

Sustainable WASH solutions for lasting health change in Africa



The population of SSA doubled during the MDG period (I990–20I5). However, access to improved sanitation facilities increased by only 6% during the same period (World Health Organization WHO/UNICEF Joint Water Supply and Sanitation Monitoring Programme, 20I5).

695 million of the 2.5 billion people across the world who lack access to improved sanitation live in Sub-Saharan Africa (SSA)<sup>[1] [2]</sup>. Some 400 million people in SSA, (2 out of 5 people) lack access to a basic drinking water service<sup>[3]</sup>. The combined impact of these factors is devastating to people's health.

### Diseases

Populations in African countries are ravaged by diseases related to poor water and sanitation including diarrheal diseases, malaria, and other neglected tropical diseases (NTDs) such as intestinal helminthiasis, schistosomiasis. The second leading cause of death among children under five<sup>[4]</sup> are diarrheal diseases which kill more children than AIDS and malaria combined.



Source: Liu L, Oza, S, Hagan D, Perin J, Rudan J et al (2016). Global, regional, and national causes of under-5 mortality in 2000–15: an updated systematic analysis with implications for the Sustainable Development

Worse yet, diarrheal disease inhibits nutrient absorption, impacting both physical and cognitive development, and potentially leading to starvation even if sufficient nutrition is consumed <sup>[5]</sup>. Despite clearly described health and economic benefits of increased investment in WASH, suboptimal efforts have been advanced to accrue these benefits. Diseases of poor sanitation correlate with poverty, accounting for nearly I0% of the global disease burden of disease<sup>[1]</sup>. The World Bank Water and Sanitation Programme (WSP) in its

### WHAT IS WASH?

WASH is the collective term for water, sanitation and hygiene. These are grouped together because of their interdependency and mutual impact. One cannot really be effective without the other.

desk review of the economics of sanitation estimated that eighteen African countries together lose about US\$5.5 Billion every year due to poor sanitation, with annual economic losses between I-2.5% of GDP due to diseases and associated loss of productive time<sup>[6]</sup>.



### **African governments**

Efforts to tackle water and sanitation challenges in Africa face a range of limitations.

Most African governments are financially and technically constrained in effectively improving negative health trends related to lack of adequate WASH provision, especially for rural marginalised communities. For example, it has been shown that African governments' expenditures on sanitation and drinking water ranged from 0.13% to 1.785% of GDP<sup>[7]</sup>. Poor performance of water and sanitation indicators can be traced to lack of political will, evidenced by the low priority afforded to water and sanitation in government budgets. Through the African Ministries Council on Water (AMCOW), the African Union (AU) is promoting cooperation and effective management of Africa's water resources and provision of water supply services among member states. This initiative provides hope for political leadership and commitment towards attainment of Sustainable Development Goal (SDG) 6. The other major limitations are inadequate engagement with communities in decision making, weak management and oversight capacity, and the lack of systems for accountability.



### **Donor funding is shrinking**

Official Development Assistance (ODA) → is reducing (down 0.6% from 2016)<sup>[8]</sup>,

and the number of countries receiving aid is reducing as more countries achieve middle income status. This means there is a need for a paradigm shift in modelling cost effective

B. R. G. F. &. B. J. Prüss-Üstün A., "safer water, better health: Costs, benefits and sustainability of interventions to protect and promote health," World Health Organization, Geneva, 2008.

<sup>&</sup>lt;sup>2</sup> World Health Organisation, "Key Facts from 2015 JMP Report," World Health Organisation, Geneva, 2015.

<sup>&</sup>lt;sup>3</sup> WHO/UNICEF , "Joint Monitoring Programme for Water Supply and Sanitation. "Progress on Sanitation and Drinking Water 2010."" WHO/UNICEF, Geneva, 2010.

<sup>&</sup>lt;sup>4</sup> Liu L, "Global, regional and national cuases of child mortality: an updated systematic analysis for 2010 with time trends since 2000," Lancet, vol. 379, no. 9832, pp. 2151-61, 2012.

 <sup>&</sup>lt;sup>5</sup> R. Guerrant, "Early childhood diarrhea predicts impaired school performance," Pediatric Infectious Disease Journal, vol. 6, no. 25, pp. 5l3-20, 2006.
 <sup>6</sup> WSP, 2012. [Online]. Available: http://web.worldbank.org/WBSITE/EXTERNAL/NEWS/0, contentMDK:23I70309~pagePK:34370~piPK:34424~theSitePK:4607,00.html.

WSP, 2012. [Online]: Available: http://web.worldbank.org/wBSTFE/EXTERNAL/NEWS/0, Contention/K.237/0509~pagerK.5457/0~pirK.54424\*theSitePK.4607,00.
 [Accessed I7 September 2018].

