



Irish Aid

Department of Foreign Affairs
An Roinn Gnóthaí Eachtracha

Water, Sanitation and Hygiene Promotion

Policy Brief

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Introduction

Millennium Development Goal (MDG) 7: Ensure environmental sustainability; Targets 10 & 11: To halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

This policy brief has been produced to guide Ireland's engagement in policy dialogue and programming related to water supply, sanitation and hygiene promotion (WASH). Its intention is to strengthen the quality and relevance of our interventions. It helps inform how we approach economic growth, human and social development and environmental sustainability.

The 2006 White Paper commits Irish Aid to “*support activities **across the programme to increase access to water and sanitation***”. Irish Aid thus promotes an integrated approach to WASH, looking at how increased access can be addressed through channels such as national development plans, advocacy and governance reforms, humanitarian and recovery programmes and climate change adaptation. Country-led processes to deliver on MDG 7 targets related to WASH should be supported alongside civil society efforts to demand leadership and accountability from governments. Irish Aid recognises that innovative partnerships with entrepreneurs, community groups and civil society organisations are central to reaching the MDG 7 targets. Key areas for engagement include governance, private sector regulation, information management and human resource development.

Many important WASH interventions do not involve infrastructure and costly investments. Household level interventions such as hygiene education, potable water and sanitation promotion are highly effective and affordable. Recognition of this by our partners within national development plans and through resource allocations is a priority for Irish Aid investment and dialogue.

Investment in WASH by Irish Aid and other development partners has steadily declined over the past decade. Commitments made by Governments at the 12th and 13th UN Commission on Sustainable Development have resulted in neither increased action nor sanction. Without a concerted international effort to redress this neglect, our development programmes will not adequately deliver results for poor people.

The policy brief aims to help ensure consistency in our policy engagement domestically, in programme countries and internationally. It sets out our key policy messages, our rationale for engagement in this area, our experience to date and the lessons we have learned. The final section includes operational guidance for implementation of Irish Aid policy across the programme.

Irish Aid's Key WASH Policy Messages

Irish Aid's key WASH policy messages are informed by our own experience and best international practice:

Box 1: Irish Aid's Key Policy Messages

- **Equitable access** to sanitation, potable water and safe hygiene are essential for poverty reduction. They are priority life saving interventions in humanitarian responses.
- **Integrated approaches** to human development, emphasising the interdependency of the Millennium Development Goals, are most effective.
- **Poor and marginalised populations** need special attention in policy dialogue and advocacy programmes, our priority is to achieve a minimum level of access for all.
- **Country leadership** and national plans comprise the overarching policy framework for bilateral assistance. These are complemented by civil society engagement to demand **accountability** from governments.
- An international aid architecture increases the **accountability** of governments, donors and agencies for progress towards the water and sanitation targets. Irish Aid will feed into, and will be informed by, the monitoring and accountability framework proposed through Sanitation and Water for All: A Global Framework for Action and will advance its' principles of in policy dialogue with partner governments.
- **Sanitation** plays an important role in protecting the health, personal security and dignity of women and girls.
- Holistic approaches to **water resource management** help to strike a balance between food security and livelihoods, economic growth and environmental sustainability.

Why WASH?

Irish Aid's rationale for investing in WASH programming and policy is based on research findings as well as our own experience:

- Sustained, equitable access to WASH services is critical for progress on child survival, hunger, AIDS and gender equality. Evidence on the **economic and social costs** of neglecting WASH is well documented and compelling¹.
- Access to safe water and sanitation is routinely identified as a priority by poor households. Investment in this area produces **tangible and measurable results** for poor women and men, girls and boys. WASH impacts are relatively easily communicated to the wider public, building public engagement with and support for the programme.
- Poor people worldwide depend on **environmental resources** for their livelihoods. Sustainable management of water resources and protection of the environment from pollution and erosion protects poor households from shocks and crises;
- Safe access to sanitation, water and hygienic practices address practical **gender needs** identified by women and girls. WASH programmes also have the potential to address strategic gender needs such as division of labour in the household and the ownership and control of resources.
- Sanitation is **highly valued within the health profession** – in a 2007 poll carried out by the British Medical Journal² sanitation was voted the greatest medical milestone of the last century and a half. Empirical data³ from WHO

¹ See for example Joint Agency Paper; Poverty, Health and Environment: Placing Environmental Health on Countries' Development Agendas. 2008. <http://www.unpei.org/PDF/Pov-Health-Env-CRA.pdf>

² Boseley, Sarah (2006) "Sanitation rated the greatest medical advance in 150 years", The Guardian, 19/01/2007

³ World Health Organisation. "Safer Water, Better Health: Costs, benefits and sustainability of interventions to promote health. 2008. http://www.who.int/quantifying_ehimpacts/publications/saferwater/en/index.html

confirm sanitation and hygiene behaviour change as particularly cost effective health interventions.

