In 2008, an estimated 4.2 million children benefited from these direct interventions, in a total of 20,489 schools. Most of these beneficiaries are in the regions of South Asia (notably in India with 1.6 million beneficiaries), West and Central Africa (e.g. Nigeria, 122,000), and Eastern and Southern Africa (e.g. Mozambique, 102,000).

Like other components of the UNICEF WASH programme, direct beneficiaries represent only the tip of the iceberg. Increasingly, UNICEF country offices focus on efforts to scale up WASH-in-Schools through mainstreaming in government programmes and institutions with support from civil society and the private sector, and through leveraging resources from government budgets and other finance streams.

There are signs that this type of upstream engagement with governments – both by UNICEF and its partners – is resulting in an increased recognition by government of the importance of WASH in schools: the number of priority countries that have developed national plans to provide water, sanitation and hygiene education to all primary schools is slowly but steadily increasing (see

Figure 9: Countries with UNICEF WASH-in-schools activities

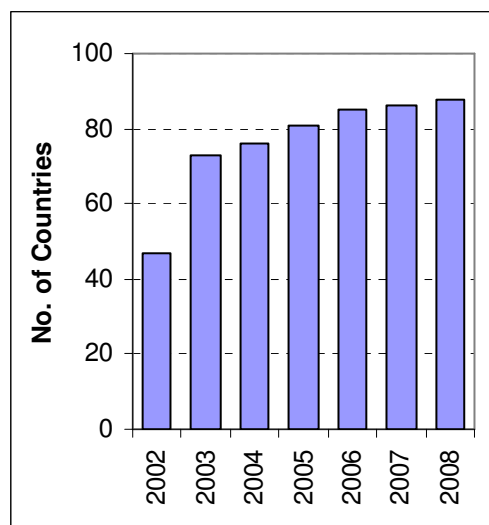


Figure 10).<sup>23</sup> One example is Angola, where the UNICEF-supported WASH-in-Schools programme has led to the inclusion of school WASH facilities in national plans for the first time. Also in 2008, safe water supply and gender-segregated toilet facility designs were incorporated into national school standards in China, the Gambia, Pakistan and Thailand. In other countries, including DPR Korea and Tanzania – UNICEF supported ongoing development of new child-friendly school toilet designs.

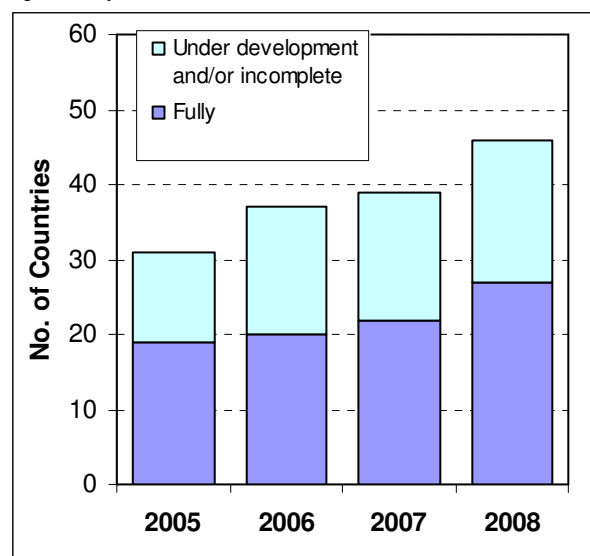
There has also been success in ongoing efforts to institutionalize hygiene education within national education curricula – including in China, DR Congo, Nicaragua and Sudan in 2008 – and on institutionalizing hygiene education within teacher training programmes such as in Peshawar, Pakistan where a government School Sanitation and Hygiene Education Centre established in May 2007 with UNICEF support has already trained over 500 education managers, supervisors, administrators and school teachers.

Despite these and other signs of progress, there continue to be serious shortfalls. As discussed in Section 1.2, fewer than half of primary schools in UNICEF priority countries have adequate water and sanitation facilities. In some African countries the situation can be much worse, such as in southern Sudan, where only one in ten schools has adequate water and sanitation facilities. And even where facilities do exist, they are often inadequate. Elsewhere, even when national coverage averages are reasonable, disparities are marked – such as in parts of Albania where a recent study showed that fewer than 10 per cent of schools have adequate toilets.

In many cases the number of schools without adequate facilities is unknown, and this lack of data seriously constrains advocacy and planning efforts. Only 57 per cent of countries in which UNICEF is active have readily-available data on water supplies in schools, and only 49 per cent have data on sanitation facilities.<sup>24</sup> UNICEF is working with government to improve data availability, such as in Malawi and Burundi where national school WASH facility surveys were conducted in 2008.

In addition to support to data gathering, UNICEF also continues to help build a broader WASH-in-schools knowledge base at country level through the sponsorship of studies and targeted research. Examples in 2008 include KAP studies of hand-washing in school settings (India and Tajikistan) and programme baseline studies and evaluations (such as in Bangladesh, Egypt, Mali and Yemen).

Figure 10: Priority countries with national plans to provide water, sanitation and hygiene education in all primary schools



<sup>23</sup> The trend amongst all countries (priority and non-priority combined) is more pronounced: increasing by 50% to 75 countries in 2008 from 50 countries in 2005

<sup>24</sup> Data from UNICEF country offices (available for the first time in 2008).

Key amongst these studies is the WASH-in-schools impact and sustainability study, discussed in Section 2.2.

## **4 Emergency Coordination and Response**

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Although dropping from previous years, the proportion of UNICEF WASH expenditure on emergencies continues to be substantial at 42 per cent, reflecting the increasing focus on WASH as a cornerstone to emergency preparedness, response and recovery. As lead agency through the IASC Cluster approach – and directly through its country offices – UNICEF continued to play a significant role both in 2008 humanitarian relief efforts, and in enhancing sectoral capacity for preparedness and response.