<sup>&</sup>lt;sup>7</sup> World Health Organisation, "Investing in Water and Sanitation: Increasing Acces Reducing Inequalities. GLAAS 2014 findings - Special report for Africa.," World Health Organisaion, Geneva, 2015.

<sup>&</sup>lt;sup>8</sup> "OECD.org," OECD, 2018. [Online]. Available: http://www.oecd.org/development/development-aid-stable-in-2017-with-more-sent-to-poorest-countries.htm. [Accessed I7 September 2018].

implementation approaches, building on new partnerships and strategic investment of the available donor funding.



Climate change and health

Climate change data in SSA predicts intensification of climatic variability. The impacts of climate change on the

ecosystems, people and economies will be felt mainly through declining water resources and droughts. On the other hand the occasional rising sea levels and more frequent and intense extreme weather conditions result in floods, salinization of groundwater, change of vector borne disease, and growing water security concerns burdening an already constrained situation<sup>[9]</sup>. The already poor water and sanitation will worsen, calling for carefully consideration of climate change linked WASH mitigation measures. Amref Health Africa wishes to develop capacity expertise and partnerships on this area. We, as Amref Health Africa, are inspired by Sustainable Development Goal 6 of the United Nations: access to and sustainable management of water and sanitation for all!

<sup>9</sup> B. E. J. Cisneros and T. Oki, "Freshwater resources. Climate change 2014: Impacts, adaptation and vulnerability. Part A: Gobal and Sectoral Aspects. Contribution of Working Group II to the 5th Assessment Report of the IPCC, P 229-269.," 2014.



## **Our WASH vision**

### **WASH** vision

Sustainable WASH solutions for lasting health change in Africa



#### **ENABLERS AND MACRO FOUNDATION**

- Evidence
- Innovation
- Amref's capacity and capabilities
- Amref Health Africa's systems, value and culture

Amref Health Africa's vision for WASH is to have sustainable water, sanitation and hygiene available to all people in Africa. Our goal is to expand access to sustainable WASH services through innovative approaches in line with the aspirations of the SDG 6. The vision has three pillars: **Sustainable WASH services, Enabling environment and Accountability:** 

#### **Pillar one: Sustainable WASH services**

We seek to improve health outcomes and confer economic development to the communities we serve through implementation of sustainable and gender sensitive WASH services. This will be achieved through provision of safe water supplies, with increased attention to the integration of WASH activities with nutrition, reproductive and maternal child health and alternative rites of passage (ARP). Our WASH capacity development schemes will be taken forward in collaboration with Amref International University (AMIU) and the Institute of Capacity Development (ICD). This includes recent innovation such as the development of the first ever sanitation marketing curriculum developed with the focus of training government officials and community health workers across Africa.

We will develop the organization's thinking about how to create and embed climate change resilient WASH programming against disruptive effects of climate change on population health. Special attention will be given to 360° use of water for domestic, institutional supplies (schools & health facilities) as well as small-scale irrigation to support household nutrition improvements. Aware of the contribution that improved WASH services have on the control of neglected tropical diseases, Amref Health Africa will continue to contribute directly towards eradication of neglected tropical diseases through primary prevention actions such as promotion of handwashing, water safety and environmental hygiene.

#### Pillar two: Enabling environment

Amref will continue to work with governments to support coordination mechanisms in various countries. We aim to realize broader political championship in adoption of proven models and practices by governments to facilitate scale. We will advocate for governments to make meaningful investments in WASH by allocating budgets that directly support replication of proven models. We will work closely with governments to strengthen systems that contribute to the delivery of quality programmes such as monitoring and evaluation and effective methods for inclusive scale-up. To influence policy and practice at the regional level, Amref Health Africa will actively participate in Pan African coordination mechanisms such as the African Union (AU) led coordination processes and the African Ministers Council on Water (AMCOW). This will contribute to diffusion of knowledge and models to multiple countries.

### **Pillar three: Accountability**

Amref Health Africa will seek to strengthen mutual accountability with governments, donors, communities and all stakeholders. The accountability efforts will aim at contributing to health transformations through quality WASH services especially for the marginalised communities. We will empower communities to know what they need, where to get services from and the quality they should expect. Amref Health Africa considers accountability as a route for communities and governments to assume full responsibilities for sustainability in WASH projects.