- Access to sanitation and hygienic practices is a priority for people living with **HIV** and AIDS for reasons of health, dignity, privacy and personal security.
- Inequitable access to WASH services and water as a natural resource has triggered civil strife and **conflict** in and between least developed countries, further adding to fragility and constraining growth and development.
- Dialogue on access to basic services such as WASH offers an ideal entry point for issues of **governance** and exclusion.

In spite of this evidence, investment in WASH by Irish Aid and other development partners has steadily declined over the past decade. Commitments made at the 12th and 13th UN Commission on Sustainable Development and the G8 Evian Water Action Plan have been largely unmet and there is no sanction for inaction. Two UN decades dedicated to water and sanitation (1990-2000 and 2005-2015) have had limited success in increasing political action and accelerating access for the poorest.

Progress in Sub Saharan Africa on Millennium Development Goal 7, targets 10 & 11 is estimated to be one hundred years off track. The expectation that the private sector might be able and willing to address demand has not been realised. The long-held belief that the sector was technically demanding, costly and hardware-focussed has been challenged in recent literature. There are no longer plausible excuses for inaction. The biggest barrier to progress remains political will and accountability.

Irish Aid's Engagement in WASH to Date

Irish Aid has employed a mix of modalities and partnerships to deliver on its White Paper commitment to “*support activities across the programme to increase access to water and sanitation*”. In 2008, Irish Aid partners invested 15-20% of funding in water and sanitation (e.g. 15% UNICEF, 18% civil society, 15% emergency & recovery). An internal expenditure tracking exercise in 2008 noted that Ireland's contribution to the water and sanitation sector at 2.7% of bilateral aid (€20m in 2008) is slightly below the DAC average of 3.7% but is in the mid range of the donors analysed. Our approach is illustrated through an overview of our current partnerships:

- Recognising the unique role of government in coordination and planning, funding is committed through **Country Strategy Papers** in countries where we are active in sector dialogue. We have worked jointly with government and other donors either through a sector wide approach as in South Africa or in programmes transitioning towards a programmatic approach as in Lesotho and Zambia.
- In other programme countries (Vietnam, Tanzania, Mozambique, Uganda) we support WASH **indirectly** through the health and education sectors, area based programmes and budget support.
- We complement support to national programmes with projects piloting **innovative partnership models** involving civil society and the private sector.
 - In Tanzania, a pilot project endorsed by the Ministry of Health brings together Medentech as a commercial entity, Population Service International (PSI) as an NGO specialising in social marketing and the Ministry of Health to promote uptake of household water treatment.
 - In Liberia and South Africa, we support consortia of NGOs to pilot alternative technologies and approaches which can be brought to scale.

- Recognising the value of evidence-based policy, we have identified a limited number of applied **research partnerships**. In South Africa, a franchising research project is piloting public-private partnership models for remote areas. Through the UK Institute of Development Studies, we support the roll-out of a proven sanitation methodology characterised by participatory facilitation, community analysis and action, and no hardware subsidy known as Community Led Total Sanitation.
- In **fragile states**, such as Liberia, we apply the OECD DAC Principles for Good International Engagement in Fragile States⁴, funding programmes to fill service delivery gaps while building Government capacity.
- Grant funding is provided to **Civil Society** partners - missionaries, NGOs, women's groups and grassroots organisations - to directly increase access to services. These partners have long recognised WASH as a priority of the poor and are increasingly engaging on issues of advocacy and governance.
- Our **multilateral** partners include WHO, UNICEF and UNHCR. These agencies play an important role in global coordination, research and capacity building. Other global partnerships have supported research and best practice to inform decisions made by donors and partner governments.
- Our **humanitarian** partners recognise WASH as a fundamental life-saving intervention. 15% of funding approved in 2008 addressed WASH programming. Irish Aid supported the IASC⁵ WASH cluster to improve coordination and preparedness. Irish Aid has provided extensive, long-term support for the development of the agreed international minimum

⁴ See principles at http://www.oecd.org/document/46/0,3343,en_2649_33693550_35233262_1_1_1_1,00.html

⁵ The Interagency Standing Committee (IASC) Cluster approach is one pillar of IASC Humanitarian Reform www.humanitarianreform.org

standards⁶ which have been pivotal in improving the quality of WASH interventions in humanitarian response worldwide.