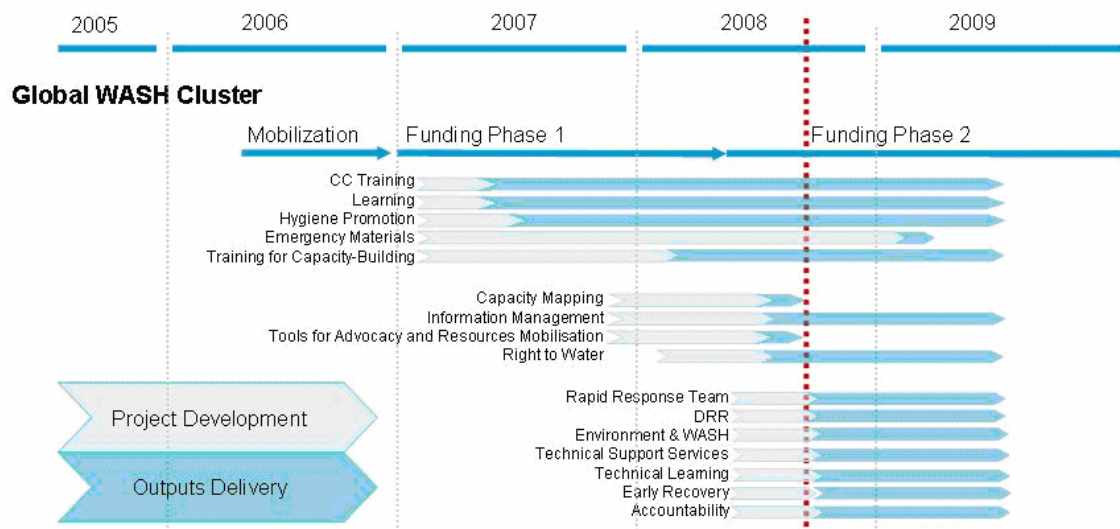
### **4.1 Emergency Coordination, Preparedness and Response**

By the end of 2008, 26 countries were formally using the cluster approach with the WASH Cluster activated in every case. In most of these countries UNICEF assumed cluster leadership responsibilities, in some cases jointly with other organizations. All together in both cluster and non-cluster countries, UNICEF had a leadership role in WASH emergency coordination mechanisms in 37 countries in 2008.

The WASH cluster approach continued to gain momentum throughout the year. Significantly, a strategic shift was undertaken to begin moving the focus from global to national levels. As tool kits and guidance notes have been completed at the global level, they have been increasingly shifted through the UNICEF regional offices to country level. WASH Cluster emergency risk mapping, preparedness and capacity mapping at sub-national levels were undertaken in two countries in 2008 with plans underway to scale this up in 2009.

Considerable progress was made in rolling out the WASH Cluster concept in 2008 through the continued implementation of a comprehensive set of 16 distinct cluster projects. As shown in Figure 11, these projects encompass a range areas critical for improved emergency WASH preparedness and response including human resource development, coordination mechanisms, information management and learning, contingency planning, emergency supply stockpiling, hygiene promotion, fund-raising and advocacy. UNICEF's overall coordination of this effort (and leadership or participation in each of the individual projects) is contributing in a major way to a substantial and sustainable improvement in the sector's preparations for and responses to humanitarian emergencies.

Figure 11: WASH Cluster activity (projected into 2009)<sup>25</sup>



In fulfillment of the CCCs, UNICEF responded to emergencies with WASH interventions in all regions in 2008. This includes WASH interventions in coordination with partners in the cluster countries, in the 40 countries with formally declared emergencies in 2008, and in additional countries with smaller interventions. Almost 16 million people (including about 2.5 million children under five) benefited from interventions that provided new, rehabilitated or temporary water supplies and 4.6 million (800,000 children under five) from the construction of sanitation facilities.<sup>26</sup> These include major emergency operations such as in Afghanistan (where 2 million were provided with safe water), north Sudan (1 million people with water), DR Congo (1 million reached with water and sanitation) and Pakistan (300,000 with sanitation); as well as smaller but critical interventions in response to rapid onset emergencies such as in Guatemala, Georgia and the Philippines.

The bulk of response efforts and resources are directed at the construction or rehabilitation of physical water and sanitation infrastructure, including in camps and communities. Water trucking also continues to be a critical short-term intervention – such as in flood-affected areas of Mozambique, for parts of Zimbabwe during the cholera crisis and in eastern DR Congo where in November UNICEF was trucking 600,000 litres per day. Equally important in emergencies is ensuring the safety of water supplies through the distribution of water purification chemicals both for use by government authorities and by families themselves – including in Myanmar where water purification tablets were distributed to a quarter of a million people affected by cyclone Nargis, and in Somalia where UNICEF enables the chlorination of water systems relied on by 90,000 people every day.

<sup>25</sup> Adapted from *Implementation of the WASH Cluster Approach, Good Practice and Lessons Learned*, WASH Cluster Learning Project 2008

<sup>26</sup> WASH beneficiaries reported in the Executive Director's Annual Report to the UNICEF Board are lower than figures used in this report because they cover countries in formally declared emergencies only.

Hygiene education is a critical intervention for the prevention of disease in emergencies, and UNICEF and its partners increasingly stress this aspect of the emergency WASH intervention package: millions of emergency affected people were reached in 2008 through the work of hygiene promoters and the mass media. This work is especially important in the crowded conditions in refugee and IDP camps. In rapid onset emergencies, families are often without basic hygiene supplies and equipment like soap and buckets. UNICEF and its partners respond through the mass distribution of hygiene and water kits, such as in Georgia where kits were distributed to almost 30,000 war affected families, and in Mozambique to 57,000 flood-affected people.

## **4.2 Emergency WASH Capacity Building**

The WASH Cluster continued to lead efforts to build capacity within the sector – and within UNICEF – for improved preparedness and response.

A key part of this effort is the development of a pool of trained and vetted WASH professionals to lead coordination and response. To this end a global roster of WASH Cluster coordinators has been set up through a multi-step process involving preliminary screening, training (through a series of eight different training events) and a vetting procedure. By the end of 2008, 22 people passed through this process and qualified as cluster coordinators – the roster is expected to have 50 people by mid 2009. Coordinators have been categorized into four groups: national coordinators for large fast-onset emergencies, for small fast-onset emergencies, for long-term emergencies, and for coordination at the sub-national level.

Another development was the formation of a multi-agency Rapid Response Team (RRT), on a one-year pilot basis. The RRT provides dedicated capacity to support the in-country WASH Cluster as a whole for the initial 4-8 weeks of an emergency response. It is made up of three experienced WASH professionals – housed within three partner NGOs – within a reliable system for rapid deployment during the initial phases of an emergency.

The RRT was formalized in late October 2008 and saw immediate deployment as the first NGO-based team to reach Zimbabwe in support of the WASH Cluster. The positive feedback to date on deployments and added value of the RRT give cause to believe that this mechanism should be extended and possibly expanded.

The standby partnership arrangement is another tool for improving UNICEF capacity for emergency preparedness and response. Standby partners bring specialised capacity to UNICEF programmes, help to reduce response times, and allow UNICEF staff to continue to work on regular programmes. In 2008, 24 WASH professionals from standby partners were in the field supporting UNICEF programmes (19 recruited in 2008, and 5 recruited in 2007 but still in the field in 2008). Professionals were provided by seven different organizations and posted in 13 countries.