# Our strategy - how to realize our WASH vision

	Strategy
To realize our vision of providing a sustainable WASH solution, we will use <b>principles</b> rooted within our practices:	<ul> <li>PRINCIPLES</li> <li>Equity and inclusion</li> <li>Resilient based development</li> <li>Partnerships and quality of service</li> </ul>
Our strategic aims seek to accelerate progress towards our vision of the future, where we will apply the following <b>approaches</b> in place:	<ul> <li>APPROACHES</li> <li>Innovative financing</li> <li>Policy influence and advocacy</li> <li>Evidence based scale up</li> <li>Direct WASH services delivery</li> <li>Market driven approaches</li> <li>Integrated services</li> </ul>
All these will lead to five key <b>result areas</b> which include:	<ul> <li><b>RESULT AREAS</b></li> <li>I. Advocacy and accountability or improved WASH services</li> <li>2. Improved access to safe water supply</li> <li>3. Increased access to sustainable sanitation</li> <li>4. Integration of WASH onto climate change, nutrition</li> <li>5. Control of neglected tropical diseases</li> </ul>
These results will lead to our <b>vision</b> .	VISION Sustainable WASH solutions for Lasting Health

Sustainable WASH solutions for Lasting Health Change in Africa

# **Positioning WASH within our corporate strategy**

Amref Health Africa global strategy (2018-2022) seeks to develop and deliver sustainable health services and solutions for improved access to and utilization of quality preventive, curative, and restorative health services. The strategy recognizes that "Sub-Saharan Africa is facing a high burden of preventable illnesses related to poor WASH conditions and practices".<sup>[10]</sup> Amref Health Africa wants to change this for good. A key priority for Amref is disease prevention through innovative health services and solutions. As a way to contribute to achieving Universal Health Coverage (UHC), Amref Health Africa, as a leading African health organization, has developed extensive networks with (local) governments and communities towards creating lasting health change for all by 2030.

### **Strategic pillars**

Amref Health Africa has chosen to adopt a systems approach using the following strategic pillars:



• Develop and sustain **human resources for health** (HRH) to catalyze the attainment of universal health coverage in Amref Health Africa target countries.



**2.** Develop and deliver **sustainable health services and solutions** for improved access to and utilization of quality preventive, curative, and restorative health services.



**3.** Contribute to increase **investments in health** to achieve Universal Health Coverage (UHC) by 2030.

Promotion of access to sustainable water, sanitation and hygiene solutions is a well-defined Amref Health Africa programmatic area. It is achievable through ensuring access to safe water and sanitation, hygiene, and testing / implementing appropriate service delivery models.

### **Our WASH experiences**

Amref Health Africa's has been actively implementing WASH programmes in eight African countries.



### **Our focus**

Amref Health Africa builds on a strong track record, including over 30 years of health linked water and sanitation programming working in different contexts including hard to reach areas. As the leading African health organization, Amref Health Africa has developed extensive networks with governments, partners and communities towards creating lasting health change for all by 2030. The WASH interventions focus is on including supporting primary health care efforts through community behaviour change to ensure that hygiene practices are enhanced and supporting communities to access and use improved water and sanitation facilities, hence maximizing on impacts.

Our focus has been on the most marginalised rural communities but the boldness in our approaches has seen a growth of interest in urban water and sanitation programmes. These programmes have demonstrable success in sustainable access and use of sanitation services through context specific financial inclusion.

We have learned valuable lessons and are constantly aligning our approaches to match emerging needs, and opportunities. Increasingly, our programmes are designed based on evidence. We capitalise on scaling up proven models, while leveraging on technology to facilitate implementation. We are committed to ensuring sustainability, scalability and developing cost-effective innovative models and approaches replicable in different contexts.

<sup>&</sup>lt;sup>10</sup> Journal of veterinary research, "The changing landscape of public health in sub-Saharan Africa: Control and prevention of communicable diseases needs rethinking," vol. 81, no. 2, pp. 1–8, 2019.

### What have we learnt?

- Attracting private financing for water and sanitation begins with **demand creation**. Our experience demonstrates that unless there is substantial demand, attracting the much needed private financing for scale would be challenging. Private financiers, including banks, are key partner in public private partnerships and their involvement is needed for sustainable financing. Demand creation requires investment from public funding. Communities must always be engaged for co-financing with the projects to achieve sustainability.
- Equity and inclusion remain a big challenge to universal water and sanitation coverage. Inequalities are exacerbated by social, political and cultural factors that unless addressed, mean that the water and sanitation need of vulnerable segments in communities will remain unmet.
- **Poor accountability and governance** remain the biggest threat to sustainability of WASH projects. Although governance institutions and frameworks are available in many African countries, inadequate financing and lack of overall technical capacity coupled with corruption continue to derail or even reverse gains made through various WASH project.