- At a **Global and EU level**, Irish Aid keeps abreast of developments in global aid architecture and emerging best practice and policy and feeds our experience at field level into policy dialogue where possible.

What Lessons have we Learned about WASH?

Poverty Focus

- Improved access to WASH services helps to address the **complex and multi-dimensional** nature of poverty and vulnerability. Cycles of diarrhoea and disease stress livelihoods. Where marginalised populations are excluded from services, costly alternatives absorb funds which poor people could otherwise use for productive activities and savings. Tackling key drivers of poverty and exclusion - gender equality, voice, transparency and accountability - paves the way for sustained access to services.
- Access for the poorest is lowest in geographical areas which are **inaccessible, remote, undocumented or with weak political voice** such as rural or peri-urban areas. Irish Aid has a role in advocating for services in these areas and supporting policies that are responsive to the particular challenges of these vulnerable populations.
- Accurate and up to date **monitoring data** needs to be disaggregated and used to inform resource allocations. Over-reliance on coverage and access data can draw attention away from inequality concerns and the importance of maintenance and sustainability.
- Household investment and **domestic resources** represent a significant proportion of WASH financing. However, expectations that taxation

⁶ See Chapter 2 of the Sphere Project Minimum Standards in Disaster Response at www.sphereproject.org
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revenue and community contributions can sustain services have proven over-ambitious and financial sustainability should be considered carefully.

Role of Government

- While recognising a clear regulatory **role for government** with regard to service coverage, quality, pricing, health and safety, we have learnt that government is not always best placed to deliver services.
- **Participation** by civil society, domestic private sector operators and other stakeholders in the planning, delivery and monitoring of water, sanitation & hygiene services is key to success. Developing a sector wide approach takes time and a sustained effort. Strengthening accountability of governments towards its citizens is a particular role for civil society.
- Adequately **skilled human resources**, particularly in remote areas, are a significant constraint to progress on access to WASH. Human resource plans are frequently overlooked and rarely incorporated into sector plans and national budgets. Such plans prove most effective when they take into account the many consequences of HIV & AIDS, disability and gender norms and recognise the particular skills needed for hygiene promotion, community mobilisation and integrated approaches to human development.
- **Local Authorities** are often accountable for implementation of national programmes and policies. To deliver on their mandate, they need appropriate skills, resources and monitoring capacity including robust and transparent information systems.
- Sustained **dialogue** is needed between the ministries of water, health, education, local government and social welfare in order to address barriers to access and to monitor the full impact of WASH access.

Aid Effectiveness

- Access to WASH is a core responsibility of government towards its citizens. It is a national concern based on contested resources (water) and public goods (sanitary environment). Political will to deliver on commitments and MDG targets is central to ensuring implementation of **comprehensive national plans and strategies led by partner governments**.
- Accountability for progress towards the water and sanitation MDG targets by governments, donors and agencies has been hampered by the absence of a global aid architecture for the sector. The **GF4A** is an emerging initiative to develop the international aid architecture and accountability for progress towards the relevant water supply and sanitation Millennium Development Goals (MDGs). It particularly focuses on thirty severely off-track countries. It aims to increase the effectiveness of the existing commitments and initiatives by promoting greater accountability, better coordination of pro-poor targeting of financing and better reporting of results. Ireland is a partner of the GF4A and will advance the principles of the GF4A in policy dialogue with partner governments. We will be informed by the proposed GF4A monitoring and accountability framework and will ensure that our programming information is accurately captured.
- **Sector-wide approaches** need to extend beyond central government level and beyond one government department. Unless links are made with the responsibilities, resources and capacities of all concerned departments, local authorities and their implementing partners, policy processes will not deliver results for the poor.