Most standby partners are NGOs or government-affiliated bodies – including the Norwegian Refugee Council (NRC), Red R and CANADEM – however, the role of the private sector is growing. In 2008, UNICEF signed a standby agreement with the Veolia Foundation (supported by the global water services company and its employees), which provides surge capacity in the area of pumping and other water-related services. Veolia professionals have already been deployed to several countries, including in DR Congo to reduce the risk of cholera outbreaks in urban areas, and in DPR Korea to help repair and flood-proof town pumping stations.

Other capacity building activities in 2008 included the development of the emergency WASH Information Management tool set (which will become operational in 2009), the drafting of a WASH Cluster Coordinator Handbook (also to be finalised in 2009) and a variety of courses including the “Human Right to Water and Sanitation” course conducted through the Middle East and North Africa (MENA) Regional Office in late 2008.

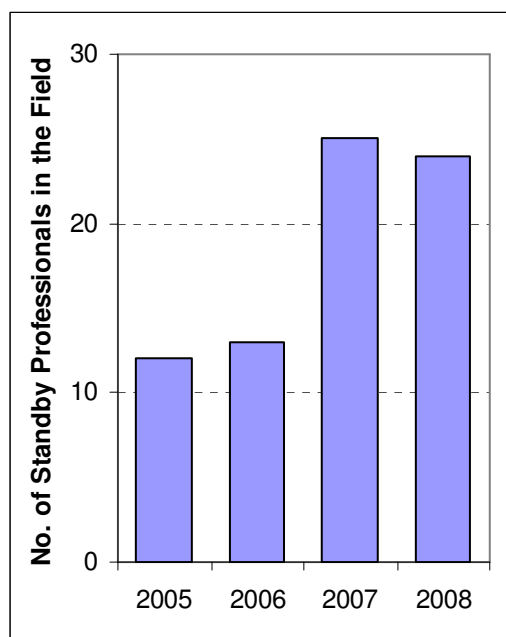
Work was carried out on the development of the “WASH in Emergencies” training course for UNICEF WASH staff. The course is designed to help UNICEF WASH staff to better integrate disaster risk reduction into regular programmes of support and generally strengthen linkages between development and humanitarian activities. It is expected that between 60 and 90 existing WASH staff will be trained through this course in 2009, and all staff will be reached by the end of 2011.

Learning from the WASH Cluster rollout experience continued to be a priority in 2008, through the “Learning in the WASH Cluster and Sector” project. Three country WASH Cluster reviews were completed (Uganda, Bangladesh and the Dominican Republic), and the Myanmar review was initiated. A systematic analysis of the global WASH Cluster approach was also initiated in 2008, producing a draft set of good practices and lessons learned that will be finalised in 2009.

## 5 Progress in Other Countries

In keeping with the UNICEF WASH strategy of focusing resources in the 60 priority countries, only 10 per cent of expenditure in 2008 was in non-priority countries. Nevertheless, UNICEF continues to support a range of strategic interventions in these countries through a small cadre of WASH staff members or focal points, with the support of regional offices and headquarters.

Figure 12: Emergency placements in the field under UNICEF standby arrangements with partners



A key area of intervention in non-priority countries are WASH activities within comprehensive UNICEF multi-sectoral initiatives such as area-based programmes targeting marginalized populations or policy development and reform efforts. Such programmes are most common in the Americas, notably in the Andes region and amongst indigenous communities. This small but strategic support is paying off. In Paraguay, for example, a modest UNICEF initiative has succeeded in leveraging significant new funding from a sub-regional fund for 50 new water systems in marginalized areas.

Leveraging resources for WASH is an important theme in non-priority countries where resources from UNICEF and other “standard” WASH organizations are limited. In addition to the Paraguay example, UNICEF has also helped to leverage new funds for WASH in Equatorial Guinea (from ExxonMobil), Gambia (from the GSM telecommunications company) and in Mongolia, where a new PPP for handwashing with soap was launched in Ulaanbaatar (with Mon-Chemi, a sanitary products company).

UNICEF also supports sanitation and hygiene promotion programmes in non-priority countries, either within broad child health and welfare communication campaigns or in WASH-specific campaigns. In 2008 much of this activity centered around the International Year of Sanitation and Global Handwashing Day, with UNICEF offices from all regions using these events as opportunities to highlight these as important issues for children. In Nicaragua, for example, UNICEF in partnership with the World Bank launched the national “Sanitation is a priority for Nicaragua” campaign, which featured extensive involvement of the national media and child rights CSOs. Similar campaigns were carried out in other non-priority countries, including in Timor Leste, Gambia, Suriname and in Bhutan, where the multi-faceted national IYS campaign also managed to directly reach all of the country’s primary schools.

UNICEF also capitalised on the growing interest in the total sanitation model in non-priority countries through advocacy with national partners, capacity building and strategic support for pilot activities in the field. The most promising result so far is in Bolivia, where a UNICEF-supported community-led total sanitation pilot project in 53 communities has already led to 10 open defecation free communities and the construction of over 800 household latrines without any subsidy.

Water quality continues to be an area in which UNICEF is active in countries around the world, including in countries with only limited UNICEF-supported WASH programming. In Honduras, for example, UNICEF helped to develop a new national protocol for water quality surveillance and control, provided testing equipment, and helped to establish seven new chlorine depots. Water quality surveillance systems also received UNICEF support in the Gambia, Honduras and Sri Lanka.

In line with organizational priorities, UNICEF is also promoting household water treatment, including in Mongolia where a new initiative was under development in 2008 and in Paraguay where UNICEF has teamed up with indigenous women’s groups in a home water management and purification initiative.

Finally, in its role as lead agency for the WASH Cluster – and as “provider of last resort” – UNICEF supported emergency WASH interventions in a number of non-priority countries in 2008 including in Djibouti, Ecuador, Georgia, Honduras, Palestine, Peru, South Africa and Sri Lanka.

## **6 Environmental Programming**

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The UNICEF WASH programme addresses environmental issues in a variety of ways.

At the global level, work continues on the development of an environment and water strategy to guide country offices in their response to the effects of climate change, water scarcity and degradation of the water environment on children and their families.<sup>27</sup> As part of this process, UNICEF conducted a comprehensive literature review of the effects of climate change on water resources and child health. Conceptual work was also initiated on the development of a training programme to mainstream environment for UNICEF field officers, expected to begin in 2009, and guidance on environmental programming issues was provided to country offices.

At country level, UNICEF offices worked on several fronts, including in the areas of climate change adaptation and mitigation, water conservation, solid waste management and ecological sanitation.

In seven countries, UNICEF works with UNDP and other UN agencies on joint climate change adaptation programmes funded by the Government of Spain through the MDG Achievement Fund (MDG-F). These joint projects, which were developed and signed in mid to late 2008, vary in content and scope from country-to-country. In China, for example, the projects involve monitoring the effects of climate change on groundwater aquifers in high-risk regions; in Guatemala water supply and sanitation adaptation models are under development based on surveys of existing knowledge and practice; and in Colombia existing sub-national partnership frameworks will be tapped to build capacity of vulnerable communities to adapt to climate change in an environmentally sustainable fashion.

