The WASH capacity study supported by UNICEF and OXFAM and carried out by Groupe URD is well underway.

TO DATE:
- A steering committee meeting (face to face) and two management meetings have taken place in order to ensure a proper start and steering of the process;
- A full-fledged information management system is in place to collect, record and analyse the relevant information provided by different stakeholders, collected from the internet and from the ALNAP database.
- Several case studies are underway:
  - Desk study: Myanmar, South-Sudan and Yemen.
  - Field studies (with missions done -Mali- or taking place in May -DRC, Bangladesh, CAR), Iraq).
- Key informant interviews (KII): At this stage, KII have taken place with training institutions (BIOFORCE, Red R), agencies (OXFAM, IRC, CARE, NCA, SC, Solidarités, ACF, MSF…), donors (ECHO) and other sectors like health (LSHTM, Global Health cluster). Remaining KII are booked or underway DFID, Swiss aid, etc.

IMPORTANCE OF THE ISSUE

Responding properly (timeliness, quality, quantity, durability) to WASH needs is seen as a critical factor:
- To deal with several public health issues (either in a normal crisis or in an epidemic outbreak).
- To manage population displacements (pull and push factors).
- To prevent acerbation of malnutrition.

Timeliness is a serious problem in disease outbreak response. Some agencies have an average response rate of 8 to 12 weeks from original alert. It corresponds to the pick of the epidemic when WASH interventions have less impact.

Improving quality of WASH work comes up as a consistent, and of course well-known concern. Some suggestions that safe excreta management is the most problematic to get right, with known problems being repeated again and again, with sanitation failing females in particular. A range of suggestions for how this can be improved are being explored, but there is no widely agreed and straightforward way to address this.

While there is a clear difference between responding to urgent, massive and complex WASH needs and responding to WASH needs in a protracted crisis with displacements, there are also some key commonalities:

Water remains an essential need. Quality of the water, as well as sanitation and hygiene are key factors of maintaining public health under control (prevention of water-borne diseases and vector borne diseases).
EMERGING ISSUES

As expected from earlier pieces of work (MSF “Where is everybody”, MSF “Emergency Gap” issue on wash), several issues are emerging as key factors:

Security and access remain two of the top constraints, although progresses have been made by working more and more with and through local actors. Yet in these contexts, quality of the interventions is hard to monitor.

Managing security for the teams and equipment is critical. This is an area requiring capacity for negotiation and to establish alliances with local actors. Donor procedures are often a hindrance (required bidding procedures). Engagement of military forces in the WASH sector is more and more frequent as part of civil-military operations and has to be scrutinized carefully.

In many areas, the presence of international aid actors is resented by warring parties and is becoming a serious risk. Working with local organizations and private water actors (private drilling companies, etc.) is often the only option. Maintaining quality and respecting to humanitarian principles are seen as challenging, but not impossible in these situations.

Access issues, due to national Government restrictions, mean that the business as usual surge model can’t be the mainstay of the WASH system. It means in country actors must strengthen ways to improve in country

Increased bureaucratization of the sector, including to access visas and travel authorisations is becoming a serious hindrance in the capacity to deploy teams in the field. In addition, some agencies have too many levels of decision-making: up to 15 people from field level to headquarter involved in triggering the respond.

Funding might not always come on time for a timely response. As there is already a certain donor fatigue as to funding wash activities in long protracted crisis such as DRC or Ukraine, donors are becoming reluctant to finance extremely expensive and not sustainable water trucking operations which are sometimes the only short term option. They urge emergency actors to find alternative and less costly means. In addition, WASH is often the first one to suffer from budget cut during transition from emergency phase to reconstruction phase (not seen as a much of a necessity).

Cash and Voucher Assistance is shaking traditional humanitarian aid model. Some actors observe a kind of “hold” on investing further in the Cluster/sectorial model while we are investing CVA as THE solution. We will investigate if other sectors make the same observations.

The agency mandate categorisation as set out in the inception report appears useful and can be built upon to acknowledge where agencies are already in country/location or where crisis occur out of (their normal programme) area. Other factors are useful to consider. This may help agencies think through their capacity to respond and so enable better prediction of overall WASH sector surge potential for given crisis.

Yet other issues have emerged from the first series of interviews:

Multidimensional approach, joint planning between health and WASH and multi-sector coordination are still too weak, in particular in acute emergency.

There is emerging thinking to suggest WASH agencies could benefit from thinking more clearly about 3 modes of response; a) outbreak, b) prevention/public health service delivery, c) development/ service facilitation. This could also enable much clearer prioritisation with other sectors according to which is the dominant mode of response. The Global Task Force for Cholera Control have outlined such a categorisation.

It becomes more and more difficult to ensure proper management of emergency issues and to respond fast to acute WASH needs when all the international focus is on emergency-development” and “localisation” issues.
Sanitation appears as the poor relative of WASH in emergency for many agencies. Several researches were carried out to find adapted technologies but no satisfying options were found. Therefore, many remain in their “comfort zone”: water.

WASH in urban contexts requires technical and institutional know-how which are not part of the classical “tool box” of humanitarian WASH system. Yet, from the early operations during the Bosnian War in the 90s to the most recent operations in Syria and Iraq, there has been considerable progress. One of the key factors is that in these situations, especially when they take place in middle income countries, WASH agencies have to take on board other expertise, such as electromechanics, specialists of the private sector or in managing municipal water services.

The need to work with local private actors of the water sector when they are the only ones able to function in difficult areas requires some analysis and protocols that exist in the development sector but not in the emergency one.

Dealing with massive WASH needs in dramatically destroyed urban settings in middle income countries is a new challenge as the traditional WASH know-how is often not appropriate.

Gaps in knowledge about water resources create tensions between getting the appropriate quantity of water fast and exhausting limited resources (a problem in Sahel, but also in Middle East).

**QUALITY SERVICE DELIVERY IN COMPLEX SITUATIONS**

Ensuring proper access to WASH services by the affected populations is unanimously seen as critical but not everyone understands that it requires a holistic approach and a large range of interventions (software and hardware). Logistics, Health and WASH staff don’t always speak the same language in that regard. Therefore, WASH programs are cut to a bare minimum, complementary aspects (software component, corps disposal, quality monitoring...) are cut from budgets because they are the part people don’t understand, and are too costly and/or staff intensive.

Monitoring “water quality” is seen by everyone as a difficult issue but not always the priority for donors reporting requirement, meaning that resources are not always sufficient to do it properly. It thus gets a low priority. In addition, when problems occur, agencies are nervous to call each other out on poor work.

The difficulty of wash actors to design and implement activities which are outside their comfort zone remains significant. The same tool box of solutions is being replicated crisis after crisis without real analysis of the context specificities. This is mainly explained by the lack of technical/engineering expertise (which is usually found in the private sector) within the humanitarian sector and the difficulty of wash actors to recruit this type of expertise.

Research team:

- François Grunewald
- Richard Luff
- Samantha Brangeon
- Elisa Dehove

To contact us: fgrunewald@urd.org

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