Health, Hunger and Crises

- A policy shift is needed towards a right to health, rather than a right to health care. We need to get **back to basics** – it is estimated that up to half the hospital beds in Africa⁷ are occupied by people suffering from water-related diseases. Addressing the cause of well-known disease is clearly a more sustainable investment than increasing hospital capacity.
- A number of areas identified in the 2008 Government of Ireland **Hunger Task Force** Report⁸ – nutrition, gender, political leadership and food production - are closely linked to the WASH agenda. Sanitation and hygienic practices are key to addressing chronic and acute hunger, breaking a vicious cycle of worms, diarrhoea, dehydration and nutrient loss. Protection and sustainable use of environmental and water resources are fundamental to addressing food production and food security.
- In **humanitarian crises**, provision of WASH services is often the primary guarantor of survival. However it is consistently under-funded relative to other sectors such as food aid. It is hoped that application of evidence-based decision-making tools will lead to more balanced support for WASH. Better coordinated and integrated needs assessments should capture needs in relation to all sector responses, including health, WASH and nutrition.
- Consistent use of, and adherence to, **good practice standards** increases the sustainability and impact of WASH investments. Of particular interest are the minimum standards and guidance generated by the Sphere Project⁹.
- **Household level interventions**, such as hand-washing and water treatment, are cost-effective and have a high impact on health outcomes. UNICEF research suggests that maternal hand washing with soap can

⁷ WaterAid & Tearfund, The Human Waste (2002) http://www.wateraid.org/documents/plugin_documents/humanwaste.pdf

⁸ See http://www.irishaid.gov.ie/uploads/hunger_task_force.pdf for the full text of the report – ref pages 17, 20, 33, 37

⁹ Sphere Project Minimum Standards in Disaster Response www.sphereproject.org

reduce neo-natal mortality by 40%. Such interventions rely on targeted social marketing programmes based on an understanding of individual behaviours and incentives for change. **Sanitation** is receiving insufficient attention overall and too often the response takes the form of hardware-driven subsidies. A useful framework for sanitation interventions is the “sanitation ladder¹⁰”, starting with open-defecation free areas, and moving up to household latrines.

Sustainability

- Work funded by Irish Aid on **disaster risk reduction** and climate change adaptation has identified the need for more attention to integrated water resource management and the need for disaster-proofing infrastructure.
- Programming and policy engagement requires sufficient investment in **appropriate research** and dissemination of relevant findings. WASH related research is poorly funded compared to other sectors. As a result, there is surprisingly little information available on what works and why.
- Irish Aid funding has to date insufficiently addressed the **underlying, often political roots** of exclusion from access to WASH. Areas such as advocacy, governance, budget prioritisation and execution, regulation and consumer monitoring are important. They can form an important part of Irish Aid’s strategy, particularly through its civil society partnerships.

¹⁰ See for example IRC <http://www.irc.nl/page/31737> and http://www.wssinfo.org/en/123_definitions2.html

Operational Guidance

The following operational guidance is intended to assist Irish Aid when engaging in policy dialogue and programmes related to water, sanitation and hygiene:

General Guidance for Policy Dialogue and Global Level Engagement

- Irish Aid will continue to employ a **mix of funding modalities**, allowing for sector coordination, aid effectiveness and innovation.
- Promoting **household level interventions** and behaviour change through community health workers and facilitated community-led approaches is a highly effective strategy. Subsidy-driven infrastructure programmes have failed to provide a sustained solution.
- **Sanitation and hygiene** are under-funded and insufficiently prioritised in national plans. Both contribute significantly to child survival. Sanitation is particularly important for health, dignity and personal security. It is a priority for women and girls. We need to understand better people's motivations for wanting to improve their own standards of hygiene and sanitation and frame our response accordingly.
- **Integrated approaches to human development** are most effective. Results on a number of Irish Aid priorities – health, education, HIV care, AIDS treatment, gender equality and hunger – are undermined where there is insufficient progress on water, sanitation and hygiene. Equally, progress in these sectors can contribute to outcomes in water, sanitation and hygiene. Environmental mainstreaming training can help staff and partners to identify opportunities for integrated work.
- Irish Aid recognises **international standards** set by WHO and the Sphere Project. Our partners should acknowledge and work towards these standards.

- Irish Aid adopts **definitions** for safe water and basic sanitation articulated in the Millennium Taskforce Report¹¹.
- Investment in appropriate **research** and dissemination of good practice can encourage evidence-based resource allocation and promote sustainability.
- Ireland's 1996 White Paper on Foreign Policy recognises access to water as an intrinsic human right (section 9.41). Ireland supports the work of the independent expert (IE) appointed by the United Nations Human Rights Council in its ninth session to clarify the scope and implications of recognising the **right to water and sanitation**. We look forward to the conclusions and recommendations arising out of the IE's two year mandate.