Elsewhere, UNICEF focuses efforts on raising awareness of the impact of climate change on children and on environmental education initiatives. In Brazil, UNICEF launched the “Agenda for Children in the Amazon” initiative in 2008, which focuses both on raising awareness of the impact of climate change in fragile environments as well as developing the capacity of schools to support and promote children as agents of change. In support of global awareness raising efforts, UNICEF has also started monitoring the extent to which environmental education and climate change adaptation is included in national school curricula as a tool for programme design and resource allocation.

UNICEF country offices also explored and promoted alternative water supply options in 2008, both to respond to existing problems and to prepare for predicted increases in water stress. In Lao PDR, for example, UNICEF is helping to introduce low-cost rainwater harvesting structures

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<sup>27</sup> Due to a delay in filling the new Water and Environment professional post (it was filled only in October 2008), the strategy will be completed in 2009.

to communities based on successful experiences elsewhere in the sub-region; in Bolivia rainwater harvesting is being piloted in oil-contaminated areas; and in Nigeria where 340 systems were constructed with UNICEF support in 2008.

Several country programmes worked with partners in the area of solid waste management in 2008, including Argentina, India, Mozambique and Iraq, where UNICEF helped to develop a new solid waste master plan for Basra in collaboration with UN-HABITAT.

Finally, UNICEF continued to explore the re-use of excreta through ecological sanitation and similar approaches, both to protect the freshwater environment and to provide fertiliser for agriculture and gardening, often in partnership with the growing number of organizations with expertise in this area. In India UNICEF worked with the Stockholm Environment Institute and other partners in a large scale ecological pilot programme covering eight states in 2008, while in DPR Korea, UNICEF and China's Centre for Sustainable Environmental Sanitation helped to build capacity to scale up the successful pilot experience with Decentralised Wastewater Treatment System (DEWATS), which re-use nutrients from municipal waste streams as well as providing new sources of heat and fuel.

## **7 Gender and WASH**

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UNICEF seeks to ensure that the burden and benefits of improving the water supply, sanitation and hygiene situation are shared equally by women and men, with equal influence over related decision-making. This is an ongoing process, and involves the use of multiple strategies at different levels and stages in the programming process.

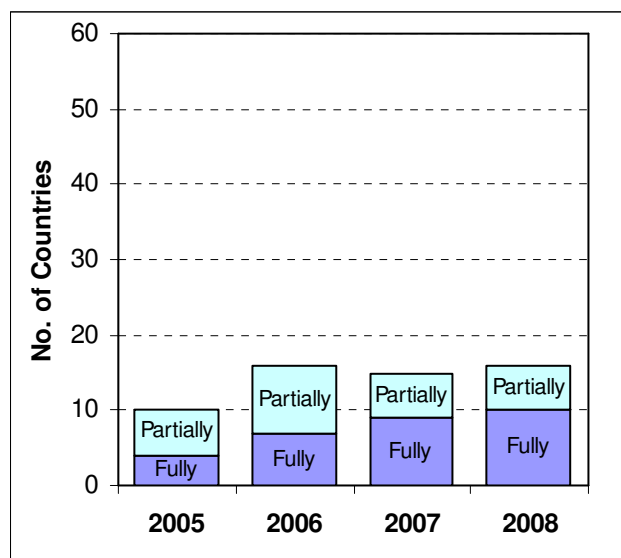
One key strategy employed by UNICEF country programmes is the promotion and development of mechanisms to ensure that women are directly involved in the planning and management of water supply and sanitation programmes. All country programmes encourage women's participation in community WASH committees and as a result gender parity has been achieved in many places, even in areas where this is difficult due to cultural practices and norms (such as in northern Sudan). However, ensuring that women are fully active in decision making processes is a more difficult and time consuming process. An increasingly clear lesson from this is that policy reform is only part of the solution: an increasing number of countries have explicit gender parity quotas for management committees within national policies and plans, but participation of women remains generally weak. What is more critical is buy-in by sector stakeholders and the consistent implementation of existing policy.

Country programmes also work to ensure that UNICEF-sponsored training programmes are equitable. In a sector that continues to be male-dominated, this a challenge. In Iraq, for example, sustained UNICEF advocacy and engagement with government partners over several years raised the level of women participation in training programmes to 34 per cent in 2007 (significantly above the percentage of women professionals in the sector), but this fell back to 26 per cent in 2008 mainly because of travel difficulties for women due to the security situation.

A persistent problem is the paucity of data on gender issues within the sector. In response, UNICEF routinely carries out sectoral gender assessments and audits of overall programmes of cooperation of specific aspects thereof. Examples at country level include annual gender audits of the UNICEF WASH programme in Malawi, assessments as part of the programme planning process (Eritrea, Fiji, and elsewhere) and gender audits of hygiene promotion material in Nigeria. At the global level UNICEF has started a process of increasing gender-disaggregated data related to WASH facilities in schools in 2008.

UNICEF also advocates for sector-wide gender analyses of national programmes, but this continues to be a slow process (see Figure 13). However, there are some signs of success. In southern Sudan, UNICEF's central support role in the sector helped to ensure that a sectoral gender analysis was successfully carried out. In Uganda, the inclusion of gender as one of the agreed 10 "golden indicators" for the sector (specifically: the percentage of women holding key position in users committees) has resulted in a higher profile for gender within the routine monitoring system (44 per cent of districts now provide data on this indicator). And in Mozambique, gender-related indicators have been included as a criteria for determining the sustainability of systems within a third-party monitoring mechanism.

Figure 13: Gender analyses undertaken in priority countries in the current programme cycle for the water and sanitation sector



Taking into account the special WASH-related needs of women and girls is a central part of the UNICEF country programme planning and implementation process. Security and privacy issues related to the location and design of water and sanitation facilities is one area where special attention is required, and all UNICEF programmes now stress this within supported programmes and advocacy initiatives.

Activities related to menstrual hygiene is increasingly a feature in UNICEF country programmes. Examples in 2008 include the promotion of sanitary napkin production (India), the distribution of hygiene kits to girls (Uganda), menstrual hygiene management training for girls' clubs in schools (Nepal) and research into the effects of menstruation on school performance (Somaliland). And in an important development in South Asia, the importance of menstrual management for girls was highlighted in the SACOSAN declaration.