- **Innovations** are key drivers to sustainable, replicable and scalable WASH programmes in the challenging business environments that we operate in. We need to challenge classical methodical approaches with new ways of thinking, geared towards cost effectiveness. Our key driver is a focus on outcomes rather than the processes in WASH programming. New methods of social technology in building confidence of communities and governments are worth exploring.
- Perceived or **actual quality of service** is a key determinant of Amref's positioning with communities, governments and other stakeholders. Continuous quality improvement across all Amref Health Africa WASH programmes will be a major influence of Amref's competitiveness and attractiveness to potential partners.
- The continuous **involvement of community health workers (CHWs)** is required in promoting sanitation and hygiene to households. CHWs are able to monitor WASH conditions, promote sanitation and hygiene awareness on a long-term basis. Strengthening the local health system is important, as investments in CHWs are low and their turnover is high.

### **Our WASH programming: the future**

To realize our WASH vision we will deepen actions which work well, leverage our learning, while venturing into new and untapped areas.

Our future programming is strongly grounded on the three main pillars of the WASH vision namely: sustainable WASH services, enabling environment and accountability.

Amref Health Africa WASH programming will continue to deliver direct services targeting the following contexts:

 Increased community usage of technologically appropriate improved water supply and sanitation services. This will include facilities that are sensitive to the needs of various segments in the society such as People with Disabilities (PWDs), and women/girls. We will continue to model innovative solutions in the designs of various WASH infrastructure and accelerate efforts to generate evidence that support this innovations.

- 2. Promoting change in hygiene behavior within communities.
- 3. We will continue to **build the capacities of our partners** including governments to effectively implement WASH actions. This will primarily be achieved through strengthening human resource capacities for WASH by providing professionally certified courses, such as our sanitation marketing course for public health and other development professionals. Our capacity building scheme will be expanded to include coaching and mentorship.

Amref Health Africa WASH programming will strive to improve direct services targeting the following contexts:

 Implement inclusive, equitable and integrated WASH programmes to maximize benefits to communities.
 We will collaborate and advocate with non-WASH interventions to include high impact low cost interventions such as hand washing in to their programming.

- 5. Leverage government and other stakeholders efforts for co-investment and co-creation of viable models concepts in WASH. Our aim will be implement to scale tested models of market oriented approaches, such as pre-paid water meters, sanitation marketing, that ultimately generate income with potential to turn into fully fledged social enterprises.
- 6. Strengthen government and communities systems to sustainably deliver WASH services at the level which they are most needed.

Amref Health Africa WASH programming will also venture into new and untapped areas:

- 7. We will capitalize on **generating new evidence** that supports development of new paradigms and replication of best practices. For strategic positioning, we will continue with conduct of operational research linking WASH actions with major health and economic impacts.
- 8. The Amref Health Africa WASH vision appreciates that strong government systems and accountability mechanisms are necessary enablers for long term sustainability of WASH programmes. We will deliberately engage in new ventures that strengthen our positioning.
- 9. The new areas include deepening engagements with private sector, targeted advocacy with governments, appreciating climate change as a key determinant to people's access to WASH services, innovation in the implementation science and focusing on inclusive scale.

	Amref Health Africa WASH strategic pillars		
Reflection on the vision and the previous WASH strategy (2012-2016)	Pillar I SUSTAINABLE WASH SERVICES	Pillar 2 ENABLING ENVIRONMENT	Pillar 3 ACCOUNTABILITY
What do we continue with?	<ul> <li>Improved water supply and sanitation services</li> </ul>	<ul> <li>Build the capacities of our partners</li> </ul>	<ul> <li>Strengthening accountability mechanisms</li> </ul>
What will we do differently?	<ul> <li>Integrate WASH actions into other Amref programmes</li> </ul>	<ul> <li>Strengthen government and communities systems</li> </ul>	<ul> <li>Generating new evidence that supports development of new paradigms and replication of best practices</li> </ul>
What's new?	• Boldly connect climate change with WASH and health	<ul> <li>Leverage engagement with governments and other partners for co- investments and co-creation of WASH interventions</li> </ul>	

# **Our ambitions**

Our goal is to make safe and affordable drinking water, sanitation and hygiene a reality for all by 2030. That's why Amref Health Africa commits to addressing the WASH challenges of the neediest communities equitably. In fulfilling the global sustainable development goal agenda, we stand for gender equality and providing opportunity for everyone to participate in decision-making processes. We commit to the adoption of new innovative thinking focusing on maximization, attracting private funding, financial leverage and equity among other applicable financing instruments, in line with SDG 6.

### Amref Health Africa's ambitions for 2030 are:



Initiate and grow **Public Private Partnerships** (PPPs) that increasingly create sustainable WASH markets.



Stimulate **innovations and working models** that effectively contribute to inclusive scale of WASH services.



Implement fully fledged pan African WASH advocacy agenda that seeks to attract increased governments investment in water and sanitation.



Expand models for **two way integration of WASH into health and non-health programmes** including Nutrition, RMNCH, ARP and venture into health related climate change programmes.

### **OUR GOAL:**

### Make safe and affordable drinking water, hygiene, sanitation a reality for all by 2030.