If you are Working at Country Level with Government

- National governments are **accountable** to their populations for ensuring access to services. Sector plans and policy frameworks incorporating robust monitoring systems should address (a) linkages to other sectors particularly health and climate change adaptation (b) sanitation and hygiene promotion (c) human resource and skills (d) information management and (e) technical, financial and environmental sustainability.
- Through engagement with national planning and policy development, Irish Aid should encourage an **inclusive, transparent planning process** in which civil society and private sector partners can engage.
- A more efficient **division of labour** between donors means we are not always directly involved with the lead sanitation, water or hygiene ministry in each programme country. We now have the opportunity to engage on sanitation and water through donor partners or through active involvement

¹¹ The 2008 Millennium Taskforce Report on water and sanitation defines *safe drinking water* as water that is safe to drink and available in sufficient quantities for hygienic purposes. The working definition of *basic sanitation* is the lowest-cost option for securing sustainable access to safe, hygienic, and convenient facilities and services for excreta and wastewater disposal that provide privacy and dignity while ensuring a clean and healthful living environment both at home and in the neighbourhood of users. http://www.unmillenniumproject.org/reports/tf_watersanitation.htm.

with the other key Ministries including health, education and local government.

- Context and vulnerability analyses at options stage of **Country Strategy Papers** should systematically include a review of progress towards MDG 7 targets and identify critical risks that inadequate WASH access poses for the proposed Irish Aid programme. Consideration of options related to both direct WASH sector interventions and WASH engagement through other modalities and sectors should be recorded.
- The **health sector** has a number of important roles in improving household access to better hygiene practices and safe water. These roles should be recognised and incorporated into policy dialogue in the health sector to reinforce their importance: (i) health promotion (ii) disease surveillance and (iii) standard setting and regulation of water quality and access, sanitation, nutrition and vector control
- A range of **creative partnerships** is needed to accelerate progress on policy implementation including local and national government, civil society organisations and the private sector. There is a particular role for the small, domestic private sector in reaching under-served areas. An appropriate regulatory and financial environment is key to balancing equity with market efficiency
- The **eThekwini Ministerial Declaration on Sanitation**¹² endorsed by the July 2008 African Union Summit commits African governments to produce a sanitation action plan and invest at least 0.5% of GDP in sanitation. This commitment can be realised through sector plans.
- Many of the **capacity constraints** relating to improved access to WASH are manifest in other sectors and should where possible be addressed through coordinated joint donor programmes of support at national and sub-national level.

¹² See Assembly/AU/Decl.1 (XI) <http://www.africaunion.org/root/au/Conferences/2008/june/summit/summit.htm#> and <http://www.wsp.org/UserFiles/file/eThekwiniAfricaSan.pdf>
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- **Social protection** measures may be appropriate to protect life-saving services such as WASH at times of crisis.

If you are Working with Civil Society Partners

- Irish Aid civil society partners should increasingly address **structural causes of exclusion**, leveraging national accountability through advocacy and participating in WASH policy and planning processes.
- Civil society partners should have a substantive reason for wanting to engage in **parallel programmes** of infrastructure provision outside of national plans. This may be justified if there is an element of applied research, innovation or where government is temporarily unwilling or unable to provide for a population. Civil Society partners should be asked to demonstrate that they have explored all partnership options.
- In **fragile states**, humanitarian situations or where piloting innovation is an explicit objective, it may be appropriate for NGOs to fill service delivery gaps in tandem with capacity building.
- If you are Working on Humanitarian and Recovery Programmes
- Potable water, sanitation and hygienic practices are life saving interventions and should be given **priority** in any emergency or humanitarian response. No other service has as great an impact on the welfare of a population, particularly in the early days of a crisis.
- Even at an early stage, due diligence in relation to social, financial and environmental sustainability cannot be compromised.
- Irish Aid requires partners to abide by recognised **international standards and guidance** such as that documented by the Sphere Project. Implementing partners will be encouraged to operate in line with the IASC

humanitarian reform structures such as the WASH cluster coordination system and agreed protocols.

- Due to the urgency of establishing WASH services in humanitarian responses, **disaster planning** for acute crises should include preparedness planning for WASH resources and disaster proofing of WASH infrastructure and services.
- Once **life-saving needs** are met, water resources can trigger recovery, growth and productivity, rebuilding livelihoods and promoting security.
- **Integrated responses** to food security, nutrition, primary health, and climate change adaptation increase effectiveness and pave the way for early warning systems on epidemics.
- Partner capacities to identify need and donor capacities to **allocate resources** accordingly are key to humanitarian effectiveness.

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