Table 6: Gender balance of UNICEF professional WASH officers<sup>28</sup>

	2008	2007	2006
Male	302	274	230
Female	73	76	59
% Female	19%	22%	20%

UNICEF continues to strive to improve the gender

<sup>28</sup> These figures are not static. For the purposes of this table, December staff listings for each year were used.

balance of its own staff cadre by maintaining a roster of women candidates and ensuring that qualified women are included in short lists. However, due to the fact that the WASH sector is still heavily dominated by males – especially in developing countries – this effort was not entirely successful in 2008 (see Table 6). The fact that many of the WASH posts in UNICEF are in emergency non-family duty stations is also a factor: it tends to be more difficult to recruit women for such posts than men.

UNICEF is also in the process of making a series of structural adjustments in response to the 2008 Evaluation of Gender Policy Implementation in UNICEF. These include changes to gender mainstreaming policies and strategies, new gender-related accountability measures and capacity building mechanisms, more systematic gender analysis and design elements in country programmes, the accelerated promotion of women professionals within recruitment and succession planning systems, and the inclusion of gender-related skill-sets in job descriptions.

## **8 Sector Monitoring**

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There were important developments in sector monitoring in 2008. Two key reports were published: the eighth WHO/UNICEF JMP report on global water and sanitation coverage estimates, and the first pilot UN-Water Global Annual Assessment of Sanitation and Drinking-Water (GLAAS) report<sup>29</sup>, which seeks to complement the JMP data with additional information on institutional capacity, policy frameworks, human resources capacity, and the flows of sector funds. But perhaps the most important development is a new informal agreement amongst key sector stakeholders to support a common monitoring framework that includes both the JMP and GLAAS mechanisms, and – in Africa – the WSP/AMCOW (African Ministers' Council on Water) Country Sector Overview process, which uses the best available, locally accepted country data to provide a comprehensive picture of MDG progress and challenges in selected countries.

In support of the IYS agenda, the 2008 JMP report had a special focus on sanitation. For the first time, the 2008 report published figures on open defecation and used the sanitation ladder concept to show different levels of sanitation coverage, ranging from no facility at all (open defecation) to improved sanitation. The report not only equips stakeholders with information on the scale of the sanitation problem, it provides a more nuanced picture of the situation. For example, by showing the increasing numbers of people who have built their own basic latrines and toilets, it highlighted the fact that there is demonstrated demand for sanitation even amongst poor and marginalized populations and that with the right support families can improve their own sanitation status.

The sanitation coverage figures published by the JMP formed the cornerstone of the IYS advocacy effort – providing a solid base for measuring progress to date and the scale of the challenge, but also by prompting debate on programming methodologies.

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<sup>29</sup> *UN-water global annual assessment of sanitation and drinking-water: 2008 pilot report - testing a new reporting approach*. WHO, 2008. [http://www.who.int/water\\_sanitation\\_health/glaas\\_2008\\_pilot\\_finalreport.pdf](http://www.who.int/water_sanitation_health/glaas_2008_pilot_finalreport.pdf)

The 2008 report also provided a more detailed picture of the water supply situation by including data for the first time on the proportion of national populations that have piped drinking water in their own households. This is also helping to improve the design on national programmes as well as providing new targets for those countries that are already on track to meet the MDG water target.

UNICEF also made better use of the JMP dataset in 2008 by producing a series of region-specific “snapshot” publications (see box). These publications were timed to coincide with key regional events, and were key tools for highlighting region-specific issues and suggesting programme reforms.

#### 2008 Regional Snapshot Publications (based on JMP data)

**A Snapshot of Sanitation in Africa:** Prepared for the Second African Conference on Sanitation and Hygiene (AfricaSan-2) held in Durban in February 2008

**A Snapshot of Drinking Water and Sanitation in Africa:** Prepared together with the African Ministers Conference on Water (AMCOW) for the 11th Summit of Heads of State and Government of the African Union held in Addis Ababa in June, 2008

**Shaping a healthy future for Africa’s Children:** A fact sheet prepared for the 11th Summit of Heads of State and Government of the African Union held in Addis Ababa in June, 2008

**A Snapshot of Drinking Water and Sanitation in South Eastern Asia and the Pacific:** Prepared for Water and Sanitation Conference on Water and Sanitation, Melbourne October 2008

**The Drinking water and sanitation situation in Asia and Pacific, 2006:** Prepared for the UNICEF Asia and Pacific Representative meeting, Cha’am, November 2008

**The Drinking water and sanitation situation in the Arab States, 2006:** Prepared with the UN Secretary General’s Advisory Board on Water and Sanitation for its meeting in Riyadh, November 2008

In addition to global reporting of coverage statistics, UNICEF also continued to be heavily involved in the other two pillars of sector monitoring: improving data quality and national-level capacity building for sector monitoring. These inter-related areas were addressed through a variety of initiatives in 2008, including continuing efforts to broaden the range of indicators reported through the JMP mechanism, work on the harmonisation of indicators across various monitoring tools and targeted support to governments and civil society for in-country monitoring.

The EC-supported three-country pilot project in support of national sector monitoring was well-established in 2008, with national Water Supply and Sanitation Monitoring Platforms (WSMPs) working with a variety of national government and non-government stakeholders on improving and refining national sectoral monitoring mechanisms. WSMPs developed and produced a range of data-driven publications including WASH country summary sheets, “who’s who” listings of national sector stakeholders, sector investment profiles and a variety of academic and popular articles on various aspects of water and sanitation sector. In a relatively short time, the WSMPs have gained a high degree of acceptance amongst sectoral stakeholders and have generated new interest in sectoral issues amongst both decision makers and the general public.

In 2008 UNICEF country offices also worked towards improved progress monitoring; working with national and donor partners towards enhanced and more refined mechanisms for measuring the progress of UNICEF-supported programmes. One example is in Bangladesh where UNICEF

developed new external mechanisms for monitoring health impacts, hygiene behaviour changes, and the effectiveness of programme processes. And, as discussed in Section 3.3, several southern and eastern African countries began implementation of third-party progress monitoring systems to monitor the sustainability of the use of improved water and sanitation facilities in focus areas.

## **9 Partnerships**

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UNICEF is fully committed to working collaboratively within the WASH sector in recognition of the fact that MDG water and sanitation targets will only be achieved through the joint efforts of all stakeholders, from the largest donor agency to the smallest grassroots CSO.

An important development in 2008 was a move by several key sector stakeholders – including DFID, DGIS, AMCOW, UNICEF, WHO, WSP, WaterAid and End Water Poverty – to establish the Global Framework for Action (GF4A). In order to increase global access to water and sanitation, GF4A will galvanise political commitment to deliver on national plans by focusing on improved aid-effectiveness and finance, mutual accountability, monitoring, and strong actionable national plans with an implementation strategy. The initiative will focus on strengthening country ownership and capacity to plan and implement priorities, and improve donor harmonization and alignment as a way to help scale-up national programmes. UNICEF is responsible for organizing the first annual High Level Meeting, a key component of the GF4A, which will provide a global and regional multi-stakeholder platform to discuss and agree upon concerted and coordinated actions.

UNICEF works with a wide range of partners and is an active participant in dozens of partnership frameworks (see box, below, for global level examples). It works with partners within all thematic sub-sectors of the WASH programming environment and at all levels: global, regional, national, sub-national, community and school. It works with many types of partners – governments, sister UN agencies, academic institutions, NGOs, funding agencies, private companies amongst others – with many specific purposes, ranging from upstream work on policy reform with political decision makers to direct implementation with contractors in communities. And for over 90 per cent of its expenditures, UNICEF relies on donor partners: including governments, UNICEF national committees, development banks, aid foundations and funds, other UN agencies and the private sector.

UNICEF strives to achieve effectiveness through strategic choice of partners and partnership frameworks. For example, to improve the flexibility of resource allocation in line with defined priorities, UNICEF has developed partnerships with funding agencies that support the overall WASH programme as well as individual projects. The Government of Norway is the main such thematic<sup>30</sup> supporter of the UNICEF WASH programme, but in 2008 the Government of Australia also committed to fund in this way. Such funds are helping UNICEF to channel resources to under-funded priority countries and to high-priority multi-country thematic initiatives.

UNICEF also identifies programming partners strategically. One common example is its work with companies that sell soap and related hygiene products, including Procter and Gamble, Unilever and others. UNICEF's work with these companies is less about the financial resources they provide to the sector and more about tapping into the marketing expertise and distribution networks that these companies bring to the table. Another example is working within the United Nations Development Assistance Framework (UNDAF) and joint programming mechanisms to tap the complementary strengths of UN country teams for broader and more effective engagement in the sector.

Developing partnerships in a strategic way is also the key to leveraging resources for taking WASH programmes to scale, which is of critical importance for achieving MDG targets by 2015. This often means going beyond traditional partnership structures. One example is expanding engagement with

#### **Key Global WASH Collaborative Frameworks**

**UN Water:** mechanism to strengthen co-ordination and coherence amongst all UN bodies working in water and sanitation (UNICEF is a member and chairs the UN Water Task Force on Sanitation).

**Global Framework for Action:** a partnership of donors, developing countries, agencies and NGOs to address global WASH problems such as aid-effectiveness and mutual accountability while ensuring country level processes are adequately supported.

**IASC WASH Cluster:** consisting of 14 NGOs, two Red Cross movements and five UN agencies, working with international bodies and major bilateral donors for the coordination of WASH humanitarian assistance (UNICEF is the lead agency).

**Water Supply and Sanitation Collaborative Council (WSSCC):** a UN-affiliated multi-stakeholder partnership organization with a focus on advocacy and awareness raising (UNICEF is a member of the governing council).

**Water Integrity Network (WIN):** a membership network including Transparency International and a range of sectoral agencies to promote anti-corruption activities primarily in the water sector worldwide.

**Public-Private Partnership for Hand Washing with Soap (PPPHW):** collaboration of USAID, WSP, LSHTM, CDC, Unilever, Procter and Gamble, CARE, UNICEF and other partners for advocacy and capacity building for programming initiatives on handwashing with soap.

**WHO/UNICEF Joint Monitoring Programme (JMP):** the official mechanism of the UN system to monitor global progress towards MDG Target 7c.

**Rural Water Supply Network (RWSN):** a global knowledge network that promotes sound policies and practices in rural water supply (chaired by UNICEF).

**West Africa Water Initiative (WAWI):** a collaborative framework for water and sanitation in selected West African countries, with funding from the Conrad M. Hilton Foundation.

**Global Network on Household Water Treatment and Safe Storage Network (HWTS):** a broad network of sectoral agencies established by WHO to promote HWTS as a key component of water, sanitation and hygiene programmes.

**Guinea Worm Eradication Programme (GWEP):** Established in 1986. including the Carter Center.

<sup>30</sup> Officially within UNICEF thematic funding are those funds are allocated to one of the five MTSP Priority Areas – thus support to WASH is sub-thematic funding.

government – not just working with line ministries responsible for water, sanitation and hygiene – but also with ministries of finance and planning to promote the greater allocation of resources to the sector and to ensure that WASH is prioritized within national planning instruments.

In addition to working with government partners to leverage resources, UNICEF also engages with the World Bank, the African Development Bank (AfDB) and the Asian Development Bank (ADB). In 2008 this engagement led to, for example, the adoption by both the World Bank and AfDB of the UNICEF-promoted “healthy village” approach into their own programmes of support in DR Congo, and the adoption of the UNICEF-supported hand washing with soap and point-of-use water treatment promotion campaign strategy by the World Bank in Nepal. Of course engagement with the development banks (and other partners) works both ways: Ethiopia is a good example of a country where an active partnership with the World Bank has led to design changes in both agencies’ WASH programmes.

SWAp mechanisms for WASH can be highly effective partnership frameworks by providing a platform to promote progressive programming approaches and a means to leverage funds. UNICEF is now involved in active sectoral SWAps, or is helping to develop new SWAps in ten countries. In other countries UNICEF engages with partners through a variety of national coordination mechanisms such as Ethiopia’s Donor Assistance Group for WASH or Pakistan’s newly established Donor Coordination Group co-chaired by DFID and UNICEF.

## **10 UNICEF Expenditure for WASH**

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### **10.1 Expenditure Patterns and Trends**

UNICEF WASH expenditure again increased in 2008, by 9 per cent as compared to 2007, to a total of US \$311 million. This continues a 10-year trend from 1999 in which expenditure has increased by an annual average of 21 per cent. This represents approximately 11 per cent of UNICEF’s total expenditure on all programmes (compared to 10 per cent in 2007).

Ninety per cent of expenditure was in the UNICEF WASH 60 priority countries, in conformance to the strategy of focusing resources on those countries with low water and sanitation coverage, poor progress towards MDG targets and high child mortality rates.

Figure 14: Total UNICEF WASH expenditure, 1990 – 2008

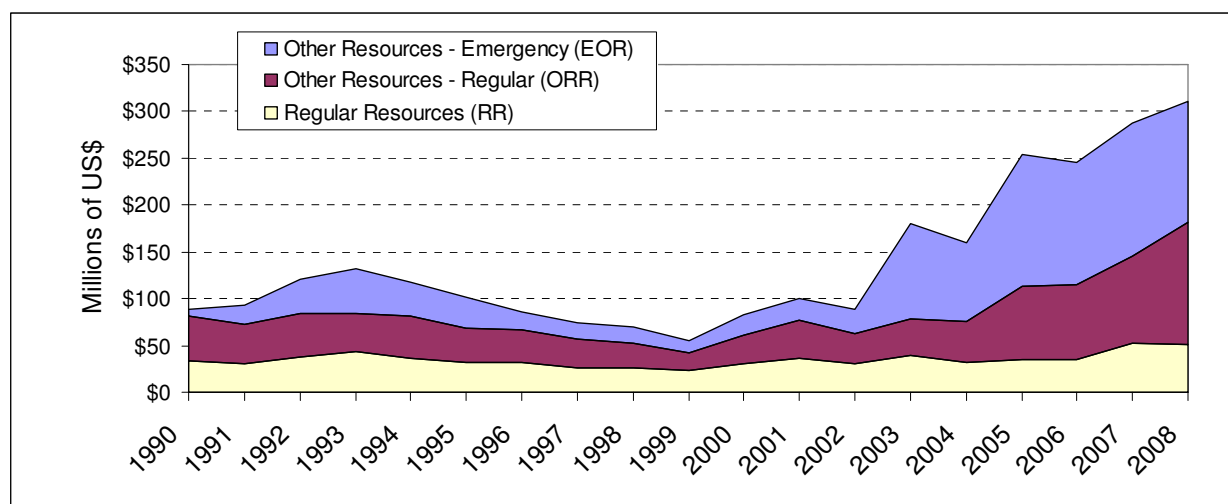


Table 7: Top ten countries by WASH expenditure, 2006, 2007, and 2008 (US\$)

2008		2007		2006	
Sudan	24,462,550	Sudan	31,727,985	Sudan	21,726,389
Nigeria	19,948,390	Pakistan	20,337,448	Pakistan	19,725,868
DR Congo	15,736,166	Sri Lanka	19,155,779	Nigeria	17,109,586
Bangladesh	15,039,981	Nigeria	16,970,543	Iraq	15,994,714
Ethiopia	14,811,777	Ethiopia	15,957,241	Indonesia	14,598,434
India	14,265,242	India	13,170,046	India	13,516,730
Indonesia	12,356,015	Indonesia	10,444,004	Sri Lanka	10,182,050
Somalia	11,629,558	Bangladesh	10,334,314	Ethiopia	8,638,530
Mozambique	11,065,720	DR Congo	9,850,663	DR Congo	7,151,710
Pakistan	10,384,520	Iraq	8,027,467	Somalia	7,053,778

As in past years, a significant proportion of UNICEF expenditure was in a relatively small number of countries with high populations (e.g., India and Bangladesh), in situations of crisis or emergency (e.g., Somalia and Sudan), or both (e.g. Indonesia and DR Congo). The expenditure in the top ten countries (see Table 7) represents 48 per cent of total expenditure, down from 54 per cent in 2007. There is also a decrease in the number of priority countries that are categorized as under-funded, from 28 in both 2006 and 2007 to 24 in 2008. These trends are a sign that the efforts of UNICEF to allocate and raise funds for under-funded

Table 8: Priority countries with less than \$1.5 million in expenditure, 2008

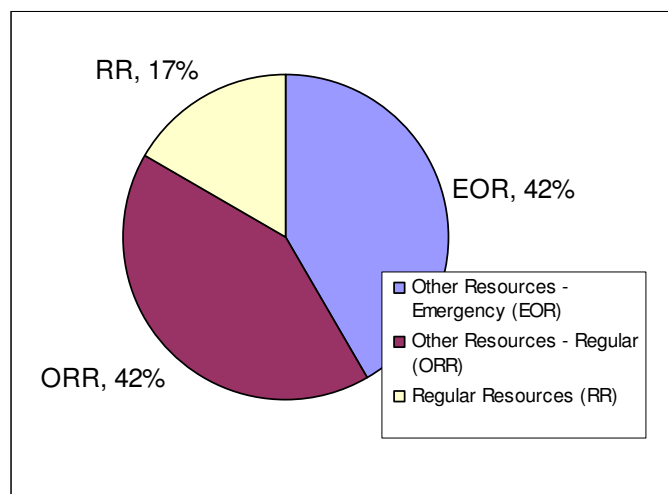
Benin	Lesotho
Brazil	Liberia
Burundi	Mauritania
Cameroon	Morocco
Central African Republic	Papua New Guinea
Colombia	Philippines
Congo	Rwanda
Egypt	Syrian Arab Republic
Guatemala	Tajikistan
Guinea Bissau	Togo
Kazakhstan	Uzbekistan
Lao PDR	Yemen

priority countries (including through the use of WASH thematic funds provided by the Government of Norway) are beginning to be successful. However, the fact that more than a third of priority countries are still under-funded is a continuing cause for concern.

## 10.2 Funding Sources

The majority of funding for UNICEF WASH programmes continues to be from donor partners. In 2008 donors provided US\$ 260 million for WASH programmes, 83 per cent of the total. The remaining funds – US\$ 51 million, 17 per cent of the total – were sourced from UNICEF’s core budget (regular resources). Of funds provided from donor partners, half were earmarked for emergency programmes and half for development programmes. This represents a continuing decline in the emergency-to-development funds ratio (see trend graph in Section 2.1).

Figure 15: Funding sources, 2008



Once again the United Kingdom was UNICEF largest donor partner in 2008, providing a total of US\$ 36.3 million. The top six donors by value remained unchanged since 2007, as shown in Table 9. The United Kingdom was also the largest donor to the regular WASH programme (ORR funds), while the United States of America was the largest donor for emergency interventions (EOR funds), as shown in Table 10.

National committees for UNICEF – “NatComs” – are also an important funding partner for the UNICEF WASH programme, with their impact especially felt in smaller, non-emergency country programmes. In 2008 NatCom funding accounted for 9 per cent of total donated funds and 14 per cent of funds earmarked for regular development programmes.

Table 9: Top ten donors by total WASH expenditure, 2002 to 2008 (descending order by size of total contribution – EOR plus ORR)

2008	2007	2006	2002-2005 (last MTSP period)
United Kingdom	United Kingdom	United Kingdom	United Kingdom
EC	EC	Japan	Japan
Netherlands	Netherlands	EC	USA (USAID + OFDA)
Japan	Japan	USA	EC (including ECHO)
USA	USA	French NatCom	Netherlands
Australia	Australia	Norway	Canada
Canada	Canada	US NatCom	German NatCom
Spain	German NatCom	Netherlands NatCom	Norway
Norway	Norway	Belgian NatCom	Sweden
US NatCom	Sweden	Canada	Australia

Table 10: Top ten donors by total expenditure for UNICEF WASH, 2008, Regular and Emergency

Regular Programmes		Emergency Programmes	
United Kingdom	31,059,309.89	USA	8,821,337
EC	25,254,415.73	Netherlands	7,884,346
Netherlands	17,426,058.71	Japan	7,579,077
Norway	3,798,554.60	United Kingdom	5,258,079
Japan	3,455,019.55	Australia	4,053,250
Canada	3,008,528.18	EC	3,959,916
German NatCom	2,823,587.52	Spain	2,781,923
Australia	2,613,390.18	Canada	2,359,313
Netherlands NatCom	2,493,870.23	Republic of Korea	1,956,416
United States NatCom	2,215,435.55	Denmark	1,791,673

## 11 Challenges for 2009 and Beyond

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### **Building on the gains made through the International Year of Sanitation**

IYS has exceeded expectations in raising awareness and engaging decision makers on sanitation, and has contributed to increased resource outlays and new national planning processes that prioritize sanitation. In 2009, UNICEF will work with partners to consolidate and build on these successes, primarily at the country level, to help trigger significant increases in the rate of progress to achieve the MDG sanitation target.

### **Further expanding the scope and quality of CATS**

In 2008 there was a broad agreement within UNICEF on the programming framework for community approaches to total sanitation (CATS) within the organization, and its further expansion to new country programmes, especially in Africa. In 2009, UNICEF will focus on scaling up within existing CATS countries, further expanding the model into other countries, and assuring the quality of CATS programming through staff capacity building and engagement with key partners.

### **Reviewing UNICEF's role in water supply**

UNICEF will use 2009 to review its role in water supply and (re)define priority areas of intervention to ensure its limited resources are used as effectively as possible. As part of this effort, initiatives related to household water treatment, cost effective boreholes, sustainability and strengthening local procurement will be assessed and scaled up. Water will also continue to be the cornerstone of UNICEF's contribution to the global effort to eradicate guinea worm disease.

### **Further building the capacity of UNICEF for development and emergency programming**

In 2008, UNICEF started a new capacity building programme for staff with a focus on building skills in newer WASH programming strategies in the context of the UNICEF WASH Strategies. In 2009, more staff – and some partners – will participate in training programmes in the areas of CATS, handwashing with soap, household water treatment, environmental programming.

UNICEF will also emphasize training of staff in the area of humanitarian preparedness and response.

### **Mainstreaming handwashing with soap promotion**

UNICEF helped to move the handwashing with soap agenda forward in 2008 through the Global Handwashing Day and other promotional efforts, by working with partners in academia and the private sector to further solidify the evidence base, and by training over 100 staff on programming for HWS. In 2009, these building blocks will be used to scale up handwashing with soap in all priority countries.

### **Increase awareness and scale up programmes for WASH in schools**

Recent data showing that less than half of primary schools in UNICEF priority countries have adequate WASH facilities shows the need for country offices to accelerate WASH-in-Schools programmes, with a focus on raising awareness amongst partners and leveraging resources for increasing the rate of progress to meet the UNICEF goal of reaching all primary schools by 2015.

### **Developing effective humanitarian response capacity in the sector**

UNICEF will continue to work with WASH Cluster partners to improve the effectiveness and timeliness of emergency response. Key challenges in 2009 include the institutionalisation of preparedness planning, strengthening the WASH cluster coordinator roster, and improving information management amongst partners.

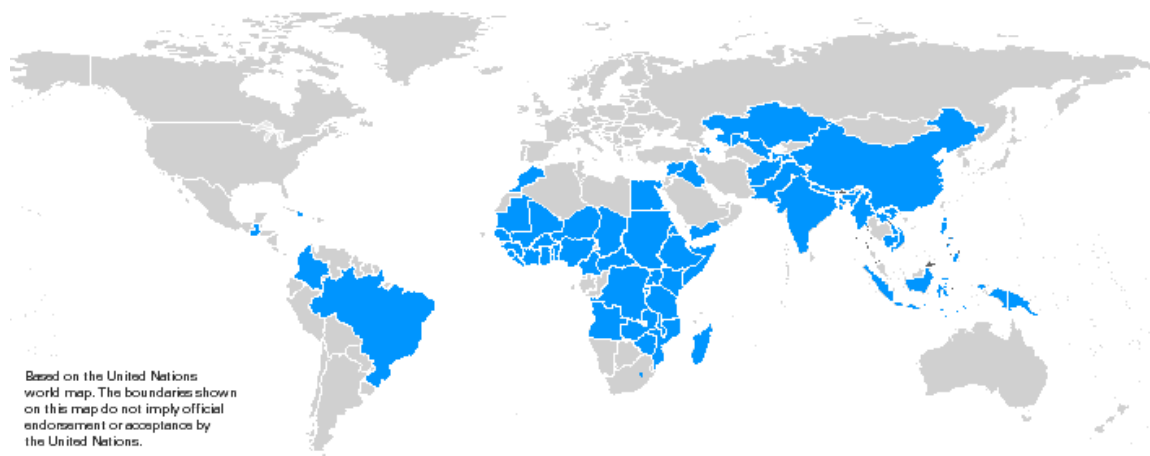
### **Developing partnerships for meeting the MDG targets**

UNICEF prioritizes the development of effective partnership frameworks within the sector as the only way to meet MDG targets, and is involved in several new collaboration initiatives including the still-developing Global Framework for Action. Efforts to develop this and other partnerships will continue to be a priority for 2009 and beyond.

### **Mainstreaming environment and climate change**

UNICEF recognises the importance of environmental issues in limiting sustainability of some of its country programmes. The emerging issue of climate change will require UNICEF to consider the long term effectiveness of its programmes, particularly in the water supply sector. The key challenge in 2009 is to define the approach that UNICEF will adopt in addressing key environmental issues, and in particular adapting to climate change, raising awareness and capacity within country offices, and leveraging resources to ensure the vulnerabilities created by climate change are addressed in sustainable programming.

## Annex: UNICEF WASH Priority Countries



### WASH priority countries by region

CEE/CIS	EAPRO	ESARO	MENA	ROSA	TACRO	WCARO
Azerbaijan	Cambodia	Angola	Egypt	Afghanistan	Brazil	Benin
Kazakhstan	China	Burundi	Iraq	Bangladesh	Colombia	Burkina Faso
Tajikistan	Indonesia	Eritrea	Morocco	India	Guatemala	Cameroon
Uzbekistan	Lao P.D.R.	Ethiopia	Sudan	Nepal	Haiti	Chad
	Myanmar	Kenya	Syrian Arabic Rep.	Pakistan		Central African Rep.
	Papua New Guinea	Lesotho	Yemen			Cote d'Ivoire
	Philippines	Madagascar				D. R. Congo
	Viet Nam	Malawi				Ghana
		Mozambique				Guinea
		Rwanda				Guinea-Bissau
		Somalia				Liberia
		Tanzania				Mali
		Uganda				Mauritania
		Zambia				Niger
		Zimbabwe				Nigeria
						Senegal
						Sierra Leone
						Togo